



Safeguarding and Child Protection Policy

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1. Purpose of the policy

Ignite Life is committed to creating and embedding a culture of vigilance which

- Ensures that our children and young people (CYP) are safe and protected
- Ensures that they know who to talk to if they have concerns
- Ensures that they are supported, protected and informed
- Ensures that they are safe from discrimination and bullying
- Ensures that they are supported in their development and learning to recognise and manage risk.

This policy applies to all staff, volunteers and children and young people working with Ignite Life or accessing its services. It also applies to the young adults we support.

2. Definition and specific safeguarding issues



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

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes.

Specific safeguarding issues

Staff must be vigilant for signs of abuse and be fully aware of expectations and procedures to be followed. The following are all key aspects of the child protection landscape; and vulnerable children and young people are particularly at risk from:

Child Sexual Exploitation • Bullying, including cyberbullying • Domestic Violence • Drugs • Fabricated or induced illness • Faith abuse • Female Genital Mutilation • Forced marriage • Gangs and youth violence • Gender based violence • Mental health • Private fostering • Preventing radicalisation • Sexting and peer on peer abuse • Teenage abusive relationships • Trafficking

3. Legal framework

- All action is taken in line with the following legislation/guidance: • South West Local safeguarding Board procedures (which includes arrangements for all of the Local Authorities we work with) <http://www.proceduresonline.com/swcpp/> • Equality Act 2010 • The United Nations Convention on the Rights of the Child (UNCRC) • Education Act 2011 • Working together to Safeguard Children 2018 • Keeping Children Safe in Education 2019 The Children Act 2018 • What to do if you are worried a child is being abused : advice for practitioners (2015) • Counter Terrorism and Security Act 2015 • Disqualification under the Children Act 2006 (Feb 2015) • South Gloucestershire Child Sexual Exploitation Strategy (2016) • South Gloucestershire guidance on Forced Marriage, Female Genital Mutilation and Honour Based Violence • National PREVENT strategy with guidance and advice regarding radicalisation 2018 • Information sharing- advice for practitioners providing safeguarding services to children, young people, parents and carers 2015

4. Principles of Safeguarding and Child protection at Ignite Life

4.1 "The welfare of the child is paramount." (Children Act 2018)



4.2 We will follow direct guidance from each provider (in line with procedures set out by the South West Safeguarding Children's Board and guidance from individual Local Authorities' boards) and take account of guidance issued by the DFE.

4.3 We recognise that staff, because of their contact with and knowledge of children or young people in their care, are well placed to promote the well-being of children, protect them from harm, and respond to child protection or safeguarding concerns.

4.4 The ethos of Ignite Life is CYP-centred, and Leaders are committed to:

- ensuring the organisation practises safe recruitment in checking the suitability of staff and volunteers to work with children and young people
- ensuring that all staff and volunteers understand, and adhere to, Ignite Life's code of conduct
- providing first aid as and when required 'in loco parentis'.
- having clear processes regarding intimate care
- meeting the needs of our students with medical needs
- developing Inclusive practice which promotes the voice of the child and seeks to reduce the barriers that students from vulnerable backgrounds may have and which may in turn affect their mental health and wellbeing, as well as their ability to share information about maltreatment and abuse
- establishing and maintaining a safe mentoring environment, where all children and young people feel secure, can learn and develop, are encouraged to talk and are listened to;
- ensuring all staff are aware of signs and symptoms of abuse, know the correct procedure for referring concerns or allegations against staff and receive appropriate training to enable them to carry out these requirements;
- ensuring all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated person responsible for child protection;
- exercising their duty to work in partnership with other agencies and to share information with them, including attendance at child protection conferences; core groups and preparation of reports for conferences where appropriate
- encouraging and supporting parents/carers, working in partnership with them;
- supporting students in accordance with their agreed child protection plan

4.5 To enable a CYP-centred approach staff are equipped with relevant risk assessments, background information and guidance to keep children safe. This may include further training



for those with additional needs. A referral will only proceed once everything required to work safely is in place.

4.6 All staff will share appropriate information in a timely way and discuss any concerns about an individual student with the DSL and Deputy DSLs and local authority children's social care.

4.7 Ignite Life recognises that many of the risks to young people in the 'real world' apply equally to the 'virtual world' that young people encounter when they use Information Communication Technology (ICT) in its various forms. We recognise our responsibility to educate children and young people to help them become safe and responsible users of new to allow them to become discriminating users of both the content they discover and the contacts they make online.

5 Roles and responsibilities

The Designated Safeguarding Lead (DSL):

Ignite Life has a Designated Safeguarding Lead with responsibility for Child Protection; this person is a member of the Lead Pod. All staff and volunteers and providers must be made aware who the Designated Safeguarding Lead is and what their role is.

Richard Berry is the Designated Safeguarding Lead for Ignite Life

Thomas Gould is the Deputy Designated Safeguarding Lead

5.1 The Designated Safeguarding Lead will:

- Ensure that there are mechanisms in place to assist Ignite Life staff to understand and discharge their role and responsibilities;
- Ensure that new staff receive induction safeguarding training before working with children and young people and Level 2 safeguarding training prior to lone working with children and young people
- Ensure all staff receive follow up training annually
- Ensure staff have completed Prevent training
- Ensure that records of training are accurately maintained for all staff in liaison with the Director of Operations
- Ensure that the profile of safeguarding remains high within Ignite Life by sending regular updates via email or through podcasts, bulletins and displays
- Work in direct partnership with Schools, Children's Services, Looked After Children's services and the Virtual School and parents who have responsibility for their progress
- Ensure all staff and volunteers, have access to protocols and policies related to child protection.



- Be responsible for record keeping, ensuring accuracy and security; including communicating CP concerns promptly to schools and commissioning organisations and agencies.
- Act as a source of advice, support and expertise within Ignite Life for staff and volunteers to draw upon.
- Coordinate all action regarding safeguarding and child protection concerns.
- Notify social care if there is an unexplained absence for a child or young person who is Looked After has a Child Protection Plan.
- Use the Resolution of Professional Differences Policy (Escalation Policy) should they feel that a referral has not been dealt with in accordance with child protection procedures
- Receive annual update training at advanced Inter-Agency Level and coordinate any changes to child protection policy or procedures.

5.2 The Operations manager in conjunction with the DSL will ensure that:

- Systems to ensure safer recruitment of staff and volunteers are in place.
- All staff have an enhanced DBS in place prior to working with people
- All volunteers and visitors to sites under the supervision of Ignite Life have read the Ignite Life Code of Conduct and guidance on child protection and safeguarding
- All interviews will be carried out by a panel of at least two senior staff. At least one member of any interview panel will have completed certified Safer Recruitment Training
- Only persons suitable to work with children shall be employed by Ignite Life or work in a voluntary capacity as detailed in Keeping Children Safe in Education 2019. Where safeguarding concerns about a member of staff are substantiated, appropriate action is taken

5.3 The Operations Manager will ensure that Ignite Life's Single Central Record is accurately maintained as an ongoing, accurate and live record.

6 Handling disclosures

6.1 The first point of contact should be the DSL or Deputy DSL. They will contact the school or social worker with responsibility for the child or young person.

6.2 Following a safeguarding concern being raised, the member of staff should make prompt and accurate notes stating only what was said and seen. Due to the nature of mentoring work this is likely to be sent via Ignite Life email to the DSL or Deputy DSL. Any hand-written notes should be kept and passed to the DSL as soon as possible.



6.3 Further clarification will take place in person or by telephone and the school, DSL, Social worker or safeguarding lead of the commissioning organisation will be contacted to agree next steps. Where this is not possible the DSL will immediately inform Children Services Referral Team by telephone:

Authority	Number to contact	Out of hours/weekends
South Glos.	Access and Response 01454 866000	01454 615165
Bristol Children's Services	First Response 0117 903 6444.	01454 615165
North-Somerset	Single Point of Access (SPA) 01275 888808	01454 615 165
Gloucestershire	01452 426565 (option 3)	01452 426565 (Option 1).
Somerset	Children's Social Care 0300 123 2224	0300 123 23 27
Wiltshire	Wiltshire Multi-Agency Safeguarding Hub (MASH) 0300 456 0108	0300 456 0100
BANES	Children and Families Assessment and Intervention Team Tel: 01225 396312 or 01225 396313.	01454 615165.

6.4 The disclosure and actions will be anonymised and signposted on the secure safeguarding log within 24 hours and supporting materials securely filed in a locked and key-logged Child protection cabinet.

7 Induction and training of staff and volunteers

7.1 The Director of Operations, Designated Safeguarding Lead and Leader of Provision will jointly ensure the induction and training of new staff supports the safety and wellbeing of the children and young people who work with Ignite Life. This will take place through initial Induction training and mandatory CPD sessions within the probationary 3-month period. This must include:

- Completion of a Level 2 safeguarding training
- Completion of Prevent awareness training
- Receive a child protection induction which includes access to information, identifying and reporting abuse, and confidentiality issues relevant to the mentoring context



7.2 Guidance and training is given around expectations of professional behaviour and professional boundaries specific to our setting:

- working alone with a young person
- keeping personal life and professional life separate
- physical interventions
- cultural and gender stereotyping
- managing suspicions about drugs and alcohol
- children or young people absconding from sessions
- dynamic risk assessment
- specific risk assessments
- planning for work with children with specific or additional needs or SEND
- dealing with sensitive information
- managing relationships with parents
- giving and receiving gifts from CYPs and parents
- protocols around contacting young people through private telephones (including text), email, MSN or social networking sites.
- disclosing personal details inappropriately
- what to do when a relationship with a young person breaks down

7.3 If a member of staff has reasonable suspicion that a young person is suffering harm, and fails to act in accordance with this policy, this will be viewed as misconduct and appropriate action will be taken by Director

7.4 Any member of staff or visitor to Ignite Life who receives a disclosure of abuse or suspects that abuse may have occurred must report it immediately to the Designated Safeguarding Lead or their Deputy in their absence. Confidentiality must be maintained and information relating to individual students/families shared with staff on a strictly need to know basis.

7.5 All members of staff have a duty to attend or complete training on safeguarding children that will enable them to fulfil their responsibilities in respect of child protection effectively; this training will be provided by the Designated Safeguarding Lead every year

8 Whistleblowing

8.1 Staff have access to regular supervision where they can express concerns about other staff or practices that link with children's safety.

8.2 The Whistleblowing Advice Line offers free advice and support to professionals with concerns about how child protection issues are being handled in their own or another organisation. They can be contacted on 0800 028 0285 or by emailing them directly using help@nspcc.org.uk



9 Working with Providers and Commissioning organisations and agencies

9.1 Ignite Life annually reviews its Quality Assurance and Safeguarding procedures. A Quality Assurance pack is sent to all providers and commissioning organisations who use Ignite Life's services.

9.2 QA visits are welcome from all partner organisations and Ignite Life Leadership staff will attend on request to further check processes and procedures.

10. Working with Parents and Carers

Ignite Life is committed to helping parents/carers understand its responsibility for the welfare of all CYPs. Parents/carers will be made aware of our Safeguarding and Child Protection Policy via our website, initial meetings with parents of new mentees. Full copies of the policy will be available upon request

11. Record Keeping

AS A COMMISSIONED SERVICE, ALL CHILD PROTECTION CONCERNS AND RECORDS MUST BE SHARED WITH THE SCHOOL OR SOCIAL WORKER CONCERNED. WHERE THE REFERRAL IS A PRIVATE ONE, CONSIDERATION MUST BE GIVEN OF THE NATURE OF THE CONCERN AND RELEVANT AGENCIES CONSULTED FOR GUIDANCE.

11.1 Any member of staff receiving a disclosure of abuse, or noticing possible abuse, must make an accurate record as soon as possible noting what was said or seen, putting the event into context, and giving the date, time and location.

11.2 All records must be dated and signed (electronic signature via email if time demands) and discussed with the Designated Safeguarding Lead or Deputy Safeguarding Lead. All hand-written records will be retained.

11.3 Written records of concerns about CYPs should be kept, even where there is no need to make an immediate referral. The concern will be discussed immediately with the child or young person's school and/or social worker and next steps agreed jointly. All records relating to child protection concerns will be kept in a secure cabinet and will remain confidential. Electronic records and documents are uploaded into secure student document folders. A chronology will be kept of individual student concerns which is reviewed and updated whenever a new concern is raised, noting any action.

12. Allegations made against staff

12.1 If anyone makes an allegation that any member of staff, or volunteer may have:



- 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 that he or she would pose a risk of harm to children.

Then the allegation will be dealt with in accordance with national guidance and agreements, as implemented locally by the relevant Safeguarding children's Board.

12.2 Allegations against a member of staff should be brought to the attention of the Director and/or DSL in the first instance, unless they are the subject of the allegation; in this situation the allegation should be referred to the non-executive chairman of Ignite Life – Mr Mike Armiger

12.3 An allegation must not be discussed with the alleged perpetrators or other members of staff unless advised to do so by a LADO.

12.4 Members of staff may have to make physical interventions with children; this should only be done where:

- It is necessary to protect the child, or another person, from immediate danger
- Where the member of staff has received suitable training such as positive handling training

13. Photographing of Children and young people

Ignite Life often use photographs and videos to support our work. Consent from parents/carers (or social workers where the CYP is subject to a child protection plan), as well as the CYP is obtained under the categories below:

13.1 Photographs and videos can be taken using personal devices and put into the young person's journal OR included on reports back to school/referrer OR used internally within Ignite Life to share successes. These photos are deleted once they have been used, so that no long-term digital images are saved.

13.2 Photographs and videos taken on personal devices are saved securely and used for wider purposes such as showcasing the work done by Ignite Life, training of new mentors and for promotional purposes. They are deleted from personal devices once saved.

14. Appendices

Appendix A: Signs and Types of Abuse (Taken from the NSPCC Website -March 2015)

Sexual Abuse



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Children who are sexually abused may:

Stay away from certain people

- they might avoid being alone with people, such as family members or friends they could seem frightened of a person or reluctant to socialise with them.

Show sexual behaviour that's inappropriate for their age

- a child might become sexually active at a young age
- they might be promiscuous
- they could use sexual language or know information that you wouldn't expect them to

Neglect

Neglect can be really difficult to identify, making it hard for professionals to take early action to protect a child.

Having one of the signs or symptoms below doesn't necessarily mean that a child is being neglected. But if you notice multiple, or persistent, signs then it could indicate there's a serious problem.

Children who are neglected may have:

Poor appearance and hygiene They may:

- be smelly or dirty
- have unwashed clothes
- have inadequate clothing, e.g. not having a winter coat
- seem hungry or turn up to school without having breakfast or any lunch money
- have frequented and untreated nappy rash in infants.

Health and development problems

They may have:

- untreated injuries, medical and dental issues
- repeated accidental injuries caused by lack of supervision
- recurring illnesses or infections
- not been given required medicines and vaccinations
- poor muscle tone or prominent joints
- skin sores, rashes, flea bites, scabies or ringworm
- thin or swollen tummy
- anaemia
- tiredness
- faltering weight or growth and not reaching developmental milestones (known as failure to thrive)
- poor language, communication or social skills.

Physical Abuse

Physical abuse is deliberately hurting a child causing injuries such as bruises, broken bones, burns or cuts.

It isn't accidental - children who are physically abused suffer violence such as being hit, kicked, poisoned, burned, and slapped or having objects thrown at them. Shaking or hitting babies can cause non-accidental head injuries (NAHI). Sometimes parents or carers will make up or cause the symptoms of illness in their child, perhaps giving them medicine they don't need and making the child unwell – this is known as fabricated or induced illness (FII).

Emotional Abuse

Emotional abuse is the ongoing emotional maltreatment or emotional neglect of a child. It's sometimes called psychological abuse and can seriously damage a child's emotional health and development.

Emotional abuse can involve deliberately trying to scare or humiliate a child or isolating or ignoring them.



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Emotional abuse includes:

- humiliating or constantly criticising a child
- threatening, shouting at a child or calling them names
- making the child the subject of jokes, or using sarcasm to hurt a child
- blaming, scapegoating
- making a child perform degrading acts
- not recognising a child's own individuality, trying to control their lives
- pushing a child too hard or not recognising their limitations
- exposing a child to distressing events or interactions such as domestic abuse or drug taking
- failing to promote a child's social development
- not allowing them to have friends
- persistently ignoring them
- being absent
- manipulating a child
- never saying anything kind, expressing positive feelings or congratulating a child on successes

Domestic Abuse

A definition of this is where there is any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Further guidance can be found here: www.gov.uk/guidance/domestic-violence-and-abuse
It can happen in any relationship, and even after the relationship has ended. It is key to remember that children witnessing domestic violence between parents and grandparents are suffering harm.

Child Trafficking

Child trafficking is child abuse. Children are recruited, moved or transported and then exploited, forced to work or sold. They are often subject to multiple forms of exploitation.

Children are trafficked for:

- child sexual exploitation
- benefit fraud
- forced marriage
- domestic servitude such as cleaning, childcare, cooking
- forced labour in factories or agriculture
- criminal activity such as pickpocketing, begging, transporting drugs, working on cannabis farms, selling pirated DVDs, bag theft.

Physical, sexual and emotional violence are often used to control victims of trafficking. Children are also likely to be physically and emotionally neglected

Grooming and Child Sexual Exploitation including Serious Violent Crime

Grooming is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse or exploitation. Groomers may be male or female. They could be any age. Criminal gangs groom young people. There is increasing evidence that criminal gangs are targeting vulnerable individuals and staff should always be vigilant that many of the signs of grooming could suggest that the CYP is at risk from this kind of targeting.

Children and young people can be groomed online or in the real world, by a stranger or by someone they know - for example a family member, friend or professional.

Many children and young people don't understand that they have been groomed, or that what has happened is abuse.



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Grooming happens both online and in person. Groomers will hide their true intentions and may spend a long time gaining a child's trust. They may also try to gain the trust of the whole family, so they can be alone with the child.

Groomers do this by:

- pretending to be someone they are not, for example saying they are the same age online
- offering advice or understanding
- buying gifts
- giving the child attention
- using their professional position or reputation
- taking them on trips, outings or holidays.

Using secrets and intimidation to control children

Once they have established trust, groomers will exploit the relationship by isolating the child from friends or family and making the child feel dependent on them. They will use any means of power or control to make a child believe they have no choice but to do what they want. Be aware that the following might be indicators of young people being groomed by criminal gangs:

- Unexplained gifts/new possessions – these can indicate children have been approached by/involved with individuals associated with criminal networks/gangs
- Increased absence from school
- Change in friendship/relationships with others/groups
- Significant decline in performance
- Signs of self-harm/significant change in wellbeing
- Signs of assault/unexplained injuries

Harmful Sexual Behaviour

Harmful sexual behaviour includes:

- using sexually explicit words and phrases
- inappropriate touching
- using sexual violence or threats
- full penetrative sex with other children or adults.

Children and young people who develop harmful sexual behaviour harm themselves and others.

Female Genital Mutilation

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting.

Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence. There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It is used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health.

A girl or woman who's had FGM may:

- have difficulty walking, sitting or standing
- spend longer than normal in the bathroom or toilet
- have unusual behaviour after an absence from school or college
- be particularly reluctant to undergo normal medical examinations
- ask for help, but may not be explicit about the problem due to embarrassment or fear.

What to look out for before FGM happens

A girl at immediate risk of FGM may not know what's going to happen. But she might talk about:



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being taken 'home' to visit family a special occasion to 'become a woman' an older female relative visiting the UK.

She may ask a teacher or another adult for help if she suspects FGM is going to happen or she may run away from home or miss school.

All concerns about FGM must be passed to the Police and Social Care immediately.

Bullying

Bullying is behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone.

It can happen anywhere – at school, at home or online. It's usually repeated over a long period of time and can hurt a child both physically and emotionally.

Bullying that happens online, using social networks and mobile phones, is often called cyberbullying. A child can feel like there's no escape because it can happen wherever they are, at any time of day or night.

Bullying includes:

- verbal abuse, such as name calling and gossiping
- non-verbal abuse, such as hand signs or text messages
- emotional abuse, such as threatening, intimidating or humiliating someone
- exclusion, such as ignoring or isolating someone
- undermining, by constant criticism or spreading rumours
- controlling or manipulating someone
- racial, sexual or homophobic bullying
- physical assaults, such as hitting and pushing making silent, hoax or abusive calls online or cyberbullying.

Peer on Peer Abuse

Features physical, emotional, sexual and financial abuse of young people by their peers

- It is influenced by the nature of the environments in which young people spend their time
- It often hinges upon young people's experiences of power, and ultimately the notion of consent
- It is ultimately about unhealthy relationships and should be viewed as such e.g. domestic violence and relationships which are exploitative
- Sexting is a form of peer on peer abuse and should be dealt with as a matter of safeguarding by staff
 - Upskirting is now a form of peer-on-peer abuse. Upskirting is typically when a photograph is taken under a person's clothing without them knowing, for sexual gratification or to cause the victim humiliation, distress or alarm

Safeguarding CYPs with special educational needs and disabilities

Many disabled children are at an increased likelihood of being socially isolated with fewer outside contacts than non-disabled children

Their dependency on parents and carers for practical assistance in daily living, including intimate personal care, increases their risk of exposure to abusive behaviour

They have an impaired capacity to resist or avoid abuse

They may have speech, language and communication needs which may make it difficult to tell others what is happening

They often do not have access to someone they can trust to disclose that they have been abused



They are especially vulnerable to bullying and intimidation
Looked after disabled children are not only vulnerable to the same factors that exist for all children living away from home, but are particularly susceptible to possible abuse because of their additional dependency on residential and hospital staff for day to day physical care needs.

Full government guidance can be found at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/190544/00374-2009DOM-EN.pdf

Appendix B: Guidance on Prevent

Prevent is the government strategy to counter the risks associated with people being drawn into extreme behaviour through radicalization. Radicalisation is a process similar to grooming. Vulnerable people are targeted by extremist groups with the aim of motivating them ultimately to commit acts of violence or terrorism

The general risks affecting children and young people may vary from area to area, and according to their age. Professionals like mentors are in an important position to identify. It is important that alternative providers understand these risks so that they can respond in an appropriate and proportionate way. At the same time schools and childcare providers should be aware of the increased risk of online radicalisation, as terrorist organisations such as ISIL seek to radicalise young people through the use of social media and the internet. Radicalisation can also be in the form of right-wing groups.

There is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. Children at risk of radicalisation may display different signs or seek to hide their views. We should use our professional judgement in identifying children who might be at risk of radicalisation and act proportionately.

Even very young children may be vulnerable to radicalisation by others, whether in the family or outside, and display concerning behaviour. The Prevent duty does not require teachers or childcare providers to carry out unnecessary intrusion into family life but as with any other safeguarding risk, they must take action when they observe behaviour of concern. Schools and childcare providers should have clear procedures in place for protecting children at risk of radicalisation. These procedures may be set out in existing safeguarding policies. It is not necessary for schools and childcare settings to have distinct policies on implementing the Prevent duty. General safeguarding principles apply to keeping children safe from the risk of radicalisation as set out in the relevant statutory guidance, Working together to safeguard children and Keeping children safe in education.

School staff and childcare providers should understand when it is appropriate to make a referral to the Channel programme. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the



programme is entirely voluntary at all stages. Detailed guidance on Channel is available. <https://www.gov.uk/government/publications/channel-guidance>

Appendix C: A précis of the Law regarding Sexual Activity and U18s

Age of Consent

The age of consent for all sex is 16, whether straight, gay or bi-sexual. The Sexual Offences Act 2003 makes it easier to prosecute people who pressure or force others into sexual activity

Under 13s

A child under 13 does not, under any circumstances, have the legal capacity to consent to any form of sexual activity. In all cases where the sexually active young person is under the age of 13, there must be a formal recorded consultation with the Children & Young People (Social Care) Dept from the relevant local authority

Under 16s

If under 16 activity is consensual it may be less serious than if the child were under 13, but may nevertheless have serious consequences for the welfare of the young person. In every case involving a child aged 13-15 there should be a discussion with referring agencies as to whether a referral should be made to children's social care. The younger the child, and the wider the age gap between participants, the greater the concern (even 3 years' age difference may be worrying if one of the children is young and/or vulnerable). Where confidentiality needs to be preserved, a discussion can still take place as long as it does not identify the child (directly or indirectly).

16 & 17 Year Olds

Although sexual activity in itself is no longer an offence over the age of 16, young people under the age of 18 are still offered the protection of Child Protection Procedures under the Children Act 1989. Consideration still needs to be given to issues of sexual exploitation through prostitution, and abuse of power. Although they may be over 16, young people under the age of 18 are not deemed able to give consent if the sexual activity is with an adult in a position of trust/authority, or a family member as defined by the Sexual Offences Act 2003

Sharing Information with Parents

If a young person is under 16, professionals should encourage the young person, at all points, to share information with their parents wherever safe to do so. However parental advice is not needed if a young person under 16 can understand the issues and appreciate the consequences. This also applies to those living in care. Decisions to share information with parent will be taken using professional judgement, and the Child Protection Procedures. Decisions will be based on the child's age, maturity and ability to appreciate what is involved in terms of the implications and risks to themselves. Giving Advice,



Contraception &/or Access to Services to Under 16s Under the Sexual Offences Act 2003, youth support workers can help young people under 16 (including under 13s, but see section above) to seek contraception and sexual health advice/services (including giving out condoms), without being seen to facilitate an illegal act. However, this would always be in discussion with the DSL of the referring agency.

Provision of contraception or professional advice

Any intervention must take place within the Fraser Guidelines and Child in Need/Child Protection Procedures.

The Fraser Guidelines require the professional to be satisfied that

- The young person will understand the professional's advice;
- The young person cannot be persuaded to inform their parents;
- The young person is likely to begin, or to continue having, sexual intercourse with or without contraceptive treatment;
- Unless the young person receives contraceptive treatment, their physical or mental health, or both, are likely to suffer;
- The young person's best interests require them to receive contraceptive advice or treatment with or without parental consent.

Reviewed: September 2019

To be reviewed: September 2019