



Safeguarding and Protecting Children Policy



We
inspire
growth

We
prioritise
kindness

We
achieve
together

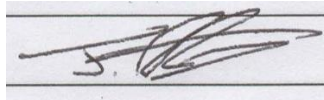
Safeguarding and Protecting Children Policy

This is a controlled document. It should not be altered in any way without the express permission of the policy owner or their representative. On receipt of a new version, please destroy all previous versions. If you are reading a printed copy of this document, you should check directly with 1Compass management to ensure that you are using the most current version.

This policy and its associated appendices was adopted by 1Compass on [19/08/25] and is to be reviewed by [19/08/26].

Name: Joshua Roberts

Signed:

A handwritten signature in black ink, appearing to be 'J. Roberts', written over a horizontal line.

Date: 19/08/2025

This should be signed by the most senior person in your organisation i.e. child protection lead on the board of trustees

Below is a list of policies that are also relevant to safeguarding and protection. You may find it helpful to refer to any of these additional documents when reading and using this policy.

- [Safer recruitment and selection of staff policy](#)
- [Safeguarding Checklist](#)
- [Confidentiality](#)
- [Data Protection](#)
- [Staff supervision & appraisal](#)
- [Volunteering Policy](#)
- [Safeguarding & protecting children Code of Conduct](#)
- [Safeguarding & Protecting Adults](#)
- [Record of Concern and Action \(ROCA\) - form](#)
- [Looking After Children in the Absence of their Parents](#)
- [Reporting Serious Incidents and reputational threats to HSUK](#)
- [Health & Safety](#)
- [Complaints](#)
- [Digital/online Safety](#)
- [Equality, Fairness and Diversity](#)
- [Whistleblowing](#)

Everyone in 1Compass, regardless of their role, has a responsibility to protect children and be familiar with the local policy and procedure in reporting a concern.

If you would like assistance in understanding the detail in this document when reading it, please speak to the Safeguarding/Child Protection Lead, who will be able to assist you in answering questions relevant to your local practice.

It is the responsibility of all staff, trustees and volunteers to read, understand and sign the Safeguarding and Protecting Children Code of Conduct alongside this policy and to seek guidance from line managers if further clarification is needed. Signing the Code of Conduct demonstrates that the individual has read and agrees to follow this policy.

Policy Statement

At 1Compass we believe that every child has the right to protection from all forms of abuse or harm. The overall purpose of this policy and its associated procedures is to protect the welfare of children and young people using and receiving the services 1Compass provide. 1Compass is committed to reviewing the policy annually.

The purpose of this policy is to:

- Create a culture where children are valued and their right to safety and respect is upheld;
- Protect children who come into contact with 1Compass in the course of its work by actively managing risk to minimise circumstances where children engaging with 1Compass may suffer harm;
- Work collaboratively with other organisations to ensure that children are safeguarded and protected;
- Inform partners, beneficiaries and the general public of the overarching principles in relation to safeguarding and protecting children;
- Provide all staff, volunteers and trustees with the overarching principles and procedures that guide our approach to safeguarding and protecting children.

Scope of the Policy

This document sets out the responsibilities of all those who work for 1Compass, including trustees, employees, volunteers, consultants/associates, self-employed contractors, agency staff, students and those working pro bono for 1Compass (these will be referred to throughout the policy as 'staff').

Definitions

Who is a 'child'?

For the purposes of this policy the definition of a 'child' or 'young person' is anyone aged under 18 years of age, as supported by legislation and guidance across the UK. This includes infants and unborn babies.

What is child abuse?

Child abuse is maltreatment of a child in any form. The main types of child abuse are physical abuse, emotional abuse, sexual abuse (including child sexual exploitation) and neglect and (see Appendix for definitions and signs). Other specific forms of harm and abuse include: financial or material abuse; domestic abuse (inclusive of so called 'honour based' violence, forced marriage and female genital mutilation); modern slavery; child trafficking, criminal exploitation, radicalisation and online/digital abuse (see Appendix 4 for definitions of each and NSPCC website for further information <http://nspcc.org.uk>). This is not an exhaustive list and there is not necessarily a clear dividing line between one type of abuse and another.

A person or persons may abuse or neglect a child either by inflicting harm or failing to act to prevent harm. Child abuse includes the impact of witnessing ill treatment of others, such as being exposed to domestic abuse.

Abuse or harm may consist of a single or repeated act and can occur in a family or in residential care or in the community, including artistic and sporting activities and can also occur online. Children may be abused by a person or persons (including adults and other children) known to them or by

strangers. It can occur within a relationship of trust and can happen to a child regardless of their age, gender, race, disability or ability, sexual orientation, religion or socio-economic status.

Some children and young people however are at increased risk from harm and abuse, including those with disabilities or special educational needs; young carers; those frequently missing from home; those subject to familial/parental substance misuse, mental health issues or domestic abuse; those misusing substances themselves; those who have been in local authority care or who are privately fostered. Babies under the age of one are also at particular risk.

What is harm and significant harm in a child protection context?

'Harm' means the ill treatment or the impairment of the health or development of the child, including, for example, impairment suffered as a result of seeing or hearing the ill treatment of another. In this context, 'development' can mean physical, intellectual, emotional, social or behavioural development and 'health' can mean physical or mental health.

Whether the harm suffered, or likely to be suffered, by a child or young person is 'significant' is determined by comparing the child's health and development with what might be reasonably expected of a similar child. Deciding whether harm has been or is likely to be significant can be complex, and where there are concerns about harm, abuse or neglect, 1Compass staff and or volunteers must share these with the relevant agencies who will assess whether the harm is, or is likely to be, significant.

1Compass approach to keeping children and young people safe from harm and abuse

We will seek to keep children safe by:

- Valuing them, listening to and respecting them and keeping them at the centre of everything we do;
- Being mindful of, and implementing the articles and principles of the [United Nations Convention on the Rights of the Child](#);
- Appointing for each service a nominated child protection lead, a deputy, and a lead trustee/board member;
- Providing effective management for staff and volunteers through supervision, support, training and quality assurance measures so that they know about and follow our policies, procedures and behaviour codes confidently and competently;
- Recruiting and selecting staff, trustees and volunteers safely, ensuring all necessary checks are made;
- Sharing information about safeguarding and effective practice with staff and volunteers, parents and carers, babies, children and young people;
- All record keeping is accurate and timely;
- Recording, storing and using information professionally and securely, in line with data protection legislation and guidance;
- Ensuring children, young people and their families know where to go for help if they have a concern;
- Sharing concerns and relevant information with agencies (on a need to know basis) involving babies, children, young people, parents, families and carers appropriately;
- Managing allegations against staff appropriately and timeously;
- Creating an anti-discriminatory environment utilising policies such as Equality, Fairness and Diversity policy, and building a culture of inclusion;

- Ensuring we have effective complaints and whistleblowing measures in place;
- Ensuring we provide a safe physical environment for our babies, children, young people, and staff in accordance with the law and regulatory guidance;
- Building a strong safeguarding culture where staff, babies, children, young people and their families, treat each other with respect and are comfortable about sharing concerns.

A strong safeguarding/child protection culture means:

- People are protected from harm;
- Risks of harm or abuse are minimised;
- Everyone has confidence their concerns will be dealt with appropriately;
- Everyone at the charity understands their role.

This policy is based on the following principles:

- The welfare of children is paramount;
- No child or group of children must be treated any less favourably than others in being able to access services which meet their particular needs;
- All people, regardless of age, ability, gender, racial heritage, religious belief, sexual orientation, culture or identity, have a right to equal protection from all types of harm or abuse and no person or group of people should be treated less favourably than others in being able to access services which meet their particular needs;
- Recognition that some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues;
- We reflect actively on our experience of safeguarding and child protection issues and seek to review and improve our practice accordingly.

1Compass will treat any breach of this policy very seriously. For those who work for us, failure to follow the principles and procedures of child protection could lead to disciplinary action, which may ultimately result in dismissal. For those who work with us, we reserve the right to immediately terminate any contract and, for trustees and volunteers, to require them to immediately cease being a trustee or volunteer.

All concerns and allegations of abuse will be taken seriously.

Internal roles and responsibilities

All those who work for or with 1Compass share the responsibility for protecting children from harm and abuse.

No single practitioner can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

All staff, volunteers and trustees must:

- Review and sign of the Safeguarding and Protecting Children Code of Conduct annually;
- Remain up to date and comply with 1Compass policies and practice guidance related to Safeguarding/child protection;
- Attend annual Safeguarding/child protection training, as per local procedure;

- Exercise 'professional curiosity', including questioning, challenging and raising concerns when something feels 'wrong';
- Attend and participate in meetings that include discussions and reflections about interactions with families (and staff and volunteer behaviour if in a supervisory role). In Scotland this should also include specifically making reference to [GIRFEC](#) and the points from the [SHANAARI](#) wheel.

1Compass must appoint at least one staff member (lead) and a nominated trustee who together maintain oversight of policy, practice and training and who also have advanced knowledge of local provisions and systems of safeguarding, child and adult protection.

Trustees must:

- Have overall responsibility for safeguarding and child protection, even where some activities are delegated to safeguarding leads or groups;
- Must ensure appropriate safeguarding and child protection measures are in place;
- Must promote a culture that prioritises children and young people;
- Be responsible for ensuring that those benefiting from, or working with their 1Compass are not harmed in any way through contact with it;
- Be familiar with and adhere to the trustee Safeguarding responsibilities outlined in the Responsibilities in Practice section of the Handbook.

Safeguarding/Child Protection Lead:

In conjunction with the nominated trustee, staff leads must:

- Ensure staff/trustees overseeing recruitment are trained and up to date in safer recruitment practices to ensure that all members of their workforce are safe to work with children and adults at risk;
- Have in place policies and procedures relating to the protection of children and adults at risk, safer recruitment, allegations against staff/volunteers, and whistleblowing;
- Incorporate local reporting procedures and contacts within the local authority safeguarding hub (Wales) are incorporated into process/practice, are understood by all those who may need to use or monitor them and that they are up to date.
- Ensure that any consultants/associates or contractors (and sub-contractors) are clear on their responsibilities and are aware to report any concerns directly to them in line with this policy.

Professional boundaries

Maintaining professional boundaries helps keep everyone safe and is therefore integral to safeguarding. An important part of upholding boundaries is keeping relationships with young people and guardians using 1Compass services strictly professional and within the scope of each person's role. This can sometimes be difficult where volunteers or staff may live in the same community that 1Compass serves, and where volunteers and staff may sometimes also have needs that require the support of services. Therefore, all volunteers, staff and trustees must:

- Always inform their Coordinator/line manager if they know a service user in any other capacity. This would include in previous or other professional capacities (e.g. if a volunteer knows a service user through a separate paid job), or within their personal lives (e.g. if their children are in the same class at school, or if friends or family members became service users). An agreement on how to manage confidentiality, risk and boundaries can then be made, with reference to relevant policy. In most cases, the service user would be allocated to another volunteer/staff member, unless it can be demonstrated there would be no conflict of interest. Any such discussions and decisions must be documented;
- Never instigate contact with any service users in any setting outside of 1Compass, or agreed sessions/meetings;
- Never enter a romantic or sexual relationship with a service user or a service user's family member. This constitutes a serious breach of boundaries and codes of conduct;
- Always inform their Coordinator/line manager of any risk of breach or breakdown of professional boundaries they are aware of, including those related to themselves or colleagues;
- Adhere to the Safeguarding and Protecting Children Code of Conduct.

Procedure for responding to harm and abuse

This policy and all nation specific policies and procedures are based on the 4R's approach to support staff to Recognise, Respond, Refer and Record:

- **Recognise** any concerns for a child at risk that you are working with, this may be welfare/wellbeing or child protection.
- **Respond** appropriately to any concerns about a child within 1Compass policy and procedures
- **Refer** – this will be the responsibility of the designated Safeguarding/Child Protection Lead following discussion with staff and others. This may include calling **local statutory services or the NSPCC Helpline on 0808 800 5000**
- **Record** – as per local procedure to ensure accurate and timely record-keeping for use by internal and external agencies as necessary.

Additionally, there are two further **R's** for 1Compass to consider:

- **Revisit** – once a concern has been raised, have you checked in or followed up to ensure progress, or any further information needed.
- **Reflect** – what learnings are there as an individual and as a team from individual and collective incidents? Ensuring there is time to discuss what happened and how things were handled to consider if anything different needed next time.

Recognising

Staff may become aware of, or suspect, harm or abuse when they:

- Witness a harmful or abusive act;
- Are told directly by a child, parent or carer or someone else about harm or abuse to the child;

- Are told something indirect by a child, parent or carer or someone else that leads to suspicion of harm or abuse to the child (for example, the child expressing fear about a particular adult or describing a non-age appropriate occurrence, such as preparing their own food);
- See suspected evidence of harm or abuse (for example, an unexplained physical injury, lack of appropriate clothing or furniture or drug paraphernalia);
- Recognise indicators of harm and abuse;
- Recognise a pattern of concerns over time (for example, a pattern of missed appointments, parents agreeing to take up services and then failing to attend, or parents agreeing to make changes but not following through).

Responding

Your exact responsibilities if you become aware of, or suspect harm or abuse will depend on your role, and 1Compass procedure (see Appendices). However, regardless of your role the following must always be adhered to:

- Concerns about harm or abuse to a child **must always be shared** and should be shared as soon as possible. If you are a volunteer, this means sharing the information with your Coordinator, and if you are a member of staff this means sharing the information with your Safeguarding/Child Protection Lead, who will determine if a local authority safeguarding referral should be made (see below for this process). You can therefore never guarantee complete confidentiality to a child, parent, or anyone else regarding harm or abuse;
- It is not your responsibility to investigate or verify concerns of harm or abuse. You may need to ask questions to clarify the information you have been given (e.g. 'you've told me that you're hungry because you haven't had any breakfast today or tea last night, have I understood that right?' 'I can see you have a bruise on your leg, how did you get that?') but any questions should be limited to ensuring you have understood. Anything further, and specifically asking leading questions (e.g. 'did your brother do this?' 'Did someone hurt you?') can seriously impact any later legal action or official investigation;
- If there is imminent risk of harm, or a child has been injured you should immediately phone emergency services (999) follow advice given, and then inform the relevant person in 1Compass as outlined above;
- All information related to a concern of harm or abuse must be recorded as per 1Compass procedure for your role. This is done through use of a 'ROCA' (Record of Concerns and Action). A copy of the record may be required (at a later date) as part of the child protection process or as evidence for future criminal prosecution.

DON'T HOLD ONTO CONCERNS ABOUT CHILDREN, NO MATTER HOW INSIGNIFICANT THEY MAY APPEAR, SHARE THEM WITH YOUR COORDINATOR/DESIGNATED SAFEGUARDING/CHILD PROTECTION LEAD

It can be daunting responding to concerns about harm or abuse in the moment. The following good practice should act as a guide to help you:

- **Ask open, non-leading questions to gain clarity on what has been heard.** Remember you are not 'investigating' so keep questions to the minimum necessary to ensure a clear and accurate understanding;
- **Show empathy** and affirm feelings, ensure the person speaking up feels they are being listened to and supported;
- **Re-assure** that they are being courageous in 'telling';
- **Treat the allegation/concern seriously** and share the information with your Volunteer Coordinator/Designated Safeguarding Lead as soon as possible;
- **Do not make value judgements** about an alleged abuser/s and what has taken place;
- **Explain that information will be passed on** to another member of staff and explain that this is important to keep the child/ren safe;
- **Other than with the relevant professionals, do not share information about the concern of harm and abuse to anyone other than the person who made the disclosure.** E.g. if the child made the disclosure do not discuss it with the parent and vice versa;
- **Write down** exactly what you have been told or seen using 1Compass's record keeping tools. Always try to use the exact language used by the person who made the disclosure. If the concern came to light through other sources (e.g. through a child's artwork), include any original material available;
- **Remember that the child's welfare is paramount** and 'trumps' confidentiality and the wishes of parents/carers, even where they are considered to be the primary client(s) of 1Compass;
- **If the person who makes the disclosure decides to 'withdraw'** at this point, they should be reassured they can have further discussions about it at any point in the future and they should also be given alternative sources of support such as the telephone number of ChildLine – 0800 11 11. However, they must also be told that what they have disclosed will be passed on;
- **Ask for support.** It is recognised that dealing with concerns about harm and abuse can be stressful or upsetting for everyone, and so receiving appropriate support is essential.

Referring (making a 'safeguarding referral')

As above, any concern about harm or abuse to a child must be shared as soon as possible with the Coordinator and/or Safeguarding/Child Protection Lead. The nature of the concern will be assessed, and a decision made as to the most appropriate course of action.

Where there is a concern that harm or abuse to a child is happening, has happened or is at risk of happening a 'safeguarding referral' to the local authority must be made (or if the child has an allocated social worker, that social worker should be informed), as per the local authorities reporting procedures. This should be done as soon as possible, and always within 24 hours of the information being received, unless there is a specific reason why this is not possible (and where this is the case, this must be documented).

It is best practice to make safeguarding referrals with the knowledge, consent and participation of the person who has made the disclosure. However, people may refuse consent or be resistant to the sharing of Safeguarding information for many reasons, including:

- Fear or mistrust of social services or other agencies;
- Fear of losing control;
- Fear of the abuser (if relevant) and of reprisals;

- Fear of their ability to parent being questioned (if relevant).

Reassuring them that the primary reason for sharing the information is for the protection and wellbeing of the child/ may help alleviate these concerns. However, **consent is not needed to make a child safeguarding referral** or to appropriately share information about harm or abuse to a child as the welfare of the child is paramount (see Data Protection/GDPR policy).

If there are ever concerns about confidentiality in relation to concerns of harm or abuse 1Compass Data Protection Leads and Safeguarding/Child Protection Leads can advise.

Recording

A clear record of all safeguarding/child protection concerns must be kept including how the issue was disclosed, or why it was suspected, and all action taken, as per 1Compass procedure.

As in some cases, it is ongoing events and not a specific disclosure or single incident which leads to concern, all record keeping must also be accurate and up to date. In such instances, a 'chronology' of concerns may need to be recorded.

A chronology is:

- A summary of events key to the understanding of need and risk, extracted from comprehensive case records and organised in date order;
- A summary which reflects both strengths and concerns evidenced over time;
- A summary which highlights patterns and incidents critical to understanding of need, risk and harm.

Escalation process

'Escalating' is the course of action that should be taken when there are concerns about harm or abuse to child and the action being taken by either 1Compass or external agencies do not support the protection of that child. This includes if 1Compass has concerns that an external agency is not acting on concerns appropriately.

If you have such concerns, you should inform your 1Compass's Safeguarding/child protection lead or Safeguarding Trustee. The aim should be to resolve the disagreement at the lowest level between those involved. If this fails, advice can be sought from the NSPCC helpline or the local external safeguarding/child protection advisor. A record of all conversations and actions must be kept.

1Compass acknowledge that:

- Problem resolution is an integral part of professional co-operation and joint working to protect children.
- Professional disagreement requires resolution in a constructive and timely fashion.
- At no time must professional disagreement distract from ensuring the child is safe.
- The aim must be to resolve a professional disagreement at the earliest possible stage.

Managing allegations and concerns against staff and volunteers

Any concerns about the welfare of a child from alleged poor practice, abuse or harassment (including a breach or potential breach of professional boundaries) by an employee or volunteer of 1Compass must be taken seriously and immediately reported to the Safeguarding/Child Protection

Lead. If the Safeguarding/Child Protection Lead is involved in the allegation, the concern should be reported to their deputy, a member of senior staff or the Chair of trustees.

Concerns about a volunteer or employee may fall into any of the following three categories where someone has;

- Behaved in a way that has harmed the child/adult, or may have harmed a child/adult
- Possibly committed a criminal offence against or related to a child/adult
- Behaved towards a child/adult or children in a way that indicates they may pose a risk of harm to children or may be unsuitable to work with children

These concerns must be reported immediately following the local procedure as outlined by the Local Authority Designated Officer (England) or children's social care in the devolved nations (see Appendix 2). 1Compass staff and trustees should not attempt to investigate the matter themselves, but should gather the facts of the case and keep clear written records. This includes a comprehensive summary of all allegations that have been made, details of how allegations have been followed up and decisions made about the allegation and actions taken. Concerns about children involved should also be reported following the relevant local procedures (see Appendix 2).

In accordance with advice from the LADO or children's social care, the Safeguarding/Child Protection Lead should consider how best to support the children involved, their parents/carers, and individuals who have had an allegation made against them. This includes, telling the relevant parties about the allegation (as long as this does not place any children at further risk of harm), telling them how you are going to manage the allegation, keeping everyone informed about the progress and outcomes of the case.

Employees and volunteers should feel confident about challenging the behaviour of others and voicing concerns. They should also know who to contact if they feel unable to report an incident within their organisation (refer to Whistle Blowing section below). An allegation of abusive or inappropriate behaviour against a member of staff, volunteer or trustee should also be reported.

If someone resigns from their post or refuses to cooperate with the process or investigation, this must not prevent an allegation being followed up. Settlement agreements **must not** be used in cases of alleged abuse.

Regulated activity providers (employers or volunteer managers of people working in regulated activity in England, Wales and Northern Ireland) and personnel suppliers have a legal duty to refer to DBS/PVG where conditions are met. This applies even when a referral has also been made to a local authority safeguarding team or professional regulator. A person who is barred from working with children in one nation will be barred across the UK.

For further guidance regarding DBS referrals (England, Wales and NI):
<https://www.gov.uk/guidance/making-barring-referrals-to-the-dbs?>

For further guidance regarding PVG referrals (Scotland): <https://www.mygov.scot/pvg-referrals>

Low-Level Concerns

Low-level concerns are those concerns where a trustee, staff member or volunteer feel they need to share something that is worrying them about another 1Compass employee or volunteer. Low-level concerns may include minor breaches of the code of conduct. Employees or volunteers do not need to be able to determine what constitutes a low-level concern or allegation. They need to know to report any concerns to the Safeguarding/Child Protection Lead who will determine the action to take following this policy and procedures. In some cases, it may be that a number of low-level concerns about the same individual build up a picture which requires consultation or referral to the LADO or children's social care.

The Safeguarding/Child Protection Lead should use guidance in this policy and have regards to other local policies, including those regarding disciplinary and grievances, to ascertain the appropriate course of action for dealing with low-level concerns. A written record of all information, including all action taken and a rationale for the actions, will be stored with HR and on LADO/ children's social care referrals, where relevant.

Whistleblowing

1Compass understand that staff and volunteers will often be the first to know when someone inside or connected with the organisation is doing something illegal, dishonest, or improper, but may feel apprehensive about voicing their concerns. However, it is in the interest of everyone, and the organisation that individuals with knowledge of wrongdoing are supported in reporting such behaviour.

Any individual with knowledge of any such activities should inform their Safeguarding/Child Protection Lead /coordinator/manager/trustee who will take the matter further as appropriate and necessary or alternatively call NSPCC Whistleblowing advice line on 0800 028 0285.

Please see [1Compass Whistleblowing policy and procedure](#).

Recruitment and employment

1Compass will safeguard and protect children and adults at risk by following the Safer Recruitment and Selection of Staff procedure and the [Recruitment, Supervision and Management of Volunteers](#) policy for further guidance.

This includes:

- Having a robust assessment and selection process for candidates who will work with, or have regular contact with children and adults at risk through their work;
- Undertaking internal and external checks the appropriate level prior to offering paid and voluntary work. These include references, the correct level/type of criminal conviction check for the nation and role, and right to work checks.

Reportable Incidents

It is a requirement of charity regulators that all charities inform them of serious/notable incidents that may occur (an adverse event, whether actual or alleged, which results in or risks significant):

- Alleged or actual abuse or harm to a child or adult beneficiary
- loss of your charity's money or assets
- damage to your charity's property
- harm to your charity's work or reputation

More details can be found at:

[The Charity Commission website](#) (England and Wales)

[The OSCR website](#) (Scotland)

[The Charity Commission NI](#) (Northern Ireland)

Learning and development

1Compass has a responsibility to ensure all new staff, trustees and volunteers undertake an induction programme. As part of this induction programme, 1Compass will ensure all staff, trustees and volunteers are made aware of and understand their responsibilities in respect of all policies relating to safeguarding and the protection of children and adults at risk, and understand the local procedure for reporting concerns. Safeguarding refresher training will occur annually, and any specific training by role will be updated as needed.

APPENDICES

1. Contact details

- a. 1Compass Strategic Safeguarding/Protection Lead role
- b. 1Compass Designated Safeguarding/Protection Lead role (s)
- c. Named Safeguarding/Child Protection Trustee
- d. Local Safeguarding Partnership (local Social Care for Scotland) contact
- e. LADO (local Social Care for Scotland) contact for the area

Specific responsibilities of key safeguarding/child protection roles within 1Compass.

- 2. 1Compass safeguarding/child protection reporting procedure**
- 3. Legal Framework**
- 4. Types of Abuse**

APPENDIX 1

Contact Details

Strategic Safeguarding/Protection role:

Nihal Williams

Contact information 07723434725 1compassnihal@gmail.com

Designated Safeguarding/Child Protection role:

Nihal Williams

Contact information 07723434725 1compassnihal@gmail.com

Trustee with Safeguarding/Protection responsibility:

Joshua Roberts

Contact information 07530310643 joshua.roberts@cambria.ac.uk

Local External Contacts relevant to locality/nation:

I.e. Local Safeguarding Partnership (England, Wales, NI), Local Social Care (Scotland)

Mared Pari

01492 575111

Tel out of hours: 0300 123 3079

duty@conwy.gov.uk

Local Authority Designated Officer (LADO) or equivalent:

Mared Pari

01492 575111

Tel out of hours: 0300 123 3079

duty@conwy.gov.uk

Other sources for help

NSPCC <https://www.nspcc.org.uk/> – 0808 800 5000

Childline www.childline.org.uk - 0800 1111

CEOP – Child Exploitation Online Protection <https://www.ceop.police.uk/Safety-Centre/> which has information and resources around online safety

Roles and Responsibilities within 1Compass

The trustees retain ultimate responsibility for promoting the welfare of children supported by 1Compass. They should agree who undertakes the following roles:

- ***Strategic Safeguarding/Child Protection Person/Lead/Officer.*** This is normally the most senior staff member.
- ***Designated Safeguarding/Child Protection Person/Officer/Lead.*** It is recommended that all staff responsible for managing staff or volunteers supporting families should take on this role.

Note:

In 1Compass both roles may be carried out by one person, although there should always be a deputy able to undertake the same level of responsibilities when the senior role is absent (this can be a trustee or staff member).

In each of the four nations the role will be referred to differently. This is typically, but not exclusively, as follows:

- Designated Safeguarding Officer (England and NI)
- Designated Safeguarding Person (Wales)
- Designated Safeguarding Children Officer (Scotland)

In addition to the above roles, where possible 1Compass should identify an external local specialist safeguarding/child protection adviser' ('Specialist Advisor') to support and advise 1Compass with regard to local issues and procedures.

The role of the 1Compass Strategic role is to:

- Model and promote 1Compass's commitment to safeguarding children/child protection in all aspects of their work and conduct;
- Ensure that the safeguarding policy and procedures and code of conduct are available and understood by all trustees, staff and volunteers, and that these are integrated into practice;
- Ensure the scheme's Policy and Procedures for Safeguarding and Protecting Children are updated and reviewed annually;
- Ensure appropriate training provision and dissemination of information for trustees, staff and volunteers on safeguarding and child protection issues on an annual basis;
- Collect monitoring data on all welfare, wellbeing and protection activities and evaluate the effectiveness;
- Take lead responsibility for dealing with safeguarding issues and providing information, advice and support to trustees, staff and volunteers;
- Maintain up to date knowledge of national and local safeguarding/child protection procedures and liaise appropriately with local agencies with regard to any issues;
- Notify and liaise with trustees and the Local Authority Designated Officer (LADO)/ Social Care and/or Police around any allegations of harm or inappropriate behaviour made against staff, volunteers and trustees;

- Support the Designated Safeguarding/Child Protection People with their responsibilities in keeping children safe, by:
 - Ensuring the provision of regular, recorded supervision;
 - Maintaining an overview of records of concern and action and referrals to children's social care and collate safeguarding/child protection concerns raised by 1Compass to identify patterns, ensuring that the Safeguarding Adviser (where relevant) or nominated trustee contribute to this overview, in particular where the Strategic Lead is a lone organiser, ensuring records are kept appropriately, in line with policy and practice.
- Immediately inform the Chair of Trustees in the event of the serious harm or death of a child;
- Where possible identify and liaise with a local Specialist Safeguarding/Child Protection Adviser;
- Supporting staff and volunteers when an incident has occurred.

The role of the 1Compass Designated role is to:

Model and promote 1Compass's commitment to safeguarding children in all aspects of their work and conduct

- Take responsibility for dealing with concerns about the safety of children raised by staff or volunteers who they supervise;
- Maintain a clear, factual, dated and signed/initialled record of contact with each supported family, in accordance with 1Compass guidance on record keeping;
- Inform the 1Compass's Strategic Lead of concerns raised and processes followed, ensuring records of concern and action are discussed, signed off and actioned appropriately;
- Liaise with relevant agencies and the Local Safeguarding Children Board/Social Care where appropriate about concerns, in accordance with 1Compass's confidentiality policy;
- Ensure the Safeguarding and Protecting Children Policy is available to families, including parents/carers and children and young people in 1Compass;
- Liaise with 1Compass's Strategic Lead about any concerns, including where there are allegations against trustees, staff and volunteers; in accordance with 1Compass and local child protection policies and procedures;
- Immediately inform the 1Compass's Strategic Lead in the event of the serious harm or death of a child (see guidance) and liaise with other agencies as appropriate;
- Supporting staff and volunteers when an incident has occurred.

Trustee with responsibility for safeguarding/child protection

Each scheme nominates a trustee who has a working knowledge of safeguarding/child protection or who undertakes local training in order to fulfil that role.

The role of the trustee is to:

- Provide a sounding board for staff with a Strategic role or Designated Persons role in order to consider the most appropriate course of action to take where there is a safeguarding/child protection concern in a family;

- Support the Strategic role to use local procedures appropriately (e.g. for referral, for escalation or dispute resolution);
- Contribute to Board discussions about the 1Compass's capacity in working with more complex families, including those where there are child protection concerns;
- Sign off any Record of Concern & Action forms completed by the Safeguarding/Child Protection Lead ;
- Support the Board and Strategic Lead to monitor and review systems, policy and procedures to ensure good safeguarding/child protection practice within the 1Compass;
- Undertake spot checks of family and volunteer files;
- Ensure adequate 'case load' supervision of the senior worker, by the Specialist Advisor if needed.
- Request a safeguarding update at each Board of Trustees meeting;
- Support staff and volunteers when an incident has occurred.

External Local Specialist Safeguarding Adviser

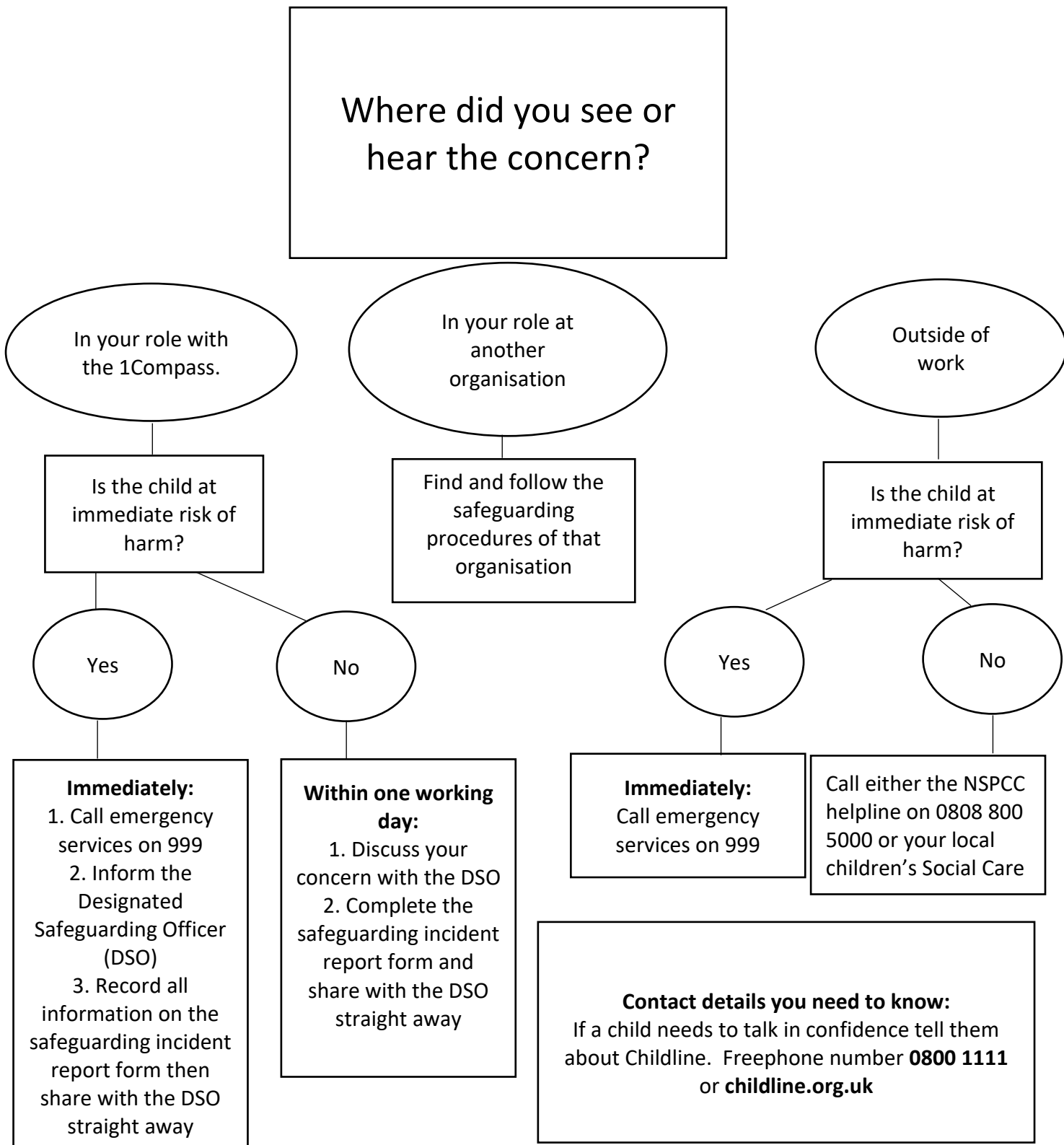
The local specialist adviser is available to the trustees, Strategic Lead role and designated people as appropriate within 1Compass and may:

- Provide a confidential sounding board where there is a safeguarding/child protection concern in a family;
- Support the use of local procedures appropriately (e.g. for referral, for escalation or dispute resolution);
- Update trustees and the Strategic Lead role about local safeguarding/child protection developments and changes to procedures, policies and agencies;
- Contribute to Board discussions about 1Compass capacity in working with more complex families, including those where there are child protection concerns;
- Support the Board and strategic lead to monitor and review systems, policy and procedures to ensure good practice within 1Compass;
- In 1Compass, the Specialist Adviser may agree to undertake 'case load' supervision of the senior worker, at the request of the trustees.

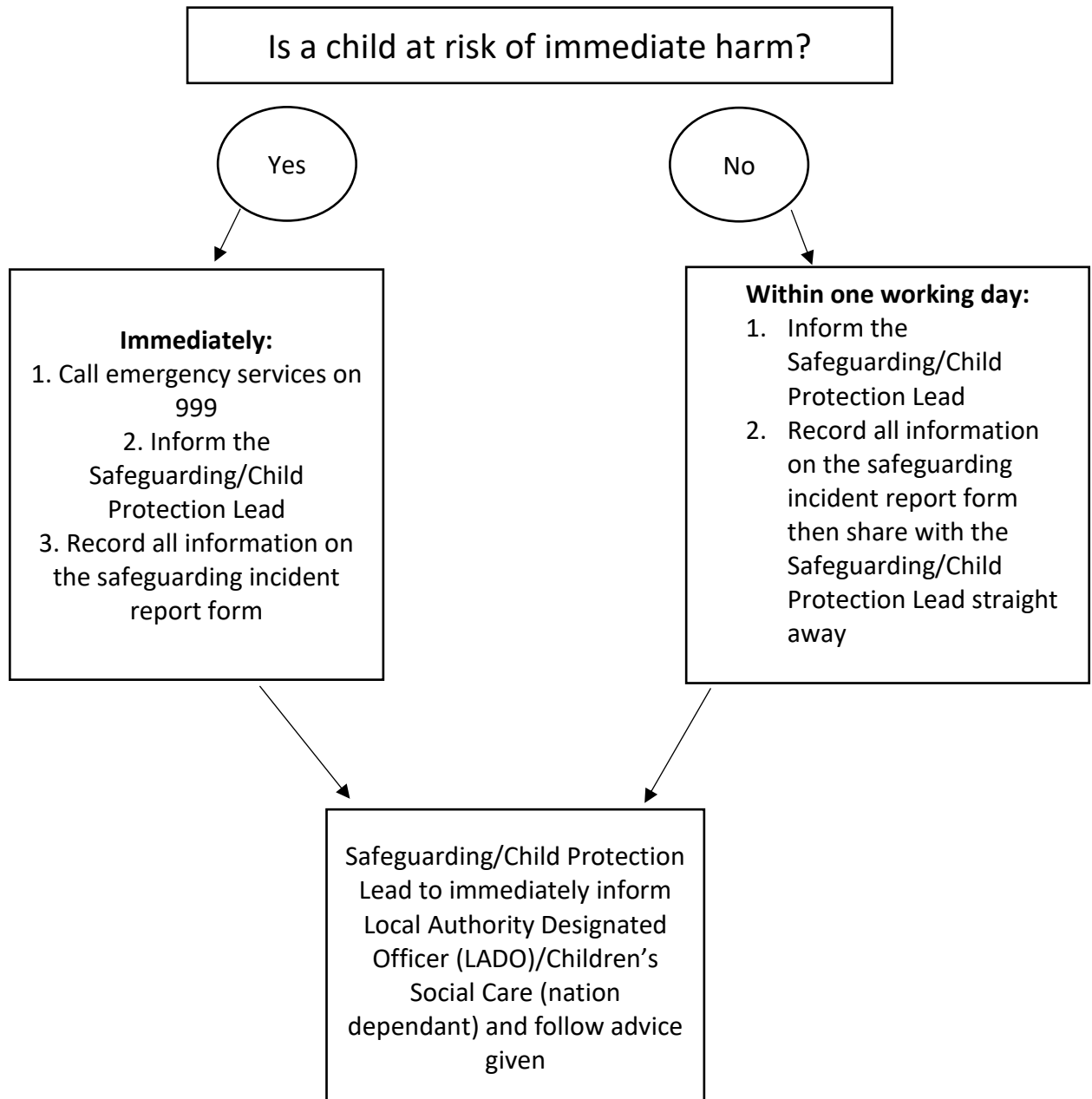
APPENDIX 2

1Compass safeguarding/child protection reporting procedure

Simple steps: What to do if you have concerns about a child



Simple Steps: Allegation of Abuse or Concern that a staff member or volunteer poses a risk to children



DO NOT approach the person who is being accused or discuss the matter with other colleagues, other than the Safeguarding/Child Protection Lead. If the allegation relates to the safeguarding/child protection lead then the *strategic* safeguarding lead or safeguarding trustee must be informed. In the event that the allegation relates to all of these individuals then you should contact the LADO/Children's Social Care directly.

APPENDIX 3 Legal Framework

The principles and legal responsibilities concerning safeguarding, on which this policy and related practice are based, are set out in legislation and policy.

It should also be noted that whilst Scotland is the only UK country to as yet have incorporated the UN Conventions on the Rights of the Child (UNCRC) into domestic law, this policy is underpinned by its key principles, as outlined below, which are relevant to all four nations:

- The best interests of the child must be a top priority in all decisions and actions that affect them. (Article 3)
- Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously.
- 1Compass must do all they can to fully comply with article 19 of the convention which is to ensure that children are protected from all forms of violence, abuse, neglect and bad treatment by their parents or anyone else who looks after them.

England	Scotland	Wales	Northern Ireland
Children Act 1989	The Children & Young People (Scotland) Act 2014	Children Act 1989	The Children (NI) Order 1995
Children Act 2004	National Guidance for Child Protection in Scotland 2021	Children Act 2004	Co-operating to Safeguard Children & Young People in Northern Ireland (2016)
Children & Social Work Act 2017	UN Convention on the Rights of the Child	Social Services and Well-being (Wales) Act 2014	Safeguarding Vulnerable Groups (NI) Order 2007
Working together to safeguard children (Dept. of Education 2018)	The Children Scotland Act 1995	Working Together to Safeguard People Volume 1 Introduction	Protection of Freedoms Act 2012
What to do if you are worried a child is being abused, advice for practitioners (Dept. of Education 2015)	The Protection of Vulnerable Groups (Scotland) Act 2007	Working Together to Safeguard People Volume 5 – Handling Cases to Protect Children at Risk	

Table continued

England	Scotland	Wales	Northern Ireland
	Disclosure Scotland Act 2020	Working Together to Safeguard People Volume 6 – Handling Cases to Protect Adults at Risk	
	The Children’s Charter	Wales Safeguarding Procedures 2019	
	Getting it Right for Every Child 2005	Well-being of Future Generations (Wales) Act 2015	
	The Children (Scotland) Act 2020	Rights of Children & Young People (Wales) Measure 2011	
	General Data Protection – Data Protection Act 2018	Working to Together to Safeguard People – Code of SG Practice	

Appendix 4

Types of Abuse

The following information is adapted from the NSPCC, Ann Craft Trust and the Social Care Institute of Excellence and is relevant to all four nations, even where the specific form of harm or abuse is not specifically referenced in legislation. Where possible signs or indicators are listed it is important to remember that these indicators alone do not mean someone is definitely experiencing harm or abuse.

Main types of abuse

Physical abuse

Physical abuse is the intentional causing of physical harm to a child or young person, this can include:

- Hitting, with hands or using an object to hit with, slapping, punching pinching.
- Shaking, throwing, pushing, shoving and kicking.
- Poisoning.
- Biting and scratching.
- Burning and scalding.
- Fabricating or deliberately inducing illness.

Any of these actions can cause (Signs):

Bruising, broken bones, sickness and physical illness, burns or scalds, bit marks or cuts and scratches, sight issues, internal injuries, head injuries, brain damage, death.

Emotional abuse

Emotional Abuse is the intentional and continual emotional damaging treatment of a child or young person, which affects their emotional development and well-being, this can include:

- The lack of love, affection and attention.
- Withdrawing love, affection and attention.
- Criticising, humiliating, name calling a child or young person.
- Call them names, shouting using sarcasm
- Scapegoating and constantly blaming a child or young person.
- Not allowing them social interaction or family contact.
- Allowing them to witness upsetting events.
- Not recognising achievement or pushing too hard to achieve
- Not allowing them to be individual and develop

Any of these actions can cause (Signs):

Struggles to manage or control emotions, lack confidence and low self-esteem, difficulties in maintaining or creating relationships, lack social skills, extreme outbursts.

The signs may vary depending on the age of the child

Sexual abuse

Sexual abuse is **any** sexual behaviour and activity with a child or young person under the age of 16, or any non-consensual sexual behaviour with a young person aged 16-18. Sexual abuse can be either 'contact', where actual physical contact happens, or 'non-contact' where a child or young person is subject to witnessing sexual activity or behaviour. Sexual abuse can happen online or in person.

Contact sexual abuse includes:

- Sexual touching of any part of a child's body, whether they're clothed or not
- Using a body part or object to rape or penetrate a child
- Forcing a child to take part in sexual activities, including touching, kissing and oral sex
- Making a child undress or touch someone else

Non-contact sexual abuse:

- Exposing or flashing
- Showing pornography
- Exposing a child to sexual acts
- Making them masturbate
- Forcing a child to make, view or share child abuse images or videos
- Making, viewing or distributing child abuse images or videos
- Forcing a child to take part in sexual activities or conversations online or through a smartphone

Any of these actions can cause (Signs):

Avoiding being alone with people or a person, sexualised behaviour, nightmares, changes in mood, seem distant, angry, depression, becoming secretive, hiding what they are doing on smartphones. Physical signs include unexplained pain, itching, bruising, or bleeding in or near genital areas and symptoms of sexually transmitted infections or pregnancy.

Child Sexual Exploitation (CSE) is a specific type of sexual abuse that involves children or young people being given things (e.g. gifts, drugs, money, status and affection), in exchange for performing sexual activities. Children and young people who are sexually exploited are often 'groomed', meaning they are tricked into trusting their abusers and believe themselves to be in consensual relationships with them. Other times abusers use violence, intimidation or financial abuse to control young people.

CSE can happen in person or online and can cause (Signs):

Inappropriate sexual behaviour, fear of certain people or places, secretive behaviour, changes in mood/character, having unexplained money or possessions, and the physical signs of sexual abuse outlined above.

Neglect

Neglect is the persistent failure to meet a child's or young person's physical and or psychological needs which can result in the damage to their health or development, and includes the neglect of unborn children. Neglect can be further categorised, as physical, emotional, medical or educational neglect. This includes:

- Failing to provide adequate care
- Failing to meet basic needs, food, clothing, shelter
- Not protecting them from harm or danger
- Not providing adequate supervision
- Failing to access adequate medical assistance or care
- Abandonment
- Not ensuring they receive an education

Any of these actions can cause (Signs):

Poor appearance or hygiene, health and development problems constant hunger or dehydration and/or stealing food, inappropriate or inadequate clothing, signs of malnutrition, untreated illnesses or injuries and frequent nonattendance at school or medical/other appointments.

Financial Abuse *

(*Financial abuse is only specifically referenced as a main form of abuse in Welsh legislation/policy)

Financial abuse in relation to children and young people could include:

- Children or young people working without pay
- Education Maintenance Allowance being taken by family without the child or young person's consent
- The child or young person's belongings sold or taken
- Misuse of allowances/grants for the child or young person's care

Exploitation*

(* Exploitation is only specifically referenced as main form of abuse in Northern Irish legislation/policy)

Exploitation is the intentional ill-treatment, manipulation or abuse of power and control over a child or young person; to take selfish or unfair advantage of a child or young person or situation, for personal gain. It may manifest itself in many forms such as child labour, slavery, servitude, engagement in criminal activity, begging, benefit or other financial fraud or child trafficking. It extends to the recruitment, transportation, transfer, harbouring or receipt of children for the purpose of exploitation. Exploitation can be sexual in nature.

Other forms of harm and abuse

Online/digital abuse

Online abuse is any type of abuse that happens on the internet. It can happen across any device that's connected to the web, like computers, tablets and mobile phones and can happen anywhere online, including: social media; text messages and messaging apps; email; online chats; online gaming; live-streaming sites. Children can be at risk of online abuse from people they know or from strangers. It might be part of other abuse which is taking place offline or might only happen online.

There are different types of online abuse including such as: cyberbullying; emotional abuse; grooming; sexting; sexual abuse; sexual exploitation.

Domestic Abuse

Domestic abuse is an incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse by an intimate partner, ex-partner or family member, experienced by someone aged 16 or over. Domestic abuse can include instances of physical, sexual, emotional/psychological and financial abuse. Being in a household where domestic abuse is taking place can seriously harm children and young people (regardless of if they are known to have witnessed any abusive incidents) and experiencing domestic abuse in this way is therefore a form of child abuse.

So called 'Honour-Based Violence' (HBV)

HBV is a collection of practices which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and / or community by breaking their honour code. Most victims of HBV are women or girls, although men and boys may also be at risk.

Triggers for HBV for children and young people can include: Perceived inappropriate clothing or make up; Perceived unsuitable romantic relationships (including inter-faith, inter-ethnicity or gay or lesbian relationships); Kissing or intimacy in a public place; refusing an arranged marriage; Loss of virginity; Pregnancy outside of marriage; Alcohol or drug use.

Forced Marriage

A forced marriage is one where either one or both people do not or cannot consent to the marriage, and pressure or abuse is used. It is illegal in the UK and is recognised as a form of domestic and child abuse and as an abuse of human rights. A forced marriage differs from an arranged marriage in which both parties consent to the assistance of their parents or a third party in identifying a spouse but are free to choose whether to enter the marriage or not.

The pressure put on people to marry against their will can be physical (including threats, actual physical violence and sexual violence) emotional and psychological (for example, when someone is made to feel like they're bringing shame on their family) and/or financial (for example withholding or stealing money). In some cases, people may be taken abroad without knowing that they are to be married. When they arrive in that country, their passport(s)/travel documents may be taken to try to stop them from returning to the UK.

Possible indications of forced marriage risk are: Siblings having been forced to marry, or the early marriage of siblings; Unreasonable restrictions of movement, e.g. being kept at home or being

monitored when out of the house; Sudden announcement of engagement to a stranger; Persistent absence from, or request for extended leave from school or work; Fear of not returning, or actual failure to return, from holidays/visits to country of origin/parents' country of origin.

Female Genital Mutilation (FGM)

FGM is a procedure where the female genital organs are injured or altered without any medical reason. It is typically a traumatic and violent act for the victim. The practice can produce severe pain and may result in immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death. FGM is prevalent in 30 countries. These are concentrated around the Atlantic coast to the Horn of Africa, in areas of the Middle East, and in some regions of Asia, but FGM can also occur in the UK. The age at which FGM is carried out varies considerably according to the community. The procedure may be carried out shortly after birth, during childhood or adolescence, just before marriage or during a woman's first pregnancy.

Potential indication of FGM risk include: A female child having a close female relative who has undergone FGM; A female child's father coming from a community known to practise FGM; a Family indicating that there are strong levels of influence held by elders in bringing up female children; A family believing FGM is integral to cultural or religious identity; A girl confiding to a professional that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'; Announcement of a long holiday to a girl's/woman's country of origin or another country where the practice is prevalent; A girl talking about FGM in conversation; A girl from a practising community is withdrawn from Personal, Social, Health and Economic (PSHE) education or its equivalent.

Potential signs FGM may have occurred include: A girl or woman suddenly having difficulty walking, sitting or standing; A girl or woman has frequent urinary, menstrual or stomach problems; A girl or woman being reluctant to undergo any medical examinations; A girl or woman asking for help, but not being explicit about the problem; A girl talking about pain or discomfort between her legs.

Modern Slavery

Modern slavery is defined as the recruitment, movement, harbouring or receiving of children, women or men through the use of force, coercion, abuse of vulnerability, deception or other means for the purpose of exploitation. It is a crime under the Modern Slavery Act 2015 and includes holding a person in a position of slavery, servitude forced or compulsory labour, or facilitating their travel with the intention of exploiting them soon after.

Someone is in slavery if they are: Forced to work, through coercion, or mental or physical threat; Owned or controlled by an 'employer', through mental or physical abuse or the threat of abuse; Dehumanised, treated as a commodity or bought and sold as 'property'; Physically constrained or have restrictions placed on their freedom of movement.

Possible indicators that a child is the object of modern slavery include: Having few or no personal possessions; not being allowed or able to speak for themselves; Poor living conditions, e.g. dirty, overcrowded; being cared for by an adult that is not their parent or legal guardian; A number of unrelated children found at one address; Frequent movement of children from a premises.

Radicalisation

Radicalisation is the process through which a person comes to support or be involved in 'extremist' ideologies. There is no official definition of an 'extremist', but the purposes of this policy the Oxford Dictionary definition shall be used: 'A person who holds extreme political or religious views, especially

one who advocates illegal, violent, or other extreme action' (Oxford Dictionary). In some circumstances radicalisation can result in a person becoming drawn into terrorism and is in itself a form of harm to children.

Indicators of radicalisation can include: A person isolating themselves from family and friends; Talking as if from a scripted speech; Unwillingness or inability to discuss their views; A sudden disrespectful attitude towards others; Increased levels of anger; Increased secretiveness, especially around internet use.