WINGS SOUTH WEST
SAFEGUARDING POLICY

For display on notice board

Name of Charity **WINGS SOUTH WEST**

The following policy was reviewed and any changes agreed at the Trustees Meeting in September 2026.

- We are committed to supporting the children, young people, adults at risk and parents/ carers we work with
- As leaders of Wings South West we are committed to the nurturing, protection and safeguarding of all, especially children, young people and adults at risk
- We recognise that safeguarding is everybody's responsibility
- We are committed to following the agreed procedures and following statutory and specialist guidelines including Keeping Children Safe In Education (2026)
- We formally review this policy every year, with interim amendments being approved at Trustees meetings
- We recognise our moral and statutory responsibility to safeguard and promote the welfare of all learners and service users and expect all staff, trustees and volunteers to share this commitment.

A copy of the full policy can be seen in the offices and online.

Signed:

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CEO

Date 28/9/26 Review Date: September 2027

WINGS SOUTH WEST
SAFEGUARDING POLICY

LIST OF CONTENTS

Introduction, Key Personnel & Abbreviations 3-4
Policy Statement 5-6
Policy Aims & Values 6
Responsibilities 7
Recognising & responding to Safeguarding concerns 8-11
Allegations & Whistleblowing 11-12
Online Safety 13
Confidentiality, sharing information & GDPR 13

Appendices

A. Categories of abuse 14-16
B. Definitions of adults at risk 17
C. Radicalisation and Extremism 18-19
D. How to respond 20
E. Additional advice for staff 21
F. DBS checks for Staff & Volunteers 22
G. Advice for working with children & adults at risk 23
H. Transporting Children & adults at risk 24
I. Guidelines for Working with Disruptive Service Users 25
J. Guidelines for one-to-one working 26
K. Home visit process 27
L. Safeguarding arrangement for hiring Wings premises 28
M. Child-on-child abuse 29-31
N. Guidance for Workers working with Service Users who self-harm 32-33
O. Children's Front Door 34

Forms **Note:** ***Forms are not included in online version of this policy but are available on request.***

1 Record of Concerns, Allegations or Suspicions of Abuse
2 Designated Safeguarding Lead or Deputy Action Report
3 Self Declaration Form

This Policy should be read in conjunction with the following Wings policies:
Internet Safety Policy
Whistleblowing Policy
Appointment of Workers Policy and Code of Conduct
Appointment of Volunteers Policy and Code of Conduct
Trustee's Code of Conduct
Confidentiality Policy
Keeping Children Safe in Education 2026
Prevent Duty Policy

WINGS SOUTH WEST SAFEGUARDING, CHILD AND ADULTS AT RISK PROTECTION POLICY

INTRODUCTION

Wings South West Details

Name of the charity: **Wings South West (hereafter, "Wings")**

Locations: Wings Hall, Lower Meddon Street, Bideford, Devon. EX39 2BJ and Lendon Barn, Abbotsham, Bideford, Devon. EX39 5BW

Denominational (or other) details: Wings is a non-denominational organisation seeking to promote partnership between Christian groups and others.

Aim

Wings South West aims to give children and adults at risk a future and a hope by encouraging positive relationships and offering creative learning opportunities that help develop skills, self-esteem and confidence.

Key Personnel

Role	Name	Email	Telephone
Designated Safeguarding Lead (DSL) (trained to level 3)	Andy Best	andy@wingscharity.com	01237 471471
Deputy DSL (trained to level 3)	Stephanie Fry and Steph Rogers	steph@wingscharity.com steph.rogers@wingscharity.com	01237 471471
CEO	Paul Bowser	pbowser@btinternet.com	07736871000
Chair of Trustees	Susan Ley	susanjley@aol.com	
Safeguarding Governor/Trustee	Anne Bowser	abowser@btinternet.com	

ABBREVIATIONS AND ORGANISATIONS

DSCP	Devon Safeguarding Children Partnership (Devon SCP)	www.devonscp.org.uk
Representatives from Local Authorities, Police, Health, Education, Voluntary Sector coordinating and ensuring effectiveness of safeguarding in Devon.		

DSAB	Devon Safeguarding Adults Board	www.devonsafeguardingadultspartnership.org.uk Emergency Duty Service 0345 600 0388.
Representatives from Local Authorities, Police, Health, Education, Social Services, CQC coordinating and ensuring effectiveness of safeguarding adults in Devon.		

LADO	Local Authority Designated Officer	01392 384 964 www.devonscp.org.uk/policies-and-procedures/lado-service
Provides advice and support to employers and Voluntary Organisations with Child Protection concerns about a member of staff or volunteer.		

Early Help		0345 155 1071 www.devonscp.org.uk/early-help/
Wide ranging multi agency strategy concerned with both: • Help in critical early years • Early intervention in difficulties experiences through a child's life		

MASH	Multi Agency Safeguarding Hub	0345 155 1071 www.devonscp.org.uk/make-a-request-for-support/ 0845 600 0388 (out of hours)
Professionals from police, probation, health, education and social care etc share information to determine the best intervention when there is any child protection query or referral. The DSL/DDSL will use the Devon continuum of need tool to determine whether to contact MASH or early Help depending on the Level of concern.		

Wings South West Safeguarding Policy Statement

Wings South West recognise our moral and statutory responsibility to safeguard and promote the welfare of all service users. Staff and volunteers will, at all times show respect and understanding for the safety and welfare of our service users and conduct themselves in a way that reflects the principles of the organisation. We recognise that all children and adults at risk, regardless of age, disability, SEND, gender, race, religion or belief, sex, gender reassignment, marital status or sexual orientation have an equal right to protection from all types of harm or abuse. We are committed to providing a safe and welcoming environment where all service users are respected and valued. We are alert to the signs of abuse, neglect and extremism and follow our procedures to ensure that all receive effective support, protection, and justice. We listen to our service users and take seriously what they tell us, they are aware of the adults they can talk to if they have a concern. When there are concerns for a service user's welfare, we may need to share information and work in partnership with other agencies. We will ensure concerns are discussed with parents/carers first unless we have reason to believe that by doing so would be contrary to the child or adult's welfare. This Child Protection and Safeguarding policy underpins and guides our safeguarding procedures and protocols.

Wings South West takes seriously its responsibility in relation to the Children's Wellbeing and Schools Bill 2024, and statutory guidance Working Together to Safeguard Children 2026 and particularly Keeping Children Safe in Education 2026, Wings is fully committed to safeguarding the welfare of all children, young people and adults at risk, by working positively to protect them from neglect, physical, sexual or emotional harm.

Terminology
Safeguarding and promoting the welfare of children is defined as:

- providing help and support to meet the needs of children as soon as problems emerge.
- protecting children from maltreatment, whether that is within or outside the home, including online.
- preventing impairment of children's mental and physical health or development.
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children.
- taking action to enable all children to have the best outcomes

Child protection is part of safeguarding and promoting the welfare of children and is defined for the purpose of this guidance as activity that is undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including online.

Staff refers to all those working for or on behalf of the charity, full or part time, temporary or permanent, in either a paid or voluntary capacity.

Child includes everyone under the age of 18 or 25 if a care leaver.

Parents refers to birth parents and other adults who are in a parenting role, for example step-parents, foster carers, adoptive parents, and LA corporate parents.

For adults at risk safeguarding means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse or neglect, while at the same time making sure that the adult's wellbeing is promoted, including, where appropriate, having regard to their views, wishes, feelings and belief in deciding on any action. This must recognise that an adult at risk sometimes has complex interpersonal relationships and may be ambivalent, unclear, and unrealistic about their personal circumstances.

Policy Aims and Values

This policy aims to:

- ensure all staff understand their responsibility to safeguard children and adults at risk
- provide clear guidance on how to recognise and respond to concerns
- ensure children and adults feel safe, valued, respected and listened to
- recognise that abuse can occur in families, communities and between children
- ensure concerns are identified, recorded and acted upon promptly
- promote effective communication within Wings and with external agencies
- support early identification and intervention to prevent escalation
- ensure safe recruitment practices are followed
- set clear expectations for professional conduct and safe working practice

Wings South West will support all service users by:

- Maintain a culture of care where all staff and volunteers recognise their responsibilities in keeping children and adults at risk safe.
- Encouraging self-esteem and self-assertiveness, through the curriculum and activities as well as our relationships, whilst not condoning aggression or bullying (incl. cyber bullying).
- Promoting a caring, safe, and positive environment within Wings South West and providing service users with good lines of communication with trusted adults, supportive friends and an ethos of protection.
- Offering details of helplines, counselling, or other avenues of external support.
- Liaising and working together with all other settings, support services and those agencies involved in the safeguarding of children and adults at risk.
- Notifying appropriate bodies as needed
- Accessing and utilising the necessary resources, guidance and toolkits to support the identification of learners and service users requiring mental health support, support services and assessments.
- Ensuring that all Trustees, staff and volunteers (who work directly with children or adults at risk) undergo an enhanced DBS (Disclosure Barring Services) including barred lists checks and, for staff at least, to be on the DBS Update Service.
- Risk assessing all activities organised by Wings South West and ensuring all groups hiring the buildings follow the appropriate risk assessments.
- Having in place appropriate filtering and monitoring at the barn so as to be aware of learners internet usage when using Wings computers. Service users at the hall must agree to follow Wings internet usage expectations when accessing the internet from personal devices.
- Recognising that the children and adults who we work with may be more vulnerable to abuse, neglect and contextual safeguarding concerns and that additional barriers may exist when recognising abuse.

Responsibilities

The Trustees hold strategic responsibility for safeguarding. They will ensure that:

- Safeguarding arrangements are effective, compliant and regularly reviewed
- There is a whole charity approach to safeguarding
- Appropriate policies (e.g. safeguarding, behaviour, staff conduct) are in place
- A Designated Safeguarding Lead (DSL) is appointed with sufficient time and resources
- Safer recruitment procedures are followed, including DBS checks and Single Central Record
- Staff receive regular safeguarding training and updates
- Service users are taught about safeguarding, including online safety
- Appropriate filtering and monitoring systems are in place
- Allegations against staff are managed in line with statutory procedures (including LADO)

They will also provide challenge and oversight and ensure safeguarding is a priority across the charity

The Designated Safeguarding Lead (DSL) will:

- Take lead responsibility for Safeguarding and Child Protection, including online safety.
- Manage referrals – to Children's Social Care, DBS, the Police, Channel (Prevent) as needed.
- Ensure and monitor that any visitors during charity hours sign the visitors book and are accompanied whilst on site
- Work with others – be a point of contact for parents and/or carers and the trustees with regard to safeguarding
- Raise Safeguarding and Child Protection Awareness
- Update training, knowledge and skills required to carry out the role of DSL
- Provide support to staff
- Be responsible for holding and sharing information
- Oversee and act upon filtering and monitoring reports and checks to these systems

The Deputy Designated Safeguarding Lead (DDSL) is trained to the same standard as the Designated Safeguarding Lead and, when appropriate, carries out those functions necessary to ensure the ongoing safety and protection of service users. In the event of the long-term absence of the DSL the deputy will assume all the functions above. Whilst the activities of the DSL can be delegated to appropriately trained deputies, the ultimate lead responsibility for child protection, as set out above, remains with the Designated Safeguarding Lead, this lead responsibility should not be delegated. The DSL will be available during the hours the charity operates.

All staff shall:

- Maintain an attitude of 'it could happen here' where safeguarding is concerned.
- Read and understand the responsibilities within KCSIE Part 1 and Annex A
- Identify concerns early, provide help for and promote the welfare of service users and prevent concerns from escalating.
- Know what to do if a learner or service user makes a disclosure.
- Reassure victims that they are being taken seriously
- Raise any concerns for a service user by following the charity's safeguarding policies and procedures
- Be aware of local authority referral processes and supporting social workers and other agencies following any referral.
- Be aware of systems within Wings South West which support safeguarding e.g. safeguarding policy, prevent policy behaviour policy, code of conduct, online filtering and monitoring
- Attend regular Safeguarding and Child Protection training.

Recognising and Responding to Safeguarding Concerns

Recognising:

Any child, in any family, in any setting, could become a victim of abuse. Staff should always maintain an attitude of **"It could happen here".** We also recognise that abuse, neglect, exploitation and safeguarding issues are complex and are rarely standalone events that can be covered by one definition or label. Staff are aware that in most cases multiple issues will overlap one another.

- Abuse, neglect and exploitation are forms of maltreatment of a child or an adult at risk. Somebody may abuse or neglect a child or an adult at risk by inflicting harm or by failing to act to prevent harm. Children and adults at risk may be abused in the 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. They may be abused by an adult or adults or by a child or children.
- Abuse, neglect and exploitation may also take place outside of the home, contextual safeguarding, and this may include (but not limited to), sexual exploitation, criminal exploitation, serious violence, radicalisation.
- Staff are aware that behaviours linked to drug taking, alcohol abuse, missing education and sexting put children and adults at risk in danger and that safeguarding issues can manifest themselves via child-on-child abuse, this will be taken seriously and not dismissed as 'banter'.
- There will be occasions when staff may suspect that a child or an adult at risk may be at risk but have no 'real' evidence. The child's or adult's behaviour may have changed, their artwork could be bizarre, and they may write stories or poetry that reveal confusion or distress, or physical or inconclusive signs may have been noticed.
- The signs may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill, or an accident has occurred. However, they may also indicate a child or an adult at risk is being abused or is in need of safeguarding.
- In these circumstances staff will be professionally curious, try to give the child or adult at risk the opportunity to talk. It is fine for staff to ask them if they are OK or if they can help in any way.

Responding:

- Following an initial conversation with the child or adult at risk, if the member of staff remains concerned, they should discuss their concerns with the DSL and put them in writing. Records should include:
    - a clear and comprehensive summary of the concern.
    - details of how the concern was followed up and resolved.
    - a note of any action taken, decisions reached and the outcome.

- All concerns, however small, must be recorded and shared with the DSL or DDSL as this information could provide the 'missing' piece of the bigger picture of the lived experience for the child or an adult at risk.
- All records from safeguarding concerns will be held in a secure online storage that only Safeguarding Leads have access to. Once referred, the DDSL/DSL will pass on to sending school/DCC contact as appropriate alongside any additional actions taken.
- Flow chart A outlines more detail on the procedure for reference and guidance will be provided for all staff and volunteers at induction.

FLOW CHART A

1. Offer reassurance, listen and take seriously what is being said. Never promise to keep secrets or be persuaded by the child, young person or their family not to take action.

2. Recognise that it is not your job to investigate, verify what is being said or examine the individual disclosing; this is the statutory responsibility of the child protection services and/or the Police. However, it is important to ascertain relevant information.

3. Explain the process to the individual; that you will need to pass this information on, to whom, the reasons why and possible actions.

4. Any concerns will be recorded , including the child's voice, body map (if necessary) and other relevant information in line with our recording procedure. Concerns may also be shared with the DSL/DDSL verbally, these conversations will then be recorded in writing

If a child or an adult at risk discloses to a member of staff:

- We recognise that it takes a lot of courage for them to disclose they are being abused. They may feel ashamed, guilty or scared, their abuser may have threatened that something will happen if they tell, they may have lost all trust in adults or believe that what has happened is their fault. Sometimes they may not be aware that what is happening is abuse.
- A child or an adult at risk who makes a disclosure may have to tell their story on a number of subsequent occasions to the police and/or social workers. Therefore, it is vital that their first experience of talking to a trusted adult is a positive one.
- During their conversation staff will:
  - Listen to what the child or adult at risk has to say and allow them to speak freely.
  - Remain calm and not overact or act shocked or disgusted – the individual may stop talking if they feel they are upsetting the listener.
  - Reassure the individual that it is not their fault and that they have done the right thing in telling someone.
  - Not be afraid of silences – staff must remember how difficult it is for the individual and allow them time to talk.
  - Take what the individual is disclosing seriously.
  - Ask open questions and avoid asking leading questions.
  - Avoid jumping to conclusions, speculation or making accusations.
  - Not automatically offer any physical touch as comfort as this may not be comforting to someone who has experienced abuse.
  - Avoid admonishing the individual for not disclosing sooner. Saying things such as 'I do wish you had told me about it when it started' may be the staff member's way of being supportive but may be interpreted by the individual to mean they have done something wrong.
  - Tell the individual what will happen next, that they cannot keep secrets and that information will be shared to ensure the right level of support is given.

- It is always advisable for meetings or work with individual children or adults at risk to be conducted in view of other adults. Where this is not possible, they should be in a room covered by CCTV.

Making a referral:

- Concerns about a child or an adult at risk or a disclosure should be immediately raised with the DSL who will help decide whether a referral to MASH/DSAB or other support is appropriate in accordance with The Local Authority continuum of need.
- If Wings are uncertain about whether a concern raised should be referred to the MASH/DSAB, a consultation with MASH will be sought to seek further support and guidance.
- If a referral is needed, the DSL or DDSL should make this rapidly and have the necessary systems in place to enable this to happen. However, anyone can make a referral and if for any reason a staff member thinks a referral is appropriate and one hasn't been made, they can, and should, consider making a referral themselves.
- The child or adult at risk (subject to their understanding) and the parents/carers will be told that a referral is being made, unless to do so would increase the risk to the individual.
- If after a referral the individual's situation does not appear to be improving the Designated safeguarding lead (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the child's or adult's situation improves.
- If a child or an adult at risk is in immediate danger or is at risk of harm a referral should be made to MASH/DSAB and/or the police immediately.
- Anybody can make a referral but where referrals are not made by the DSL, they should be informed as soon as possible.

Supporting our Staff:

- We recognise safeguarding cases can be distressing for staff.
- Support is provided through the DSL and access to further guidance as needed.

Children who are particularly vulnerable:

Wings South West recognises that some children are more vulnerable to abuse, neglect, exploitation and contextual safeguarding concerns and that additional barriers exist when recognising abuse for some children. We understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures which fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment, or circumstances.

In some cases possible indicators of abuse such as a child's mood, behaviour or injury might be assumed to relate to the child's impairment or disability rather than giving a cause for concern. Or a focus may be on the child's disability, special educational needs or situation without consideration of the full picture. In other cases, such as bullying, the child may be disproportionately impacted by the behaviour without outwardly showing any signs that they are experiencing it.

Some children may also find it harder to disclose abuse due to communication barriers, lack of access to a trusted adult or not being aware that what they are experiencing is abuse.

Any child may benefit from early help, but all staff should be particularly alert to the potential need for early help for a child who:

- Is disabled and has specific additional needs.
- Has special educational needs (whether or not they have a statutory education, health and care plan).
- Is a young carer.
- Is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups.

- Is frequently missing/goes missing from education, care or from home.
- Is misusing drugs or alcohol themselves.
- Is at risk of modern slavery, trafficking or exploitation.
- Is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse.
- Has returned home to their family from care.
- Is showing early signs of abuse and/or neglect and/or exploitation.
- Is at risk of being radicalised or exploited.
- Is a privately fostered child.
- Has an imprisoned parent.
- Is experiencing mental health, wellbeing difficulties.
- Is persistently absent from education (including persistently absent for part of the school day).
- Has experienced multiple suspensions, is at risk of being permanently excluded from schools, colleges and in alternative provision or a pupil referral unit.
- Is at risk of 'honour' based abuse such as FGM or forced marriage.

Allegations against Staff and Whistleblowing:

We recognise that children and adults at risk cannot be expected to raise concerns in an environment where staff fail to raise concerns.
All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues, poor or unsafe practice and potential failures in the charity's safeguarding arrangements. If it becomes necessary to consult outside the charity, they should speak in the first instance, to the LADO following the Whistleblowing Policy.

The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 line is available from 8:00 AM to 8:00 PM, Monday to Friday and email: help@nspcc.org.uk
Whistleblowing re the CEO should be made to the Chair of Trustees whose contact details are readily available to staff.

Service users are aware that they can raise a concern should they be worried about a member of staff conduct, for example by talking to a trusted adult or emailing following the details on displayed safeguarding posters.

In line with KCSiE guidelines if there is an allegation against staff:

1. All employees and volunteers must record in writing, any concerns they have about the practice or behaviour of a member of staff and share it with the CEO.

2. The CEO will make an assessment to determine if the matter is a 'low level concern' or an 'allegation' (this means that the concern may meet the harm threshold).

3. The Local Authority Designated Officer (LADO) will be contacted for all 'allegations' and the relevant guidance will be followed. If the CEO needs advice or guidance they should contact the LADO.

4. Where concerns are considered to be 'low level' by the CEO, they should be managed in-line with part 4 of KCSiE and the wider charity policies and procedures.

5. If the concern relates to the CEO, the person receiving the information will immediately inform the Chair of Trustees who will consult the LADO as above, without notifying the CEO first.

6. In the event of an allegation against the CEO, the decision to suspend will be made by the Chair of Trustees with advice from the LADO.

Suspension of the member of staff, against whom an allegation has been made, needs careful consideration, and the CEO/Chair of Trustees will seek the advice of the LADO in making this decision.

Staff, parents and trustees are reminded that publication of material that may lead to the identification of a member of staff who is the subject of an allegation is prohibited by law. Publication includes verbal conversations or writing including content placed on social media sites.

Online Safety:

Wings South West recognises that online safety is a key component of safeguarding and that risks to service users can occur both online and offline. Such risks can also include the use of Artificial Intelligence.
Online safety is a whole-charity responsibility and part of the safeguarding culture.
Risks may include content, contact, conduct, and commerce harms.
Service users should be supported to use technology safely, respectfully, and responsibly.
The DSL will ensure appropriate filtering and monitoring systems are in place to safeguard young people and adults at risk and regularly review of systems to ensure effectiveness (as a minimum annually).
Should incidents/online concerns be reported they will be treated as a disclosure of concern/ safeguarding issue: recorded, investigated and supported.
In addition, staff will:

- Receive regular training on online safety risks
- Model safe and appropriate use of technology

Confidentiality, Sharing Information and GDPR

All staff will understand that safeguarding issues warrant a high level of confidentiality, not only out of respect for the individual and staff involved but also to ensure that information being released into the public domain does not compromise evidence.
Staff should be proactive in sharing concerns as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children and adults at risk, whether this is when problems are first emerging, or where a child is already known to local authority children's social care.
Staff should only discuss concerns with the DSL/DDSL, CEO or chair of trustees (depending on who is the subject of the concern). That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.
However, following a number of cases where senior leaders had failed to act upon concerns raised by staff, Keeping Children Safe in Education emphasises that any member of staff can contact children's social care if they are concerned about a child.
Safeguarding information will be stored and handled in line with our GDPR policy and safeguarding files will be kept separately from general learning information files.
Fears about sharing information cannot be allowed to stand in the way of the need to promote the welfare and protect the safety of children. Information sharing is guided by the following principles:
Necessary and proportionate, relevant, adequate, accurate, timely and secure.
Wings South West will ensure that images of children and adults at risk used within publications, publicity and on the website have written parental/carer consent prior to any images being taken and used.

APPENDIX A

CATEGORIES OF ABUSE

Categories of Abuse:

· Physical Abuse
· Emotional Abuse (including Domestic Abuse)
· Sexual Abuse (including child sexual exploitation)
· Neglect

Signs of Abuse:

The following non-specific signs may indicate something is wrong:

· Significant change in behaviour
· Extreme anger or sadness
· Aggressive and attention-needing behaviour
· Suspicious bruises with unsatisfactory explanations
· Lack of self-esteem
· Self-injury
· Depression and/or anxiousness
· Age-inappropriate sexual behaviour
· Child Sexual Exploitation
· Criminality
· Substance abuse
· Mental health problems
· Poor attendance
· Unexplainable and/or persistent absences from education

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

· Must be regarded as indicators of the possibility of significant harm
· Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
· May require consultation with and / or referral to Local Authority Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the child may:

· Appear frightened of the parent(s)/ carers.
· Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and specific needs)

The parent or carer may:

· Persistently avoid child health promotion services and treatment of the child's episodic illnesses
· Have unrealistic expectations of the child
· Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
· Be absent or misusing substances
· Persistently refuse to allow access on home visits
· Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

· An explanation which is inconsistent with an injury
· Several different explanations provided for an injury
· Unexplained delay in seeking treatment

· The parents/carers are uninterested or undisturbed by an accident or injury
· Parents are absent without good reason when their child is presented for treatment
· Repeated presentation of minor injuries (which may represent a "cry for help" and if ignored could lead to a more serious injury)
· Family use of different doctors and A&E departments
· Reluctance to give information or mention previous injuries

Bruising

Children can have accidental bruising, but the following must be considered as non-accidental unless there is evidence, or an adequate explanation provided:

· Any bruising to a pre-crawling or pre-walking baby
· Bruising in or around the mouth, particularly in small babies which may indicate force feeding
· Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
· Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
· Variation in colour possibly indicating injuries caused at different times
· The outline of an object used e.g. belt marks, handprints or a hairbrush
· Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
· Bruising around the face
· Grasp marks on small children
· Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Mongolian Blue Spot: Bruising in non-mobile children is rare and may indicate abuse or neglect. Birth marks, especially Mongolian Blue Spots, can mimic bruising. Mongolian Blue Spot can be identified (see below), however if in any doubt as to the cause of the bruise refer to Southwest Child Protection Procedures Local Authority guidance and consultation.

· Areas of skin hyperpigmentation – flat, not raised, swollen or inflamed
· Not painful to touch
· Usually present at birth/ develop soon afterwards
· Will not change in shape or colour within a few days
· Normally uniform blue/ grey in colour across the mark
· Common in African, Middle Eastern, Mediterranean and Asian children
· While most occur at the lower back and buttocks, they can appear anywhere (e.g. back of shoulder or limb). Scalp/ face rarely affected
· Can be single/ multiple, vary in size, but mostly few centimetres diameter
· Gradually fade over many year

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child.
A medical opinion should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

· Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
· Linear burns from hot metal rods or electrical fire elements
· Burns of uniform depth over a large area
· Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
· Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. Non-mobile children rarely sustain fractures.

There are grounds for concern if:

· The history provided is vague, non-existent or inconsistent with the fracture type
· There are associated old fractures
· Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
· There is an unexplained fracture in the first year of life

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse. The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

· Developmental delay
· Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
· Indiscriminate attachment or failure to attach
· Aggressive behaviour towards others
· Scapegoated within the family
· Frozen watchfulness, particularly in pre-school children
· Low self-esteem and lack of confidence
· Withdrawn or seen as a "loner" – difficulty relating to others

Recognising Signs of Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about, and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

Some behavioural indicators associated with this form of abuse are:

· Inappropriate sexualised conduct
· Sexually explicit behaviour, play or conversation, inappropriate to the child's age
· Continual and inappropriate or excessive masturbation
· Self-harm (including eating disorder), self-mutilation and suicide attempts
· Involvement in prostitution or indiscriminate choice of sexual partners
· An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

· Pain or itching of genital area
· Blood on underclothes
· Pregnancy in a younger girl where the identity of the father is not disclosed
· Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

· Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
· A child seen to be listless, apathetic and irresponsive with no apparent medical cause
· Failure of child to grow within normal expected pattern, with accompanying weight loss
· Child thrives away from home environment
· Child frequently absent from school
· Child left with adults who are intoxicated or violent
· Child abandoned or left alone for excessive periods

APPENDIX B

DEFINITION OF ADULTS AT RISK

Under this policy Adults at Risk are those:
Aged 18 years or over who may be in need of community care services by reason of mental or other disability, age or illness; and who are or may be unable to take care of themselves, or unable to protect themselves against significant harm or exploitation.

Adult Safeguarding made Personal:

Making safeguarding personal means it should be person-led and outcomes focussed. It engages a person in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement.

This means that:

- The views and consent of the alleged victim should be sought at the very start of the process. However this does not replace the duty to override consent where appropriate,
- Desired outcomes should be reviewed throughout safeguarding adult's procedures,
- There is a statutory responsibility to appoint an advocate to represent someone who has substantial difficulty in being involved in the process where there is not an appropriate individual to represent them.

Wings follows the six principles of Adult Safeguarding

- Empowerment. People are supported and encouraged to make their own decisions and informed consent.
- Prevention. It is better to take action before harm occurs.
- Proportionality. The least intrusive response appropriate to the risk presented is taken.
- Protection. Support and representation for those in greatest need.
- Partnership. Local solutions through services working with their communities.
- Accountability. Accountability and transparency in Safeguarding Practice is essential.

APPENDIX C

RADICALISATION AND EXTREMISM

To be read in relation to Wings Prevent Policy.

Our prevent policy sets out our duty in more detail. The Prevent Duty for England and Wales (2023) under section 26 of the Counter-Terrorism and Security Act 2015 places a duty on education and other children's services to have due regard to the need to prevent people from being drawn into terrorism.

Some children are at risk of being radicalised; adopting beliefs and engaging in activities which are harmful, criminal or dangerous.

Wings is clear that exploitation of vulnerable children and radicalisation should be viewed as a safeguarding concern and follows the Department for Education guidance for schools and childcare providers on preventing children and young people from being drawn into terrorism.

Wings seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.
Wings staff receive training to help identify early signs of radicalisation and extremism.

Opportunities are provided in the curriculum to enable young people to discuss issues of religion, ethnicity and culture and Wings follows the DfE advice Promoting Fundamental British Values as part of SMSC (spiritual, moral, social and cultural education) in Schools (2014)10.

When any member of staff has concerns that a young person or adult may be at risk of radicalisation or involvement in terrorism, they should speak with the DSL/DDSL. They should then follow normal safeguarding procedures. If the matter is urgent then the Police must be contacted by dialling 999. In non-urgent cases where police advice is sought then dial 101 or the national police Prevent advice line on 0800 011 3764.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
Extremism is defined by the Government in the Prevent Strategy as:
Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
Extremism is defined by the Crown Prosecution Service as: The demonstration of unacceptable behaviour by using any means or medium to express views which:

- Encourage, justify or glorify terrorist violence in furtherance of particular beliefs.
- Seek to provoke others to terrorist acts.
- Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
- Foster hatred which might lead to inter-community violence in the UK.

There is no such thing as a "typical extremist": those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

Learners/service users may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that staff are able to recognise those vulnerabilities.

Indicators of vulnerability include:

· Identity Crisis – the service user is distanced from their cultural / religious heritage and experiences discomfort about their place in society.

· Personal Crisis – the service user may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging.

· Personal Circumstances – migration; local community tensions; and events affecting the service user's country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy.

· Unmet Aspirations – the service user may have perceptions of injustice; a feeling of failure; rejection of civic life.

· Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration.

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

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

More critical risk factors could include:

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

The Prevent duty ensures schools and colleges have 'due regard' to the need to prevent people from being draw into terrorism.

Channel is the voluntary, confidential support programme which focuses on providing support at an early stage to individuals that have been identified as being vulnerable to radicalisation. Prevent referrals may be passed to the multi-agency Channel panel to determine whether individuals require support. Guidance on Channel https://www.gov.uk/government/publications/channel-guidance
Further information can be obtained from the Home Office website.

APPENDIX D

HOW TO RESPOND TO A CHILD OR AN ADULT AT RISK WANTING TO TALK ABOUT ABUSE

General Points

- Show acceptance of what is said (however unlikely the story may sound)
- Keep calm
- Give direct eye contact
- Be honest
- Be clear you will need to let someone else know – don't promise confidentiality
- Even when a child or an adult at risk has broken a rule, they are not to blame for the abuse
- Be aware that the child or adult at risk may have been threatened or bribed not to tell
- Never push for information or ask leading questions. If the service user decides not to tell you after all, then accept that and let them know that you are always ready to listen.

Helpful Things You May Say or Show

- I believe you (or showing acceptance of what the child says)
- Thank you for telling me
- It's not your fault
- I will help you

DON'T Say

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where? (ie take care to avoid asking leading questions).
- Never make false promises, such as agreeing not to tell anyone else.
- Never make statements such as "I am shocked, don't tell anyone else"

Concluding

- Convey reassurance and acceptance.
- Explain what you are going to do next and that you will let them know what happens (see next 3 bullet points).
- Contact the Safeguarding Lead or Deputy Safeguarding Lead
- If neither the Safeguarding Lead nor Deputy Safeguarding Lead can be contacted, and you perceive there is serious risk of further abuse, you might have to consider referring to Social Services or the Police to prevent a child, young person or adult at risk returning home.
- Consider your own feelings and seek pastoral support if needed.

APPENDIX E

USE OF IMAGES OF CHILDREN AND ADULTS AT RISK – PHOTOGRAPHS, VIDEOS AND LIVE STREAMING

Obtaining, storing, sharing and publishing images of children and adults at risk will be carried out in accordance with the Wings Data Protection Policy and Internet Safety Policy.

Videos may be uploaded and shared on Wings managed social media pages with the consent and knowledge of everyone involved. However, at no time may live streaming of learners or service users be used on any form of media. Live streaming increases the risk of an individual who has not consented to their image being shared accidentally being in footage, which would be breaking our GDPR responsibilities. It also risks exposure of something an individual would not want shared – for example if a medical emergency were to occur. Therefore, all videos must be checked before being shared to ensure that only those who have consented can be seen/heard and that the content is such that an individual would expect to be shared within our context.

GUIDELINES TO TOUCHING – AS PER THE SAFE TOUCH POLICY.

- Keep everything public. A hug in the context of the group is very different from a hug behind closed doors.
- Touch should be related to the service user's needs, not the workers.
- Touch should be age-appropriate and generally initiated by the service user rather than the worker.
- Avoid any physical activity which is, or could be construed as, sexually stimulating.
- Service users are entitled to privacy to ensure personal dignity.
- Service users are entitled to determine the degree of physical contact with others except in exceptional circumstances ie when they need medical attention.
- Team members should take responsibility for monitoring one another in the area of physical contact. They should be free to constructively challenge a colleague if necessary. Concerns about possible abuse should always be reported to the DSL or DDSL.

ABUSE OF TRUST

We undertake to follow the principles found within the Abuse of Trust guidance issued by the Home Office. As also indicated in the Wings Staff Code of Conduct, it will therefore be unacceptable for those in a position of trust to engage in any behaviour which might allow a sexual relationship to develop for as long as the relationship of trust continues.

APPENDIX F

DBS (Disclosure and Barring Service) CHECKS FOR STAFF AND VOLUNTEERS

In line with advice on Safer Recruitment in Keeping Children Safe in Education 2025, the following procedures will be followed:

1. Enhanced DBS with children's barred list checks will cover work with both children and adults at risk.

2. Existing staff will not be required to renew DBS checks unless there is cause for concern. This is reviewed annually and recorded in the Trustee minutes. All staff will be required to register with the Update Service at the start of their contract.

3. A risk assessment will be completed for new adult volunteers who are awaiting a DBS and barred list check if applicable.

4. A DBS certificate and barred list check for existing volunteers (including Trustees) will be obtained every three years.

5. Third Party staff (sessional and occasional workers) will be required to show or obtain an enhanced DBS certificate with barred list check.

6. External contractors who do not have contact with children or adults at risk, do not need a DBS check.

Safer Recruitment and stringent Safeguarding practices will continue to be in place throughout the organisation. Volunteers should continue to be supervised by staff members in all activities.

APPENDIX G

ADVICE FOR WORKING WITH CHILDREN AND ADULTS AT RISK WITH ADDITIONAL NEEDS

Introduction – why the need to consider safeguarding?
Those with additional needs are particularly vulnerable to abuse. They will often require more help with personal care needs such as washing, dressing, toileting, feeding, mobility etc and may have limited understanding and communication abilities. For example, a young person of 17 might behave in a manner more akin to a 2-3 year old, particularly in demanding cuddles or sitting on a carer's lap. Others might be more vulnerable because they are partially sighted or have hearing loss and can be reliant on physical contact for communication. Those with disabilities may be vulnerable to negative attitudes towards them, or may be taken advantage of.

Workers too might feel more vulnerable to accusations of abuse as a result of meeting an individual's needs. Balanced alongside other guidelines there is the issue of ensuring personal dignity, particularly for those who are dependent on others for their personal care needs.

Some guidelines to consider

- Details are recorded on a Personal Information Form relating to learning or physical disability e.g. autism etc. The Worker will contact parents or carers to establish any particular needs or behaviour management issues and record them. This confidential information will be passed on to staff.
- New participants at a disability group will visit with a parent or carer in the first instance. The leader will establish the child's needs and management issues recorded and communicated with staff.

Touch see APPENDIX D

Personal dignity

- Make enquiries of the individual/their parent/carers about expectations re meeting personal care needs; ensure that these are known by all workers involved with the individual including how many workers might be needed to meet that need in order to prevent injury to a service user or the helper.
- Ensure that if one person is needed to assist a service user, that another worker is informed of your absence and why.
- If a service user needs help with toileting, ensure that a worker of the same gender assists.

Personal Emergency Evacuation Plans (PEEPs) and Risk Assessments
Personal Evacuation Plans are agreed with service users and carers where there is an additional need such as reduced mobility or hearing loss for example.

APPENDIX H

TRANSPORTING CHILDREN AND ADULTS AT RISK

- Only those staff and volunteers deemed confident and competent after mini-bus assessment with a manager and who have gone through the Wings recruitment procedures will be able to transport learners or service users on behalf of Wings.

- Such staff/volunteers will have read the Wings Safeguarding Policy and have agreed to abide by this.

- Seat belts should be worn by the driver and all passengers

- Where possible avoid transporting learners/service users without another member of staff. If it is necessary for a member of staff to transport learners/service users by themselves this should only be done in a Wings vehicle, with the prior knowledge of a manager and with the use of a dash cam facing the driver which records the driver. Dash cams will be available in a Wings vehicle if the need to transport individually arises and footage (voice and video) will be stored for at least 8 weeks unless there is a concern raised in the behaviour or language from staff/students.

- Look at instances where it may be unwise for a particular driver to transport a service user e.g. where there has been a conflict.

- Parental/carer consent should be given and all journeys should be carried out with the knowledge of the leadership.

- Ensure full compliance with mini bus regulations

- Ensure that you have adequate supervision. As well as a driver another staff member/volunteer will be needed in most cases. The electric mini bus is fitted with a sound and voice dash cam and may be used by a lone staff member with prior permission from the DSL/DDSL.

APPENDIX I

GUIDELINES FOR WORKING WITH DISRUPTIVE SERVICE USERS

Introduction

Sometimes children, young people or an adult at risk can become very upset and disruptive and occasionally their behaviour may be assessed as possibly dangerous to themselves or others.

Children - Some guidelines to consider

- If disruptive behaviour is displayed, an attempt should be made to speak to the individual to:

    1. Request that the behaviour stops;
    2. Speak with the child to find out the cause(s) of upset;
    3. Warn the child that they will be asked to leave if the behaviour continues;
    4. Warn the child that continued disruptive behaviour might result in longer term exclusion from the activity.

- If a child is harming him/herself or another person or property other children should be escorted to vacate the place/area where the disruption is occurring. **At the same time**, and with a second worker present, request the child to STOP.

- If your request is ignored, you might need to warn that you might have to call for additional help, eg Police.

- **In exceptional circumstances and with the help of another, whilst Police help is awaited,** you might need to prevent the child from harming themselves or others by restraining them.

In all circumstances, workers involved should record the event and email to the DSL/DDSL as soon as possible, ie once the situation is resolved/or immediately after the activity, details of:

- What activity was taking place;
- What might have caused the disruptive behaviour;
- The child's/young person's behaviour;
- What you said/how you responded
- Others present who might have witnessed the event.

APPENDIX J

GUIDELINES FOR ONE TO ONE WORKING

One to one working is sometimes necessary within intervention work. Where this is the case staff should meet with learners/service users where they are clearly recorded by CCTV and, where possible, the door should be left open.

One to one working should only happen when another staff member is present in the building and at least one member of staff should be first aid trained.

If there are behavioural concerns the staff member should seek support from another member of staff as soon as reasonably practicable.

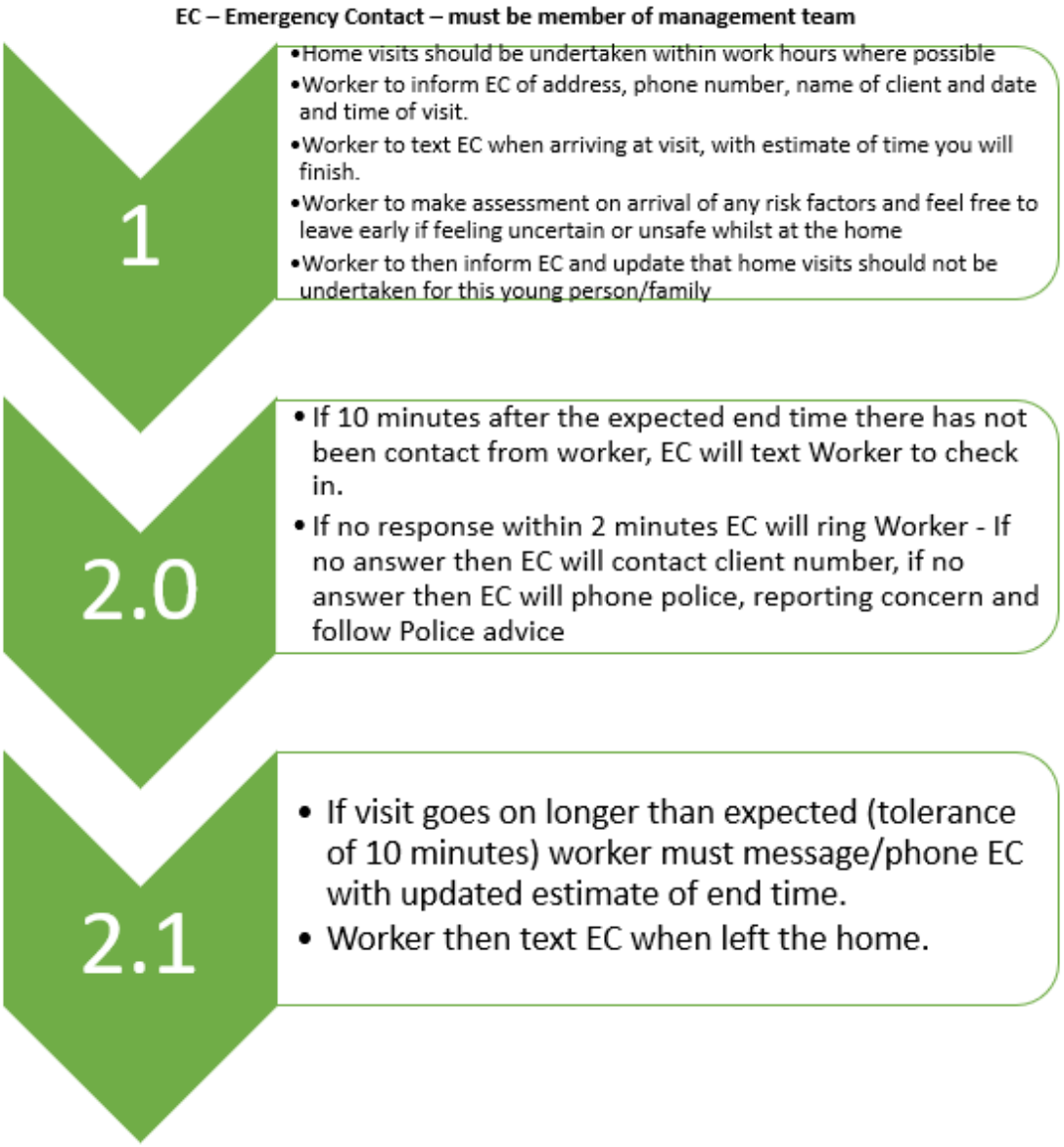
If a member of staff is left on site with a leaner/service user in an unavoidable situation, then a manager should be informed straight away and they should stay within sight of CCTV. The manager should be informed when this is no longer the case.

Any concerns or disclosures that come through one-to-one work should follow the safeguarding procedures set out in the safeguarding policy.

APPENDIX K

Home visits are to be carried out in a limited capacity only and do not constitute the normal way of working in the charity. They are to be carried out only by suitably qualified individuals and if there is not an option for attendance on site/phone contact or if there is a need to be able to see the family dynamic at home (in the case of specific mentoring). The first home visit must be carried out with two members of staff (including a manager) unless the home has been deemed safe by a referring organisation such as the Police or Social Services. In all cases the procedure below must be followed:

Home visits Process



APPENDIX L

Safeguarding Arrangements for Hiring of Wings Premises

Wings South West land and buildings may be let out to third parties and community groups as a way of providing additional income to the charity or promoting community groups which match the interests of the charity or in a supportive capacity for individuals. Whether there is a charge or not involved in the letting, the hirer remains responsible for the safeguarding of all attending.

It is the responsibility of the hirers to ensure that safeguarding measures are in place while hiring out the space. If there is a chance that those hiring the premises will come into contact with young people/at risk adults, for example if the hire occurs during charity hours, or at the very end of a group when people may be leaving, we will ask for confirmation that the hirers have had the appropriate level of DBS check.

The hirer will be required to have appropriate safeguarding policies in place, including safeguarding and child protection (where relevant), and shall provide copies of these policies annually and at other times as required by the charity. No safeguarding policy is required in the case of small-scale community lets (such as birthday parties).

The hirer must confirm that, should any safeguarding concerns present themselves during the hire of the charity premises, they shall contact the Designated Safeguarding Lead as soon as reasonably practicable. The hirer will be informed that if the charity receives an allegation relating to an incident where an individual or organisation is using our charity premises for running an activity for children/at risk adults, we will follow our usual safeguarding procedures and inform our local authority designated officer (LADO).

APPENDIX M

CHILD ON CHILD ABUSE (including Sexual Violence, Sexual Harassment and HSB)

The DSL(s), Trustees and CEO will take due regard to Part 5, KCSiE

In most instances, the conduct of young people towards each other will be covered by our behaviour policy. However, some allegations may be of such a serious nature that they may raise safeguarding concerns. Wings South West recognise that children are capable of abusing their peers. It will not be passed off as 'banter' or 'part of growing up'. The forms of child-on-child abuse are outlined below.

· Domestic abuse – an incident or pattern of actual or threatened acts of physical, sexual, financial and/or emotional abuse, perpetrated by an adolescent against a current or former dating partner regardless of gender or sexuality.
· Bullying (including cyberbullying, prejudice-based and discriminatory bullying).
· Child sexual exploitation – children under the age of 18 may be sexually abused in the context of exploitative relationships, contexts and situations by peers who are also under 18.
· Harmful sexual behaviour – children and young people presenting with sexual behaviours that are outside of developmentally 'normative' parameters and harmful to themselves and others
· Upskirting – which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. Upskirting is a criminal offence.
· Serious youth violence – any offence of most serious violence or weapon enabled crime, where the victim is aged 0-19' i.e. Murder, manslaughter, rape, wounding with intent and causing grievous bodily harm. 'youth violence' is defined in the same way, but also includes assault with injury offences. All staff will receive training so that they are aware of indicators which may signal that children are at risk from or involved with serious violence and crime.
· Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element); and
· Consensual and non-consensual sharing of nudes and semi nudes' images and or videos (also known as sexting or youth produced sexual imagery).

The term child-on-child abuse can refer to all of these definitions and a child may experience one or multiple facets of abuse at any one time. Therefore, our response will cut across these definitions and capture the complex web of their experiences.
There are also different gender issues that can be prevalent when dealing with child-on-child abuse (i.e. girls being sexually touched/assaulted, or boys being subjected to initiation/hazing type violence).

Wings aims to reduce the likelihood of child-on-child abuse through:

· The established ethos of respect, friendship, courtesy, and kindness.
· High expectations of behaviour.
· Clear consequences for unacceptable behaviour.
· Systems for any service user to raise concerns with staff, knowing that they will be listened to, valued and believed.
· Robust risk assessments and providing targeted work for service users identified as being a potential risk to others and those identified as being at risk.

Research indicates that young people rarely disclose child-on-child abuse and that if they do, it is likely to be to their friends. Therefore, Wings will also educate service users in how to support their friends if they are concerned about them, that they should talk to a trusted adult in the charity and what services they can contact for further advice. Any concerns, disclosures, or allegations of child-on-child abuse in any form should be referred to the DSL using the child protection procedures as set out in this policy. Where a concern regarding child-on-child abuse has been disclosed to the DSL(s), advice and guidance will be sought from the Local Authority Safeguarding Hub and where it is clear a crime has been committed or there is a risk of crime being committed the Police will be contacted.

Working with external agencies Wings will respond to the unacceptable behaviour. If a young person's behaviour negatively impacts on the safety and welfare of other young people, then safeguards will be put in place to promote the well-being of the service users affected and the victim and perpetrator will be provided with support.

Sexual Harassment, Sexual Violence and Harmful Sexual Behaviour

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate, or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. Children's sexual behaviour exists on a wide continuum, ranging 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. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers, or children. Staff should be vigilant to:

- · bullying (including cyberbullying)
- · physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
- · sexual violence and sexual harassment
- · sexting (also known as youth produced sexual imagery)
- · initiation/hazing type violence and rituals
- · upskirting

Developmental Sexual Activity

Encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional, and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour

Can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is "acting out" which may derive from other sexual situations to which the child or young person has been exposed. If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.
Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base. In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

Equality – consider differentials of physical, cognitive, and emotional development, power and control and authority, passive and assertive tendencies.
Consent – agreement including all the following:

- · Understanding that is proposed based on age, maturity, development level, functioning and experience
- · Knowledge of society's standards for what is being proposed
- · Awareness of potential consequences and alternatives
- · Assumption that agreements or disagreements will be respected equally
- · Voluntary decision
- · Mental competence

Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality, or the threat

of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide. Further information and advice is available in the Devon multi-agency protocol "Working with Sexually Active Young People" available at South West Child Protection Procedures.

APPENDIX N

GUIDANCE FOR WORKERS WORKING WITH SERVICE USERS WHO SELF-HARM

PART 1. SOME FACTS:

What is Self-Harm? There are various definitions and views:

Any act of self-poisoning or self-injury carried out by a person, irrespective of their motivation.
(NICE 2023)

Self-harm can be considered as a spectrum of behaviour ranging from occasional self-scratching, to taking an overdose with an intent to die, to attempted suicide (Royal College of Psychiatrists 2014)

Self- harm can also be less obvious such as putting yourself in risky situations or not looking after your physical/emotional needs (Mind.org.uk).

An overall view of Self-Harm would include cutting, poisoning, over-eating or under-eating, burning the skin, inserting objects into the body, hitting self or walls, overdosing, exercising excessively, scratching and hair pulling.

Why do People Self -Harm?

Negative feelings give rise to tension which can be relieved by self -harm. Endorphins are released leading to a temporary relief , however this soon gives way to negative feelings of shame and guilt which causes the cycle to begin again. Inflicting pain on oneself can also stimulate feelings which have been suppressed and act as a release.

Triggers may include:
Family break up or conflict, traumatic early sexual experience, parental pressure to achieve, being bullied or excluded from friendship groups, money worries, bereavement, a way to deal with stress and anxiety others found useful.

PART 2 WAYS TO HELP:

Active listening – assess the situation and how serious it is. Act in a non-judgemental, calm and compassionate manner. As with any disclosure, take it seriously, but do not overreact. If the YP is in immediate or potential danger, treat as any other Safeguarding issue and report as such.

A. Serious self harm – immediate or potential danger – Refer on.

- Call emergency services if necessary
- Administer First Aid
- Explain confidentiality
- Follow Safeguarding Procedures – inform Safeguarding Officers
- CAHMS referral will be made by MASH.

B. Ongoing Superficial or Potential self harm

- Treat injury if present
- Explain confidentiality
- Do not advise a child to stop self -harming as the behaviour may be a means of coping with underlying trauma or anxiety.
- Encourage YP to inform parents/carers and consult GP who may prescribe counselling

- Consult colleagues – if occurring at school inform the School's Safeguarding Officer
- Look at Children's peer group for patterns
- Work out how to help – see below.

Ways to help

- Work with the YP to identify patterns, triggers, urges. Identify trigger times or events.
- Look at alternatives – distraction or less harmful behaviour (see below).
- Encourage healthy routines and work to build self-esteem.
- Be available to listen – YP may wish to disclose underlying reasons for self-harm.
- Develop an action plan under the headings "Trigger", "Distraction", "What works for me"
- Be aware of the situation escalating

Distraction

- Contact friend or helpline
- Walk/ run/exercise/dance
- Leave the house to meet friends
- Read a book
- Keep a diary
- Look after an animal
- Watch TV
- Go shopping
- Avoid being alone

Less harmful behaviour

- Clench ice cubes
- Write/draw/talk about feelings
- Hit pillow or soft object
- Listen to loud music
- Snap elastic bands on skin to create pain

An adult at risk

Research shows that those with learning disabilities and conditions such as autism are vulnerable to self-harm, though the type of behaviour may differ, and may be associated with the disorder itself. Psychiatrists refer to this as SIB -Self Injurious Behaviour. Advice should be sought before attempting to help an adult at risk with a learning disability/mental health condition who self harms.

Further help:

Childline – www.childline.org

National Self Harm Network – www.nshn.co.uk

Young Minds – www.youngminds.org.uk

Mind – www.mind.org.uk

APPENDIX O

Children's Front Door

If you are concerned that a child is being abused, or to request Targeted Early Help (L3) support you can

call: 0345 155 1071 **or**
complete the Request for Support online form available at:
https://devoncountycouncil.outsystemsenterprise.com/MASH/homepage

The DevonSCP Children's Front Door **consultation line** for **professionals only:** to request number email devonscp@devon.gov.uk.
Emergency Duty Team out of hours **0345 6000 388**
Police non-emergency 101

For all LADO enquiries Exeter (01392) 384964
ladosecure-mailbox@devon.gov.uk
Further info:
Managing allegations - Devon Children and Families Partnership (dcfp.org.uk)

Early Help
Locality Early Help Mailbox
North: earlyhelpnorthsecure-mailbox@devon.gov.uk
Mid & East: earlyhelpmideastsecure-mailbox@devon.gov.uk
South & West: earlyhelpsouthsecure-mailbox@devon.gov.uk
Exeter: earlyhelpexetersecure-mailbox@devon.gov.uk

For emergencies outside of office hours please call:
0345 6000 388