

Safeguarding Policy

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Introduction

WEST Youth Zone (registered charity number 1125893, registered company 10381611) is a youth centre based in White City in the London Borough of Hammersmith & Fulham. We are part of the OnSide network of Youth Zones. We provide 'somewhere to go, something to do and someone to talk to' through a universal youth provision throughout the year, as well as targeted projects from time to time. Most of our work is based at the centre itself but we also do outreach work, engage with local schools and communities and run trips and

residential. We work with young people aged 8-19 and up to 25 for those with additional needs. As below, this policy applies to all of these groups, although there are some differences in how we work with those under 18 (children) and those over 18 (adults at risk).

This policy is applicable to all employees, volunteers and trustees, with some variation. The full policy and appendix 1 must be read, understood and implemented (when appropriate) by all employees, volunteers and trustees. For those employees who are involved in direct delivery to or supervision of young people, all the appendices must be read, understood and implemented, as and when appropriate. Clarification can be provided by line managers or the WEST Designated Safeguarding Leads if required.

1. Purpose

The purpose of this policy is to ensure that all staff, volunteers, trustees, and external agencies, including partners delivering on behalf of WEST, are aware of their legal and personal responsibilities to ensure the safeguarding and welfare of children, young people and adults at risk that they may come into contact with, and to ensure that everyone knows what to do should they have a concern. WEST is committed to safeguarding and promoting the welfare of children, young people, and adults at risk by implementing:

- Safeguarding procedures
- Safer recruitment and vetting of Staff, Volunteer and Trustees policies
- A code of conduct
- Training
- Support for staff, volunteers and trustees
- Safeguarding expectations for external agencies and partners delivering on behalf of WEST.

WEST recognises that we all have a legal responsibility to take all reasonable actions to ensure that the risk of harm to the welfare of children and adults at risk is minimised and a duty of care is always exercised towards them.

In this policy a child is defined as: *“Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlements to services or protection”* (Working Together to Safeguard Children, 2018).

Safeguarding and promoting the welfare of children defined for the purposes of this policy as:

- Protecting children from maltreatment.
- Preventing impairment of children's mental and physical health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

In this policy an adult at risk is defined as a member aged 18 and over who, for any reason, may be unable to take care of themselves or protect themselves against significant harm or exploitation. Safeguarding adults at risk involves reducing or preventing the risk of significant harm from neglect or abuse, while also supporting people to maintain control of their own lives.

Safeguarding and promoting the welfare of adults is defined for the purposes of this

policy as:

- Ensuring they can live in safety, free from abuse and neglect.
- Empowering them by encouraging them to make their own decisions and provide informed consent.
- Preventing the risk of abuse or neglect and stop it from occurring.
- Promoting their wellbeing and take their views, wishes, feelings and beliefs into account.

This policy outlines how to recognise the signs and indicators of possible abuse to ensure that staff, volunteers and trustees recognise the significance of what they are observing, and the procedures that they need to follow if they have a concern.

This policy is supplemented by a number of appendices, providing more details for employees, trustees and volunteers who work directly with children, young people and adults at risk.

2. Scope

This policy applies to the Trustee Board, all employees (permanent, temporary and freelance), volunteers, and partner agencies working on behalf of WEST. Put simply, safeguarding children and adults at risk is everyone's business and priority.

All employees, trustees, volunteers and partner agencies are expected to familiarise themselves with the policy and appendix 1. Those employees and volunteers working directly with young people must also read all the additional appendices. If clarity is required, employees and volunteers should speak to their line manager or the WEST Designated Safeguarding Lead Rory Britton, and trustees to the Designated Trustee for Safeguarding, Rob Lehmann.

3. Terms of Reference and Legal Framework

The Children Act 1989 and 2004 make it clear that people who work with children have the responsibility to keep them safe. This is supported by the United Nations Convention on the Rights of the Child (to which the UK is a signatory) which sets out the rights of children to be free from abuse. The document 'Working Together to Safeguard Children' (2018) sets out the arrangements for how all organisations must work together to safeguard and promote the welfare of children.

"Safeguarding is everybody's responsibility. Everyone who comes into contact with children and their families has a role to play in safeguarding children, child protection should take priority over all other work" (Working Together to Safeguard Children, 2023).

<https://www.gov.uk/government/publications/working-together-to-safeguard-children>

Adult protection is part of safeguarding and refers to: *"An adult at risk of abuse or neglect is defined as someone who has needs for care and support, who is experiencing, or at risk of, abuse or neglect and as a result of their care needs - is unable to protect themselves"* (CareAct 2014).

This does not only refer to adults who lack capacity. Adults with full capacity can still be considered at risk if they are unable to take care of themselves or protect themselves from significant harm.

The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect.
<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

4. Application

This policy applies to all employees, trustees, volunteers and delivery partners. There are a number of elements to the policy:

1. Ensuring this safeguarding policy is adhered to at all times when employees, trustees and volunteers are working with children, young people and adults at risk, particularly in settings away from the Youth Zone, both face-to-face and virtual.
2. Ensuring safer recruitment practice by checking the suitability of all our staff and volunteers to work with children and adults at risk prior to appointment.
3. Raising awareness of safeguarding issues amongst all staff, trustees and volunteers, including what to do if they have concerns.
4. Implementing procedures for identifying and reporting cases, or suspected cases, of abuse.
5. Developing effective links with relevant agencies and co-operating as required with their enquiries regarding safeguarding matters, including attendance at safeguarding case conferences and core group meetings.
6. Establishing and maintaining a safe environment in which young people and adults at risk feel secure and are encouraged to talk freely about anything that concerns them.
7. Ensuring young people and adults at risk know there are adults they can approach if they are worried about anything.
8. Supporting young people and adults at risk who have been abused or may be at risk of harm in accordance with any agreed safeguarding plan.
9. Ensuring we respond appropriately to any concern or allegation about an employee, volunteer or trustee.
10. Ensuring employees, trustees and volunteers follow accepted "safe practice" principles when working with young people

5. Recognising Abuse

Children

Abuse is *"a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children"* (Working Together to Safeguard Children, July 2018).

In relation to child protection there are four kinds of abuse defined in Working Together to Safeguard Children as follows:

1. Physical abuse
2. Emotional abuse
3. Neglect
4. Sexual abuse

There are also a number of secondary categories of abuse such as Modern Slavery, Criminal and Sexual Exploitation and Domestic Violence (witnessing)

Adults at Risk

“Protecting an adult’s right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. This must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.” (Care Act 2014).

In relation to adult protection there are ten types of abuse defined in the Care and Support statutory guidance as follows:

1. Physical Abuse
2. Domestic violence or abuse
3. Sexual abuse
4. Psychological or emotional
5. Financial or material
6. Modern Slavery
7. Discriminatory
8. Organisational and/or institutional abuse
9. Neglect or act of omission
10. Self-neglect

Further details can be found in Appendix 3, which must be read by employees working directly with young people. Please contact the WEST Designated Safeguarding Leads or your line manager if you are unsure.

6. What to do if you suspect abuse

A young person or adult at risk may choose to disclose concerning information to any employee, trustee or volunteer, or may be observed carrying out concerning behaviour that raises concerns around possible abuse. It is not the duty of employees, trustee or volunteers to investigate the issue themselves, however it is their responsibility to gather as much information as possible. Where you suspect a child or adult at risk is being abused or there is potential for harm, you should discuss your concerns with the WEST Designated Safeguarding Leads or any of the Senior Safeguarding Practitioners who will decide what action should be taken.

If there is a real concern the Designated Safeguarding Lead or a Senior Safeguarding Practitioner will contact Children’s Services/Adult services and/or the Police. They will need your support in making the referral to ensure the details are recorded correctly.

If you are not sure or have any concerns, speak to the WEST Designated Safeguarding Leads or any of the Senior Safeguarding Practitioners. Remember that is what they are there for, to deal with any concerns and offer advice and support.

We are committed to the following general principle: if in doubt, tell someone else. Concerns about confidentiality should never override concerns about a young person or adult at risk.

7. What to do if a young person tells you about abuse

If a young person or adult at risk makes a disclosure about abuse or you suspect they may be about to do so, it is imperative they understand you cannot keep this 'secret' but that you have a duty to report it to other professionals who will help keep them safe. Be honest and open about who you will speak to and why. You should find a quiet place to talk where they feel comfortable. Ensure you give them the time they need to talk but be aware they will need to give a full account to Children's/Adult Services so avoid subjecting them to lengthy or multiple 'interviews' as it can often confuse and jeopardise evidence. Try to maintain eye contact at an equal level or lower than theirs.

You must:

- find a quiet place to talk
- listen, but do not press for information
- stay calm and be reassuring
- believe what you are being told
- listen to the person; if you are shocked by what is being said, try not to show it
- not ask the person to remove or adjust their clothing to observe injuries (injuries must be recorded on a Cause for Concern Form, Appendix 1) but it is acceptable to observe injuries such as bruises
- not question the person in a way that will introduce new words, phrases or concepts into their minds (leading questions)
- not challenge, confront or criticise the person's information, even if it seems unlikely or if there are obvious errors; they may be unable to give accurate timescales or dates
- (if a disclosure is made) allow the pace to be dictated by the person without them being pressed for detail by being asked such questions as 'what did they do next?' or 'where were you when this happened?'; the employee's / volunteer's role is to listen, not to investigate
- use open questions
- acknowledge how hard it was for the person to tell you this
- not criticise the perpetrator, this may be someone they love
- not promise confidentiality; reassure the person that they have done the right thing, explain who you will have to tell and why; it is important that you do not make promises that you cannot keep

Remember is it a huge step for a person to make a disclosure

Inform the relevant safeguarding lead and/or manager immediately. If the situation is an emergency and neither the Designated Safeguarding Leads nor any of the Senior Safeguarding Practitioners are available, you should telephone Children's Services/Adult Services directly or, if out of hours, the Emergency Duty Social Work team or Police Child Protection Team in the area in which you received the disclosure (please refer to appendix 2).

8. Recording Information

Write some notes immediately afterwards (be aware that notetaking during a disclosure may inhibit that disclosure, making it harder for the person to be open and honest); record the date, time, place and context of the disclosure or concern, recording facts and not assumptions or interpretation. Any notes must be added to a 'Cause for Concern' form as soon as practicably possible. Do not be afraid to interrupt

meetings if you need to speak to someone. Note any non-verbal behaviour and ensure that the language used by the person (do not translate into correct terminology) is recorded.

9. What to do if an allegation of abuse is made involving an employee, trustee or volunteer

If a person makes an allegation of abuse against a WEST employee, volunteer or trustee, you should report this immediately to the Designated Safeguarding Leads. If the allegation is against the Designated Safeguarding Leads, you should report this immediately to the Chief Executive.

You should assure the person who made the allegation that this is a serious matter and you will follow it up with the Designated Safeguarding Leads (or if applicable the Chief Executive). You should update the person as to what action has been taken, though if the allegation is by a member of the Youth Zone, you should exercise caution about giving too in-depth an update.

The Designated Safeguarding Leads or Chief Executive (if applicable) will make a referral directly to the Local Authority Designated Officer (LADO) or to adult services, who will advise on the most appropriate course of action. This referral will usually be made immediately but must be made within 24 hours. Please see appendix 2: Local safeguarding information and contacts.

10. Informing parents

The Designated Safeguarding Leads will inform the person's family/carers that an incident has taken place and/or a referral is being made unless: that would either place the person at greater risk, place the member of staff or public at risk or impede the investigation. For example, if sexual abuse or fabricated illness is suspected, or multiple abuse is suspected. In these cases, the local authority safeguarding partnership will decide whether or not to inform the parents/carers. An inability to inform the parents/carers should not delay or prevent a referral being made.

11. Designated Leads for Safeguarding, Senior Safeguarding Practitioners and OnSide

The WEST Designated Safeguarding Lead is: Rory Britton (07940294499 / rory.britton@westyouthzone.org). Rob Lehmann is the Trustee Lead responsible for Safeguarding on the WEST Board (roblehmann@outlook.com) Any employee, trustee or volunteer who is concerned about a young person or adult at risk should tell the appropriate Designated Safeguarding Lead immediately.

The Designated Safeguarding Leads have a responsibility to:

- liaise with the delivery partners that the youngperson/adult at risk concerned is connected to, the Children and Family Services/Adult Services, Police or other agencies in the geographical area where the young person lives;
- act as the contact person within WEST, providing advice and support, and ensuring that all staff (including temporary / freelance staff and volunteers) are aware of their role;
- co-ordinate action within WEST on safeguarding issues;
- discuss individual cases with staff on a "need to know basis" to protect the young person/adult at risk's right to confidentiality;
- represent WEST at safeguarding meetings and be a member of a 'Core Group' or strategy meeting if required;

- ensure staff are familiar with this policy and any related procedure;
- arrange safeguarding training for **all** staff and volunteers at least annually (and for new staff commencing work); and
- ensure that the Designated Safeguarding Leads and Senior Safeguarding Practitioners receive update training at least every two years.

Senior Safeguarding Practitioners are other members of WEST staff who have attended Designated Safeguarding Lead-level training but are not themselves the Designated Safeguarding Leads for the organisation. Their role is to promote a vigilant culture around safeguarding within WEST and to provide advice and support for other staff/volunteers if the Designated Safeguarding Leads are not immediately available. WEST policy requires that every session that is run should have at least one Senior Safeguarding Practitioner (or one of the Designated Safeguarding Leads) on session throughout. The Chief Executive should also be a Senior Safeguarding Practitioner. A full list of current Senior Safeguarding Practitioners and their contact details, as well as the Designated Safeguarding Leads, should be prominently displayed throughout the WEST building.

As a member of the OnSide network, WEST also has responsibilities under the OnSide Safeguarding Policy, as part of the Network Agreement. The key safeguarding professional at OnSide, from whom advice, training and support can be requested at any time and to whom any major safeguarding incidents (as defined by the OnSide Escalation Policy) should be reported, is Cath Taylor (07704 005036 / cath.taylor@onsideyouthzones.org).

12. Confidentiality of records

Our young people, adults at risk and their parents/carers have the right to expect all staff to deal sensitively and sympathetically with their situation. It is important that information is only available to those who need to know it. Parents/carers and, where appropriate, the young person/adult at risk should be told that their right to confidentiality may be breached if information comes to light suggesting possible harm to other people. Safeguarding issues relating to individual cases must not be subject to open discussion in the office or elsewhere. Should any information or correspondence related to specific safeguarding issues need to be sent via email or any other electronic means, the Designated Safeguarding Leads must be contacted prior to transmission. As a minimum, any attached documents must be password protected for confidentiality of sensitive information.

Employees, trustees and volunteers should also remember not to promise to young people/adults at risk to keep 'secrets'.

13. Recruitment, selection, induction and training of employees and volunteers

Given the involvement of young people/adults at risk in the work of WEST, employees, volunteers and trustees will have varying degrees of contact with them, and therefore, proper consideration needs to be given to the recruitment, selection, induction and training of employees, volunteers and trustees.

In particular, WEST will ensure that selection panels are appropriately trained, that those involved in recruitment always follow up gaps in previous employment, that references from the current or most recent employer are required and must, in any case, cover the last three years, and that for all posts, paid and voluntary, the appropriate decision is

made on the type of Disclosure and Barring Service (DBS) check to be carried out, based on the guidelines below.

1. Enhanced DBS check*: all employees, volunteers, external partners or other visitors who will have unsupervised access to young people or adults at risk, plus any others who will have supervised access on more than four occasions in any twelve month period
2. No DBS check: visitors to the Youth Zone (including contractors) who will not have unsupervised access to young people

**An enhanced DBS check with barred lists will show the same as an enhanced check plus whether the applicant is on the list of people barred from doing the role.*

If someone is in the Youth Zone when young people/adults at risk are also on site and they do not have a DBS check, they should be supervised by a member of staff/volunteer who does have a DBS check at all times.

The DBS check should be carried out by WEST or OnSide. DBS checks carried out by other organisations will not be accepted except in the case of authorised carers of young people/adults at risk, or those working for official partners of WEST who have signed a formal partnership agreement.

A central record is kept of all DBS checks carried out, including the disclosure number, date, type of DBS check, outcome of the disclosure and renewal date. Any previous offences disclosed will be risk assessed (Employing Staff with Convictions Policy), commensurate with the position.

All employees and volunteers will be required at induction to complete WEST's internal contextual safeguarding training designed in (developed with OnSide), as well as reading, understanding and implementing this policy. **No employee/volunteer should have unsupervised access to young people before they have successfully completed this training and signed to confirm that they have read this policy.**

Additional training will also be required for some other roles:

1. Local safeguarding course for Designated Safeguarding Leads for the WEST Designated Safeguarding Leads and Senior Safeguarding Practitioners;
2. Roles and Responsibilities of the Designated Person and other training, as appropriate, for the WEST Trustee with responsibility for Safeguarding.

WEST's Health and Safety Policy also requires training relevant to safeguarding as well, especially with regards to First Aid. In particular, no session at WEST is to begin if there is not a First Aid-trained person on site, and if during the session there at any time ends up being nobody with First Aid training, the session will swiftly and calmly be brought to a close. Please refer to that policy for more details.

14. Code of Conduct

WEST staff and volunteers will follow the same principles we ask young people to follow:

RESPECT YOURSELVES

**RESPECT YOUR BUILDING
RESPECT YOUR STAFF
RESPECT EACH OTHER**

Staff, volunteers and trustees at OnSide have a commitment to:

- **Be a positive role model for young people/adults at risk**, setting a positive example at all times.
- **Be positive about and around young people/adults at risk**, use positive language, develop self-esteem, positive relationships and self-discipline.
- **promote good behaviour, responsibility and honesty**, be consistent in responding to inappropriate behaviour and encourage, reinforce and reward good behaviour and praise as often as possible.
- **Treat young people/adults at risk with respect and dignity**, valuing each individual and avoiding negative discrimination.
- **Respect and promote young people's/adults at risk's rights to make up their own decisions and choices**, unless the welfare or legitimate interests of themselves or others are seriously threatened.
- **Promote and ensure the welfare and safety of young people/adults at risk**, while permitting them to learn through undertaking challenging educational activities.
- **Contribute towards the promotion of social justice** for young people/adults at risk and in society generally, through encouraging respect for difference and diversity, and challenging discrimination.
- **Recognise the boundaries between personal and professional life** and be aware of the need to balance a caring and supportive relationship with young people/adults at risk with appropriate professional distance.
- **Recognise the need to be accountable to young people/adults at risk**, their parents or guardians, carers, colleagues, funders, managers and wider society with a relevant interest in the work, and that these accountabilities may be in conflict.
- Develop and maintain the required skills and competence to do the job.

Staff and others must:

- Report any safeguarding concerns or causes for concern with the Designated Safeguarding Lead/Session Lead (who will ordinarily be a Senior Safeguarding Practitioner).

Staff and others must not:

- Develop physical, sexual or emotional relationships with young people/adults at risk who are, have been or could be associated with their work.
- Develop friendships, outside of working time, with young people/adults at risk with whom they are working.
- Use language that is inappropriate or could be misconstrued by young people/adults at risk.
- Behave physically in a manner which could be misconstrued by young people/adults at risk, for example, should not hug a young person/adult at risk unless in extenuating circumstances and if this does happen it needs to be reported to your line manager immediately who will make a record of the incident.
- Behave in a manner that is disrespectful of the physical or emotional privacy of young people/adults at risk.
- Condone, or participate in, behaviour exhibited by young people/adults at risk that is illegal, unwise from a safety point of view, or which is discriminatory or oppressive

to others.

Smoking and vaping

- Staff and others who smoke or vape must do so in designated areas only.
- Staff and others must not smoke or vape in front of young of people/adults at risk.
- Staff and others must not promote smoking/vaping to young people/adults at risk.
- Smoking/vaping can only take place in designated breaks and not in work time; the timing of breaks must not disrupt the flow or delivery of an event or compromise the supervision of young people/adults at risk.

We ask our young people/adults at risk to respect the staff and others, and respect each other

- If we witness behaviour we consider to be unacceptable we will challenge it in a positive way on an individual basis with the young person/adult at risk in question.
- Where necessary and where we feel appropriate, we may involve parents/carers.

We operate a zero-tolerance policy on bullying, drugs and alcohol.

15. The Role of the Board

The Trustee responsible for safeguarding must be notified by the Designated Safeguarding Leads or a Senior Safeguarding Practitioner (usually the Chief Executive) of any safeguarding issues involving WEST staff, volunteers or visitors. A report will be received at each Board Meeting detailing

- any changes in the Safeguarding policy or procedures;
- all safeguarding training undertaken; and
- the number of incidents (without details or names) and the level to which they were escalated.

APPENDICES

Appendix 1: Cause for Concern Form

Please speak to the Session Lead, Designated Safeguarding Leads or a Senior Safeguarding Practitioner as soon as possible following the incident/concern and then complete the Cause for Concern form (see example below) online. The form can be accessed here: https://www.tfaforms.com/4885779?tfa_63=tfa_956

Description of Concern

Please provide a factual overview of the incident/concern.

- Please give a full, but to the point, description of what happened or what you are concerned/worried about.

- Please only include facts, not opinions.
- Recording should be impartial, so write down what you see, what you heard and not what you feel.
- Use bullet points - Use clear and straight forward language - make your report factually accurate, i.e. not opinion (any interpretation or assumptions should be clearly recorded as such).
- Remember to record in chronological order (times and dates)

Once you have submitted the form you will receive an email with a reference number confirming that your form has been successfully submitted. If you do not receive an email, please inform the Designated Safeguarding Leads that you have submitted a Cause for Concern form but have not received an email notification.

Cause for Concern

Do you consider this young person to be at immediate risk of harm? *

Yes

No

Please describe in one line what you are concerned about: *

Young person:

First name:

Last name:

Date of birth:

Details:

Date of incident:

Time of incident:

Youth Zone session:

Description of concern*

Please provide an overview of the incident/concern, providing as much factual detail as possible.

For example:

- Any physical, behavioural, or other indicators e.g., bruises, behaviour changes, periods of absence

- Any information relating to the young person's home life e.g., substance abuse, domestic violence, mental health issues

Anyone else involved

Please provide the names of anyone else involved and their role in the incident/concern e.g., staff/volunteer, young person, sibling.

Other information

Please describe any actions already taken

e.g., spoken to Youth Zone staff, informed parents, school, police or other agencies

Additional information

e.g., preferred name of the young person, people who should not be contacted, next steps (if known)

Submitted by:

Name *

Role

Email *

Phone number *

Privacy Notice

Your personal information will be used to respond to your enquiry and administer the service

Where there is a need to protect or support a young person, we may also share personal information with relevant agencies as required by law.

Appendix 2: Local Safeguarding Information and Contacts

- Designated Safeguarding Lead:** Rory Britton 07940294499 rory.britton@westyouthzone.org

Where a referral or advice is needed the safeguarding lead (or other senior safeguarding practitioner where they are not available) must contact the team of the borough where the young person lives

- Hammersmith and Fulham** Initial Consultation and Advice Team (ICAT) 0208 753 6610 Out of hours service: 020 8748 8588. No need for written referral. Social worker will email with confirmation after the discussion.

- **Kensington and Chelsea** Tel: 0207 361 3013 Out of hours service: 0207 373 2227 You will have to follow up with form or in writing. Email referrals to: socialservices@rbkc.gov.uk
- **Westminster** Immediate Safeguarding Referrals Email: AccesstoChildrensServices@westminster.gov.uk Call: 020 7641 4000 (9am to 5pm weekdays) Out of hours service: 020 7641 6000
- **Ealing** Children's Integrated Response Service (ECIRS) on **020 8825 8000 or 020 8825 5000** out of hours
- **Brent** Call 020 8937 4300 (option 1) or outside office hours emergency team: 020 8863 5250

For any other borough look online for the borough name and search Child Protection, Integrated Response, Front Door or MASH to find the appropriate number. Where you do not know the young person's address, call LBHF team for advice.

For any child protection concern or incident involving a member of staff, the safeguarding lead or CEO should contact the Local Authority Designated Officer

- **Children's Social Care at London Borough of Hammersmith & Fulham**
Lara Thompson - Safer Organisations (LADO) Please call 0208 753 5125 and ask to speak to the Duty Child Protection Advisor OR email LADO@lbhf.gov.uk

Appendix 3: Recognising abuse

Abuse

In relation to child protection there are four kinds of abuse defined in “Working Together”, they are:

1. Physical abuse

May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Indicators of this are:

- unexplained recurrent injuries or burns
- improbable explanations or refusal to explain injuries
- wearing clothes to cover injuries, even in hot weather
- absconding
- fear of medical help or examination
- self-destructive tendencies
- aggression towards others
- fear of physical contact - shrinking back if touched
- admitting that they are punished, but the punishment is excessive (such as a child being beaten every night to 'make him study')
- fear of suspected abuser being contacted
- bruises seen on parts of the body not normally harmed through play, such as in or around the mouth
- bruises that appear as a small 'grasp' or finger marks to a child's arm or legs
- injuries that look like they have been caused by a belt or stick
- bruises that appear to be of different ages (colour) in the same area
- injuries that appear the same on both sides of the body, legs head or arms
- injuries that appear as bite marks, especially when the marks appear to be of an adult or an older child (more than 3cm across)

It is a concern when a child is not taken for treatment if they are suffering pain, swelling or discoloration over a bone or joint. Although it may not always be possible to know whether a child has a fractured bone, it is difficult for a parent / carer to be unaware that the child has been hurt. It can be difficult to distinguish between a burn and scald that has been caused accidentally or non-accidentally. As with fractures, all burns and scalds should receive medical attention.

2. Emotional abuse

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel

frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur on its own. Indicators of this are:

- very low self-esteem, often with an inability to accept praise or trust in adults
- excessive clinging and attention seeking behaviour
- over-anxious – being excessively ‘watchful’ (hyper vigilant), constantly checking or being over-anxious to please
- withdrawn / socially isolated
- physical, mental and emotional development lags
- sudden speech disorders
- continual self-depreciation ('I'm stupid, ugly, worthless' etc.)
- overreaction to mistakes
- extreme fear of any new situation
- inappropriate response to pain ('I deserve this')
- neurotic behaviour (rocking, hair twisting, self-mutilation)
- extremes of passivity or aggression

3. Neglect

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

- constant hunger and complaints of tiredness
- poor personal hygiene
- poor state of clothing
- untreated medical problems
- no social relationships
- compulsive scavenging
- destructive tendencies
- below average weight / height
- reluctance to go home, particularly at weekends / holiday

4. Sexual abuse

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

Sexual abuse can take place online, and technology can be used to facilitate online abuse. Sexual abuse is not solely perpetrated by adult males. Women can also

commit acts of sexual abuse, as can other children. Indicators of this are:

- being overly affectionate or knowledgeable in a sexual way inappropriate to their age, or acting out precocious sexual behaviour with others
- medical problems such as chronic itching, pain in the genitals, venereal diseases
- other extreme reactions, such as depression, self-harm, suicide attempts, running away, overdoses, anorexia
- personality changes such as becoming insecure or clinging
- regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- sudden loss of appetite or compulsive eating
- being isolated or withdrawn
- inability to concentrate
- lack of trust or fear of someone they know well, such as not wanting to be alone with a specific person
- starting to wet themselves again, day or night / nightmares
- become worried about clothing being removed
- suddenly drawing sexually explicit pictures
- trying to be 'ultra-good' or perfect; oversensitive or overreacting to criticism
- reluctance to go home

Typical vulnerabilities in children prior to abuse and recognising abuse (this is not exhaustive)

- living in a chaotic or dysfunctional household (including parental substance use, domestic violence, parental mental health issues, parental criminality)
- history of abuse (including familial child sexual abuse, risk of forced marriage, risk of 'honour'-based violence, physical and emotional abuse and neglect)
- recent bereavement or loss
- gang association either through relatives, peers or intimate relationships
- attending school with young people who are sexually exploited
- learning disabilities
- unsure about their sexual orientation or unable to disclose sexual orientation to their families
- friends with young people who are sexually exploited
- homeless
- lacking friends from the same age group
- living in a gang neighbourhood
- living in residential care
- living in hostel, bed and breakfast accommodation or a foyer
- low self-esteem or self-confidence
- young carer
- Isolated, with little or no friendship or peer group

A child may be subjected to a combination of different kinds of abuse. It is also possible that a child may show no outward signs of abuse and hide what is happening from everyone. Many learn to 'manage' their problems, making it hard for others to help. We may observe behaviours/physical presentations that cause concern. However, it is important to remember that the causes of these may not be abuse, but due to other issues such as bereavement, homesickness, etc. Information related to events of this nature should be logged onto a Cause for Concern form. As a result, staff should be cautious before assuming abuse is the cause. Staff should ensure that they discuss their concerns with the Designated Lead for advice.

Safeguarding issues

In addition to these four types of abuse, there are safeguarding issues that can put children and young people at risk of harm. Behaviours linked to issues such as drug taking, alcohol abuse, deliberately missing education and sexting (also known as youth produced sexual imagery) put children in danger (Keeping Children Safe in Education, 2020).

1. Self-injury and Self Harm

Self-injury can take many different forms but in general terms is the act of deliberately causing harm to oneself either by causing a physical injury or by putting oneself in dangerous situations and/or self-neglect. Self-injury is generally a coping mechanism; there can be many reasons why a person chooses to self-injure, but it is important that staff/volunteers consider the possibility of a link between self-injury and trauma/abuse.

When dealing with self-injury and self-harm staff should:

Show that they care about the person behind the self-injury

- Show concern for the injuries themselves and ensure any needed first aid is provided
- Make it clear it is OK to talk about
- Acknowledge how scary the thought of not self-harming may be
- Explore what are their support networks
- Report to Designated Safeguarding Leads and seek further advice

2. Peer on Peer abuse

All staff/volunteers need to be aware that children can abuse other children (often referred to as peer-on-peer abuse). This is most likely to include, but may not be limited to:

- Bullying (including cyberbullying);
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- Sexual violence, such as rape, assault by penetration and sexual assault;
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse;
- Upskirting, which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is now a criminal offence;
- Sexting (also known as youth produced sexual imagery); and
- Initiation/hazing type violence and rituals.

3. Sexual harassment

When referring to sexual harassment we mean 'unwanted conduct of a sexual nature' that can occur online and offline. 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 (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
- Online sexual harassment.

This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence.

It may include:

- Non-consensual sharing of sexual images and videos;
- Sexualised online bullying;
- Unwanted sexual comments and messages, including on social media;
- Sexual exploitation; coercion and threats;
- Upskirting; and
- Pulling down shorts or pants as a joke.

4. Serious violence and gangs related behaviour

All staff/volunteers should be aware of indicators, which may signal that children/young people are at risk from, or are involved with serious violent crime, gang related behaviour or associations. It’s not illegal for a young person to be in a gang as there are different types of “gangs” and not all “gangs are dangerous. However, some children and young people that are involved with gangs may need help and support as the gang membership can be linked to illegal activity, particularly organised criminal gangs that are involved in trafficking, drug dealing and serious violence. Young people might be victims of violence or pressured into doing things like stealing or carrying drugs or weapons.

Indicators may include a change in friendships or relationships with older individuals or groups, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

How are young people recruited?

A child or young person might be recruited into a gang because of where they live or because of who their family is. They might join because they don’t see another option or because they feel like they need protection. Children and young people may become involved in gangs for many reasons, including:

- Peer pressure and wanting to fit in with their friends.
- They feel respected and important.
- They feel protected from other gangs or bullies.
- They want to make money and are promised rewards.
- They want to gain status and feel powerful.
- They have been excluded from school and feel they don’t have a future or any other option.

- To support their family.

Organised criminal gangs groom children and young people because they are less suspicious and are given lighter sentences than adults.

Studies show that a child/young person is more at risk of being recruited if:

- They have been excluded from school.
- They have special educational needs.
- There are problems at home like neglect, domestic abuse or sexual abuse.
- They have problems with their mental health.
- They live in existing gang territory.

All staff/volunteers must be aware of the associated risks and report any concerns to the Designated Safeguarding Lead.

5. **Child Criminal Exploitation: County Lines**

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity, drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs.

Like other forms of abuse and exploitation, county lines exploitation:

- Can affect any child or young person (male or female) and/or adult at risk under the age of 18 years;
- Can affect any adult at risk;
- Can still be exploitation even if the activity appears consensual;
- Can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- Can be perpetrated by individuals or groups, males or females, and young people or adults; and
- Is typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

6. **Child Sexual Exploitation**

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity:

- In exchange for something the victim needs or wants, and/or
- For the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Like all forms of child sexual abuse, child sexual exploitation:

- Can affect any child or young person (male or female) under the age of 18 years, including 16- and 17-year olds who can legally consent to have sex;
- Can still be abuse even if the sexual activity appears consensual;

- Children with learning disabilities are more vulnerable to sexual exploitation than other children.
- Can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity;
- Can take place in person or via technology, or a combination of both;
- Can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;
- May occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posted on social media);
- Can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse; and
- Is typified by some form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.

Some of the following signs may be indicators of child sexual exploitation:

- Children who appear with unexplained gifts or new possessions and/or money;
- 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;

Research highlights that children and young people who identify as lesbian, gay, bisexual, transgender, questioning, plus (LGBTQ+) face numerous factors that may result in them being vulnerable to, or victims of, child sexual exploitation (CSE).

Young people identifying as LGBTQ+ often experience additional challenges as a result of their sexual orientation or gender identity or questioning process. Given that, in some parts of society, there is still a lack of acceptance and understanding, children and young people who identify as anything other than heterosexual, often feel limited or constrained in their ability to explore their identity or gain appropriate information and advice as their heterosexual or heteronormative peers. That is not to say that young people who identify as LGBTQ+ are more at risk of CSE, or that they are abused through CSE because of their sexuality or gender identity, however they may face additional vulnerabilities, barriers to disclosure and a lack of access to appropriate advice and support.

7. Child Trafficking

Child trafficking is a very serious issue which can have a devastating and lasting impact on its victims. Children can be trafficked into, within and out of the UK. Trafficking of persons means the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall

include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

8. **Female genital mutilation (FGM)**

Includes all procedures involving the partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons. FGM is also sometimes known as 'female genital cutting' or 'female circumcision'. However, circumcision is not an appropriate term. Communities tend to use local names for referring to this practice including 'sunna'. FGM is illegal in the UK, a form of child abuse and a grave violation of the human rights of girls and women with long-lasting harmful consequences.

9. **Forced marriage**

Forced Marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used. The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family). Financial abuse can also be a factor.

10. **So-called 'honour-based' violence**

So-called 'honour-based' violence (HBV) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBV are abuse (regardless of the motivation) and should be handled and escalated as such. Staff and volunteers need to be alert to the possibility of a child/young person being at risk of HBV, or already having suffered HBV.

11. **Faith abuse**

Faith abuse includes: belief in concepts of witchcraft and spirit possession, demon or the devil acting through children or 'leading them astray' (traditionally seen in some Christian beliefs), the evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context); ritual or muti murders where the killing of children is believed to bring supernatural benefits or the use of their body parts is believed to produce potent magical remedies; and use of belief in magic or witchcraft to create fear in children/adults at risk to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation. This is not an exhaustive list and there will be other examples where children/adults at risk have been harmed when adults think that their actions have brought bad fortune, such as telephoning a wrong number which is believed by some to allow malevolent spirits to enter the home.

12. **Extremism and Radicalism**

Extremism is defined in the national Counter-Terrorism Strategy (CONTEST)

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/716907/140618_CCS207_CCS0218929798-

[1 CONTEST 3.0 WEB.pdf](#),

The UK's response to terrorism, Prevent, Pursue, Protect and Prepare, as:

"A 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. It also includes calls for the death of members of our armed forces, whether in this country or overseas."

Radicalisation is defined in the CONTEST Strategy as:

"The process by which a person comes to support terrorism and forms of extremism leading to terrorism."

The following are examples of recognised offences in relation to terrorism, extremism and radicalisation:

- Murder or soliciting murder.
- Committing, preparing or instigating acts of terrorism.
- Incitement to commit acts of terrorism overseas.
- Encouragement of terrorism.
- Inciting racial or religious hatred or hatred because of sexual orientation.
- Inviting support for a proscribed organisation.
- Terrorist financing offences.
- Dissemination of terrorist publications.
- Offences of encouragement and dissemination using the internet.

Whatever the form of abuse or neglect, the needs of children must come first when determining what action to take.

13. Domestic abuse

The cross-government definition of domestic violence and abuse is:

"Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality".

The abuse can encompass but is not limited to:

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

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

14. Child to Parent Violence (CPV)

Child to Parent Violence (CPV) or Adolescent to Parent Violence and Abuse (APVA) is any behaviour used by a young person to control, dominate or coerce parents. It is intended to threaten and intimidate and puts family safety at risk. Whilst it is normal for adolescents to demonstrate healthy anger, conflict and frustration during their transition from childhood to adulthood, anger should not be confused with violence.

Violence is about a range of behaviours including non-physical acts aimed at achieving ongoing control over another person by instilling fear.

15. **Children Missing from Home**

Children who go missing from home are vulnerable to abuse and violence and need to be safeguarded. Children go missing for a number of reasons, but in general, the factors preceding missing episodes are:

- Arguments and conflicts
- Poor family relationships
- Abuse and neglect
- Boundaries and control
- Immediate risks
- No means of support or legitimate income leading to high-risk activities
- Becoming a victim of abuse.
- Missing out on schooling and education
- Increased vulnerability

16. **Children and young people with a disability or additional health needs**

This is a particularly vulnerable group as signs of abuse and neglect may be masked or misinterpreted as being due to underlying impairments. Young people with disabilities are much more likely than non-disabled children to experience abuse as:

- They have fewer outside contacts than other young people;
- May receive personal care, possibly from several carers;
- Have limited capacity to resist or avoid abuse;
- Have communication difficulties that may make it difficult to tell others what is happening;
- Be inhibited about complaining because of a fear of losing services;
- Be especially vulnerable to bullying and intimidation and /or, abuse by their peers.

For more information on safeguarding d-deaf (The term D/deaf is used to describe young people who are Deaf – sign language users and deaf – who are hard of hearing but who have English as their first language and may lip-read and /or use hearing aids) and disabled children and young people see section 4 of the Safeguarding Toolkit.

17. **Private Fostering**

Private fostering occurs when a child under the age of 16 (under 18, if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer. Such arrangements may come to the attention of staff and volunteers through the normal course of their interaction, and promotion of learning activities, with children. For more information on private fostering see section 6 of the safeguarding toolkit.

Adults at Risk

The Care Acts 2014 makes it clear that specific adult safeguarding duties apply to any adult who:

- Has care and support needs, whether they are in receipt of support or not and
- Is experiencing, or is at risk of, abuse or neglect, and

- Is unable to protect themselves because of their care and support needs.

An adult with care and support needs may be:

- A person with a physical disability, is neurodivergent or has a sensory impairment
- Someone with mental health needs, or a mental illness such as a personality disorder
- A person with a long-term health condition
- Someone who misuses substances or alcohol to the extent that it affects their ability to manage day-to-day living.

This is not an exhaustive list. Types of abuse for adults at risk:

1. **Physical abuse**

Including assault, hitting, slapping, pushing and misuse of medication, restraint or inappropriate physical sanctions.

2. **Domestic violence or abuse**

This is 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.

3. **Sexual abuse**

Any form of sexual activity that the adult does not want and or have not considered, including:

- A sexual relationship instigated by those in a position of trust
- Rape
- Indecent exposure
- Sexual harassment
- Inappropriate looking or touching
- Sexual teasing or innuendo
- Sexual photography
- Subjection to pornography or witnessing sexual acts
- Indecent exposure and sexual assault
- Sexual acts to which the adult has not consented or was pressured into consenting.

4. **Psychological or emotional abuse**

This abuse may involve the use of:

- Intimidation
- Indifference
- Hostility
- Rejection
- Threats of harm or abandonment
- Humiliation
- Verbal abuse such as shouting, swearing or the use of discriminatory and/or oppressive language.
- A deprivation of contact
- Blaming, controlling, coercion
- Harassment
- Cyber bullying
- Isolation

5. **Financial or material abuse**

Including:

- Theft
- Fraud
- Internet scamming
- Coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits

6. **Modern slavery**

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

7. **Discriminatory abuse**

Abuse can be experienced as harassment, insults or similar actions due to race, religion, gender, gender identity, age, disability, sexual orientation.

8. **Organisational or institutional abuse**

This includes neglect and poor care practice within an institution or specific care setting such as a residential care home, or in relation to care provided in one's ownhome. This may range from one-off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

This may include:

- Ignoring medical, emotional or physical care needs
- Failure to provide access to appropriate health, care and support or educational services
- The withholding of the necessities of life, such as medication and adequate nutrition
- Willful failure to intervene or failing to consider the implications of non-intervention in behaviours which are dangerous to them or others
- Failure to use agreed risk management procedures

9. **Neglect, self-neglect and/or acts of omission**

This includes ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

This covers a wide range of behaviour:

- Neglecting to care for one's personal hygiene health or surroundings resulting in a risk that impacts on the adult's wellbeing
- Hoarding

10. **Non-recent historic abuse**

Non-recent child abuse, sometimes called historical abuse, is when an adult was abused as a child or young person under the age of 18. Non-recent historic abuse refers to one of 3 situations:

1. An adult making an allegation of abuse when they were under 18 years of

age, that occurred at least 1 year before it was reported.

2. A child making an allegation of abuse that occurred at least 1 year before it was reported.
3. Someone reports an allegation, on behalf of someone else, relating to an offence committed over a year ago. (NSPCC, 2018).

Such disclosures can occur after long periods of time as the complainant may now feel comfortable that they are no longer at risk, have the confidence to make an allegation that will be believed, become aware that there have been other reports, or feel they need closure to move on. Whatever the motive, and however long ago the allegation, action must be taken because:

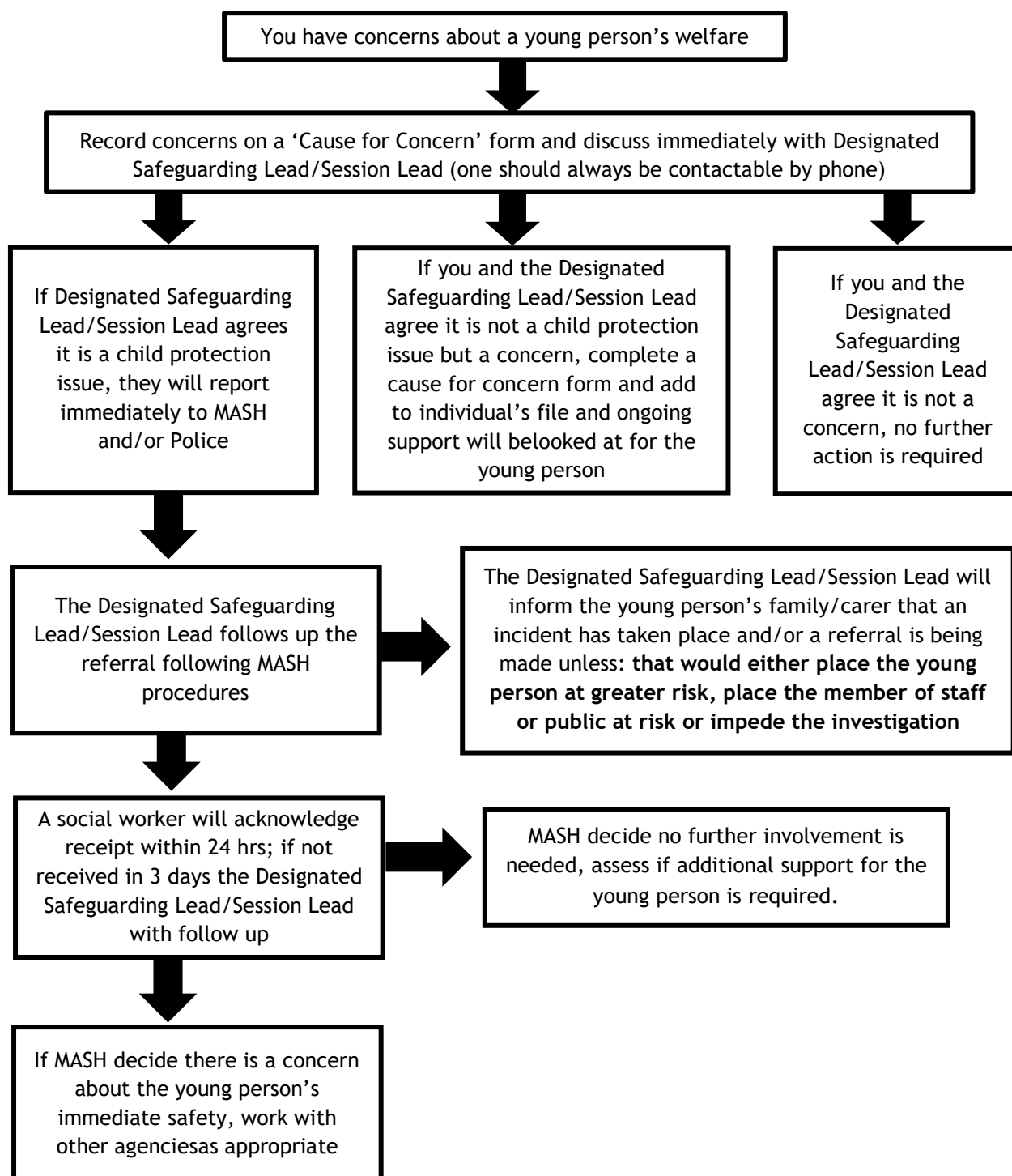
1. The alleged abuse may not have been an isolated incident.
2. It may be part of a wider abuse situation.
3. The person(s) may still be abusing individuals and/or working with children.
4. There may be ongoing legal action.

Should an allegation or disclosure be made, it is important to record and report such information as you would if it were a current situation. This includes allegations about staff or volunteers that no longer work/volunteer at WEST and incidents that involved young people that no longer attend WEST.

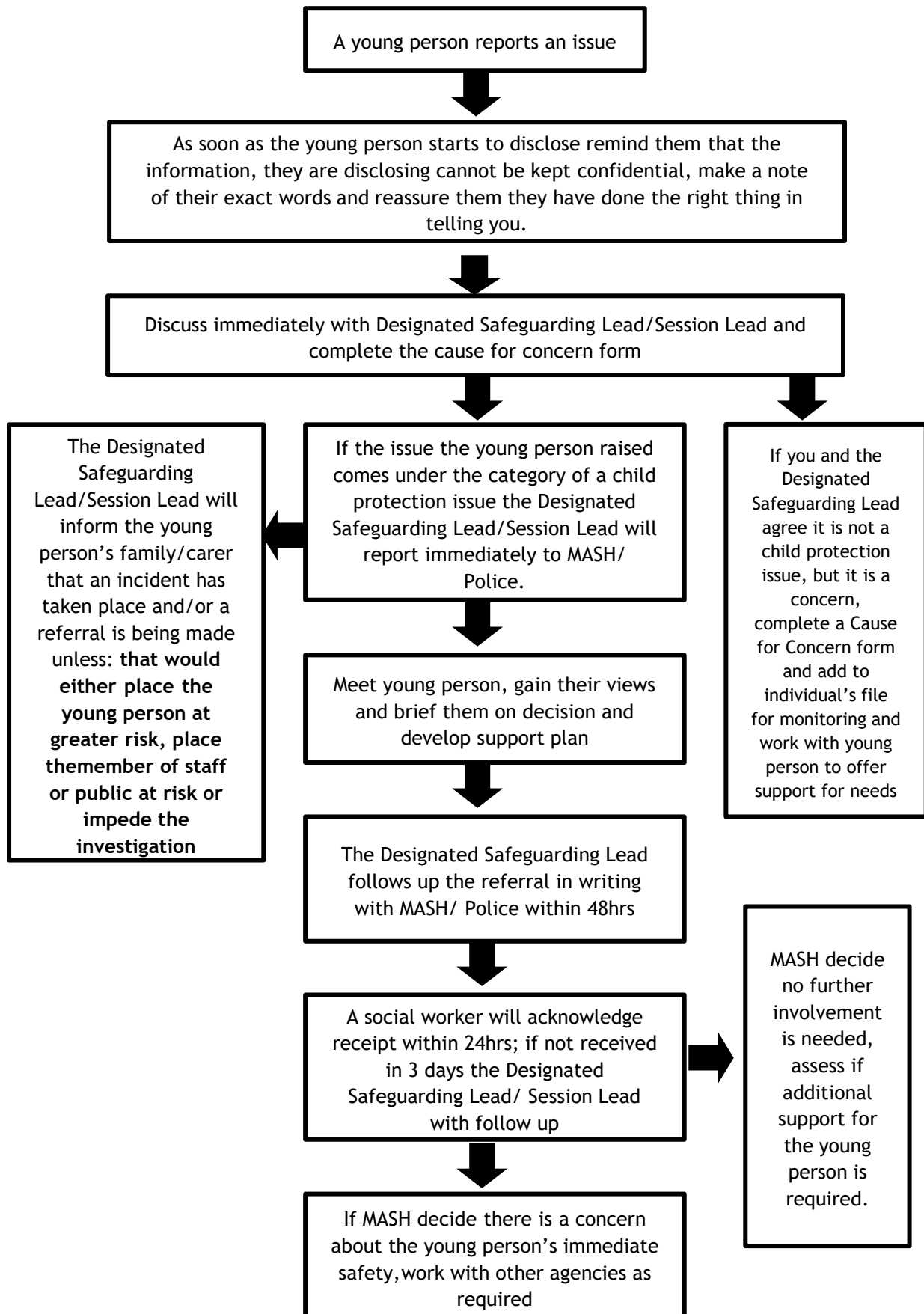
Appendix 4: Safeguarding Flowchart

Safeguarding Flowcharts

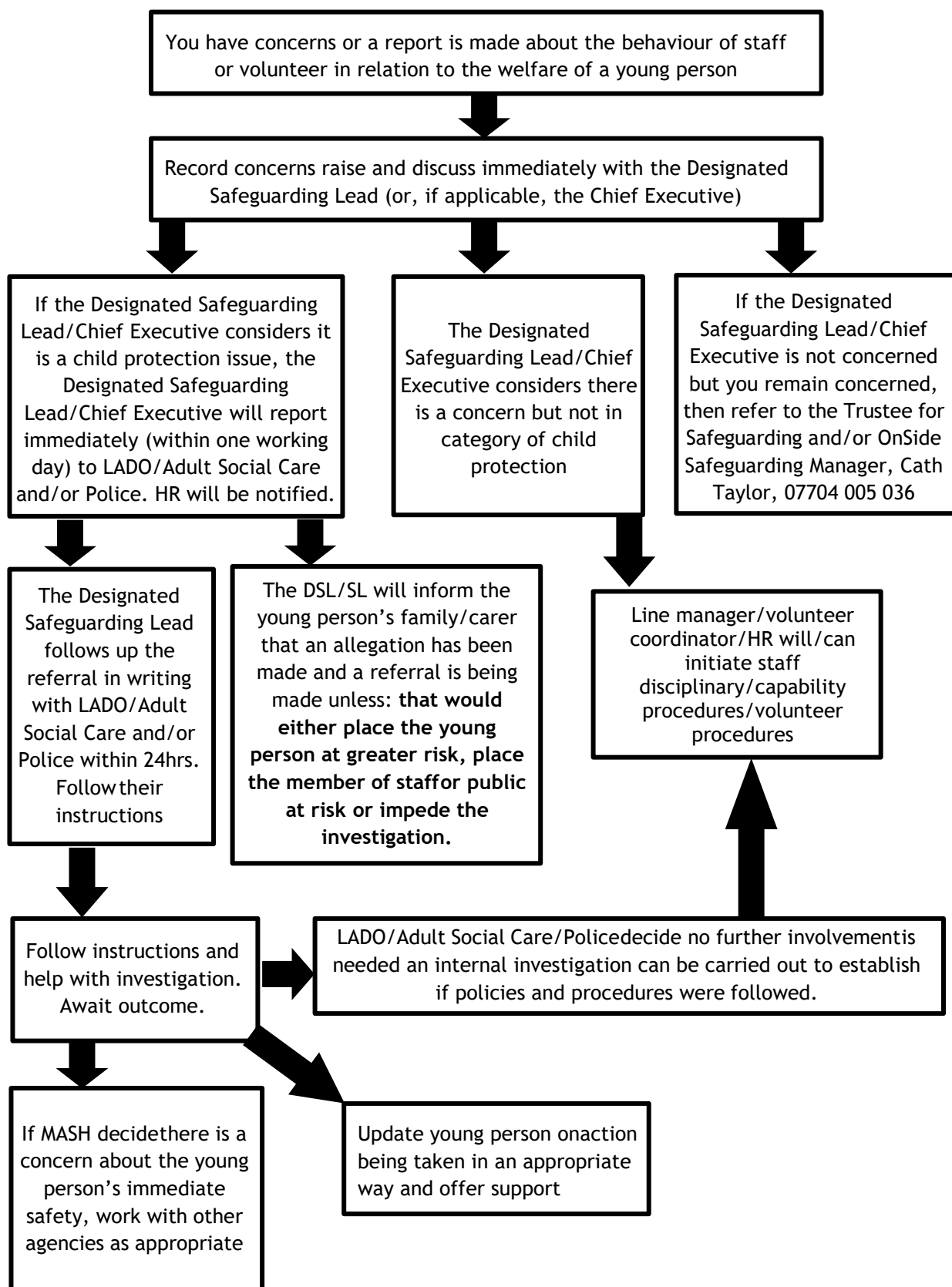
What to do if a young person tells you about abuse



What to do if a young person tells you about abuse



What to do if an allegation of abuse involves staff or volunteers



Appendix 5: Working With Young People Policy

WEST aims to be a safe and welcoming place for all young people and adults at risk; this section of the policy sets out how we will work safely with young people and maintain high standards when working with young people and adults at risk and create a safe working culture within WEST.

Safe working culture

A safe working culture is one where everyone is committed to ensuring that practice is undertaken in the best and most appropriate way to ensure children, young people and vulnerable adults are safe. Staff, trustees and volunteers (referred to as 'staff and/or others' going forward) are supported, and know how to respond to concerns, regarding the behavior or practice of others. Key procedures include:

- Policies and procedures being used, regularly reviewed/updated and named staff/roles being accountable for their use.
- Setting acceptable standards of behaviour for staff, volunteers, trustees, partner organisations and young people.
- **An open culture with no secrets.**
 - Safeguarding as an agenda item on all supervision and 121 sessions.
 - Have open discussions to talk about your safeguarding measures and establish if they are effective.
 - Encourage professional challenge.
 - Provide opportunities for all staff & others to share any worries and concerns in relation to safeguarding.
 - Transparent, clear procedures that are actively promoted by the Senior Leadership Team and Trustee Board to encourage all staff and others to raise and escalate their concerns within their organisations through whistle blowing procedures.
 - Support for staff & others when they raise concerns.
 - Robust recording systems that are timely and accurate.
- Detect and identify inappropriate behavior or abuse within the workplace at the earliest opportunity and respond appropriately.
- Strong inductions and the effective use of probationary periods. Having a consistent induction process will make sure everyone at WEST fully understands and knows how to follow the safeguarding policies and procedures.
- Ongoing safeguarding training. Ensure everyone is kept up to date with any changes that are made to the safeguarding and child protection policies and procedures.
- Performance reviews to take account any concerns regarding professional behaviours and conduct.
- A commitment from all who work at WEST to safeguard and protect children and to maintain an ongoing culture of vigilance.

Relationships and Professional Boundaries

All staff & others must ensure the boundaries of a professional caring relationship are always clearly understood. It is never appropriate for staff or others to socialise with young people they are working with; if staff or others sees someone in their own time, they must be careful to retain a professional boundary. This includes socialising over social media, for example it is not appropriate to accept a young person as a 'friend' on Facebook. We do however recognise that, for example, through family connections, there may be incidents where staff or others know the young person in a social capacity. In these circumstances you would need to make it clear to the young person that whilst you are in work mode, they would have to

interact with you as a professional in the same manner as other young people. You must also advise your line manager or other appropriate person of circumstances where you are working with young people that you know in a social capacity.

Language

In line with our values and principles we encourage all staff & others to use positive language with children, young people and their colleagues, and convey positive messages during conversations and interactions.

As a general principle, swearing by any member of staff, volunteers, trustee or young person should be seen as inappropriate and should be challenged and discouraged wherever possible.

We recognise that different words may be seen as swearing by different people and so staff & others must use their discretion to judge what language is appropriate for particular situations.

We also recognise that certain words may be used inadvertently, for example as an exclamation following an injury, but staff & others must discourage it wherever possible.

Staff & others must also challenge young people if they use words that may be legitimately used to describe a minority group in a negative or inappropriate context. Similarly, staff & others should challenge the use of any term that could be deemed by others as derogatory, regardless of whether it was used in a derogatory manner, it was used by people of the ethnicity/ gender that it refers to or is commonly used within their cultural references.

Physical Contact and Touch

In the majority of cases staff & others should avoid physical contact with young people. We do however recognise that there will be extenuating circumstances where a policy of non-contact is not practical. To ensure that any action carried out is not seen as inappropriate, or interpreted as sexual contact, all staff & others must consider the following aspects carefully:

- Their relationship with the group.
- Their relationship with the individual.
- The particular circumstances.
- Nonverbal messages (e.g. body language) they are receiving in response to actions.
- Whether there are other people present, particularly other staff, trustees or volunteers.

Any physical contact that a young person may initiate towards staff or others will be carefully judged for appropriateness and, where needed, the young person should be reminded of boundaries.

Any form of physical punishment of children is unlawful, as is any form of physical response to misbehaviour, unless in exceptional circumstances where it is by way of restraint for example, to protect a young person and others.

- When physical contact is required, staff & others should seek to explain the nature and reason for the physical contact to the child or young person. Unless the situation is an emergency, the adult should ask the child for permission;
- Contact should not involve touching genital areas, buttocks, breasts or any other part of the body that might cause a child distress or embarrassment;

- Physical contact should always take place in an open or public environment and not take place in secret or out of sight of others. Young people can video situations and use it to place WEST in a damaging situation;
- Physical contact should take account of cultural or religious differences and should always be sensitive to issues of gender;
- There may be occasions where a distressed child/young person needs comfort and reassurance. Workers should consider the way in which they offer this and do so in an age-appropriate way. In doing so, it should not be assumed that all children/young people seek physical contact if they are distressed.
- Staff & others should ensure that unnecessary or unjustified physical contact does not become normalised or part of the culture of WEST, particularly with the same young person over a period of time.
- In an extenuating circumstance when physical contact has been made, a notification must be made to your line manager so that the incident can be recorded.

Young people to young people

We believe that general physical contact is a normal behaviour pattern amongst groups of young people. Physical contact will therefore be accepted by staff & others as long as it is freely engaged in by both parties and does not carry any aggressive, bullying or derogatory undertones. Should this be the case, staff & others must intervene in these circumstances.

No form of sexual contact between young people will be allowed during session/events. Staff & others will be required to use a certain degree of discretion to interpret what constitutes sexual contact, based on their knowledge of the individuals and group interactions. If you have any uncertainty over the appropriateness of behaviour you should clarify with colleagues but generally you should err on the side of caution.

Social Media and Engaging Young People

As an organisation that works with young people, the use of social media can also pose safeguarding risks. Staff & others are expected to maintain professional boundaries with young people and there should be a clear separation of the private social lives of staff and that of the Youth Zone members.

- Staff & others are not permitted to, 'friend', 'connect', 'follow' or otherwise link any personal social media account to that of any member for any reason.
- Staff & others must ensure requests are not accepted and members who are successful in connecting with you on social media should be removed or blocked immediately.
- Staff & others who have existing links with members on social media prior to their commencing work at WEST or the member joining, will be required to remove the member within one week of either occurrence taking place.
- Staff & others should check privacy settings on personal social media accounts regularly. Personal details such as contact numbers, email addresses and photos should be hidden from public access

Professional social media accounts:

- Staff members with an approved professional WEST social media account are permitted (but not obliged) to issue and accept 'friend', 'connect', 'follow' requests to and from members, provided there is a valid work-related reason. Staff are responsible for ensuring that member social media accounts are genuine before accepting requests.

As a brief guide:

- Communication with members should take place in open forums such as the main WEST

Facebook page, groups or group messages. Another member of staff must always be included in these messages as this adds to accountability and creates an open forum. When communicating with young people online the principle of avoiding lone working when possible applies as much in an online situation as it does in a physical location.

- Communication with young people through social media must always be for a specific purpose such as planning an event or sharing information. Staff should avoid overly social chat and conversation and be mindful of the time at which they are communicating.
- **Disclosures from young people in an online setting should be dealt with and reported in the same way as offline.**

We recommend that staff continue to follow these guidelines after leaving WEST.

Lone Working

Lone workers are defined by the Health and Safety Executive (hse.gov.uk) as “those employees who work by themselves without close or direct supervision”. For the purpose of this policy, lone working means any work situations where a member of staff is working on their own with a young person or a group for a prolonged period of time or possibly away from other staff and volunteers. Lone working is different from occasions where staff may end up on their own with young people for shorter periods in staffed buildings, for example running a session in a Youth Zone.

Whilst it is recognised that lone working situations can sometimes create opportunities to develop positive professional relationships with young people and adults at risk, WEST are committed to keeping young people, adults at risk and volunteers safe. Whilst we generally regard it as safer practice to have at least two adults present, there are occasions where, to best support young people, this is not feasible and the need for lone working may arise. Lone workers should not be at any more risk than other employees and therefore extra control measures are required that take account of the work involved and the unforeseeable emergencies. It is WEST policy that volunteers should not lone work unless they are undertaking a specific and specialist role for which they have been trained and that any situation where lone working involves taking young people from WEST, the WEST team are notified in advance.

The need to lone work should be carefully assessed by a line manager or WEST Designated Safeguarding Lead. For more information and the risk assessment please refer to Appendix 9 - Lone Working Policy and Procedures.

Photography and videoing of young people

Photography and video are important methods of recording social contacts and providing a historic record that illustrates and validates important moments in the lives of people. The process is personal and powerful, and often supportive in the process of developing an identity and self-esteem.

Photography and video can, however, be misused and young people have the right to privacy and to be safeguarded from the inappropriate use of images and video. In line with the safeguarding procedures for Looked After Children and those with estranged parents, any image that clearly shows their face cannot be distributed by WEST, without the explicit consent of their carer AND social worker. Parental consent is required before taking and or displaying photographs and/or videos of children.

As an agency committed to safeguarding children and adults at risk, we need to ensure that

our actions, and those of our staff, are appropriate and cannot be misinterpreted. All staff and volunteers must ensure that individuals, who are being photographed or videoed, understand why the activity is taking place and that themselves and/or their parents/carers consent to it.

Risk assessments

All activities must have a relevant and up to date risk assessment that is stored on Sharepoint.

Accidents, Injuries and First Aid

Staff who may take lead responsibility of young people should be appropriately trained, with a minimum of the one-day emergency first aid qualification.

Minor accident or injury

If a young person is injured or unwell and your level of concern is low, treat them as per your first aid training. If your level of concern is moderate to high, take them to the nearest accident and emergency department. Parents should be contacted in the case of any accident or injury unless very minor.

Serious accident or injury

1. Assess the situation so you are clear of the extent of injury and the number of people involved.
2. At least one member of staff should stay with the injured person/people, while another should locate and notify the lead person immediately, who will call the emergency services and the parents/guardians (in a fatality or critical situation it is likely to be the police that contact parents).
3. The trained First Aider should provide the necessary first aid to the victim, up to the level they are qualified to perform. This should continue until emergency personnel arrive on the scene.
4. If it is possible to safely remove the uninjured person/people to a safe, more private location do so. If not, the rest of the young people should be moved well away from the vicinity.
5. Staff and volunteers should be vigilant in ensuring mobiles are not used to photograph or video the incident.
6. In the event that the injury or illness results in death, the victim should not be moved, and the surroundings should not be disturbed. All witnesses to the fatality should remain on the scene until the emergency services have taken control and authorised movement.
7. The rest of the staff and volunteers should stay focused on keeping the young people calm, engaged and away from the incident.
8. The names, addresses and phone numbers of witnesses should be obtained and the need to handle communication sensitively should be explained. If possible, the witnesses should be prevented from telling others until the incident has been cleared and parents/guardians informed.
9. Ensure, if at all possible, that the injured are accompanied to hospital by a member of staff or parent/guardian.
10. Your line manager and/or Chief Executive should be informed; they will prepare a holding message for the media until a full statement can be given.
11. If there is any potential for a liability enquiry, the staff and volunteers responsible for the activity should remove themselves from the group as soon as an emergency

support team arrive and have been briefed.

12. There should be no communication with any other party about the incident (cause or consequence), particularly the media but also other colleagues, friends, family, etc. The names of those involved or the injured participants must not be released other than to the police and medical services.
13. If possible, trained personnel should debrief any young people who witnessed the incident and provide initial counselling.
14. Staff and volunteers present at the time of the incident should be monitored by their line manager in case of shock or trauma. If possible, immediate counselling should be provided.

Dealing with conflict and aggression between young people

Staff and volunteers should be vigilant at all times for signs of conflict that may escalate and, wherever possible, work to diffuse the situation before it does.

If a situation does start to escalate, it should ideally be dealt with immediately by the staff or volunteers in the vicinity, as long as they personally feel confident to deal with it. Using reasoning and blocking techniques, efforts should be made to separate the parties in dispute. It is important that no physical contact is made by the member of staff or volunteer that could be interpreted as aggressive or inappropriate. If the situation is escalating or is very likely to, then the emergency services should be called immediately. Other young people should be moved away from the scene and prevented from videoing it on their phones.

Staff and volunteers must not put themselves at risk.

Offsite Visit Procedure and Emergency Situations

Offsite activities including all activities that are out of borough and/or are considered an offsite activity; trips, residential and adventure education are an important part of our offer to young people; planning is essential to ensure the best experience of young people and manage risk. Meeting young people at an event who travel there independently would not be considered a trip.

Emergency Contact

All offsite activities, including day trips and residential (referred to herein as trips), need to have an agreed Emergency Contact, who is contactable 24 hours a day for the duration of the trip. For clarity, an offsite trip is when WEST staff and volunteers are taking responsibility for the transport and welfare of a young person/people. The appropriate Emergency Contact should be agreed with the member of staff's line manager. For residential there may need to be a rota system, which should be clearly agreed and communicated.

The Emergency Contact should be informed at the point of departure to confirm the group is setting off, and provided with the final list of people going, including any last-minute dropouts or changes to the group.

The Emergency Contact should be kept updated at agreed times during the trip and **must** be contacted by staff on arrival back to base and the drop-off of young people

Supervision

All trips must have adequate supervision. Full day trips and residential must have a minimum of two workers. Ratios should be a minimum of one worker to eight young people.

The workers should be mixed gender, unless it is a single gender group. Exceptions can be made with written agreement from the Designated Safeguarding Lead and on completion of an additional risk assessment which records support provided to small groups of young people with one worker on short trips where they will be meeting up with additional staff; and following guidance must be adhered to:

- Staff must not transport individual young people (one to one) unless in an emergency or when lone working has been risk assessed and agreed by your line manager or safeguarding manager.
- If staff are planning to transport young people, they must take responsibility for ensuring they have adequate sleep the night before.
- If for any reason the staff member does not feel fit and well enough to drive then they need to inform their manager (or another designated person if their manager is unavailable) so that alternative arrangements can be made.
- Consideration should be given to the behaviour of the young people

Planning the trip

To minimise the risk of an emergency or help smooth action should one arise, it is important to plan properly.

The following documentation should be completed and passed to your line manager ahead of the trip:

1. A risk assessment (based on a sound knowledge of the venues, activities and participants).
2. "An Offsite Activity Checklist", **Appendix 6**.
3. An "Outdoor Education, Offsite Educational Visit and Residential Visit Providers Form" **Appendix 7** (before booking the activity).
4. A full timetable and programme for the trip indicating what activities will be delivered, when and where; a copy of this information must be given to all parents/carers (can be in electronic format)
5. "**Consent and Medical Form**" completed for each young person, and team member participating (to be taken on the trip, copies left with emergency contact).
6. Letters provided to young people (can be in electronic format) and parents detailing the trip, activities young people will undertake, any required or suggested kit and contact details of staff leading the trip.

A copy of each document should be stored on Salesforce under the session activity so the Emergency Contact has access to all information and a hard copy of consent and medical forms taken with you on the trip if you cannot guarantee access to electronic copies for the entirety of the trip, to ensure all potential issues have been considered and risks minimised. The Emergency Contact must keep the trip checklist and timetable with them at all times during the period of the residential, so they are able to respond to an incident immediately.

In addition,

- Ensure that at least one member of the party has an appropriate first aid qualification, unless agreed and recorded in the risk assessment.
- Ensure you have agreed access to emergency funds should an incident occur.
- All staff and volunteers are briefed on this emergency procedure.
- Young people are suitably prepared for the trip and are clear as to the aims and programme.

- Sleeping arrangements have been considered, risk assessed and planned.
- Clear staff roles are identified including “Safeguarding Lead” and/or “Activity Leader”.

The Emergency Contact should be informed at the point of departure to confirm the group are setting off and to be provided with the final list of people going.

After the Trip

Immediately let the Emergency Contact know the group has arrived back safely and report any incidences.

Emergency situations on offsite trips

Should an incident happen, the procedures are set out below.

Transportation Issues

- Contact breakdown recovery service provided with the vehicle.
- Make a personal judgement whether it is safer for the group to remain in the vehicle with their seatbelts on or to exit the vehicle and wait (this must be off the road e.g. behind a safety barrier). Generally, this decision will depend on whether there is a safe place to wait and the behaviour tendencies of the young people (if there is a chance they will not abide by instructions to stay off the road, they should all remain in the vehicle).
- Inform the Emergency Contact.
- If the vehicle cannot be fixed, a replacement transport cannot arrive within one hour and there is an element of risk to the young people (e.g. you are on a motorway or on the roadside and it is getting dark) contact the police and request assistance.

Missing Participants

After attempting to contact the young person by mobile (if they have one) and questioning the remaining young people to assess if they have information of their whereabouts, the following actions should be taken:

- A nominated member of staff or volunteer should look for the young person with the remaining staff and volunteers agreeing the search area and cut-off return time.
- The remaining staff and volunteers should ensure the rest of the group are kept together.
- Alert the Emergency Contact and the police immediately if there is cause for concern.
- If the young person cannot be found, the police and parents/guardians should be informed, and the remainder of the group returned to the base.

Minor accident or injury

If a young person is injured or unwell and **your level of concern is low**, treat as per your first aid training. If **your level of concern is moderate to high**, take them to the nearest accident and emergency department. Parents/guardians should be contacted in the case of any accident or injury, unless very minor.

Serious accident or injury

- Assess the situation so you are clear of the extent of injury, the number of people involved, etc.
- Ensure you have accounted for all group members.
- The trained First Aider should provide the necessary first aid to the victim, up to the level they are qualified to perform. This should continue until emergency personnel arrive on

the scene.

- Agree actions between staff and volunteers and agree who is best placed to deal with the group and who will deal with the response/ communications needed, as below:

Communications leader

- Call the emergency services as appropriate
- Call the Emergency Contact and agree; transportation arrangements for the rest of the group, communications management (including who is going to contact the parents/guardian; generally, the Emergency Contact, although in a fatality or critical situation it is likely to be the police), and arrival of the emergency support team.
- Obtain the names and addresses of independent witnesses.
- Notify the activity or residential providers of any changes, such as arrival time, etc.

Group leader

- Keep the group calm and together
- Explain to the group the need to handle communication sensitively and, if possible, remove/restrict access to personal mobiles until the incident has been cleared and parents/guardians informed.
- Explain to the group what is going to happen next.

The Emergency Contact

- Immediately prepare an emergency support team of two people able to work with the group and one person able to look after the staff and volunteers. The team should be briefed and dispatched within one hour or as close to that as possible.
- Assess the need to provide alternative transport for the rest of the group and, if needed/possible, the emergency support team should take that.
- Contact the police and parents/guardians, as appropriate.
- Prepare a holding message for the media until a full statement can be given.
- If it is possible to do so, safely remove the uninjured people in the group to a secure and less public location. In the event that the injury or illness results in death, the witnesses to the fatality should remain on the scene until the emergency services have taken control and authorised movement.
- Ensure, if at all possible, that the injured are accompanied to hospital by a member of staff.
- Do not speak to any other party about the incident (cause or consequence), particularly the media, and do not release names of involved or injured participants other than to the police and medical services.
- The emergency support team will arrive and relieve the staff and volunteers of their responsibilities with the group. If there is any potential for a liability enquiry, the trip staff and volunteers should remove themselves from the group as soon as the emergency support team arrive and have been briefed.
- If possible, trained personnel should debrief the group and provide initial counselling.
- Staff and volunteers present at the time of the incident should be monitored by the emergency support team until they are safely home, in case of shock or trauma. If possible, immediate counselling should be provided.

After the incident

The full details of any incident must be logged in detail and discussed with your line manager and the Designated Safeguarding Lead, as well as informing OnSide if applicable in line with the Network Escalation Policy (see appendix 7). In addition,

- a full record of any subsequent events must be kept
- the member of staff's line manager and the Chief Executive must be informed

- support to the parents/guardians and young person should be provided, if this is appropriate.

If there is a serious incident, the Chief Executive

- should notify the insurers and funders, where appropriate, and the Trustee Board
- should assess the need for ongoing support and counselling for the staff, volunteers and group, and arrange as appropriate
- should ensure that staff and volunteers are not left in a vulnerable position in terms of continuing to work with the group

Dealing with the media

Any contact with the media following any incident should only be carried out by the Chief Executive. Depending on the severity of the incident, they may direct this communication via the Board member with responsibility for communications. Members of staff and volunteers should be vigilant in not releasing names or details of incidents or making any comments that then may end up in the media. The Chief Executive will prepare a holding message for the media until a full statement can be given.

Appendix 6: Offsite Activity Checklist including Transporting Young People Policy

This form should be submitted to the agreed Emergency Contact prior to departure for any offsite trip when WEST staff and volunteers are taking responsibility for the transport and welfare of a young person/people.

Meeting young people at an event who travel there independently would not be considered a trip.

Introduction

Offsite activities, trips, residentials and adventure education are an important part of our offer to young people; planning is essential to ensure the best experience of young people and manage risk.

WEST has a duty to safeguard children and adults at risk when they take part in activities and events. Some activities may present additional challenges and risks, which make safeguarding more complex. For example, if an event:

- Includes large numbers of children, young people.
- Requires you to take children and young people to a different location, sometimes for an overnight stay, and sometimes involving activities that are less structured than your normal programme.

Emergency Contact

All offsite activities, including day trips and residentials (also referred to herein as trip/s), need to have an agreed Emergency Contact who is contactable 24hrs a day for the duration of the trip. This should be the Safeguarding Lead or if they are not available for any period their line manager. For residential there may need to be a rota system which should be clearly agreed and specified in the “**Offsite Activity Checklist**” (see **Appendix 5**).

Planning the trip

To minimise the risk of an emergency or help smooth action should one arise, it is important to plan properly. The following documentation should be completed and passed to your line manager to approve the trip:

1. A risk assessment (based on a sound knowledge of the venues, activities and participants) If you're using a venue belonging to another organisation, arrange a meeting in advance to discuss how things will run on the trip and make sure your child/vulnerable adult safeguarding policy and procedures are aligned.
2. An Offsite Activity Checklist
3. An Outdoor Education, Offsite Educational Visit and Residential Visit Providers Form (before booking the activity)
4. A timetable and programme for the trip indicating what activities will be delivered, when and where; a copy of this (paper and/or electronic) information must be given to all parents / carers.
5. Share information (paper and/or electronic) about the event with parents or carers, staff and volunteers to ensure everyone knows how the activity will run and what action they need to take to make sure children and young people are safe.
6. Consent and Medical Form completed for each young person, and team member participating. (to be taken on the trip, copied and left with the Emergency Contact).

7. Letters provided (paper and/or electronic) to young people and parents detailing the trip, activities young people will undertake, ground rules, any required or suggested kit and contact details of staff leading the trip.

A copy of each document should be stored on Salesforce under the session activity so the Emergency Contact has access to all information and a hard copy of consent & medical forms taken with you on the trip if you cannot guarantee access electronic copies for the entirety of the trip. Emergency Contact must ensure they have access to keep the trip checklist, attendee contact details and timetable with them at all times during the period of the residential, so they are able to respond to an incident immediately.

In addition

- Ensure that at least one member of the party has an appropriate first aid qualification, unless agreed and recorded in the risk assessment.
- You have agreed access to emergency funds should an incident occur.
- All staff and volunteers are briefed on the emergency procedure.
- All staff and volunteers understand the safeguarding procedures applicable to the trip.
- Young people have been suitably prepared for the trip and are clear as to the aims and programme.
- Young people and staff have developed and agreed on ground rules that are shared with parents.
- Sleeping arrangements have been planned and shared with the young people in advance.
- Clear staff roles are identified including "Safeguarding Lead" and/or "Activity Leader".

The Emergency Contact should be informed at the point of departure to confirm they are setting off and to provide them with the final list of people going on the trip.

Supervision

All trips must have adequate supervision. A full day trip must have a minimum of 2 workers, residentials must have a minimum of 2 workers. Careful consideration of the staffs' experience and skills should be taken into account when selecting staff to attend the trip.

Ratios should be a minimum of 1 worker to 8 young people. The workers should be mixed gender unless it is a single gender group. Exceptions can be made with written agreement from the line manager and an additional risk assessment having been recorded to support small groups of young people with one worker on short trips where they will be meeting up with additional staff. In addition, the following guidance with a common-sense approach must be adhered to:

- Staff must not transport individual young people (one to one) unless in an emergency or a lone working risk assessment has been carried out by your line manager.
- Staff and young people must be traveling to meet up with additional staff, for example taking three young people to a competition which will be staffed or on a visit to another Youth Zone.
- Consideration should be given to the behaviour of the young people and any risks or requirements for additional supervision.

Daytime supervision

- There should be a pre-discussed/arranged programme in place.
- Daytime 'downtime' in rooms should be avoided where possible but when it does take

place there should be an open-door policy.

Night-time Supervision

- There must be a pre-agreed rota in place for night-time supervision with 1 person on call all night.
- All young people on the residential should know who the person is and where they are located (ideally on the same floor/corridor as young people). This person/s should not be driving the next day if they have been awake throughout the night. On occasions where this is unavoidable, due consideration needs to be given to ensure staff are appropriately rested when driving.
- The room layouts and allocation should be discussed in advance with separate sleeping arrangements considered for young people based on gender, sexual orientation, age etc. Best practice would be to involve young people in the planning. There should be a separate risk assessment for any transgender or SEN young people to ensure appropriate support is in place.
- As a general practice, it is recommended that activities take place at specialist centres where sleeping arrangements and appropriate night-time supervision can be better managed; however, where sleepovers at Youth Zones are taking place the same principles apply of ensuring a worker is on call throughout the night (see above) and there are appropriate sleeping arrangements including a separate sleeping space for workers. For Youth Zone sleepovers, a member of staff from the host Youth Zone should be in attendance.

Additional needs

Due consideration must always be given to the needs of each specific group (night-time and daytime) dependent upon the needs of the individuals within it.

- Make sure the staff and volunteers are aware in advance of any additional support needs for each child and adult at risk. Consider the level of ability and stage of development of the children/young people who will be involved and think about any support they need.
- Where any young person is deemed particularly risky or at risk an Individual Young Person Risk Assessment, should be completed by their Youth Zones Safeguarding Lead and shared with the Safeguarding Lead and the Activity Leader before the activity.

Managing Young People's Behaviour

- There should be clear trip expectations in place that have been developed by young people and staff and shared with the young people and parents.
- When developing the expectations and undertaking risk assessments there should be full consideration of the relationship between young people and with staff e.g., how well the young people are known to the staff team and each other.

Safe travel for staff when transporting young people.

WEST has a duty of care under health and safety law to take all reasonable precautions when transporting young people. Please refer to OnSide's Health and Safety policy. When traveling in a minibus a member of staff must sit in the rear of the vehicle so they are able to deal with any incidents that may arise.

There will be occasions when staff/volunteers (over the age of eighteen) are expected or asked to transport children as part of their duties. Staff/volunteers who are expected to use their own vehicles for transporting children should ensure the vehicle is roadworthy, with a current MOT certificate, appropriately insured (for staff this means insurance for business use) and that the maximum capacity is not exceeded. Staff/volunteers are also required to

inform their line manager/supervisor of any driving convictions. Drivers should do their utmost to spend the least amount of time alone in a car with young people. When possible two adults should travel with the children/young people. Staff must not travel alone with one young person unless in an emergency or a lone working risk assessment has been carried out by your line manager.

There may be occasions where the child or young person requires transport in an emergency or where not to give a lift may place a child at risk. Such circumstances must always be recorded and reported to the Designated Safeguarding Lead and parents/carers. Staff/volunteers must;

- Ensure they are fit to drive and free from any drugs, alcohol or medicine which is likely to impair judgement and / or ability to drive.
- Be aware that the safety and welfare of the child is their responsibility until they are safely returned to a parent/carer.
- Ensure that there are proper arrangements in place to ensure vehicle, passenger and driver safety. This includes having appropriate insurance for the type of vehicle being driven.
- Ensure they follow the Code of Conduct.
- Ensure that any impromptu or emergency arrangements of lifts are notified and if practical agreed with the Designated Safeguarding Lead/Session Lead.

Responsibilities/Safety of occupants

The driver of a vehicle MUST ensure that the vehicle is in a safe and useable condition prior to any use. This is a general legal requirement and is particularly important in relation to the safety of young people.

The Road Traffic Act states that the driver of a vehicle is responsible for any person aged under 14 to be wearing a seatbelt when present in a moving vehicle. For the purposes of this policy, WEST makes the driver responsible for ALL its passengers to wear seatbelts when transporting young people. Prior to the commencement of any journey, ALL occupants must be wearing seatbelts, and this will be confirmed by staff members verbally and visually checking the occupants of the vehicle.

The Driver's Responsibilities

WEST has overall responsibility for ensuring a safe service is provided. However, every driver is also personally responsible for making sure that their vehicle is roadworthy before they take it out onto the road. Indeed, it is the driver's license that will suffer if the vehicle is found to be defective. It is also the driver's responsibility to ensure the safety of passengers, including the use of seat belts prior to setting off.

Drivers take responsibility for ensuring they have adequate sleep the night before. If for any reason the staff member does not feel fit and well enough to drive then they need to inform their manager (or another designated person if their manager is unavailable) so that alternative arrangements can be made.

If a driver begins to feel tired during a journey, he or she should find somewhere safe to stop (not the hard shoulder), drink one or two cups of strong coffee or other high caffeine drinks and (if possible) take a nap of about 15 minutes.

After the Trip

1. Immediately let the Emergency Contact know the group has arrived back safely and report any incidences.
2. Complete an evaluation or debrief.
3. Record the details of any incidents according to WEST incident reporting procedures.

It is acceptable to complete this form once for a number of visits to the same place e.g. a six-week course, as long as the emergency contract is arranged for each event and attendee details are up-dated for each event.

Ensure the Emergency Contact has agreed to and is aware of the visit and has been provided with a copy of this form. They must also be provided with a copy of the information outlined below, as well as copies of the consent forms of all young people on the trip **or** details of the young people including address and phone number of next of kin/emergency contact, these can be provided via Salesforce and the emergency contact should ensure they have access to them for the duration of the trip.

Offsite Trip Check List				
Trip Details				
Trip				
Group description				
Dates				
No of participants:	Male		Female	
Full venue name & address including phone number				
Vehicle and route details, pick up point and times including vehicles registration or name of hire company				
Departure and arrival details	Set off date and time		Return date and expected arrival time	
Trip leader		Other workers detail (name, contact number and emergency contact included for any external staff)		
Emergency Contact (name and agreed contact number including "out of hours")				
Item			Details	Signed
H&S				
1	Risk Assessment completed and approved			

2	The centre/ providers public liability insurance has been checked (when applicable)		
3	The centre/ providers have an Adventure Activities License(where appropriate)		
4	The activity instructors are appropriately qualified		
5	Insurance for scope and type of activity checked		
Information and Consents			
6	Send activity information and letter (can be electronic) to parents or guardians		
7	Consent forms (with medical and photo consents) completed by parent/guardian for all participants and added to Salesforce		
8	Forms checked for medical conditions / dietary requirements and centre/ providers informed where necessary and added to Salesforce		
9	Activity programme and timetable completed		
10	Physical copies of consent obtained to be added to Salesforce		
Staffing and Group			
11	Trip team aware of who Emergency Contact is and have access to their contact details.		
12	Emergency Contact fully briefed on trip details and has copies of consent forms and activity timetable as well as emergency contact details for workers		
13	Agreed with Emergency Contact times to call inform of safe arrival/ departure and activity updates, this will be recorded within the programme		
14	Right ratio of workers in place to support trip with appropriate gender split		
15	Sleeping arrangements planned		
16	Clear staff roles agreed including identified "Safeguarding Lead" and/or "Activity Lead"		
17	Group full briefed and prepared		
Transportation			
18	Minibus/Vehicle checked for appropriate certificates and insurances if hiring and roadworthiness (if personal vehicle a copy of business use insurance must be help on file)		

19	Risk around driving time and loading of minibus are managed		
20	Lugged will be security packed and all exit routes will be kept clear during transport		

Network-wide events or trips should be planned in line with the **Safeguarding Network Joint Activities Guidance** (see appendix 10).

Appendix 7: Outdoor Education, Offsite Educational Visit & Residential Visit Providers Form

When considering using an external provider to deliver adventure education, educational visits and residentials, WEST staff must seek written assurances that the provision complies with good practice for offsite visits.

The provider is asked to give careful consideration to the statements below, respond as appropriate and then sign the form as confirmation that the standard of service provided will meet the conditions listed. The provider should indicate by a cross any conditions that cannot be met. Any specifications which do not apply to the provision should be marked as Not Applicable (many will not apply to providers not offering adventure or residential experiences).

Section A – All visits	
Health, Safety and Emergency Procedures	Y/N/NA
The provider complies with relevant Health and Safety regulations, including the Health and Safety at Work etc. Act 1974 and associated regulations, for visits taking place in the UK, and has a Health and Safety policy and recorded risk assessments that are available for inspection	
Accident and emergency procedures are maintained and records are available for inspection	
Fire risk assessments and emergency plan exist, are in place in line with The Regulatory Reform (Fire Safety) Order 2005, and are available on request	
Vehicles/Drivers if provided	
All vehicles are roadworthy and meet the requirements of the relevant regulations in the country in which they are being used	
All drivers hold appropriate licences and have undertaken relevant driver training for the vehicles used	
Staffing	
All reasonable steps are taken to check staff, who have access to young people, for relevant criminal history and suitability for work with young people including holding on file a DBS check less than 3 years in age, which can be provided on request	
Insurance	
The provider has public liability insurance for at least £5 million with a clause giving 'indemnity to principal' (copy of Certificate of Insurance to be attached)	
Accommodation (if residential accommodation is provided)	
There are appropriate security arrangements to prevent unauthorised persons entering the accommodation	
Separate male and female sleeping accommodation and washing facilities are provided and staff accommodation is close to the young people	
Section B – Outdoor and Adventure Activities	
Adventure Activities Licensing Authority (AALA) License, if applicable	
If applicable, please provide license number	

The provider operates a policy for staff recruitment, training and assessment which ensures that all staff with a responsibility for participants are competent to undertake their duties	
The provider maintains a written code of practice for activities which is consistent with relevant National Governing Body guidelines and/or, if abroad, the relevant regulations for the country concerned	
Staff competencies are confirmed by appropriate National Governing Body, and staff have qualifications for the activities to be undertaken or they have had their competences confirmed by an appropriately experienced Technical Adviser	
Where there is no National Governing Body for the activity, operating procedures, staff training and assessment requirements are explained in the provider's code of practice	
Participants will, at all times, have access to a person with a current first aid qualification; staff are practiced and competent in accident and emergency procedures	
There is a clear definition of responsibilities between providers and visiting leaders regarding supervision and welfare of participants	
All equipment used in activities is suited to the task, adequately maintained in accordance with statutory requirements and current good practice, with records kept of maintenance checks where necessary	
The provider will take all reasonable steps to allow inclusion and participation of any young people who have special needs or have a disability, following a risk assessment process, in line with the Equality Act 2010	
Section C – Independent visits where young people attend unaccompanied and the provider assumes loco parentis for a young person during the activity or event	
The provider will ensure adequate supervision of young people at all times with both male and female staff available at all times (for mixed gender groups) to provide both supervision and pastoral support	
Groups rules and codes of conduct are made clear to young people and any behaviour issues or concerns are reported back to OnSide staff	
Copies of consent forms which include medical details, emergency contact and consent for emergency medical treatment are held for the duration of the activity	
A clear safeguarding policy is in place (please attach a copy) and all concerns, issues and incidents are reported back to WEST staff	
Signed	
Date	
Name	
Position or job title	
Tel:	
Email:	

Appendix 8: OnSide Network - Incident Escalation Policy

This policy is intended to reflect the collaborative nature of our relationship as a Network and ensure that any incidents which could bring the Network into disrepute or damage the reputation of OnSide or the Youth Zones are reported in a timely manner so mitigative action can be taken as appropriate. It is intended to work alongside individual Youth Zone's Safeguarding policies and procedures. It does not in any way replace the Youth Zones' policies or lessen their individual responsibility towards ensuring the safety and wellbeing of young people.

This policy outlines the appropriate level of response and necessary immediate actions for different levels of crisis or issues both onsite and offsite and for singular or multiple Youth Zone activities. For singular Youth Zone activity it will be the Activity Leader that will initiate the response, for multiple Youth Zone activity it will be the Activity Leader or the Safeguarding Lead. Depending on the nature of the incident it could then be the Activity and/or the Safeguarding Lead who leads on the follow up reporting– for brevity it has consistently been referred to as Activity Leader in this policy. The majority of incidents should be reported to OnSide's Safeguarding Manager however there are some that may be more appropriate to report to the OnSide CEO.

Purpose

The purpose of this document is to provide a high-level guidance when dealing with an unfolding issue/incident and to explain the process for the efficient reporting of incidents classified as Level 4 and 3 to OnSide.

What is an incident?

An incident is any unplanned event that:

- results in injury or ill health of people;
- results in or damage to and / or loss of property including data losses;
- has or has the potential to impact upon the reputation of a Youth Zone and the Network
- is an allegation of misconduct;
- and/or a safeguarding disclosure and a near miss, i.e., an unplanned event that had the potential to result in injury, illness or damage but it did not.

Seriousness or 'level' of an incident is based on the anticipated and /or actual impact on affected persons, as well as how the incident is likely to affect the Youth Zone and the Network. There are three main factors that influence how serious an incident is and its incident level:

- **Severity** – for example, how serious the injury or the allegation or near miss.
- **System failure** – if an injury or allegation or near miss could be the result of a breach in operating systems, the incident is likely to be more serious for the Youth Zone and the Network than if it occurred despite proper systems and procedures being in place and followed.
- **Media** – if the incident has the potential to receive widespread media attention.

Level 4 Catastrophic Harm

Crises that have the potential to significantly compromise future operations of individual Youth Zones and/or OnSide and the integrity of Network

Criteria	Examples NB: This is not intended to be a comprehensive list of all incidents	Incident reporting procedures
<p>A major incident resulting from an accident, or other failings/negligence, that results in death, threatens life or there is a high likelihood of life changing injury</p> <p>Incidents that are likely to attract high levels of negative national, regional and local press / social media attention to the Network.</p> <p>Major safeguarding incident or security failing</p> <p>Occurrence that critically affects the Network or the individual organisation's ability to continue operating</p>	<p>Major infrastructure failing such as building collapse or fire during activity/residential.</p> <p>Fatality on an activity.</p> <p>Immediate and ongoing life-threatening injuries</p> <p>Major multiple injured people e.g. from road traffic accident</p> <p>Abduction/attempted abduction</p> <p>Sexual or other serious assault or sexual exploitation on activity, whether committed by young person or staff/volunteer. Including rape, child sexual exploitation, serious sexual allegation (physical) including grooming.</p> <p>Charity failed to carry out DBS checks which would have identified that a member of staff or trustee was disqualified in law (under safeguarding legislation) from holding that position.</p> <p>Abduction/attempted abduction.</p> <p>A staff/volunteer computer/work phone is found to contain images of child pornography.</p> <p>Missing young person from a Youth Zone for longer than 12 hours</p> <p>Executive misconduct</p>	<p>Activity Leader to contact emergency services and/or other statutory authorities as appropriate</p> <p>Activity Leader to notify their YZ emergency contact within 1 hour of incident with full details, or sooner if possible</p> <p>YZ emergency contact to inform their CEO, the emergency contact of any other YZs present, within 1 hour of the incident</p> <p>CEO/Activity Leader to report incident to OnSide Safeguarding Manager</p> <p>OnSide Safeguarding Manager to contact OnSide Comms Team. OnSide will liaise with CEO to draft immediate holding statement and issue as and when appropriate. A crisis communications plan will be drafted and shared with relevant staff and Board members within 12 hours of the incident.</p> <p>Activity Leader to update emergency contact who will update YZ CEO, other YZ emergency contacts and OnSide with material changes as soon as possible.</p> <p>YZ/s and OnSide will support Activity Leader with standby crisis team</p> <p>Emergency contact assess need for counselling services</p> <p>CEO to complete the OnSide Network Incident Report Form (Appendix 1) and email to OnSide Safeguarding Manager within 24 hours of the incident occurring.</p> <p>OnSide Safeguarding Manager to report the incident (as reported on the OnSide Network Incident form) to the YZ/s Trustee from OnSide.</p> <p>YZ/s and OnSide to remain in contact until all agreed actions are completed.</p> <p>Both OnSide and the Youth Zone to report to The Charity Commission online based on the reporting a serious incident involving a partner guidance.</p> <p>https://ccforms.charitycommission.gov.uk/report-a-serious-incident</p> <p>Report to RIDDOR if the incident meets Reportable Regulations.</p> <p>https://notifications.hse.gov.uk/riddorforms/Injury</p> <p>If the incident involves young people from a different Youth Zone it should also be reported to their Youth Zones' Safeguarding Co-ordinator using the OnSide Network Incident Reporting Form (Appendix 1) within 24 hours of the incident occurring.</p>

Level 3- Major Harm

Very serious incidents that have profound immediate and long-term effects on individuals and, potentially the future operations of individual Youth Zones or OnSide and the Network

Criteria	Examples NB: This is not intended to be a comprehensive list of all incidents.	Incident reporting procedures
<p>Major incident resulting from an accident or other events that do not result in death or directly threaten life</p> <p>Major incidents where negligence, fault or liability of the YZ, its partners or local delivery partners assessed as unlikely</p> <p>A significant near miss that <i>could realistically</i> have led to death or major injury whilst on the activity</p> <p>Likely to attract adverse national, regional and local press / social media attention</p>	<p>Potentially life-changing injury/disability that requires emergency surgery</p> <p>Multiple seriously injured persons</p> <p>Serious road traffic accident</p> <p>Death when confirmed from natural causes</p> <p>Commercial failure or any major infrastructure issue that will affect day-to-day operations</p> <p>Serious safeguarding issue with immediate safety concerns</p> <p>Possession of significant quantities of drugs by YP, staff or volunteer. Consideration of drug classification and quantity for potential de-escalation to lower incident category</p> <p>The police making an arrest of YP or member of staff/volunteer under any suspected crime</p> <p>Safeguarding allegation against staff</p> <p>Serious sexual assault (physical) including inappropriate touching:</p> <ul style="list-style-type: none"> • YP on YP • Staff on YP • Staff on staff <p>Serious young person on young person or staff non-sexual assault.</p> <p>Possession of offensive weapons including knives and acids.</p>	<p>Activity Leader to contact emergency services or other statutory authorities as appropriate</p> <p>Activity Leader to notify their YZ emergency contact within 1 hour of incident with full details, or sooner if possible</p> <p>YZ's emergency contact to inform their CEO and the emergency contact of any other YZs present, within 1 hour of the incident</p> <p>CEO/Activity Leader to report incident to OnSide Safeguarding Manager (or CEO if commercial failure, data breach or criminal activity).</p> <p>OnSide Safeguarding Manager to contact OnSide Comms Team. OnSide will liaise with CEO to draft immediate holding statement and issue as and when appropriate. A crisis communications plan will be drafted and shared with relevant staff and Board members within 12 hours of the incident.</p> <p>Activity Leader to update emergency contact who will update YZ CEO, other YZ emergency contacts and OnSide with material changes as soon as possible.</p> <p>YZ/s and OnSide will support Activity Leader with standby crisis team</p> <p>Emergency contact to assess need for Counselling services</p> <p>CEO to complete the OnSide Network Incident Report Form (Appendix 1) and email to OnSide Safeguarding Manager within 24 hours of incident occurring</p> <p>OnSide Safeguarding Manager to report the incident to the YZ/s Trustee from OnSide.</p> <p>YZ/s and OnSide to remain in contact until all agreed actions are completed.</p> <p>Both OnSide and the Youth Zone to consult the Charity Commission Guidance on what to report to establish if the incident needs to be reported by one or both based on the 'reporting a serious incident involving a partner' guidance.</p> <p>Report to RIDDOR if the incident meets Reportable Regulations. https://notifications.hse.gov.uk/riddorforms/Injury</p>

	<p>Non-recent (historical) safeguarding incident where YPis at immediate risk of harm.</p> <p>Missing young person for longer than one hour but less than 12 hours</p> <p>Significant loss of data that has data protection implications for YZ, it's partners or the Network</p> <p>Commercial failure or any major infrastructure issues that will affect day-to-day operations.</p> <p>Criminal activity involving staff or volunteers</p> <p>Abandonment of any residential center due to safety concerns.</p>	<p>Activity Leader to contact emergency services and/ or other statutory authorities as appropriate.</p>
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Level 2-Moderate Harm

This category is for medium level incidents with short to medium term impacts on individuals and the future operations of individual Youth Zones or OnSide

Criteria	Examples Note: This is not intended to be a comprehensive list of all incidents.	Incident reporting procedures
<p>Medium level incident resulting from an accident, or other events, that causes non-life changing injuries including injuries that require hospital attendance for diagnosis or treatment</p> <p>A near miss that could have led to a serious injury</p> <p>Serious safeguarding issue with no immediate safety concerns.</p> <p>Possibility of attracting <i>local</i> media attention</p>	<p>Fractured limbs through no obvious fault of provider</p> <p>Multiple minor injuries from the same incident</p> <p>Work-related accidents resulting in staff being off work for more than seven consecutive days</p> <p>Serious pre-existing medical condition that causes YP to visit hospital during activity</p> <p>Minor theft/criminal damage</p> <p>Sexual allegation (verbal) including suggestive language, sharing/showing/sharing sexual images on electronic devices and unwanted sexting:</p> <ul style="list-style-type: none"> YP on YP Staff on YP Staff on staff <p>Possession of small quantities of drugs or alcohol on activity. Consideration of drug classification and quantity for potential escalation to higher incident category</p> <p>Safeguarding concern not related to Youth Zone and young person believed to be at risk.</p> <p>Non-recent (historical), not referred yet and not believed to be at immediate risk of harm.</p> <p>Temporarily lost/missing young person from residential for less than one hour.</p>	<p>Activity Leader to contact emergency services or other statutory authorities as appropriate</p> <p>Activity Leader to notify YZ/s emergency contact/senior manager at earliest opportunity on the same day, or sooner if possible without compromising immediate operational response priorities</p> <p>Remain alert for indications of elevation to Category 3/4 or if is RIDDOR reportable (see RIDDOR Regulations) and do not delay or withhold response strategies</p> <p>Activity Leader to complete written report as per own YZ procedures and report on activities involving more than one YZ, to OnSide Safeguarding Lead within 24 hours of the incident occurring.</p> <p>If the incident involves young people from a different Youth Zone it should also be reported to their Youth Zone's Safeguarding Coordinator using the OnSide Network Incident Reporting Form (Appendix 1) within 24 hours of incident occurring</p>

Level 1 Low Harm

Incidents that are dealt on a more regular basis by the individual Youth Zones or OnSide

Criteria	Examples Note: This is not intended to be a comprehensive list of all incidents.	Incident reporting procedures
<p>A minor incident resulting from an accident, or other events, that causes minor injuries only</p> <p>Other incidents that do not require the attendance of police or other external agencies</p> <p>Safeguarding disclosures not related to other young people or staff.</p> <p>Safety equipment failure not resulting in injury</p>	<p>Sprains, abrasions, bruising, minor cuts. Includes injuries that do not require hospital attendance for diagnosis or treatment during the treatment</p> <p>Illegal activity on a programme by participant/service user when police or other agencies not in attendance</p> <p>Work related accidents resulting in staff being off work for 3-7 consecutive days.</p> <p>Less serious pre-existing medical condition that interrupts participation.</p> <p>Young person on young person threats of violence</p> <p>Behavioural issues or antisocial behaviour</p> <p>Safeguarding allegation involving young people with no immediate safety concerns.</p> <p>Psychological issues that occur during the activity, including minor self-harm and eating disorders that do not represent an immediate risk to safety.</p> <p>Less serious pre-existing medical condition that interrupts participation.</p> <p>Work-related accidents resulting in staff being off work for 3-7 consecutive days</p> <p>Loss or damage to equipment, cash or property</p>	<p>Activity Leader to treat as per First Aid/ safeguarding training and in accordance with YZ Health and Safety or Safeguarding procedure.</p> <p>Record and report incident as per own YZ procedures. On activities involving more than one YZ all accidents/incidents and allegations should be reported to the Safeguarding Co-ordinator at the Youth Zone of the young people involved using the Network Incident Reporting Form within 24hrs.</p> <p>Remain alert for indications of elevation to Category 2/3 May not be RIDDOR reportable (see RIDDOR Regs)</p> <p>If the incident involves young people from a different Youth Zone it should also be reported to their Youth Zones' Safeguarding Co-ordinator using the OnSide Network Incident Reporting Form (Appendix 1) within 24 hours of the incident occurring.</p>

Appendix 9: OnSide Network Incident Report Form

Incident date:		Incident level	Level 4 <input type="checkbox"/> Crisis that could significantly compromise the integrity of the network
Location of incident:			Level 3 <input type="checkbox"/> Very serious incident that may have profound and/or long-term effects
YZ's involved:		For information/ action	For information only
Incident overview			
Action taken up to date			
Follow up action required including any support needed from OnSide			

Potential implications	
Statement to be shared with YZ's OnSide Trustee.	
Statement for Trustee's response if questioned about the incident.	
Lead contact	

Appendix 10: Safeguarding Network Joint Activities: Good Practice Guidance

The OnSide Network sees the safeguarding of children and young people as of paramount importance in the planning and delivering of our activities and services. We recognise that the high standards implemented by each Youth Zone can require some aligning, with respective roles clarifying, when Youth Zones come together to deliver joint activities. This Guidance has been produced by the Network to provide this additional clarity.

This Guidance is intended to work alongside Youth Zone's individual Safeguarding Policies and Procedures. It does not in any way replace the Youth Zones' policies or lessen their individual responsibility towards ensuring the safety and wellbeing of young people from their Youth Zone. It is intended to ensure clarity of roles, responsibilities and expectations when Youth Zones come together.

Safeguarding Roles and Responsibilities

- Safeguarding is everyone's responsibility; however, on joint activities there will be an onsite Safeguarding Lead that should be nominated as early as possible.
 - The Safeguarding Lead will be from OnSide or a participating Youth Zone wherever possible.
 - This is likely to be someone from the Youth Zone hosting the event or organising it.
 - The Safeguarding Lead will be a different person to the person organising the event (the Activity Leader) to aid dedicated focus.
 - The OnSide Safeguarding Manager will be involved of the planning of the joint activity and will be the offsite emergency contact during the activity.
 - There should be a person clearly named as on call for each Youth Zone at the event. Their details should be shared with the onsite Safeguarding Lead and OnSide Safeguarding Manager.
- Participating organisations should work together to develop a clear written plan of roles and expectations, outline of planned activities and risk assessments for all joint activities. These should be shared sufficiently in advance to give time for feedback and agreement, followed by a meeting/conference call to ensure clarity of understanding. On the activity there should be a briefing at the start of each day and a debrief at the end of each day to capture all opinions and comments.
- There should be a clear behaviour and boundaries agreement in place for staff and volunteers to ensure a common understanding and messaging of how the team interact with young people shared prior to the activity and revisited in briefings.
- Where any young person is deemed particularly risky or at risk an individual risk assessment should be completed by their Youth Zone and shared with the Safeguarding Lead and the Activity Leader before the activity.
- Any incident or allegation, as identified in the Network Incident Escalation Policy, should be reported directly to the OnSide Safeguarding Manager, who will keep a written log and report it appropriately in accordance with the Incident Escalation Policy but always to the Safeguarding Officer at the young person's Youth Zone.
- The local authority in whose area a young person is found in circumstances that require emergency action (the first authority) is responsible for taking emergency action. If the child is looked-after by, or subject of a child protection plan in another local authority, the first authority must consult the authority responsible for the child. Only when the second local authority explicitly accepts responsibility (to be followed up in writing) is the first

authority relieved of its responsibility to take emergency action (Working Together to Safeguard Children 2018).

- Concerns should be clearly laid out with all details available including clarity on whether witnessed, an allegation, admitted or denied.
- Immediate responses are to be actioned by the Safeguarding Lead on the activity as outlined in the Incident Escalation Policy.
- The Youth Zone's Safeguarding Officer is responsible for carrying out follow up work/support/referrals.
- The Safeguarding Lead and Activity Leader have a responsibility to support the Youth Zone's Safeguarding Officer in their duty to investigate or report any concerns by ensuring prompt clear communication or meeting as needed.

Managing Young People's Behaviour

- There should be a pre-agreed behaviour plan including consequences for young people –most likely proposed by the Safeguarding Lead and/or Activity Leader. It is expected a zero-tolerance approach.
- In defining the behaviour plan and undertaking risk assessment there should be full consideration of the relationship between young people and with staff e.g., how well the young people are known to the staff team and each other.
- Where possible young people attending joint residentials should have at least one member of staff from their Youth Zone with them. There may be cases where this is not possible or necessary (e.g., Ambassadors) the Youth Zone will decide this at their own discretion.

Night-time Supervision

- There must be a completed risk assessment signed off by both the line manager of the lead person on the residential and also the Safeguarding Manager prior to the start of the residential. The risk assessment will need to include the night time requirements of the young people participating in the residential, including the need for waking night supervision on the first night. Waking night supervision on the first night will form part of the assessment of night time supervision requirements for the remaining nights of the trip, in addition to any other factors which present either before or during the residential.
- There must be a pre-agreed rota in place for night-time supervision with 1 person on call all night being the minimum supervision level required.
 - All young people on the residential should know who the person is and where they are located (ideally on the same floor/corridor as young people).
 - The room layouts and allocation should be discussed in advance with separate sleeping arrangements considered for young people based on gender, sexual orientation, age etc. The decision-making rationale should be recorded. Best practice would be to involve young people in the planning.
- Transgender young people have the right to choose which toilet, facilities, and bedroom they use. They also have the right to sleep in the room of their identified gender or, if they feel more comfortable, using toilets, facilities and a bedroom of their assigned gender. If another young person is concerned or uncomfortable being in that bedroom, they have the right to move rooms. There should be a separate risk assessment for any transgender or SEN young people to ensure appropriate support is in place.
- As a general practice it is recommended that activities take place at specialist centres where sleeping arrangements and appropriate night-time supervision can be better managed however where sleepovers at Youth Zones are taking place the same principles of night time supervision (see above) apply and there are appropriate sleeping arrangements including a separate sleeping space for workers. For Youth Zone sleepovers a member of staff

from the host Youth Zone should be in attendance.

Daytime Supervision

- There should be a pre discussed/arranged programme in place
- Daytime 'down time' in rooms should be avoided where possible but when it does take place there should be an open-door policy.

Appendix 11: Onsite Procedures - Responding to Incidents

Onsite Procedures - Responding to Incidents

It is recognised that incidents will still occur both involving young people in WEST and others from outside impacting on WEST that cannot be mitigated against and need to be dealt with appropriately on an immediate basis.

What is an incident?

An incident is any unplanned event that:

- results in injury or ill health of people;
- results in or damage to and / or loss of property including data losses;
- has or has the potential to impact upon the reputation of WEST, OnSide or the Network
- is an allegation of misconduct;
- and/or a safeguarding disclosure and a near miss, i.e. an unplanned event that had the potential to result in injury, illness or damage but it did not.

This procedure should be read alongside the **OnSide Network - Incident Escalation Policy, Appendix 7** of the Safeguarding Policy. This policy outlines the appropriate level of response and necessary immediate actions for different levels of crisis or issues both onsite and offsite.

Examples of these incidents could include:

- Accidents or injuries resulting from participation in activities.
- Fights involving young people (inside or outside the building).
- Other adults entering WEST displaying aggressive behaviour.
- Young people entering the building with weapons.
- Young people or adults trying to enter the building under the influence of alcohol or drugs.
- Child protection incidents on the premises or involving workers outside the center.
- Fire
- Gas / noxious fumes leakages.
- Severe damage to the building.

Although this is not an exhaustive list, the actions outlined below can be applied to similar situations as appropriate. The first duty of staff is to keep themselves, young people and colleagues safe. In practice this will often mean ensuring young people who are engaged in activities away from the incident remain so or removing young people from the vicinity of any incident. Young people should be prevented from recording any incident on mobile devices.

Accidents Injuries and First Aid

Minor Accident of Injury

If a young person has a minor injury and your level of **concern is low** i.e., minor cuts, grazes, bruises:

- Administer first aid by a qualified First Aider, if appropriate.
- Record details on a minor accident form and file it at reception for review
- Allow the young person time to recover in a quiet place with supervision
- Consider informing parents, particularly if the young person is upset or wished you to do

SO

If your level of **concern is moderate to high**

- Administer first aid by a qualified First Aider, if appropriate
- Remove the young person if safe to do so to a quiet space
- Ring 111 for advice.
- Contact guardians to arrange collection and discuss next actions which may be:
 - Take direct to nearest accident and emergency to be met by parent/carer, take all the young details and personal belonging with you and a staff member must stay with the young person until parent arrives.
 - Parent/carer collects young person from the Youth Zone
- Complete an incident form and pass onto your line manager.
- Phone the Head of Youth Work to inform them what has happened and to ensure they are equipped to deal with any further enquires

For all serious injuries always call 999 for an ambulance immediately

For all minor injuries with involved a head injury

- Inform the parents/carers by telephone of the accident. The general principle is that anyone who has a head injury needs observing for 24 hours
- Complete an accident form if not already done so

All incidences of young person losing consciousness will require a young person to attend hospital with staff/guardian or ambulances depending of severity

Serious accident or injury

- Assess the situation so you are clear of the extent of injury, number of people involved.
- At least one worker should stay with the injured person / people, another should locate and notify the lead worker immediately who will call the emergency services and the parents/ guardians (in a fatality or critical situation it is likely to be the Police that contact parents).
- The trained First Aider should provide the necessary first aid to the casualty, up to the level they are qualified to perform. This shall continue until emergency personnel arrive on the scene.
- If it is possible to safely remove the uninjured person / people to a safe more private location do so, if not the rest of the young people should be moved well away from the vicinity.
- Workers should be vigilant in ensuring mobiles are not used to photograph or video the incident.
- In the event that the injury or illness results in death, the victim should not be moved, and the surroundings should not be disturbed. All witnesses to the fatality should remain on the scene until the emergency services have taken control and authorised movement.
- The rest of the workers should stay focused on keeping young people calm, engaged and away from the incident.
- The names and addresses and phone numbers of witnesses should be obtained, the need to handle communication sensitively should be explained and if possible, the witnesses should be prevented from telling others until the incident has been cleared and parents informed
- Ensure if possible that the injured are accompanied to hospital by a worker or guardian. The Head of Youth Work and Chief Executive should be informed by phone as soon as possible. They will prepare a holding message with the help of OnSide for the media until

full statement can be given.

- If there is any potential for a liability inquiry the staff and volunteers working in the area of or responsible for the activity should remove themselves from the session.
- There should be no communication with any other party about the incident (cause or consequence), particularly the media but also other workers friend's family etc. and do not release names of involved or injured participants other than to the police and medical services.
- If possible, trained personnel should debrief any young people who witnessed the incident and provide initial counselling.
- Staff and volunteers present at the time of the incident should be monitored by their line manager in case of shock or trauma. If possible, immediate counselling should be provided
- When possible, an incident form should be completed and passed to the most senior member of staff available and a copy provided to the Chief Executive and Head of Youth Work
- If the accident results the young person being taken directly to hospital for treatment (or death) a RIDDOR form (F2508) must be completed online at www.hse.gov.uk/riddor. The form will then be submitted directly to the RIDDOR database. A copy of this form should be kept with the incident.

Appendix 12: Lone Working with Young People Policy and Procedure

WEST is committed to keeping staff, volunteers and young people safe. Whilst we generally regard it as best practice to have at least two adults present when working with young people, there are occasions where, to best support young people, this is not feasible and the need for lone working may arise. Lone workers should not be at any more risk than other employees and therefore extra control measures are required that take account of the work involved and the unforeseeable emergencies. This policy focuses on keeping everyone safe should the necessity for lone working with young people arise.

Purpose

Lone workers are defined by the Health and Safety Executive (hse.gov.uk) as “those employees who work by themselves without close or direct supervision”. For the purpose of this policy, lone working includes any work situations where a member of staff is working on their own with a young person or a group of young people for a prolonged period and/or possibly away from other staff and volunteers.

There are two main situations in which the need for lone working can arise:

1. In a reactive situation. Examples include: transporting young people in emergency or unavoidable situations e.g., to A&E, where a young person requests an ad hoc one to one meeting, or where a young person's behaviour warrants the need for an individual meeting outside of the group.
2. As part of a planned structured piece of work. Examples include mentoring or providing advice support and guidance e.g., with members of the youth zone that may be vulnerable, supporting young people on work placements, attending late meetings or undertaking visits.

It is WEST' policy that volunteers should not lone work unless they are undertaking a specific and specialist role for which they have been trained and will be regularly supervised, for example mentoring.

Key Principles

- The need to lone work should be carefully assessed by a line manager – consider if it can be avoided or if another worker can attend, either from WEST or a partner organisation, who is trained and appropriately vetted.
- If there is a need to lone work, the worker should discuss the event/situation with their line manager. If it is agreed that lone working is essential, then a risk assessment must be completed, approved, and signed by the line manager and stored on SharePoint. In a reactive situation the line manager or the safeguarding manager should be informed, and they will undertake a dynamic risk assessment.
- Whether reactive or planned, a record should be kept of lone working situations including names, dates, times, location, reason for the contact, a summary of the activity or discussion and outcome and added to Salesforce.
- Workers should have appropriate background knowledge of the young person, considering if there any concerns over the behaviour or volatility of the young person, including if they pose a specific risk to staff or volunteers and of any medical information.
- Workers should have the contact details for young people's parents/carers and ensure the parents/carers have theirs in case of an emergency. There should also be an emergency plan agreed with the line manager with young people briefed on what to do in an emergency.
- The setting should be visible and/or public such as a café or in a shared building rather than a secluded or remote meeting place.
- Workers should ensure they have a well charged mobile phone or another method of communication with them at all times and that the line manager or safeguarding manager knows where they are and for how long.
- Lone working must not be undertaken if the young person is under the influence of drugs or alcohol.
- If the young person becomes distressed or angry or behaves inappropriately in a way that is likely to cause offence or harm to themselves, the worker or others in a lone working situation, this must be reported to the Line Manager or Safeguarding Manager immediately, who will take appropriate risk assessment action.
- If, whilst lone working, a young person makes an allegation about the worker or another volunteer or staff member, the worker must ensure the young person is safely returned home and then immediately inform their Line Manager/Safeguarding Manager.
- Home visits should only be made where necessary, with prior arrangement with the family, where there is an appropriate risk assessment in place and should always be recorded on Salesforce.
- Always follow procedures for lone working and use common sense.

Management of Lone Working

Line managers are responsible for the following decisions and processes:

1. When a lone working necessity is identified, ensuring a risk assessment is completed.
2. Deciding which trained person(s) will carry out the risk assessment to identify all possible lone working situations; deciding who will review them and how often.
3. Deciding what arrangements or mitigations are needed to ensure, so far as is reasonably practicable, that lone workers are not exposed to significantly more risks than employees

who work together. Further details of factors to consider are outlined in the Health and Safety Policy.

4. Ensuring the lone worker is aware of the procedure for lone working.
5. Providing any necessary equipment, information, or training to support individual's safety. It is important to note that, where a training need is identified in a risk assessment, then that training is mandatory and must be delivered within a suitable timeframe.
6. Ensuring the lone worker has an enhanced DBS check (undertaken within the last three years and for the appropriate workforce (child)).
7. Deciding who will be responsible for monitoring the lone working system to ensure it is working.
8. Deciding who will implement any emergency procedures where necessary, and what these will entail.
9. Implementing a safe system of work to ensure that the lone worker can be traced, and their safety checked.

Understanding and Managing Risk

It is important to be aware of the risks involved in lone working with children and young people. The potential risks to staff or volunteers include, but are not limited to, allegations of misconduct or allegations of sexual or physical abuse of a child/young person, risk of violence or abuse towards the worker, inability to respond appropriately to a health and safety situation.

A risk assessment is the first step towards staying safe. A specific risk assessment must therefore be undertaken for all activities/situations/groups/individuals where lone working can occur (Appendix 1). The aim is to ensure that risks are managed and positive outcomes are achieved with a minimum possibility of harm.

The risk assessment should identify who is at risk and from what, including if current control measures for lone working are adequate, or if more needs to be done to ensure that the person is not at a greater risk than any other employee.

Situation	Considerations	Mitigation Measures
All lone working situations	<p>Type of activity</p> <p>Suitability of the location including the location of the fire exits and the evacuation plan</p> <p>Time of day</p> <p>Behaviour and abilities of the young person including:</p> <ul style="list-style-type: none"> ○ Relationship with the young person ○ Risk of allegation of abuse ○ Risk of physical assault on staff ○ Possibility of substance misuse by young person <p>Any special medical needs of the young person or worker.</p>	<p>Communication with line manager/safeguarding manager</p> <p>Complete a risk assessment that must be read, approved, and signed by the appropriate line manager and stored on Salesforce.</p> <p>Use a visible location</p> <p>Drug/Alcohol awareness</p> <p>De-escalation training</p> <p>Mobile phone fully charged</p> <p>You can read more about health and safety for lone working on the Health and Safety executive website https://www.hse.gov.uk/toolbox/workers/lone.htm and in OnSide's Health and Safety policy.</p>

	The experience and training levels of the worker	
Close working relationships (including mentoring)	A young person may develop an infatuation with an adult who works with them.	<p>Always follow the Code of Conduct Policy (Appendix 4 of the OnSide Safeguarding Policy).</p> <p>Set appropriate professional boundaries and do not be overly familiar with children and young people.</p> <p>Never give out your personal contact details, follow or interact with children or young people on your own personal social media account.</p> <p>Infatuations should be dealt with sensitively and appropriately to maintain the dignity and safety of all concerned, making sure the worker's own behaviour is beyond reproach.</p> <p>Discuss it at the earliest opportunity with line manager/Designated Safeguarding Lead, so appropriate action can be taken</p> <p>Lone working staff to have monthly supervision meeting with the Safeguarding Manager to discuss individual support they are providing.</p>
	A young person may become distressed, angry or make an allegation about the adult that is working with them.	Report to line manager or safeguarding manager who will take appropriate risk assessment action and advise you of the next steps to follow.
	Staff/volunteer anxiety due to developing a feeling of extra responsibility for one young person	<p>Staff and volunteers must maintain professional boundaries to avoid the "rescuer" role. Establishing and maintaining appropriate and effective interactions support staff/volunteers from being too involved and feeling like they must solve all of the young person's needs or problems.</p> <p>Lone working staff to have monthly supervision meeting with the safeguarding manager to discuss individual support they are providing</p>
Transporting Young People Please read Offsite	Car journeys create a secluded one-to-one situation and should therefore be avoided where alternative transport options are possible. Where alternatives are not possible, these journeys should	Car insurance for business purposes (including the transportation of young people) cover in place and evidence shared with HR

activity Checklist Including Transporting Young People Policy Appendix 5 of the OnSide Safeguarding Policy Full Version.	<p>be undertaken only with a specific purpose relevant to the work of OnSide, by prior arrangement, and with the permission of the young person and their parent/carer.</p> <p>Breakdown of your vehicle</p> <p>Young people jumping out of the vehicle</p> <p>Getting lost</p> <p>Road traffic accident</p>	<p>Seek verbal consent from parent or guardian in emergency situations and follow up with SMS message if possible</p> <p>Is public transport or taxi a suitable alternative? Time and use of a vehicle are important factors in an emergency</p> <p>Cover procedures in the risk assessment</p> <p>Seatbelts provided and worn</p> <p>Young people to sit in back of the vehicle</p> <p>Plan route before setting off</p> <p>Be in contact with the Safeguarding Lead/buddy so they are aware of your planned departure and arrival time, back up by constant communication</p> <p>Seek verbal consent from parent or guardian in emergency situations and follow up with SMS message if possible</p>
Health and safety situation	<p>Young people are properly supervised at all times. Think about what you would do if you needed extra support.</p> <p>May be a response to an unplanned situation, e.g. First Aid, offering 1-2-1 support, although other members of staff are present</p> <p>Dealing with unplanned issues such as behaviour</p>	<p>Well planned activities with consideration given to make up and nature of group and location of activities</p> <p>Please refer to the Health and Safety Policy for procedures to follow. Stay in public areas</p> <p>First aid training</p> <p>Lone working buddy system in place.</p>

Training

Relevant additional training will be required for lone workers, to promote:

- A reduction in possible accidents or incidents
- A reduction in the seriousness of incidents.
- An improved response to incidents.
- Confidence for staff to avoid panic reactions in unusual situations.

Training and support programmes will include:

- Attending first aid, boundaries and behaviour de-escalation training and health and safety guidance for lone working. Please refer to Health and Safety Policy for details.
- Lone workers having a monthly supervision with the Safeguarding Manager, where issues relating to lone working are raised, discussed, and acted upon.

Lone Working Buddy System

A lone working buddy system is a way of staying in contact with someone who is working alone. The Designated Safeguarding Lead is the buddy/designated person who an employee can contact while they are lone working. The employee must inform the

Designated Safeguarding Lead (or other nominated person) when they are lone working so they can be available throughout the duration of the lone working period.

The Designated Safeguarding Lead should:

- Have all the required contact details for the lone worker, and young people attending the activity/session, including phone numbers, email address, home address, and information about their next of kin.
- Have the lone worker's vehicle details including make, model and registration number.
- Be clear on all of the lone worker's predicted movements during the shift. The buddy must know where the lone worker is meant to be at all times and have all of the information available to-hand.
- If the lone worker does not get in touch at the agreed intervals, attempt to contact the worker every 10-15 minutes for up to an hour, before escalating the matter.

Lone Working Unexpectedly

There may be some situations where lone working with young people arises unexpectedly. If this happens to keep as safe as possible:

- Ensure the meeting takes place where people can see and hear you.
- If possible, tell (call, text message or email) the line manager/safeguarding manager that lone working with a child/young person is taking place.

Make a record as soon as possible afterwards of why the lone working has occurred, the next steps and send a copy to the line manager.

Consent

Before planned lone working sessions can take place a meeting or call with the young person and their parents/carers if they are under 16 years of age must take place.

If it is not appropriate to gain parental consent and the young person has sufficient maturity and intelligence to give consent and the sessions are in their best interests, then the sessions can go ahead without parental consent. A written record of the reasons why parental consent has not been gained must be stored on the child's membership on Salesforce.

The aim of the meeting is to:

- Agree the purpose of the session/s, set goals.
- provide the young person, and parent/carer with the link to a copy of WEST' safeguarding policy.
- Let the young person and parent/carer know what they can do if they have any concerns about the sessions.
- Explain that any information will be shared with and what can and can't be kept confidential.
- Talk about any support the young person may need from their parent/carer.
- Establish clear boundaries within the worker/young person relationship.
- Provide emergency contact details to the parents/carers.

Code of conduct

Always follow the Code of Conduct Policy (Appendix 4 of the WEST' Safeguarding Policy) when around young people. This will ensure everyone feels comfortable and protected.

Remember to:

- Set appropriate professional boundaries and do not be overly familiar with young people.
- Never give out personal contact details, always make contact through WEST emails, social media accounts.
- Do not in any circumstances add, follow or interact with children or young people on personal social media account.


Digital delivery and social media

Safeguarding measures need to be considered when delivering sessions online, just as they would when delivering a face-to-face session.

- Ensure the session is delivered from a suitable location. This includes checking nothing personal or inappropriate can be seen or heard on screen.
- Consider the age of the young person when deciding on which platform to use, ensuring it is suitable for their age. Only use WEST' accounts for any online platforms and check the privacy settings.
- Staff members with an approved professional WEST social media account are permitted (but not obliged) to issue and accept 'friend', 'connect', 'follow' requests to and from members provided there is a valid work-related reason. Staff are responsible for ensuring that member social media accounts are genuine before accepting requests.
- Communication with members should take place in open forums such as the main WEST Facebook page, groups or group messages. Another member of staff must always be included in these messages as this adds to accountability and creates an open forum. The principle of avoiding lone working when possible applies as much when communicating with young people online as it does in a physical location.
- Communication with young people through social media must always be for a specific purpose such as planning an event or sharing information. Staff should avoid overly social chatting and conversation and be mindful of the time at which they are communicating.

Disclosures from young people in an online setting should be dealt with and reported in the same way as offline.

Appendix 13: Lone Working Risk Assessment Template

		Health & Safety Risk Assessment: Employees / volunteers lone working with young people Risk Assessment Number: LWYP001			
Activity:			Location of activity:		
Date of activity:		Date of risk assessment:		Employee/Volunteer:	
Line manager sign-off (name, date & any comments):				Number of young people:	
Hazard (Examples)	Who is at risk?	Control Measures already in place	What further action needs to be taken to control the risks?	Who needs to carry out the action?	Completion Date
<i>Risk of physical assault on staff</i>					
<i>Vehicle breakdown</i>					
<i>Emergency evacuation of building</i>					

Appendix 14: Whistleblowing Policy and Procedure

Definition

“Whistleblowing” is a term used to refer to the internal or external disclosure of suspected malpractice as well as illegal acts, or omissions, at work. It covers, for example, how WEST raises funds, commissions work or makes payments. Any concerns should be raised as soon as possible with the appropriate person (dependent on circumstances); line managers, the Chief Executive, the Chair of the Trustee Board or, where full independence from the leadership structure is required, the Whistleblowing Lead Trustee, Rob Devey radevey@gmail.com.

Application

This policy and procedure applies to everyone who works and volunteers with WEST, including employees, trustees, volunteers and partner agencies.

Policy

WEST recognises that, from time to time, employees may have concerns about work which extend beyond personal grievances. The aim of the Whistleblowing Policy is to encourage employees to report suspected wrongdoing as soon as possible, in the knowledge that concerns will be taken seriously and investigated as appropriate, with full confidentiality maintained. This policy aims to provide employees with guidance on how to raise any concerns and in particular, where the employee reasonably believes that one or more of the following matters is either happening, has taken place, or is likely to happen in the future:

1. A criminal offence
2. The breach of a legal obligation
3. A miscarriage of justice
4. A danger to the health and safety of any individual
5. Damage to the environment
6. An act of abuse, be it verbal, physical, psychological or sexual
7. A safeguarding issue
8. An action to bring the organisation into disrepute
9. A deliberate attempt to conceal any of the above

Anyone must feel able to bring their concerns to the attention of senior management without fear of recrimination, and confident that they will be treated with the utmost seriousness and that their concerns will remain confidential, wherever possible. However, employees must act in good faith when reporting concerns; employees who are subsequently found to have made reports of this nature maliciously will be subject to WEST’ Disciplinary Procedure.

Confidentiality

When employees raise concerns using the Whistleblowing Procedure, they may request that their identity is to be kept confidential. While we make every effort to deal with cases confidentially, depending on the circumstances of the case, this may not always be possible. Where this is the case, employees will be informed of this and the reasons why it is not possible.

WEST will consider anonymous disclosures, but we do not encourage them as anonymity often makes it difficult to properly investigate concerns, protect employees or give feedback on outcomes.

Procedure

If an employee believes that any of the practices listed above are happening at WEST, the following procedure should be followed:

- Concerns should be raised with their Line Manager as soon as possible. Should an employee suspect malpractice from their Line Manager or a Senior Manager, or should the concerns be of a very serious or sensitive nature, these should be raised with the Chief Executive. Should the concern be believed to involve the Chief Executive, then the Chairman of the WEST Board Mark Davies (mark.davies@camberton.com) or if necessary, another Trustee may be approached. In the case of concerns related to an individual Trustee, an employee should approach the Whistleblowing Lead Trustee Rob Devey (radevey@gmail.com). Concerns may also arise with regard to contractors and in the first instance an employee should approach their line manager.
- Employees, volunteers or trustees can raise a safeguarding concern with the Designated Safeguarding Leads (their contact details can be found in the Safeguarding Policy)
- Employees, volunteers or trustees may be supported by a colleague if they choose to raise the matter verbally/in person. If the matter is raised verbally, the manager with whom it is raised will write a report of the conversation as soon as is reasonably practicable. If the matter is raised in writing it should include full details including all relevant dates and information.
- Concerns about the alleged malpractice will be initially investigated as quickly as reasonably possible to decide whether, in the public interest, a full investigation is appropriate and if so, what form it should take. The manager may seek HR/legal advice and support.
- Concerns or allegations that fall within the scope of specific procedures (for example Child Protection, Harassment, Disciplinary) will normally be referred for consideration under that procedure.
- Some concerns may be resolved by agreed action without the need for investigation. If urgent action is required, this will be taken before any investigation is conducted.
- Where appropriate, the matters raised may be referred to the police, an external body or auditor or form the subject of an independent inquiry.
- Within four weeks of raising the concern, the manager or Trustee will write to the employee, volunteer or trustee detailing:
 - how WEST proposes to deal with the matter and how long it will take to investigate fully (if applicable);
 - what information any initial enquiries have uncovered (within the bounds of confidentiality);
 - whether further investigations will take place and if not, why not.

Subject to legal constraints, employees, volunteers or trustees may or may not be informed of the final outcome of any investigation.

If an employee, volunteer or trustee feels unable to use this procedure, the disclosure should be made to a prescribed person (see below) so that employment rights are protected.

Further Action

We strongly encourage employees to exhaust the internal process set out above in the first instance. In exceptional or urgent circumstances, or if employees are not satisfied with the outcome of an internal investigation and the action taken, and decide to take the matter outside of OnSide, or feel unable to use the organisation's procedure, they have the right to

express their concerns to the 'relevant Prescribed Person' designated by the Public Interest Disclosure (Prescribed Persons) Order 1999, which can be found at GOV.UK [List of Prescribed People](#).

The Public Interest Disclosure Act 1998 (Whistleblowers Act) ensures that employees are protected against detrimental treatment or dismissal as a result of any disclosure of normally confidential information in the interests of the public. To claim unfair dismissal based on 'blowing the whistle' employees must show:

1. that they made a disclosure
2. that they followed the correct disclosure procedure
3. that they were dismissed or suffered a detriment as a result of making the disclosure.

However, employees are assured that all matters raised in good faith will be treated seriously and confidentially where possible. No action will be taken against employees even if the allegation is mistaken, as long as it was raised in good faith believing it to be true.

Employees should also be aware that the Whistleblowing Policy does not replace WEST' Grievance and Disciplinary policies and the most appropriate policy and procedure should be selected, depending on the circumstances.

Further Help and Assistance

If, at any stage in the procedure, employees are unsure about what to do and would like independent advice, concerns can be discussed with someone at Protect (Formerly Public Concern at Work). This body is an independent charity staffed by lawyers, offering confidential free legal and practical advice on how people can raise concerns about malpractice at work. They can also provide advice about what legal protection may be available.

Employees can email Protect at whistle@protect-advice.org.uk or phone their advice line: 020 3117 2520.

Employees can also contact the NSPCC Whistleblowing Advice Line: Telephone 0800 028 0285.