

Safeguarding Policy

Last reviewed by the Trustees: September 2018

Context

We help families overcome the costs of education so all children in Luton have the chance to love learning.

When money is tight at home, a child might not have the uniform and equipment they need for school. They are unlikely to be able to do fun things in the school holidays and they are more likely to suffer with mental health problems and low self-esteem. They can feel embarrassed about making friends because they feel 'different' and they can have little hope for the future.

27% of children in Luton live in poverty - that's over 11,000 children. If Luton is going to provide the best childhood possible for all our children, this needs to change.

We help children aged 4-16 by providing gift cards for school shoes and coats, running a Uniform Exchange in The Mall, giving out Learn @ Home resource packs full of the things children need for homework, and running a summer school packed with exciting and enriching experiences.

Our work makes children feel more included, more confident, and enables them to attend school more – which all adds up to a brighter future.

1. Opening Statement

- 1.1 Every child or young person deserves to be happy and secure in their activities, and their parents or carers need to feel sure that the people in charge of these activities are trustworthy, responsible and will do everything they can to keep the child or young person safe from harm. Level Trust has put in place safeguards to protect the children and young people with whom we work and all staff and volunteers are required to follow this policy and maintain the wellbeing of children and young people in their care.

2. Our Commitment

- 2.1 Level Trust is committed to safeguarding and promoting the welfare of all children and young people with whom our staff, volunteers and trustees come into contact. We believe that:
 - All children/young people have equal right to be protected from harm;
 - All children/young people have the right to speak freely and voice their values and beliefs;
 - All children/young people have equal right to be protected from harm;
 - All children/young people need to be safe and to feel safe;
 - All children/young people need support which matches their individual needs, including those who may have experienced abuse;
 - All children/young people must be encouraged to respect each other's values and support each other;

- All children/young people have the right to be supported to meet their emotional, and social needs as well as their educational needs – a happy healthy sociable child/young person will achieve better educationally;
- All staff and volunteers have an important role to play in safeguarding children and protecting them from abuse.

3. What is safeguarding

3.1 Safeguarding is defined as:

- Protecting children from maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best life chances.

(Working Together, DfE 2015)

This includes, but is not limited to safeguarding children in specific circumstances:

Neglect	Physical abuse
Emotional abuse	Sexual abuse
Bullying, including online and prejudice-based bullying	Racist, disability and homophobic or transphobic abuse
Gender based violence / violence against women and girls	Radicalisation and /or extremist behaviour
Child Sexual Exploitation and Trafficking	The impact of new technologies on sexual behaviour e.g. sexting
Teenage relationship abuse	Substance abuse
Gang / youth violence	Domestic abuse / violence
Female Genital Mutilation	Forced Marriage
Fabricated / induced illness	Poor parenting

4. Safeguarding aims

- 4.1 To create an environment which is safe and secure for all children and young people.
- 4.2 To enable children and young people to have the self-confidence, sense of identity and the vocabulary to resist inappropriate approaches.
- 4.3 To encourage children and young people to establish and sustain satisfying relationships within their families, with peers, and with other adults.
- 4.4 To encourage children and young people to develop a sense of autonomy and independence.

5. Key Principles

- 5.1 The key principle of safeguarding, as stated by the Luton Safeguarding Children Board (LSCB) is that Safeguarding is everybody's responsibility. This is reinforced within the Statutory Guidance "Keeping Children Safe in Education (2015)".
- 5.2 In addition Luton Borough Council has identified the following key safeguarding messages for organisations working with children and their families:
- Always see the child first and consider what life is like for the child maintaining a culture of vigilance.
 - Provide support and intervention at the earliest possible opportunity in the least intrusive way in accordance with the LSCB Threshold Framework (2015).
 - Have conversations, build relationships and maintain professional curiosity.
 - Focus on securing improved outcomes for children and consider what difference support or interventions have made on children's lived experiences.
 - Level Trust projects need to build a culture of openness and transparency where all staff and volunteers demonstrate understanding of their role and responsibility to safeguard and promote the welfare of children.
 - Governance is corporate and decisions are collective, but individual trustees can and should take the lead on specific aspects of the charity's work, such as safeguarding.
 - When issues arise, Level Trust's Director should speak out, addressing them internally where possible and engaging in a multi agency response when required in accordance with interagency procedures.

6. Key Processes

- 6.1 Key staff should be aware of the guidance issued by the LSCB Threshold Framework to ensure children secure support and intervention at the earliest possible opportunity in the least intrusive way. (<http://lutonlscb.org.uk/pdfs/threshold-framework.pdf>). This document is integral to safeguarding children in Luton and will always be used to underpin decision-making.

7. The role of Level Trust staff and volunteers

- 7.1 All Level Trust staff and volunteers will:
- Be familiar with this safeguarding policy and implement this consistently in their work with children and young people;
 - Be subject to Safer Recruitment processes and checks, whether they are new staff, contractors, volunteers, etc.
 - Be alert to signs and indicators of possible abuse (see Appendix 1 for current definitions and indicators);
 - Record concerns and give the record to the Safeguarding Lead, Husna Rasul.

- Recognise and respond to concerns about the behaviour of staff, volunteers and children/young people which indicates they may pose a risk of harm following interagency procedures agreed by the LSCB;
- Deal with a disclosure of abuse from a child in line with the guidance in Appendix 2.

8. The Role of the Safeguarding Lead

- 8.1 Our Safeguarding Lead is Husna Rasul, Hub Manager, who will provide support to staff members to carry out their safeguarding duties and will liaise closely with other services such as the early help hub, children’s social care, health professionals, Police, etc. This person has lead responsibility and management oversight for safeguarding and child protection.
- 8.2 Where required the Safeguarding Lead will contribute to any regular case monitoring reviews of vulnerable children. These reviews, together with any actions arising from the review and the rationale for decision-making will be recorded.
- 8.3 When Level Trust has concerns about a child, the Safeguarding Lead will decide what steps should be taken and initiate a response accordingly. The trustee designated as Level Trust’s second named person is Altaf Hussain, who will be kept informed of any issues.
- 8.4 Safeguarding and child protection information will be dealt with in a confidential manner and in accordance with the Level Trust Data Protection Policy. Staff and volunteers will be informed of relevant details only when the Safeguarding Lead feels their having knowledge of a situation will improve their ability to deal with an individual child and / or family.
- 8.5 It is the responsibility of the Safeguarding Lead to ensure that staff and volunteers are trained correctly.
- 8.6 It is the responsibility of the Safeguarding Lead to inform trustees of any safeguarding concerns and to explain the procedures that have been put into place. No details of the individuals or the specifics of the concern are to be shared.
- 8.7 Safeguarding and child protection records will be stored securely in a central place.
- 8.8 If Level Trust send records to a child’s school or Social Services by post, they will be sent by “Special/Recorded Delivery”.
- 8.9 When the Safeguarding Lead resigns from Level Trust or no longer holds this responsibility, there should be a full face-to-face handover/exchange of information with the new post holder.
- 8.10 In exceptional circumstances when a face-to-face handover is unfeasible, the trustee assigned to oversee the charity’s safeguarding will ensure that the new post holder is fully conversant with all procedures and case files.

9. The Role of Trustees

- 9.1 Altaf Hussain is the trustee who has been elected by the board to provide specific oversight of safeguarding on behalf of the board.
- 9.2 Safeguarding will be a standing agenda item at every full meeting of the board of trustees.
- 9.4 The trustees will:
- Ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training for Level Trust staff, volunteers and trustees are effective and comply with the current legislation.
 - Ensure that procedures are in place to manage allegations against other children that are commensurate with the LSCB procedures, such as those for sexually problematic and harmful behaviours.
 - Ensure that there are processes in place that enable children and young people to express their wishes and feelings and provide feedback.
 - Review this policy and the procedures annually.

10. Recruitment

- 10.1 Our procedure for recruiting staff and volunteers aims to be effective, fair and safe.
- 10.2 In recruiting a new member of staff or volunteer we allow sufficient time before appointment to carry out all necessary checks and references. We will not allow any member of staff or volunteer to take up a role without these having been completed satisfactorily.
- 10.3 Applicants for roles within Level Trust, whether paid or voluntary, will be clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974. Applicants will also be informed of the need to carry out Enhanced DBS checks and take up references before posts can be confirmed. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.
- 10.4 We abide by the Protection of Children Act requirements in respect of any person who is dismissed from our employment, or who resigns in circumstances that would otherwise have led to dismissal for reasons of a concern about safeguarding.

11. Line Management

- 11.1 All staff and volunteers receive regular line management appropriate to their role. As part of line management, line managers ask staff and volunteers if there are any safeguarding concerns they have raised and how they are being dealt with.

- 11.2 If the line manager believes that safeguarding concerns are not being raised or dealt with correctly by their team of staff or volunteers they should raise this immediately with the Safeguarding Lead.
- 11.3 If a member of staff or volunteer consistently fails to follow safeguarding procedures correctly they will be subject to the Level Trust disciplinary procedures.

12. Training

- 12.1 Safeguarding children and young people is a core element of our professional development and training programme for all staff, volunteers and trustees.
- 12.2 All new staff, volunteers and trustees complete safeguarding training as part of their induction.
- 12.3 All staff, volunteers and trustees will receive level one training at least once every three years. Key staff with designated responsibility for safeguarding will undertake higher-level training and will utilise the training opportunities available from the LSCB and other organisations as agreed by the trustees.
- 12.4 As part of our induction process, the Safeguarding Lead ensures all staff, volunteers and trustees are aware of the Level Trust's Safeguarding Policy, and how to report and record any safeguarding concerns.

13. Project content

- 13.1 We seek to create within Level Trust a culture of value and respect for the individual. This is particularly important as many of our projects seek to work directly with children who experience financial disadvantage, something that, if not dealt with sensitively, could cause stigma or damage a child's sense of dignity.
- 13.2 Therefore, when planning a project, utmost care is given to ensure it is accessible and open to any child or young person in need.
- 13.3 Any child or young person attending our organised projects must complete a permission form signed by a parent or guardian (see Appendix 6).
- 13.4 As part of our project planning, a detailed risk assessment is completed (see Appendix 7). This gives us the specific procedures needed to be followed in each project to ensure the safety of children and young people. All staff and volunteers are briefed on the risk assessments for the projects they are involved in. It is the responsibility of the specific project leader to complete this risk assessment. All risk assessments should be checked by the Health and Safety Officer and Safeguarding Lead.
- 13.5 We ensure that our projects are carried out in a way that is appropriate for the ages, developmental stages and learning and behavioural needs of the children and young people attending.
- 13.6 Where appropriate, we will make children and young people aware at the start of a

project or activities of Level Trust's safeguarding responsibilities so that children and young people can develop an understanding of why and how to keep safe.

- 13.7 We display a safeguarding statement in our premises and online which explains what a child, young person or parent can do if they are worried about their safety or the safety of someone they know.

14. Safeguarding Children who are vulnerable to extremism, exploitation, forced marriage, female genital mutilation or trafficking

- 14.1 Since 2010, when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been several occasions both locally and nationally in which extremist groups have attempted to radicalise vulnerable children and young people to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.
- 14.2 Level Trust recognises our responsibility to be aware of the pressures that children and young people can face from violent extremism, forced marriage, female genital mutilation or trafficking and the importance of spotting the signs of when a child is under pressure and referring this information on.
- 14.3 When any member of staff has concerns that a child may be at risk they should speak to the Safeguarding Lead. If a child or young person is thought to be at risk of radicalisation, a referral to the Early Help Assessment team will be made.
- 14.4 Level Trust keeps up to date on the latest advice and guidance provided to assist in addressing specific vulnerabilities and forms of exploitation.

15. Suspected abuse

- 15.1 When children and young people are suffering from abuse, this may be demonstrated through changes in their behaviour and appearance or through abnormal behaviour for their age. Where such changes in behaviour occur, or where there is cause for concern, we will investigate. The signs and symptoms of abuse will vary from child to child. For a detailed overview of signs and symptoms of abuse please visit <https://www.nspcc.org.uk/preventing-abuse/signs-symptoms-effects/>.
- 15.2 We recognise the importance that investigations are carried out with sensitivity. Staff and volunteers take care not to influence the outcome, either through the way they speak to or ask questions of the child or young person.
- 15.3 It is acknowledged that asking reasonable questions to find out more about a child's situation is crucial in ascertaining the child's need.

- 15.4 Where a child or young person shows signs and symptoms of 'failure to thrive' or neglect, the appropriate referrals will be made. Parental/Carer permission will be sought before making a referral, unless by seeking this permission we put a child at risk.
- 15.5 Level Trust will work co-operatively with the parent or carer unless this is inconsistent with the need to ensure the child's safety.
- 15.6 We recognise that it can be difficult for a child or parent to be told we are concerned about a child in their care's safety. We will always make it clear that the reason for raising the concern is for the best interests of helping the child or young person and for making things better for the child.

16. What we do when we are concerned

- 16.1 Staff and volunteers who have a concern must record the concern or disclosure using the appropriate incident report form (see Appendix 8).
- 16.2 These records are signed and dated and kept in a separate confidential file.
- 16.3 The member of staff or volunteer will discuss the incident with the Safeguarding Lead immediately. If both Safeguarding Leads are unavailable, they will refer it to the most senior manager available.
- 16.4 The Safeguarding Lead will view the concern alongside the LSCB Threshold Framework in order to ensure the appropriate support or intervention is provided at the earliest opportunity in the least intrusive way.
- 16.5 Where risk factors are present but there is no evidence of a particular risk then the Safeguarding Lead will work with the family and our partners to engage the child and family in other activities and services that may be of help so that we can together reduce the risk. The concern will in most circumstances, be shared with the child's school as they are often best placed to take a lead on safeguarding concerns. It is the welfare of the child which is paramount and this is at the forefront of all our actions.
- 16.6 If it is deemed that there is a particular risk to the child then the Early Help Assessment team should be contacted for advice.
- 16.7 If it is deemed that the child or young person is at risk of or suffering significant harm a referral will be made to Luton Mash. The parent will be informed of the referral unless informing the parent may place the child / young person at increased risk of harm.
- 16.8 We are aware that many children and young people have suffered because of lack of communication between agencies, and that government guidance now encourages the full sharing of information. We shall therefore use our professional judgement in sharing information with the agencies that 'need to know', being open and honest with parents, children and young people as to why we feel we need to share the information.

16.9 Full records of conversations will be maintained when any referrals or discussions are held with any other agencies or with parents prior to a referral. These records will include dates and times of the conversation, who we speak to, and the advice we were given.

17. Our role in supporting children

17.1 When working with a child or young person who is affected by abuse we will always do all we can to work sensitively and provide as much support as we can.

17.2 As a small local charity we recognise the limitations of what we ourselves can offer and so will do all we can to refer children and young people to other organisations who have the expertise to offer the support that is most appropriate to them.

18. Involving parents and carers

18.1 In general, we will discuss any safeguarding and child protection concerns with parents / carers before approaching other agencies, and will seek their consent to making a referral to another agency. However, there may be occasions when we will contact another agency before informing parents / carers because it considers that contacting them may increase the risk of significant harm to the child.

18.2 Parents / carers will be informed about our safeguarding policy through our website and on request.

19. Multi agency working

19.1 We work in partnership with other agencies in the best interests of the children.

19.2 We will co-operate with any child protection enquiries conducted by children's social care

20. Responding to an allegation or concern about a member of staff, volunteer or trustee

20.1 This procedure should be used in any case in which it is alleged that a member of staff, trustee or volunteer 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; or
- Behaved in a way that indicates s/he may pose a risk of harm to children.

20.2 All staff, volunteers and trustees must report any potential safeguarding concerns about an individual's behaviour towards children and young people immediately. Allegations or concerns about colleagues and visitors must be reported directly to the Level Trust

Director unless the concern relates to the Director. If the concern relates to the Director, it must be reported immediately to the Chair of Trustees.

- 20.3 If the Director is not available the member of staff should report their concerns to the most senior member of staff available.
- 20.4 The Director, in conjunction with the Chair of Trustees will inform LSCB that a complaint has been raised and will work in partnership with them and other appropriate parties including the Police and Health to investigate the complaint.
- 20.5 Whilst a complaint of this nature is being investigated Level Trust may decide it is appropriate for the staff member, volunteer or trustee to be suspended from their duties with Level Trust. However all reasonable alternatives to manage the risk will be considered.
- 20.6 Should Level Trust dismiss a member of staff, volunteer or trustee as a result of a substantiated allegation, or should a member of staff, volunteer or trustee resign before an investigation has been completed, in accordance with Statutory Duty a referral to the Disclosure and Barring Service will be made.

21. Children with additional needs

- 21.1 Level Trust recognises that while all children have a right to be safe, some children may be more vulnerable to abuse, for example those with a disability or special educational need, those living with domestic violence or drug / alcohol abusing parents, etc.

22. Children in specific circumstances

- 22.1 Guidance on children in specific circumstances is in Luton Safeguarding Children Board / Luton Borough Council procedures as listed below

- Abuse Linked to Spiritual Belief
- Child Sexual Exploitation
- Safeguarding Children vulnerable to Gang Activity
- Supporting individuals vulnerable to violent extremism
- Private Fostering
- Children missing from home or care
- Children missing education
- Children of Parents who Misuse Substances
- Children of Parents with Learning Difficulties
- Working with parents/carers with mental health problems
- Working with parents/carers with disabilities
- Disabled Children
- Protocol for dealing with domestic violence when children are involved
- E-Safety – Children Exposed to Abuse through the Digital Media
- Fabricated or Induced Illness
- Female Genital Mutilation



- Forced Marriage / Honour Based Violence
- Practice Guidance & Procedures to distinguish between healthy and abusive sexual behaviours in children and young people
- Safeguarding children who may have been trafficked
- Protocol & Guidance; Working with Sexually Active Young People
- Working with hostile, non-compliant clients and those who use disguised compliance

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Appendix 1

DEFINITIONS AND INDICATORS OF ABUSE

1. Neglect

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

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers); or
- Ensure access to appropriate medical care or treatment.

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

The following may be indicators of neglect (this is not designed to be used as a checklist):

- Constant hunger;
- Stealing, scavenging and/or hoarding food;
- Frequent tiredness or listlessness;
- Frequently dirty or unkempt;
- Often poorly or inappropriately clad for the weather;
- Poor school attendance or often late for school;
- Poor concentration;
- Affection or attention seeking behaviour;
- Illnesses or injuries that are left untreated;
- Failure to achieve developmental milestones, for example: growth, weight;
- Failure to develop intellectually or socially;
- Responsibility for activity that is not age appropriate such as cooking, ironing, caring for siblings;
- The child is regularly not collected or received from school; or
- The child is left at home alone or with inappropriate carers.

2. Physical 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.

The following may be indicators of physical abuse (this is not designed to be used as a checklist):

- Multiple bruises in clusters, or of uniform shape;
- Bruises that carry an imprint, such as a hand or a belt;
- Bite marks;
- Round burn marks;
- Multiple burn marks and burns on unusual areas of the body such as the back, shoulders or buttocks;
- An injury that is not consistent with the account given;
- Changing or different accounts of how an injury occurred;
- Bald patches;
- Symptoms of drug or alcohol intoxication or poisoning;
- Unaccountable covering of limbs, even in hot weather;
- Fear of going home or parents being contacted;
- Fear of medical help;
- Fear of changing for PE;
- Inexplicable fear of adults or over-compliance;
- Violence or aggression towards others including bullying; or
- Isolation from peers.

3. **Sexual Abuse**

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

The following may be indicators of sexual abuse (this is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge;
- Anal or vaginal discharge, soreness or scratching;
- Reluctance to go home;
- Inability to concentrate, tiredness;
- Refusal to communicate;
- Thrush, persistent complaints of stomach disorders or pains;
- Eating disorders, for example anorexia nervosa and bulimia;
- Attention seeking behaviour, self-mutilation, substance abuse;
- Aggressive behaviour including sexual harassment or molestation;
- Unusual compliance;
- Regressive behaviour, enuresis, soiling;
- Frequent or open masturbation, touching others inappropriately;
- Depression, withdrawal, isolation from peer group;

- Reluctance to undress for PE or swimming;
or
- Bruises or scratches in the genital area.

4. **Sexual Exploitation**

Child sexual exploitation (CSE) occurs when a child or young person, or another person, receives “something” (for example food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of the child/young person performing sexual activities, or another person performing sexual activities on the child/young person.

The presence of any significant indicator for sexual exploitation should trigger a referral to children’s social care. The significant indicators are:

- Having a relationship of concern with a controlling adult or young person (this may involve physical and/or emotional abuse and/or gang activity);
- Entering and/or leaving vehicles driven by unknown adults;
- Possessing unexplained amounts of money, expensive clothes or other items;
- Frequenting areas known for risky activities;
- Being groomed or abused via the Internet and mobile technology; and
- Having unexplained contact with hotels, taxi companies or fast food outlets.

The intelligence reporting form on the LSCB website will be used to share information with Police and children’s social care that raises a concern around CSE.

In addition to making referrals to children’s social care, referrals of children thought to be at risk of, or experiencing CSE will be referred to the Child Sexual Exploitation panel.

5. **Emotional Abuse**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only in so far 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 the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another person. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment.

The following may be indicators of emotional abuse (this is not designed to be used as a checklist):

- The child consistently describes him/herself in very negative ways – as stupid, naughty, hopeless, ugly;
- Over-reaction to mistakes;
- Delayed physical, mental or emotional development;
- Sudden speech or sensory disorders;

- Inappropriate emotional responses, fantasies;
- Behaviours such as rocking, banging head, regression, tics and twitches;
- Self harming, drug or solvent abuse;
- Fear of parents being contacted;
- Running away;
- Compulsive stealing;
- Appetite disorders - anorexia nervosa, bulimia; or
- Soiling, smearing faeces, enuresis.

N.B. Some situations where children stop communication suddenly (known as “traumatic mutism”) can indicate maltreatment.

6. Responses from Parents

Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- Delay in seeking treatment that is obviously needed;
- Unawareness or denial of any injury, pain or loss of function (for example, a fractured limb);
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development;
- Reluctance to give information or failure to mention other known relevant injuries;
- Frequent presentation of minor injuries;
- A persistently negative attitude towards the child;
- Unrealistic expectations or constant complaints about the child;
- Alcohol misuse or other drug/substance misuse;
- Parents request removal of the child from home; or
- Violence between adults in the household.

7. Disabled Children

When working with children with disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin;
- Not getting enough help with feeding leading to malnourishment;
- Poor toileting arrangements;
- Lack of stimulation;
- Unjustified and/or excessive use of restraint;

- Rough handling, extreme behaviour modification such as deprivation of medication, food or clothing, disabling wheelchair batteries;
- Unwillingness to try to learn a child's means of communication;
- Ill-fitting equipment, for example callipers, sleep boards, inappropriate splinting;
- Misappropriation of a child's finances; or
- Inappropriate invasive procedures.

Appendix 2

DEALING WITH A DISCLOSURE OF ABUSE

When a child tells me about abuse s/he has suffered, what must I remember?

- Stay calm.
- Do not communicate shock, anger or embarrassment.
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

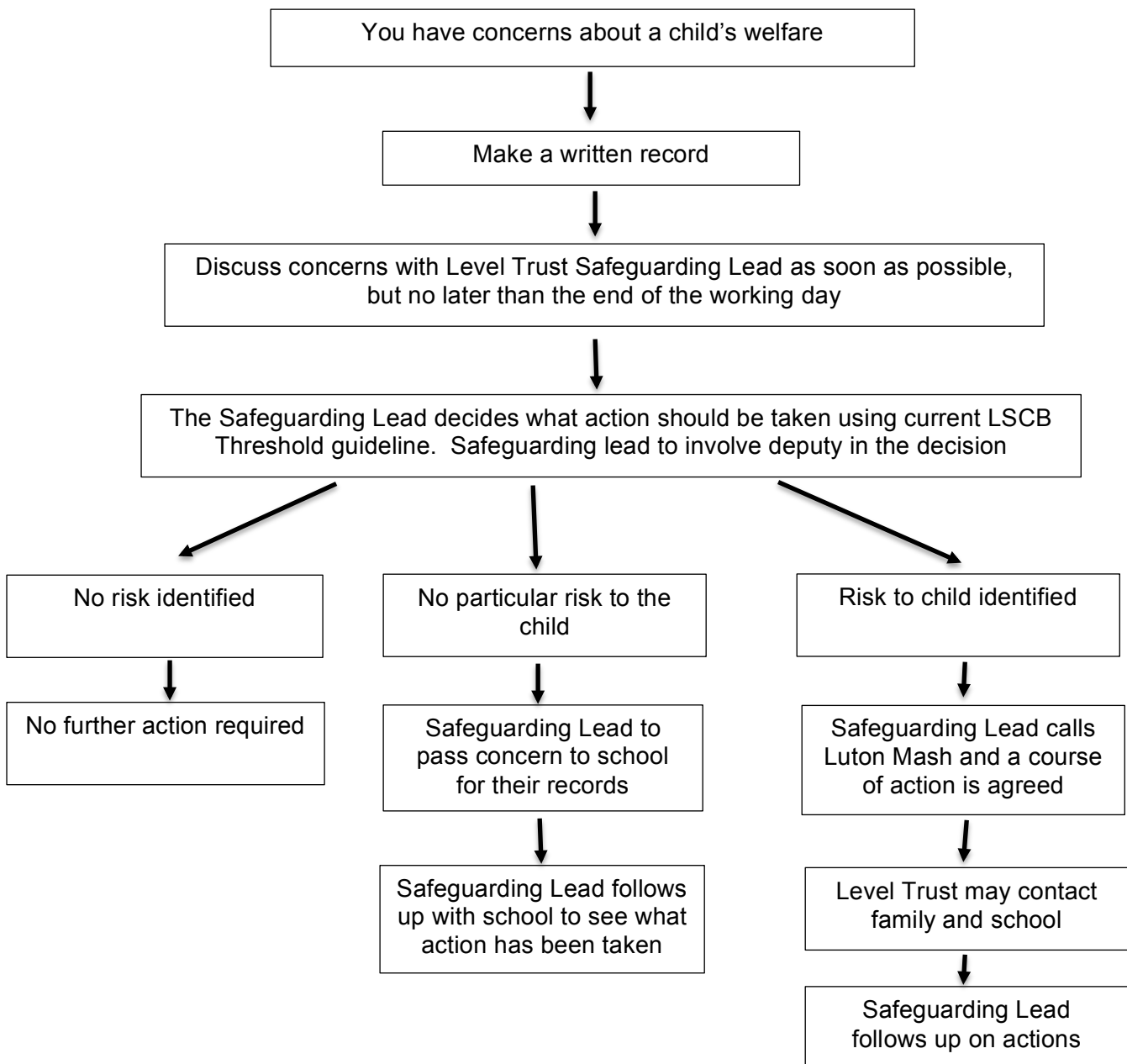
You must not deal with this yourself. Clear indications or disclosure of abuse must be reported to the Safeguarding Lead immediately.

Children making a disclosure may do so with difficulty, having chosen carefully to whom they will speak. Listening to and supporting a child/young person who has been abused can be traumatic for the adults involved. Please seek support from your line manager should you require it.

Appendix 3

WHAT TO DO IS YOU ARE WORRIED ABOUT A CHILD OR YOUNG PERSON

Your Level Trust Safeguarding Leads are:
Husna Rasul: 07968 201114 Altaf Hussain: 07411 052286



**You can also seek advice from Luton Mash on 01582 547653
 Out of hours: 0300 3008123**

or the NSPCC helpline on 0808 800 5000 at any time

Appendix 4

ALLEGATIONS ABOUT A MEMBER OF STAFF, TRUSTEE OR VOLUNTEER

1. Inappropriate behaviour by staff, trustees or volunteers could take the following forms:
 - *Physical:* e.g. the intentional use of force as a punishment, slapping, hitting with an object, throwing objects or inappropriate physical handling.
 - *Emotional:* e.g. intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes that discriminate on the grounds of race, gender, disability or sexuality. Excessive or aggressive shouting.
 - *Sexual:* e.g. sexualised behaviour towards peers, sexual harassment, sexual communication including via social networking, email, text, grooming behaviour, sexual assault and rape.
 - *Neglect:* e.g. failing to act to protect a child or children, failing to seek medical attention or failure to meet a child's basic needs

2. If a child makes an allegation or raises a concern about a member of staff, trustee, visitor or volunteer the Director should be informed immediately. If the allegation or concern may fall within the following criteria the Local Authority Designated Officer (LADO) will be contacted at the earliest possible opportunity and within 1 working day.
 - Behaved in a way that has harmed a child or may have harmed a child;
 - Possibly committed a criminal offence against or related to a child; or
 - Behaved in a way that indicates s/he may pose a risk of harm to children

The Director will not carry out the investigation him/herself or interview children/young people.

3. If a child makes an allegation of physical abuse against an adult that works with children and there are visible bruises, marks or injuries, or if a child makes an allegation of sexual abuse against an adult that works with children, Child Protection procedures will be followed and a referral made to the Rapid Interventions and Assessment Team. The LADO will also be informed.

3. The Director must exercise, and be accountable for, their professional judgement on the action to be taken, as follows –
 - If the actions of the member of staff are felt likely to fall within the scope of the interagency allegation management procedures as stated in point 2, the Director will notify the LADO (Tel: 01582 548069). The LADO will liaise with the Director and advise about action to be taken which will be in accordance with the interagency procedures for managing allegations.

- If the Director is uncertain whether the concern or allegation falls within the scope of the allegation management procedures, a consultation with the LADO will take place and the advice provided will be acted upon. This consultation and the advice offered will be recorded and held on file.
4. Where an allegation has been made against the Director, then the Chair of Trustees or designated deputy takes on the role of liaising with the LADO team in determining the appropriate way forward. For details of this specific procedure see the Section on [Allegations against Staff and Volunteers](#) in the procedures of Luton Safeguarding Children Board.

Appendix 5

INDICATORS OF VULNERABILITY TO RADICALISATION

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:
“Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.”
3. Extremism is defined by the Crown Prosecution Service as:
“The demonstration of unacceptable behaviour by using any means or medium to express views which:
 - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
 - Seek to provoke others to terrorist acts;
 - Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
 - Foster hatred which might lead to inter-community violence in the UK.”
4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
5. Children may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability include:
 - Identity Crisis – the child is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
 - Personal Crisis – the child may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
 - Personal Circumstances – migration; local community tensions; events affecting the child’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
 - Unmet Aspirations – the child may have perceptions of injustice; a feeling of failure; rejection of civic life;
 - Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;

-
- Special Educational Need – children may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

7. More critical risk factors could include:

- Being in contact with extremist recruiters;
- Accessing violent extremist websites, especially those with a social networking element;
- Possessing or accessing violent extremist literature;
- Using extremist narratives and a global ideology to explain personal disadvantage;
- Justifying the use of violence to solve societal issues;
- Joining or seeking to join extremist organisations;
- Significant changes to appearance and / or behaviour;
- Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.



Appendix 6

PERMISSION FORM
for completion by Parent/Carer

Name:

Emergency contact number 1:

Emergency contact number 2:

Does your child have any medical needs, allergies or disabilities we should be aware of? If yes please give details.

I give permission for (insert child's name) to volunteer/attend activity with Level Trust.

Signature:

Date:

Please return completed permission forms to
on the first day of your child's volunteering/participation in an activity

Appendix 7

RISK ASSESSMENT TEMPLATE

Keys

Likelihood of Risk (LR): 1 Green = Low 2 Amber = Moderate 3 Red = High

Severity of Risk (SR): 1 Green = Low 2 Amber = Moderate 3 Red = High

Overall Risk (OR): Likelihood multiplied by Severity
(1-3 Green = Low 4-6 Amber = Moderate 7-9 Red = High)

<i>Risk/Hazard</i>	<i>Person(s) at Risk</i>	<i>Initial assessment</i>			<i>How will the risk be managed</i>	<i>Managed assessment</i>		
		<i>LR</i>	<i>SR</i>	<i>OR</i>		<i>LR</i>	<i>SR</i>	<i>OR</i>

Appendix 8

INCIDENT REPORT FORM

Please keep this document confidential and share with Safeguarding Lead as soon as possible

Level Trust Safeguarding Lead:	Report by:
	Date of Report:

Name and information about the child or young person

Name:	Date of Birth:
Gender: Male Female Other	Ethnicity:
Address:	Name of Persons with parental responsibility:
Town:	Name of School attended:
Postcode:	

Details of incident

Project where the incident happened:	Name of other partners involved in the project:
Date:	Time:

Please describe what happened, what was said and what was observed

I confirm that the information I have given above is correct.

Signed: Date:

For Safeguarding Lead to Complete

Safeguarding Lead decision:
Was this referral passed on to the child's school? Yes / No Which School:
Notes:

Details of the organisation(s) and person(s) referred to

Organisation(s):	
Name(s):	
Role:	
Date:	
Time:	

Final Outcome (if known)

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Further notes (must include your name, role, date, time, if different to above)

--

I confirm that the information I have given above is correct.



Signed:

Date:

Key Contacts

Husna Rasul (Safeguarding Lead) – 07968201114

Altaf Hussain (Trustee/Safeguarding Lead) - 07411 052286

Level Trust Office - 07480 753 905

Luton Multi-Agency Safeguarding Hub (MASH) - 01582 547653
Out of hours - 0300 3008123
mash@luton.gcsx.gov.uk

NSPCC helpline - 0808 800 5000

Luton Safeguarding Children Board – 01582 547624 or 01582 547590