

Policy/Procedure Name:	Safeguarding Children & Young People Policy
Last Updated:	May 2023
Associated Policies & Procedures:	<ul style="list-style-type: none"> • Safer Recruitment Policy • Recruitment of Ex-Offenders Policy • Disciplinary Procedure • Whistle Blowing Policy

1. INTRODUCTION

All children and young people have a legal right to be safe from harm and Extratime is committed to protecting and safeguarding the welfare of the children and young people in its care. We expect all children and young people in our care to feel welcome and safe.

Safeguarding is everyone's responsibility and all Extratime staff and volunteers must take seriously their role to protect all children and young people from abuse and neglect. Any cause for concern with regard to the welfare of a child or young person must be reported to Extratime's Designated Safeguarding Lead or Designated Safeguarding Officer.

This policy and associated procedures have been produced in line with the **Pan Sussex Child Protection and Safeguarding Procedures**, as produced by **Local Safeguarding Board's (LSCB) of Brighton and Hove, East Sussex and West Sussex**. More information can be found here:

<https://sussexchildprotection.procedures.org.uk/>

They have also been produced with regard to the legislation listed below and the Government's statutory guidance '**Working Together to Safeguard Children: Statutory Guidance on Inter-agency Working to Safeguard and Promote the Welfare of Children (July 2018).**'

- The Children Act (1989) and (2004)
- The Children and Families Act (2014)
- The Human Rights Act (2000)
- The United Nations Convention on the Rights of the Child (1989)
- Working Together to Safeguard Children (2006,2010,2013,2015)

Extratime has in place a number of additional policies and procedures that protect children and young people accessing its services. These include:

- Health and Safety Policy
- Whistle Blowing Policy
- Equalities Policy
- Safer Recruitment Policy
- Information Sharing Policy
- Induction procedures
- Appraisals and Supervision Reviews for Staff and Volunteers
- Disciplinary and Grievance Procedure
- Complaints Policy
- Sussex Multi-Agency Policy and Procedure for Safeguarding Vulnerable Adults (for young people aged 18+)
- Safe Touch Policy
- Children and Young People E Safety Policy
- Computer, Internet and Email Policy for Staff

- Data Protection Policy

Extratime recognises its responsibility to implement, maintain and regularly review procedures which are designed to prevent and protect children and young people from abuse and neglect. These procedures apply to all children and young people regardless of their race, religion, first language or culture; age; gender or sexuality; health or disability; location or placement; political or immigration status or involvement in criminal behaviour.

Extratime acknowledges that some children and young people are more vulnerable to abuse than others. e.g. children and young people who are; living away from home; living with domestic abuse, parental ill health, mental illness or substance misuse, as well as children and young people who are suffering from racial or religious harassment. All of these factors may be applicable for both disabled and non-disabled children and young people at Extratime.

Safeguarding children and young people with special educational needs and disabilities (SEND)

Children and young people with SEND are at significantly greater risk of abuse and neglect. Factors that increase risk and lessen protection include:

Communication barriers

- Adults may not have the knowledge and skills to communicate verbally or non-verbally with a child, which can make it harder for children to share their thoughts and feelings.
- Communicating solely with parents or carers may pose a risk if the child is being abused by their parent or carer.
- It can be difficult to teach messages about what abuse is or how to keep safe to children with communication needs. Without this knowledge children may not recognise that they are being abused or won't know how to describe what's happening to them.

Misunderstanding the signs of abuse

Adults may mistake the indicators of abuse for signs of a child's disability.

- Injuries such as bruising may not raise the same level of concern as they would if seen on a non-child or young person with disabilities. Adults may assume that bruising was self-inflicted or caused by disability equipment or mobility accidents.
- A child experiencing abuse or attempting to disclose abuse may self-harm or display inappropriate sexual behaviour or other repetitive and challenging behaviours. This may be misinterpreted as part of a child's disability or health condition rather than an indicator of abuse and distract adults from taking action.

Lack of education on staying safe

Limited understanding and / or inadequate personal safety, sex and relationships education may not be accessible to children and young people with SEND. As a result, a child or young person with disabilities may not know how to recognise abuse or who to tell.

Increased isolation

Children and young people with SEND may have less contact with other people than their non-disabled peers. They may be further isolated if they;

- Need carers to take them out
- Have restricted independence because they use a wheelchair or require a sign language interpreter
- Live away from home.

Children and young people with disabilities and their families may have limited access to support systems. Support may not be available due to lack of funding or it may not be appropriate for the child's physical,

emotional or cultural needs. This can make it difficult for parents to provide the care their child needs and add to the pressure of caring for a child or young person with disabilities.

Dependency on others

Children and young people with disabilities may have regular contact with a wide network of carers and other adults for practical assistance in daily living including personal intimate care. This can increase the opportunity for an abusive adult to be alone with a child.

If a child is abused by a carer they rely on, they may be more reluctant to disclose abuse for fear that the support service will stop.

Caring for a child with little or no support can put families under stress. This can make it difficult for parents to provide the care their child needs and can lead to a child being abused or neglected.

Inadequate support

It can be difficult for any child who has experienced abuse to get the support they need, but child or young person with disabilities may face extra problems.

- Children or young people with disabilities are less likely to tell someone about experiencing abuse and more likely to delay telling someone than their non-disabled peers
- Adults may not understand or respond to the safeguarding needs of a child or young person with disabilities.
- Communication barriers may prevent adults fully understanding what the child is telling them.
- Some adults may not focus on the views of a child or young person with disabilities.
- If abuse is reported to the police and/or children's social care, the response may be affected if professionals lack skills or experience in working with children or young people with disabilities.

This list is not exhaustive.

2. POLICY AIM

This policy aims to safeguard the welfare and safety of children and young people who receive services from Extratime. It also provides categories and potential indicators of abuse and neglect, as well as procedural guidance for staff and volunteers to follow in the event that they have concerns about a child or young person's risk of harm or neglect.

Multi-agency and partnership working is essential to support children, young people and families who use Extratime services. Extratime works in close partnership with professional colleagues and parent carers across the city and is represented across operational and strategic forums in the areas in which we work.

3. RESPONSIBILITIES OF EXTRATIME

- Adhering to Safer Recruitment practices that attract the best possible applicants to vacancies and deter, identify and reject applicants who are unsuitable to work with children and young people. This includes processes to support the safe recruitment of ex-offenders and managing criminal record disclosures for new and existing staff and volunteers.
- Ensuring all staff and volunteers are fully aware of their safeguarding responsibilities, including identifying and reporting possible cases of abuse or neglect. All staff must complete a certificated safeguarding course prior to starting work with Extratime and then at least every three years. There are also options for advanced training modules. Safeguarding responsibilities and procedures are also covered as part of the basic induction of all staff and volunteers, as well as during staff meetings and 1:1 meetings.
- Providing a systematic means of monitoring children and young people thought to be at risk. This includes participation in local authority led multi-agency forum (e.g. Looked After Children reviews (LAC reviews), Children's Disability Team resource panel meetings and Early Help Assessment).

- Emphasising the need for good levels of communication between all members of staff/volunteers, the venues in which Extratime operates and our strategic and operational partners.
- Supporting the development of individual children and young people in ways which will promote security, confidence and independence. This includes using a range of communication methods for children to express their feelings and feel heard. Sharing policies and procedures in an easily accessible format.

4. DESIGNATED SAFEGUARDING LEAD

The Chief Executive Officer (CEO), Sam Price, is Extratime's Designated Safeguarding Lead (DSL) and has overall responsibility for all safeguarding issues. Safeguarding concerns can be directed to Sam. In Sam's absence all safeguarding concerns must be directed to Ros (Trustee).

Contact details:

Sam Price (CEO) – Designated Safeguarding Lead

Telephone: 01273 420580 (office), 07909 633033 (mobile)

Email: sam.price@extratimebrighton.org.uk

Contact details:

Ros Cook - Trustee

Telephone: 07906674505 (mobile)

Email: ros@amazesussex.org.uk

The role of the Designated Safeguarding Lead is to:

- Co-ordinate all internal and external safeguarding and child protection enquiries. This may include delegating investigations/referrals to the Designated Safeguarding Officer or other suitably trained staff.
- Ensure Extratime Safeguarding policies and procedures are up to date and compliant with relevant legislation and local and national policy guidance.
- Ensure accurate and confidential records of all safeguarding issues are maintained.
- Ensure referrals are made to Multi Agency Safeguarding Hub or Early Help Hub of the relevant local authorities as necessary (*See Appendix 1 for Brighton & Hove City Council and West Sussex County Council contact details*).
- Ensure Extratime training requirements are met in respect of all aspects of safeguarding across all venues and projects. This includes those of the Designated Safeguarding Lead.
- Act as point of reference on all safeguarding issues for all staff and volunteers.
- Ensure Extratime is appropriately represented at multi-agency meetings.
- Meet regularly with Extratime senior team and Management Committee to review safeguarding issues and provide reports as required to the trustees.

5. CATAGORIES AND INDICATORS OF ABUSE

DEFINITIONS:

CHILD

Means any child or young person under the age of 18 years old. Where a child has a special educational need or disability, this age limit is extended to 25 years.

VULNERABLE ADULT

A Vulnerable Adult is defined as someone 18 years of age or over who is unable to take care of themselves against significant harm or exploitation.

SIGNIFICANT HARM

The Children's Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children. The local authority is under a duty

to make enquiries or cause enquiries to be made where it has reasonable cause to suspect that a child is suffering or likely to suffer significant harm (Section 47 the Children's Act 1989). Where Section 47 enquiries are being made the assessment should concentrate on the harm that has occurred or is likely to occur to the child as a result of child maltreatment in order to inform future plans and the nature of services required.

CATEGORIES OF ABUSE:

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.

EMOTIONAL ABUSE

Is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability as well as over protection and limitation of exploration and learning or preventing the child from participating in normal social interaction.

It may involve seeing or hearing the ill treatment of another (e.g. domestic abuse). It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

SEXUAL ABUSE

Involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact including penetrative (rape, anal or oral sex) or non-penetrative acts.

Sexual abuse may involve non-contact activities such as involving children in looking at or in the production of sexual on-line images, watching sexual activities or encouraging children to behave in sexually inappropriate ways.

NEGLECT

Is the persistent failure to meet a child's basic physical and/or psychological, educational, medical 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 behaviour or experiences.

Once a child is born it may involve a parent failing to provide adequate food clothing and shelter (including exclusion from home or abandonment); protect a child from physical or emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); 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 ABUSE:

Recognising child abuse is not easy and it is **not your responsibility to decide whether or not child abuse has taken place or if a child is at risk of significant harm**. You do, however, have a duty to act if you have a concern about a child's welfare or safety.

If a child or young person tells you they have experienced abuse or neglect of any kind, you must believe them and inform your supervisor, Designated Safeguarding Lead or Designated Safeguarding Officer immediately.

PHYSICAL SIGNS OF PHYSICAL ABUSE *(See Appendix 4: Safety Net's Non-Accidental Injuries guidance sheet)*

- Bruising in children who are not independently mobile
- Bruising in babies
- Bruises that are seen away from bony prominences
- Bruises to the face, back, stomach, arms, buttocks, ears and hands
- Multiple bruises in clusters
- Multiple bruises of uniform shape
- Bruises that carry the imprint of an implement used, hand marks or fingertips
- Cigarette burns
- Human bite marks
- Broken bones
- Scalds

CHANGES IN BEHAVIOUR WHICH MAY INDICATE PHYSICAL ABUSE

- Fear of parents being approached for an explanation
- Aggressive behaviour or severe temper outbursts
- Flinching when approached or touched
- Reluctance to get changed, for example wearing long sleeves in hot weather
- Depression
- Withdrawn behaviour
- Running away from home

PHYSICAL SIGNS OF EMOTIONAL ABUSE

- A failure to thrive or grow, particularly if the child puts on weight in other circumstances, for example on breaks away from home or their parents care
- Sudden speech disorders
- Development delay, either in terms of physical or emotional progress

CHANGES IN BEHAVIOUR WHICH MAY INDICATE EMOTIONAL ABUSE

- Neurotic behaviour, for example sulking, hair twisting or rocking
- Fear of making mistakes
- Self-harm
- Fear of parent being approached regarding their behaviour

PHYSICAL SIGNS OF SEXUAL ABUSE

- Pain or itching in the genital/anal areas
- Bruising or bleeding near the genital/anal area
- Sexually transmitted disease
- Vaginal discharge or infection
- Stomach pains
- Discomfort when walking or sitting down
- Pregnancy

CHANGES IN BEHAVIOUR WHICH MAY INDICATE SEXUAL ABUSE

- Sudden or unexplained changes in behaviour, for example becoming aggressive or withdrawn
- Fear of being left with a specific person or group of people
- Having nightmares
- Running away from home
- Sexual knowledge which is beyond their age or development level
- Sexual drawings or language

- Bedwetting
- Eating problems such as over-eating or anorexia
- Self-injurious or mutilation sometimes leading to suicide attempts
- Saying they have secrets they cannot tell anyone about
- Substance or drug abuse
- Suddenly having unexplained sources of money
- Not allowed to have friends (particularly in adolescence)
- Acting in a sexually explicit way towards adults

PHYSICAL SIGNS OF NEGLECT

- Constant hunger, sometimes stealing food from other children
- Constantly dirty or smelly
- Loss of weight or being constantly under weight
- Inappropriate dress for the conditions

CHANGES IN BEHAVIOUR WHICH MAY INDICATE NEGLECT

- Complaining of being tired all of the time
- Not requesting medical assistance and/or failing to attend appointments
- Having few friends
- Mentioning their being left alone or unsupervised

6. STAFF RESPONSIBILITIES

Children and young people who access Extratime services may sometimes display some of the possible indicators above for reasons other than neglect and abuse (e.g. emotional outbursts, rocking, self-injurious behaviour). This can make them especially vulnerable to abuse if their signs and indicators are overlooked or misinterpreted. It is important to notice and report *changes in behaviour*.

Through their day to day contact with children and direct work with families, Extratime staff have a crucial role to play in noticing indicators of possible abuse or neglect and referring those concerns to either their Venue Lead / Supervisor, the Designated Safeguarding Lead or Designated Safeguarding Officer. Research indicates that a child or young person with disabilities are most likely to turn to a trusted adult they know well for help, such as family, friend or teacher. This could include a member of the Extratime team.

7. OTHER ASPECTS OF RISK REQUIRING SPECIAL ATTENTION

In addition, staff should be aware of these specific safeguarding issues. Extratime should ensure that, where such risks may be more likely, staff are guided on how to understand and act accordingly where there is concern:

- child sexual exploitation (CSE)
- bullying including cyberbullying
- domestic violence
- drugs
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM)
- forced marriage
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- private fostering
- radicalisation
- sexting

- teenage relationship abuse
- trafficking
- self-harm

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

Female Genital Mutilation (FGM): professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There are a range of potential indicators that a child or young person may be at risk of FGM; individually these may not indicate risk, but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practice FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Warning signs that FGM may be about to take place, or may have already taken place, can be found on here: <https://sussexchildprotection.procedures.org.uk/tkypso/children-in-specific-circumstances/female-genital-mutilation>. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children’s social care.

Radicalisation: this refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism. During that process it is possible to intervene to prevent vulnerable people being drawn into terrorist-related activity.

As a childcare provider, Extratime will meet its obligations under the ‘**Prevent**’ duty, making sure staff are aware of how to identify children who may be vulnerable and knowing what to do when they are identified. Prevent is part of the Government’s counter-terrorism strategy (CONTEST), which aims to stop people becoming terrorists or supporting terrorism. The Prevent strategy addresses all forms of terrorism and prioritises according to the threat posed to national security.

Protecting children from the risk of radicalisation is seen as part of our wider safeguarding duties and is similar in nature to protecting children from other harms. Possible indicators of radicalisation may include:

- **Expressed opinions** – such as support for violence and terrorism or the values of extremist organisations, airing of political or religious based grievances, unaccepting of other nationalities, religions or cultures.
- **Material** – possession of extremist literature; attempts to access extremist websites and associated password protected chat rooms; possession of material regarding weapons, explosives or military training.
- **Behaviour and behavioural changes** – such as withdrawal from family and peers; hostility towards former associates and family; association with proscribed organisations and those that hold extremist views.
- **Personal history** – Claims or evidence of involvement in organisations voicing violent extremist ideology and identifying with their cause.

8. RECOGNITION OF ABUSE: STAFF AND VOLUNTEER GUIDANCE ON WHAT TO DO WHEN SUSPECTING/RECOGNISING CHILD ABUSE OR NEGLECT

There are a number of ways in which concerns regarding a child or young person's welfare might come to light. These include:

- The child or young person discloses they are being abused or neglected.
- A third party reports that the child or young person has disclosed they are being abused or neglected.
- You may suspect that a child or young person is being abused or neglected.
- An allegation is made against a member of staff, volunteer or trustee.
- A concern is raised without any specific disclosure of abuse or neglect.
- One child or young person is seen to be abusing another.

(This list is not exhaustive and if staff or volunteers have any concerns, these must be discussed immediately with your Venue Lead/Supervisor, the Designated Safeguarding Lead or Designated Safeguarding Officer)

In this event you should:

- **Report your concerns immediately to your Venue Lead/Supervisor - do not wait until the end of the session.**
- **Record details of the incident/allegation with your Venue Lead/Supervisor and any other staff/volunteers who have witnessed an incident or disclosure using the *Record of Concern Form (Appendix 2)* and *Body Map (Appendix 2A)*. These records must be accurate and factual. Remember it is not your role to investigate – concentrate on presenting information clearly. See *Guidance on Completing Record of Concern Forms (Appendix 3 and 3A)* for help with this.**
- **Venue Leads/Supervisors must notify the Designated Safeguarding Lead or Designated Safeguarding Officer immediately.**
- **Take action if the child or young person is in immediate danger, including removing the child or young person from the danger and, if necessary, calling the emergency services to assist you.**

DISCLOSURE DO'S AND DON'TS

If a child or young person discloses (tells you) something...

DO:

- Stay calm and do not show disbelief or shock.
- Listen carefully.
- Reassure them that they were right to tell you and you are treating the information seriously.
- Let them know what you are going to do next (inform the appropriate person) and that the service will take steps to protect and support them.
- Report to your supervisor or Designated Safeguarding Lead/Officer.
- Complete a Record of Concern Form (*See Appendix Two*).

DON'T:

- Do not stop someone who is freely recalling significant events; allow them to share whatever is important to them.
- Do not press for more information.
- Do not be judgmental.
- Do not promise to keep secrets.
- Do not contact the alleged abuser.
- Do not discuss with anyone (including other staff/volunteers), other than the person to whom you are reporting the matter.

9. ALLEGATIONS AGAINST STAFF

The Pan Sussex Child Protection and Safeguarding Procedures Manual provides guidance on managing cases of allegations that may indicate that a staff member may not be suitable to work with children in their current position or in any other capacity.

A 'staff member' is a person over the age of 16 years whose work brings them into contact with children in their setting. It applies to all adults, whether paid or working in a voluntary capacity (including agency workers), on or off site.

The procedures should be used in ALL cases in which it is alleged that a staff member has:

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

All staff and volunteers working with Extratime are in a position of trust. Therefore any allegation made against a member of staff could highlight a breach of that trust. Under the Sexual Offences Act 2003, it is an offence for a person over the age of eighteen to have a sexual relationship with a child under the age of eighteen where the person is in a position of trust in respect of that child, even if the relationship is consensual.

Information may also come to light about a staff member's conduct outside of the workplace which may indicate a breach of professional conduct, or may raise concerns about their suitability to work within the children's workforce.

It is important that all allegations of abuse and breaches of professional conduct are taken seriously and considered with an open and inquiring mind.

Extratime will inform the local authority designated officer (LADO) of all allegations made against staff or volunteers of the organisation. LADO contact detail for Brighton & Hove and West Sussex are in Appendix One. **The LADO will be contacted within one day of the incident happening or the allegation being made.**

Extratime will NOT commence an internal investigation before consulting with the LADO but will gather basic details, such as was the staff member actually working that day, did they potentially come into contact with the child(ren) and have any other potential witnesses come forward to corroborate or discount the alleged incident.

The LADO will work with the Extratime Designated Safeguarding Lead to establish measures that should take place and the timescales for implementation. This will include whether the allegations meet the threshold for further consultation with Children's Services and the Police.

The investigation will, wherever possible, be completed by Extratime. However, should the allegation be made against the Designated Safeguarding Lead, the trustees will commission an independent investigation.

The LADO will regularly monitor and review the progress of any case, either via review strategy discussions or by liaising with the police and/or children's social care colleagues or the employer as appropriate. Reviews should be at fortnightly or monthly intervals, depending on the complexity of the case.

If a staff member tenders their resignation or, in the case of a volunteer, ceases to make their services available to the organisation, Extratime will still continue the investigation to completion in accordance with these procedures. This process will continue even in a case where the alleged perpetrator refuses to

co-operate with the investigation.

Any investigation that takes place internally will be recorded in detail as appropriate to everyone involved. Any internal investigation that takes place must not compromise any police investigation.

In cases of allegation of harm or potential harm to children and young people, there can be no 'compromise agreement' between Extratime and the staff member or volunteer.

If there is a police investigation, Sussex Police should set a target date for reviewing the progress of the investigation and contact the Crown Prosecution Service (CPS). Wherever possible, that review should take place no later than four weeks after the initial action meeting following the allegation.

The police or the CPS should inform the employer and LADO immediately when a criminal investigation and any subsequent trial is complete, or if it is decided to close an investigation without charge, or not to prosecute after the person has been charged. In those circumstances the LADO will discuss with Extratime if any further action is appropriate and, if so, how to proceed.

If the allegation is substantiated, Extratime will discuss with the LADO if it is appropriate to make a referral to the Protection of Children Act List or DfES List 99.

If the allegation is not substantiated, Extratime will support the staff member in their return to work. This may include the provision of additional support and discussions on how contact with the child/children who made the allegation might be managed.

If an allegation is determined to be unfounded, Extratime will refer the matter to the LADO to determine if the child concerned is in need of services or may have been abused by someone else.

At the conclusion of a case, Extratime will review the circumstances and determine whether there are any improvements to be made to the organisations procedures or practices to help prevent similar events in the future.

Document Version & Review:

Date Written/ Reviewed	Version Number	Written/ Reviewed by	Summary of Changes	Date Approved
June 2020	8	Sam Price	Policy re-write	July 2020
February 2021	9	Rebecca Jenkins	Updated contact information for WS Reporting Safeguarding Concerns (Appendix 1)	N/A
May 2021	10	Rebecca Jenkins	Updated details for Designated Safeguarding Officer	N/A
December 2021	11	Rebecca Jenkins	Updated contact information for B&H LADO and added B&H LADO Referral Form (Appendix 5). Updated LADO Names for WS (Appendix 1)	N/A

June 2022	12	Rebecca Jenkins	General review. Updated DSO details and added details of Online Referral Forms for BHCC and West Sussex (Appendix 1)	28.7.22 SP
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Appendix 1: Reporting Safeguarding Concerns - Contact Information

External reports should be made by the Designated Safeguarding Lead, Designated Safeguarding Officer or a delegated member of staff. In exceptional circumstances, and at their discretion, reports will also be made by the Chair of Trustees

If a child is in immediate danger, call the police on 999.

Brighton & Hove

To report a concern about a child who lives in **Brighton & Hove**, contact **Front Door for Families**. Front Door for Families provides support, guidance and access to specialist targeted services for parents, carers, members of the public, young people and professionals.

- Email: FrontDoorForFamilies@brighton-hove.gov.uk
- Call: 01273 290400
- Complete an Online Referral Form: <https://www.brighton-hove.gov.uk/families-children-and-learning/tell-us-if-you-are-worried-about-child>

If you need to speak to someone at Front Door for Families urgently outside of their office hours (9am to 5pm Monday to Friday), please call the Emergency Duty Service on 01273 335905.

The **LADO contact details** for Brighton & Hove are:

- Name: (interim LADO in post)
- Email: Complete a B&H LADO Referral Form (Appendix 5) and email it to ladoenquiries@brighton-hove.gov.uk
- Tel: 01273 295643, mobile 07795 335879

West Sussex County Council

To report a concern about a child who lives in West Sussex, contact the **Integrated Front Door** at:

- Email: WSChildrenservices@westsussex.gov.uk
- Tel: 01403 229900 (9am – 5pm, Mon – Fri)
- Complete an Online Referral Form: <https://www.westsussex.gov.uk/education-children-and-families/keeping-children-safe/raise-a-concern-about-a-child>

If you need to speak to someone at the Integrated Front Door urgently outside out of their office hours (5pm to 9am weekdays) and for emergencies at weekends and bank holidays (24 hours), please call 0330 222 6664. When you contact the service you will speak to a qualified social worker.

If the Emergency Duty Team line is unavailable and you need to report an emergency safeguarding concern, please call 07711 769657. This number does not accept texts.

The **LADO contact details** for West Sussex County Council are:

- Name: Miriam Williams and Donna Tomlinson
- Email: LADO@WestSussex.gov.uk
- Tel: 0330 222 6450

Appendix 2: Record of Concern Form

Use an extra sheet of paper if required

Extratime Record of Concern Form	
SECTION 1: To be completed by Venue Lead	
Date concern observed:	Name of staff member recording concern:
Child or Young Person's name:	Gender:
Date of Birth:	Address:
Parent carer name:	How has the concern come to your attention? (please tick): <ul style="list-style-type: none"> • Direct contact/observation • Disclosure • Third party
Phone numbers for parent carer(s):	
Siblings/other family members (if known):	
What is your concern about this child or young person (Be specific: include when and where incident occurred, any evidence of what you saw or was reported, timelines if known):	
Who else, if anyone, was involved and how? (E.g. did anyone else witness the incident/what the child or young person said?):	

Child or Young Person: (Were there any obvious signs in the child, e.g., bruising, bleeding, changed behaviour? Did the child say anything? If so, record exactly what they said (i.e. their actual words)

What action have you taken? (*E.g. who have you spoken to and when?*)

Date, name & signature of person filling in this record of concern:

Date and signature of Venue Lead/Supervisor:

SECTION 2: To be completed by Designated Safeguarding Lead or Delegated Staff Member

Date received by Safeguarding Lead/ Delegated Staff Member:

Is there a follow up or support plan?

Do the parents know? (delete as appropriate)

YES / NO

Has a referral been made to Children's Social Care?

YES / NO

Has a referral or follow up been made to another agency?

YES / NO

Who?

Date & signature of Designated Safeguarding Lead/ Delegated Staff Member:

For Office Use:

Reviewed by/date:

Further action needed?

Yes / No

Date added to Safeguarding Log:

Date saved to CYP file:

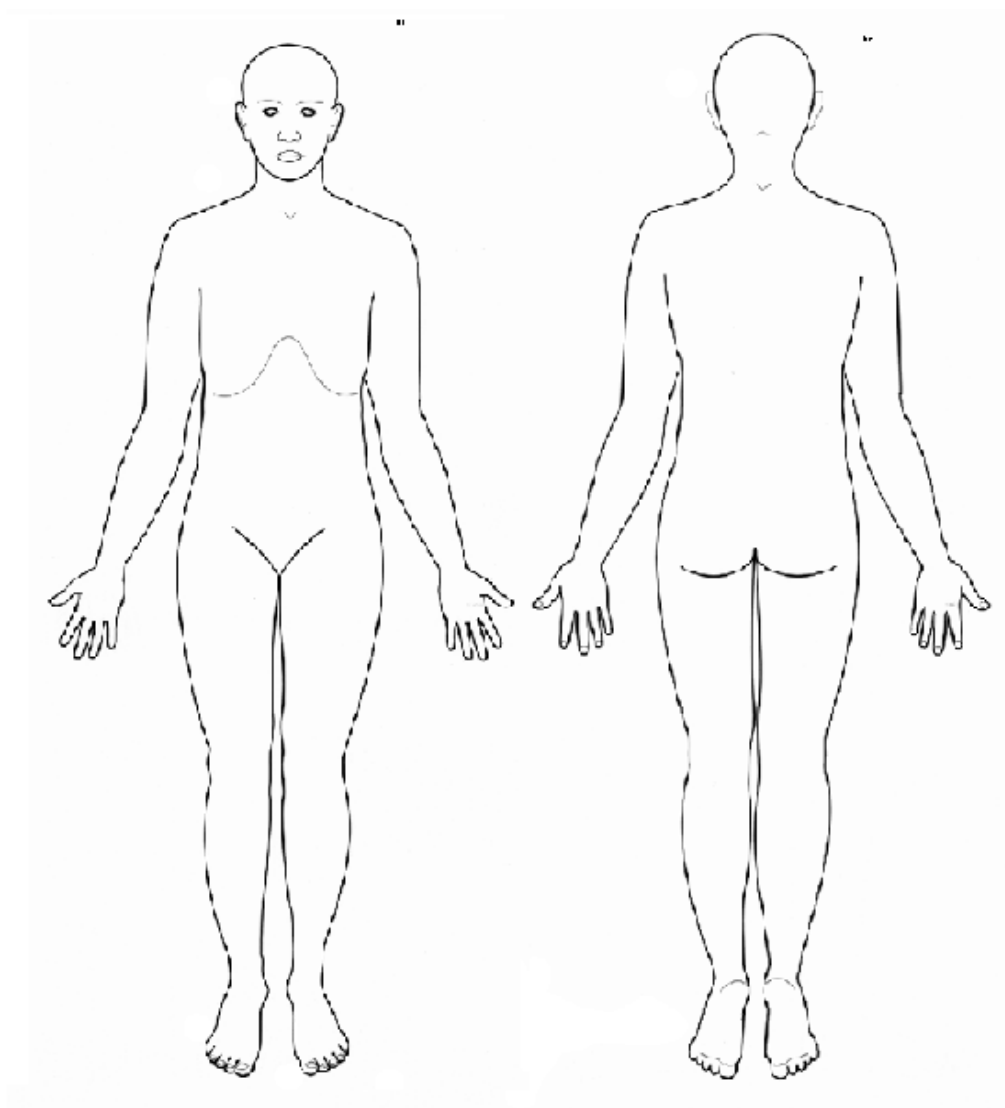
Appendix 2A: Body Map

This should be used alongside the Record of Concern Form (Appendix 2)

Child or Young Person's name:	
Date of Birth:	
Venue Name:	
Venue Lead Name:	
Name of staff member completing form:	
Date and time:	

The following Body Maps should be used to document and illustrate visible signs of harm and physical injuries. Examples include: bruises, cuts, pressure ulcers, red areas, scalds and burns, swellings, ulcerations and wounds. Size and colour should be also indicated on the body map.

Mark the site of the injury on the diagram and provide details on the notes page overleaf.



Body Map Notes

Appendix 3: Guidance on Completing Record of Concern Forms

All staff and volunteers are responsible for completing Record of Concern Forms with care and to a high standard. They are formal records that will be kept by Extratime and may be seen by our partners, professional organisations and, in the most serious cases, used in legal proceedings.

Poor communication between agencies is the thing most commonly highlighted in Inquests following child deaths – the information you provide in the Record of Concern Form is the main tool we will use to determine whether we should alert Children’s Social Care of concerns. Take the time you need to ensure it says what you need it to. Do not be afraid to say and write down what your concerns are. Do not assume that someone else will do it.

An example of properly completed Record of Concern Forms are in Appendix 3A. Staff and volunteers are responsible for ensuring all forms are completed to the same standard and in line with the guidance below:

- ✓ Complete the form as soon as possible so you remember all the details
- ✓ It is your responsibility to ask for help if you need it. We will support you in building your skills and confidence in completing these forms
- ✓ Only record the facts – before you start writing make sure you are clear on:
 - What happened?
 - When?
 - Where?
 - Who was involved?
- ✓ Only use blue or black pen
- ✓ Ensure your handwriting can be easily read. Ask a colleague to help if you think this is a problem, e.g. they can write down what you say
- ✓ Use everyday language, avoid jargon or slang. Explain ‘Just Right’ language such as e.g. a child is ‘fizzy’ or ‘in the orange/red’
- ✓ Check your spelling/punctuation
- ✓ Provide as much detail as possible. What do any injuries look like? Where is it? How big is it? Be as specific as you can. It’s fine if you need to use more paper
- ✓ Use a Body Map to record details/locations of injuries (Appendix 2A)
- ✓ Check you’ve completed every section and signed/dated the form
- ✓ Do not name other children/young people in the form

Writing About Behaviour

At Extratime we meet a diverse range of children and young people, all of whom express their feelings in their own way. We understand that what may be described as ‘challenging behaviour’ is in many cases children/young people reacting to things around them or trying to show us how they feel.

It is important to be sensitive to this when we record safeguarding concerns that relate to behaviour. Focus on describing the specific behaviour (e.g. crying/self-injurious behaviour) and what has contributed to them feeling this way. Don’t use negative language (e.g. they were ‘stroppy’, ‘in a bad mood’, ‘irritating another child’) or describe the behaviour as ‘difficult’ or ‘challenging’. Ask for help if you’re unsure about this.

Appendix 3A: Record of Concern Form: EXAMPLE

Use an extra sheet of paper if required

Extratime Record of Concern Form	
SECTION 1: To be completed by Venue Lead	
Date concern observed: 3.2.20	Name of staff member recording concern: Annie Weeks
Child or Young Person's name: Tom Brookes	Gender: Male
Date of Birth: 4.3.2010	Address: 4 Beech Grove Brighthelm Wessex
Parent carer name: Nick Brookes	How has the concern come to your attention? (please tick): <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Direct contact/observation <input type="checkbox"/> Disclosure <input type="checkbox"/> Third party
Phone numbers for parent carer(s): 12345 890333	
Siblings/other family members (if known): None	
What is your concern about this child or young person (Be specific: include when and where incident occurred, any evidence of what you saw or was reported, timelines if known): <p>Tom is usually well presented but over recent weeks (approx. 2 weeks), Tom has regularly come to the after school club with poor standards of hygiene. He frequently wears the same clothes for several days in a row and appears and smells unwashed.</p> <p>Today he is wearing dirty T-shirt, jumper and jeans. These are the same clothes he wore on Thursday and Friday last week.</p> <p>Tom has epilepsy so we are concerned that his medical needs are also being neglected.</p>	
Who else, if anyone, was involved and how? (E.g. did anyone else witness the incident/what the child or young person said?): <p>This has been observed by different club staff (Alex P, Sally, Beth and Simon). Notes have been recorded in the debrief book since 11th Feb when it was first noticed (see attached photocopies)</p>	
Child or Young Person: (Were there any obvious signs in the child, e.g., bruising, bleeding, changed behaviour? Did the child say anything? If so, record exactly what they said (i.e. their actual words)) <p>No change in behaviour or signs of injury</p>	

What action have you taken? (E.g. who have you spoken to and when?)	
Charlotte (VL) has spoken to Mary Collins (Deputy Head at Hill Park School). Mary said this has been noted by the school and they have contacted social care and are monitoring the situation.	
Date, name & signature of person filling in this record of concern:	Charlotte Webb <i>Charlotte Webb</i> 3.2.20
Date and signature of Venue Lead/Supervisor:	Charlotte Webb <i>Charlotte Webb</i> 3.2.20
SECTION 2: To be completed by Designated Safeguarding Lead or Delegated Staff Member	
Date received by Safeguarding Lead/ Delegated Staff Member:	3.2.20
Is there a follow up or support plan?	
<p>I've called to speak to Tom's dad Nick about our concerns. I asked if everything is ok at home and / or if we could help in any way. I also mentioned his recent conversation with the school. He said everything is fine and clearly indicated he did not want to discuss Tom's wellbeing.</p> <p>I followed up this call with an email to Tom's social worker Fiona Gilbert. She called back to say also heard this from Tom's Speech and language therapist. I explained the concerns raised by the club team, especially that we are concerned that Nick may not be meeting Tom's medical needs. i.e. without medications Tom's seizures could become life threatening.</p> <p>Fiona said they are opening a S47 (Risk of significant harm) enquiry and will invite Extratime to attend the initial child protection conference if this is planned. She will let us know the outcome of the enquiry.</p>	
Do the parents know? (delete as appropriate)	YES / NO
Has a referral been made to Children's Social Care?	YES / NO
Has a referral or follow up been made to another agency?	YES / NO
Date & signature of Safeguarding Lead/ Delegated Staff Member:	Who? Sam Price <i>Sam Price</i> 6.3 20

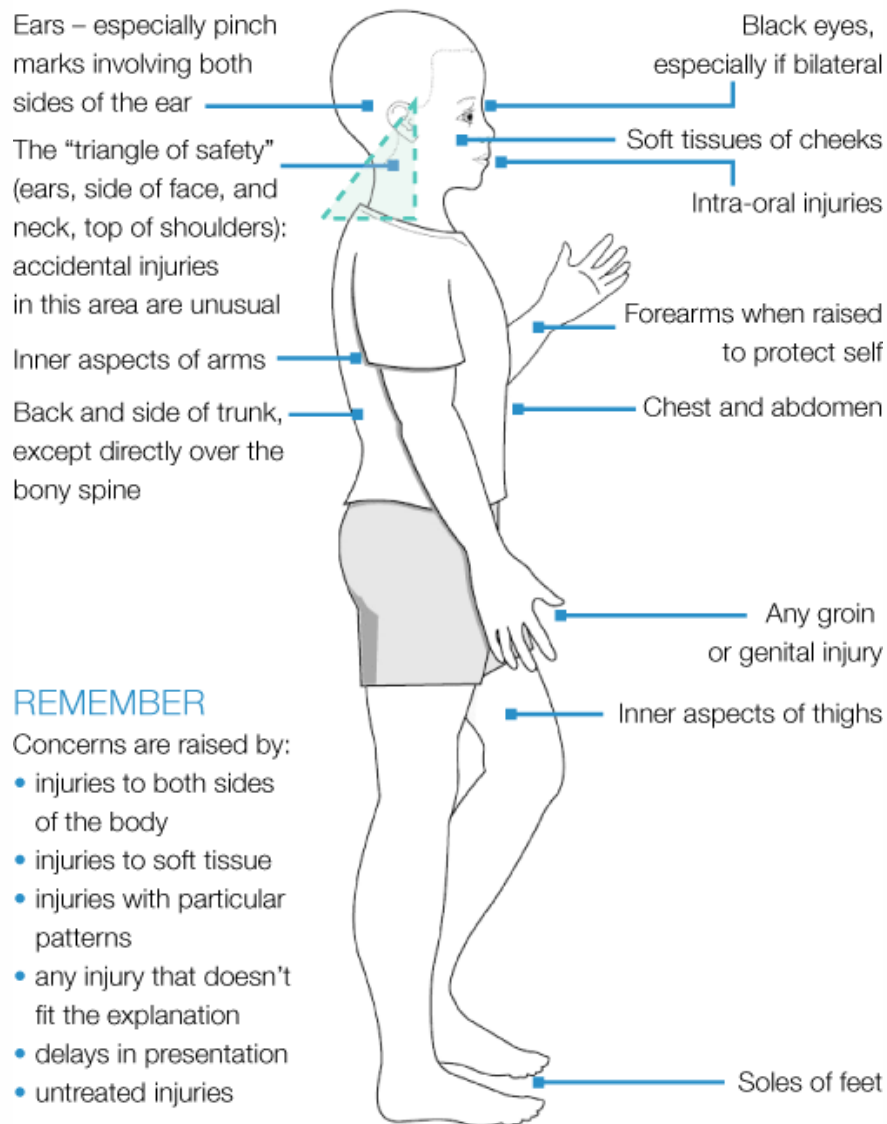
For Office Use:

Reviewed by/date:	10.3.20	Further action needed?	Yes / No
Date added to Safeguarding Log:	11.3.20	Date saved to CYP file:	22.3.20

Appendix 4:
With thanks to Safety Net.



Non-Accidental Injuries



REMEMBER

Concerns are raised by:

- injuries to both sides of the body
- injuries to soft tissue
- injuries with particular patterns
- any injury that doesn't fit the explanation
- delays in presentation
- untreated injuries

From the Child Protection & the Dental Team website – www.cpdtd.org.uk
(Funded by the Department of Health) August 2014

Safety Net - Keeping Children, Young People and Families Safe

Charity Registration No. 1108772

www.safety-net.org.uk

Appendix 5:

Brighton & Hove City Council

LADO Referral - Allegations or concern about a person working with children

To be completed if a professional receives an allegation or has a concern about the behaviour of a member of staff working or volunteering with children and that concern could amount to:

- A member of staff or volunteer has behaved in a way that has harmed a child, or may have harmed a child, or
- Possibly committed a criminal offence against or related to a child, or
- Behaved towards a child or children in a way that indicates s/he may pose a risk of harm to children.
- Behaved or may have behaved in a way that indicates they may not be suitable to work with children.

NAME OF REFFERER AND AGENCY			
Name	Click or tap here to enter text.		
Agency	Click or tap here to enter text.	Job Title/Role:	Click or tap here to enter text.
Tel No:	Click or tap here to enter text.	Email	Click or tap here to enter text.

NAME OF REFERRED PERSON					
Family Name	Click or tap here to enter text.	Given Name	Click or tap here to enter text.	Do B:	Click or tap here to enter text.
Home Address:			Tel No:		
			Email		
Job Title/Role:		Ethnicity		Gender	Male
					Female
Workplace Address:					
Click or tap here to enter text.					
Names and DOB of own children if known:					
Click or tap here to enter text.					

Have there been any prior concerns regarding this person:	Yes	
	No	
<i>(If yes please give details, dates, and outcome)</i> Click or tap here to enter text.		

DETAILS of CHILD(REN) or YOUNG PERSON					
Family Name:		Given Name		DoB:	
Home Address:					
Ethnicity		Male		Female	

REASON FOR REFERRAL			
Date of incident		Time of Incident/Allegation	
Location of incident			
REFERRAL INFORMATION: Include details if any injuries/harm			
Click or tap here to enter text.			
Potential Witness(es)		Tel No:	
		Email	
Name of Potential Witness(es)		Tel No:	
		Email	
ADDITIONAL ACTION TAKEN / INFORMATION AFTER THE INCIDENT OR ALLEGATION WAS MADE			
Click or tap here to enter text.			
Action taken to address any immediate safeguarding concerns:			
Click or tap here to enter text.			

Please ensure that you complete this form in full before submitting to LADO Allegations Management.

Completed forms should be emailed to: LADO@Brighton-Hove.gov.uk