Safeguarding Policy for Children and Young People (2020)

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**Introduction**

The University of Bristol believes it is always unacceptable for any child or young person to experience abuse of any kind. This Safeguarding Policy recognises the responsibility of the Home Recruitment and Conversion (HRC) office to safeguard the welfare of all children and young people that they come into contact with. The adoption and implementation of this Safeguarding Policy seeks to inform staff and student workers on correct procedure to minimise risks and safeguard children and young people, whilst at the same time supporting staff and volunteers to protect themselves.

**Definitions**

The Children Act (1989) defines a 'child' as a person under the age of 18. For the purpose of this policy, a 'child' is under 16 and a 'young person' is 16 or over but under 18. Both children and young people are included in this policy. The HRC office will continue to act in accordance with this policy, even after a young person turns 18, providing they continue to participate in activities, such as outreach workshops, open days, residentials, etc., with the University and have not commenced Higher Education or full-time employment.

**Safeguarding** and promoting the welfare of Children and Young People is defined within the Working Together to Safeguard Children (2018) guidance as:

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

**Child Protection** is a part of safeguarding and refers to the specific activity that is undertaken to protect children and young people who are suffering, or who are at likely future risk of suffering, significant harm.

**Legislation**

The legislative bases for protecting children and young people are the Children Acts of 1989 and 2004, and the Working Together to Safeguard Children (2018). This guidance states that “safeguarding children and protecting them from harm is everyone’s responsibility. Everyone who comes into contact with children and families has a role to play.”

The guidance aims to help professionals understand what they need to do, and what they can expect of one another, to safeguard children. It emphasises that effective safeguarding systems are those where:

- the child’s needs are paramount, and the needs and wishes of each child, be they a baby or infant, or an older child, should be put first, so that every child receives the support they need before a problem escalates
- all professionals who come into contact with children and families are alert to their needs and any risks of harm that individual abusers, or potential abusers, may pose to children
• all professionals share appropriate information in a timely way and can discuss any concerns about an individual child with colleagues and Local Authority children’s social care
• high quality professionals can use their expert judgement to put the child’s needs at the heart of the safeguarding system so that the right solution can be found for each individual child.

**Contextual Safeguarding** refers to the extra-familial risk that may affect a child or young person outside the family home/environment (e.g. gangs, county lines, CSE, moving children and young people across borders).

The University of Bristol HRC office, in particular the Widening Participation (WP) team, recognises that it regularly encounters children and young people through its events and programmes. It aims to adopt the highest possible standards and take all reasonable steps to safeguard children and young people at all times.

It is impossible to ensure that a child or young person will never come to any harm. However, staff and volunteers who consistently implement this Safeguarding Policy for Children and Young People should be confident that they are taking all reasonable precautions to safeguard children and young people and know how to effectively respond to concerns if they do arise. This policy seeks to support the delivery of outreach activities and to assure staff and visitors that the University seeks to protect children and young people when they come into contact with University students and staff (whether acting in a paid or unpaid capacity).

This policy recognises the importance of preventative measures to safeguard children and young people and will consider safeguarding from the perspective of five key, interrelated areas:
• Recruitment and selection procedures
• Training
• Risk assessment
• Procedures for responding to suspicions and allegations concerning the safety or welfare of a child or young person
• Responding to a disclosure
• Roles and responsibilities within the HRC team.

The Designated Safeguarding Leads (DSLs) - WP Managers - are responsible for:
• ensuring that an appropriate Safeguarding Policy is in place and for ensuring that this policy is implemented within the HRC office as a whole
• coordinating, processing and keeping records of all incidents and all referrals to external agencies
• ensuring that all HRC employed staff have current DBS clearance and that temporary disclosure forms are utilised and stored securely
• all safeguarding concerns must be reported to the Designated Safeguarding Leads, who will take appropriate action.

The Designated Safeguarding Officer (DSO) - WP Officer - is responsible for:
• ensuring that an appropriate Safeguarding Policy is in place and is reviewed annually and meets current legislation and best practice
• ensuring training for HRC staff is suitable

The HRC Student Worker Coordinator is the DBS counter-signatory (with DSLs taking this responsibility if HRC SWC is absent) and is responsible for ensuring all student ambassadors and regular volunteers receive suitable training and are DBS checked.

All staff and volunteers are responsible for safeguarding children and young people. They should be diligent in immediately sharing suspicions or disclosures with the DSLs. Where the DSLs are unavailable, all concerns must be reported to the Deputy Director of HRC. All staff are responsible for accurately recording information.

In the instance that a concern is raised outside of normal working hours it is the duty of the staff member who is managing the project/event through which the concern is noted to record any pertinent details for review by the DSL and to then alert the DSL to this concern. If one of the DSLs will not be present, they can nominate the second DSL or the Deputy Director of HRC to assess whether the concern requires immediate attention. For example, if a concern is raised by a Student Ambassador during a debrief at 6pm, the member of staff running the event will notify a DSL with enough details of the incident as necessary. The DSL (or another nominated person if they are absent) will either ask for further details, suggest immediate action, or confirm that the incident can be acted on within the following 24 hours. It is the up to the member of staff leading any activity outside of usual working hours (typically 9-5, Monday to Friday) to coordinate with the DSL team and arrange for an “on-call” member of staff if required.

1. Recruitment and selection procedures
1.1 Where staff are likely to have regular contact with children and young people (which might include regular processing of information), their role will be subject to rigorous recruitment and selection procedures. The below procedures are applicable to WP staff as well as to student ambassadors and other paid/voluntary staff who sit within the HRC department and will have regular contact with children and young people.

In addition to the standard recruitment and selection procedures the WP Managers, Post-Graduate Recruitment Manager and Events Manager will ensure that HR obtain two written references for new staff joining the team to ascertain what contact the applicant has had with children or young people and any concerns that have arisen.

1.2 Once new staff begin working within the department, they will be required to read the HRC Safeguarding Policy and will not work on student-facing events independently, until their DBS (Disclosure & Barring Service) certificate can be produced.

1.3 New staff who are likely to have regular contact with children and young people will be required to complete an enhanced DBS check. This policy extends to interns who will have significant contact with students or their data. A DBS Counter Signatory will process a DBS application and the staff
member will be required to bring in their valid DBS certificate once it arrives and submit this to Human Resources in accordance with university policy. If a DBS certificate is not produced within the expected time period, the DBS Counter Signatory will track the application/process a new DBS application if appropriate. Receipt of an enhanced DBS certificate should be a condition of employment. Student Ambassadors and other temporary staff/volunteers will not be permitted to work on student-facing events without their DBS certificate having been completed and recorded.

1.4 The DBS Counter Signatory will process a new DBS certificate for all staff members at least every three years.

2. Training
2.1 All new staff should read the HRC office: Safeguarding Policy for Children and Young People.

2.2 The DSLs and DSO will coordinate staff training on safeguarding and child protection policies and procedures. All new staff will be required to undertake training appropriate to their role and should participate in child protection refresher training every 2 years.

2.3 The DSO and DSLs should participate in Child Protection training equivalent to Level 3 or above at least once every two years. In addition to this they may seek to attend additional, specific training programmes intended to improve knowledge and experience where appropriate.

2.4 Student Ambassadors and other temporary/ad-hoc staff will be required to attend Safeguarding training with a University of Bristol facilitator. Those staff supporting with residential programmes, mentoring schemes or other outreach projects in which they come into regular or sustained contact with children and families will be required to attend a more comprehensive training session which is tailored to the requirements of their role.

3. Risk Assessment
3.1 A designated member of staff should complete a risk assessment before any new or changed programme, event, visit or any other activity involving children or young people. A risk assessment should:
   • Incorporate the standard health and safety risk assessment
   • Identify the nature, length and frequency of the contact
   • Consider children or young people who are particularly at risk
   • Consider whether any children or young people have allergies, on medication, any disabilities (physical or mental), behavioural difficulties
   • Identify any potential areas for harm and detail action to prevent harm occurring, which might include consideration of alternative working practices
   • Be agreed with the appropriate line manager in advance of the event
• Staff should both actively share and request school/college info on students with disabilities, access needs and safeguarding information where relevant. This may also include providing safeguarding info of UoB to schools/colleges.

3.2 In preparing risk assessments staff should ensure that other agencies (where appropriate) have an adequate Safeguarding policy and that all adults working with children or young people have DBS clearance. Where adults do not have DBS clearance, all children and young people will be accompanied by staff or an ambassador holding enhanced DBS certificates at all times.

3.3 With regards to the staffing of residential summer schools, KBSP confirmed UoB has no statutory responsibility to have both male and female members of staff overnight on a residential. It is often in people’s practice, but it is not a pre-requisite, therefore there is no need to have any specific gender staff. Role models can be facilitated through mentors and academics.

4. Responding to suspicions or allegations
4.1 Concerns for the safety and wellbeing of children or young people could arise in a variety of ways and in a range of different settings. For example, a child/young person may report or display signs of abuse; someone close to the child/young person e.g. a peer may hint that the child/young person is at risk; an individual may witness or hear about abuse; the child/young person may be at risk of self-harm.

Where there is any concern of suspected abuse or neglect staff and volunteers must immediately inform the DSLs at the earliest opportunity. If they are not available, staff/volunteers must contact the Deputy Director of HRC. The DSLs will talk to appropriate persons and decide what (if any) follow up action to take, including whether to refer the concern to the Local Authority.

4.2 If the matter is not referred to the Local Authority, the DSLs will support the member of staff referring the concern with any follow up actions.

4.3 If a matter is deemed suitable for referral to the Local Authority this should be done immediately by telephone and followed in writing within 24 hours. This referral may require a written referral from the staff member present during the matter – this form should be submitted to the DSLs to forward to the Local Authority within 24 hours.

4.4 The DSLs will lead on follow up procedures for the matter. The staff/volunteer who made the initial referral should check with the DSLs that they have passed the referral form on to the LA.

4.5 When concerns are in relation to a child or young person who has not yet reached the age of 18, the concerns should be discussed with a parent/guardian and, where possible, their consent should be sought before making a referral to the Local Authority, unless this places a child or young person at increased risk of significant harm.

4.6 Whether a matter is referred or not, all information should be collated, and an accurate written record produced as soon as possible. This must be submitted to the DSLs via the online incident form
(only accessible by DSLs, DSO and Deputy Director of HRC); where possible, this should be done straight after the incident to ensuring recording in a timely manner, where this is not possible, recording should take place no later than 24 hours after the event/concern occurs. Further information in creating this record can be found under “Child Protection Records”.

When making a referral:
- Make a note of the reference number, if applicable.
- Be specific – can someone who doesn’t work in your team understand the language you have used? Have you explained your concerns clearly and provided evidence to support them?
- **Voice of the child/young person** is vital to any good referral.
- **Never** leave any section of the first response referral form.
An incident occurs which causes you to have concerns

Child / young person is in immediate danger CALL 999

Child protection concern – refer immediately to Designated Safeguarding Leads (WP Managers)

If DSL is unavailable, refer to Deputy Director of HRC

Welfare or safeguarding concern – refer to Designated Safeguarding Lead

Agree who will make the referral to First Response (and call the police on 101 if necessary)

DSL discuss with staff member making referral to agree actions

Concern meets thresholds - complete web-form referral to First Response.
Parental consent is required. Referrals to be sent to secretary’s office at UoB too

Concern requires early help. Refer to agencies e.g. school, counselling service, etc.

No further action required, log appropriately and monitor as necessary

Action is taken by appropriate staff and agencies

Participate in Child Protection Strategy as appropriate

- Written record, including details of follow up actions, is created within 24 hours. Submitted to Designated Safeguarding Lead and stored securely
- Information is shared across other organisations and with parents as considered appropriate
- DSL monitors the outcome and the situation and re-refers or escalate as appropriate. DSL must chase referrals if not kept informed – this is our responsibility
- Staff member who made the initial referral checks that DSL has completed actions and is satisfied with circumstances
4.7 **Referrals** should be made to LA children's social care for the area where the child is living or is found.
- If a young person is visiting The University of Bristol to participate in an outreach activity, such as a residential, a referral may need to be made to a LA other than Bristol.
- If the child is known to have an allocated social worker, the referral should be made to them or in their absence to the social worker's manager or a duty children's social worker. In all other circumstances, referrals should be made to the duty officer.
- The referrer should confirm verbal and telephone referrals in writing, within 48 hours.
- Local Authority children's social care should decide about the type of response that will be required to meet the needs of the child **within one working day** of receiving the referral. If this does not occur within three working days, the referrer (DSLs) should contact these services again and, if necessary, ask to speak to a line manager to establish progress.

**Future Quest procedures for responding to suspicions or allegations concerning the safety and welfare of a child or young person.**

As a part of the University of Bristol WP Team, Future Quest staff and ambassadors are subject to the same checks and procedures pertaining to safeguarding as the entirety of the WP team unless otherwise specified.

4.8 Relating specifically to 2.4: Future Quest ambassadors will attend training sessions incorporating safeguarding and child protection, which will be delivered collaboratively by representatives from The University of Bristol (UoB), The University of the West of England (UWE) and South Bristol Youth (SBY).

4.9 Where there is any concern of suspected abuse or neglect Future Quest volunteers and staff must immediately inform the appropriate contact.

- If an incident occurs on University of Bristol campus, Future Quest staff and ambassadors will inform the present member of UoB staff who will in turn contact the UoB DSLs.
- The person reporting the incident may also talk to an UWE member of staff, a school contact or a representative from SBY if this is appropriate within the context of the session.
- If an incident occurs on a site other than The University of Bristol, Future Quest staff and ambassadors will report the incident to the appropriate lead for the location e.g. UWE staff member if on site at UWE. In this instance, Future Quest ambassadors who are University of Bristol representatives will also report any incidents to the UoB staff representative in order to gain appropriate and ongoing support where necessary.

The UoB DSLs will liaise with the South Bristol Youth (SBY) Safeguarding Advisor who, as delivery partner within the Future Quest collaboration, will lead on the response to safeguarding concerns and will liaise with appropriate school safeguarding staff. Where the SBY Safeguarding Advisor is unavailable, the UoB DSLs will contact the SBY CEO and DSLs.

The SBY Safeguarding Advisor will follow necessary safeguarding processes following all and any reported incidents. They will at times share pertinent information with the UoB DSLs where this
information is paramount to the safety of the child or young person/people involved in or affected by the reported incident. This may at times include information relating to an incident which has happened whilst not on the University of Bristol campus if this information can help to keep a child/young person safe.

The UoB DSLs will create a secure record of the incident. They will collaborate with the SBY Safeguarding Advisor and will participate in resulting child protection strategies as appropriate.

**Future Quest ambassador**

An incident occurs whilst at the University of Bristol which causes you to have concerns

- Child / young person is in immediate danger
  - CALL 999

- Incident may also be referred to SBY, UWE or school staff members as appropriate

Referred immediately to UoB staff representative present at event

Referral to UoB Designated Safeguarding Lead

UoB DSL liaises with SBY Safeguarding Advisor to agree on referral process

- SBY Safeguarding Advisor leads on safeguarding actions, involving school safeguarding contact and relevant authorities as appropriate. Information is shared with UoB DSL as necessary

- Written record is created at latest within 24 hours. Submitted to Designated Safeguarding Lead and stored securely
- Information is shared across other organisations and with parents as considered appropriate
- It is expected that SBY Safeguarding Advisor will lead on follow-up processes and referrals, UoB DSL to be aware and communicate with SBY Safeguarding Advisor as appropriate to ensure effective and collaborative response

Action is taken by appropriate staff and agencies
5. Allegations against staff

5.1 There might be occasions where an allegation of abuse or misconduct is made against a member of the HRC Office, including staff and volunteers. It is essential to act quickly, fairly and professionally in all cases of suspected abuse by a member of staff. An allegation could claim that some form of abuse has taken place but could also relate to behaviour that does not meet professional standards. An allegation could be made by a child or young person, or by any other staff member or volunteer towards a colleague. All staff should feel safe to express any concerns regarding a member of staff, irrespective of their position.

5.2 Any accusation by a child or young person against a member of staff must be reported immediately to the DSLs or, if the circumstances make this impossible, Deputy Director of Home Recruitment. The DSLs will:

- Make sure the child/young person is safe and away from the alleged perpetrator
- Record who the child or young person has come into contact with, and in what context, since the allegation (where known)
- Gather as much information as possible, to be able to make a judgement about the seriousness of the concerns
- Consider whether the alleged perpetrator has access to children or young people elsewhere and if so, who needs to be informed
- Create an accurate written record of everything that has given the child/young person cause for concern. This must be done as soon as possible, no later than 24 hours after the allegation
- Store these records in a secure place, accessible only by designated persons
- Where appropriate the DSL will make a referral to the Bristol Safeguarding Children’s Board and follow any advice given. The DSL will contact the University Secretary and act in accordance with University policy
- Assist the Bristol Social Services team and police with their enquiries should a referral be advised by the Social Services team
- Follow up any external investigation with an internal review to ensure systems are monitored and any changes needed are actioned.

The DSLs will not:

- Make assumptions, offer alternative explanations to the child/young person or diminish the seriousness of the behaviour or alleged incident/s
- Keep the information to themselves or promise confidentiality

Whistleblowing advice line: The NSPCC offers free, impartial advice and support to professionals with concerns about how child protection issues are being handled in their own or another organisation. You can contact the Whistleblowing Advice Line via 0800 028 0285 or through emailing help@nspcc.org.uk

6. Responding to a disclosure

6.1 If a child/young person discloses information about abuse to a member of staff, it may be done obliquely rather than directly and be limited in detail. A child/young person who has suffered from
abuse is likely to be under severe emotional stress and the member of staff to whom the disclosure is made will need to display tact and sensitivity in responding. The member of staff to whom the disclosure is made must reassure the child/young person that they have done the right thing in talking to them. It is very important not to break the child’s trust and therefore you must explain the potential need to inform other professionals in a sensitive way.

6.2 Whenever possible, **do not move the child/young person.** They have chosen this moment to make a disclosure and it should remain their choice where/to whom they talk.

6.3 **Do not promise to keep a secret.** It may be important that you pass on the information that the child tells you in order to keep the child, or another person, safe. If the child asks you to keep a secret, explain that you cannot but that you will only talk about it to a specific person if you are concerned. For example, “I cannot keep a secret if anything you tell me makes me worried your safety, or the safety of anyone else. However, I won’t talk about anything you tell me to lots of people. I will talk to Person X (name the DSLs) because they are in charge of helping people stay safe”. If the child asks whether the DSL will tell other people, explain that they will decide who to talk to depending on what the child tells them – if asked it must be clear that the DSL may choose to tell the child’s parents/guardians/the police/social services.

6.4 **Give the child/young person your full attention** to demonstrate that they are being heard and taken seriously.

6.5 Show **care and concern** but try to remain neutral and not demonstrate emotions such as shock or revulsion – these could be interpreted by the child/young person as your reaction to them rather than to the incident they are talking about.

6.7 **Avoid asking probing questions.** Say as little as possible and refrain from rephrasing the child/young person’s statement. If anything is not clear, ask for clarification: “I’m hearing that you said X, is this correct?”.

6.8 **Do not ask for more information** than the child/young person willingly discloses. This may make them feel uncomfortable, and may alter their original statement, even unintentionally. Even asking “what happened next?” implies that something else happened, this may/may not be the case and can lead to a distorted version of events. Instead consider asking an open-ended question, such as “is there anything else you would like to say at this moment?”.

5.7 Once the child/young person finishes speaking, **reassure them** they have done the right thing in talking to you. However, do not tell them that everything will be alright and do not make promises that you cannot keep.

6.9 **Explain to them what will happen next** e.g. that you are going to talk to Person X (DSL). Ensure the child/young person is comfortable waiting/moving locations at this stage.
6.10 **Speak to the DSL** as quickly as possible. They will advise the next steps to take. As far as possible these actions will be decided *with* the child/young person instead of *for* the child/young person. Respond accordingly.

6.11 **Make a careful record** of the child/young person’s disclosure using their own words wherever possible. This should be written as soon as is practical following the disclosure. Do not speculate or accuse anybody within this testimony, do not offer opinion, state only what occurred during the disclosure. Date, time and sign the record. This record could be used in any subsequent legal proceedings.

6.12 **Child Protection Records**
In order to promote a child or young person’s welfare it is imperative that any concerns around the child are clearly documented and, where appropriate, passed on to other professionals with a duty of care to the child. Well-kept records are essential to good safeguarding and child protection practice. The DSLs is responsible for such records and, ultimately, the child protection/safeguarding file.

6.13 A child protection record should begin with the date and time as well as the name of the person producing the record.

6.14 This record should be factual, not opinion based. It should centre around the events of the incident/observation/disclosure and should include basic facts, as well as the chronology of an event.

6.15 A child protection record should refer to all peoples using their full name. Where appropriate it should also include a brief description of each person’s role/how they came to be associated with an individual/involved in the proceedings. Where appropriate a child protection record may include background information, providing this is factual and pertinent to the record.

6.16 Further records may be required to comprehensively list details of referrals and outcomes.

6.17 Electronic records must be password protected with access strictly controlled in the same way as paper records. They should be in the same format as paper records (i.e. with well-maintained chronologies etc.) so that they are up to date if/when printed, if necessary, e.g. for court.

All incidents must be logged on the Safeguarding Concerns Microsoft Form, with a follow up email to the DSL. This is a secure form which can be accessed here.

6.18 It is the responsibility of the DSLs to read and check written records and to mark a record “closed” when appropriate to do so. This should only happen once the DSL is confident that no further action is required.
6.19 A clear statement about the process of transferring information should be included in all WP Project Codes of Conduct. By stating that you have a duty of care to share information, a child/young person as well as their parent/guardian should understand that this is your practice.

7. Identifying signs of abuse and safeguarding concern

The following definitions are based on those identified in *Working Together to Safeguard Children* and *Keeping Children Safe in Education* according to the Keeping Bristol Safe Partnership Procedures Manual.¹

7.1 Abuse

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or another child or children.

7.2 Physical Abuse

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

A child or young person may suffer physical abuse from their parent/guardian or another adult, or from a peer. Physical harm can also be self-inflicted including through cutting, burning, scratching and hair-pulling.

It can be hard to recognise the signs of self-harm in children and teenagers, but it's important to trust your instincts if you’re worried something’s wrong. Signs to look out for can include:

- covering up, for example by wearing long sleeves a lot of the time, especially in summer
- unexplained bruises, cuts, burns or bite-marks on their body
- blood stains on clothing, or finding tissues with blood in their room
- becoming withdrawn and spending a lot of time alone in their room
- avoiding friends and family and being at home
- feeling down, low self-esteem or blaming themselves for things
- outbursts of anger, or risky behaviour like drinking or taking drugs²

7.3 Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child or young person such as to cause severe and persistent effects on the child's emotional development, and may involve:

- Conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person
- Imposing age or developmentally inappropriate expectations on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and

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¹ [http://www.proceduresonline.com/swcpp/bristol/p_respond_abuse_neg.html#def_ch_abuse](http://www.proceduresonline.com/swcpp/bristol/p_respond_abuse_neg.html#def_ch_abuse)

limitation of exploration and learning, or preventing the child participating in normal social interaction

• Seeing or hearing the ill-treatment of another e.g. where there is domestic violence and abuse
• Serious bullying, causing children frequently to feel frightened or in danger
• Exploiting and corrupting children

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

7.4 Sexual Abuse
Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

Sexual abuse includes non-contact activities, such as involving children in looking at pornographic materials, including online and with mobile phones; producing pornographic materials; encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children/young people.

In addition; Sexual abuse includes abuse of children through sexual exploitation which 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.

• A child under the age of 13 is not legally capable of consenting to sex (it is statutory rape) or any other type of sexual touching
• Sexual activity with a child under 16 is also an offence
• It is an offence for a person to have a sexual relationship with a 16- or 17-year-old if they hold a position of trust or authority in relation to them
• Where sexual activity with a 16- or 17-year-old does not result in an offence being committed, it may still result in harm, or the likelihood of harm being suffered
• Non-consensual sex is rape whatever the age of the victim; and
  o If the victim is incapacitated through drink or drugs, or the victim or their family has been subject to violence or the threat of it, they cannot be considered to have given true consent; therefore, offences may have been committed
• Child sexual exploitation is therefore potentially a child protection issue for all children under the age of 18 years and not just those in a specific age group
7.5 Neglect

Neglect is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development.

Neglect may involve a parent/guardian failing to:

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

It should also be noted that the age group of 16- and 17-year olds have been found in recent studies to be increasingly affected by domestic violence in their peer relationships.

It should therefore be considered in responding to concerns that the Home Office definition of domestic violence and abuse (2013) is as follows: Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

7.6 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 the means needed for independence, resistance and escape and regulating their everyday behaviour.

7.7 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.

7.8 In addition, Working Together to Safeguard Children includes the concept of Contextual Safeguarding which recognises that, as well as threats to the welfare of children from within their families, children may be vulnerable to abuse or exploitation from outside their families. These extra-familial threats might arise at school and other educational establishments, from within peer groups, or more widely from within the wider community and/or online. These threats can take a variety of different forms and children can be vulnerable to multiple threats, including exploitation by criminal gangs and organised crime groups such as county lines; trafficking, online abuse; sexual exploitation and the influences of extremism leading to radicalisation.

8. Safeguarding Adolescents

8.1 The World Health Organization (WHO) defines adolescents as those people between 10 and 19 years of age. The majority of adolescents are, therefore, included in the definition of “child”, adopted by the Children Act (1989).
However, adolescents need explicit attention: adolescents are not simply big children or small adults. Unique developmental processes take place during this period that may need to be taken into consideration in how we work with them.

8.2 Some adolescents are particularly vulnerable and the environments in which they live and learn can affect and undermine their development. Adolescent development has health implications throughout life and adolescence is a time where the brain forms new, life-long habits.

8.3 There are differences in terms of the risks that adolescents face regarding child protection, and in how they respond to attempts to safeguard them. Some of the types of abuse that are more likely to occur during adolescence include:

- Child Sexual Exploitation (by peers, individuals, groups or online)
- Gang or community violence
- Interfamilial abuse (from parent/carer or between siblings)
- Domestic abuse from intimate partner
- Neglect – abandonment, excessive caring responsibilities, rejection by carers, over restrictive parenting
- Emotional abuse – from family members, peers, through living with domestic abuse
- Homelessness
- Self-harm
- Drug/Alcohol misuse
- Extremism

In adolescence there can also be safeguarding concerns regarding young people who harm other young people and there is a need to sensitively balance the abuser’s vulnerabilities whilst also managing risk to the victim.

8.4 Safeguarding adolescents can be a challenge when considering the issue of consent, particularly when the age at which young people are considered responsible for their actions varies between agencies. A non-exhaustive list of consensual ages is as follows:

- The age of criminal responsibility is 10
- The age a person can consent to sex is 16
- The age a person is deemed an adult by the NHS (and therefore regarded as able to make an informed decision about treatment regarding their health) is 16
- The age a person can send a naked image of them self via text message/social media/email is 18. (Younger than this, even if sent to another young person, counts as an offence of distributing an indecent image of a child and is something you could receive a police caution for. You could even end up on the sex offenders register.)

These ages can result in confusion regarding whether a young person has the capacity to give consent. Moreover, their perception of their ability to competently consent may differ to the legal reality.
When there are clear safeguarding concerns then any person under the age of 18 will be subject to child protection legislation and staff must act appropriately within guidelines. When there are not clear safeguarding concerns then staff should gain the young person’s perspective and, where possible, their participation when identifying actions following an observation or disclosure.

9. HRC Code of Practice
The following code of practice applies to all University staff and students working with children, young people or adults in a vulnerable situation, whether acting in a paid or unpaid capacity:

• Avoid unnecessary physical contact.
• Avoid taking members of vulnerable groups alone in a vehicle on journeys, however short.
• Unless circumstances make it impossible to comply, do not take members of vulnerable groups to the toilet unless either (a) another adult is present or (b) another adult is aware (this may include a parent or group leader).
• If you find you are in a situation where you are alone with a member of a vulnerable group wherever practicable make sure that others can clearly observe you or that there is at least CCTV provision.
• Avoid close personal relationships with members of vulnerable groups in relation to whom you are in a position of trust.
• Do not make suggestive or inappropriate remarks to or about members of vulnerable groups, even in jest, as this could be misinterpreted.
• At no point should children/young people who attend our events be added or linked with on social media (neither should requests from them be accepted). Photos or videos of students (who have given photo permission) should not be shared on personal social media, stored on personal devices, or shared with anyone outside of the organisation.
• If a member of a vulnerable group accuses a student or member of staff of abuse or inappropriate behaviour, you should report this immediately to the relevant person.
• The duty to report applies equally to complaints or accusations of historic, and not just recent, abuse/inappropriate behaviour.
• If you are the recipient of any complaint or accusation from a member of a vulnerable group, it is important to listen without making or implying any judgement as to the truth of the complaint or accusation.
• If a member of a vulnerable group makes a complaint, or if there are other reasons for suspecting abuse, you should not attempt to investigate this yourself, but should report your concerns to the designated individual appointed in the HRC Safeguarding Policy.
• Participate in the training available to you to support you in your work with vulnerable groups.
• Remember that those who abuse members of vulnerable groups can be of any age (even other members of vulnerable groups), gender, ethnic background or class, and it is important not to allow personal preconceptions about people to prevent appropriate action taking place.
• Good practice includes valuing and respecting members of vulnerable groups as individuals, and the adult modelling of appropriate conduct – which would exclude bullying, aggressive behaviour and discrimination in any form.
• Those dealing with any allegations of abuse or misconduct should adhere to the principles set out in the policy. Any information received should be acted upon sensitively, effectively and
efficiently. Wherever possible, those making allegations should be given information about the outcome.

- Although allegations should be reported only on a “need to know” basis, staff and students making allegations need not be concerned that they will be breaching confidentiality or the Data Protection Act, as complying with the policy overrides such obligations. If the person making the allegation feels they need counselling or other appropriate support from the University, they are encouraged to seek it.
- Ensure that you comply with appropriate licensing laws.

10. Monitoring and review
The University of Bristol is committed to reviewing policies and practices annually.

Date of Policy: 06/03/2020
Date of scheduled policy review: 01/03/2021

11. Contact details

**UoB HRC Designated Safeguarding team:**
Designated Safeguarding Leads: Sarah-Jane Kinley (+447970316176) & Laura Anders (+447970669059)
Deputy Director of HRC: Doug Jennings (+447739047995)
Designated Safeguarding Officer: Katie Whalley (+447795308088)

Future Quest Safeguarding and H&S Advisor – Lucy Wyatt: 07900 474 038
Future Quest DSLs – Camilla Chandler: 07507 846 391

**Keeping Bristol Safe Partnership – First Response**
If you’re concerned that a child (under 18) is at risk of being abused or neglected contact the First Response Team on 0117 903 6444.

Outside of working hours call the Emergency Duty Team on 01454 615 165.

First Response will only receive information regarding children based within the Bristol local authority area.

**Other useful contacts:**
NSPCC 24-hour Helpline: 0800 800 5000 (free from a landline)
Police: 101 (non-emergency calls)

- South West Child Protection Procedures www.swcpp.org.uk
- Children’s Social Work Units: contact numbers for all 27 units across the city can be found at: https://www.bristol.gov.uk/social-care-health/social-work-contact-details-children-and-young-people
12. Bristol Continuum of needs – thresholds
(N.B., we apply Bristol’s policies, despite working with students from across the country)

13. Assessment Framework

15. Training & resources

- Bristol Signs of Safety forms: https://www.bristol.gov.uk/resources-professionals/signs-safety-and-childrens-social-work-bristol
- KBSP Training - https://bristolsafeguarding.org/children-home/training/