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AYLSHAM SPORTS HUB LIMITED (ASH)
SAFEGUARDING POLICY

Policy Headings	**Safeguarding Policy**
Section 1 Introduction (Aim / Ethos)	Aylsham Sports Hub Limited (ASH) acknowledges the duty of care to safeguard and promote the welfare of children and vulnerable adults and is committed to ensuring safeguarding practice reflects statutory responsibilities, government guidance and complies with best practice and relevant regulatory bodies. At ASH we provide holiday activities, birthday parties, swimming lessons and centre led activities to a range of ages from 3 years to high school aged children. We have a widely diverse range of children use our facilities daily. The policy recognises that the welfare and interests of children are paramount in all circumstances. It aims to ensure that regardless of age, ability, or disability, gender reassignment, race, religion or belief, sex or sexual orientation, socio-economic background, all children and vulnerable adults: • Have a positive and enjoyable experience of using the facilities and taking part in activities at ASH in a safe and child centred environment • Are protected from abuse whilst participating in activities at ASH or outside of the activity We acknowledge that some children and vulnerable adults, including disabled children or those from ethnic minority communities, can be particularly vulnerable to abuse and we accept responsibility to take reasonable and appropriate steps to ensure their welfare. Our policy applies to all children, staff, volunteers, visitors, parents and students. All staff and volunteers will be trained to respond to a disclosure from a child and will know the procedure to follow.
Section 2 Name and contact details of the Designated Safeguarding Person (DSP) and their Deputy	**How to raise a concern**: If you have a concern, please contact either our designated safeguarding lead – Laura Killington or our deputy safeguarding lead – Darren Neale or our Safeguarding Director Jo Tuttle. Their contact details are below. Alternatively, you can contact the Local Authority Duty Desk on 01603 307797. NSPCC whistleblowing helpline is also available if you do not feel able to raise a concern internally. Call: 0800 028 0285 – line is available from 8:00am to 8:00pm, Monday to Friday or via e-mail: help@nspcc.org.uk.

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Name and contact details of the Designated Safeguarding Lead (DSL) and their Deputy	**Contact Details** **Our Designated Safeguarding Lead** **Name:** Laura Killington **Role:** Activities and Swim School Manager **Tel:** 01263 738966 **or** 07500017549 **Email:** Laura@aylshamsportshub.co.uk **Our Deputy Safeguarding Lead** **Name:** Darren Neale **Role**: Leisure and Memberships Manager **Tel:** 01263 738966 **or** 07717500881 **Email:** Darren@aylshamsportshub.co.uk **Our Safeguarding Director** **Name:** Jo Tuttle **Role:** Director **Tel:** 01263 733270 **or** 077472124139 **Email:** jtuttle@aylshamhigh.norfolk.sch.uk This policy and procedures will be widely promoted and are mandatory for everyone involved with ASH. Failure to comply with the policy and procedures will be addressed without delay and may ultimately result in dismissal or exclusion from the organisation. -If the DSL/Deputy DSL are unavailable anyone with a safeguarding concern can contact The Children's Advice and Duty Service (CADS). -A staff member or volunteer can call (0344 800 8021) -A parent or member of the public can call (0344 800 8020). **If you feel a child is at risk of immediate harm, call the Police on 999.**
Section 3 Roles and Responsibilities of DSP or DSL	Darren Neale and Laura Killington are the named people that safeguarding concerns are reported to. If they are not available, or the concern relates to these staff members, Jo Tuttle should be contacted. **The DSL and Deputy DSL have a duty to:** • Liaise with Children's Services and other agencies and make referrals to The Children's Advice and Duty Service or Local Authority Designated Officer (LADO) when required. • Responsible for making sure the policy is reviewed yearly and updated when changes happen at local/national level. • Ensure robust safeguarding arrangements and procedures are in operation by maintaining a key focus on safeguarding. • Adopt safeguarding and best practice through our policies, procedures and code of conduct for staff and volunteers.

- Ensure everyone understands their roles and responsibilities in respect of safeguarding and is provided with appropriate opportunities to recognise and identify and respond to signs of abuse, neglect and other safeguarding concerns relating to children and vulnerable adults
- Provide effective management for staff and volunteers through supervision, support, training and quality assurance measures so that all staff and volunteers know about our policies, procedures and behaviour codes and follow them confidently and competently.
- Ensure appropriate action is taken in the event of incidents or concerns of abuse and support provided to the individual(s) who raise or disclose the concern
- Ensure that confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored
- Prevent the employment or deployment of unsuitable individuals by recruiting and selecting staff via safer recruitment practices, ensuring all checks are made
- Ensure that we have effective complaints and whistleblowing measures in place
- Ensure that we provide a safe physical environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance
- Build a safeguarding culture where staff and volunteers, children, young people and their families, treat each other with respect and are comfortable about sharing concerns.
- Ensure all staff/volunteers/ have read this policy and all visitors and parents/carers have access to this policy and know the procedures to follow.
- Ensure all staff and volunteers have received appropriate safeguarding information during induction and have received safeguarding training.
- Update staff on any changes to safeguarding in the first instance.
- Completed DSP/DSL Training.
- Follow the Norfolk Continuum of Needs Guidance produced by the Norfolk Safeguarding Children Partnership (NSCP).
- Ensure all long term lettings and bookings have completed the booking form and have provided ASH with the relevant safeguarding information and documents where working with children and vulnerable adults

All Staff have a duty to:

- Promote and prioritise the safety and wellbeing of children and vulnerable adults
- Value, listen to and respect children and vulnerable adults
- Record and store information securely, in line with data protection legislation and guidance
- Use our safeguarding and child protection procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, and families appropriately.

	• Use our procedures to manage any allegations against staff and volunteers appropriately • Create and maintain an anti-bullying environment and ensure that we have a policy and procedure to help us deal effectively with any bullying that does arise • Share information about safeguarding and good practice with visitors to ASH via leaflets, posters and discussions where relevant • Make sure that children and vulnerable adults know where to go to for help if they have a concern
Section 4 Safer Working Practices for staff and volunteers	**How are staff/volunteers made aware of this policy and any changes?** Staff are asked to read and sign to say they have understood this policy at the point of induction and on an annual basis. Any changes are notified to staff and reconfirmed each time any change is made. **What Safer Recruitment steps are in place?** • We will always try to prevent inappropriate people from seeking employment or volunteering to work with children and young people. • We will consider the tasks and skills necessary for the job and what kind of person is most suited to the job through job descriptions and person specifications. We will clearly define the role and agree this with the HR Coordinator. • We will circulate all vacancies externally with fair application processes. We will ensure any advert contains a commitment to safer recruitment and safeguarding children. • We will insist on a written application form. This should include personal details such as name, past names, past and current work/volunteering experience and details of qualifications. It should also include explanation of all gaps in employment. Applicants should also provide current and recent addresses for the past 5 years. • We will decide how the person should behave with children and what attitudes we want to see. • We will develop a list of essential and desirable qualifications, skills and experience and select people against this. • We will ask them to complete a criminal disclosures form in writing which will indicate whether they have any past or current convictions. • We will ask for photographic documentation to confirm identity, such as passport or driving licence, and, for example, a utility bill that contains their address. • We will ask to see the original documents of any qualifications. • We will interview face to face, with at least two representatives from Aylsham Sports Hub. We will discuss with the applicant information contained in their application form and explore their attitudes towards working with children. This also provides an opportunity to discuss our Safeguarding policy and to ensure that the applicant has the ability and commitment to meet the

standards required.

- Two written references must be obtained, where possible to include current or most recent employer.

What is the procedure for DBS Checks?
We will always gain the correct level of DBS disclosure appropriate to the role. If we are unsure as to what level of DBS check is required for the role, we will consult the DBS Webpages or contact The DBS Regional Outreach service and speak to the Adviser for the East of England.

If the staff member uses The Update Service our HR Coordinator will check this. Further advice on the Update Service: DBS Update Service: employer guide - GOV.UK (www.gov.uk)

What is the safeguarding induction process for staff / volunteers?
Each new member of staff or volunteer will receive safeguarding training from the DSL or Deputy DSL as part of their induction and as and when available complete the Safer Programme's introduction to safeguarding course. No member of staff or volunteer will be able to work until safeguarding training with the DSL or Deputy DSL has been completed.

What training will staff/ volunteers have? (Safeguarding / First Aid)
On induction staff and volunteers will complete the above safeguarding training. Annual training will take place with the DSL or Deputy DSL each year to go through any changes to guidance and as a refresher. Once every 3 years staff and volunteers will renew their Safer Programme's introduction to safeguarding course.

All staff and volunteers will be given a copy of our Code of Conduct and will be asked to read this and sign to confirm they will adhere to this. This forms part of our safer working practices.

Staff should be aware that failure to comply with the following code of conduct could result in disciplinary action up to and including dismissal.

ASH aims to provide a service and facilities for all, ensuring that customer relations are at the forefront of everything we do. ASH is dedicated to developing staff and providing high quality leadership and management.

All employees and volunteers have a duty to work within the law and to behave in a way which reflects positively on the hub. At all times public confidence should be supported by the actions and words of all members of staff and volunteers.

As an employee, staff must not knowingly put themselves in a foreseeable position where duty and private interests unreasonably conflict and must not make use of their employment to further private interests.

Everyone should be treated with courtesy and respect at all times. Staff and volunteers should have a positive attitude, manner and appearance and work both efficiently and safely within the requirements of their contract or role.

A code of conduct is designed to give clear guidance on the standards of behaviour all staff and volunteers are expected to observe; any support or clarity should be provided. Staff and volunteers are role models and are in a unique position of influence working with children and must adhere to behaviour that sets a good example.

This code of conduct applies both inside and outside working hours. It is vital to maintain the reputation of ASH at all times.

1. Staff and volunteers must avoid using inappropriate or offensive language at all times.

2. Staff and volunteers must conduct themselves to the highest standard demonstrating good practice.

3. All staff and volunteers must do all that is reasonable to avoid putting themselves at risk of allegations of abusive or unprofessional conduct.

4. Staff and volunteers have a duty to safeguard and protect any children from the following within their care.

   · Physical abuse

   · Sexual abuse

   · Emotional abuse

   · Neglect

   · Radicalisation

   The duty to safeguard includes the duty to report concerns about any child to a designated Safeguarding Lead (DSL) or Deputy Safeguarding Lead (DSL) for Child Protection.

5. Staff and volunteers must comply with all policies and procedures as set out by the hub.

6. Staff and volunteers must not demean or undermine any member of the public or colleagues.

7. Staff and volunteers must take responsible care of anyone under their supervision with the aim of ensuring their safety and welfare at all times.

8. Staff must maintain high standards of honesty and integrity in their work. This includes the handling of money and the use of any of the sports hubs property or facilities.

9. Staff and volunteers must not engage in conduct outside of work which could seriously damage the reputation or link anyone to the business. In particular any offences that involve violence or possession or use of illegal drugs or sexual misconduct is considered a criminal offence and is likely to be regarded as unacceptable.

10. Staff and volunteers must not engage in inappropriate use of social network sites which may bring themselves, ASH or the ASH community into disrepute.

11. Staff must be cautious when using information technology and social media to be aware of the risks to themselves and others.

12. Staff may undertake work outside of the hub, either paid or voluntary, provided that it does not conflict with the interests of ASH nor be to a level which may contravene the working time regulations or affect an individual's work performance.

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13. Aylsham Sports Hub Limited, will do everything it knowingly can to comply with and ensure it meets any statutory obligations and ensure that ASH is a safe and healthy working environment.

14. In turn staff and volunteers are expected to:

- follow the Hubs health and safety policies.
- follow any temporary standard operating procedures, until such time these can be safely removed.
- all staff are required to take reasonable and practical steps to ensure the health and safety of anybody on the premises including themselves. They should undertake training and observe the relevant documents in order to do so.
- ensure that safety equipment is not misused or damaged.
- wear correct uniform which do not put health and safety at risk and to wear any safety clothing and equipment provided.

	• report promptly any accidents or near misses, in the appropriate way • comply with hygiene requirements. • inform an ASH manager if they are taking any medication which would harm their ability to do their work and in particular, never to use machinery if they have taken any medication or drug that may affect their ability to do so safely; • co-operate in all activities, including training organised to fulfil qualification requirements.
Safer Working Practices for volunteers under 18 *Only include this section if relevant to your organisation.*	**Safer working practices for under 18's** • We will carry out a risk assessment to identify any potential safeguarding issues and will put steps in place to reduce any risks. • Under 18's will never be left alone to supervise children under 16 • To check the young person is the right fit for the role we will carry out our normal safer recruitment processes • We will get the young person to sign a written agreement where we clearly set out what their role is and our expectations of them. • For over 16's we will consider the young person's individual circumstances to consider if it is still appropriate to obtain parental consent. If we do not seek parental consent, we still inform parents that they are working with us. • All young people will receive an induction and training at an age-appropriate level and suitable to their role. • If young people are working with other children, they will receive training from our DSP on their safeguarding responsibilities and what they need to do if they have concerns about their own or someone else's wellbeing. They will be issued with a safeguarding summary statement; with the key information they need for their role.
Section 5 Procedure for handling a disclosure from a child	Key points to consider when dealing with a disclosure: • Listen and be supportive. • Do not ask any leading questions, interrogate the child, or put ideas in the child's head, or jump to conclusions. • Do not stop or interrupt a child who is recalling significant events. • Never promise the child confidentiality– it must be explained that information will need be to be passed on to help keep them safe. • Record what was said immediately as close to what was said as possible. Also record what was happening immediately before the child disclosed. • Name, sign and date the record in ink. • Contact the designated safeguarding person immediately who will decide on what action to take.

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Section 6 Contacting The Children's Advice and Duty Service (CADS)	**If we have an emergency, we will call the Police on 999.** We will contact CADS when there are concerns about a child's safety or wellbeing, and we believe they may be at risk of harm. This includes: • **Immediate Safeguarding Concerns** - where a child is at risk of significant harm, including physical, emotional, sexual abuse, or neglect. • **Escalating Concerns** - Where previous support or interventions have not improved the situation and concerns are increasing. • **Concerns About Parenting Capacity** - Where a parent or carer's ability to meet a child's needs is compromised due to issues such as substance misuse, mental health, or domestic abuse. • **Professional Consultation** - Where the situation is complex and you require advice or guidance on appropriate next steps. We will contact CADS on their direct line: 0344 800 8021. We will choose from the following options: • **Option 1** -the child or young person is currently being supported by a Social Worker or Family Practitioner. • **Option 2** -your call relates to Child Exploitation. • **Option 3** -your call relates to Domestic Abuse. • **Press 0 –** for Child Protection and immediate safeguarding concerns (if the lines are busy and the call is not answered within 40 minutes, a call back option will be offered). We will have the following information ready before contacting CADS: ✓ all the details known to your organisation about the child (including DOB, current address, contact details for the family, the family composition including siblings, and where possible extended family members and anyone important in the child's life) ✓ the nature of the concern and worries ✓ history of the family (including significant events) ✓ any work/support you have provided to the child or family to date. ✓ where the child is now ✓ whether you have informed parents/carers of your concern • When considering whether to contact CADS we will consult the CADS Flowchart Process in Appendix 4 and CADS FAQs on the NSCP Website Page: How to Raise a Concern | Norfolk Safeguarding Children Partnership | PWWC • We will also consult the Norfolk Continuum of Needs Guidance 2023 produced by the Norfolk Safeguarding Children Partnership (NSCP) • We will gain consent from the parent to contact CADS, unless the concerns being raised suggest that the child or someone else (including the referrer)

	would be placed at risk of significant harm, or it might undermine the investigation into a serious crime. • Reasons for not seeking consent should be clearly stated when contacting CADS and recorded on internal systems for our records. • We will have a discussion with a Consultant Social Worker. • A copy of the discussion will be securely emailed to us. • We will follow the advice given. • We will keep written dated records of all conversations with CADS, for our own safeguarding recording process. • We will not investigate and will be led by the Local Authority and/or the Police. • We understand if we are unhappy about a decision made by CADS, we can use the Resolving Professional Disagreements policy on https://norfolklscp.org.uk/ • Parents or members of the public can contact CADS on 0344 800 8020 **<u>Requesting Early Help support</u>** For concerns that do not meet the above threshold, Early Help support & guidance can be accessed via Request for support - Norfolk County Council. Early Help is designed to support children, young people, and families experiencing difficulties that may affect their wellbeing, development, or ability to flourish. It aims to: • Prevent problems from escalating by addressing issues early. • Support the wider family context, including parents, carers, and siblings. • Improve outcomes such as school attendance, mental health, and relationships. • Encourage multi-agency working, bringing together professionals to create a coordinated support plan. • Empower families by focusing on strengths and helping build resilience. • Concerns about Radicalisation and Extremism If we have concerns that a child or young person could be vulnerable to radicalisation, we will follow the procedure in Appendix 1.
Section 7 *Types of Abuse*	**Definitions of Abuse and Neglect from Working Together to Safeguard Children 2023** Safeguarding and promoting the welfare of children is defined for the purposes of this guidance 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
- taking action to enable all children to have the best outcomes in line with the 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.

What is abuse and neglect?

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. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear, or experience its effects. Children may be abused in a family or in an institutional or extra-familial contexts 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.

Physical abuse-A form of abuse which 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 or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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

Sexual abuse-Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative

	acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. **Neglect-**The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: • provide adequate food, clothing, and shelter (including exclusion from home or abandonment) • protect a child from physical and emotional harm or danger • ensure adequate supervision (including the use of inadequate caregivers) • ensure access to appropriate medical care or treatment • provide suitable education It may also include neglect of, or unresponsiveness to, a child's basic emotional needs *For information on indicators of abuse consult Appendix 3.* **Additional safeguarding concerns to be aware of are:** • Child Sexual Exploitation • Child Criminal Exploitation • FGM – Female Genital Mutilation • Forced Marriage • Honour Based Abuse • County Lines • Domestic Abuse • Online Abuse • Radicalisation *For more information on these consult Appendix 3.*
Section 8 Managing Allegations against people working or volunteering with children	Our aim is to provide a safe and supportive environment which secures the wellbeing and very best outcomes for the children who attend our setting. We do recognise that sometimes the behaviour of adults may lead to an allegation of abuse being made. Allegations sometimes arise from a differing understanding of the same event, but when they occur, they are distressing and difficult for all concerned. We also recognise that many allegations are genuine and there are some adults who

deliberately seek to harm or abuse children. We work to the thresholds for harm as set out in *'Working Together to Safeguard Children' (*2023).

An allegation may relate to a person who works / volunteers with children who has:

- behaved in a way that has harmed a child, or may have harmed a child and/or;
- possibly committed a criminal offence against or related to a child and/or;
- behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children; and/or
- behaved or may have behaved in a way that indicates they may not be suitable to work with children.

The 4th bullet point above recognises circumstances where a member of staff or volunteer is involved in an incident outside of ASH which did not involve children but could have an impact on their suitability to work with children; this is known as transferrable risk.

At Aylsham Sports Hub we recognise our responsibility to report / refer allegations or behaviours of concern and / or harm to children by adults in positions of trust known to us, but who are not employed by our organisation to the LADO service directly at lado@norfolk.gov.uk

We will take all possible steps to safeguard our children and to ensure that the adults at Aylsham Sports Hub are safe to work with children. When concerns arise, we will always ensure that the safeguarding actions outlined in the local protocol and procedures NSCP Protocol 8.3 Allegations Against Persons who work/volunteer with children and The Management of Allegations Against People Working with Children Procedure are adhered to and will seek appropriate advice.

If an allegation is made or information is received about *any* adult who works/ volunteers in ASH which indicates that they may be unsuitable to work / volunteer with children, the member of staff receiving the information will inform Aylsham Sports Hub immediately. This includes concerns relating volunteers.

The Designated Safeguarding Lead, should within 1 working day, report the allegation to the LADO in accordance with this procedure, by completing a LADO referral form.

Should an allegation be made against the *DSP/DSL* this will be reported to Jo Tuttle, Director of Safeguarding 01263 733270 or 07472124139. In the event that Jo Tuttle is not contactable on that day, the information must be passed to and dealt with by Kathryn Garnham kgarnham@aylshamhigh.norfolk.sch.uk.

The LADO referral form can be downloaded here under the LADO tab, along with more information:
https://norfolklscp.org.uk/people-working-with-children/how-to-raise-a-concern

	For further information on the role/remit of Norfolk LADO Service, please see NSCP Protocol 8.3 Allegations Against Persons who work/volunteer with children and The Management of Allegations Against People Working with Children Procedure
Section 9 Disciplinary Procedures when an allegation has been made against a staff member or volunteer	Where an allegation has been made, ACAS procedures and guidance will be followed. Any investigations and decisions will involve the HR Coordinator and Jo Tuttle, Director of Safeguarding.
Section 10 Low level concerns about adults working or volunteering with children that do not meet the harm threshold for a LADO referral.	A low-level concern is any concern, doubt, or sense of unease, no matter how small, that someone may have acted in a way that is inconsistent with your organisations code of conduct. Behaviour that might be considered as inappropriate often depends on the circumstances. A low-level concern may not be seen as immediately dangerous or intentionally harmful to a child, but it can soon escalate and become a serious safeguarding concern. *Examples of such behaviour could include:* • Being over friendly with children • Excessive 1-1 to attention beyond what is required for their role • Having favourites • Adults taking photographs of children on their mobile phone • Engaging with a child on a one-to-one basis in a secluded area • Using inappropriate sexualised, intimidating or offensive language • Inappropriate sharing of images • Humiliating children This list of examples is not exhaustive, and low-level concerns can arise from various forms of behaviour. Low-level concerns may arise in several ways and from several sources. For example: suspicion; complaint; or disclosure by a child, parent or other adult within or outside of the organisation.

	At our organisation we promote an open and transparent culture in which all concerns about all adults working in or volunteering on behalf of our organisation are dealt with promptly and appropriately. Through induction, we ensure all staff/volunteers understand the importance of self-referring, where, for example, they have found themselves in a situation which could be misinterpreted, might appear compromising to others, and/or on reflection they believe they have behaved in such a way that they consider falls below the expected professional standards. *Managing a Low-Level Concern* At our organisation staff/volunteers are expected to report all low-level concerns immediately to the DSP/DSL (amend as appropriate) If reported to the DSP/DSL they will inform Jo Tuttle of the concern. The Director of Safeguarding will be the ultimate decision maker in respect of all low-level concerns. At our organisation we understand the importance of recording low-level concerns and the actions taken in light of these being reported. We will review the records we hold to identify potential patterns and take appropriate action. This could be through a disciplinary process, or where a pattern of behaviour moves from a low-level concern to meeting the harm threshold, where it should be referred to the LADO. If our organisation is in any doubt as to whether the information which has been shared about a member of staff/volunteer as a low-level concern in fact meets the harm threshold, they should consult with the LADO on lado@norfolk.gov.uk
Section 11 Making a Barring Referral to the Disclosure and Barring Service	If an allegation has been made about a staff member or volunteer, then our organisation has a legal duty to make a barring referral if the following conditions are met: **Condition 1** • you withdraw permission for a person to engage in regulated activity with children and/or vulnerable adults. Examples: dismissed, re-deployed, retired, been made redundant or retired. **Condition 2** You think the person has carried out 1 of the following: • engaged in relevant conduct in relation to children and/or adults. An action or inaction has harmed a child or vulnerable adult or put them at risk or harm or; • satisfied the harm test • received a caution for, or a conviction for, or been convicted for a relevant offence More information on Barring Referrals can be found online. If we need guidance on making a Barring Referral, we will contact the East of England DBS Outreach Advisor for support. A Barring Referral can be completed online via the DBS website.

	Jo Tuttle Director of Safeguarding will have overall responsibility for making a barring referral when necessary. Kathryn Garnham will make this barring referral if the allegation is against the named person. There could be times when we might consider that we should still make a referral in the interests of safeguarding children even if the legal duty to refer has not been met. This could include acting on advice of the police or a safeguarding professional, or in situations where there may not be enough evidence to dismiss or remove a person from working with vulnerable groups. DBS are required by law to consider any and all information sent to them from any source. This includes information sent to them where the legal referral conditions are not met. If we do make a referral to DBS where the referral conditions are not met, we will do so in consideration of relevant employment and data protection laws.
Section 12 Working with parents and carers	Our safeguarding policy will always be available on reception as well as our safeguarding leaflets to take away. Parents will sign a consent form at the start of their child's involvement, which will include a copy of the safeguarding policy. Parents will be informed of our legal duty to assist other agencies with Safeguarding enquiries and that we will we contact The Children's Advice and Duty Service (CADS) and or Police if we have concerns about the welfare of their child. Parents will be made aware that we will need to share information with the relevant authorities if we have concerns about the welfare of their child, and that we do not have to seek consent from them if there are serious concerns about harm or likely harm to their child.
Section 13 Records and Confidentiality	**Recording a disclosure/safeguarding concern**: In the first instance an Aylsham Sports Hub safeguarding form will need to be completed detailing the full name of the child, DOB, activity at which the concern has taken place, your name and position, the nature of the concern as well as the time and date. This form will then be handed to the DSL or deputy to decide if a referral needs to be made. If the child is at risk of immediate harm the police or CADS s can be contacted directly by the reporting person. Safeguarding forms should be scanned and filed in the Aylsham Sports Hub Management Team folder which is password protected.

Logging what action has been taken regarding safeguarding concerns or disclosures:

All Safeguarding report forms should be updated with any actions taken following the event. This includes information and further guidance from CADS or future support that may be required for the families and effected parties.

Only the three named Safeguarding Leads will have access to safeguarding records to prevent any breach of confidentiality. All staff are made aware of their duties to uphold data protection and not to breach confidentiality.

Safeguarding records will be filed on our central Aylsham Sports Hub computer system which only staff members have access to. They will be stored in one folder which is controlled by named safeguarding leads and is password protected. Any paper copies containing any personal information will be destroyed through confidential waste disposal.

Data will be stored in line with our confidentiality and data protection policy:

1. Where staff have access to confidential information about members or participants, staff must not reveal or share this information to anyone.

2. All staff are likely at some point to witness actions which need to be confidential. For example, a safeguarding concern that needs to be reported and dealt with in accordance with the appropriate procedure. It must not be discussed outside ASH, including with the parent or carer (unless authority to do so), nor with colleagues in the Hub except with a senior member of staff with the appropriate role and authority to deal with the matter.

3. However, staff have an obligation to share with their line manager or DSL any information which gives rise to concern about the safety or welfare of a child. Staff must never promise a child that they will not act on information that they are told by the child.

4. All staff must follow the relevant data protection regulations. The Data Protection Act protects personal data which relates to living identifiable individuals and deals with the way in which personal information is collected, held, recorded and used. Staff must ensure information is kept safe and secure and is only held for the purposes consent was given for or outlined in the ASH privacy notice. Staff will attend training as required, and at least annually, to keep up to date with any changes or to refresh knowledge regarding data protection regulations.

Our organisation cannot guarantee confidentiality if there is a child safeguarding concern, as we will need to share these concerns with the Children's Advice and Duty Service and or Police. It is an expectation that our organisation will seek

	consent to share information first unless to do so would place somebody at risk of harm or undermine a criminal investigation.
Section 14 Online Safety	Online Safety includes the use of photography and video, the internet and social media sites, mobile phones and smart watches. • Staff are restricted to using mobile phones in a non-public workspace only at designated break times. • Parents will be asked to tick a photo consent box upon signing up within our booking google forms. Verbal consent can also be obtained during an activity or event. • Photos and content will only be taken on authorised equipment, stored internally on the ASH network and deleted after intended usage. • Children are asked not to use technology during ASH sessions. • Parents and carers are asked not to take photos or record videos in our swimming pool setting. • ICT Acceptable use policy: • This policy will be given to new staff members to sign as part of the staff induction process and will be distributed to all staff annually. • All staff and visitors understand that ICT includes a wide range of systems, including mobile phones, smart watches, laptops and tablets. • All staff understand that they have a responsibility to use the ASH computer system in a professional, lawful, and ethical manner. It is a disciplinary offence (including possible termination) to use the Federation's ICT system and equipment for any purpose not permitted by its owner. • All staff and visitors understand that this acceptable use policy applies not only to work and the use of the Federation's digital technology equipment in school, but also applies to the use of Federation systems and equipment off the premises and the use of personal equipment on the premises, or in situations related to employment by ASH. • All staff and visitors will not disclose any passwords provided to them by ASH or other related authorities. Nor will they try to use any other person's username and password. All staff and visitors should not write down or store a password where it is possible that someone may steal it. • All staff and visitors understand that they are responsible for all activity carried out under their username. • Staff and visitors will not install any hardware or software on any Federation owned device without the permission of Mike Hampstead – Network Manager. • All staff and visitors understand that their permitted use of the internet and other related technologies is monitored and logged and will be made available, on request, to their line manager, and/or Leadership Team in line with any disciplinary procedures. This relates to all Federation owned devices, including laptops and iPad provided by the Federation. • All staff and visitors will only use each ASH's email/internet/learning platforms and any related technologies for uses permitted by ASH.

	• All staff and visitors will ensure that all their electronic communications are appropriate and compatible with their role. • All staff and visitors will ensure that all data is kept secure and is used appropriately as authorised by ASH Management and in line with the guidance given under the general data protection regulations and in accordance with the data protection act. If in doubt they will seek clarification. This includes taking data off site. • All staff and visitors understand that the data protection policy requires that any staff or learner data to which they have access, must be kept private and confidential; except when it is deemed necessary that they will be required by law or Reference No: JT/ICT Acceptable Use Policy (Staff/Visitors) /08 Page 3 of 3 by ASH policy to disclose such information to an appropriate authority or member of the ASH Management Team. • All staff and visitors will not access, copy, remove or otherwise alter any other user's files, without their express permission. • Personal devices must only be used in line with the staff code of conduct. All network usage regardless of whether it is work related or otherwise is monitored. If you access personal information that you wish to remain confidential you do so at your own risk. • All staff and visitors using Federation and personal equipment will not browse, download, upload or distribute any material that could be considered offensive, illegal (e.g child sexual abuse images, criminally racist material, terrorist or extremist material, adult pornography covered by the Obscene Publications Act) or discriminatory or inappropriate, or may cause harm or distress to others. • All staff, governors and visitors will not try to use any programmes or software that might allow them to bypass the filtering/security systems in place to prevent access to such materials. • All staff, and visitors will immediately report any illegal, inappropriate or harmful material or incident, they become aware of, to the appropriate person. • All staff and visitors will only use the approved email system(s) for ASH. • Images will only be taken, stored and used for purposes in line with ASH policy. Images will only be distributed outside the ASH network/learning platform if they comply with our held photographic consent form or when specific permission from the parent/carer has been obtained. • All staff and visitors will comply with copyright and intellectual property rights. • All staff and visitors will report any incidents of concern regarding staff use of technology and/or children's safety to the Designated Safeguarding Lead or Director of safeguarding in line with ASH's safeguarding policy.
Section 15 Relevant Guidance and Legislation	-Working Together to Safeguard Children 2023 -What to do if You're Worried a Child is Being Abused 2015 -Children Act 2004 -Children Act 1989 -The Online Safety Act 2023 -Data Protection Act 2018

	-The Prevent Duty Guidance 2023 -Norfolk Continuum of Needs Guidance 2023 Norfolk Guidance to Understanding Continuum of Needs | NSCP | PWWC (norfolklscp.org.uk) -Norfolk Safeguarding Children Partnership Policies and Procedures Polices & Procedures | Norfolk Safeguarding Children Partnership (norfolklscp.org.uk) -The Early Years Foundation Stage (2024) -Keeping Children Safe in Education (2024)
Section 16 Other Relevant Policies	Our safeguarding policy should be read in conjunction with the other following policies which also fall under our safeguarding umbrella: -Safer Recruitment -Code of Conduct -Online Safety -Whistleblowing -Confidentiality and Information Sharing
Section 17 Useful Contacts	• Norfolk Children's Advice and Duty Service (CADS) 0344 800 8021 • Norfolk Children's Services 24 hours 0344 800 8020 • Norfolk Police 101 / In an emergency 999 • Norfolk Local Authority Designated Officers (LADO) Team lado@norfolk.gov.uk • Norfolk Safeguarding Children Partnership (NSCP) norfolklscp.org.uk • Safer Programme 01603 228966 safer@norfolk.gov.uk • The Disclosure and Barring Service Regional Outreach Service The DBS Regional Outreach service - GOV.UK (www.gov.uk) Other contacts which may be relevant for you to add: -Professional bodies e.g. Ofsted, The Charity Commission, Norfolk Early Years Team
Section 18 Policy Review	We will make changes to our policy and procedures in line with Norfolk Safeguarding Children Partnership's guidance on norfolklscp.org.uk This policy will be reviewed on 01/02/2027 This policy will be reviewed by Jo Tuttle, Darren Neale and Laura Killington.

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Appendix 1-The Prevent Duty in Norfolk Procedure

PREVENT - Prevent is part of the UK's Counter-terrorism strategy CONTEST. The aim of Prevent is to stop people from becoming terrorists or supporting terrorism. The key terms to be aware of are as follows:

Extremism - the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs.

Radicalisation - refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Terrorism - action that endangers / causes serious violence to a person/people; causes serious damage to property; or seriously interferes with / disrupts an electronic system.

Responding to a Concern-Notice – Check – Share

Notice-A staff member or volunteer working with a child or young person could be the person to notice that there has been a change in the individual's behaviour that may suggest they are vulnerable to radicalisation. Every case is different, and there is no checklist that can tell us if someone is being radicalised or becoming involved in terrorism. There are some common signs that may mean someone is being radicalised.

- Expressing an obsessive or angry sense of injustice about a situation and blaming this on others.
- Expressing anger or extreme views towards a particular group such as a different race or religion.
- Suggesting that violent action is the only way to solve an issue, sharing extreme views or hatred on social media.

Check-The next step is for the staff member or volunteer to speak to the manager or safeguarding lead to better understand the concerns raised by the behaviours observed to decide whether intervention and support is needed. In many cases there will be an explanation for the behaviours that either requires no further action or a referral not related to radicalisation or extremism.

Share-Where the staff member or volunteer still has concerns that the individual may be vulnerable to radicalisation, then the organisation's safeguarding procedures will be followed, and this safeguarding concern will be reported to the Children's Advice and Duty Service (CADS).

Following this the Prevent referral form should be completed, which can be downloaded from here referral form and sent to: **preventreferrals-NC@Norfolk.police.uk**

An initial assessment of the referral will be carried out prior to any further information gathering on the individual.

For urgent radicalisation concerns contact Norfolk police on 101 or, in an emergency, 999.

Additional information and guidance on Prevent is available on the Norfolk County Council website.

Need advice or support?

If it's not an emergency, please get in touch by emailing **prevent@norfolk.police.uk**.

You can also contact the Norfolk Police Prevent team on **01953 423905** or **01953 423896**.

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Appendix 2-Indicators of Abuse

Caution should be used when referring to lists of signs and symptoms of abuse. Although the signs and symptoms listed below *may* be indicative of abuse there may be alternative explanations. In assessing the circumstances of any child any of these indicators should be viewed within the overall context of the child's individual situation.

Emotional Abuse

- Physical, mental and emotional development lags
- Sudden speech disorders
- Continual self-depreciation ('I'm stupid, ugly, worthless, etc')
- Overreaction to mistakes
- Extreme fear of any new situation
- Inappropriate response to pain ('I deserve this')
- Unusual physical behaviour (rocking, hair twisting, self-mutilation) - consider within the context of any form of disability such as autism
- Extremes of passivity or aggression
- Children suffering from emotional abuse may be withdrawn and emotionally flat. One reaction is for the child to seek attention constantly or to be over-familiar. Lack of self-esteem and developmental delay are again likely to be present
- *Babies* – feeding difficulties, crying, poor sleep patterns, delayed development, irritable, non-cuddly, apathetic, non-demanding
- *Toddler/Pre-School* – head banging, rocking, bad temper, 'violent', clingy. Spectrum from overactive to apathetic, noisy to quiet. Developmental delay – especially language and social skills
- *School age* – Wetting and soiling, relationship difficulties, poor performance at school, non-attendance, antisocial behaviour. Feels worthless, unloved, inadequate, frightened, isolated, corrupted and terrorised
- *Adolescent* – depression, self harm, substance abuse, eating disorder, poor self-esteem, oppositional, aggressive and delinquent behaviour
- Child may be underweight and/or stunted
- Child may fail to achieve milestones, fail to thrive, experience academic failure or under achievement
- Also consider a child's difficulties in expressing their emotions and what they are experiencing and whether this has been impacted on by factors such as age, language barriers or disability

Neglect

There are occasions when nearly all parents find it difficult to cope with the many demands of caring for children. But this does not mean that their children are being neglected. Neglect involves ongoing, severe failure to meet a child's needs. The majority of these signs and symptoms can occur across any age group. Here are some signs of possible neglect:

Physical signs:

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Emaciation
- Untreated medical problems
- The child seems underweight and is very small for their age
- The child is poorly clothed, with inadequate protection from the weather
- Neglect can lead to failure to thrive, manifest by a fall away from initial centile lines in weight, height and head circumference. Repeated growth measurements are crucially important
- Signs of malnutrition include wasted muscles and poor condition of skin and hair. It is important not to miss an organic cause of failure to thrive; if this is suspected, further investigations will be required

- Infants and children with neglect often show rapid growth catch-up and improved emotional response in a hospital environment
- Failure to thrive through lack of understanding of dietary needs of a child or inability to provide an appropriate diet; or they may present with obesity through inadequate attention to the child's diet
- Being too hot or too cold – red, swollen and cold hands and feet or they may be dressed in inappropriate clothing
- Consequences arising from situations of danger – accidents, assaults, poisoning
- Unusually severe but preventable physical conditions owing to lack of awareness of preventative health care or failure to treat minor conditions
- Health problems associated with lack of basic facilities such as heating
- Neglect can also include failure to care for the individual needs of the child including any additional support the child may need as a result of any disability

Behavioural signs:

- No social relationships
- Compulsive scavenging
- Destructive tendencies
- If they are often absent from school for no apparent reason
- If they are regularly left alone, or in charge of younger brothers or sisters
- Lack of stimulation can result in developmental delay, for example, speech delay, and this may be picked up opportunistically or at formal development checks
- Craving attention or ambivalent towards adults, or may be very withdrawn
- Delayed development and failing at school (poor stimulation and opportunity to learn)
- Difficult or challenging behaviour

Physical Abuse

- Always obtain a medical diagnosis regarding any suspected abusive injury
- No injury is 100% symptomatic of abuse
- Look for unexplained recurrent injuries or burns; improbable excuses or refusal to explain injuries

Physical signs:

- Bald patches
- Bruises, black eyes and broken
- Untreated or inadequately treated injuries
- Injuries to parts of the body where accidents are unlikely, such as thighs, back, abdomen
- Scalds and burns
- General appearance and behaviour of the child may include:
- Concurrent failure to thrive: measure height, weight and, in the younger child, head circumference
- Frozen watchfulness: impassive facial appearance of the abused child who carefully tracks the examiner with his eyes
- Consider the age of child:
- Any bruising to a young baby
- It is unusual for a child under the age of 1 year to sustain a fracture accidentally
- Injuries that are not consistent with the story: too many, too severe, wrong place or pattern, child too young for the activity described
- Bruising:
- Bruising patterns can suggest gripping (finger marks), slapping or beating with an object
- Bruising on the cheeks, head or around the ear and black eyes can be the result of non-accidental injury
- Bruises on black children will be more difficult to identify

- Mongolian blue spots may be mistaken for bruises. The Mongolian spot is a congenital developmental condition exclusively involving the skin. Usually, as multiple spots or one large patch, it covers one or more of the lower back, the buttocks, flanks, and shoulders. Mongolian spot is most prevalent among Asian groups. Nearly all East Asian infants are born with one or more Mongolian spots. Mongolian blue spot usually fades over the years and is most frequently gone by the time the child reaches adolescence
- Recent research indicates that bruises can not be aged accurately. Estimates of the age of the bruise are currently based on an assessment of the colour of the bruise with the naked eye
- Other injuries:
- Bite marks may be evident from an impression of teeth
- Small circular burns on the skin suggest cigarette burns
- Scalding inflicted by immersion in hot water often affects buttocks or feet and legs symmetrically
- Red lines occur with ligature injuries
- Tearing of the frenulum of the upper lip can occur with force-feeding. However, any injury of this type must be assessed in the context of the explanation given, the child's developmental stage, a full examination and other relevant investigations as appropriate
- Retinal haemorrhages can occur with head injury and vigorous shaking of the baby
- Fractured ribs: rib fractures in a young child are suggestive of non-accidental injury
- Other fractures: spiral fractures of the long bones are suggestive of non-accidental injury

Behavioural signs:

- Wearing clothes to cover injuries, even in hot weather
- Refusal to undress for gym
- Chronic running away
- Fear of medical help or examination
- Self-destructive tendencies
- Fear of physical contact - shrinking back if touched
- Admitting that they are punished, but the punishment is excessive (such as a child being beaten every night to 'make him study')
- Fear of suspected abuser being contacted
- Injuries that the child cannot explain or explains unconvincingly
- Become sad, withdrawn or depressed
- Having trouble sleeping
- Behaving aggressively or be disruptive
- Showing fear of certain adults
- Having a lack of confidence and low self-esteem
- Using drugs or alcohol
- Repetitive pattern of attendance: recurrent visits, repeated injuries
- Excessive compliance
- Hyper-vigilance

Sexual Abuse

In young children behavioural changes may include:

- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Being overly affectionate - desiring high levels of physical contact and signs of affection such as hugs and kisses
- Lack of trust or fear of someone they know well, such as not wanting to be alone with a trusted adult
- They may start using sexually explicit behaviour or language, particularly if the behaviour or language is not appropriate for their age
- Starting to wet again, day or night/nightmares

Behavioural changes in older children might involve:

- Extreme reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia
- Personality changes such as becoming insecure or clinging
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate
- Become worried about clothing being removed
- Suddenly drawing sexually explicit pictures
- Trying to be 'ultra-good' or perfect; overreacting to criticism
- Genital discharge or urinary tract infections
- Marked changes in the child's general behaviour. For example, they may become unusually quiet and withdrawn, or unusually aggressive. Or they may start suffering from what may seem to be physical ailments, but which can't be explained medically
- The child may refuse to attend school or start to have difficulty concentrating so that their schoolwork is affected
- They may show unexpected fear or distrust of a particular adult or refuse to continue with their usual social activities
- The child may describe receiving special attention from a particular adult, or refer to a new, "secret" friendship with an adult or young person
- Children who have been sexually abused may demonstrate inappropriate sexualised knowledge and behaviour
- Low self-esteem, depression and self-harm are all associated with sexual abuse

Physical signs and symptoms for any age child could be:

- Medical problems such as chronic itching, pain in the genitals, venereal diseases
- Stomach pains or discomfort walking or sitting
- Sexually transmitted infections
- Any features that suggest interference with the genitalia. These may include bruising, swelling, abrasions or tears
- Soreness, itching or unexplained bleeding from penis, vagina or anus
- Sexual abuse may lead to secondary enuresis or faecal soiling and retention
- Symptoms of a sexually transmitted disease such as vaginal discharge or genital warts, or pregnancy in adolescent girls

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Appendix 3-Additional Safeguarding Issues

Child Sexual Exploitation-CSE is a form of child sexual abuse. It occurs when an individual or group take advantage of an imbalance of power to coerce, manipulate or deceive a children 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. CSE does not always involve physical contact; it can also occur through use of technology.

Child Criminal Exploitation-A term to describe where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity:

(a) in exchange for something the victim needs or wants; and/or

(b) for the financial or other advantage or the perpetrator or facilitator; and/or

(c) through violence or the threat of violence.

The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology.

FGM – Female Genital Mutilation- (*FGM*) is a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. It's also known as "*female circumcision*" or "cutting". FGM is often performed by someone with no medical training who uses instruments such as a knife, scalpel, scissors, glass or razor blade. Children are rarely given anaesthetic or antiseptic treatment and are often forcibly restrained.

FGM is often motivated by beliefs about what is considered acceptable sexual behaviour. It aims to ensure premarital virginity and marital fidelity. FGM is in many communities believed to reduce a woman's libido and therefore believed to help her resist extramarital sexual acts. It is illegal to carry out FGM in the UK**.** It is also a criminal offence for UK nationals or permanent UK residents to perform FGM overseas or take their child abroad to have FGM carried out. The maximum penalty for FGM is 14 years' imprisonment.

Forced Marriage-People have the right to choose who they marry, when they marry or if they marry at all. Forced marriage is when some face physical pressure to marry (for example, threats, physical violence or sexual violence) or emotional and psychological pressure (eg if they're made to feel like they're bringing shame on their family).

Forced marriage is illegal in England and Wales. This includes:

- taking someone overseas to force them to marry (whether or not the forced marriage takes place)
- marrying someone who lacks the mental capacity to consent to the marriage (whether they're pressured to or not)

Honour Abuse-Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community.

It is often linked to family members or acquaintances who mistakenly believe someone has brought shame to their family or community by doing something that is not in keeping with the traditional beliefs of their culture. For example, honour based violence might be committed against people who:

- become involved with a boyfriend or girlfriend from a different culture or religion
- want to get out of an arranged marriage
- want to get out of a forced marriage

- wear clothes or take part in activities that might not be considered traditional within a particular culture

Women and girls are the most common victims of honour-based violence however it can also affect men and boys. Crimes of 'honour' do not always include violence. Crimes committed in the name of 'honour' might include:

- domestic abuse
- threats of violence
- sexual or psychological abuse
- forced marriage
- being held against your will or taken somewhere the victim doesn't want to go
- assault/killing

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

Domestic abuse -The statutory definition is clear that domestic abuse may be a single incident or a course of conduct which can encompass a wide range of abusive behaviours, including a) physical or sexual abuse; b) violent or threatening behaviour; c) controlling or coercive behaviour; d) economic abuse; and e) psychological, emotional, or other abuse. Under the statutory definition, both the person who is carrying out the behaviour and the person to whom the behaviour is directed towards must be aged 16 or over and they must be "personally connected" (as defined in section 2 of the Domestic Abuse Act 2021). The definition ensures that different types of relationships are captured, including ex-partners and family members. All children can experience and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members, including where those being abusive do not live with the child. Experiencing domestic abuse can have a significant impact on children. Section 3 of the Domestic Abuse Act 2021 recognises the impact of domestic abuse on children (0 to 18), as victims in their own right, if they see, hear or experience the effects of abuse. Young people can also experience domestic abuse within their own intimate relationships.

Radicalisation -When we talk about radicalisation it means someone is being encouraged to develop extreme views or beliefs in support of terrorist groups and activities. radicalisation and the potential path towards terrorism and extremism can occur through face to face or online interactions. It is sadly the case that it is becoming easier than ever to be groomed by terrorist recruiters on the internet and to find extremist materials. Encouraging susceptible individuals to commit acts of terrorism on their own initiative is a deliberate tactic seen in emerging ideologies and seen in their propaganda. This is exacerbated by online environments which bring together and facilitate individuals sharing and validating thoughts and ideas.

Every case is different, and there is no checklist that can tell us if someone is being radicalised or becoming involved in terrorism. The importance of noticing the hallmarks of concern within these online communities, in friends or wider social spaces as well as work and educational settings has probably never been as important as it is now. There are some common signs that may mean someone is being radicalised.

- Expressing an obsessive or angry sense of injustice about a situation and blaming this on others.
- Expressing anger or extreme views towards a particular group such as a different race or religion.
- Suggesting that violent action is the only way to solve an issue, sharing extreme views or hatred on social media.

It's often the case that professional curiosity and belief in your own ability to determine if something just doesn't sit right is sometimes a good check point to flag up where something may be going wrong, especially in the early stages of radicalisation.

Online Abuse-any type of abuse that happens on the internet. It can happen across any device that's connected to the web, like computers, tablets, and mobile phones. It can happen anywhere online, including: social media, text messages and messaging apps, emails, online chats, online gaming and live-streaming sites. Children can be at risk of online abuse from people they know or from strangers. It might be part of other abuse which is taking place offline, like bullying or grooming. Or the abuse might only happen online. Children may experience several types of abuse online: Cyberbullying, Emotional abuse-which can include emotional blackmail, Sexting-pressure or coercion to create sexual images, Sexual abuse, Sexual exploitation and Grooming-perpetrators may use online platforms to build a trusting relationship with the child to abuse them. A child experiencing abuse online might:

-spend a lot more or a lot less time than usual online, texting, gaming or social media

-seem distant, upset or angry after using the internet or texting

-be secretive about who they're talking to and what they're doing online or on their mobile phone

-have lots of new phone numbers, texts or email addresses on their mobile phone, laptop or tablet

Be mindful that some of the signs of online abuse are similar to other types of abuse.

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Appendix 4-CADS Flowchart for Professionals

The CADS Flowchart for Professionals below, the CADS FAQS and further information on making a referral can be accessed here: [How to Raise a Concern | Norfolk Safeguarding Children Partnership | PWWC]

Ofsted Outstanding Provider

Norfolk MASH Multi-Agency Safeguarding Hub

Norfolk County Council

Safeguarding CADS
Flowchart Process

1. **Identify & Assess Risk:** Identify child at potential or actual risk.

2. **Consult DSL:** Report concerns to your organisation's Designated Safeguarding Lead and document them (e.g., CPOMS)and follow advice regarding contacting CADS or completing a Request for Support'.

3. **Immediate Protection:** If the child is in immediate danger, **call 999**.

4. **Contact CADS if child protection or immediate safeguarding concerns.**

5. **Professionals** call **0344 800 8021** and choose from the following options:
   Press 1 – if the child or young person is currently being supported by a Social Worker or Family Practitioner.
   Press 2 – if your call relates to Child Exploitation.
   Press 3 – if your call relates to Domestic Abuse.
   Press 0 – for Child Protection and immediate safeguarding concerns.
   (If the lines are busy and your call is not answered within 40 minutes, a call back option will be offered).
   To use the service, **members of the public** can call the Customer Service Centre number **0344 800 8020**.

6. **Request Support for Universal, Community based Early Help and Family Help**
   Complete a Request for Support form:
   Targeted early help and community-based support can be accessed via Request for support - Norfolk County Council. Early Help is designed to support children, young people, and families experiencing difficulties that may affect their wellbeing, development, or ability to flourish.
   Consent: Inform parents/carers of the concerns and gain consent for support from Early Help services, prior to a call or completing a Request for Support unless doing so places the child at further risk.
   Universal services and community-based early help
   Universal services and community based early help provide preventative support for children and families of all ages, strengthening resilience, improving outcomes, and reducing the risk of needs escalating. Delivered as a coordinated local system rather than a single service, this support is offered through universal provision such as education, health, and wider community services.

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Norfolk MASH
Multi-Agency Safeguarding Hub

It includes services like Best Start Family Hubs, youth and housing support, and after school provision.

Best Start Family Hubs offer a clear pathway from pregnancy to age 19 (or 25 for young people with SEND), bringing together multi agency partners to provide accessible, ongoing community support and to safeguard families, including those transferring from targeted or specialist services.

Family Help – targeted early help, safeguarding, and promoting the welfare of children

Family Help is offered where universal services and community based early help have not achieved sufficient or sustained improvement, or where a child and family present with multiple, complex, or escalating needs. Delivered through a coordinated, multi agency approach led by Children's Services and its partners, Family Help provides structured support to address identified risks and concerns. Family Help will only be initiated where there is an agreed Family Plan, or a Graded Care Profile (GCP) in cases of neglect, which has been shared with CADS.

Family Help is a voluntary, consent based approach that supports families to build capacity, improve outcomes, and reduce risks, including families in kinship arrangements and those requiring additional support during pregnancy, with the aim of preventing the need for statutory child protection intervention.

Consent: Inform parents/carers of the concerns and gain consent for support from Early Help services, prior to a call or completing a Request for Support unless doing so places the child at further risk.

7. **CADS:** A member of the team responds to the call or Request for Support and decides on next steps.

8. **Information Gathering:** MASH partners (police, health, social care) share information if required.

9. **Outcome & Action:**
   Information, advice and guidance
   Community based Early Help
   Family Help

10. **Feedback:** Following a call CADS provides feedback to the referrer regarding the outcome.

Norfolk County Council