

Please note staff need to ensure they are using the most up to date version of the information pack. Visit the safeguarding buzz page which will have the most up to date version



Safeguarding

Procedures and Information Pack.



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*NB: Every incident must be recorded on a 'Safeguarding Cause for Concern' form and sent to the safeguarding inbox at safeguarding@barnsley.ac.uk. Staff should also keep the Central Safeguarding Team informed of the learner's situation. You can find a copy of the 'Safeguarding Cause for Concern' form on the Safeguarding Buzz page in the internal forms section. However, please note that until someone from the Safeguarding Team has responded to you, it means that your email hasn't yet been dealt with and you will need to monitor the concern you have regarding the learner in the interim, pending further advice and/or action.

In addition, if your email relates to a safeguarding concern that requires an immediate or urgent response, or the concern you originally emailed through has escalated to such a response being required, please try to make actual contact with your departmental safeguarding representative or the Central Safeguarding Team. If no one is available, you must take appropriate action to safeguard the learner, including if it is appropriate to do so, contacting the Emergency Services, the Police or either children or adult Social Services (772423 / 773300).

If this is outside of normal working hours (between 5:30pm -8:30am, weekends/bank holidays), again you must take appropriate action to safeguard the learner, including if it is appropriate to do so, contacting the Emergency Services, the Police or Social Services, (emergency duty team on 01226 787789). A site duty manager is available on Monday-Thursday evening in College. If staff require assistance with a safeguarding concern, this member of staff can be contacted by ringing the main switchboard where reception staff will be able to advise of the member of staff acting as the site duty manager that evening and their contact details.

Introduction

Safeguarding is the responsibility of all staff, governors, volunteers, contractors and sub-contractors (hereafter referred to as 'staff'), with the College playing its part in preventing, identifying, reporting abuse and neglect. The well-being of learners always comes first. We know that learners can't succeed academically if they are at risk. This College treats safeguarding as one of its top priorities and offers maximum professional support for all staff who may be concerned about any of the issues contained within this guidance.

Our starting point is to promote the view that safeguarding is everyone's responsibility. We understand that to mean that it is our shared and collective duty to respond to learners but as staff we also need to know how to respond.

Safeguarding isn't straightforward. Presenting issues can be difficult to spot and sometimes signs of suffering might be hidden through fear. Sometimes learners do not recognise that they are at risk. Consequently, staff understanding professional boundaries becomes important, knowing when and how to intervene in order to safeguard learners.

This document provides operational guidance published by the College's Central Safeguarding Team to help staff understand their role and responsibilities with regards to safeguarding. In addition, it provides staff with advice and guidance about the signs to look out for and what they should do when, and if, they think a learner may be at risk and in need of safeguarding. Staff must take note that this guidance is not intended to take the place of relevant safeguarding legislation and statutory guidance but should be read in conjunction with such guidance.

Safeguarding Learners

Barnsley College, referred to as 'the College' hereafter, has safeguarding statutory duties and responsibilities in relation to its learners as set out below. In addition, there may be instances where College needs to share safeguarding concerns with Social Care and/or the Police about individuals who aren't our learners but require safeguarding. This can include a learner's siblings and wider family.

College doesn't limit its view of what constitutes abuse, neglect or wider safeguarding concerns, as they can take many forms and the circumstances of the individual case should be considered.

Contextual Safeguarding

Staff should be aware that safeguarding concerns, incidents and behaviours can be associated with factors outside of College and can occur with other young people and adults outside of College. Staff must consider the wider context in which incidents and behaviour occurs. This is known as contextual safeguarding which means that assessments of learners must consider wider environmental factors that are present in the learners life that are a threat to their safety and welfare. This allows consideration of all available evidence and the full context of the safeguarding concern.

Safeguarding Children

In relation to learners under the age of 18 years old, and classed as a child in law, the College has a statutory duty, as set out in the Education Act 2002 and Children Act 2004, to promote and safeguard the welfare of children and have due regard to guidance issued by the Secretary of State at all times. The College adopts the definition used in the statutory guidance: Working Together to Safeguard Children 2018, issued by the Department for Education (DfE), which applies to all children and, defines safeguarding and promoting children and young people's welfare as:

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

The above statutory guidance defines child protection as part of safeguarding and promoting welfare. Child protection is the activity undertaken to protect children who are suffering, or are likely to suffer, significant harm. Such concerns will be referred into Children Social Care and the Police if appropriate.

In order to safeguard children effectively, staff must familiarise themselves with part 1 of the 'Keeping Children Safe in Education 2018' statutory guidance which is available via the link below;

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/741314/Keeping_Children_Safe_in_Education_3_September_2018_14.09.18.pdf

In addition, staff should familiarise themselves with 'Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children (2018)' which is available via the link below:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729914/Working_Together_to_Safeguard_Children-2018.pdf

Safeguarding Adults 18+

In relation to learners 18 years and over, and classed as an adult in law, the College has a statutory safeguarding duty, as set out in the Care Act 2014, which must be seen in conjunction with Mental Capacity Act (including DoLs) 2005 and the Human Rights Act 1998. The College must have regard to guidance issued by the Secretary of State at all times. The adult safeguarding duties under the Care Act 2014 apply to an adult, aged 18 or over, who:

- Has needs for care and support (whether or not the Local Authority is meeting any of those needs) and;
- Is experiencing, or at risk of abuse or neglect; and
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

The Care Act 2014 defines safeguarding as "protecting an adult's right to live in safety, free from abuse and neglect." The above duties apply in relation to any person who is aged 18 or over and at risk of abuse or neglect because of their needs for care and support. Such concerns will be referred into Adult Social Care and the Police if appropriate. Whilst these duties have to be met for a referral to Adult Social Care and/or the Police, College policy is to safeguard all learners. So though a concern may not meet the threshold for such a referral and/or support of these external agencies, the College is committed to safeguarding and supporting all learners as appropriate.

The following six principles underpin all adult safeguarding work;

- Empowerment – people being supported, encouraged to make their own decisions and informed consent

For further information and advice contact:

safeguarding@barnsley.ac.uk

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- Prevention – it is better to take action before harm occurs
- Proportionality – the least intrusive response to the risk presented
- Protection – support and representation for those in greatest need
- Partnership – local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse
- Accountability – accountability and transparency in delivering safeguarding

In order to safeguard adults effectively, staff **must** familiarise themselves with the Care Act (2014) statutory guidance (in particular the 'safeguarding' section) which is available via the link below:

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

Mental Capacity

What do we mean by capacity?

Mental capacity is the ability to make a decision. This includes the ability to make a decision about daily life – such as when to get up, what to wear, when to go to the doctor if feeling ill – as well as more serious and significant decisions. It also refers to a person's ability to make decisions that may have legal consequences for them or others. Examples include agreeing to have medical treatment, buying goods or making a will.

As 'capacity' means the ability to understand information and make and communicate decisions about your life, therefore, if you do not understand the information and are unable to make a decision about your daily life, you are said to **lack capacity**.

Though not an exhaustive list, a lack of mental capacity could be due to:

- a stroke or brain injury
- a mental health problem
- dementia
- a learning disability
- confusion, drowsiness or unconsciousness because of an illness or the treatment for it
- substance misuse.

Mental Capacity Act 2005

The Mental Capacity Act 2005 (MCA) sets out a legal framework of how to act and make decisions on behalf of people who lack capacity to make specific decisions for themselves. It sets out some core principles and methods for making decisions and carrying out actions in relation to personal welfare, healthcare and financial matters affecting people who may lack capacity to make specific decisions about these issues for themselves.

MCA applies to everyone involved in the care, treatment and support of people aged 16 and over living in England and Wales who are unable to make **all** or **some** decisions for themselves. The MCA is designed to protect and restore power to those vulnerable people who lack capacity as well as those who have capacity and chose to plan for the future – this covers the general population over the age of 18.

All professionals have a duty to comply with the MCA Code of Practice which can be found here;

<https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>

The Code explains how the MCA should work in practice and provides guidance to those working with people who may lack capacity. As College staff work with individuals who may lack capacity – this could be on a permanent or temporary basis and/or in certain aspects of their daily life – we have a legal duty to have regard to the Code.

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The Mental Capacity Act 2005 has five key principles;

1. A person must be assumed to have capacity unless it is established that he lacks capacity.
2. A person is not to be treated as unable to make a decision unless all practicable steps to help him to do so have been taken without success.
3. A person is not to be treated as unable to make a decision merely because he makes an unwise decision.
4. An act done, or decision made, under this Act for or on behalf of a person who lacks capacity must be done, or made, in his best interests.
5. Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.

The five principles are statutory and provide the benchmark and underpinning of all acts carried out and decisions taken in relation to the MCA. It is useful to consider the principles chronologically: principles 1 to 3 will support the process before or at the point of determining whether someone lacks capacity. Once a decision has been made that capacity is lacking, use principles 4 and 5 to support the decision-making process.

Assessing Capacity

Under the MCA, staff are required to make an assessment of capacity before carrying out any care or treatment – the more serious the decision, the more formal the assessment of capacity needs to be.

Staff may need to assess capacity where a learner is unable to make a particular decision, at a particular time, because their mind or brain is affected by illness, substances or disability. It is important to note that lack of capacity **may not be a permanent condition**. Assessments of capacity should be time and decision-specific. You cannot decide that someone lacks capacity based upon age, appearance, condition or behaviour alone or based on a previous decision in time where they may have lacked capacity.

The test that staff must carry out to assess whether an individual has the capacity to make a particular decision must answer two questions:

Stage 1. Is there an impairment of or disturbance in the functioning of a person's mind or brain? If so,

Stage 2. Is the impairment or disturbance sufficient that the person lacks the capacity to make a particular decision?

The MCA says that a person is unable to make their own decision if they cannot do one or more of the following four things:

- understand information given to them;
- retain that information long enough to be able to make the decision;
- weigh up the information available to make the decision;
- communicate their decision – this could be by talking, using sign language or even simple muscle movements such as blinking an eye or squeezing a hand.

Every effort should be made to find ways of communicating with someone before deciding that they lack capacity to make a decision based solely on their inability to communicate. Also, staff will need to involve family, friends, carers or other professionals as appropriate.

Staff must record how a conclusion has been reached that capacity is lacking for a particular decision. This record must be reported through to the Central Safeguarding Team on the safeguarding cause for concern form along with the detail of the concern/incident that led to a capacity assessment being required.

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If an individual is assessed as lacking capacity then any action taken, or any decision made for or on behalf of that individual, must be made in his or her **best interests**. Staff must follow the checklist described in the Code to work out the best interests of the individual concerned.

The Deprivation of Liberty Safeguards (DoLS), which apply only in England and Wales, are an amendment to the Mental Capacity Act 2005. The DoLS under the MCA allows restraint and restrictions that amount to a deprivation of liberty to be used in hospitals and care homes – but only if they are in a person’s best interests. To deprive a person of their liberty, care homes and hospitals must request standard authorisation from a local authority.

Understanding and using the MCA will support staff practice when it comes to assessing capacity and supporting students with decisions about their life, as appropriate.

Consent

The Sexual Offences Act 2003 for England and Wales says that a person consents to something if that person ‘agrees by choice and has the freedom and **‘capacity’** to make that choice’.

The age of consent to any form of sexual activity is 16 for both men and women. The age of consent is the same regardless of the gender or sexual orientation of a person and whether the sexual activity is between people of the same or different gender.

Consent to sexual activity may be given to one sort of sexual activity but not another. Consent can be withdrawn at any time during sexual activity and each time sexual activity occurs. Sexual intercourse without consent is rape.

It is an offence for anyone to have any sexual activity with a person under the age of 16. However, Home Office guidance is clear that there is no intention to prosecute teenagers under the age of 16 where both mutually agree and where they are of a similar age and/or have capacity.

It is an offence for a person aged 18 or over to have any sexual activity with a person under the age of 18 if the older person holds a position of trust (for example **a teacher or social worker**) as such sexual activity is an abuse of the position of trust.

The Sexual Offences Act 2003 provides specific legal protection for **children under 13** who **cannot legally give their consent to any form of sexual activity**. There is a maximum sentence of life imprisonment for rape, assault by penetration, and causing or inciting a child to engage in sexual activity.

Staff Roles and Responsibilities

All Staff Responsibilities

Working Together to Safeguard Children 2018 provides statutory guidance for how staff in a range of organisations should safeguard children and young people. The guidance is clear that safeguarding is the role of all members of staff in Colleges and not just the designated staff.

In addition, the Care Act statutory guidance sets out how staff in a range of organisations should safeguard adults in need of safeguarding. This guidance also makes clear that safeguarding is the role of all members of staff in Colleges and not just the designated staff.

In summary, it is the responsibility of **all staff** members to:

- Identify learners who may be in need of extra help, who are suffering or likely to suffer significant harm. All staff have a responsibility to take appropriate action, as described in the College's Safeguarding Policy and related procedures, working with other agencies as needed.
- Deal with safeguarding issues and be able to recognise potential harm, ensuring that they are alert to the signs/indicators of abuse and neglect.
- Promote the Colleges approach to safeguarding and protect learners.
- Understand their role in relation to the requirement to safeguard and promote the welfare of children, young people and adults in need of safeguarding and protect them from harm.
- Know how to support and respond to a learner who has disclosed abuse or neglect.
- **Always** report every safeguarding concern on the 'safeguarding cause for concern' form within 24 hours of the incident happening and send it in to safeguarding@barnsley.ac.uk
- Maintain accurate, factual, up to date records of safeguarding concerns.

Allegations against Members of Staff

Allegations against members of staff, whether paid or unpaid, (including any volunteer, governor, contractor, sub-contractor) must be reported immediately to the Head of Human Resources. This includes historical allegations as well as allegations against staff who no longer work at College. The Head of Human Resources will then decide on the next steps.

If the learner is a child (under 18) and anyone makes an allegation (current or historic) to you or you suspect that a member of staff 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; or
- behaved towards a child or children in a way which indicates s/he may pose a risk of harm to children.

You must report this without delay to the Head of Human Resources who will handle such allegations. Basic information about the allegation will be collated and a decision made as to whether it meets the threshold to be reported without delay to the Local Authority Designated Officer (LADO). If this is the case, the LADO will discuss the concerns and offer advice and guidance on how the situation will be managed. The College will not investigate the concerns or enter into discussions with the alleged perpetrator without initial advice and guidance from the LADO.

If the learner is an adult (18+) with care and support needs and anyone makes an allegation (current or historic) to you or you suspect that a member of staff may have:

- Behaved in a way that has harmed or may have harmed an adult with care and support needs;
- Possibly committed a criminal offence against or related to an adult with care and support needs;

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- Behaved towards an adult with care and support needs in a way that indicates s/he is unsuitable to work with adults with care and support needs;
- Behaved in a way that has harmed children or may have harmed children which means their ability to provide a service to adults with care and support needs must be reviewed;
- May be subject to abuse themselves and as a consequence means their ability to provide a service to adults with care and support needs must be reviewed;
- Behaved in a way which questions their ability to provide a service to an adult with care and support needs which must be reviewed e.g. conviction for grievous bodily harm against someone who is not an adult with care and support needs.

In the context of staff allegations against adults with care and support needs, the adult safeguarding guidance refers to staff as People in a Position of Trust (PiPoT). Such allegations must be reported without delay to the Head of Human Resources, who will handle such allegations in line with the Barnsley Safeguarding Adults Board 'Protocol for Responding to Concerns about a Person in a Position of Trust'.

This protocol must be followed in all cases by the College when it becomes aware of a concern where information (whether current or historical) is identified in connection with:

- The PiPoT's own work / voluntary activity with Adults and / or Children;
- The PiPoT's life outside work i.e. concerning adults with care and support needs in the family or social circle;
- The PiPoT's life outside work i.e. concerning risks to children, whether the individual's own children or other children.

Children - whilst this Protocol is concerned with potential harm to adults with care and support needs, if the allegation is such that there is a concern that the person may also pose a risk to children, then Children's Services and/or LADO must be informed as appropriate.

Safeguarding Structure



Departmental Safeguarding Reps

Additional Learning Support – High Needs Learner:

Sarah Bailey (Ext. 219)	Gareth Lunt (Ext. 218)	Nicola Spokes (Ext. 127)	Sean Farrell (Ext. 327)
Art, Design and Fashion	Construction	Land Based Industries	Childcare and Education
Music, Media and Performing Arts	Engineering	Computing and Science	Sixth Form
	Catering and Hospitality	Business	Foundation Learning
	Sport, Public Services and	Hair and Beauty	Health Sciences, and
	Travel and Tourism		Social Care Professions

Please Note: Safeguarding reps above are for supported high cost learners only

Creative Industries: Art, Design and Fashion Music, Media and Performing Arts	Ext: 429 Ext: 695 Ext: 788	Moz Khokhar Kat Jackson Laura Holliday
Business, Warehousing and Logistics	Ext: 352 Ext: 352	Liam Garside Steve Wilmer
Catering and Hospitality	Ext: 296	Jackie Selby
Catering Services	Ext: 434	Sonia Bagshaw
Student Recruitment	Ext: 123	Leanne Ingham
Construction	Ext: 694 Ext: 189	Michelle Sider Nicolas Karen Taylor
Childcare and Education Professions	Ext: 112 Ext: 112	Claire Griffin Emma Harvey
Engineering	Ext: 896 Ext: 396	Mia Wesson Carla Priestley
Enterprise	Ext: 840	Gareth Stewart
Estates	Ext: 191	Stuart Robinson
Finance	Ext: 844	Amanda Merryweather
Foundation Learning	Ext: Ext: 393	VACANT Stacy Dyson
GCSE Maths and English	Ext: 603 Ext: 603	Steph Commons Ilona Galloway
Hair and Beauty	Ext: 329	Liz Forth
Health and Safety	Ext: 332	Laura Penny (MAT)
Health Sciences and Social Care Professions	Ext: 661 Ext: 661	Kyle Turai Kathryn Clewes (MAT)
IT Services	Ext: 211	John Smith
Wigfield Farm	Ext: 462 Ext: 179	Bev Jones Amy Butterwood
Learning Curve	Ext: 245 Ext: 450	Joanne Carpenter Paul Beel
Learning for Living and Work	Ext: 248 Ext: 319	Lori-Anne Cocking Gavin Mitchell
Marketing	Ext: 824	Davina Macfarlane
OML Student Services	Ext: 297 Ext: 765 Ext: 527 Ext: 203	Beth Popplewell Amy Watson Lauren Young Lisa Kelly
Health and Wellbeing – Student Service	Ext: 233	Frances Rhodes
Exams and MIS	Ext: 232	Susan Exley
Sixth Form	Ext: 561 Ext: 509 Ext: 511	Pam Sandals Daisy Bates Charlotte Scholes
Sixth Form Student Services	Ext: 322	Emily Thackray
Sports, Public Services and Travel and Tourism	Ext: 874 Ext: 540 Ext: 361	Hannah McCarthy Matt Egginton Isabelle Bentley
Teaching and Learning	Ext: 614	Rachel Davison
University Campus	Ext: 887 Ext: 883	Stephanie Wilmshurst Gail Jones
University Campus – Childcare	Ext: 413	Lorna Taylor
Funding Returns	Ext: 797	Dale Burgin
Business Development	Ext: 830	Rebecca Cartledge

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Dealing with a Disclosure

'Disclosure' occurs when a learner tells you or lets you know in some other way that she or he has been, or is being abused. Disclosure can be direct, indirect, or a third-party disclosure. You need to report all disclosures of abuse, no matter where or when they happened.

The chances are that disclosure will take place at the most inopportune of times – just as the class is about to set off on a college trip, or late on Friday afternoons. However, a disclosure cannot wait and must be dealt with immediately. Staff must:

- * Always act where there are concerns
- * Do not promise complete confidentiality
- * Do not investigate, however, do listen and reassure

If abuse is disclosed to you, the procedure for 'Reporting a Safeguarding Cause for Concern' should be followed carefully.

The Role of Staff when Dealing with a Safeguarding Disclosure

- **Ensure College safeguarding policies and procedures are explained** to learners prior to any disclosure, in particular explaining that safeguarding concerns may need to be referred internally and externally if appropriate;
- **Timely** reporting of concerns – staff **must** ensure that concerns requiring an immediate response get that response. If a member of the safeguarding team is unavailable to respond, staff **have a duty** to respond appropriately to safeguard the learner;
- **Ensure the safety of the learner** at all times during and after the disclosure;
- **Behave professionally;**
- **Listen;**
- **Keep a record** of the safeguarding disclosure using the words used by the individual disclosing the information and not personal judgements;
- **Clarify basic facts** only, do not investigate;
- **Refer** the safeguarding concern into the central safeguarding team;
- **Share information** with designated staff only;
- **Never agree to keep safeguarding related disclosures a secret** - it might help to offer this script to anyone who has or might disclose an immediate or potential safeguarding issue before you begin communicating with them in relation to the disclosure or at the soonest appropriate time thereafter e.g. if they are upset and inconsolable and therefore unable to understand what you are saying; *"If you tell me/us something that leads me/us to think that you or someone else is at risk or in serious danger of harm, particularly where there are child/adult protection issues, then we may need to involve someone else. This would be discussed with you first where possible"*.
- **Do not take any action that might alert any alleged perpetrator.**

Sometimes it is just a case of being in the right place at the right time.

Additional consideration needs to be given to learners with communication difficulties and for those whose preferred language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

Please note: Although College safeguarding refers to the learner, we should always have a level of awareness that the learner (who may or may not be at risk of significant harm) may also have siblings or extended family members and other individuals connected to them who may also require safeguarding and who may also be referred to external agencies.

For further information and advice contact:

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Quick Guide to Reporting a Safeguarding Cause for Concern

Detailed below is a quick guide for staff to help to explain what, how and when to report a safeguarding cause for concern or relevant safeguarding information. It is important that the Central Safeguarding Team is kept up to date with any safeguarding concerns and relevant safeguarding information. The guidance below takes staff through a range of different scenarios and the next steps.

If the member of staff is unsure if their concern is safeguarding or not, they must;

- Seek advice from their Departmental Safeguarding Rep (DSR);
- If they're unavailable seek advice from the Central Safeguarding Team;
- If it is a safeguarding concern, make a formal report as detailed below;
- If it's not a safeguarding concern, seek appropriate alternative advice and support in line with College policies and procedures.

For concerns that are a safeguarding cause for concern, see guidance below;

- Complete a cause for concern form which can be found on the Safeguarding Buzz page
- **24 HOUR** timescale from the incident happening.
- Staff member whom disclosure was made to **MUST** complete the cause for concern. It is **NOT** always the DSR's responsibility.
- **MUST** be sent to safeguarding@barnsley.ac.uk with DSR cc'd in.
- **MUST NOT** be sent to an individual member of the Safeguarding Team.
- All email correspondence regarding safeguarding of learners **MUST** have the Safeguarding inbox cc'd in.
- All sections on the form **MUST** be completed including the name of the learner
- **MUST** contain as much detail as possible.
- **ALL** follow ups **MUST** be reported into the Safeguarding Team.
- Pro-monitor concerns **WILL NO** longer be accepted as safeguarding staff can't access them.
- All cause for concerns **MUST** be on the new form layout (available on buzz).
- **ALL** minor and major safeguarding issues **MUST** come through to the central team.
- Safeguarding **MUST** be notified when a learner, where there has been safeguarding concerns, is withdrawn from programme and the reason why.

If the safeguarding concern relates to a learner being in a situation where they may be in immediate danger and/or is suffering or likely to suffer significant harm, staff must;

- Report immediately and in person to their designated Departmental Safeguarding Representative;
- If they are unavailable, report immediately in person to a member of the College Safeguarding Team ensuring the safety of the student whilst agreed action (plan of safety) is agreed;
- If none of above are available, report immediately to Children/Adult Social Care and the Police, as appropriate.

If staff attend internal or external safeguarding meetings with regards to safeguarding a learner (for example, Child Protection Conference, Child in Need meeting, Team around the Family meeting, Case Conference, Case Planning Meetings, Adult Safeguarding Meetings), staff must send in an update to the Safeguarding Team at safeguarding@barnsley.ac.uk by way of a debrief.

Please note that all the information that staff will share in the situations described above is confidential and should be done in accordance with the Data Protection Act 2018 and General Data Protection Regulations. The Department for Education guidance (2018) 'Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers' provides further advice. With this in mind, staff must;

- Hand deliver to the Safeguarding Team any hard copies of safeguarding related information. **Never use the internal posting system;**
- If emailing any information, **use the student's initials and student number** as the method of identifying the student not their name.

For further information and advice contact:

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Information Gathering

When dealing with a safeguarding disclosure, it's important that as much information about the concern is gathered. Below is a checklist to aid staff in the type of information that is useful to gather, as appropriate to each individual case;

- Basic personal details – the learner's name, age, address, currently living, contact details.
- Family details – parents/guardians/carers names, basic personal details of other household members (may include more than one household), contact details.
- Background information about the learner – working with other agencies, LAC, carer, vulnerabilities, previous concerns, offending behaviour, cultural identity, disability, self-harm etc.
- Reason for reporting – the reason for the safeguarding cause for concern.
- Indicators of harm – the reason for believing that the injury or behaviour is the result of abuse or neglect.
- Context and details of concern – context of actual, alleged or risk of harm, reason for believing that the harm/injury/behaviour is a concern and maybe a result of abuse/neglect, recency and severity, whether there is a series or pattern to the harm, or repetitive or escalating concerns that indicate cumulative harm. Is student scared of going home? Vulnerability factors, protectiveness of caregiver.
- Description – of the injury or behaviour observed/disclosed.
- Source of information – disclosure, third party, observation, suspicion.
- Location – current location of student and/or others in need of safeguarding.
- Perpetrator – details about alleged perpetrator including current location, next contact with them.
- Safety assessment – assessment of immediate danger to the student. For example, information on the whereabouts of the alleged abuser/perpetrator.
- Learner's whereabouts – the current whereabouts of the learner and/or anyone at risk.
- Other services- your knowledge of any other services involved with the learner and family.
- **It is important to ask the learner - Is this a single act or a regular occurrence?, Does the learner feel safe?, Is the learner in immediate danger?**

Confidentiality and the Sharing of Information

Staff must be aware that they have a professional responsibility to share relevant information with other appropriate agencies in order to safeguard, within the boundaries of the Data Protection Act 2018 and General Data Protection Regulations. Information sharing is essential for effective safeguarding and promoting the welfare of learners.

- Information must only be shared on a need to know basis. If any member of staff is unsure who to disclose specific information to, seek advice from a **member of the Safeguarding Team** (Siobhan Evanson, Diane Wall, Sean McMahon).
- You must share information only with relevant person/s and agencies. **No staff room discussions.**
- Staff must be aware that they cannot promise to keep secrets which might compromise a learner's safety or wellbeing. It might help to offer this script to anyone who has or might disclose an immediate or potential safeguarding issue before you begin communicating with them in relation to the disclosure or at the soonest appropriate time thereafter; **"If you tell me/us something that leads me/us to think that you or someone else is at risk or in serious danger of harm, particularly where there are child/adult protection issues, then we may need to involve someone else. This would be discussed with you first where possible"**.
- Young people aged 16 or 17 have the understanding to make decisions about their own lives and their views and wishes will be respected unless they are deemed to be at risk or harm.
- Referrals to other agencies such as the Police or Social Care should be made with the learner's agreement wherever practicable. However, if seeking permission may place someone else at risk of harm or where they are not competent to give agreement, decisions may be taken for them.
- Sharing of information can take place without consent in cases where there is a need to protect someone from harm.

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- **In the context of child protection, the welfare of the young person outweighs the family's right to privacy.**
- In cases where an adult in need of safeguarding is deemed not to have sufficient capacity to make reasoned decisions about their well-being, the advice of appropriate external agencies will be sought.

Data Protection

It is customary to keep learner records in schools and colleges for 7 years. In some cases they can be maintained for longer. That means other people may see the record you create for a long time and you need to be sure that they are clear, well presented and articulate. Records must be accurate and factual. It is important to take note that the information you record may legitimately be requested for example in court procedures, serious case reviews, via a Freedom of Information request.

The Department for Education guidance (2018) 'Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers' provides further detailed information and advice for staff;

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf

The seven golden rules to sharing information

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice from the College's Data Protection lead and/or the Safeguarding Team, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.
5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely (see principles).
7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Common mistakes re data sharing

Mistakes can be made either by sharing too much or not enough information. Sharing with a third party - you can share information if you can demonstrate that it is in the best interests of learners and you have a legitimate purpose in law to do so. Information should be shared on a need to know basis. It is important to respect a learner's wishes with regards to sharing information especially if they haven't given you permission to share with another colleague.

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Data protection principles

The principles set out below are intended to help staff working with learners, parents and carers share information between organisations. Practitioners should use their judgement when making decisions about what information to share, and can seek advice from the Data Protection Lead in College and/or the Safeguarding Team if in doubt.

The most important consideration is whether sharing information is likely to support the safeguarding and protection of a learner, as defined in the Education Act 2002 and Children Act 2004 for learners under 18 and in the Care Act 2014 for learners over the age of 18.

Necessary and proportionate

When taking decisions about what information to share, you should consider how much information you need to release. Not sharing more data than is necessary to be of use is a key element of the GDPR and Data Protection Act 2018, and you should consider the impact of disclosing information on the information subject and any third parties. Information must be proportionate to the need and level of risk.

Relevant

Only information that is relevant to the purposes should be shared with those who need it. This allows others to do their job effectively and make informed decisions.

Adequate

Information should be adequate for its purpose. Information should be of the right quality to ensure that it can be understood and relied upon.

Accurate

Information should be accurate and up to date and should clearly distinguish between fact and opinion. If the information is historical then this should be explained.

Timely

Information should be shared in a timely fashion to reduce the risk of missed opportunities to offer support and protection to a child or adult in need of safeguarding. Timeliness is key in emergency situations and it may not be appropriate to seek consent for information sharing if it could cause delays and therefore place a child or young person at increased risk of harm. Practitioners should ensure that sufficient information is shared, as well as consider the urgency with which to share it.

Secure

Wherever possible, information should be shared in an appropriate, secure way. Staff must follow the College policy and procedure regarding security for handling personal information.

Record

Information sharing decisions should be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom, in line with organisational procedures. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the requester. In line with the College's retention policy, the information should not be kept any longer than is necessary. In some rare circumstances, this may be indefinitely, but if this is the case, there should be a review process scheduled at regular intervals to ensure data is not retained where it is unnecessary to do so.

Emergency Safeguarding Situations

Out of Hours – 5:00pm – 8:30am

Life Threatening Situation:

Ring for an ambulance and/or contact the Police on 999

Emergency Referrals for Social Services Support that cannot wait until Normal Office Hours

The Emergency Duty Team will deal with emergency referrals for Social Services support that cannot wait until normal office hours. If staff are worried that a learner is at risk of harm, abuse or neglect or is suffering harm, abuse or neglect, the Team can be contacted on 01226 787789.

Opening Hours:

Monday – Friday: 5:00pm until 8:45am following day

Weekends and Bank Holidays – 24hrs

If you contact the out of hours service:

- You will be asked some questions about your referral and the details will be recorded.
- An experienced Duty Social Worker is always available out of hours to deal with your problem if necessary.
- Referrals to the service are prioritised. Child Protection, Mental Health Act and adults in need of safeguarding are given highest priority.
- The Emergency Duty Team can only deal with urgent referrals that occur outside of office hours. Referrals already made to or being dealt with by daytime Social Services teams will be resolved by that service.
- This is an emergency service and a Duty Social Worker will be given your details as soon as they become available, you may experience a delay before you are contacted.

Please note this is the out of hours contact details for Barnsley Children and Adult Social Care. If the learner lives in a different Local Authority area, staff will need to look up the contact details on the internet for the relevant Children and Adult Social Care.

Out of hours support from within College:

A site duty manager is available on Monday-Thursday evening in College. If staff require assistance with a safeguarding concern, this member of staff can be contacted by ringing the main switchboard where reception staff will be able to advise of the member of staff acting as the site duty manager that evening and their contact details.

Definitions of Abuse, Neglect and Wider Safeguarding Concerns including Signs and Indicators

Any person who knows or suspects that a child or adult with care and support needs (referred to as 'adult' in this section) is being or has been harmed or is at risk of significant harm, has a duty to refer his or her concern to Social Care and/or the Police.

Incidents of abuse;

- **may be one-off or multiple**
- **may be unintentional or intentional**
- **affect one person or more**
- **can take place in any setting**
- **Perpetrators may be known or unknown to the victim.**

It is not your role to investigate or assess whether or not abuse has occurred – you have a responsibility to pass on your concerns to those who can investigate them so that action to protect the child or adult can be taken if necessary. There is sometimes a danger of applying a 'rule of optimism' whereby adults like to think that the child or adult is or will be OK really or that it won't happen again. However, it is known that when abuse has taken place on one occasion then it is very likely that such behaviour will be repeated – abusers rarely stop without intervention or treatment.

All forms of abuse are emotionally damaging to a child or adult and we should always be alert to signs and symptoms indicating emotional abuse.

Detailed below is further information on the main categories of abuse and neglect, including the signs and indicators that may alert members of staff that a learner may be being abused or neglected. Staff must follow college's Safeguarding Policy and procedures in such instances.

Physical abuse

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating or otherwise causing physical harm. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness.

Signs and Indicators

- Bruises
- Burns or scalds
- Bite marks
- Fractures or broken bones
- Scarring
- Effects of poisoning such as vomiting, drowsiness or seizures
- Respiratory problems from drowning, suffocation or poisoning
- Withdrawn
- Changes in behaviour
- Anxious
- Aggressive
- Skipping school/college
- Drug abuse
- Alcohol abuse
- Self-harm
- Suicidal thoughts

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Individuals who have been physically abused may still feel the effects long after their injuries have healed. Being shaken, hit or physically abused in any way as a child can lead to poor physical or mental health later in life, including depressive disorders, anxiety disorders, eating disorders, childhood behaviours or conduct disorders, drug use, suicide attempts, obesity, sexually transmitted infections and risky sexual behaviour.

Other long-term effects include:

- Not doing as well at school or education;
- Criminal risk taking behaviour;
- Drug and alcohol problems.

Psychological including Emotional Abuse

The persistent emotional maltreatment of an individual such as to cause severe and persistent adverse effects on their emotional development. It may involve conveying to an individual that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another individual. It may include not giving the individual opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed. These may include interactions that are beyond an individual's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the individual participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing an individual frequently to feel frightened or in danger, or the exploitation or corruption of an individual. Some level of emotional abuse is involved in all types of maltreatment, though it may occur alone.

Types of emotional abuse

Passive emotional abuse

When a parent or carer denies their child the love and care they need in order to be healthy and happy it's known as "passive" abuse. It's just as damaging, but it can be harder to spot than "active" abuse. The definitions for passive emotional abuse and emotional neglect are very similar.

Five categories of passive emotional abuse have been identified;

1. **Emotional unavailability** - where a parent or carer is not connected with the child and cannot give them the love that they deserve and need
2. **Negative attitudes** - such as having a low opinion of the child and not offering any praise or encouragement
3. **Developmentally inappropriate interaction with the child** - either expecting the child to perform tasks that they are not emotionally mature enough to do or speaking and acting in an inappropriate way in front of a child
4. **Failure to recognise a child's individuality** - this can mean an adult relying on a child to fulfil their emotional needs and not recognising that the child has needs
5. **Failure to promote social adaptation** - not encouraging a child to make friends and mix among their own social peers.

Active emotional abuse

When someone intentionally scares, demeans or verbally abuses an individual it's known as "active" abuse. This requires a premeditated intention to harm. Active emotional abuse has been defined as:

- spurning (rejecting)
- terrorising
- isolating
- Exploiting or corrupting

Sometimes a fifth category of "ignoring" is also included.

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Signs and Indicators

- Use language, act in a way or know about things that you wouldn't expect them to know for their age
- Struggle to control strong emotions or have extreme outbursts
- Seem isolated from their parents/carers
- Lack social skills or have few, if any, friends
- Clingy
- Withdrawn
- Changes in behaviour
- Anxious
- Aggressive
- Skipping school/college
- Drug abuse
- Alcohol abuse
- Self-harm
- Suicidal thoughts
- Obsessive behaviour

Sexual Abuse

Involves forcing or enticing a child or adult to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child or adult 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 or adults in looking at, or in the production of, sexual images, watching sexual activities, encouraging children or adults to behave in sexually inappropriate ways, or grooming a child or adult in preparation for abuse (including via the internet).

The definition of child sexual exploitation is as follows:

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

(Keeping Children Safe in Education 2018)

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

There are 2 different types of sexual abuse. These are called contact abuse and non-contact abuse.

Contact abuse involves touching activities where an abuser makes physical contact with an individual, including penetration. It includes:

- Sexual touching of any part of the body whether the individual is wearing clothes or not
- Rape or penetration by putting an object or body part inside an individual's mouth, vagina or anus
- Forcing or encouraging an individual to take part in sexual activity
- Making an individual take their clothes off, touch someone else's genitals or masturbate

Non-contact abuse involves non-touching activities, such as grooming, exploitation, persuading a person to perform sexual acts over the internet and flashing. It includes:

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- Encouraging an individual to watch or hear sexual acts
- Not taking proper measures to prevent an individual being exposed to sexual activities by others
- Meeting an individual following sexual grooming with the intent of abusing them
- Online abuse including making, viewing or distributing child abuse images
- Allowing someone else to make, view or distribute child abuse images
- Showing pornography
- Sexually exploiting an individual for money, power or status (child/adult exploitation)

Signs and Indicators

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.

Have physical symptoms

- anal or vaginal soreness
- an unusual discharge
- sexually transmitted infection (STI)
- Pregnancy

Other signs and symptoms may include

- Withdrawn
- Changes in behaviour
- Anxious
- Aggressive
- Skipping school/college
- Drug abuse
- Alcohol abuse
- Self-harm
- Suicidal thoughts

Exposure

It is an offence for someone to expose their genitals if they intend that someone else will see them and if they intend to cause that person (or persons) 'alarm or distress'.

It is not a crime to be naked in public but it is possible that a naked person could be arrested and charged with causing harassment, alarm or distress under the Public Order Act 1986 if they do not put some clothes on when a member of the public or a police officer asks them to do so.

Neglect

Neglect is the ongoing failure to meet an individual's basic needs and is the most common form of child abuse.

A person may be left hungry or dirty, without adequate clothing, shelter, supervision, medical or health care.

A person may be put in danger or not protected from physical or emotional harm. They may not get the love, care and attention they need from their parents/carers. An individual who is neglected will often suffer from other abuse as well. Neglect is dangerous and can cause serious, long-term damage - even death.

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Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Types of neglect

Physical neglect - failing to provide for a child's basic needs such as food, clothing or shelter. Failing to adequately supervise a child, or provide for their safety.

Educational neglect -failing to ensure a child receives an education.

Emotional neglect -failing to meet a child's needs for nurture and stimulation, perhaps by ignoring, humiliating, intimidating or isolating them. It's often the most difficult to prove.

Medical neglect -failing to provide appropriate health care, including dental care and refusal of care or ignoring medical recommendations.

Acts of omission - failure to ensure adequate and appropriate supervision, ignoring medical advice

Signs and Indicators

- Poor appearance and hygiene, such as inadequate clothing, unwashed clothing, odour issues.
- Health and developmental problems, such as
 - untreated injuries, medical and dental issues
 - repeated accidental injuries caused by lack of supervision
 - recurring illnesses or infections
 - not been given appropriate medicines
 - missed medical appointments such as 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,
- Housing and family issues, such as living in an unsuitable home environment, left alone for a long time, taking on the role of carer for other family members,
- Withdrawn
- Changes in behaviour
- Anxious
- Aggressive
- Skipping school/college
- Drug abuse
- Alcohol abuse
- Self-harm
- Suicidal thoughts
- Obsessive behaviour

Self-Neglect

The Care Act Guidance states that self-neglect covers a wide range of behaviour; neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.

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There are 3 distinct areas that are characteristic of self-neglect:

- Lack of self-care - this includes neglect of one's personal hygiene, nutrition and hydration, or health, to an extent that may endanger safety or well-being;
- Lack of care of one's environment - this includes situations that may lead to domestic squalor or elevated levels of risk in the domestic environment (e.g. health or fire risks caused by hoarding);
- Refusal of assistance that might alleviate these issues. - this might include, for example, refusal of care services in either their home or a care environment or of health assessments or interventions, even if previously agreed, which could potentially improve self-care or care of one's environment.

Self-neglect involves the complex interplay of physical, mental, social, personal and environmental factors, all of which must be explored in order to understand the meaning of self-neglect in the context of each individual's life experience. This will assist staff to intervene in the most applicable way while assisting individuals to recognise and address the root causes of their circumstances which may include (this list is not exhaustive);

Physical health issues

- Impaired physical functioning
- Pain
- Nutritional deficiency

Mental health issues

- Depression
- Frontal Lobe dysfunction
- Impaired cognitive functioning

Substance misuse

- Alcohol
- Other drugs

Psychosocial factors

- Diminished social networks; limited economic resources
- Poor access to social or health services
- Personality traits; traumatic histories/ life-changing events; perceived self-efficacy

Signs and Indicators

There is a continuum of indicators which, when combined, may indicate the presence of self-neglect. There is no clear point at which lifestyle patterns become self-neglect, and the term can apply to a wide range of behaviour and different degrees of self-neglect. The following list is not exhaustive:

- Living in very unclean, sometimes verminous circumstances, such as living with a toilet completely blocked with faeces;
- Neglecting household maintenance, and therefore creating hazards within and surrounding the property;
- Portraying eccentric behaviour / lifestyles;
- Obsessive hoarding;
- Poor diet and nutrition;
- Declining or refusing prescribed medication and / or other community healthcare support;
- Refusing to allow access to health and / or social care professionals in relation to personal hygiene and care;
- Refusing to allow access to other organisations with an interest in the property, for example, staff working for utility companies (water, gas, electricity), housing services;
- Repeated episodes of anti-social behaviour – either as a victim or source of risk;
- Being unwilling to attend external appointments with professionals in social care, health or other organisations (such as housing);

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- Total lack of personal hygiene resulting in poor healing / sores, long toe nails, unkempt hair, uncared for facial hair, body odour, unclean clothing;
- Isolation either of an individual or of a household or family unit;
- Failure to take medication.

Hoarding

Compulsive hoarding (more accurately described as 'hoarding disorder') is a pattern of behaviour characterised by the excessive acquisition of and inability or unwillingness to discard large quantities of objects and / or animals that cover the living areas of the home and cause significant distress. Hoarding is now considered a standalone mental disorder. A diagnosis of Hoarding Disorder can only be made by a specialist medical practitioner. There are five diagnostic criteria for identifying a case of hoarding disorder, namely:

- Persistent difficulty discarding or parting with possessions, regardless of their monetary value;
- This difficulty is due to a perceived need to save items and distress associated with discarding items;
- The difficulty discarding possessions results in the accumulation of possessions that congest and clutter active living areas;
- The hoarding causes clinically significant distress or impairment in social, occupational, or other important areas of functioning;
- The hoarding is not attributable to another medical condition or mental disorder.

Hoarding disorder is distinct from the act of collecting and is also different from people whose property is generally cluttered or messy. It is not simply a lifestyle choice. The main difference between a hoarder and a collector is that hoarders have strong emotional attachments to their objects which can be well in excess of the real value.

Financial or Material Abuse

Financial abuse can include unreasonably limiting access to money or other resources, forcing financial responsibility onto a person, taking money from a person, withholding access to shared money, making someone account for everything they spend, making someone beg for money, preventing a person from being in education or employment, taking out loans or running up debts in the victim's name, forcing a person to commit crimes for money, not allowing someone to buy necessities, for themselves or their children, including sufficient food.

Financial abuse can also be when the perpetrator is spending money needed to maintain the home or on themselves. Financial abuse may continue after a relationship has ended, through the withholding of child maintenance including theft, fraud, exploitation, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Organisational/ Institutional Abuse

Organisational abuse occurs where the routines and regimes within settings deny people rights, choices and opportunities. Organisational abuse refers to a kind of abuse that takes place inside institutions where the victims were placed for their rehabilitation, education, welfare, or even protection. It can range from one-off incidents to ongoing ill-treatment. It can be through neglect or poor professional practice as a result of structure, policies, processes and practices within an organisation – including neglect and poor care practice within an institution or specific care setting like a hospital or care home, for example. This may range from isolated incidents to continuing ill-treatment.

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Discriminatory Abuse

Can include;

- Harassment
- slurs or similar treatment because of:
 - race
 - gender and gender identity
 - age
 - disability
 - sexual orientation
 - religion

Domestic Abuse

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

- psychological
- physical
- sexual
- financial
- emotional

The Government definition of:

- **Coercive Behaviour** is 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.
- **Controlling Behaviour** is 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 means needed for independence, resistance and escape and regulating their everyday behaviour.

This is not a legal definition.

Domestic Abuse Disclosure Scheme (DADS or otherwise known as Claire’s Law)

If you live in South/West Yorkshire, this scheme gives members of the public a formal mechanism to make enquires about an individual who they are in a relationship with, or who is in a relationship with someone they know, where there is a concern that the individual may be violent towards their partner.

It gives members of the public a “**right to ask**” police if their partner has a violent past if they are concerned their partner may pose a risk to them.

The scheme increases public safety and affords victims of domestic abuse better protection by helping people make an informed decision on whether to continue a relationship. It also provides help and support to assist individuals when making that choice.

If police checks show that the individual has a record of violent offences, or there is other information to indicate that you, or the person you know, is at risk, the police will consider sharing this information. Anyone who has contact with a potential victim of domestic abuse can make an application under the scheme. However, information will only be given to those who are best placed to safeguard the person at risk.

To make a request for information under the Disclosure Scheme, contact the police on 101. In an emergency, call 999. Alternatively, you can also visit your local police station or speak to a police officer.

For further information and advice contact:

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Indecent Images of Children

The law does not define an indecent image of a child. The decision that an image is a child under the age of eighteen (or not) and the decision that an image is indecent (or not) is left to the jury in a trial.

However the principles are that the image will be of a child under 18 (if the image looks like a child then is to be treated as a child) and that the image will be Indecent. A normal propriety test would apply. I.e. what would a member of the public consider a photo to be indecent or not.

The legislation is outlined below

Section 1 of the Protection of Children Act 1978

- take, or permit to be taken or to make, any indecent photograph or pseudo-photograph of a child (meaning in this Act a person under the age of 18 years)
- distribute or show such indecent photographs or pseudo-photographs
- have in their possession such indecent photographs or pseudo-photographs, with a view to their being distributed or shown by himself/herself or others
- publish or cause to be published any advertisement likely to be understood as conveying that the advertiser distributes or shows such indecent photographs or pseudo-photographs or intends to do so

Pseudo Photograph

The Act defines a "pseudo-photograph" as "an image, whether made by computer-graphics or otherwise howsoever, which appears to be a photograph"

Section 160 Criminal Justice Act 1988

Offences for a person to have any indecent image or pseudo image of a child in his possession.

Defense

(a) That he had a legitimate reason for having the photograph or pseudo-photograph in his possession; or

(b) That he had not himself seen the photograph or pseudo-photograph and did not know, nor had any cause to suspect, it to be indecent; or

(c) that the photograph or pseudo-photograph was sent to him without any prior request made by him or on his behalf and that he did not keep it for an unreasonable time.

Other offences

PROHIBITED IMAGES (Section 62 of the Coroners and Justice Act 2009)

Prohibited images are **non-photographic images** such as computer-generated images (CGIs), cartoons, graphics, artwork, manga images and drawings and give the predominant impression of representing a child.

To be prohibited the following three need to be satisfied.

1. That the image is pornographic
2. That the image is grossly offensive, disgusting, or otherwise of an obscene character and
3. That the image focuses solely or principally on a child's genitals or anal region, or portrays any of the following acts:
 - the performance by a person of an act of intercourse or oral sex with or in the presence of a child
 - an act of masturbation by, of, involving or in the presence of a child
 - an act which involves penetration of the vagina or anus of a child with a part of a person's body or with anything else;
 - an act of penetration, in the presence of a child, of the vagina or anus of a person with a part of a person's body or with anything else;
 - the performance by a child of an act of intercourse or oral sex with an animal (whether dead or alive or imaginary);
 - The performance by a person of an act of intercourse or oral sex with an animal (whether dead or alive or imaginary) in the presence of a child.

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EXTREME PORNOGRAPHY (Section 63 Criminal Justice and Immigration Act 2008)

In order for an image to fit the definition of extreme pornography, it must be **pornographic** and **grossly offensive, disgusting, or otherwise of an obscene character** and portray in an explicit and realistic way any of the following:

- an act which threatens a person's life
- an act which results in or is likely to result in serious injury to a person's anus, breast or genitals
- an act which involves sexual interference with a human corpse
- a person performing an act of intercourse or oral sex with an animal (whether dead or alive)

If during the course of a safeguarding issue you become aware of the possession of any such images as previously described do not under any circumstances allow those images to be transmitted onwards by any means. Whether that is screen shots, email or messaging. In doing so you could open up the possibility of the student and yourself being investigated for the distribution of such images. The only course of action is to ask for the phone to be handed across and secured. If this is refused then the Police would need to be called.

SEXTING

Whilst professionals refer to the issue as 'sexting' there is no clear definition of 'sexting'. Many professionals consider sexting to be 'sending or posting sexually suggestive images, including nude or semi-nude photographs, via mobiles or over the Internet. Yet when young people are asked 'What does sexting mean to you?' they are more likely to interpret sexting as 'writing and sharing explicit messages with people they know'. Similarly, many parents think of sexting as flirty or sexual text messages rather than images.

For our context in College however we would use the following:

Images or videos generated

- by children under the age of 18, or
- of children under the age of 18 that are of a sexual nature or are indecent.

These images are shared between young people and/or adults via a mobile phone, handheld device or website with people they may not even know.

When an incident involving youth produced sexual imagery comes to a school or college's attention:

- The incident must be referred to the Central Safeguarding Team as soon as possible.
- The Central Safeguarding Team will hold an initial review meeting with appropriate College staff.
- There should be subsequent interviews with the young people involved (if appropriate).
- Parents should be informed at an early stage and involved in the process unless there is good reason to believe that involving parents would put the young person at risk of harm.
- At any point in the process if there is a concern a young person has been harmed or is at risk of harm a referral must be made to children's social care and/or the police immediately.

Disclosure

Disclosures about such imagery can occur in a variety of ways. The young person affected may inform a class tutor, the Central Safeguarding Team in college, or any member of college staff. They may report through an existing reporting structure, or a friend or parent may inform someone in college, or inform the police directly.

Any direct disclosure by a young person should be taken very seriously. A young person who discloses they are the subject of sexual imagery is likely to be embarrassed and worried about the consequences. It is likely that disclosure in college is a last resort and they may have already tried to resolve the issue themselves.

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Initial review meeting

The initial review meeting should consider the initial evidence and aim to establish:

- Whether there is an immediate risk to a young person or young people;
- If a referral should be made to the police and/or children's social care;
- If it is necessary to view the imagery in order to safeguard the young person – **in most cases, imagery should not be viewed;**
- What further information is required to decide on the best response;
- Whether the imagery has been shared widely and via what services and/or platforms. This may be unknown;
- Whether immediate action should be taken to delete or remove images from devices or online services;
- Any relevant facts about the young people involved which would influence risk assessment;
- If there is a need to contact another school, college, setting or individual;
- Whether to contact parents or carers of the pupils involved - in most cases parents should be involved.

An immediate referral to police and/or children's social care should be made if at this initial stage:

1. The incident involves an adult.
2. There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example, owing to special educational needs).
3. What you know about the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent.
4. The imagery involves sexual acts and any pupil in the imagery is under 13.
5. You have reason to believe a young person is at immediate risk of harm owing to the sharing of the imagery, for example, the young person is presenting as suicidal or self-harming.

If none of the above apply then a college may decide to respond to the incident without involving the police or children's social care (a college can choose to escalate the incident at any time if further information/concerns come to light).

Sexual Violence & Sexual Harassment

Sexual violence and sexual harassment can occur between individuals of any age and gender. It can also occur through groups sexually assaulting or sexually harassing an individual or group. It can occur online or offline and include physical and/or verbal.

The government has recently published the 'Sexual Violence and sexual harassment between children in schools and colleges: Advice for governing bodies, proprietors, headteachers, principals, senior leadership teams and designated safeguarding leads' (2018). The guidance makes clear that whilst the focus of the advice is on protecting and supporting children, Colleges should also protect any adult students and engage with adult social care, support services and the police as required.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/707653/Sexual_Harassment_and_Sexual_Violence_Advice.pdf

For the purposes of this guidance;

Sexual Violence

Sexual violence refers to sexual offences under the Sexual Offences Act 2003 as described below:

Rape: A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.

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Assault by Penetration: A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of her/his body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.

Sexual Assault: A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.

Sexual Harassment

Sexual harassment means 'unwanted conduct of a sexual nature' that can occur online and offline. Sexual harassment, is referenced in the context of child on child sexual harassment. Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment.

Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- sexual "jokes" or taunting;
- physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
- online sexual harassment. This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence.¹⁸ It may include:
 - non-consensual sharing of sexual images and videos. ([UKCCIS sexting advice](#) provides detailed advice for schools and colleges);
 - sexualised online bullying;
 - unwanted sexual comments and messages, including, on social media; and
 - sexual exploitation; coercion and threats.

Sexual harassment (as set out above) creates an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence.

Harmful Sexual Behaviour

Children's sexual behaviour exists on a wide continuum, from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. A useful umbrella term is "harmful sexual behaviour". The term has been widely adopted in child protection and is used in this advice. **Harmful sexual behaviour can occur online and/or offline and can also occur simultaneously between the two.** Harmful sexual behaviour should be considered in a child protection context.

When considering harmful sexual behaviour, ages and the stages of development of the children are critical factors to consider. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference or if one of the children is pre-pubescent and the other is not.

However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature. See [NSPCC: Harmful sexual behaviour](#) for more information on what is harmful sexual behaviour.

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/harmful-sexual-behaviour/>

Harmful sexual behaviour **can**, in some cases, progress on a continuum. Addressing inappropriate behaviour **can** be an important intervention that helps prevent problematic, abusive and/or violent behaviour in the future. Children

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displaying harmful sexual behaviour have often experienced their own abuse and trauma. It is important that they are offered appropriate support.

College response to reports of sexual violence and sexual harassment

Sexual violence and sexual harassment is not acceptable and will not be tolerated by the college. Every report of sexual violence or sexual harassment will be taken seriously and considered on a case by case basis, supported by other agencies, such as children's social care and the police as required. Staff must report such allegations to the central Safeguarding Team who will record such allegations and the outcome on the central safeguarding database and relevant learner files.

College will make an immediate risk and needs assessment following the report of sexual violence. The risk assessment will consider the risk posed to all learners, staff and the wider college community and adequate measures will be put in place to protect them and keep them safe. College will consider the need for a risk assessment on a case by case basis for reports of sexual harassment

The risk and needs assessment will consider:

- The victim, especially their protection and support;
- The alleged perpetrator;
- All other learners (and if appropriate adult learners and staff) at college and any actions appropriate and proportionate to protect them.

College will undertake action following the report of learner on learner sexual violence and sexual harassment. Immediate consideration will be given on how to support and protect the victim and alleged perpetrator. Dependent on the case, the college will respond in one or a combination of the following four ways when managing any reports of sexual violence and sexual harassment;

- Manage internally;
- Early help;
- Referral to social care;
- Report to the police.

The response will be proportionate to the case and support for the victim and alleged perpetrator tailored on a case-by-case basis. Support may be provided by college, external agencies or a combination of both.

A whole college proactive approach is adopted to preventing learner on learner sexual violence and sexual harassment and includes;

- staff training through mandatory training;
- learner awareness through tutorials;
- college stance on zero tolerance to sexual violence and sexual harassment articulated through policy statement, tutorials and training.

Peer on Peer Abuse

Staff should be aware that learners are capable of abusing their peers. This is generally referred to as peer on peer abuse and can include, though not limited to:

- Sexual violence and sexual harassment;
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling and other forms of physical harm;
- Sexting (also known as youth produced sexual imagery);
- Initiation/hazing type violence and rituals;
- Bullying including cyberbullying.

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Whilst staff need to be aware of the gendered nature of peer on peer abuse, all peer on peer abuse is unacceptable and will be taken seriously.

The college will not tolerate peer on peer abuse. Abuse is abuse and will not be passed off as banter. Every report of peer on peer abuse will be taken seriously and considered on a case by case basis, supported by other agencies, such as children's social care and the police as appropriate. Staff must report such allegations to the central Safeguarding Team who will record such allegations and the outcome on the central safeguarding database and relevant learner files.

College will make an immediate risk and needs assessment following the report of peer on peer abuse. The risk assessment will consider any risks posed to all learners and adequate measures will be put in place to protect them and keep them safe.

The risk and needs assessment will consider:

- The victim, especially their protection and support;
- The alleged perpetrator;
- All other learners (and if appropriate adult learners and staff) at college and any actions appropriate and proportionate to keep them safe.

College will undertake action following the report of peer on peer abuse. Immediate consideration will be given on how to support and protect the victim and alleged perpetrator. Dependent on the case, the college will respond in one or a combination of the following four ways when managing any reports of peer on peer abuse;

- Manage internally;
- Early help;
- Referral to social care;
- Report to the police.

The response will be proportionate to the case and support for the victim and alleged perpetrator tailored on a case-by-case basis. Support may be provided by college, external agencies or a combination of both.

A whole college proactive approach is adopted to preventing peer on peer abuse and includes;

- staff training through mandatory training;
- student awareness through tutorials;
- college stance on zero tolerance to peer on peer abuse articulated through policy statement, tutorials and training.

Fabricated or Induced Illness

Fabricated or induced illness (FII) is described as behaviours by parents or cares that may result in harm to a child which may include one or more of the following;

- Deliberately inducing symptoms or signs including past medical history;
- Interfering with treatments;
- Exaggerating or falsifying symptoms;
- Falsifying results of investigations, observations, medical letters and documents;
- Obtaining specialist treatment or equipment that are not required;
- Alleging unfounded psychological illness;
- Health seeking behaviour or presentation outside that expected for a confirmed illness or disability.

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The most important consideration is the impact on the child's health, wellbeing or development rather than the intent of the parent or care giver, meaning is the child suffering or at risk of suffering significant harm as a result of their parent or carer's behaviour.

Self-Harm or Self Injurious Behaviours (SIB)

Self-Harm is a general term for harming oneself intentionally or unintentionally. It is a way of coping with or expressing overwhelming emotional distress. Sometimes when people self-harm they intend to die but often the intention is more to punish themselves, express their distress or relieve unbearable emotional pain and tension. Self-harm can also be a cry for help.

If you are made aware of a learner who is self-harming, you should acknowledge your awareness and explain to them your concern and that you will need to share this information. You will need to disclose to the safeguarding team via the Cause for Concern form and if possible make an immediate referral into counselling (**ext. 233**) with the learner's permission. However, you might support them in contacting their GP for help. You can also furnish them with the Samaritans contact details (**116 123**) for support or the website of Mind (a mental health charity) for further advice. If the self-harm puts the learner at significant immediate risk you may need to contact **999** and ask for an ambulance.

Types of self-harm

There are many different ways people can intentionally harm themselves, such as:

- cutting or burning their skin;
- punching or hitting themselves;
- poisoning themselves with tablets or toxic chemicals;
- misusing alcohol or drugs;
- deliberately starving themselves (anorexia nervosa) or binge eating (bulimia nervosa);
- excessively exercising.

People often try to keep self-harm a secret because of shame or fear of discovery. For example, if they're cutting themselves, they may cover up their skin and avoid discussing the problem.

Signs of self-harm

If you think a learner is self-harming, look out for any of the following signs:

- unexplained cuts, bruises or cigarette burns, usually on their wrists, arms, thighs and chest;
- keeping themselves fully covered at all times, even in hot weather;
- signs of depression, such as low mood, tearfulness or a lack of motivation or interest in anything;
- self-loathing and expressing a wish to punish themselves;
- not wanting to go on and wishing to end it all;
- becoming very withdrawn and not speaking to others;
- changes in eating habits or being secretive about eating, and any unusual weight loss or weight gain;
- signs of low self-esteem, such as blaming themselves for any problems or thinking they're not good enough for something;
- signs they have been pulling out their hair;
- signs of alcohol or drugs misuse.

People who self-harm can seriously hurt themselves, so it's important that they speak to a GP about the underlying issue and request treatment or therapy that could help them.

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Why people self-harm

Self-harm is more common than many people realise, especially among younger people. It's estimated around 10% of young people self-harm at some point, but people of all ages do. This figure is also likely to be an underestimate, as not everyone seeks help.

In most cases, people who self-harm do it to help them cope with overwhelming emotional issues, which may be caused by:

- **social problems** – such as being bullied, having difficulties at work or school, having difficult relationships with friends or family, coming to terms with their sexuality if they think they might be gay or bisexual, or coping with cultural expectations, such as an arranged marriage;
- **trauma** – such as physical or sexual abuse, the death of a close family member or friend, or having a miscarriage;
- **psychological causes** – such as having repeated thoughts or voices telling them to self-harm, disassociating (losing touch with who they are and with their surroundings), or borderline personality disorder.

These issues can lead to a build-up of intense feelings of anger, guilt, hopelessness and self-hatred. The person may not know who to turn to for help and self-harming may become a way to release these pent-up feelings.

Self-harm is linked to anxiety and depression. These mental health conditions can affect people of any age. Self-harm can also occur alongside antisocial behaviour, such as misbehaving at school or getting into trouble with the police. Although some people who self-harm are at a high risk of suicide, many people who self-harm don't want to end their lives. In fact, the self-harm may help them cope with emotional distress, so they don't feel the need to kill themselves however, there is a risk of accidental suicide

Homelessness

An individual could be 'homeless' if they:

- have no home in the UK or elsewhere that they have a legal right to occupy;
- have a moveable home such as a boat or caravan and there is nowhere it can be placed lawfully;
- are at risk from harm if they stay in their current home.

If an individual is homeless, they may be eligible for help from the Local Authority Housing Services. For non/urgent housing and homelessness advice, the Housing Team at Barnsley Council can be contacted on 01226 773870.

16-18 year olds

Learners aged between 16 to 18 that are homeless or threatened with homelessness must be referred to Children's Social Care and will undergo a joint assessment with Housing Services and Children's Social Care. This assessment will include discussing circumstances and any support needs. The aim is to help prevent homelessness and assist a return home where this is suitable.

Substance Misuse

Substances includes tobacco, alcohol, caffeine, volatile substances, prescribed medication, "over the counter" medication, and illicit substances e.g. cannabis, ecstasy, heroin including that of so called 'legal highs'.

Substance use

Substance use can be defined as the taking of substances in an experimental and/or recreational manner. It is acknowledged that harm may still occur through substance use, though it may not be immediately apparent.

Substance misuse

Substance misuse can be defined as problematic and/or dependent use of substances. All substance misuse is potentially harmful - however, there are degrees of harm which require specific responses according to the

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presenting risks.

In case of medical emergency due to substance misuse, do not hesitate to escort young person to hospital A&E or by dialling 999 and asking for an ambulance. Please note that you must stay with the person until next of kin arrive or you have handed over duty of care of the student to appropriate hospital staff.

Psychoactive Substances

The Psychoactive Substances Act 2016 “...makes it an offence to produce, supply, offer to supply, possess with intent to supply, possess on custodial premises, import or export psychoactive substances; that is, any substance intended for human consumption that is capable of producing a psychoactive effect. The maximum sentence will be 7 years’ imprisonment.”

- **Stimulants** (like mephedrone, naphyrone) act like amphetamines, cocaine, or ecstasy, in that they can make you feel energized, physically active, fast-thinking, very chatty and euphoric.
- **Downers or sedatives** (like GBH/GBL, methoxetamine) act similarly to benzodiazepines (drugs like diazepam or Valium), or GHB/GBL, in that they can make you feel euphoric, relaxed or sleepy.
- **Hallucinogens or psychedelics** (like NBOMe drugs) act like LSD, magic mushrooms, ketamine and methoxetamine. They create altered perceptions and can make you hallucinate (seeing and/or hearing things that aren’t there). They can induce feelings of euphoria, warmth, ‘enlightenment’ and being detached from the world around.
- **Synthetic cannabinoids** (like Spice or Black Mamba): act similarly to cannabis. The effects of these are similar cannabis intoxication: relaxation, altered consciousness, disinhibition, a state of being energized or euphoria
- Animation warning young people about the dangers of taking 'legal highs'
<https://www.youtube.com/watch?v=EhU3JG7Lafw>

Female Genital Mutilation

Female Genital Mutilation (FGM) is partial or total removal of the female genitalia for non-medical reasons. It is also known as female circumcision, cutting or Sunna. 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. There are four types of FGM – all are illegal and have serious health risks. FGM ranges from pricking or cauterizing the female genital area, through partial or total removal of the clitoris, cutting the lips (labia) and narrowing the vaginal opening.

FGM is usually performed by someone with no medical training. Girls are given no anaesthetic or antiseptic treatment and are often forcibly restrained. The cutting is made using instruments such as knife, scissors, scalpel, razor blade or glass.

FGM is usually carried out on young girls between infancy and 15 years old. An estimated 100 to 140 million girls and women worldwide are currently living with the consequences of FGM. In Africa, an estimated 92 million girls have undergone FGM.

Signs, Symptoms & Effects of FGM

A girl or woman who has had FGM may;

- Have difficulty walking, sitting or standing;
- Spend longer than normal on the bathroom or toilet;
- Have unusual behaviour after an absence from 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.

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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;

- Being taken 'home' for a visit;
- A special occasion to 'become a woman';
- An older female relative visiting the UK.

She may ask someone at College for help if she suspects FGM is going to happen or she may run away from College and/or home

The NSPCC have a **24 hour** dedicated FGM helpline offering information, advice and guidance – Tel: 0800 028 3550 or email fgmhelp@nspcc.org.uk

The Role of Staff

The **role of College staff** is to understand what FGM is and be aware of the signs, symptoms and effects of FGM. Staff should be alert to students who may be at risk of FGM and girls connected to the student who may be at risk, even if they aren't a College student. Any member of staff who has concerns regarding FGM should report these immediately using the 'Safeguarding Cause for Concern' form.

Teaching staff should take note of the additional guidance regarding reporting FGM as from October 2015, the FGM Act 2003 introduced a **mandatory** reporting duty for all regulated health and social care professionals and teachers in England and Wales. These professionals **must** make a report to the police, if in the course of their duties;

- They are informed by a girl under the age of 18 that she has undergone an act of FGM.
- They observe physical signs that an act of FGM may have been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth.

Complying with the duty does not breach any confidentiality requirement or other restriction on disclosure which might otherwise apply. This duty on teachers does not apply in 'at risk' or suspected cases or in cases where the learner is 18 or over. In these cases, teachers should follow the college's normal safeguarding procedures.

Sexual Exploitation

The definition of child sexual exploitation is as follows:

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

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

- can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex;
- can still be abuse even if the sexual activity appears consensual;
- can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity;
- can take place in person or via technology, or a combination of both;
- can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;

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- may occur without the child or young person's immediate knowledge (through others copying videos or images they have created and posting on social media, for example);
- can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse; an
- is typified by some form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.

Signs and indicators

- Links with older adults
- Mood changes
- Change in appearance
- Different language, for example sexualised language
- New possessions or unaccounted money
- Mobile phone (new or excessive use)
- Staying out overnight
- Truancy from college
- Missing from home
- Being secretive or hostile
- Drug and alcohol usage
- Large amount of condoms
- Seen in different cars
- Excessive use of internet
- Frequenting areas of prostitution
- Isolation from family and friends

Grooming

Grooming is when someone builds an emotional connection with an individual to gain their trust for the purpose of sexual abuse or exploitation or trafficking. People can be groomed online or face-to-face, by a stranger or by someone they know - for example a family member, friend or professional. Groomers may be male or female. They could be any age. Many people don't understand that they have been groomed or that what has happened is abuse.

How Grooming Happens

Grooming happens both online and in person. Groomers will hide their true intentions and may spend a long time gaining an individual's trust. Groomers may try to gain the trust of a whole family to allow them to be left alone with a child and if they work with children they may use similar tactics with their colleagues.

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
- Use secrets and intimidation to control the child

Signs of Grooming

The signs of grooming aren't always obvious and groomers will often go to great lengths not to be identified.

If a child is being groomed they may:

- Be very secretive, including about what they are doing online
- Have older boyfriends or girlfriends
- Go to unusual places to meet friends
- Have new things such as clothes or mobile phones that they can't or won't explain
- Have access to drugs and alcohol.

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In older children, signs of grooming can easily be mistaken for 'normal' teenage behaviour, but you may notice unexplained changes in behaviour or personality, or inappropriate sexual behaviour for their age.

County Lines & Associated Criminal Exploitation

County lines is a major, cross-cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery, and missing persons

The UK Government defines county lines as:

County lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas within the UK, using dedicated mobile phone lines or other form of “deal line”. They are likely to exploit children and vulnerable adults to move and store the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

What is Child Criminal Exploitation?

Child criminal exploitation is increasingly used to describe this type of exploitation where children are involved, and is defined as:

Child Criminal Exploitation is common in county lines and occurs where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact; it can also occur through the use of technology.

Criminal exploitation of children is broader than just county lines, and includes for instance children forced to work on cannabis farms or to commit theft.

Like other forms of abuse and exploitation it can affect any child under the age of 18 and vulnerable adult over the age of 18. It can still be exploitation even if the activity appears consensual. It can involve force and/or enticement based methods of compliance and is often accompanied by violence or threats of violence. It can be perpetrated by individuals or groups

What are the signs of criminal exploitation and county lines?

These are some warning signs that a young person could be being criminally exploited:

- Returning home late, staying out all night or going missing
- Being found in areas away from home
- Increasing drug use, or being found to have large amounts of drugs on them
- Being secretive about who they are talking to and where they are going
- Unexplained absences from school, college, training or work
- Unexplained money, phone(s), clothes or jewellery
- Increasingly disruptive or aggressive behaviour
- Using sexual, drug-related or violent language you wouldn't expect them to know
- Coming home with injuries or looking particularly dishevelled
- Having hotel cards or keys to unknown places.

Breast Ironing

Breast ironing, also known as breast flattening, is the painful practice of massaging or pounding of girls' breasts, using hard or heated objects, to suppress or reverse the growth of breasts. Some families tend to opt for using elastic belts to stop the breasts from growing. The practice is carried out to hide signs of pubescent development. It is usually carried out by the girl's mum or female relative who misguidedly will say that they are doing it to try and protect the girl from sexual harassment, rape, early sex or early pregnancies. It is mostly practised in Western and

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Central Africa, such as Cameroon and Nigeria, where boys and men believe that a girl whose breasts have grown are ready to have sex.

Concerns are that this ritual is on the rise in the UK but is an under-reported crime. Often breast ironing is kept a secret between the mother and the young girl. The girl thinks her mother is doing it to protect her from unwanted male attention, so perpetuating her to keep silent. In addition, many believe it is futile in its attempt to deter sexual activity.

Whilst suppressing natural body development, breast ironing also exposes girls to other health problems such as cancer, abscesses, cysts, tissue damage.

Human Trafficking

Human trafficking is the movement of a person from one place to another into conditions of exploitation, using deception, coercion, the abuse of power or the abuse of someone's vulnerability. It is possible to be a victim of trafficking even if your consent has been given to being moved.

Although human trafficking often involves an international cross-border element, it is also possible to be a victim of human trafficking nationally and from region to region and street to street.

There are three main elements of human trafficking:

- The movement – recruitment, transportation, transfer, harbouring or receipt of people.
- The control – threat, use of force, coercion, abduction, fraud, deception, abuse of power or vulnerability, or the giving of payments or benefits to a person in control of the victim.
- The purpose – exploitation of a person, which includes prostitution and other sexual exploitation, forced labour, slavery or similar practices, and the removal of organs.

Children cannot give consent to being moved, therefore the coercion or deception elements do not have to be present.

Types of human trafficking

There are several broad categories of exploitation linked to human trafficking, including:

- **Sexual exploitation**
Sexual exploitation involves any non-consensual or abusive sexual acts performed without a victim's permission. This includes prostitution, escort work and pornography. Women, men and children of both sexes can be victims. Many will have been deceived with promises of a better life and then controlled through violence and abuse.
- **Forced labour**
Forced labour involves victims being compelled to work very long hours, often in hard conditions, and to hand over the majority if not all of their wages to their traffickers. Forced labour crucially implies the use of coercion and lack of freedom or choice for the victim. In many cases victims are subjected to verbal threats or violence to achieve compliance.

Manufacturing, entertainment, travel, farming and construction industries have been found to use forced labour by victims of human trafficking to some extent. There has been a marked increase in reported numbers in recent years. Often large numbers of people are housed in single dwellings and there is evidence of 'hot bunking', where a returning shift takes up the sleeping accommodation of those starting the next shift.

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The International Labour Organisation [ILO] has identified six elements which individually or collectively can indicate forced labour. These are:

- Threats or actual physical harm;
- Restriction of movement and confinement to the workplace or to a limited area;
- Debt-bondage;
- Withholding of wages or excessive wage reductions that violate previously made agreements;
- Retention of passports and identity documents (the workers can neither leave nor prove their identity status);
- Threat of denunciation to the authorities where the worker is of illegal status.

- **Domestic servitude**

Domestic servitude involves the victim being forced to work in private households. Their movement will often be restricted and they will be forced to perform household tasks such as child care and house-keeping over long hours and for little if any pay. Victims will lead very isolated lives and have little or no unsupervised freedom. Their own privacy and comfort will be minimal, often sleeping on a mattress on the floor in an open part of the house. In rare circumstances where victims receive a wage it will be heavily reduced, as they are charged for food and accommodation.

- **Organ harvesting**

Organ harvesting involves trafficking people in order to use their internal organs for transplant. The illegal trade is dominated by kidneys, which are in the greatest demand. These are the only major organs that can be wholly transplanted with relatively few risks to the life of the donor.

- **Child trafficking**

Child trafficking is child abuse. Children are recruited, moved or transported and then exploited, forced to work or sold.

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.

Many children are trafficked into the UK from abroad, but children can also be trafficked from one part of the UK to another. Traffickers use grooming techniques to gain the trust of a child, family or community. They may threaten families, but this isn't always the case. Traffickers may promise children education or persuade parents their child can have a better future in another place. Sometimes families will be asked for payment towards the 'service' a trafficker is providing – for example sorting out the child's documentation prior to travel or organising transportation. Traffickers make a profit from the money a child earns through exploitation, forced labour or crime. Often this is explained as a way for a child to pay off a debt they or their family 'owe' to the traffickers. Although these are methods used by traffickers, coercion, violence or threats do not need to be proven in cases of child trafficking - a child cannot legally consent so child trafficking only requires evidence of movement and exploitation.

Modern Slavery

Modern slavery is a crime and encompasses slavery, servitude, and force or compulsory labour and human trafficking. Victims can often face more than one type of abuse and slavery, for example, if they are sold to another trafficker and then forced into another form of exploitation.

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Modern slavery takes a number of forms such as:

- forced to work – through mental or physical threat.
- owned or controlled by an 'employer', usually through mental or physical abuse or the threat of abuse.
- dehumanised, treated as a commodity or bought and sold as 'property'.
- physically constrained or have restrictions placed on their freedom of movement.

Victims are entitled to help and protection from the UK Government. The National Referral Mechanism has been put in place to identify victims of trafficking and to refer them to organisations that will help and support. Potential victims of modern slavery are also entitled to care and support.

Since the 1 November 2015, specified public authorities have had a duty to notify the Home Office of any individual who they believe is a suspected victim of slavery or human trafficking. Whilst college does not have a public duty to notify the Home Office, it is still encouraged to put forward notifications where staff encounter a potential victim of modern slavery. The paperwork to complete will be dependent on the age and/or if the victim wants to remain anonymous.

If a member of staff is concerned that a student is subject to modern slavery they must follow the safeguarding procedures to report their concerns.

Hate & Mate Crime

Hate crime is the term used by criminal justice agencies like the police or the Crown Prosecution Service to describe an incident or crime against someone based on a part of their identity. There are five categories of 'identity' when a person is targeted because of a hostility or prejudice towards their:

- Disability
- Race or ethnicity
- Religion or belief (which includes non-belief)
- Sexual orientation
- Gender identity

Hate crime can be any criminal or non-criminal act such as graffiti, vandalism to a property, name calling, assault or online abuse using social media.

Mate crime is when a person is harmed or taken advantage of by someone they thought was their friend. Mate crime may include:

- Financial abuse
- Physical abuse
- Emotional abuse
- Sexual abuse

Examples of Mate Crime:

- Mate Crime does not start with bullying but it can become bullying.
- It starts with people saying they are your friend.
- Mate Crimes often happen in private and are not seen by others.
- Mate Crimes are Disability Hate Crimes and should be reported to the Police.

Honour Based Violence

Honour Based Violence (HBV) is a term used to describe violence committed within the context of the extended family which are motivated by a perceived need to restore standing within the community, which is presumed to

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have been lost through the behaviour of the victim. Most victims of HBV are women or girls, although men may also be at risk.

HBV is a form of domestic abuse which is perpetrated in the name of so called 'honour'. The honour code which it refers to is set at the discretion of male relatives and women who do not abide by the 'rules' are then punished for bringing shame on the family. Infringements may include a woman having a boyfriend; rejecting a forced marriage; pregnancy outside of marriage; interfaith relationships; seeking divorce, inappropriate dress or make-up and even kissing in a public place.

HBV can exist in any culture or community where males are in position to establish and enforce women's conduct, examples include: Turkish; Kurdish; Afghani; South Asian; African; Middle Eastern; South and Eastern European; Gypsy and the travelling community (this is not an exhaustive list).

Common triggers for HBV include:

- Refusing an arranged marriage
- Having a relationship outside the approved group
- Loss of virginity
- Pregnancy
- Spending time without the supervision of a family member
- Reporting domestic violence
- Attempting to divorce
- Pushing for custody of children after divorce
- Refusing to divorce when ordered to do so by family members

Honour based violence and abuse can take many forms, e.g. threatening behaviour, assault, rape, kidnap, abduction, forced abortion, threats to kill and false imprisonment committed due to so called 'honour'. Murders in the name of 'so-called' honour, (often called Honour killings) are murders in which predominantly women are killed for actual or perceived immoral behaviour which is deemed to have brought shame on the family.

Forced Marriage

A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.

The pressure put on people to marry against their will may be:

- physical – for example, threats, physical violence or sexual violence.
- emotional and psychological – for example, making someone feel like they are bringing 'shame' on their family.

Prevent

The Government's Counter Terrorism Strategy (CONTEST) is aimed at reducing the risk to the UK and its interests overseas from terrorism. CONTEST is made up of 4 elements, the 4 P's;

- **Pursue...**To stop terror attacks by investigation, detection and disruption
- **Prevent...**To stop people from becoming or supporting violent extremism
- **Protect...**To strengthen through borders, transport, utilities and infrastructure etc.
- **Prepare...**To mitigate an impact where an attack cannot be stopped

The **Prevent** element of the CONTEST strategy aims to stop people becoming terrorists or supporting terrorism.

The Prevent strategy:

- responds to the ideological challenge faced from terrorism and aspects of extremism, and the threat faced from those who promote these views
- provides practical help to prevent people from being drawn into terrorism and ensure they are given appropriate advice and support
- works with a wide range of sectors (including education, criminal justice, faith, charities, online and health) where there are risks of radicalisation that need to be dealt with

The strategy covers all forms of terrorism, including far right extremism and some aspects of non-violent extremism, which can create an atmosphere conducive to terrorism and can popularise views which terrorists exploit and lead to terrorist-related activity. However, prioritisation of work is done according to the risks faced.

The government has defined extremism in the *Prevent* strategy as: *“vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces”*.

British values are defined as *“democracy, the rule of law, individual liberty and mutual respect and tolerance for those with different faiths and beliefs”*, and the government expects educational institutions to encourage students to respect other people with particular regard to the protected characteristics set out in the Equality Act 2010. The expectation from government has now gone one step further as outlined in Section 21 of the Counter-Terrorism and Security Act 2015 (the Act) which places a duty on certain bodies (including Further & Higher Education establishments), listed in Schedule 3 to the Act, to have *“due regard to the need to prevent people from being drawn into terrorism”*.

A range of measures are used to challenge extremism in the UK including supporting people who are at risk of being drawn into terrorist activity through the **Channel** process, which involves several agencies working together to give individuals access to services such as health and education, specialist mentoring and diversionary activities.

Channel uses existing collaboration between local authorities, statutory partners (such as the education and health sectors, social services, children's and youth services and offender management services), the police and the local community to:

- identify individuals at risk of being drawn into terrorism.
- assess the nature and extent of that risk.
- develop the most appropriate support plan for the individuals concerned.

Channel is about safeguarding children and adults from being drawn into committing terrorist-related activity. It is about early intervention to protect and divert people away from the risk they face before criminality occurs. With the consent of the learner, College can refer the learner into the local Channel panel for support.

Radicalisation is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. There is no obvious profile of a person likely to become involved in extremism or a single indicator of when a person might move to adopt violence in support of extremist

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ideas. The process of radicalisation is different for every individual and can take place over an extended period or within a very short time frame. Given this, it is important that awareness, sensitivity and expertise are developed within all contexts to recognise signs and indications of radicalisation.

Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by many means. These can include family members or friends, direct contact with members groups and organisations or, increasingly, through the internet. This can put a young person at risk of being drawn into criminal activity and has the potential to cause significant harm. Potential diagnostic indicators identified in the Channel Guidance include:

- use of inappropriate language;
- possession of violent extremist literature;
- behavioural changes;
- the expression of extremist views;
- advocating violent actions and means;
- association with known extremists;
- Seeking to recruit others to an extremist ideology.

There isn't a definitive list of indicators which would show that someone is vulnerable to radicalisation to violent extremism. Rather, the risk of radicalisation is the product of a number of factors and identifying this risk requires that staff exercise their professional judgement, seeking further advice as necessary. Some learners may be at risk due to living with or being in direct contact with known extremists.

Further Information on Preventing Radicalisation

The Counter-Terrorism and Security Act, places a duty on specified authorities, including local authorities and childcare, education and other children's service providers, in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism ("the Prevent duty").

Local authorities must ensure they have a Channel Panel in place. The panel must include the local authority and chief officer of the local police, along with a range of other statutory and co-opted partners. Panels will assess the extent to which identified individuals are vulnerable to being drawn into terrorism, following a referral and where considered appropriate and necessary consent is obtained, arrange for support to be provided to those individuals. The Act requires partners of Channel Panels to cooperate with the panel in the carrying out of its functions including when an initial assessment is undertaken as part of the decision as to whether a referral is appropriate. Schools and colleges which are listed in the Act as partners of the panel.

The Role of Staff

The **role of College staff** is to understand what radicalisation means and why people may be vulnerable to it. Staff need to be aware of what the term "extremism" means and the relationship between extremism and terrorism. Staff should challenge extremist ideas. Any member of staff who has concerns about a learner should report these immediately using the 'Safeguarding Cause for Concern' form which is available on the Safeguarding Buzz page.

The College has in place a Prevent policy and related procedures including:

- **Room Hire**
- **External Speakers & Events**
- **Sub-Contractors & Contractors**

Staff should ensure that they are familiar with and working to these policies and procedures.

Please make sure you are familiar with the Run (if it is safe), Hide (if it is not safe to run) and Tell (call 999 when you are safe) campaign by watching the short film below;

https://www.youtube.com/watch?v=QUCW_mk35Xc

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Barnsley College Prevent Process – Learner

**Report to Safeguarding
Department Representatives**



**Report to Central
Safeguarding Team**

Barnsley College Prevent Process – Staff

**Report to Safeguarding
Department Representatives
or Head of Department**



**Report to Central
Safeguarding Team or
Designated Safeguarding
Lead (SMT)**

Barnsley College Prevent Process - Managers

**Report to Central Safeguarding
Team or Designated
Safeguarding Lead (SMT)**

Barnsley College Prevent Process – SMT & Governors

**Report to or Designated
Safeguarding Lead (SMT) or
Central Safeguarding Team**

Looked After Children & Care Leavers

Under the Children Act 1989, a child is looked after by a local authority if he or she is in their care or is provided with accommodation for more than 24 hours by the authority. They include the following:

- children who are accommodated by the local authority under a voluntary agreement with their parents (section 20);
- children who are the subject of a care order (section 31(1)) or interim care order (section 38); and
- children who are the subject of emergency orders for the protection of the child (section 44).

Further Education Colleges, alongside local authorities, have a duty under the Children Act 1989 to safeguard and promote the welfare of children (under 18 years old). This duty extends to promoting the educational achievement of children wherever they live or are educated, including a looked-after child.

In addition, the duty to promote the educational achievement of a looked-after child extends to looked-after young people aged 16 or 17 preparing to leave care. These are referred to in the Children Act 1989 as 'eligible children'. An 'eligible' child is a child who is looked-after, aged 16 or 17 and, has been looked after by a local authority for a period of 13 weeks or periods amounting in total to 13 weeks, which began after they reached 14 and ended after they reached 16.

Staff should be aware that these learners may need additional services, assistance, protection and consideration. **Please note:** this also includes previously looked after children.

The Safeguarding Review Officer (Steph Smith ext.168) in College is the single point of contact for coordinating support for these learners both internally and externally. The Central Safeguarding Team will hold a record of these learners including contact details of the learner's social worker, virtual school and carer; relevant contact details for previously looked after children; and, the details of the personal advisor and next of kin for care leavers.

For looked after learners, staff are expected to work alongside the Safeguarding Review Officer to attend Personal Education Plan meetings to support their education as well as support with the Looked After Child review meetings.

College will liaise as necessary with the social worker, personal adviser and/or next of kin regarding any issues of concern affecting the learner.

College has developed a 'Looked After Child' pathway to support the transition to College, ongoing monitoring and support and transition out of College into further/higher education, training or employment. The support and ongoing monitoring in College continues as the student prepares to leave care when they turn 18. Whilst other services and support may change, the College offer remains the same.

College will attend Personal Education Plan (PEP) meetings and Looked After Child (LAC) Review meetings, working alongside other agencies to ensure that the student receives all the support necessary to achieve academically. College staff are expected to engage in the PEP and LAC reviews, as appropriate, including timely responses to request for information to feed into these meetings.

College policy is not to exclude students who are looked after or care leavers but rather to work with relevant external agencies to a positive resolution for the student either in or out of College. Departments must alert the Safeguarding Review Officer (Steph Smith on ext.168), who acts as the designated point of contact in College for looked after students and care leavers, at the earliest opportunity where there may be concerns. This will allow an effective approach to a timely resolution. For students under the age of 18, an early PEP meeting will be called as the vehicle for discussion regarding any concerns. For students over the age of 18, a meeting will be called with relevant agencies working to support the student. The student will be involved throughout.

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14 – 16 Year Old Learners (Year 10 & 11 equivalent)

Some learners studying at College are aged between 14-16 years old and will be in the equivalent to Years 10 & 11 at secondary school. If these learners are on College's roll, then the normal College safeguarding policy and procedures apply to those learners. However, if those learners are still on school roll, but may be attending College through an arrangement with the school, the school has ultimate responsibility for safeguarding these learners. Therefore, any safeguarding concerns that arise through College should be reported into the designated member of school staff immediately. The school and College will then liaise regarding the most appropriate course of action in order to safeguard the learner. If the designated member of school staff can't be contacted, and the safeguarding concern is one that requires immediate action, College has a responsibility to act immediately to safeguard the learner and notify the designated member of school staff as soon as is practicably possible.

Elective Home Educated (EHE) 14-16 Year Olds Enrolled at College

College can enrol 14-16 year old learners who have been formerly elective home educated. As these learners are enrolled to College, College safeguarding procedures apply. In addition, the government has produced further guidance for any College that enrolls these learners which has been summarised below;

- Departments where these learners are based must follow the College's normal safeguarding policy and procedures should a safeguarding incident arise;
- Departments where these learners are based must ensure that these learners are looked after around College and appropriately supervised during break time and lunchtime;
- Departments where these learners are based must ensure that these learners are not educated in the same room, at the same time, as a learner aged 19 or over;
- Departments where these learners are based must liaise with parents/carers and the Education Welfare Officer regarding any issues of attendance. Absences must be followed up immediately to ensure the safety and wellbeing of the learner;
- Departments where these learners are based must ensure that in instances where a return home arrangement arises (for example, first aid incident, weather), this is achieved following normal College procedures and in liaison with the learner's parent/carer to ensure safe transportation and arrival home of the learner;
- These learners can only be enrolled with the consent of their parents and carers and prior confirmation of their EHE status which must be sought and confirmed through Susan Birchall;
- Jacquie Brown is the Senior Management Lead for the education and pastoral support of 14-16 provision and learners. If any staff has questions and/or concerns, Jacquie must be kept informed.

Early Help

Early help means providing support as soon as a problem emerges. College works within local multi-agency safeguarding arrangements where there are processes in place around the assessment of children who may benefit from early help. An early help assessment is undertaken by a lead professional who provides support to the child and family, act as an advocate on their behalf and coordinate the delivery of support services. College staff can act as lead professional and undertake an early help assessment and/or be asked to participate in such an assessment. Whatever the case, college staff need to work closely with other practitioners to decide whether the child and family would benefit from coordinated support from more than one agency

Although there is not the same early help offer in safeguarding adults, college staff will adopt the same principles and lead on or work with any early help type approach to working with adults.

In particular, staff should be aware of the potential need for early help for a learner who;

- Is disabled, has specific needs or has special educational needs;
- Is a young carer;
- Is showing signs of being drawn into anti-social behaviour or crime including involvement with gangs and association with organised crime groups;
- Is frequently going missing;
- Is at risk of modern slavery, trafficking or exploitation;
- Is at risk of being radicalised or exploited;
- Is in family circumstances presenting challenges for the learner, such as drugs and alcohol misuse, adult mental health issues and domestic abuse;
- Is misusing drugs or alcohol themselves;
- Has returned home to their family from care;
- Is a privately fostered child.

The Safeguarding Review Officer (Steph Smith ext.168) acts as the single point of contact internally and externally for learners that have and require an early help assessment (EHA) to be in place. Staff should liaise and work alongside the Safeguarding Review Officer to ensure an effective early help offer for learners, as appropriate.

Private Fostering

Private fostering is a private arrangement whereby a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or 'close relative' (the child's grandparent, brother, sister, aunt, uncle, step-parent, legal guardian or other person with parental responsibility). The arrangement is made between a parent and carer, for 28 days or more.

If staff become aware that a learner is being fostered privately, they must notify the Local Authority Fostering Team to ensure that the learner is being safeguarded and their well-being promoted. In addition, staff must notify the Central Safeguarding Team of any learner that is privately fostered.

Homestay

If staff are working with learners whereby a Homestay arrangement is being set up as a means of accommodation for the learner, staff **must ensure that they are familiar with and adhere to** this College policy and associated internal and external guidance as described in the policy.

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Whistleblowing

An agreed 'Whistleblowing' policy in relation to safeguarding is in place in order to support the college ethos where learners and staff can talk freely about concerns, poor or unsafe practice potential failings knowing they will be listened to and appropriate action taken. If staff feel they are unable to raise their issue internally or feel that their genuine concerns are not being addressed other whistleblowing channels are available. The NSPCC whistleblowing helpline is available as an alternative route as well as further guidance on whistleblowing for employees available on the www.gov.uk/whistleblowing website.

Criminal Convictions

If a learner declares a criminal conviction (this may be at application, enrolment or on programme stage), please contact the Central Safeguarding Team immediately. The learner will be required to complete and sign a criminal convictions template detailing their conviction, including the sentence/sanction received. The Central Safeguarding Team will then risk assess the conviction in partnership with the relevant department and external agencies as appropriate. A decision will be reached as to whether the learner will be offered a place at College or if the learner is already enrolled, if they can continue on a study programme, as appropriate.

If the learner isn't already enrolled onto a study programme, please **do not enrol** them until the risk assessment and decision has been communicated from the Central Safeguarding Team.

Use of Force to Control or Restraint

Staff **must ensure that they are familiar with and adhere to** this College policy and associated internal and external guidance as described in the policy.

A search can be conducted if a learner is suspected of being in possession of dangerous items, weapons, illegal substances, alcohol, indecent images/information, stolen property. However, the search must be conducted in line with College policy and the relevant government guidance.

Subcontracting

If departments contract their services to outside providers, staff **must ensure that they are familiar with and adhere to** the relevant College policies and procedures with regards to this including safeguarding related policies and procedures.

Sub-contractors include any employer working with a learner and must be given training on the college's Safeguarding Policy and Procedures. They must:

- Identify a key employee who will act as the main contact for the learner on experience or placement for the purpose of safeguarding;
- Instruct the key employee on the college's Safeguarding Policy and Procedures and identify who their key contact is within college for any safeguarding concerns.

Work Placements

If departments are organising work placements for learners, staff **must ensure that they are familiar with and adhere to** the relevant College policies and procedures with regards to this including safeguarding related policies and procedures.

Work placements include any employer working with a learner and must be given training on the college's Safeguarding Policy and Procedures. They must:

- Identify a key employee who will act as the main contact for the learner on experience or placement for the purpose of safeguarding;
- Instruct the key employee on the college's Safeguarding Policy and Procedures and identify who their key contact is within college for any safeguarding concerns.

Overnight Stays

If staff are working with learners in a situation where an overnight stay may be required (for example a WBL working away) staff **must ensure that they are familiar with and adhere to** this College policy and associated internal and external guidance.

Trips and Visits

If staff are organising any trip or visit, regardless of the duration, staff **must ensure that they are familiar with and adhere to** this College policy and associated internal and external guidance as described in the policy.