

Document Control

Document developed by:Lucy LeesDocument redeveloped by:Kate BennettReviewed by: Date:27th May 2025

Approved by: Mahdlo Board of Trustees

Version number: 12

Review date: 27th May 2026



1.0 INTRODUCTION

1.1 Purpose

Mahdlo recognises that all young people accessing Mahdlo, regardless of gender, ethnicity, disability, sexuality or beliefs have a right to freedom from abuse and harm. This policy aims to;

- Ensure that we create an environment where the welfare and best interest of the children, young people and adults accessing Mahdlo is paramount making it a safer place for all.
- This responsibility extends to a duty of care for those adults employed, commissioned or contracted to work with children and young people.
- We have a legal responsibility to take all reasonable measures to ensure that the risk of harm to children and adult's welfare are minimised and a duty of care towards them is exercised at all times. It is the responsibility of all adults to safeguard and promote the welfare of children and young people.
- Staff should work and be seen to work, in an open and transparent way.
- Where there are concerns about children, young people or adults at risk, welfare, this policy aims to provide staff and volunteers with details of when and how to take appropriate action wherever abuse and harmful behaviours occurs or is suspected.
- Staff should continually monitor and review their practice and ensure they follow the guidance contained in this document.
- Young people have been consulted in the development of this policy.

1.2 Scope

This policy applies to the Board of Directors, all staff (full time, temporary or part time), volunteers and those working on behalf of Mahdlo as we recognise that safeguarding children is everyone's business and responsibility.

This policy concerns all children, young people and adult members. In this policy a child is defined as, "Anyone who has not yet reached their 18th birthday. The fact that a child has reached the age of 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlement to services or protection" (Working Together to Safeguard Children, 2018)

An adult at risk is 'any person who is aged 18 years or over and at risk of abuse or neglect because of their needs for care and support' (Care Act 2014 [England]).

For the purposes of brevity children and young people are used interchangeable in this document and included in this are adults at risk.

In this policy an adult at risk is defined as a member of Mahdlo aged 18 years of age and over who, for any reason, may be unable to take care of themselves or protect themselves against significant harm or exploitation. Safeguarding adults at risk involves reducing or



preventing the risk of significant harm from neglect or abuse, while also supporting people to maintain control of their own lives.

Whilst every attempt has been made to cover a wide range of situations, it is recognised that this guidance cannot cover all eventualities. There may be times when professional judgements are made in situations not covered by this document, or which directly contravene the guidance given by their employer. It is expected that in these circumstances' employees/volunteers will always advise their Line Manager or Lead Safeguarding Officer of the justification for any such action already taken or proposed.

It is also recognised that not all adults who work with children and young people work as paid or contracted employees. The principles and guidance outlined in this document still apply and should be followed by all adults whose work brings them into contact with children and young people.

The guidance contained in this document has due regard to current legislation and statutory guidance. This policy should be read in conjunction with our Equal Opportunities, Health & Safety, Anti-harassment & Bullying, Electronic Information and Social Media policies.

1.3 Legal Framework

The Children Act 1989 and 2004 make it clear that people who work with children have the responsibility to keep them safe. This is supported by the United Nations Convention on the Rights of the Child (to which the UK is a signatory) which sets out the rights of children to be free from abuse. The Government provides guidance on how organisations and individuals should protect children and young people in their Working Together to Safeguard Children (HM Government 2018). Within this safeguarding legislation and government guidance safeguarding is defined as:

- Protecting children from maltreatment
- Preventing impairment of children's mental and physical health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes

<u>The Care Act 2014</u> sets out a clear legal framework for how local authorities and other parts of the system should protect adults at risk of abuse or neglect.

Adult protection is part of safeguarding and refers to,

"An adult at risk of abuse or neglect is defined as someone who has needs for care and support, who is experiencing, or at risk of, abuse or neglect and as a result of their care needs - is unable to protect themselves" (Care Act 2014).



<u>The Care Act 2014</u> refers to integrated care and support between health and local authorities with those over 18 still receiving support from children's services being dealt with by the adult safeguarding team. It also refers to 6 key safeguarding principles of:

- Empowerment
- Prevention
- Proportionality
- Protection
- Partnership
- Accountability

The Mental Capacity Act 2005 for England and Wales provides a framework to empower and protect people who may lack capacity to make some decisions for themselves. It includes key provisions to protect vulnerable people and the Mental Capacity Bill introduced a new criminal offence of ill treatment or neglect of a person who lacks capacity. A person found guilty of such an offence may be liable to imprisonment for a term of up to 5 years. The Act now covers Individuals aged 16 and above.

1.4 Accountability

Final accountability for ensuring Mahdlo fulfils its child protection and safeguarding responsibilities falls to the Chief Executive. However, responsibility is delegated to the Lead Safeguarding Officers (LSO) and Deputy Safeguarding Officers who are trained appropriately. They are responsible for:

- Inducting and training all workers (paid staff and volunteers) on Mahdlo's safeguarding policy and protection procedures and providing information and advice to workers as needed
- Ensuring that the actions set out within the Safeguarding Policy and Procedures are carried out.
- information is promptly and carefully assessed, clarifying or obtaining more information about the matter as appropriate.
- Following up and reporting any protection concerns with the necessary bodies (including parents/carers where appropriate) ensuring information is made available as appropriate and that referrals made to the relevant statutory agencies are carried out formally.
- All safeguarding concerns and incident reports must be loaded or inputted onto the current CRM system in use e.g. salesforce to track incidents
- Maintaining individual case files with records or concerns raised and/or action taken and manage the aftermath of any incident in the organisation
- Maintaining partnership links with lead social workers and Oldham's Local Safeguarding Children Board to ensure up to date knowledge of procedures, appropriate contacts and good practice.



The lead responsible people are as follows:

Safeguarding Role	Name	Role in Mahdlo	Contact Details
Lead Safeguarding Officer	Shaunnine Firth Kate Bennett	Youth Work Manager Operations Manager	07525 101 506 (Mahdlo Safeguarding Number)
Safeguarding Officer	Lucy Lees	CEO	07525 101 506 (Mahdlo Safeguarding Number)
Deputy Safeguarding Officer	Omar Akhtar	Senior Zone Coordinator	07525 101 506 (Mahdlo Safeguarding Number)

If the Lead Safeguarding Officer is not available the Deputy should be contacted in the case of suspected, witnessed or reported abuse or any concerns or intelligence of tensions that may need to be discussed or need to be taken further.

1.5 Policy Statement

We are committed to safeguarding and promoting the welfare of children and seek to ensure that all of our services, staff and volunteers work to achieve the best outcomes for them.

All concerns and allegations of abuse will be taken seriously by the Board of Directors, staff and volunteers and responded to appropriately - this may require a referral to children's services and in emergencies, the Police.

Mahdlo is committed to:

- Safe recruitment, selection and vetting of trustees, staff and volunteers (including an enhanced DBS check prior to commencement of activity)
- A code of conduct
- Working with statutory bodies, third sector organisations and other voluntary/faith groups to promote the safety and welfare of young people
- Carrying out risk assessments for vulnerable children and/or adults in our care to ensure they are safe (see appendix 7)
- Acting promptly and following the procedure whenever a concern is raised either about a young person or the behaviour of an adult



- Working with the appropriate statutory bodies when an investigation into abuse is necessary involving the parents/carers and young person as and when appropriate
- Ensuring staff and volunteers (including trustees) have the appropriate training, supervision, information and support, to conduct activities safely, recognise abuse and support any young person or adult at risk disclosing abuse
- Reviewing our policy, procedures and practice annually in line with recognised standards including additional safeguarding to protect disabled children and adults.

To support this all Mahdlo staff and volunteers (including trustees) need to be aware that they are individually responsible for protecting young people and working in a way that does not put them at risk (adhering to Health and Safety procedures at all times). The Children's Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children, even if the child has not reported it or does not want it reporting. Staff and volunteers (including trustees) must act promptly if they suspect abuse; it should never be assumed that someone else is already dealing with it or will act if they do not. The Care Act 2014 sets out a clear legal framework for how local authorities and other parts of the care system should protect adults at risk of abuse or neglect.

Any employee who breaches the procedures will be subject to disciplinary action.

Mahdlo recognises that whilst using the Mahdlo facilities workers from other organisations may be working under their own employer's policies and procedures. Whilst we accept this we also require such staff to notify the Mahdlo Safeguarding Co-ordinator or Deputy of any formal reports made or concerns noted about Mahdlo staff or volunteer conduct within 24hrs.

2.0 RECOGNISING ABUSE AND RADICALISATION

2.1 Abuse

Recognising Abuse

Abuse is "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." Working Together to Safeguard Children 2023.



Questioning Behaviours

The signs of abuse might not always be obvious, and a child/adult at risk might not tell anyone what is happening to them. You should therefore question behaviours if something seems unusual and try to speak to the young person, alone, if appropriate, to seek further information.

Be Alert, Question Behaviours, Ask for Help, Refer

Indicators of abuse and neglect

Knowing what to look for is vital to the early identification of abuse and neglect. All staff and volunteers should be aware of indicators of abuse and neglect so that they are able to identify cases of children and adults at risk who may be in need of help or protection. If staff/volunteers are unsure, they should always speak to the Lead Safeguarding Officer (or Deputy Safeguarding Officer). All staff/volunteers should be aware that abuse, neglect and safeguarding issues are rarely stand-alone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

In relation to child protection there are 4 kinds of abuse defined in the government documents 'Working Together, 2023, they are:

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. They may be abused by an adult(s) or other young people. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve:

- conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person
- not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- age or developmentally inappropriate expectations being imposed on children (including interactions beyond the child's developmental capability as well as overprotection and limitation of exploration and learning) or preventing the child participating in normal social interaction
- seeing or hearing ill-treatment of another
- serious 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 ill-treatment of a child, though it may occur alone.

Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or oral sex) or non-penetrative acts (including kissing 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 or watching sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Adult males and females as well as other children can all commit acts of sexual abuse.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born it may involve a parent or carer failing to:

- provide adequate food, nutrition, shelter and clothing
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate care-givers)
- ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

In addition to these four types of abuse there are safeguarding issues that can put children and young people at risk of harm. Behaviours linked to issues such as drug taking, alcohol abuse, deliberately missing education and sexting (also known as youth produced sexual imagery) put children in danger (Keeping Children Safe in Education, 2021).

Self-injury and Self Harm

Self-injury can take many different forms but in general terms is the act of deliberately causing harm to oneself either by causing a physical injury or by putting oneself in dangerous situations and/or self-neglect. Self-injury is generally a coping mechanism; there can be many reasons why a person chooses to self-injury, but it is important that staff/volunteers consider the possibility of a link between self-injury and trauma/abuse.

When dealing with self-injury and self-harm staff should:

- Show that they care about the person behind the self-injury
- Show concern for the injuries themselves and ensure any needed first aid in provided



- Make it clear it is OK to talk about
- Acknowledge how scary the thought of not self-harming may be Explore what are their support networks?
- Report to Lead Safeguarding Officer and seek further advice

Child on Child abuse

All staff/volunteers need to be aware that children can abuse other children (often referred to as peer on peer abuse). This is most likely to include, but may not be limited to:

- Bullying (including cyberbullying);
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- Sexual violence, such as rape, assault by penetration and sexual assault;
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse;
- 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. It is now a criminal offence;
 Sexting (also known as youth produced sexual imagery); and
- Initiation/hazing type violence and rituals.

Sexual harassment

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

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

- Sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- Sexual "jokes" or taunting;
- Physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes
- Online sexual harassment.

This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence. It may include:

- Non-consensual sharing of sexual images and videos;
- Sexualised online bullying;
- Unwanted sexual comments and messages, including, on social media;
- Sexual exploitation; coercion and threats;
- Upskirting; and



• Pulling down shorts or pants as a joke.

Serious violence and gangs related behaviour

All staff/volunteers should be aware of indicators, which may signal that children/young people are at risk from, or are involved with serious violent crime, gang related behaviour or associations. It's not illegal for a young person to be in a gang as there are different types of gangs" and not all "gangs are dangerous.

However, some children and young people that are involved with gangs may need help and support as the gang membership can be linked to illegal activity. Particularly organised criminal gangs that are involved in trafficking, drug dealing and serious violence. Young people might be victims of violence or pressured into doing things like stealing or carrying drugs or weapons.

Indicators may include a change in friendships or relationships with older individuals or groups, signs of self-harm or a significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

How are young people recruited?

A child or young person might be recruited into a gang because of where they live or because of who their family is. They might join because they don't see another option or because they feel like they need protection. Children and may become involved in gangs for many reasons, including:

- Peer pressure and wanting to fit in with their friends.
- They feel respected and important.
- They feel protected from other gangs or bullies.
- They want to make money and are promised rewards.
- They want to gain status and feel powerful.
- They have been excluded from school and feel they don't have a future or any other option.
- To support their family.

Organised criminal gangs groom children and young people because they are less suspicious and are given lighter than adults.

Studies show that a child/young person is more at risk of being recruited if:

- They have been excluded from school.
- They have special education needs.
- There are problems at home like neglect, domestic abuse or sexual abuse.
- They have problems with their mental health.
- They live in existing gang territory.



All staff/volunteers must be aware of the associated risks and report any concerns to the Lead Safeguarding Officer.

Child Criminal Exploitation: County Lines

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity, drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs.

Like other forms of abuse and exploitation, county lines exploitation:

- Can affect any child or young person (male or female) under the age of 18 years;
- Can affect any adults at risk over the age of 18 years;
- Can still be exploitation even if the activity appears consensual;
- Can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- Can be perpetrated by individuals or groups, males or females, and young people or adults; and
- Is typified by some form of power imbalance in favour of those perpetrating the exploitation.
 Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

Child Sexual Exploitation

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity:

- In exchange for something the victim needs or wants, and/or
- For the financial advantage or increased status of the perpetrator or facilitator. The victim
 may have been sexually exploited even if the sexual activity appears consensual. Child sexual
 exploitation does not always involve physical contact; it can also occur through the use of
 technology.

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

- Can affect any child or young person (male or female) under the age of 18 years, including 16- and 17-year olds who can legally consent to have sex;
- Can still be abuse even if the sexual activity appears consensual;
- Children with learning disabilities are more vulnerable to sexual exploitation than other children
- Can include both contact (penetrative and non-penetrative acts) and noncontact sexual activity;
- Can take place in person or via technology, or a combination of both;



- Can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;
- May occur without the child or young person's immediate knowledge (e.g. through others copying videos or images they have created and posted on social media);
- Can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse; and
- Is typified by some form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.

Some of the following signs may be indicators of child sexual exploitation:

- Children who appear with unexplained gifts or new possessions and/or money;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- · Children who suffer from changes in emotional well-being;
- · Children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late;

Research highlights that children and young people who identify as lesbian, gay, bisexual, transgender, questioning, plus (LGBTQ+) face numerous factors that may result in them being vulnerable to, or victims of, child sexual exploitation (CSE).

Young people identifying as LGBTQ+ often experience additional challenges as a result of their sexual orientation or gender identity or questioning process. Given that, in some parts of society, there is still a lack of acceptance and understanding, children and young people who identity as anything other than heterosexual, often feel limited or constrained in their ability to explore their identity or gain appropriate information and advice as their heterosexual or heteronormative peers. That is not to say that young people who identify as LGBTQ+ are more at risk of CSE, or that they are abused through CSE because of their sexuality or gender identity, however they may face additional vulnerabilities, barriers to disclosure and a lack of access to appropriate advice and support.

Child Trafficking

Child trafficking is a very serious issue which can have a devastating and lasting impact on its victims. Children can be trafficked into, within and out of the UK. 'Trafficking of persons means the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.



Female genital mutilation (FGM)

Includes all procedures involving the partial or total removal of the female external genitalia or other injury to the female genital organs for non-medical reasons. FGM is also sometimes known as 'female genital cutting' or 'female circumcision'. However, circumcision is not an appropriate term. Communities tend to use local names for referring to this practice including 'sunna'. FGM is illegal in the UK, a form of child abuse and a grave violation of the human rights of girls and women with long-lasting harmful consequences.

Forced marriage

Forced Marriage is where one or both people do not (or in cases of people with learning disabilities, cannot) consent to the marriage and pressure or abuse is used. The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) or emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family). Financial abuse can also be a factor.

So-called 'honour-based' violence

So-called 'honour-based' violence (HBV) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBV are abuse (regardless of the motivation) and should be handled and escalated as such. Staff and volunteers need to be alert to the possibility of a child/young person being at risk of HBV, or already having suffered HBV.

Faith abuse

Faith abuse includes: belief in concepts of witchcraft and spirit possession, demons or the devil acting through children or 'leading them astray' (traditionally seen in some Christian beliefs), the evil eye or djinns (traditionally known in some Islamic faith contexts) and dakini (in the Hindu context); ritual or muti murders where the killing of children is believed to bring supernatural benefits or the use of their body parts is believed to produce potent magical remedies; and use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation. This is not an exhaustive list and there will be other examples where children have been harmed when adults think that their actions have brought bad fortune, such as telephoning a wrong number which is believed by some to allow malevolent spirits to enter the home.



Domestic abuse

The cross-government definition of domestic violence and abuse is:

"Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality."

The abuse can encompass but is not limited to:

- Psychological;
- Physical;
- Sexual;
- · Financial; and
- Emotional.

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children and young people. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

Child to Parent Violence (CPV)

Child on Parent Violence (CPV) or Adolescent to Parent Violence and Abuse (APVA) is any behaviour used by a young person to control, dominate or coerce parents. It is intended to threaten and intimidate and puts family safety at risk. Whilst it is normal for adolescents to demonstrate healthy anger, conflict and frustration drawing their transition from childhood to adulthood, anger should not be confused with violence. Violence is about a range of behaviours including non-physical acts aimed at achieving ongoing control over another person by instilling fear.

Children Missing from Home

Children who go missing from home are vulnerable to abuse and violence and need to be safeguarded. Children go missing for a number of reasons, but in general, the factors preceding missing episodes are:

- Arguments and conflicts
- Poor family relationships
- Abuse and neglect
- Boundaries and control Immediate risks
- · No means of support or legitimate incomes leading to high-risk activities
- Becoming a victim of abuse.
- · Missing out on schooling and education
- Increased vulnerability



Children and young people with a disability or additional health needs are a particularly vulnerable group as signs of abuse and neglect may be masked or misinterpreted as being due to underlying impairments. Disabled young people are much more likely than non-disabled children to experience abuse as:

- They have fewer outside contacts than other young people;
- May receive personal care, possibly from several carers;
- · Have limited capacity to resist or avoid abuse;
- Have communication difficulties that may make it difficult to tell others what is happening
- Be inhibited about complaining because of a fear of losing services;
- Be especially vulnerable to bullying and intimidation and /or, abuse by their peers.

Private Fostering

Private fostering occurs when a child under the age of 16 (under 18, if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer. Such arrangements may come to the attention of staff and volunteers through the normal course of their interaction, and promotion of learning activities, with children. For more information on private fostering see section 6 of the safeguarding toolkit.

Adults at Risk

The Care Acts 2014 makes it clear that specific adult safeguarding duties apply to any adult who:

- Has care and support needs and
- Is experiencing, or is at risk of, abuse or neglect and
- Is unable to protect themselves because of their care and support needs. An adult with care and support needs may be:
- A person with a physical disability, a learning difficulty or a sensory impairment
- Someone with mental health needs, or a personality disorder
- A person with a long-term health condition
- Someone who misuses substances or alcohol to the extent that it affects their ability to manage day-to-day living.

This is not an exhaustive list.

Types of abuse for adults at risk:

Physical abuse

Including assault, hitting, slapping, pushing and misuse of medication, restraint or inappropriate physical sanctions.



Domestic violence or abuse

This is an incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by someone who is, or has been, an intimate partner or family member.

Sexual abuse

Any form of sexual activity that the adult does not want and or have not considered. Including:

- A sexual relationship instigated by those in a position of trust
- Rape
- Indecent exposure
- Sexual harassment
- Inappropriate looking or touching
- Sexual teasing or innuendo
- Sexual photography
- Subjection to pornography or witnessing sexual acts
- · Indecent exposure and sexual assault
- Sexual acts to which the adult has not consented or was pressured into consenting.

Psychological or emotional abuse

This abuse may involve the use of:

- Intimidation
- Indifference
- Hostility
- Rejection
- Threats of harm or abandonment
- Humiliation
- Verbal abuse such as shouting, swearing or the use of discriminatory and or oppressive language.
- A deprivation of contact
- Blaming, controlling, coercion
- Harassment
- Cyber bullying
- Isolation

Financial or material abuse

Including:

- Theft
- Fraud
- · Internet scamming



Coercion in relation to an adult's financial affairs or arrangements, including in connection
with wills, property, inheritance or financial transactions, or the misuse or misappropriation
of property, possessions or benefits

Modern slavery

Encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Discriminatory abuse

Abuse can be experienced as harassment, insults or similar actions due to race, religion, gender, gender identity, age, disability, sexual orientation.

Organisational or institutional abuse

Including neglect and poor care practice within an institution or specific care setting such as a residential care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

This may include:

- Ignoring medical, emotional or physical care needs
- Failure to provide access to appropriate health, care and support or educational services
- The withholding of the necessities of life, such as medication and adequate nutrition
- Wilful failure to intervene or failing to consider the implications of non-intervention in behaviours which are dangerous to them or others
- Failure to use agreed risk management procedures

Neglect, self-neglect and/or acts of omission

Including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

This covers a wide range of behaviour;

- Neglecting to care for one's personal hygiene health or surroundings resulting in a risk that impacts on the adult's wellbeing.
- Hoarding

See Appendix 2 for further information on signs of abuse



2.2 Radicalism and Involvement in Terrorism

The current threat from terrorism is considered to be real and 'substantial' (meaning the threat of an attack remains a strong possibility) and can involve the exploitation of young people and adults at risk. Nationally this now sits within safeguarding therefore those agencies that have the 'duty to prevent' will be expected to demonstrate activity in the following areas:

- Assessing the risk of children being drawn into terrorism
- Demonstrate that they are protecting children and young people from being drawn into terrorism by having robust safeguarding policies
- Ensure that their safeguarding arrangements take into account the policies and procedures of the Local Safeguarding Children Board
- Make sure that staff have training that gives them the knowledge and confidence to identify children at risk of being drawn into terrorism, and to challenge extremist ideas which can be used to legitimise terrorism
- Expected to ensure children are safe from terrorist and extremist material when accessing the internet

The following are definitions of terrorism, extremism and radicalisation:

Terrorism is defined by the Terrorism Act 2000 as:

"An action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be deigned to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause."

Extremism is defined in the national Counter-Terrorism Strategy (CONTEST) as:

"A 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. It also includes calls for the death of members of our armed forces, whether in this country or overseas."

Radicalisation is defined in the CONTEST Strategy as:

"The process by which a person comes to support terrorism and forms of extremism leading to terrorism."

The following are examples of recognised offences in relation to terrorism, extremism and radicalisation:

- murder or soliciting murder;
- committing, preparing or instigating acts of terrorism;
- incitement to commit acts of terrorism overseas;
- encouragement of terrorism;
- inciting racial or religious hatred or hatred because of sexual orientation;



- inviting support for a proscribed organisation;
- · terrorist financing offences;
- · dissemination of terrorist publications;
- offences of encouragement and dissemination using the internet.

The CONTEST strategy focuses on 4 strands: Pursue, Prevent, Protect and Prepare, it is the Prevent strategy that is of relevance in safeguarding young people and adults at risk. The Prevent strategy has three key objectives:

- Ideology Challenging the ideology that supports terrorism and those who promote it;
- **Individuals** Protect vulnerable people from being drawn into terrorism and ensure they are given appropriate advice and support; and
- Institutions Supporting sectors and institutions where there are risks of radicalisation

Challenging the ideology includes being proactive in promoting values such as: democracy, the rule of law, equality of opportunity, freedom of speech, and the universal right to freedom from persecution. There is a need for local communities and organisation to support this by focusing focus on those most susceptible to terrorist propaganda; it should not be assumed that Muslims are any more vulnerable to radicalisation than other faith or ethnic groups.

In terms of protecting individuals key points made are:

- radicalisation is a process not an event, and it is possible to intervene in this to prevent vulnerable people being radicalised
- there is a need to ensure that activities are proportionate, and focused upon people at risk
- activity needs to address all forms of terrorism. It is not just the responsibility of the police, but also local authorities and other partners; and
- programmes relating to this are comparatively new, and evidence of impact is limited. The Government is committed to research and evaluation to demonstrate what works and inform the development of best practice.

Channel is a multi-agency process that evaluates referrals of individuals at risk of radicalisation and decides on the most appropriate action. It involves assessing the nature and the extent of the potential risk and, where necessary, providing an appropriate support package tailored to the individual's needs. Supporting those most at risk of being radicalised is about diverting people away from potential risk at an early stage which prevents them from being drawn into criminal activity linked to terrorism not about prosecution. At Mahdlo we have a clear role in providing diversionary activities as well as targeted support services.

If you have a concern about a young person and do not know what to do please follow the Mahdlo safeguarding reporting flow chart in Appendix 3



3.0 PROCEDURE

3.1 What to do if you suspect abuse

Where you suspect a child or adult at risk is being abused or there is potential for harm you should discuss your concerns with Manager and then Mahdlo's Lead Safeguarding Officer who will help decide what action should be taken. Furthermore, seek advice where needed from the Duty & Assessment Service.

If there is a real concern your line manager or the Safeguarding Officer will contact children's services and/or the Police. They will need your support in referring it to ensure the details are recorded correctly. If after discussing it you no longer have concerns a note may be made on individual case files in case concerns are raised again in the future.

In all safeguarding instances you should alert the safeguarding officer, failure to do so many results in a disciplinary.

See the flow chart in Appendix 3 for full details of the process.

3.2 What to do if a young person tells you about abuse

If a young person/ adult at risk makes a disclosure about abuse or you suspect they may be about to it is imperative they understand you cannot keep this 'secret' but that you have a duty to report it to other professionals who will help keep them safe. Be honest and open about who you will speak to and why.

You should find a quiet place to talk where they feel comfortable. Ensure you give them the time they need to talk but be aware they will need to give a full account to Children's Social Care so avoid subjecting them to lengthy or multiple 'interviews' as it can confuse and jeopardise evidence. Try to keep eye level equal or lower than theirs.

Believe what they are saying and listen carefully to what they say and how they say it, writing down the exact words that they use.

Non-recent historic abuse

Non-recent child abuse, sometimes called historical abuse, is when an adult was abused as a child or young person under the age of 18. Non-recent historic abuse refers to one of 3 situations:

- 1) An adult making an allegation of abuse when they were under 18 years of age, that occurred at least 1 year before it was reported.
- 2) A child making an allegation of abuse that occurred at least 1 year before it was reported.
- 3) Someone reports an allegation, on behalf of someone else, relating to an offence committed over a year ago. NSPCC (2018).



Such disclosures can occur after long periods of time as the complainant may now feel comfortable that they are no longer at risk, have the confidence to make an allegation that will be believed, become aware that there have been other reports, or feel they need closure to move on. Whatever the motive, and however long ago the allegation, action must be taken because:

- 1) The alleged may not have been an isolated incident.
- 2) It may be part of a wider abuse situation.
- 3) The person(s) may still be abusing individuals and/or working with children. 4. There may be ongoing legal action.

Should an allegation or disclosure be made to it is important to record and report such information as you would if it were a current situation. This includes allegations about staff or volunteers that no longer works/volunteers at Mahdlo Youth Zone and incidents that involved young people that no longer attend Mahdlo.

Golden Rules

Remember it is not the duty of staff and volunteers to investigate the concern, but it is their responsibilities to gather as much information as possible

The '5Rs' underpin these reporting procedures as follows:

- Recognise concerns that a child/young person is being harmed or might be at risk of harm.
- Respond appropriately to a child/young person who is telling you what is happening to them.
- Refer the concerns on to the Lead Safeguarding Officer/Deputy or straight to the emergency services (if the incident warrants this)
- Record the concerns appropriately and any subsequent action taken
- Resolution and escalation are the responsibility of the Lead Safeguarding Officer to follow up referrals made to the authorities and if necessary, escalate concerns if identified risks remain.

3.3 When asking questions to clarify or establish a potential safeguarding concern, adults should:

- Avoid leading questions. A leading question is one which implies the answer or assumes facts that are likely to be in dispute e.g. 'was it your dad that hit you?'. Leading questions could influence the child's answer and could also significantly distort the child's memory.
- Make use of open ended questions, as research and practice shows that the most reliable and detailed answers from children of all ages arise from open-ended questions.
- An open-ended question is one that is worded so that the child is able to provide more
 information about an event in a way that is not leading, suggestive or putting them under
 pressure.

Open questions that can be used are how, who, when, where?



Questions beginning with the phrases 'tell me', or the words 'describe' or 'explain' are useful examples of open ended questions:

Tell me what happened, tell me who was there? Explain what you mean when you say...? Describe the place to me.

- · Stay calm and be reassuring
- Remember that closed questions narrow down a child's response and only tend to allow answers of one word or a short phrase e.g. 'did this happen yesterday?'.
- Ask only one question at a time, be patient and allow the child sufficient time to complete their answer before asking a further question.
- Keep questions as short and simple in construction as possible. Each question should contain only one point.
- Avoid the temptation to fill pauses by asking additional questions or making irrelevant comments.
- Remember that the younger the child, the shorter and more simply phrased the question should be.
- Consider the child's stage of development. Many concepts that are taken for granted in adult conversation are only acquired gradually as children develop. Concepts with which children have difficulty include: dates and times, length and frequency of events.
- Try to make use of information that the child has already provided.
- Avoid assumptions or interpretations of what the child means.
- Do not show disdain or horror at what is being said, instead be sympathetic.
- Reassure them that they have done the right thing in telling you and they are not to blame.
- Acknowledge how hard it was for them to tell you this.
- Do not criticise the perpetrator, this may be someone they love.
- Do not promise confidentiality, reassure the young person that they have done the right thing, explain who you will have to tell and why; it is important that you do not make promises that you cannot keep

Remind them you will have to share this information with the appropriate professionals but that it will be kept as confidential as possible.

Inform the LSO immediately who will work with you to contact the Duty Social Care Team/or the Police and complete all necessary paperwork (see Appendix 4). If the situation is an emergency and neither the Safeguarding Co-ordinator or Deputy are available you should telephone Children's Social Care directly or, if out of hours, the Emergency Duty Social Care team or Police Child Protection Team.

Remind them you will have to share this information with the appropriate professionals but that it will be kept as confidential as possible.

The young person should be encouraged to play an active role in the disclosure of information relating to them. However, if they do not feel able, the LSO will take the decision to disclose confidential information without the young person's consent.



Do not discuss with colleagues or in a space where you can be overheard.

Remember it is not your responsibility to decide whether or not abuse has occurred, this is the role of the professional child protection agencies. Do not attempt any form of examination and do not photograph any injuries.

3.4 What to do if an allegation of abuse is made involving staff or a volunteer

Abuse is defined as when a person has:

- Behaved in a way that has harmed a child/young person, may have harmed a child/young person or might lead to a child/young person being harmed;
- Possibly committed or is planning to commit a criminal offence against a child/young person or related to a child/young person or;
- Behaved towards a child/young person in a way that indicates s/he is or would be unsuitable to work with children/young people.

If a young person makes an allegation of abuse against a Mahdlo staff member or volunteer, you should report this immediately to their line manager (or Volunteer Co-ordinator) and the Lead Safeguarding Officer. If it is against a member of staff from another organisation report it directly to the Lead Safeguarding Officer.

You should assure the young person who made the allegation that this is a serious matter, and you will follow it up with the Lead Safeguarding Officer. Update the young person of what action has been taken.

The Lead Safeguarding Officer will make a referral directly to the Borough Child Protection Officer/ Local Authority Designated Officer who will advise on the most appropriate course of action.

Mahdlo has a complaints procedure which is an open process enabling any staff, volunteers, other adults and young people to voice concerns about unacceptable and/or abusive behaviour towards children.

Mahdlo has a Whistleblowing Policy that outlines the course of action staff or volunteers can take if there are major concerns over apparent wrong doing by Mahdlo without fear of detrimental treatment.

3.5 What to do if you have witnessed a child being abused

If you have witnessed an incidence of abuse or suspected abuse inform the Lead Safeguarding Officer who will support you to make the appropriate referral to the Child Protection Social Work team and/or the Police and complete all necessary paperwork.



3.6 What to do if you suspect radicalisation

If you have concerns that a young person or adult at risk is at risk of radicalisation or involvement in terrorism speak to the Lead Safeguarding Officer who will help you decide whether it is appropriate to make a referral to the Channel lead and complete all necessary paperwork.

3.7 Informing parents

The Lead Safeguarding Officer will inform the young person's family/carer that an incident has taken place and/or a referral is being made unless: that would either place the young person at greater risk, place the member of staff at risk or impede the investigation; sexual abuse or Munchausen's syndrome is suspected; or multiple abuse is suspected. In these cases Social Services or the Police will decide whether or not to inform the parents. An inability to inform parents should not delay or prevent a referral being made. For further information please follow guidance in appendix 3 What to do if you have concerns of abuse when working with a child or young person working for Mahdlo.

3.8 Contact numbers

Social Services Contact Numbers

Children under 16	Children Assessment Team (Social Work)	0161 770 7777 (9-5pm) <u>Child.mash@oldham.gov.uk</u>			
Young people over 16yrs and adults at risk	Social Services After Care Team	0161 770 7777 Adult.mash@oldham.gov.uk			
Children with Disabilities Team		0161 627 1749			
Outside work hours Emergency Duty Team (Children and adults at risk)		0161 770 6936			
Police Contact numbers					
Family Support Unit		0161 856 9361			
Family Support Unit (Answer Phone 24 hours)		0161 856 8962			



Uniformed Police (24hours)		0161 872 5050		
Radicalism / involvem	nent in terrorism			
Greater Manchester Police Channel Coordinator for Oldham		Primary contact: Channel Co-ordinator 0161 856 6368 / 0782 797 9104 Alternative contact: Greater Manchester Channel Coordinator Tel: 0161 856 6345		
Oldham Council Prevent lead and Channel Coordinator		Primary contact: Neil.consterdine@oldham.gov.uk		
Other useful contacts Oldham LSCB	Safeguarding manager	0161 770 1524 or olscb@oldham.gov.uk		
Local Authority Designated Officer		Colette Morris 0161 770 8870		
NSPCC		Child Protection Helpline 0808 800 5000 Asian Child Protection Helpline 0800 096 7719 For Dead of Hard of Hearing 0800 096 7719		
Kidscape	Protecting children from abuse or bullying	020 7730 3300 Helpline 0844 120 5204		
Criminal Records Bureau		Helpline 0870 90 90 811		

4.0 CONFIDENTIALITY

In any circumstance that constitutes a child protection issue (i.e. where there is a suspicion or information that a young person is suffering significant harm or at risk of significant harm) all staff and volunteers must be clear that they have a duty to refer the concern to



the Social Services Department or the Police. Whilst staff and volunteers have a responsibility to respect and maintain the confidentiality of an individual young person, their primary responsibility is to ensure the safety of the young person. Therefore in a child protection situation they cannot maintain confidentiality and must make this boundary clear to the young person.

We understand that perceptions of risk will vary between individuals and as such will affect how people respond to situations.

As a general principle, where 'risky' behaviour is observed of any nature (e.g. involving alcohol, drugs, inappropriate sexual relations or criminal activity), a worker must tackle this directly with the young person concerned, or at the first appropriate opportunity. If a worker feels that the behaviour is likely to cause immediate harm to the young person or others, it may be reported to an appropriate body such as the Police, even if this breaches their confidentiality. It should be noted however that risky behaviour does not automatically mean there is risk of significant/immediate harm; for example drug use would become an area of concern if it involved unsafe injecting, sexual exploitation or debt with dealers. Such situations will involve an element of discretion as to what constitutes immediate harm. To ensure consistency and appropriateness of approach by all staff and volunteers, different scenarios will be reviewed through case work, project and team meetings.

All staff and volunteers will maintain confidentiality around contraception advice and disclosure of sexual conduct acknowledging the Fraser guidelines and Gillick competency principle. (Please see appendix 5)

It is not appropriate for staff or volunteers to discuss sensitive issues about young people or other staff or volunteers in the presence of other young people.

5.0 STAFF RECRUITMENT AND TRAINING

Due to the nature of its work and its commitment to safeguarding, Mahdlo is committed to operating a safer recruitment process and will ensure that a robust approach is taken to making pre-employment enquiries. No employee or volunteer will commence work at Mahdlo until those enquiries have been satisfactorily completed.

The law requires specific checks to be carried out if the employee or volunteer (including trustees) will be working in a regulated activity with children and young people and Mahdlo will ensure particular rigour and vigilance when recruiting people in such roles.

To minimise risk, appropriate references are taken at the point of appointment for all Mahdlo staff and volunteers.

Because of the nature of its work, Mahdlo requires all employees and volunteers (including trustees) to have an enhanced DBS check with a barred list check. An individual cannot start work with Mahdlo without an enhanced check and checks will be carefully monitored and re



checks will be done at identified intervals. Mahdlo requires all employees and volunteers to provide their up to date DBS certificate.

Adverse information contained in a disclosure will not automatically act as a bar to employment. The disclosure may contain details of spent convictions irrelevant to employment with children or relevant adults and care is taken not to treat an adverse entry on a disclosure as an automatic bar to employment.

In cases where adverse information is received, a report will be produced in the format attached at appendix 6 so that the circumstances can be considered and a decision made on whether the recruitment can proceed.

At the start of employment all staff and volunteers must undertake an induction programme that includes safeguarding and training on the prevention and detection of child abuse (including awareness raising, signs and symptoms, disclosure and working with young people who have been abused) and a full briefing on the safeguarding policy and procedures. Refresher training courses on child protection issues is made available to all staff and volunteers at least every two years, however, anyone wishing clarification or further training support can request this from the Safeguarding Officer at any time. The Lead Safeguarding Officer and Deputy Safeguarding Officer should undertake appropriate Area Child Protection Committee approved training once every two years as a minimum.

Safeguarding, and in particular child protection, practice will be monitored through the Performance Development Plan and Appraisal system, staff supervision 1-2-1s and team meetings to develop breadth and consistency of understanding in accordance with their roles and responsibilities.

6.0 PROMOTING POSITIVE BEHAVIOUR AND CODES OF CONDUCT

6.1 Introduction

All Mahdlo staff and volunteers should conduct their work with children, young people and their colleagues in a way that promotes Mahdlo's values and principles and creates a safe environment to support young peoples' development. In doing this they will:

- Be a good role model
- Actively listen to children and young people
- Treat each young person with respect and dignity
- Promote responsibility and honesty
- Promote self-esteem, positive relationships and self-discipline
- Be consistent including responding consistently to inappropriate behaviour
- Encourage, reinforce and reward good behaviour and praise as often as possible
- Use positive language



6.2 Duty of Care

All adults who work with, and on behalf of children are accountable for the way in which they exercise authority; manage risk; use resources; and safeguard children and young people.

Whether working in a paid or voluntary capacity, these adults have a duty to keep children and young people safe and to protect them from sexual, physical and emotional harm. Children and young people have a right to be treated with respect and dignity. It follows that trusted adults are expected to take reasonable steps to ensure the safety and wellbeing of children and young people. Failure to do so may be regarded as neglect.

The duty of care is in part, exercised through the development of respectful and caring relationships between adults and children and young people. It is also exercised through the behavior of the adult, which at all times should demonstrate integrity, maturity and good judgement.

Everyone expects high standards of behavior from adults who work with children and young people. When individuals accept such work, they need to understand and acknowledge the responsibilities and trust inherent in that role.

Employers also have a duty of care towards their employees, both paid and unpaid, under the Health and Safety at Work Act 1974. This requires them to provide a safe working environment for adults and provide guidance about safe working practices. Employers also have a duty of care for the well-being of employees and to ensure that employees are treated fairly and reasonably in all circumstances. The Human Rights Act 1998 sets out important principles regarding protection of individuals from abuse by state organisations or people working for those institutions. Adults who are subject to an allegation should therefore be supported and the principles of natural justice applied.

The Health and Safety Act 1974 also imposes a duty on employees to take care of themselves and anyone else who may be affected by their actions or failings. An employer's duty of care and the adult's duty of care towards children should not conflict. This 'duty' can be demonstrated through the use and implementation of these guidelines.

This means that adults should:

- understand the responsibilities, which are part of their employment or role, and be aware that sanctions will be applied if these provisions are breached
- always act, and be seen to act, in the child's best interests
- avoid any conduct which would lead any reasonable person to question their motivation and intentions
- take responsibility for their own actions and behavior This means that employers should:
- ensure that appropriate safeguarding and child protection policies and procedures are adopted, implemented and monitored
- ensure that codes of conduct/practices are continually monitored and reviewed



- ensure that, where services or activities are provided by another body, the body concerned has appropriate safeguarding policies and procedures
- foster a culture of openness and support
- ensure that systems are in place for concerns to be raised
- ensure that adults are not placed in situations which render them particularly vulnerable
- ensure all adults have access to and understand this guidance and related, policies and procedures
- ensure that all job descriptions and person specifications clearly identify the competences necessary to fulfil the duty of care

Additional information:

- Staff should keep within professional boundaries if they see young people while in their own personal time outside of their working hours
- Staff should never befriend young people on social media however; if there is link through personal contacts i.e. they are family, cousins, children of friends, this must be disclosed at the first instance and professional boundaries must always remain while at work and this should be communicated to the young person
- It is never appropriate for staff to have a personal relationship with any young person that is a member of Mahdlo even though they are of a legal age. Mahdlo take a firm stance upon this and it is deemed as a breach of Duty of Care. This includes young leaders who support sessions and any young volunteers.
- If staff are volunteering or working for other agencies while working for Mahdlo this must be
 disclosed to your line manager. If this is with another youth provider then an agreement of
 professional conduct must be signed by both parties to ensure professional boundaries and
 roles are not blurred

See also Social Media, Electronic Communications, Safeguarding Workers policies and the following table:

Personal Mobile	Phone X	Text X	BBM X	Whatsapp X	Snapchat X
Work Mobile	Phone √	Text √	BBM X	Whatsapp X	Snapchat X
Social Media	Mahdlo Facebook/Twitter √		Personal Facebook/Twitter/Instagram X		
Email	Mahdlo email √		Personal email X		
Face-to-Face	Outside Mahdlo (Must adhere to Safeguarding Workers Policy)	1-2-1 engagement √ (Must adhere to Safeguarding Workers Policy)	Home √ (Must adhere to Safeguarding Workers Policy)		Non-work-related social situation X

6.3 Power and Positions of Trust

As a result of their knowledge, position and/or the authority invested in their role, all adults working with children and young people are in positions of trust in relation to the young people in their care. Broadly speaking, a relationship of trust can be described as one in



which one party is in a position of power or influence over the other by virtue of their work or the nature of their activity. It is vital for all those in positions of trust to understand the power this can give them over those they care for and the responsibility they must exercise as a consequence of this relationship¹.

A relationship between an adult and a child or young person cannot be a relationship between equals. There is potential for exploitation and harm of vulnerable young people. Adults have a responsibility to ensure that an unequal balance of power is not used for personal advantage or gratification.

Adults should always maintain appropriate professional boundaries and avoid behaviour which might be misinterpreted by others. They should report and record any incident with this potential.

Where a person aged 18 or over is in a specified position of trust² with a child under 18, it is an offence for that person to engage in sexual activity with or in the presence of that child, or to cause or incite that child to engage in or watch sexual activity.

This means that adults should not:

- use their position to gain access to information for their own or others' advantage
- use their position to intimidate, bully, humiliate, threaten, coerce or undermine children or young people
- use their status and standing to form or promote relationships which are of a sexual nature
- his section is underpinned by the following government Polices and Law

6.4 Touch

Youth / Activity worker / Volunteer and young people

In the majority of cases staff and volunteers should avoid physical contact with young people. We do however recognise that there will be incidences where a policy of non-contact is not practical. To ensure that any action carried out is not seen as inappropriate, or interpreted as sexual contact, all staff and volunteers must consider the following aspects carefully:

- Their relationship with the group
- Their relationship with the individual
- The particular circumstances
- Non verbal messages (e.g. body language) they are receiving in response to actions

² Sexual Offences Act 2003.Sect 16-19 re-enacts and amends offence of abuse of position of trust



¹ Caring for Young People and the Vulnerable. Guidance for Preventing Abuse of Trust Home Office

• Whether there are other people present, particularly other staff, or volunteers.

Depending on the type of work you are doing, it is best practice not to be on your own with individual young people for prolonged periods of time out of sight of other staff and volunteers.

Similarly any physical contact that a young person may initiate towards the youth worker will be carefully judged for appropriateness and where needed the young person should be reminded of boundaries.

Physical Restraint

In exceptional circumstances, where there is immediate risk of injury, a member of the team may need to take any necessary action that is consistent with the concept of 'reasonable force'.

Before intervening physically, team members should wherever practicable, tell the young person who is misbehaving to stop, and what will happen if they do not. The team member should continue to attempt to communicate with the young person / adult at risk (s) throughout the incident and should make it clear that physical contact or restraint will stop as soon as it ceases to be necessary.

In such cases only the minimum force necessary will be used whilst maintaining a calm and measured approach.

Team members of Mahdlo should not put themselves at risk of injury. In these circumstances, the team member should remove the other young people who may be at risk and seek assistance from a colleague or colleagues and if necessary telephone the police.

Team members should inform the young people that they have sent for help. Until assistance arrives, team members should continue to attempt to defuse the situation orally and try to prevent the situation from escalating.

Types of Incidents

There are a wide variety of situations in which reasonable force might be appropriate, or necessary, to control or restrain young people.

They will fall into three broad categories:

- Where action is necessary in self-defence or because there is an imminent risk of injury;
- Where there is a developing risk of injury, or significant damage to property;

Examples of situations that fall within one of the two categories are:



- A young person attacks a member of the team or another young person;
- Young people are fighting;
- A young person is engaged in deliberate damage or vandalism to property;
- A young person is causing, or at risk of causing, injury or damage by accident, by rough play, or by misuse of dangerous materials or objects;
- A young person throws something that could be dangerous

Application of Force

Physical intervention can take several forms. It might involve team members:

- physically interposing between young people;
- blocking a young persons path;
- holding;
- pushing;
- pulling;
- leading a young person by the hand or arm;
- shepherding a young person away by placing a hand in the centre of the back; or (in extreme circumstances) using more restrictive holds.

In exceptional circumstances, where there is an immediate risk of injury, a member of the team may need to take any necessary action that is consistent with the concept of 'reasonable force': for example to prevent a young person running off a pavement onto a busy road, or to prevent a young person hitting someone, or throwing something.

In other circumstances team members should not act in a way that might reasonably be expected to cause injury, for example by:

- Holding a young person by the neck or collar, or in a way that may restrict their ability to breathe
- Slapping punching or kicking the young person
- Tripping up a young person
- Holding or pulling a young person by the hair or ear
- Holding a young persons face down on the ground

The Range of Interventions: How may young people be Restrained?

In the unlikely event of a team member needing to use restrictive physical intervention, the following points should be noted:

- Restrictive physical intervention must be consistent with the concept of proportionality and reasonable force.
- The circumstances must warrant the use of force;



- The degree of force employed must be in proportion to the circumstances of the incident and the minimum to achieve the desired result.
- Avoid causing pain or injury;
- Do not hold a young person face down on the ground or in any position that might increase the risk of suffocation.

Recording Incidents

Any member of the team involved in an incident requiring physical intervention must inform their Line Manager and write a detailed report of the incident to help prevent any misunderstanding or misrepresentation of the situation.

Where Physical Contact may be Acceptable

There are occasions when physical contact with a young person may be necessary, for example when providing first aid. Young children and children with special educational needs may need staff to provide physical prompts to help.

Young people to young people

We believe that general physical contact is a normal behaviour pattern amongst groups of young people. Physical contact will therefore be accepted by staff and volunteers as long as it is freely engaged in by both parties and does not carry any aggressive, bullying or derogatory undertones. Staff and volunteers must intervene in these circumstances. No form of sexual contact between young people will be allowed during sessions. Staff and volunteers will be required to use a certain degree of discretion to interpret what constitutes sexual contact based on their knowledge of the individuals and group interactions. If you have any uncertainty over the appropriateness of behaviour you should clarify with colleagues but generally you should err on the side of caution.

6.4 Smoking and Vaping

Staff and volunteers

All staff and volunteers must not smoke or vape in front of young people on the premises and when working across the borough. Any worker or volunteer who needs to smoke/vape must ensure that:

- it does not disrupt the flow or delivery of the session,
- they smoke/vape in a suitable location out of sight of the young people,
- the Mahdlo uniform is covered so they are not easily identifiable
- young people can still be appropriately supervised whilst they are out of sight.



Staff and volunteers must keep smoking and vaping breaks to a minimum (one every four hours is considered reasonable) and must work with colleagues to find a suitable solution to enable them to take a break which would not leave any young people or other staff and volunteers vulnerable.

Young People

Mahdlo does not allow smoking or vaping in sessions or on the hub premises, however we recognise that a number of the young people that we work with do smoke/vape; whilst they cannot smoke or vape during sessions or in the hub premises we recognise there may be instances where prohibiting the use may impede our work.

If young people wish to smoke/vape during youth work activity, staff and volunteers should use the following guidelines:

- Young people must never be allowed to smoke/vape inside buildings
- Young people must only smoke/vape at the designated smoking area (on a trip or outreach)
- If an outreach session is being delivered, young people must leave the session whilst they smoke; staff and volunteers should discourage this wherever possible
- During trips and residentials, comfort breaks will be provided when young people will be
 moving about independently. Staff and volunteers can accept that some young people will
 choose to smoke whilst out of sight of the group during these breaks. Staff and volunteers
 must ensure comfort breaks are provided in locations where young people will be safe if
 they move out of site to smoke, and that they have considered any other issues such as
 impacts on the general public.

6.5 Language

In line with Mahdlo values and principles we encourage all our staff and volunteers to use positive language with children, young people and their colleagues, and convey positive messages during conversations and interactions.

As a general principle swearing by any member of staff and volunteers or young person should be seen as inappropriate and should be challenged and discouraged wherever possible, in particular the 'f-word', 'c-word' and 't-word' are unacceptable swearwords.

We recognise that different words may be seen as swearing by different people and so staff and volunteers must use their discretion to judge what language is appropriate for particular situations. We also recognise that certain words may be used inadvertently for example as an exclamation following an injury but staff and volunteers must discourage it wherever possible.

Staff and volunteers must also challenge young people if they use words that may be legitimately used to describe a minority group in a negative or inappropriate context. Similarly, staff and volunteers should challenge the use of any term that could be deemed



by others as derogatory, regardless of whether it was used in a derogatory manner, it was used by people of the ethnicity/ gender that it refers to or is commonly used within their cultural references.

Staff and volunteers must clearly communicate this policy to young people as part of their membership and when setting ground rules, challenging any incidences of use in group sessions to broaden understanding about language and culture.

6.6 Anti Bullying Procedures

It is the policy of Mahdlo that any form of bullying or aggressive behaviour will not be tolerated and staff and volunteers must challenge this behaviour immediately. If staff and volunteers encounter problems where bullying behaviour continues they should implement the warning procedure which could result in the young person's exclusion from Mahdlo. Mahdlo's policy relating to preventing bullying and harassment will be clearly communicated through membership processes and targeted work. This policy extends to bullying between staff and volunteers. Any form of aggressive behaviour or bullying will not be tolerated and will lead to disciplinary action (see Disciplinary Policy). Some examples of where bullying or aggressive behaviour should be tackled are:

- Name calling either directly, about another young person or their family must be challenged immediately by staff and volunteers
- Derogatory behaviour must be challenged immediately by staff and volunteers with particular awareness of any discriminatory undertones
- Any sign of physical aggression must be stopped immediately by staff and volunteers even
 play fighting as this can be a bullying tactic or may escalate rapidly into a more serious
 incident. Staff and volunteers should initially try to address unacceptable physical contact
 verbally. If the young people do not respond, staff and volunteers should use blocking tactics
 to separate the young people, always vocalising their actions before intervening to prevent
 any interpretation of aggression.

We recognise that young people may use mobile phones and social media networks to bully others, so staff and volunteers must work to monitor this and encourage young people to speak to them about any concerns surrounding online activity.

Any staff found in breach of this code of conduct will be subject to disciplinary action in line with the Disciplinary policy and procedure.

7.0 HEALTH AND SAFETY

The Health and Safety Policy has additional information to ensure the safe operating of Mahdlo activities including risk assessment procedures and should be referred to alongside this Safeguarding Policy.



8.0 INSURANCE

Whilst Mahdlo's standard activity programme has been discussed with the insurers, any additional or unusual activity that could present a new risk or a risky situation should be discussed with the insurers (including details about the number of staff and volunteers involved, involvement of other organisations, who has overall responsibility for the young people, age range of young people involved and the location of the activity). It is important that Mahdlo refers to its insurers on the matter of working with young people to provide the level of information required by the insurers.

9.0 REVIEW

This policy will be reviewed annually in liaison with the Board, LSCB and our young people's development group to ensure compliance, relevance and adoption of recognised good practice.

APPENDIX 1

The definition of adults at risk is broad and includes anyone who:

- is living in residential accommodation, such as a care home or a residential special school;
- · is living in sheltered housing;
- is receiving domiciliary care in his or her own home;
- is receiving any form of health care;
- is detained in a prison, remand centre, young offender institution, secure training centre or attendance centre or under the powers of the Immigration and Asylum Act 1999;
- is in contact with probation services;
- is receiving a welfare service of a description to be prescribed in regulations;
- is receiving a service or participating in an activity which is specifically targeted at people
 with age-related needs, disabilities or prescribed physical or mental health conditions.
 (agerelated needs includes needs associated with frailty, illness, disability or mental
 capacity)
- · is an expectant or nursing mother living in residential care
- is receiving direct payments from a local authority/HSS body in lieu of social care services;
- requires assistance in the conduct of his or her own affairs



APPENDIX 2: POSSIBLE SIGNS OF ABUSE

The following are some possible signs of abuse. However it should be recognised that there could be genuine explanations; workers should be concerned about the signs but should not immediately assume abuse has occurred. Possible signs of abuse are not a simple matter of cause and effect; for example a young person who is abused may self-harm but not all young people who self-harm have been abused. Some young people being abused may show no signs at all. Any concerns you have should be discussed with the Safeguarding Coordinator or Deputy Co-ordinator.

Physical Abuse

- Unexplained injuries, bruises or burns particular if recurrent
- Improbable excuses given to explain injuries or refusal to discuss injuries or conflicting reasons for the injuries
- Untreated injuries
- Admission of excessive physical punishment
- Fear of parents being contacted or fear of going home
- Withdrawal from physical contact or flinching when approached or touched
- Arms and legs kept covered in hot weather
- Unexplained reluctance to change for activities
- Fear of medical help
- Self destructive tendencies
- Aggression towards others or severe temper outbursts
- Running away
- · Depression or withdrawn behaviour
- Fractures and bruises in non-walking children
- Bald patches on scalp

Emotional abuse

- Physical, mental and emotional development delays e.g. speech delay, poor verbal ability, lack of communication skills, learning problems, lack of concentration
- Admission of 'verbal punishment' which seems excessive
- · Over-reaction to mistakes
- Sudden speech disorders
- Fear of new situations
- Being unable to play, unwilling to take part or unable to enjoy life
- Inappropriate emotional responses to painful situations
- Behaviour such as rocking, hair twisting, thumb sucking
- Compulsive behaviour i.e. carrying out certain rituals or repetitive activities
- Self-harm or mutilation
- Fear of parents being contacted
- Extremes of passive or aggressive behaviour
- · Alcohol, drug, solvent abuse
- Running away
- Compulsive stealing and/ or scavenging



- Low self esteem
- Withdrawal from relationships with other children, insulation, depression
- · Opposition, defiance
- Pseudo mature behaviour
- Stress symptoms e.g. bed wetting, soiling, stomach ache (without physical causes)

Sexual Abuse

- Soreness or injury of the genital, anal or mouth areas
- Vaginal discharge, infection or bleeding, pregnancy or a sexually transmitted disease
- Discomfort when walking or sitting down
- Sexual activity with other children
- Inappropriate sexualised approach to adults, persistent and inappropriate sexual play with peers or toys or with themselves including excessive masturbation
- Detailed and age inappropriate understanding of sexual behaviour (especially by young children).
- · Sudden or unexplained changes in usual behaviour
- Self harm
- Substance or drug abuse
- Anxiety, depression, withdrawal, aggression, regressive or challenging behaviour
- Overly compliant behaviour
- Soiling in older child
- · Lack of trust, poor peer relationships or inability to make friends
- Extraordinary fear of males (in cases of male perpetrator and female victim)
- Running away from home
- Recurrent urinary tract infections

Neglect

- Constant hunger
- Constant tiredness
- Poor state of clothing or inappropriate clothing
- Emaciation
- Frequent lateness, or non-attendance at school
- Untreated medical problems, skin or hair in poor condition
- · Destructive tendencies
- Compulsive stealing
- Low self esteem
- Behaviour such as rocking, hair twisting, thumb sucking
- Running away
- Compulsive stealing or scavenging for food or clothes
- Left alone or unsupervised on a regular basis
- Children who don't value themselves
- No social relationships
- Poor personal hygiene
- Height loss that can't be explained by other conditions



 Delays in physical and emotional development e.g. growth, that can't be explained by other conditions.

Radicalisation or involvement in terrorism

The following is taken from the <u>'Safeguarding people at risk of being drawn into terrorism, or extremism leading to terrorism.</u> A targeted safeguarding approach for children, young people and adults in Oldham" Updated – Revised 12/12/2023

The national Counter-Terrorism (CONTEST) Strategy was updated in 2023. It has four strands:

PURSUE: to stop terrorist attacks;

PREVENT: to stop people from becoming terrorists or supporting terrorism;

PROTECT: to strengthen our protection against terrorist attack; and

PREPARE: to mitigate the impact of a terrorist attack

The CONTEST strategy reflects the current assessment of terrorist threats and the Government's revised security and counter-terrorism policies. The strategy covers all forms of terrorism, including the threat to Great Britain from Islamist terrorist groups, Northern Ireland related terrorism, Extreme Right-Wing terrorism (ERWT) and Left Wing, Anarchist and Single-Issue terrorism (LASIT).

List of possible indicators which might be present during the radicalisation process

Please note that the following is not an exhaustive list, and all or none may be present in individual cases of concern.

Vulnerable people experiencing these factors are not automatically at risk of radicalisation, and every case needs to be judged in relation to the individual circumstances.

- 1. Possible indications that an individual may have been radicalised include:
- Is the person known to have joined an extremist organisation, or been in contact with extremist recruiters?
- Does the person sympathise with, or support, illegal (proscribed) groups e.g. through attending meetings, distributing literature or fundraising?
- Does the person support groups with links to extremist activity, even if they are not illegal e.g. through attending meetings, distributing literature or fundraising?
- Has the person expressed support for terrorist attacks, extremist causes or their leaders either verbally or in writing?
- Is the person using extremist narratives and ideology to explain personal disadvantage?
- Does the person justify the use of violence to achieve political or ideological goals?
- Have there been significant changes to the person's appearance and/or behaviour which indicate that they identify with groups with extremist views?



- Is there reason to believe that the person either has taken part, or is planning to take part, in extremist training?
- Is the person known to have possessed, or is actively seeking to possess and/ or distribute, extremist literature or related materials?
- Has the person been a perpetrator of hate crime?
- Is there a pattern of regular or extended travel within or outside the UK which, together with other signs, might suggest the person is taking part in extremist training or activity?
- Has the person sought to disguise their true identity? Have they used documents or cover to support this?
- Is there evidence to suggest that they are accessing the internet for the purpose of extremist activity? (e.g. are they part of closed network groups, accessing extremist material, contacting associates covertly via Skype/e-mail etc)
- 1. Possible indicators that an individual may be exposed to radicalising influences are:
- Does a significant adult or other person in the individual's life have extremist views or sympathies e.g. their parent, spouse, partner or close friend?
- Does the person associate with people known to be involved in extremism either because they mix with known individuals or because they go to locations where these individuals are known to operate?
- Does the person possess, or are they seeking to access, violent extremist literature or material likely to incite racial/religious hatred or acts of violence?
- Has the person accessed violent extremist websites, especially those with a social networking element?
- Has the person travelled for extended periods of time to international locations known to be associated with extremism?
- Is there evidence of any other sources of extremist ideological, political or religious influence on the person from within or outside UK?

Possible indicators that an individual may be seeking answers about their identity are:

- Does the person demonstrate conflict and confusion about their personal identity? For example, are they feeling disconnected from their cultural / religious heritage and uncomfortable with their place in the society around them?
- Is the person searching for answers to questions about their identity, faith or belonging?
- Does the person demonstrate a simplistic or flawed understanding of religion or politics?
- Does the person reject UK values and institutions?
- Has the person come into conflict with their family over religious beliefs / lifestyle / dress choices?
- Has there been a significant shift in the person's behaviour or outward appearance that suggests a new social / political or religious influence



Possible sources of frustrations or resentment that might make individuals more vulnerable to radicalisation are:

- Has the person experienced any trauma in their lives, particularly any trauma associated with war or sectarian conflict?
- Has the person witnessed, or been the victim of, racial or religious hate crime or sectarianism?
- Does the person have a strong sense of grievance or feelings of injustice about their own experience? For example, do they feel that they have been discriminated against or disadvantaged because of who they are, or that they have suffered as a result of aspects of Government policy.
- Does the person experience, or feel that they experience, a lack of meaningful employment appropriate to their skills?
- Is the person a refugee or other foreign national awaiting a decision on their immigration / nationality status?
- Does the person feel that people like themselves are threatened or systematically disadvantaged or discriminated against?
- Have international events in areas of conflict and civil unrest had a disproportionate impact on the person resulting in a noticeable change in their views or behaviour (beyond the emotional impact generally experienced by people observing the suffering of individuals e.g. the deaths of children in areas of conflict)?

(Absence of) resilience factors

- 1. Factors that might reduce individuals' resilience to radicalisation are:
- Does the person have insecure, conflicted, or absent family relationships?
- Does the person display a lack of affinity or understanding for others, or social isolation from peer groups?
- Does the person have low self-esteem or feelings of failure?
- Is the person socially isolated, with a lack of friends/support networks?
- Does a young person spend a lot of time alone, or out unsupervised?
- Does the person have any learning difficulties or mental health support needs?
- Has the person experienced rejection by their family, peers or social or faith group?
- Has the person disassociated from an existing friendship group and become involved with a new and different group of friends?
- Does the person have a previous history of involvement in crime, experience of imprisonment, or problems with resettlement/reintegration having come out of prison?

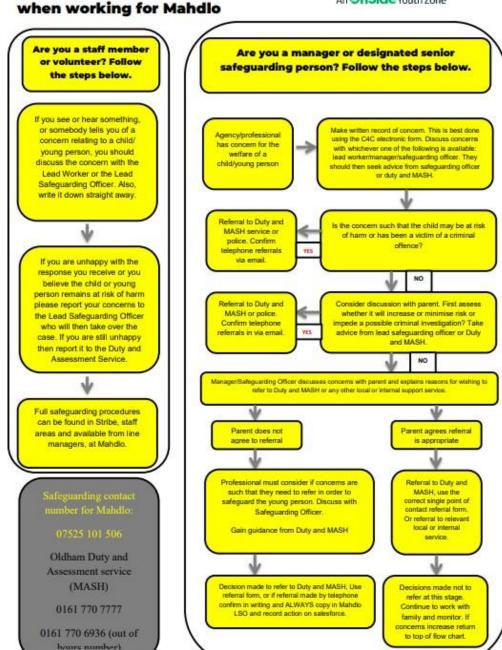


APPENDIX 3: FLOWCHARTS OF PROCESS

*This Process can be obtained from HR or the LSO

What to do if you have concerns about a child/young person

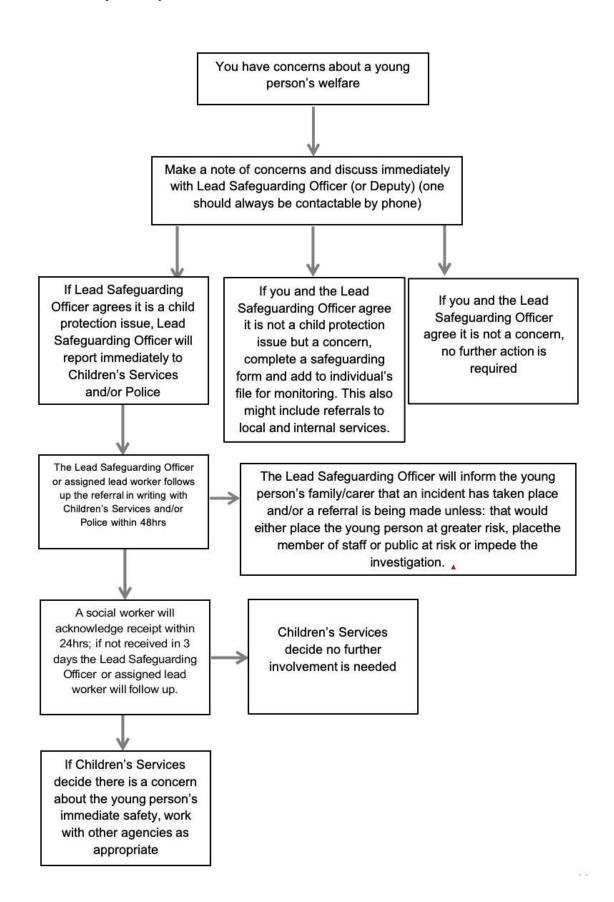




All concerns and Incident report MUST be inputted onto Salesforce by the Lead Worker/Coordinator

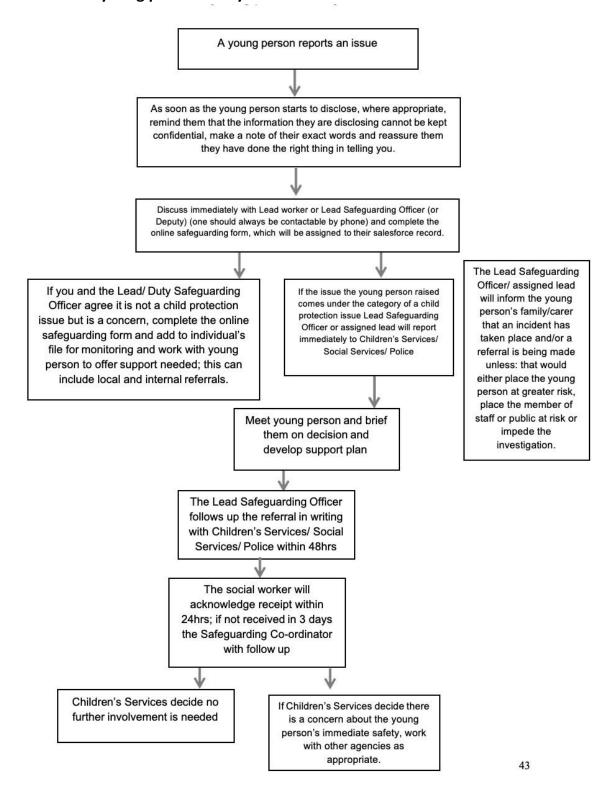


What to do if you suspect abuse



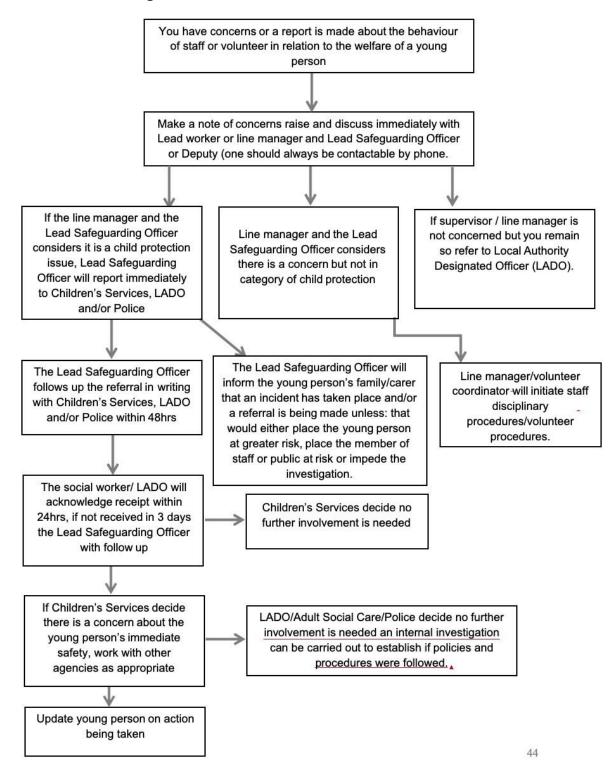


What to do if a young person tells you about abuse



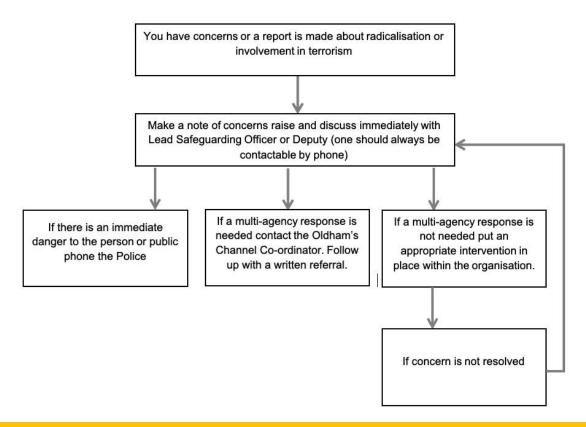


What to do if an allegation of abuse involves staff or volunteers





What to do if you suspect radicalisation or involvement in terrorism



APPENDIX 4: REPORTING

You should record details about the incident or disclosure as soon as possible (and definitely within 24hrs) using the form below or online safeguarding form to factually record:

- What happened
- What was said
- The manner/ tone of what was said / emotional state of the young person
- What you observed
- Who was present
- · When and where it was said.

Sign and date the form and submit the form online or to the lead worker, Duty Safeguarding officer or Lead Safeguarding Officer.

The Duty Safeguarding Officer or Lead Safeguarding officer will ensure the form is recorded, confidentially, on the member's profile.

A referral to Children's Services/ Social Services/ the Police should be made by the assigned safeguarding officer. If it is an emergency and neither the LSO nor the Deputies can be contacted, then Children's Services/ Social Services/ the Police should be contacted directly.

This must be immediately followed up in writing.



When making a referral record the name of the person on duty you spoke to and the date and time when the referral was made.

Any letters, forms or information relating to the referral should be stored on the individual on- line records. Only the Lead Safeguarding Officer and Deputies can access these files. The young person should be informed of records kept on their file. The family of the young person should also be informed unless it is likely to put the young person or worker at risk.

Safeguarding form

SCAN HERE FOR ONLINE FORM







Cause for Concern Do you consider this young person to be at immediate risk of harm? $\cdot \bigcirc \gamma_{\text{\scriptsize eS}}$ Please describe in one line what you are concerned about Young person Last name * Date of birth Details Time of incident Youth Zone session Please select... Description of concern* Please provide an overview of the incident/concern, providing as much factual detail as possible. For example: Any physical, behavioural or other indicators e.g. bruises, behaviour changes, periods of absence Any information relating to the young person's home life e.g. substance abuse, domestic violence, mental health issues Anyone else involved Please provide the names of anyone else involved and their role in the incident/concern e.g. staff, volunteer, young person, sibling. Please describe any actions already taken e.g. preferred name of the young person, people who should not be contacted, next steps (if known) Name * **Privacy Notice** Your personal information will be used to respond to your enquiry and administer the service. Where there is a need to protect or support a young person, we may also share personal information with relevant agencies as required by law. For further information about how we process your personal information, who we may share it with, and your rights, please read our Privacy Policy. I'm not a robot reCAPTCHA helps prevent automated form spam. The submit button will be disabled until you complete the CAPTCHA.



APPENDIX 5: FRASER GUIDELINES AND GILLICK COMPETENCY PRINCIPLE

The Fraser Guidelines and Gillick competency are used to help assess whether a young person is sufficiently mature to make their own decisions and understand the implications of those decisions. It originated from a legal case that examined whether doctors should be able to give contraceptive advice or treatment to under 16-year-olds without parental consent when Mrs Gillick took her local health authority and the Department of Health and Social Security to court in an attempt to stop doctors from giving contraceptive advice or treatment to under 16-year-olds without parental consent. Mrs Gillick's claims were dismissed at the High Court, the decision was reversed at the Court of Appeal but then went to the House of Lords where the Law Lords (Lord Scarman, Lord Fraser and Lord Bridge) ruled in favour of the original judgement that:

"...whether or not a child is capable of giving the necessary consent will depend on the child's maturity and understanding and the nature of the consent required. The child must be capable of making a reasonable assessment of the advantages and disadvantages of the treatment proposed, so the consent, if given, can be properly and fairly described as true consent."

The Fraser guidelines refer to the guidelines set out by Lord Fraser in his judgement of the Gillick case which apply specifically to contraceptive advice:

"...a doctor could proceed to give advice and treatment provided he is satisfied in the following criteria:

- 1) that the girl (although under the age of 16 years of age) will understand his advice;
- 2) that he cannot persuade her to inform her parents or to allow him to inform the parents that she is seeking contraceptive advice;
- 3) that she is very likely to continue having sexual intercourse with or without contraceptive treatment;
- 4) that unless she receives contraceptive advice or treatment her physical or mental health or both are likely to suffer;
- 5) that her best interests require him to give her contraceptive advice, treatment or both without the parental consent."

Lord Scarman's comments in his judgement of the Gillick case in the House of Lords (1985) are often referred to as the test of "Gillick competency":



"...it is not enough that she should understand the nature of the advice which is being given: she must also have a sufficient maturity to understand what is involved." He also commented more generally on parents' versus children's rights:

"Parental right yields to the child's right to make his own decisions when he reaches a sufficient understanding and intelligence to be capable of making up his own mind on the matter requiring decision."

(Source NSPCC:

http://www.nspcc.org.uk/inform/research/questions/gillick_wda61289.html)



APPENDIX 6: AUTHO	ORISATIO	ON FORM: ENHANCED DISCLOSURE
Name of applicant/employee/volunte	eer:	
Have they applied to be a paid emportant volunteer?/ Are they a current emplorenewal?		
What role have they applied for withi organisation?/ What is their current role?	n the	
When assessing applicants	s' criminal r	ecords, please consider the offence in terms of:
Details of conviction/s	Notes/Commer	ents for consideration
Did they declare any criminal convictions prior to the enhanced disclosure check?		
Nature, seriousness and relevance of conviction/s		
How long ago it occurred		
If it was a one-off or part of a history		
Circumstances of it being committed		
Country of conviction		
Decriminalisation		
Remorse		
Concluding comments:		
	-	considered the applicant's criminal record/s in terms of oss out that which does not apply) to taking on this
Signature:		(Chair)
Date		:



Please return this completed form to $\ensuremath{\mathsf{HR}}$

APPENDIX 7: INDIVIDUAL RISK ASSESSMENT

Individual Young Person / Adult at risk Behaviour Risk Audit ¹

YP's / Adult's at risk's Name:	Date
Staff Member Completing Risk Audit	Review Date

otali ilioniboi odilipiotilib										
BE <u>HAVIOUR</u>	WHEN?	MOST AT	HOW	Х	HOW	Х	POTENTIAL	=	RISK	ACTION
		RISK	LIKELY?		OFTEN?		HARM		FACTOR	
(Circle or underline those which apply) NB – In cases where a YP / Vulnerable Adult is suspected or found to be carrying a weapon, action should always be taken, regardless of the apparent likelihood of harm.	Time of day; potential triggers etc.	Who is most likely to be harmed and how?	5=Certain 4=Probable 3=Possible 2=Not impossible 1=Never		5=Daily 4=Weekly 3=Monthly 2=Rarely 1=Never		(Include an assessment of the likely physical <u>and</u> psychological harm) 4= Lifethreatening 3=Serious 2=Harm 1=No harm		Approximate percentage chance of harm occurring: 100%=certain >50%=probabl e >9%=possible >1%=not impossible 1%=never	Is a formal risk assessment required? Are existing measures sufficient, or can the risk be lowered further? If applicable, list any initial suggestions for achieving such aims in the space below.
Verbal abuse Threats/Aggression Violence Vandalism Bullying Fighting Possible Weapon(s) Racial Harassment Sexual Harassment False Accusations Self Harm Other - please specify:		YPs /vulnerable adult Staff Visitors	5 4 3	x	5 4 3 2	×	4 3 2	=		
			1		1		1		%	

1 INDIVIDUAL YP BEHAVIOUR RISK ASSESSMENTS - NUT HEALTH & SAFETY BRIEFING



Completing the Risk Audit

Note: The primary function of the risk audit pro forma set out overleaf is that of a diagnostic tool, allowing for the compilation of an accurate and comprehensive individual behaviour profile. It is also possible to use the same form for carrying out a formal risk assessment, although in cases where numerous or detailed control measures are required, the 'ACTION' column may lack sufficient space.

- Consider what sorts of behaviour are likely to be exhibited by the individual in question. What hazards might arise as a result of the behaviour? Find out if there is a pattern to the behaviour. Does it happen at a particular time or place? Is there something usually going on immediately before or after? Is there any way of predicting it? Are there circumstances which make the behaviour more likely to occur?
- Based on past evidence, common sense and likelihood of occurrence, think about the impact of this behaviour who is likely to be harmed and how? Life- threatening = fatality, hospitalisation, long-term absence etc; Serious = requiring medical treatment and, usually, absence from work; Harm = e.g. 1st Aid, possible GP check-up and/or treatment.
- How likely is this behaviour? How frequently has the behaviour happened in the past? How recently? Is it possible to make realistic predictions for the future? On what grounds? (NB: Where more than one form of poor behaviour has been identified, the combined impact of all of them should be considered when determining the likelihood and frequency of harm arising).
- Calculate the numerical risk factor by multiplying likelihood x frequency x harm. Any resulting percentage greater than 1 per cent indicates a measure of risk; a figure of 100 per cent means it is certain to happen.
- Evaluate the risks and decide what recommendations might be made for further action. Is a full risk assessment required, together with uitable control measures? Are existing precautions where applicable sufficient, or should further steps be taken?
- It is important that the 'percentage chance' of harm occurring is not seen as a single, authoritative predictor of future outcomes. It is merely one indicator of several which can assist those charged with tackling such behaviour in schools. The action to be taken will clearly depend on the type(s) of behaviour identified. A ten per cent chance of a YP / adult at risk carrying a knife, for example, clearly poses a greater level of possible harm than a ten per cent chance of a YP/ adult at risk verbally abusing somebody. As a general rule, any percentage risk of more than one per cent should be closely analysed, and where the potential harm is calculated as a score of two or more, this becomes even more important.
- Decide when this audit should be reviewed (for example, in 6 months' time, or sooner if behaviour patterns change). If a formal risk assessment is required, then reviews should follow automatically as part of the risk assessment process.

Young person / adult at risk behaviour risk assessment

Young Person's / Adult at risk's
Name
Staff Member Completing Risk
Assessment
Date

Please provide a brief explanation of the young person's / adult's at risk previous engagement with Mahdlo.	Are there any risk or vulnerability factors relating to the young person / adult at risk that should be considered?					
What health and safety hazards arise or could arise from	n the behaviour of t	his YP / Adult at risk?				
1 What risks do they pose and to whom?		LEVEL OF RISK: High/Medium/Low				
What has been done so far to remove or reduce the risks?		REMAINING RISK: High/Medium/Low				
		LEVEL OF DISK ONES ALL CONTROL				
3 What further action is required to reduce the risk further?		LEVEL OF RISK ONCE ALL CONTROL MEASURES ARE IN PLACE (High/Medium/Low):				
4 List any activities which <u>cannot</u> be safely managed, as far as it is possible to foresee.	5 What information, if any, needs to be shared with the wider team (what and who with)?					
Any further comments:						



Review Date:

'MENU' of possible options to consider as control measures

Note: This list is indicative of the types of interventions which might be applied. It is not intended to be an exhaustive list, and those carrying out the risk assessment should seek to implement a tailored strategy to address the specific needs of the student within existing school behaviour and/or special needs policies. Measures set out in IEPs/IBPs will clearly always take priority over any others.

Tackle offensive behaviour through Mahdlo behaviour policy, with consistent application of consequences every time the behaviour is repeated

Behaviour chart for each day

Requires clear/explicit tasks of short duration Use non-confrontational strategies Immediate withdrawal from activity or session or area as a consequence of certain predetermined acts, such as swearing at staff

Specific instructions given to staff not to try to stop if he attempts to leave a room, instead allowed to go to until calmed down

Behaviour contract exclusion and meeting with parent(s)/carer(s)

Withdrawal from danger areas i.e. sports hall, MUGA pitch, or areas where staff are isolated

To meet 'keyworker or designated youth worker' at the start of each session for briefing Make it clear to both YP/Adult at risk and parents/carers that further incidents will result in the police being contacted and a complaint being made.

Involvement of local authority behaviour support specialists



Online safety

<u>Generation Isolation Report 2024</u> evidence that 76% of young people spend most of their free time on screens. The internet can be amazing for young people, but it also leaves them vulnerable to abuse. Following Covid pandemic 2020, Mahdlo created a blue print for running youth work sessions online. To ensure we are equipped to re-establish this offer to Mahdlo members, to best meet their needs we maintain our online safety guidance and policy. This allows us to mobilise an offer to <u>"start where young people are starting" (B Davies, Youth and Policy)</u>.

Guidance for dealing and responding to safeguarding concerns online

We want to offer our young people support and someone to talk to. The purpose of an email service is to have a brief check in or share information with a young person. Beyond that if we feel it is needed, they will be either directed towards other appropriate online services or in more serious cases referred into other services e.g. Social care/Police.

Information on your website

- State the time frame within which emails are manned and responded to. This will ensure that if the young person's concern is urgent, they will know to contact the other services you have signposted them to.
- Signpost the young people to other services that can support them such as
 - ChildLine 0800 1111 or https://www.childline.org.uk/
 - The Mix Looking for advice or support? If you're under 25 and need help call the helpline number for FREE on 0808 808 4994.
 - Shout Crisis text line. Text Green to 85258.
- Add a statement from your confidentiality policy informing the young person that if a member of staff from the Youth Zone believes the young person is at risk of harm or has suffered/is suffering from abuse we will have to share the information with police and social services.

Before a session/ Brief

- Contact your allocated duty manager before you start your shift and have a briefing with them.
- Ask any questions you are unsure of and share any concerns you may have.
- Ensure you have sight of your safeguarding policy and procedures.

Responding to emails

If a disclosure is made via email; staff members should respond to the initial email by having a brief discussion with the young person to identify their needs and direct them onto relevant services/support options. In some cases, it may be deemed necessary for a member of the team to give the young person or their parent a call to establish facts.



DO

- Prioritise the serious concerns; read all emails first and decide which to action, i.e. triage.
- Read/Respond to the email in a timely fashion; within your session/ shift.
- Follow your Youth Zone's safeguarding policies and procedures, as you would if you were working in your Youth Zone and face to face with the young person.
- Ensure you understand the reporting thresholds and report all concerns to your safeguarding lead and complete a cause for concern form.
- Identify yourself as a member of the Safeguarding Team.
- Ask the young person to state their full name.
- Ask them to leave a contact telephone number.
- Inform them of your confidentiality statement.
- Request support from another member of the Safeguarding Team when making certain check in calls to young people (professional judgement applies).
- Direct them towards relevant online support e.g. ChildLine, The Mix or Kooth.
- Inform your Safeguarding Lead immediately about any concerns in relation to child protection.
- Inform your Safeguarding Lead/Police immediately for serious concerns in relation to suicidal ideation.
- Contact your Safeguarding Lead if you are feeling overwhelmed or affected by an issue.
- Always CC in another Mahdlo worker when emailing a member, young person or adult at risk.

DON'T

- Engage in lengthy discussions with a young person... ideally, this should only be
 three emails and in some cases a phone call that should last no longer than 15
 minutes. Guidance from Childline states that we have to be careful to not create a
 dependency with the young person as we may not be able to continue the same
 level of support if the demand for the service increases. The purpose of the service
 is to give advice and signpost the young people to the correct support and advice.
- Make false promises e.g. Everything will be ok. You are not going to be able to solve the young person's problems just signposting them to the correct support and arming them with information.
- Access the email address outside of your designated session/ shift.
- Ring a YP on your personal mobile unless you have a 3CX access.
- Do not email a young person from a non Mahdlo email.

Remember, a young person may disclose concerning information that raises concerns about their safety, wellbeing or around possible abuse. Inform your Designated Safeguarding Lead/Deputy and/or Session Lead immediately. If the situation is an



emergency and neither the Designated Safeguarding Lead/deputy nor Session Leads are available; telephone your local MASH Team directly. The NSPCC also have a helpline for advice on Tel: 0800 800 500. If out of hours call, the Emergency Duty Social Work team or Police Child Protection Team.

Evaluating your session

As you would following a session delivery at the Youth Zone, evaluate your session and have a de-brief with your session lead.

For further guidance review the Online Session Procedure.

