

Chapter 3

SMASH Youth Project: SAFEGUARDING

Trustee with Safeguarding Responsibility: Chris Etheridge 07966 869545

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Deputy Designated Safeguarding Lead (DDSL): Kat Rowe 07342 314946

Deputy Designated Safeguarding Lead (DDSL) for Wiltshire: Gem Novis 07774 483 790

Safeguarding is everyone's responsibility. SMASH is committed to ensuring compliance with best practise in our safeguarding standards. When SMASH has reasonable grounds for concern that children/young people (CYP) or adults at risk are being, have been, or are at risk of being harmed, then concerns will be raised in accordance with SMASH safeguarding policy and (where appropriate) statutory guidance.

SMASH will provide services that as far as possible prevents any child, YP or adult at risk from experiencing harm.

Introduction

- The most important thing we can do for the CYP we work with is to do all we can to keep them safe; we also need to ensure the safety of the people working for SMASH.
- Safeguarding and promoting the welfare of children is defined¹ as:
- Protecting children from maltreatment.
- Preventing impairment of children's mental and physical health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

All trustees, employees/colleagues and volunteers have a clear responsibility to act when they suspect or recognise that a CYP or an adult at risk may be a victim of significant harm or abuse. In addition, SMASH has a responsibility to ensure that it provides an environment which minimises the risks of preventable harm and working practices which protect children and adults at risk.

All trustees, staff and volunteers are required to have DBS checks before working for SMASH² which are to be renewed at least every three years. However, these checks only relate to convictions so it cannot be assumed that anyone with a 'check' must be OK around CYP.

Everyone, whatever their role, has a duty to follow the safeguarding procedures. Your status within 'the system' does not matter. The child, YP themselves or one of their family may choose to tell you something they have not shared with anyone else. You may witness something nobody else has seen.

¹ <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

² SMASH will accept checks done by other agencies if less than 2 months old.

The same action should be taken if the allegation is about abuse that has taken place in the past, as it will be important to find out if that person is still working with or has access to children.

Abuse can be physical, emotional, sexual or neglect. You will have more information about the categories of abuse and the kind of behaviours that may be involved during your training. Everyone must attend training in safeguarding and child protection which should be updated at least every three years.

Record of Amendments

Mar 22	Document reviewed and approved by Safeguarding Officer and Trustees
1 Mar 23	Document reviewed by HoOps and Rowan Kikke. Flowchart added at Appendix A
21 Mar 23	Further review and minor updates by HoOps – policy published to Emp Handbook
12 Jul 23	Minor updates, amended definitions to reflect DSL/DDSL.
30 Oct 24	Major review and reissue post audit (Sep 24).

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1. Organisational Details

- Name of Organisation: SMASH Youth Project
- Office Address: Pinetrees Community Centre, The Circle, Swindon. SN2 1RF
- Tel No: 01793 72948 (Office)
- Email address:
 - andy@teamsmash.org.uk (Executive Safeguarding Lead)
 - rowan@teamsmash.org.uk (Designated Safeguarding Lead)
 - kat@teamsmash.org.uk (Deputy Designated Safeguarding Lead)
 - gem@teamsmash.org.uk (Deputy Designated Safeguarding Lead Wiltshire)
 - Trustee Safeguarding Lead Chris Etheridge christine_etheridge@hotmail.com
- Charity Number: 1107900

2. Introduction

SMASH is committed to the prevention of abuse and the appropriate handling of suspicions or concerns regarding the abuse of CYP and adults at risk of harm. We recognise that each employee, volunteer or trustee is responsible for ensuring everyone in their care is kept safe from harm and any concerns regarding the infliction of harm or the failure to prevent harm are reported appropriately.

SMASH will ensure that children, YP and adults at risk of harm in our care are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

3. Responding to an Allegation or Suspicion of Abuse & Reporting Responsibilities

Under no circumstances should a worker carry out their own investigation if abuse is suspected, observed, disclosed or otherwise alleged. In all cases, they should follow the procedures as below:

The person in receipt of an allegation or who has suspicions of abuse should report concerns as soon as possible to the Designated Safeguarding Lead (DSL) or the Deputy Designated Safeguarding Lead (DDSL)³. See also [Appendix A – SMASH Flow Chart](#).

³ Rowan Kikke is the Designated Safeguarding Lead (DSL), Kat Rowe is the Deputy Designated Safeguarding Lead (DDSL), Gem Novis is the Deputy Designated Safeguarding Lead (DDSL) for Wiltshire.

In the absence of the Safeguarding Team or, if the suspicions in any way involve the DSL/DDSL, then the report should be made to the Trustee⁴ responsible for Safeguarding.

Other Helplines

- The SMASH Office: 01793 729748
- Contact Swindon: 01793 464646
- Multi Agency Safeguarding Hub Wiltshire: 0300 456 0108
- Emergency Duty Service (Swindon): 01793 436699 (out of hours)
- Emergency Duty Service (Wiltshire): 0300 456 0100 (out of hours)
- Police Child Abuse Investigation Team: 101
- Police Domestic Abuse Investigation Team: 101
- Immediate danger - Police 999.

The absence of the nominated Safeguarding Leads (SL) should not delay referral of the allegation to the relevant bodies. Therefore, if for some reason, they are all unavailable then the individual should take action themselves (in accordance with their training and following the process below themselves). They should continue to make every effort to contact the DSL/DDSL as the process develops.

4. Process for Safeguarding Officers

The role of the SL is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies who have a legal duty to investigate. It is not the role of the SL, or anyone within SMASH, to investigate allegations and concerns, unless directed to do so by the relevant statutory agency. A written record of the concerns, observations or disclosure should be made as soon as practically possible (ideally within 1 hour) in accordance with these procedures and kept in a secure place. The date, time, location and people present should be included in the written record. The content of this report is at [Appendix B](#)

a. Dealing with Allegations of Physical Injury, Neglect or Emotional abuse

If a CYP or adult at risk of harm has a physical injury, a symptom of neglect or where there are concerns about emotional abuse, the SL will:

- Contact Children's Social Services immediately for advice in cases of deliberate injury or if a child/young person/ adult at risk of harm is afraid to return home. If there is immediate danger, threat or risk from further harm, then the police may be contacted.
- Seek medical help if needed urgently, informing the doctor of any suspicions.
- Not tell the parents or carers unless advised to do so by social services.
- For concerns related to parenting, they will encourage parent/carer to seek help, but not if this places anyone at potential risk of harm. Where the parent/carer is unwilling to seek help, they will offer to accompany them. If they still fail to act, contact Children's Social Services for further advice.

b. Dealing with Allegations or Suspicions of Sexual Abuse

In the event of allegations or suspicions of sexual abuse, the SL will Contact the Children's Social Services Department or Police Child Protection Team direct. They will NOT speak to the parent/carer or anyone else.

⁴ Christine Etheridge Chair of Trustees.

c. Dealing with Allegations or Suspicions relating to Staff or Volunteers

If an allegation is made against a worker (employed staff, volunteer or trustee) whilst following the procedure outlined above, the SL will inform the Local Authority Designated Officer within Children's/Social Services⁵. The Designated Safeguarding Lead within their own Trustee Board will also be informed. If the allegation involves the DSL or DDSL then the Chair of the Board is to be informed.

In any of the cases above, the SO will:

- Keep their nominated trustee informed.
- Not discuss details of the case to anyone else, other than those nominated above.

5. DBS Referrals

Where there is a proven allegation against a worker (employed staff, volunteer or trustee), there is a requirement under law to make a referral to the DBS who manage and maintain the lists of people barred from working with children, YP and adults at risk of harm. We have a duty to ensure that individuals who pose a threat to vulnerable groups can be identified and barred from working with these groups. The duty is upon us as a 'regulated activity' provider, which includes SMASH and other voluntary organisations. They must be informed by way of a referral where the 'employer' (of a paid or volunteer worker) withdraws permission for an individual to be engaged in the relevant activity or would have done so had that individual not resigned, retired, been made redundant, or been transferred to a position which is not regulated or controlled. The referral should be made when the organisation has obtained sufficient evidence and, where appropriate, has consulted with the relevant statutory designated officer.

6. Charity Commission Notification

Any serious safeguarding incident involving a SMASH worker must also be reported to the Charity Commission by the Designated SL within the Trustee Board. They have a duty to report what happened and explain how this was handled, even if you have reported it to the police or another agency. Further guidance can be obtained from the Charity Commission. This applies to where the incident relates to a worker whether employed or a volunteer.

7. Recruitment

a. Safer Recruitment of Staff and Volunteers

Having in place robust practices surrounding the recruitment of staff and volunteers; including trustees, is an essential element in our safeguarding arrangements. These help to deter, detect and prevent those we would wish not to be working with children, YP and adults at risk of harm from doing so at the earliest point. SMASH will ensure all staff and volunteers are appointed and supervised in accordance with a safer recruitment policy and guidelines. It is advised that suitable questions around safeguarding should be asked as part of the interview process. Specific guidance on recruitment practice can be found in the SMASH recruitment & selection policy⁶.

b. Guidance on Recruiting Colleagues with a Criminal Record

⁵ The Local Authority Designated Officer (LADO) can be contacted via the Quality Assurance & Review Service, Clarence House, Euclid Street, Swindon SN1 2JH. Tel: (01793) 463854

⁶ Employee Handbook Chapter 12.

If there is evidence that an applicant for a role has a criminal record, either through self-disclosure or through the DBS check, or it comes to light that a current worker or volunteer has a previously undisclosed criminal record, then the following guidelines outline the relevant process.

The Police Act 1997, the Rehabilitation of Offenders Act 1974 and the ROA (Exceptions) Order 1975 will apply. As SMASH we recognise that gaining employment is an essential part of successful individual rehabilitation and that failure to secure employment or meaningful voluntary opportunities can be a key reason for re-offending. Consideration must be given as to whether SMASH is an appropriate place for rehabilitation on an individual basis. It is unlikely that any policy can cover all the circumstances which may arise, but the intention is to ensure equal opportunity and fairness to all prospective members of staff and volunteers.

c. Recruitment and Employment

Offers of work will be based primarily on the person's ability to undertake the tasks as stated in the job or role description. The nature of any criminal conviction will be considered as to its relevance to the work in question and will not of itself be a reason for non-employment. An assessment will be carried out by the Trustees. Risks will be assessed and consideration given to not allowing a risk to be knowingly imposed on any of those whom SMASH is serving, or on other staff or volunteers. An examination of the circumstances and events leading to an offence will be considered, as will repeat offences and the time since an offence took place. Careful attention will be given to relevant references and advice sought from appropriate agencies, considering the requirements outlined below. When there is an offence relating to children, YP or adults at risk of harm, or there is a known or suspected risk, SMASH will undertake a risk assessment (please refer to appendix A for a sample risk assessment) and agree appropriate action to mitigate any risks. For existing colleagues, this may involve removing the person from the relevant activity, either temporarily or permanently. Alternatively, SMASH reserves the right to supervise the individual concerned, if any known risk is assessed as manageable and will set boundaries for that person, which they will be expected to keep. This may involve the use of behavioural supervision agreements. Whatever action is taken, appropriate support will also be offered.

d. Requirements

Information contained in a Disclosure or obtained from an individual about a criminal record will be treated in strict confidence and on a need-to-know basis in accordance with The Disclosure and Barring Service code of practice and GDPR. Disclosures from applicants for a role will be kept securely retained for no longer than six months from the date they were received and disposed of securely. Information on spent convictions will be asked only of those who are applying for work which allows exempted questions under the Rehabilitation of Offenders Act. Applicants who wish to submit confidential information concerning any criminal convictions will be encouraged to do so separately from the application form, sent to the Chair of trustees or other nominated person.

e. Decision

The decision to employ someone with a criminal record is the legal responsibility of the trustees. Consideration should be given to all potential risks and how these can be mitigated which (as a minimum) should include:

- The length of time since the conviction.
- The severity and nature of the offence(s).
- Whether there was a repetition of offences.

- All and any potential risks.
- Evidence of rehabilitation.

8. Training and Supervision

Training

SMASH is committed to on-going safeguarding training for all colleagues, including trustees; developing a culture of awareness of safeguarding to help protect everyone. All colleagues should receive safeguarding training during their induction period. This will be updated every 2/3 years. Colleagues involved in recruitment and management will also receive appropriate training which includes safeguarding considerations. Appropriate evidence of training in safeguarding will be detailed to trustees annually as part of an annual cycle of review of policy and practice.

Prevent Duty

SMASH follows guidance from Amnesty UK regarding the Prevent Duty and their conclusion that it does not comply with international human rights law. Therefore, SMASH staff and volunteers will respond to all concerns around children and young people at risk of any form of grooming or exploitation by following our safeguarding procedures as outlined in this policy.

Supervision of Staff and Volunteers⁷

SMASH commit to ensuring all staff and volunteers are appropriately line managed and/or supervised by a named individual who arranges regular meetings. This is critical to the cycle of review and to ongoing development in all areas, not just safeguarding. Part of the role of the line manager/supervisor is to ensure all training needs are met and that those they supervise have understood their responsibilities about safeguarding and are able to raise any concerns or suspicions appropriately. The Line Manager (LM) should also be aware of each worker's performance in their role and their approach to personal relationships with the children, YP and adults at risk of harm in their care. It is expected that each LM will regularly observe the worker in their role. They should also keep a written record of supervision meetings and ensure any concerns or training needs are addressed. Evidence of training attended should be kept. Appropriate evidence should be presented to trustees as part of an annual cycle of review which demonstrates good working practice in this area.

9. Whistleblowing⁸

In addition to effective management of allegations against staff, there is a mechanism in place for staff and volunteers to raise legitimate concerns e.g. improper actions or omissions, about other colleagues; this is known as 'whistleblowing' – full details can be found in the appropriate policy. Colleagues should note that confidentiality cannot be guaranteed when concerns are raised that relate to the welfare and safety of children, YP or vulnerable adults.

10. Pastoral Care – supporting those affected by abuse, including Domestic Abuse

SMASH is committed to offering pastoral care to all those affected by abuse. This may be CYP or those working within the organisation as employees, volunteers or trustees who have been personally affected by abuse in the past or have been involved in dealing with abuse in some form as part of their current role. In offering pastoral care, we seek to work with everyone individually to provide the most

⁷ Employee Handbook 'Contribution and Supervision' Chapter 5.

⁸ Employee Handbook 'Whistleblowing' Chapter 7.

appropriate support, working with each individual and any local contacts, including relevant statutory agencies.

SMASH recognises that domestic abuse occurs across society and will ensure that all employees experiencing domestic abuse and seeking assistance will have their situation handled sympathetically and confidentially. All employees who ask for help in addressing domestic abuse will be supported to access appropriate advice and support from national agencies and public bodies.

Support may be provided in a variety of ways - the main aim is to ensure that no-one feels isolated because of their experiences, and no one is left to deal with difficult feelings or stress because of the safeguarding aspects of their role within SMASH.

11. Categories of Abuse (including statutory definitions)

Rowan Kikke (DSL) is the nominated lead for the following functions: Female genital mutilation, sexual exploitation, domestic violence and abuse, modern slavery and human trafficking, Children Looked After, radicalisation, and Mental Capacity Act and DoLS.

Abuse is any form of maltreatment of a child, YP or vulnerable adult and includes somebody inflicting harm or failing to act to prevent harm. Abuse may take place in any context; a family setting, an institution or a community setting and may involve someone known to the child or may involve a stranger. Abuse may be perpetrated by an individual or by a group and may be by an adult or by another child or children.

Although the statutory definitions of abuse vary slightly in England, Scotland and Wales, the following are broad definitions on which we base this policy. Please refer to [Appendix C - Categories of Abuse - Specific Contexts](#)

Physical abuse is the causing of physical harm to a child or young person. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

Emotional abuse is the persistent emotional ill-treatment of a child such as to cause severe and continuous adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate or valued only so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve causing children to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of ill-treatment 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, 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). Sexting is another form of sexual abuse and refers to the sending of sexually explicit messages or images usually between mobile phones. Sexting is now a criminal offence. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

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 caregivers).
- Ensure access to appropriate medical care or treatment.
- Tend to a child's basic emotional needs.

Abuse and Additional Needs

Additional needs covers a wide range of disabilities and impairments, including but not limited to moderate, severe, profound and multiple learning disabilities; physical or visual impairments; deafness; autism and autistic spectrum needs, physical or mental health needs; speech, language and communication needs and behavioural, emotional and social development needs. This range of needs have a different impact on each individual child and their experience of disabling barriers. Any one child's experience of their impairment will be unique to them.

Research⁹ consistently shows that disabled children and YP are more likely to experience abuse and specifically more likely to experience multiple kinds of abuse and multiple episodes of abuse. The increased risk applies to disabled children in all impairment groups and all forms of abuse.

One of the factors that places disabled children at higher risk is that they may be less able to access to services and support which would otherwise protect them. Consideration needs to be given of any barriers to communication and sense of isolation they may have, either because of their needs or as a consequence of our own attitudes or assumptions. Consideration needs to be given to appropriate training for all colleagues engaging with children and YP with additional needs to ensure there are no ongoing skills gaps or any lack of awareness.

In implementing this policy and our safeguarding procedures, SMASH seeks to ensure that specific consideration is given to those with additional needs and to ensuring that our services and safeguarding support is accessible in ways appropriate to all, regardless of any disability or impairment. Consideration should also be taken to children with sensory needs such as hearing or visual impairment.

Categories of Abuse Continued - Specific Contexts

Children and adults affected by gang activity

Such children and adults may be at risk of violent crime and are therefore considered vulnerable. Risks include access to weapons (including firearms), retaliatory violence and territorial violence with other gangs. Other risks include increased likelihood of involvement in knife crime, dangerous dogs, sexual violence and substance misuse.

Self-harm e.g. overdoses, cutting, misuse of drugs or alcohol

⁹ NSPCC 2018.

It will always be appropriate to discuss such a case with the DSL and the local authority children's social care. Help can also be obtained from child and adolescent mental health services (CAMHS), through the general practitioner (GP) and, sometimes, from direct access counselling services.

Domestic Abuse

Domestic abuse relates to any incident or pattern of incidents of controlling, coercive or 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. If there are children in the household they are witnesses to the abuse and are to be considered as emotionally abused, irrespective of whether or not they are in the same room.

Certain children and young people are more likely to be identified as requiring extra support to meet their safeguarding needs, these could include; children looked after and previously looked after children, young carers, those with mental health needs and those living in households where there is domestic abuse, mental health needs and/or substance misuse, children with parents who are currently in prison etc. SMASH will take steps to identify those at greater risk, regularly monitor and ensure appropriate measures are put in place to support their needs.

Female genital mutilation

This is a Criminal offence under UK Law, and any suggestion that it is being sought or has been carried out should be referred using the process outlined in this policy.

Child trafficking

Child trafficking is transporting children across national borders, sometimes without proper immigration arrangements, for a variety of illegal purposes which can include domestic service, illegal adoption, organ harvesting, benefit claims or prostitution. Such children may speak little English. The police should be contacted immediately if a member of staff or volunteer comes across such a child.

Sexual exploitation and Prostitution

Children can be exploited by being given rewards in return for sexual activities. Internet and other media technology may be used in the abuse. Violence, coercion and intimidation are common. Regardless of the challenging behaviours they may display, exploited children should be viewed as victims of child sexual abuse, not as criminals.

Forced marriage and honour-based violence

Disclosures of actual or possible forced marriage should not be treated as simply a family matter or be disclosed to other family members but should be referred to the relevant statutory agencies.

Complex (organized or multiple) abuse

This is abuse which involves one or more abusers and multiple children. The abusers may be acting in concert, or in isolation, or may be using an institutional framework or position of authority to abuse children. The internet may also be used.

Bullying

Bullying is another way in which children (or adults) abuse other children, and it can be verbal or physical. Bullying includes teasing, making unkind comments about a child, demanding money, "ganging up" on a child or physically assaulting a child. You might see evidence of torn clothes, bruising, burns, or scratches. A child might be afraid to attend school or other activities if they think the bully will be present.

PART TWO

Best Practice Guidelines

The following provides specific guidance about expectations for those who work as staff and volunteers for SMASH with children and YP. The over-riding principle of working safely in this context is that colleagues should take every opportunity that is reasonable to ensure that their actions do not cause harm, or fail to prevent harm, or provide opportunity for misunderstanding, misinterpretation or unnecessary allegations to be made. In doing so, the following guidance should be followed. Note that 'Colleagues' refers to all those who work with and have contact with children, YP and adults at risk of harm through the activity of SMASH. This includes staff, trustees and all volunteers.)

13. Position of Trust and Expected Behaviour

All those working with CYP and adults at risk of harm are in 'positions of trust' in relation to those in their care. Broadly speaking, a relationship of trust can be described as one in which one party is in a position of power or influence over the other by virtue of their work or the nature of their activity. It is vital for all those in positions of trust to understand the power this can give them over those they care for and the responsibility they must exercise because of this relationship. Colleagues should always maintain appropriate professional boundaries and avoid behaviour which might be misinterpreted by others.

It is unacceptable for those in a position of trust to engage in any behaviour which might allow a sexual relationship to develop with a CYP or adults at risk of harm for as long as the relationship of trust continues. This can be achieved by staff and volunteers respecting boundaries and privacy of those being cared for, knowing how to deal with issues of discipline appropriately and developing an awareness of issues related to equality, inclusion and additional needs. Any incident, behaviour or attitude that has potential to be misinterpreted or which could lead to a breach of trust should be reported at the earliest opportunity.

All colleagues have a responsibility to maintain public confidence in their ability to safeguard the welfare and best interests of CYP. It is therefore expected that they will adopt high standards of personal conduct to maintain the confidence and respect of the public in general and all those with whom they work. There may be times when a worker's behaviour, or actions in their personal life, come under scrutiny because their behaviour is considered to compromise their position or indicate an unsuitability to work with CYP. The behaviour of a worker's partner or other family members may raise similar concerns and require careful consideration by an employer as to whether there may be a potential risk to CYP in the workplace. All colleagues and trustees will have signed the SMASH Code of Conduct.

Celebrities and VIPs

On occasion, SMASH may have celebrities or VIPs visiting sessions or organised events who will come into contact with young people and recognise that the one-off nature of these visits may mean that these adults do not have a valid DBS check or a robust awareness of safeguarding practice. To ensure the safety of all, any such visitor will always be accompanied by a SMASH colleague and never left unattended with any young person.

14. Record Keeping and Data Protection

Colleagues may have access to personal or sensitive information about CYP in order to undertake their responsibilities. These details must be kept confidential and only shared when it is in the interests of the child to do so. Such information must not be used to intimidate, humiliate, or embarrass the CYP. If a colleague is in any doubt about whether to share information, they should seek guidance from their LM or SO/SL. Any actions should be in line with SMASH GDPR polices. Trustees should provide clear advice to employees and volunteers about their responsibilities under this legislation. Whilst colleagues need to be aware of the need to listen to and support CYP, they must also understand the importance of not promising to keep secrets. Neither should they request this of a CYP under any circumstances.

Records of contact with CYP and adults at risk of harm will be kept for every activity in accordance with the Data Retention Policy of SMASH. These records safeguard CYP and adults at risk of harm and all colleagues.

Every CYP and adult at risk of harm, parent or carer should be able to view what is recorded about them. This information will be kept in a way that does not breach the confidentiality of an individual. Whilst it is important to observe data protection requirements, **safeguarding is always the priority**. Information about the prevention and detection of crime is exempt from Data Protection requirements. It may, therefore, be inappropriate to release information to a parent that has been disclosed by a CYP or adults at risk of harm, without first consulting the statutory agencies.

Information of a sensitive nature e.g. a child/YP/adult at risk of harm disclosing abuse, will need to be kept separately in a secure place and recorded using a report form. However, a cross reference could be recorded along the lines of "*Jenny spoke to Bill tonight - see separate note in her file*".

15. Social Contact

Social contact and communication between colleagues and CYP or adults at risk of harm, in whatever form, should take place within clear professional boundaries and always in a setting that is both public and appropriate.

Colleagues should not request or respond to personal information from a CYP, other than that which is appropriate as part of their professional role. All communications are to be transparent, open to scrutiny and should also be clear in their approach to communication to avoid any possible misinterpretation of their motives or any behaviour (which could be construed as grooming). Colleagues should not give their personal contact details (including e-mail, home or mobile telephone numbers) to any child, YP or adults at risk of harm, unless the need to do so is agreed in advance with their management and parents/carers. Communications outside agreed protocols may lead to disciplinary and/or criminal investigations.

Where social contact is an integral part of work duties, care should be taken to maintain appropriate personal and professional boundaries. This also applies to social contacts made through interests outside of work or through the colleague's own family or personal networks. All contacts established or continued with children, YP or adults at risk of harm outside of the normal work environment should be open and transparent, with appropriate caution for safe working practices being adopted. This means that colleagues should:

- Ensure that all contact with children, YP or adults at risk of harm is transparent and open to scrutiny and therefore have no secret contact or private communication.

- Consider the appropriateness of all their contacts and communication, according to their role and nature of their work.
- maintain appropriate levels of accountability in relation to their contact with children, YP and adults at risk of harm and advise management of any social contact they have which may give rise to concern.
- Report and record any situation, which may place anyone at risk or which may compromise the organisation or their own role or standing.

16. Appropriate Relationships

Gifts, Rewards and Favouritism

It is acknowledged that there are specific occasions when colleagues may wish to give a child or YP a personal gift. The giving of gifts or rewards to children, YP or adults at risk of harm should be part of an agreed plan for supporting positive behaviour or recognising achievements. Colleagues need to be aware that the giving of gifts can be misinterpreted by others as a gesture either to bribe or 'groom' a YP. Adults should exercise care when selecting children and/or YP for specific activities or privileges to avoid perceptions of favouritism or unfairness. Care should also be taken to ensure that colleagues do not accept any gift that might be construed as a bribe by others or lead the giver to expect preferential treatment. There are occasions when children, YP or parents wish to pass small tokens of appreciation and this is acceptable. However, it is unacceptable to receive gifts on a regular basis of any significant value.

Infatuations

Occasionally, a child, YP or adults at risk of harm may develop an infatuation with someone who works with them. Colleagues should deal with such situations sensitively and appropriately to maintain the dignity and safety of all concerned. They should remain aware that such infatuations carry a high risk of words or actions being misinterpreted and should therefore make every effort to ensure that their own behaviour is above reproach, transparent and accountable. A colleague who becomes aware that a child or YP is developing an infatuation should discuss this at the earliest opportunity with their LM so that appropriate action can be taken to avoid any distress, misunderstanding or embarrassment. Such concerns should be reported and recorded with an agreed plan of action implemented to ensure professional boundaries are maintained.

Sexual Contact and Relationships

All colleagues should clearly understand the need to maintain appropriate boundaries in their work with children and YP. Intimate or sexual relationships between colleagues and children or YP will be regarded as a grave breach of trust and a matter of gross misconduct. This includes contexts in which the colleague and the YP are close in age. Allowing or encouraging a relationship to develop in a way which might lead to a sexual relationship is always unacceptable, due to the breach of trust and the nature of the colleague's position of power. Any sexual activity between an adult and a YP under the age of consent is a criminal offence.

This means that colleagues should NOT:

- Have any form of intimate relationship with a child, young person or adults at risk of harm.
- Have any form of communication with a child/YP or adults at risk of harm in their care which could be interpreted as sexually suggestive or provocative.
- Make sexual remarks to, or about a child/young person or adults at risk of harm.
- Discuss their own sexual relationships with or in the presence of children/YP or adults at risk of harm.

17. Physical Contact

Not all children and YP feel comfortable about physical contact. Permission should be sought from a child or YP before physical contact is made. Where the child is very young, there should be a discussion with the parent or carer about what physical contact is acceptable and/or necessary.

General Principles

When physical contact is made with a child, this should be in response to their needs at the time, of limited duration and appropriate to their age, stage of development, gender, ethnicity and background. It is not possible to be specific about the appropriateness of each physical contact, since an action that is appropriate with one child in one set of circumstances may be inappropriate in another. However, physical contact should never be secretive, or for the gratification of an adult, or represent a misuse of authority. If a colleague believes that their action could be misinterpreted, or if an action is observed by another as being inappropriate or possibly abusive, the incident and circumstances should be reported to their LM as outlined in the Safeguarding Policy and parents/carers should also be informed in such circumstances. Colleagues should always be prepared to report or explain their actions and accept that physical contact will be open to scrutiny.

Where a child seeks or initiates inappropriate physical contact with an adult, the situation should be handled sensitively and care taken to ensure that contact is not exploited in any way. Careful consideration must be given to the needs of the child and advice and support given to the worker concerned.

Activities that may require Physical Contact

In some contexts, colleagues will have to initiate some physical contact with children, for example in sporting, drama or other physical activities. This may be to demonstrate technique in the use of a particular piece of equipment, adjust posture, or perhaps to support a child so they can perform an activity safely or prevent injury. Physical contact should take place only when it is necessary in relation to a particular activity. It should take place in a safe and open environment i.e. one easily observed by others and last for the minimum time necessary. Contact should be relevant to their age or understanding and colleagues should remain sensitive to any discomfort expressed verbally or non-verbally by the child.

This means that colleagues should:

- Have an approved plan for any regular activities involving possible physical contact.
- Treat children with dignity and respect and avoid contact with intimate parts of the body.
- Always explain the reason why contact is necessary and what form that contact will take.
- Seek consent of parents where a child or young person is unable to do so because of a disability.
- Consider alternatives, where it is anticipated that a child might misinterpret any such contact.
- Be aware of gender, cultural or religious issues that may need to be considered prior to initiating physical contact.

18. Managing Challenging Physical Behaviour

All children and YP have a right to be treated with respect and dignity even in those circumstances where they display difficult or challenging behaviour. Colleagues should not use any form of degrading treatment to punish a child. The use of corporal punishment is not acceptable and whilst there may be a legal defence for parents who physically chastise their children, this does not extend, in any circumstances, to other adults who work with CYP.

Where children display difficult or challenging behaviour, colleagues must follow an agreed plan of work, and use strategies appropriate to the circumstance and situation. The use of physical intervention can only be justified in exceptional circumstances and must be used as a last resort when other behaviour management strategies have failed. Where a child has specific needs in respect of particularly challenging behaviour, a positive handling plan may be drawn up and agreed by all parties. The use of physical intervention should only be used to prevent personal injury to the child, other children or an adult, to prevent serious damage to property or in what would reasonably be regarded as exceptional circumstances. When used it should be undertaken in such a way that maintains the safety and dignity of all concerned. The scale and nature of any physical intervention must be proportionate to both the behaviour of the individual to be controlled and the nature of the harm they may cause. The minimum necessary force should be used and the incident and subsequent actions should be documented and reported. The parents/carers should be informed as soon as possible.

This means that colleagues should:

- Try to defuse situations before they escalate.
- Inform and agree with parents any behaviour management techniques used.
- Be mindful of factors which may impact upon behaviour e.g. bullying, abuse.
- Always use minimum force for the shortest period necessary.
- Record and report as soon as possible any incident where physical intervention has been used.
- Ensure they have appropriate training to handle challenging behaviour.

A recommended guidance on safe ratios whilst working with children over the age of 8 years old is 1 adult to be present to every 10 children.

Children and YP in Distress

There are some contexts in which colleagues will need to manage occurrences of distress and emotional upset. When a distressed person needs comfort and reassurance, this may involve appropriate physical contact. Young children may need immediate physical comfort e.g. after a fall, separation from parent etc. Adults should use their judgement to comfort or reassure a child in an age-appropriate way whilst maintaining clear professional boundaries.

This means the worker should:

- Consider the way in which they offer comfort to a distressed child in an age-appropriate way.
- Be circumspect in offering reassurance in unsupervised or 1-2-1 sessions but to always record such actions.
- Not assume that all children seek physical comfort if they are distressed.

Personal Care

CYP and adults at risk of harm are always entitled to respect and privacy and especially when in a state of undress, changing clothes, bathing or undertaking any form of personal care. There are occasions where there will be a need for an appropriate level of supervision to safeguard those in our care and/or satisfy health and safety considerations. This supervision should be appropriate to the needs and age of those concerned and sensitive to the potential for embarrassment.

This means that colleagues should:

- Avoid any physical contact when children are in a state of undress.
- Avoid any visually intrusive behaviour.
- Where there are changing rooms announce their intention of entering before doing so.

This means that colleagues should NOT:

- Change in the same place as children.
- Shower or bathe with children.
- Assist with any personal care task which a child or young person can undertake by themselves.

First Aid and Administration of Medication

It is expected that there should always be at least one worker present who is trained in basic first aid techniques. When administering first aid, colleagues should ensure that another adult is aware of the action being taken. Parents should always be informed when first aid has been administered. In circumstances where young children need medication during activities, an agreed plan should be in place and appropriate permissions given by parents/carers for administration of medication. Depending upon the age and understanding of the child, they should where appropriate, be encouraged to self-administer medication or treatment.

19. Lone working and working ‘One-to-One’

There are some contexts in which it is appropriate to work with a CYP alone, such as mentoring or pastoral contexts. Due to the nature of this context, it is vital to have clear procedures and agreements in place. ‘One-to-one’ situations have the potential to make a child/YP more vulnerable to harm by those who seek to exploit their position of trust. Those working in ‘one-to-one’ settings with children and YP may also be more vulnerable to unjust or unfounded allegations being made against them. Both possibilities should be recognised so that when one to one situations are unavoidable, reasonable and sensible precautions are taken. For guidelines about how to work safely in a lone working context, please see the Lone Working Guidelines policy.

20. Home Visits

There may be colleagues for whom home visits are an integral part of their work. In these circumstances it is essential that appropriate procedures and risk assessments are in place to safeguard CYP and the adults who work with them.

A risk assessment should include an evaluation of any known factors regarding the CYP, parents and others living in the household. Risk factors such as hostility, child protection concerns, complaints or grievances can make colleagues more vulnerable to an allegation. Specific consideration should be given to visits outside of ‘office hours’ or in remote or secluded locations. Following an assessment, appropriate risk management measures should be in place in accordance with the Lone Working Guidelines. There will be occasions where risk assessments are not possible or not available, e.g. when emergency services are used. In these circumstances, a record must always be made of the circumstances and outcome of the home visit. Such records must always be available for scrutiny.

Under no circumstances should an adult visit a child in their home outside agreed work arrangements or invite a child to their own home or that of a family member, colleague or friend. If in an emergency, such a one-off arrangement is required, the colleague must have a prior discussion with their LM and the parents or carers and a clear justification for such arrangement is agreed and recorded. This means that colleagues will agree the purpose for any home visit with their LM, undertake a risk assessment where possible and ensure any behaviour or situation which gives rise to concern is discussed with their Manager and, where appropriate, action is taken.

21. Transporting Children and YP

Under normal circumstances, staff and volunteers should not transport a single child or YP. However, this may be necessary in an emergency or when other possibilities have been explored but are not possible and this is the only means of the child attending a particular group or activity. In these circumstances, colleagues should do their utmost to spend the least amount of time alone in a car with a young person and should ensure they have written permission from their LM and the parents/carers. In emergency contexts, where not giving a child a lift alone would cause them to be put at risk from harm, then this must be recorded and reported to their LM and parents/carers.

It is a legal requirement that all passengers should wear seat belts and it is the responsibility of the staff member to ensure that this requirement is met. Colleagues should also be aware of current legislation and adhere to the use of car seats for younger children. Where colleagues transport children in a vehicle which requires a specialist licence/insurance, they should ensure that they have an appropriate licence and insurance to drive such a vehicle. A child or a YP should always be seated in the back seats of the car, behind the passenger seat, and never in the front passenger seats for good practice.

It is inappropriate for colleagues to offer lifts to a child or YP outside their normal working duties, unless this has been brought to the attention of the LM and has been agreed with the parents/carers.

22. Residential, Outings and Overnight Activities

Colleagues should take particular care when supervising children and YP on trips and outings, where the setting is less formal than the usual workplace. Colleagues remain in a position of trust and need to ensure that their behaviour always remains professional and stays within clearly defined boundaries.

Where activities include trips away from the normal workplace and/or overnight stays, it is best practice to visit the venue in advance whenever possible. Activities should be well planned and any necessary risk assessments undertaken in relation to activities and arrangements for personal care and sleeping. Children, YP, adults and parents should be informed of these prior to the start of the trip. In all circumstances, those organising trips and outings must pay careful attention to ensuring safe staff/child ratios and to the gender mix of staff especially on overnight stays. Health and Safety arrangements require colleagues to keep colleagues/employers aware of their whereabouts, especially when involved in activities outside the usual workplace.

The following guidelines are intended to ensure the safeguarding of children, YP and adults at risk of harm during residential activities, whether staying in camps, churches, hostels or other accommodation. All colleagues will:

- Respect the privacy of YP. Leaders will ask before entering accommodation, changing rooms or washing facilities and (except for emergencies) only enter the accommodation or changing rooms of YP of the same gender.
- Always use separate accommodation for leaders or if unavailable ensure permission is sought for shared accommodation from trustees and parents/carers.
- Always ensure that there are leaders of the same gender as the YP attending.

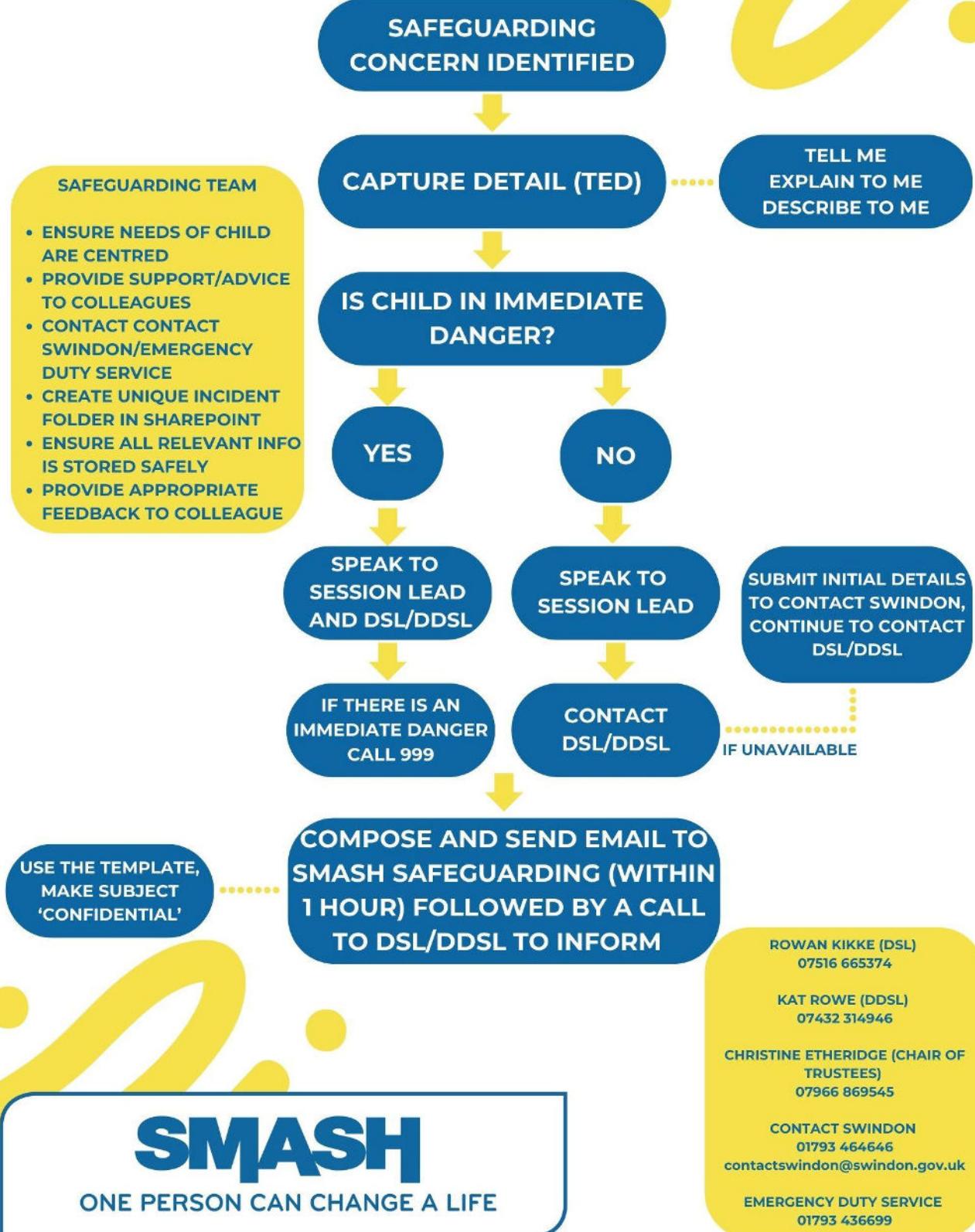
23. Working in Partnership

The diverse nature of the organisation and settings in which SMASH works means there can be great variation in practice when it comes to safeguarding children, YP and adults at risk of harm. This can be because of cultural tradition, belief and religious practice or understanding e.g. what constitutes abuse.

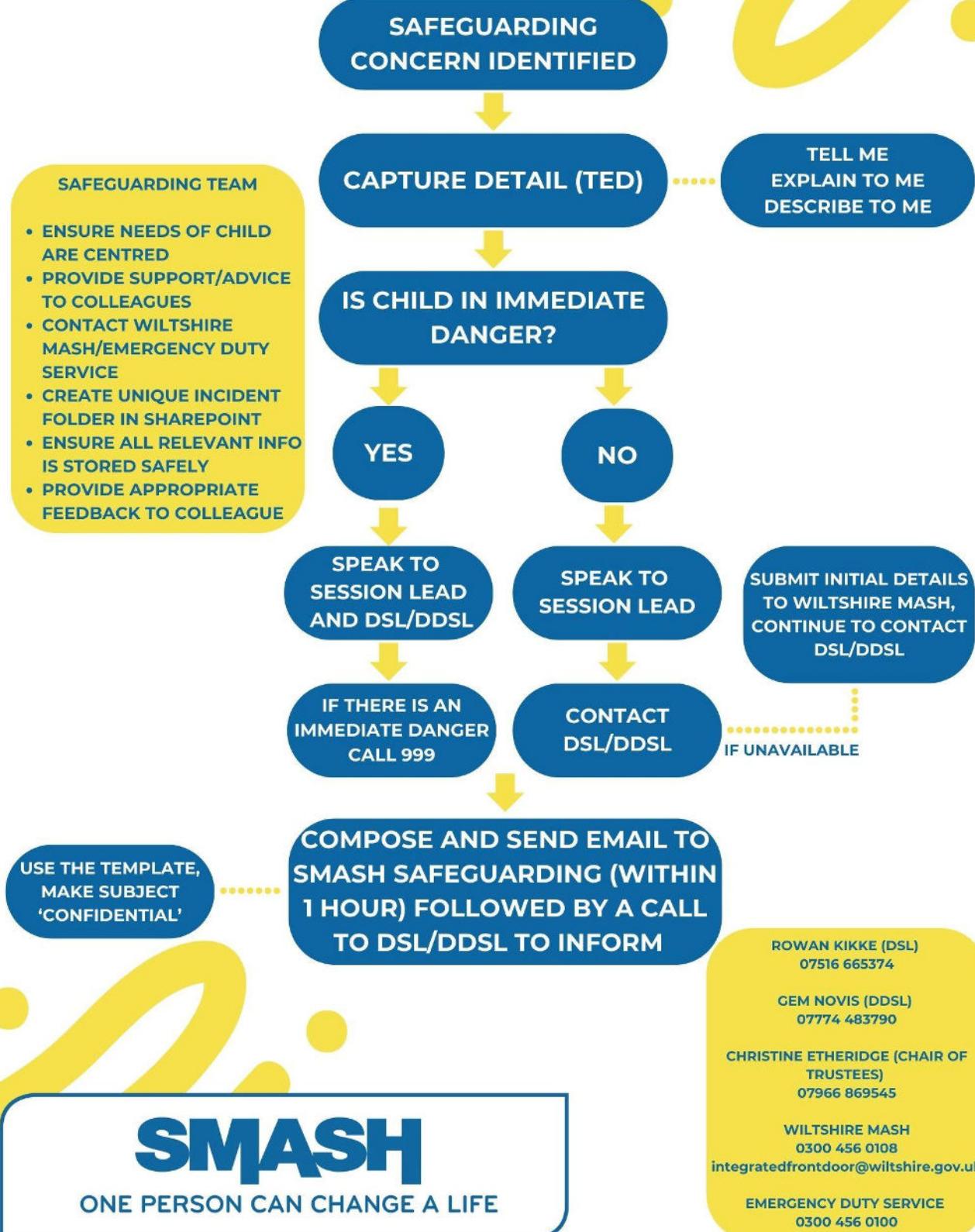
We therefore have clear guidelines regarding our expectations of those with whom we work in partnership. We will discuss with all partners our safeguarding expectations to ensure that the partner organisation and SMASH's safeguarding policies are compatible and that the procedures within each are followed should any incident or allegation occur. It is also our expectation that any organisation using our premises e.g. as part of a letting agreement, will have their own policy that meets our safeguarding standards.

Good communication is essential in promoting safeguarding, both to those we wish to protect, to everyone involved in working with children, YP and adults at risk of harm and to all those with whom we work in partnership.

SMASH SAFEGUARDING FLOWCHART (SWINDON)



SMASH SAFEGUARDING FLOWCHART (WILTSHIRE)



Appendix B: SMASH Reporting Email and Safeguarding Form

Introduction

This information should be completed immediately after any incident in which concern is raised regarding safeguarding children, YP or vulnerable adults.

Email this information to safeguarding @teamsmash.org.uk using the safeguarding template that you should have in your Outlook account. If you cannot access the template, then email the information in a series of bullets as shown below.

Safeguarding reports are never to be sent to personal email addresses. If you have handwritten notes then these should be shredded once the information has been captured and sent to the Safeguarding email address.

Safeguarding Report (email)

- **Title** – must begin with “Safeguarding / Confidential”.
- **Name** – *your name*
- **Role** – *your role*
- **Email** – *your contact email (work email, not personal)*
- **Phone No** – *your contact mobile number*
- **Date/Time (incident)** – *date and time of the incident/occurrence*
- **Date/Time (form)** – *date and time of completing the form*
- **Location of conversation** – *e.g. phone call, during a mentoring session, at an event etc*
- **Details of person reporting concern** – *only needed if this information has been reported to you via a 3rd party*
- **Name and contact details of impacted persons** – *as much information as you have about the impacted person(s)*
- **Details of concern** – *summarise all the relevant details about the situation so that the Safeguarding Officer has a complete picture of the safeguarding concern*
- **Safeguarding Lead** – *name of the safeguarding colleague that the form has been/sent/given to*

Safeguarding Report Form

The Safeguarding Lead is to transfer the information to the Reporting Form (adding additional information as shown below) and then save the document within the appropriate safeguarding incident folder (Sharepoint).

- Date received/read – *completed by the safeguarding officer when they have received and read email.*
- Actions taken - *completed by the safeguarding officer post receipt of a safeguarding concern.*

Notes (General)

If you have witnessed this incident directly, then please provide full details of your concern, giving as much detail as possible as to what was happening before and after the incident, who was involved, including others who may have witnessed the incident etc. Please comment on any action that was taken at the time, for example to ensure the immediate safety of a child or young person.

If you are giving details of a concern raised to you following a phone call or conversation with someone else, please aim to use wording as close to the original concern as possible.

If you are raising a concern about a named adult, for example a member of staff, volunteer or other adult, please give details of the nature of your concern, their observed behaviour or precise details of your concern including dates and locations of any specific incidents.

SMASH Safeguarding Reporting Form		
Full Name	Role	Email
Date/Time of Incident	Date/Time (form)	Phone No
Location of Conversation	Details of person reporting concern (if not you)	
Name and contact details of impacted Young Person(s)		
<p><i>provide as much information as possible regarding the subject(s) of this concern. If known, include full name, age and address of any specific individuals.</i></p>		
Details of Concern		
Safeguarding Officer Name	Date Form Received (& Read)	
Safeguarding Officer Action(s) Taken		

Appendix C: Categories of Abuse - Specific Contexts

In addition to understanding the statutory categories and forms of abuse, it is helpful for those who work with children and YP to have an awareness of the following specific contexts:

Self-harm can take several forms including but not limited to overdoses, cutting and the misuse of drugs or alcohol. Local Safeguarding Children Boards vary in their approach to deliberate self-harm, as some will see it as part of a wider mental health issue and not in itself a form of abuse whilst others will look at the motivating factors to establish whether there is any underlying abusive cause or whether this amounts to self-abuse. It is appropriate to discuss incidents of self-harm with the DSL and the local authority children's social care team. Further advice can also be obtained from child and adolescent mental health services (CAMHS), a local general practitioner (GP) and, sometimes, from direct access counselling services.

Children affected by gang activity may be at risk of violent crime and are therefore considered vulnerable. Risks include access to weapons (including firearms), retaliatory violence and territorial violence with other gangs. Other risks include increased likelihood of involvement in knife crime, dangerous dogs, sexual violence and substance misuse.

Domestic Abuse (including Coercion and Control) is defined as any incident or pattern of incidents of controlling, coercive or 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. This can encompass but is not limited to psychological, physical, sexual, financial or emotional abuse. If there are children in the household, they are witnesses to the abuse and then they are also considered to be emotionally abused, whether or not they are in the same room as any threatening behaviour:

- **Controlling behaviour:** a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.
- **Coercive behaviour:** an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. This definition, which is not a legal definition, includes so called 'honour' based violence, female genital mutilation (see below) and forced marriage (see below); victims are not confined to one gender or ethnic group.

Female genital mutilation (FGM) is the ritual cutting or removal of all or some of the external female genitalia. It is a criminal offence in Britain and any suggestion that it is being sought or has been carried out should be referred using the process outlined in this policy.

Forced marriage and honour-based violence should not be treated as simply a family matter or as a private issue confined to a particular community but should be referred to the relevant statutory agencies.

Child trafficking is transporting children across national borders, sometimes without proper immigration arrangements, for a variety of illegal purposes which can include domestic service, illegal adoption, organ harvesting, benefit claims or prostitution. Such children may speak little English. The police should be contacted immediately if a member of staff or volunteer comes across such a child.

Radicalisation in this context is the process by which a child, young person or vulnerable adult comes to support extremist ideologies which may be associated with terrorist groups, or other forms of fundamentalist teaching within faith groups which is deemed to have potential for abuse or risk from

harm. Every local authority has a dedicated police officer or team to deal with concerns and to assess whether the criteria for intervention is met.

Child Sexual Exploitation (CSE) occurs where anyone under the age of 18 is persuaded, coerced or forced into sexual activity in exchange for, amongst other things, money, drugs, alcohol, gifts, affection or status. Consent is irrelevant, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and may occur online. Regardless of the challenging behaviours they may display, exploited children should be viewed as victims of child sexual abuse, not as criminals.

Complex (organized or multiple) abuse is that which involves one or more abusers and a number of children or YP. The abusers may be acting in concert, or in isolation, or may be using an institutional framework or position of authority to abuse children. The internet may also be used.

Bullying is another way in which children (or adults) abuse other children, and it can be verbal, emotional or physical. Bullying includes teasing, making unkind comments about a child, demanding money, "ganging up" on a child or physically assaulting a child. You might see evidence of torn clothes, bruising, burns, or scratches. A child might be afraid to attend school or other activities if they think the bully will be present. Bullying is often seen as being part of natural 'playground' behaviour but is actually a form of abuse and should be treated as such.

Parents who are adults at risk of harm - it is not uncommon for the parents of children who are abused or neglected to be themselves adults at risk of harm. Particularly common are problems of mental ill-health, domestic abuse and substance abuse (i.e. drugs and alcohol), often in combination. Where someone with such a difficulty is known to be a parent with a child living with them, a referral to the local authority children's social care service is required.

Appendix D - Sample Risk Assessment / Sample Completed Risk Assessment (CURRENTLY BLANK).

Glossary

“Adult”	An adult is anyone over the age of 18 and is viewed as a mature, fully developed person. An adult is legally responsible for their actions. When a young person reaches the age of 18 the responsibility for their wellbeing may transfer to adult service providers.
“Child”	A child is anyone under the age of 18
“Adults at risk of harm”	Although they cease to be subject of the Safeguarding Children Procedures, some adults may continue to be vulnerable. An ‘Adult at Risk’ is defined as any person aged 18 years and over who is or may be, in need of community care services by reason of mental health issues, learning or physical disability, sensory impairment, age or illness and who is or may be unable to take care of him/herself or unable to protect him/herself against significant harm or serious exploitation.
“Worker”	In the context of this policy, anyone working for SMASH, either as an employed member of staff or in a voluntary capacity, including as a trustee.