

BASECAMP ADVENTURE TRUST

SAFEGUARDING POLICY (revision to reflect move towards approved supplier status and appointment of staff and volunteers – agreed by Board 23 December 2022)

Context

Basecamp Adventure Trust (BAT) has a moral and legal obligation to ensure the safety and wellbeing of others. As an organization, BAT recognizes that it owes a **Duty of Care** to:

- Children accessing its programmes
- Their parents and carers
- Referral partners and staff accompanying groups
- Volunteers, staff and trustees
- Delivery partners and Contractors
- Donors and supporters
- Visitors to programme activities

BAT's Duty of Care is a general legal duty to avoid causing injury, harm or damage to these groups. BAT is required to do everything reasonably practicable to protect their health, safety and general welfare.

All BAT staff, volunteers and trustees are required to take responsibility for ensuring all actions are in line with this Duty of Care, and they will be supported to comply with this requirement during their induction, training and supervision, and by developing and implementing appropriate policies and procedures for them to follow.

Safeguarding responsibilities in relation to our charitable aim

BAT's charitable aim is *.....to advance in life and relieve the need of young people* living in Yorkshire who are disadvantaged, vulnerable or experiencing difficulties in life, in particular, but not exclusively, through the provision of outdoor adventure programmes.*

This puts upon the charity a specific responsibility in relation to the safeguarding of children and child protection.

*for the purposes of this policy, the term 'young people' and 'child/children' are interchangeable and mean individuals under the age of 18

Our approach

We believe that

- At all times every child has the right to be safe, and feel safe
- At all times every child has the right to have any concern regarding their safety or wellbeing responded to swiftly, robustly, in line with UK law and best practice, and in a way that recognizes the complexity and uniqueness of their individual situation
- The welfare of the child is paramount at all times and we have a responsibility to promote the welfare of children and young people, to keep them safe and practice in a way that protects them.

We recognize that

- All children, regardless of age, disability, gender, gender reassignment, race, religion or belief, sex or sexual orientation have an equal right to protection from all types of harm or abuse
- Some children and young people are additionally vulnerable because of the impact of previous/continuing experiences, their level of dependency, communication needs or other issues
- We need to work in partnership with children, their parents/carers and other agencies in keeping them safe and promoting their welfare

BAT will adopt, disseminate, regularly review and maintain a policy framework, set of procedures and promote an organizational culture that ensures children's safety and wellbeing is prioritized at all times, and that reflects its developing models of operation.

IMPORTANT INFORMATION

In relation to its pilot programme, BAT is working directly with its referring partners (two Leeds Schools) and, under our Partnership Agreement, the schools retain day to day responsibility for the general safety and welfare of their pupils during their participation on the Basecamp programme, which includes school staff accompanying the children on events and during activities and dealing with any behavioural issues, health needs and emergencies, as well as being the initial point of contact for raising any safeguarding concerns. For this reason BAT has agreed to adopt and follow school safeguarding and child protection procedures and this is reflected in our own policy and procedures which refers to and includes relevant information and guidance taken from the school's policy document. The schools also remain the main link to parents and carers. That being said, BAT recognizes that **safeguarding is everyone's responsibility** and our trustees, staff and volunteers work closely with schools, delivery partners and others to ensure that, together, we can keep children safe.

Definitions

- **Safeguarding** is the action that is taken to promote the welfare of children and protect them from harm. It includes protecting children from the potential for abuse and maltreatment, preventing harm to children's health or development, ensuring children grow up with safe and effective care, taking action to enable all children and young people to have the best outcomes
- **Child protection** is part of the safeguarding process. It focuses on steps to protect individual children identified as suffering, or likely to suffer, significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

BAT recognizes that there are various forms of **abuse and harm** and these are outlined in Appendix 1.

These are fully explained to staff and volunteers during their general awareness training at the start of their involvement with BAT and they receive updates and refreshers to support their understanding as part of their supervision and development.

Role of Designated Safeguarding Lead

The Designated Safeguarding Lead (DSL) will always be a member of the Leadership Team and will report to a named trustee who has oversight of safeguarding issues (for the purposes of the pilot programme this may be the same person given that we are not yet fully staffed). The current Designated Safeguarding Lead is Debra Scott: e mail debra@basecamp.org.uk, tel: 07771822045.

The main responsibilities of the DSL will be to:

- Raise general awareness and support the delivery of training and support to all BAT staff and volunteers, and help to engender a safeguarding culture that gives confidence to everyone to raise concerns
- Develop and ensure the implementation of any safeguarding policies and procedures, including periodic reviews (two-yearly or after any specific incident) and the provision of annual reports to the Board of Trustees
- Be the key link between BAT and the teachers/schools' Designated Safeguarding Leads in relation to communicating on safeguarding matters and specifically the reporting of any concerns (under the Partnership Agreement, BAT has agreed to follow school safeguarding and child protection procedures)
- To undertake competency training in accordance with the needs of the role, and to keep abreast of any national or local policy and procedural changes
- To source and commission specific training for staff and volunteers, relevant to their role

In the event that the DSL is unavailable or unable to act, any urgent safeguarding matters will be referred to the named trustee or, failing that, the Chair of the Board (or a deputy DSL, if one has been appointed). However, it is expected that urgent safeguarding issues involving children on the programme will be routed via the accompanying teachers to the schools' DSLs, except where the issue involves a member of school staff, in which case the matter will be referred to the BAT DSL who will liaise with the school DSL (see diagram at Appendix 2)

Safer recruitment, training and support

BAT's recruitment policy and processes are included within our People Management Policy, and reference is made specifically to safer recruitment requirements. These are summarized below:

- All staff and volunteers working on BAT programmes are deemed to be undertaking regulated activity and as such will be the subject of enhanced DBS checks, updated 3 yearly, and any necessary risk assessments will be undertaken based on the outcomes of these checks
- References will be requested for all positions (not friends or family)
- Interviews will be held by members of the Leadership Team and assessments/decisions will take account of the applicant's approach to and understanding of safeguarding
- The volunteer policy and agreement covers specifically the volunteers' responsibilities in relation to safeguarding
- Safeguarding responsibilities, including the duty to act in accordance with our organizational culture and safe practice requirements are covered explicitly in our Code of Conduct

All trustees, staff and volunteers will receive safeguarding briefings as part of their induction, which will include as a minimum:

- a copy and explanation of this policy

- an explanation of the categories of harm and abuse and opportunities to ask questions and consider scenarios
- the expectations of BAT trustees, staff and volunteers in terms of promoting and supporting a safeguarding culture and adopting safe practice
- confidentiality and safe handling of information/data protection
- guidance and procedures for logging and reporting a concern

Other more specific training will be given in accordance with particular roles and responsibilities.

Steps to be taken in response to any concern for a child's welfare

A 'concern' is defined as any information, observation, comment or other sense that leaves an individual feeling ill at ease regarding any aspect of a young person's wellbeing. If in doubt, staff and volunteers must always voice their concerns. Not all concerns will necessarily go on to require further action, but BAT wants to ensure that opportunities are taken at the earliest stage to identify concerns and potential safeguarding issues.

When a BAT staff member, volunteer or any other person connected to BAT becomes concerned regarding the welfare of a child, they must report the concern to the teacher accompanying the child unless it is not appropriate/possible to do so, in which case they would report the concern to the programme manager as soon as practically possible, and always on the same day as the concern arose (this can be verbally, but preferably on a Concern Form – see Appendix 3). In addition, they should text C4C and the child's initials to the BAT mobile phone number as a real time record that can then be followed up.

The teacher or programme manager will, in consultation with their Designated Safeguarding Leads, determine the immediate and/or planned action to be taken in line with the school's policy and procedures. It is expected that this would include:

- assessing the situation and planning the response, support and other actions that are required to keep the child safe whilst on the BAT programme, and also outside of the programme where necessary
- ensure the reporting individual is supported to record the concern on a Concern Form, if not already completed
- ensure the reporting individual is given appropriate support both in terms of their own experience in hearing/witnessing concerning information and with regard to any further actions being requested of them
- where the concern relates to risk of significant harm, whether or not immediate, information must be provided to the Designated Safeguarding Lead without delay, and they will be responsible for determining what further actions and referrals need to be made in line with school procedures.

Steps which must be taken if significant or immediate harm is suspected

Immediate significant harm is where a child is at risk within the next few hours of harm which would be likely to cause serious physical injury, extreme distress or trauma.

Significant harm includes the circumstances defined above, and the harm may arise via a one-off incident or via incremental patterns of exposure to harmful situations over time.

If a child is thought to be at risk of immediate harm, the Police must be called without delay. In an emergency situation, this will need to be done by any responsible adult who is with the child at the

time, and could be a teacher, outdoor instructor, BAT volunteer or member of BAT staff. However, if it is not an emergency, and the responsible adult is not a teacher, they should consider whether time safely allows for them to first inform the teacher, or failing that the programme manager who should consider the need to take advice from their Designated Safeguarding Lead prior to calling the Police.

Referrals to Children's Services or other statutory agencies

The decision as to whether the information meets the threshold for onward referral to Children's Services or other statutory agency will be made by the school's Designated Safeguarding Lead who will also determine what additional information may be needed in order to make this decision, and also consider whether/at what stage the child's parents should be informed. Where it is determined that this threshold has been met, referrals will be made by the school's Designated Safeguarding Lead in accordance with school procedures to the relevant team in Children's Services covering the area of the child's home address within 24 hours, and the children's parents/carers must be informed of the referral unless to do so would place a child's safety at risk, in which case parents/carers must not be informed and advice should be sought from Children's Services.

The process and destination for referrals will be made clear during training and supervision. Contact numbers and instructions will be readily available/displayed, and will reflect the schools' safeguarding procedures (referrals will normally be to the local authority's multi-agency safeguarding team if there is no existing social worker for the child, or the child's social worker/duty social work team if there is one – see process outlined in Appendix 2)

Supporting children who make a disclosure

A 'disclosure' refers to a child telling another individual about issues which concern or worry them at home, school or elsewhere. The issue could be a minor issue or serious abuse or harm. In any situation where a child has found the courage to voice their concerns it is important to take the matter seriously and respond empathetically and professionally. Guidance on how to respond to a child who makes a disclosure is given in Appendix 4.

Responding to observable concerns (e.g. marks/injuries, concerning behaviour)

Concerns may also arise from observations whilst spending time with children. Examples of visual signs or comments/behaviours that could be indicators of harm are shared with staff during induction and training (Appendix 1). If staff or volunteers make observations which lead them to be concerned for the welfare of a child, they should take a mental note of the details and refer the matter to the teacher/programme manager as soon as practicable, and also text C4C and the child's initials to the BAT mobile phone as a real time record. If the situation allows e.g. the staff or volunteer is already in dialogue with the child and has a trusting relationship, then it might be appropriate to ask one or two open questions to get some context before referring the issue to the accompanying teacher/programme manager. Under no circumstances should the child be 'interviewed' - staff and volunteers should present as a calm, interested, and a safe and responsive adult with whom children can explore difficult subjects should they wish to.

Recording information – Concern Forms

Relevant information relating to any concern about either harm or need must be recorded on a Concern Form within 24 hours of the concern arising (Appendix 3). Guidance will be given as to how to approach the completion the form during induction/training. Concern Forms will be available

from the teacher or programme manager and staff and volunteers will be reminded of this at briefings before events and will be supported to use them should the need arise.

Completed forms will be provided via the teacher/programme manager to their DSL and used in accordance with school procedures.

Safe culture and practice

BAT will promote a safeguarding culture that enables children to feel safe by creating a caring, welcoming, inclusive atmosphere where they feel listened to and able to trust the adults engaging with them and therefore will be more likely to talk and act freely and share concerns. BAT will also adopt key principles of safe practice in relation to the design and delivery of its programmes, and staff and volunteers will be briefed on this at induction and during training and supervision, including:

- one to one engagement or isolated situations – at all times BAT staff and volunteers must avoid being alone in an isolated or unobservable situation with an individual child. If this does become necessary for any reason, the staff member or volunteer should let others know of the situation and take measures to reduce any isolation e.g. by leaving doors open
- during periods of undress – supervision of bedrooms, bathrooms or changing facilities should be undertaken in pairs, including at least one member of the teaching staff
- physical touch – BAT believes that staff and volunteers should be responsive, emotionally available and nurturing to the children on its programmes and adopts a ‘positive physical touch policy’ ie. that in some circumstances, in response to a child’s expressed need for physical comfort, a limited and mindful physical touch may be appropriate e.g. a sideways hug, an arm around a shoulder or a hand on the back to help them calm down.
- Physical intervention – BAT is not able to accept children onto the programme who are assessed as needing physical intervention to keep themselves or others safe and, should an occurrence of this kind arise, it is expected that the accompanying teachers would intervene as required, and it is not expected that BAT staff or volunteers will become involved.

Concerns about BAT, a member of staff, a volunteer or other adult associated with the charity

BAT aims to ensure that all staff and volunteers, and others with whom they work to deliver our programmes, feel safe and confident to raise any allegations, concerns or complaints they may have regarding our charity or any individual representing the charity

Concerns and allegations will be dealt with in line with BAT’s Whistleblowing processes which are designed to ensure that concerns or allegations can be raised in a confidential manner, are taken seriously, are responded to appropriately and that the individual reporting the concern or allegation is not mistreated, discriminated against or otherwise treated differently as a result of sharing information.

Definitions

A **complaint** is where an individual is unhappy about the service provided or the way in which they have been dealt with by our charity. These should be dealt with in line with our grievance policy (staff) or complaints policy (service users/members of the public), and in the case of volunteers our volunteer policy.

A **concern** is where an individual is worried about any aspect of the charity’s operations.

An **allegation** is where an individual is providing specific information relating to the charity or an individual within it where there has been an action, or a failure to act, that has placed a child (or other adult) at risk of harm, has resulted in a criminal act, or poses a risk to children (or adults). This may have taken place during a BAT programme, or outside of the programme.

Managing Concerns and Allegations against a BAT Member of Staff or Volunteer

Should a staff member or volunteer be the subject of an allegation that they have:

- Behaved in a way which has harmed a child, or may have harmed a child;
- Possibly committed a criminal offence against or related to a child;
- Behaved in a way which indicates they are unsuitable to work with a child

The issue must immediately be referred to the Designated Safeguarding Lead. Should the DSL be unavailable or they are the subject of the allegation, they must refer the matter to the Chair of the Board of Trustees. If the issue raised does not reach this threshold, it should be treated as an internal 'concern'* and be managed via the BAT Concerns and Disciplinary Policies.

Examples of behaviours that would warrant an allegation or safeguarding concern include:

- Physical: e.g. intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects or rough physical handling
- Emotional: e.g. intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, discriminatory attitude
- Sexual: e.g. sexualized behaviour towards children, grooming, sexual harassment, sexual assault and rape, sending inappropriate messages through social media and other technologies
- Neglect: e.g. failing to act to protect a child/children, failing to seek medical attention or failure to carry out appropriate/proper risk assessment

*(Low level concerns would be actions that contravene BAT's code of conduct and safer working practices but which do not meet the above threshold, these would include such things as:

- Being over familiar with children
- Having favourites
- Taking photographs of children on their mobile phones
- Engaging with a child on a one-to-one basis in a secluded area or behind a closed door
- Using inappropriate sexualised, intimidating or offensive language)

Where the DSL is satisfied that the allegation meets any of the threshold criteria above, they must then inform the Local Authority Designated Officer (LADO) within one working day of when an allegation is made and prior to any investigation taking place. The Trustees should also be informed at the same point.

The management of allegations of this nature against staff or volunteers is a matter for the LADO, not BAT. BAT will undertake no further investigation of the allegation other than the provision of information requested by the LADO or other relevant agency.

If there is a concern a child is at risk of significant harm, the procedures within BAT's Safeguarding Policy should be followed in addition to the referral of the allegation to the LADO.

Given that the school is playing a significant role in safeguarding the children on BAT programmes and is the main link to the child's parents, BAT will inform the school's DSL at the point the LADO is

informed and will agree with them, in consultation with the LADO and acting on their advice, how best to inform the parents of the child, should they not already be aware.

The DSL should seek advice from the LADO, the Police and Children's Social Care about how much, at what point, and by whom, information regarding the allegation should be disclosed to the individual who is the subject of it.

If it is concluded that the Police and/or Children's Social care need to be involved in further inquiries, informing the individual subject to the allegation must not happen prior to a Strategic Discussion or until the decision is made at a Strategy Meeting.

Following consultation with the LADO and subject to any restrictions, as above, regarding the sharing of information the DSL should, if so advised by the LADO, inform the person subject to the allegation about the nature of the allegation, how enquiries will be conducted and the range of possible outcomes (e.g. unfounded, malicious, unproven or proven, and possible onward referral to disciplinary action, dismissal, or referral to DBS or regulatory body).

The staff member or volunteer subject to the allegation must always:

- Be treated fairly and honestly and helped to understand the concerns expressed and processes involved
- So far as is possible, be kept informed of the progress and outcome of any investigation and the implications for any disciplinary or related process
- If suspended, be kept up to date about organizational developments
- Offered any other support BAT deems useful and appropriate

The DSL must keep the BAT Leadership Team and Board of Trustees updated regarding the management of such allegation processes.

Upon conclusion of the LADO investigation, BAT will be advised whether the allegation was determined to be unfounded, unproven, malicious or proven. Allegations which are not proven should not be held on the individual's records. Should an allegation be found proven, the DSL must consult with the LADO regarding any further action being taken by the LADO or other associated agencies. The matter will then be dealt with reference to BAT's internal Disciplinary/Concerns policy to determine BAT's own management response. Where necessary, BAT will refer the matter to the DBS for consideration of barring.

On conclusion of the LADO process, and separately to any disciplinary process, the DSL should lead a learning review of BAT's safeguarding policies and procedures, to include analysis of the specific concern or allegation raised, with the aim of understanding and applying any organizational learning points. The results of this review should be fed back to the Board of Trustees.

Should the person raising the concern or allegation about unsafe practice, insufficient action to keep children safe, or a criminal act has taken place feel that BAT has not dealt with the matter appropriately, they should report the concern to the relevant authority. The relevant authority is the LADO, and if a young person is felt to be suffering or at risk of suffering significant harm, the relevant authority will also be Children's Social Care, and if the issue relates to a criminal offence, the relevant authority will also be the Police.

Confidentiality

Information on pupils is gathered from schools as part of the referral process and, on acceptance onto the programme, further detailed information is provided in order to understand the specific

needs or the children being referred, including any health and dietary needs and information that supports the decisions to refer onto the programme. This information is to be handled, retained and disposed of securely by BAT in line with its privacy policy, data protection protocols and retention policy.

BAT adopts the core principle that only information necessary for the safe fulfilment of a staff member or volunteer's duties will be disclosed to that individual. All staff and volunteers will be made aware of the need for confidentiality in relation to children's personal data as detailed in its Data Protection policy. This will be done at induction and through training and supervision.

Any information that is shared is required to remain confidential. That is not to say that information relating to a concern for the welfare of the child should not be shared – it means that such information should only be shared with those defined within this safeguarding policy and procedures, and by the methods stipulated.

Specific consent is obtained via the schools from parents/carers to take and use photographic and video images of the children on our programmes, and these must be safely stored in line with our data protection policy and anonymized when used for reporting and publicity purposes.

Children who may be subject to specific forms of harm/abuse

BAT recognizes that some children can be subject to specific forms of harm/abuse, including:

- Extremism and Radicalisation
- FGM (female genital mutilation)
- Child Sexual Exploitation (CSE) and Child Economic Exploitation (CEE)
- On-line abuse as a result of using social media and mobile phones, including the sharing of inappropriate images

BAT staff and volunteers will be made aware of these specific forms of harm and abuse during induction and training, and the signs to look for. Concerns relating to these issues should be reported in line with the procedures outlined in this policy, but also having regard to any national or local policy requirements and arrangements.

In relation to the use of social media, BAT is currently developing ways in which it can engage with children on the programme in between and during events, including messaging and sharing images with the group. BAT is working with the schools to ensure that this can be done safely and in line with any school policies and requirements, and within GDPR regulations.

Promoting positive behaviour (including anti-bullying strategy)

Ground rules are developed and agreed with the young people at the commencement of the programme and these address general behaviour and how we will treat each other, including the need for mutual respect and a zero tolerance of bullying of any kind. These ground rules are used throughout the programme as a reminder of the behaviour and attitudes we expect of each other. In the event that issues arise, these will be dealt with promptly by BAT staff and/or the accompanying teachers, and where necessary the school will instigate its own behaviour policies and procedures.

Provision of a safe environment

BAT programmes take place in various locations and in different outdoor settings, some of which can be extreme environments and potentially hazardous. In addition to compliance with this

Safeguarding policy, steps are taken by BAT through the application of its Health and Safety and Risk Management policies and procedures to identify and remove/minimize risks (this policy should be read in conjunction with these other policy documents).

BASECAMP ADVENTRE TRUST

SAFEGUARDING POLICY

APPENDIX 1

(taken from schools safeguarding policy which is based on the Leeds Children's Services Model Safeguarding and Child Protection Policy 2021-22)

Definitions and indicators of abuse

Reference: Working Together to Safeguard Children (DfE 2018). See also KCSiE Part one and Annex A.

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, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate 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.

Examples which may indicate neglect (it is not designed to be used as a checklist):

- Hunger
- Tiredness or listlessness
- Child dirty or unkempt
- Poorly or inappropriately clad for the weather
- Poor school attendance or often late for school
- Poor concentration
- Affection or attention seeking behaviour
- Untreated illnesses/injuries
- Pallid complexion
- Stealing or scavenging compulsively
- Failure to achieve development milestones, for example, growth, weight
- Failure to develop intellectually or socially
- Neurotic behaviour

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

Examples which may indicate physical abuse (not to be used as a checklist):

- Patterns of bruising; inconsistent account of how bruising or injuries occurred
- Finger, hand or nail marks, black eyes
- Bite marks
- Round burn marks, burns and scalds
- Lacerations, wealds
- Fractures
- Bald patches
- Symptoms of drug or alcohol intoxication or poisoning
- Unaccountable covering of limbs, even in hot weather
- Fear of going home or parents being contacted
- Fear of medical help
- Fear of changing for PE
- Inexplicable fear of adults or over-compliance
- Violence or aggression towards others including bullying
- Isolation from peers

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of sexual images, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Examples which may indicate sexual abuse (it is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge
- Anal or vaginal discharge, soreness or scratching
- Reluctance to go home
- Inability to concentrate, tiredness
- Refusal to communicate
- Thrush, persistent complaints of stomach disorders or pains
- Eating disorders, for example anorexia nervosa or bulimia
- Attention seeking behaviour, self-mutilation, substance abuse
- Aggressive behaviour including sexual harassment or molestation
- Unusually compliant
- Regressive behaviour, Enuresis, soiling
- Frequent or open masturbation, touching others inappropriately
- Depression, withdrawal, isolation from peer group
- Reluctance to undress for PE or swimming
- Bruises, scratches in genital area

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. It may include not giving the child opportunities to express their

views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child in participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment.

Examples which may indicate emotional abuse (it is not designed to be used as a checklist):

- Over-reaction to mistakes, continual self-deprecation
- Delayed physical, mental, emotional development
- Sudden speech or sensory disorders
- Inappropriate emotional responses, fantasies
- Neurotic behaviour: rocking, banging head, regression, tics and twitches
- Self-harming, drug or solvent abuse
- Fear of parent being contacted
- Running away/going missing
- Compulsive stealing
- Masturbation
- Appetite disorders – anorexia nervosa, bulimia
- Soiling, smearing faeces, enuresis

N.B.: some situations where children stop communication suddenly (known as "traumatic mutism") may indicate maltreatment.

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

Reference: Child Sexual Exploitation. *Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation* (DfE 2017)

Responses from parents

Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- An unexpected delay in seeking treatment that is obviously needed
- An unawareness or denial of any injury, pain or loss of function (for example, a fractured limb)
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development
- Reluctance to give information or failure to mention other known relevant injuries
- Frequent presentation of minor injuries
- Unrealistic expectations or constant complaints about the child

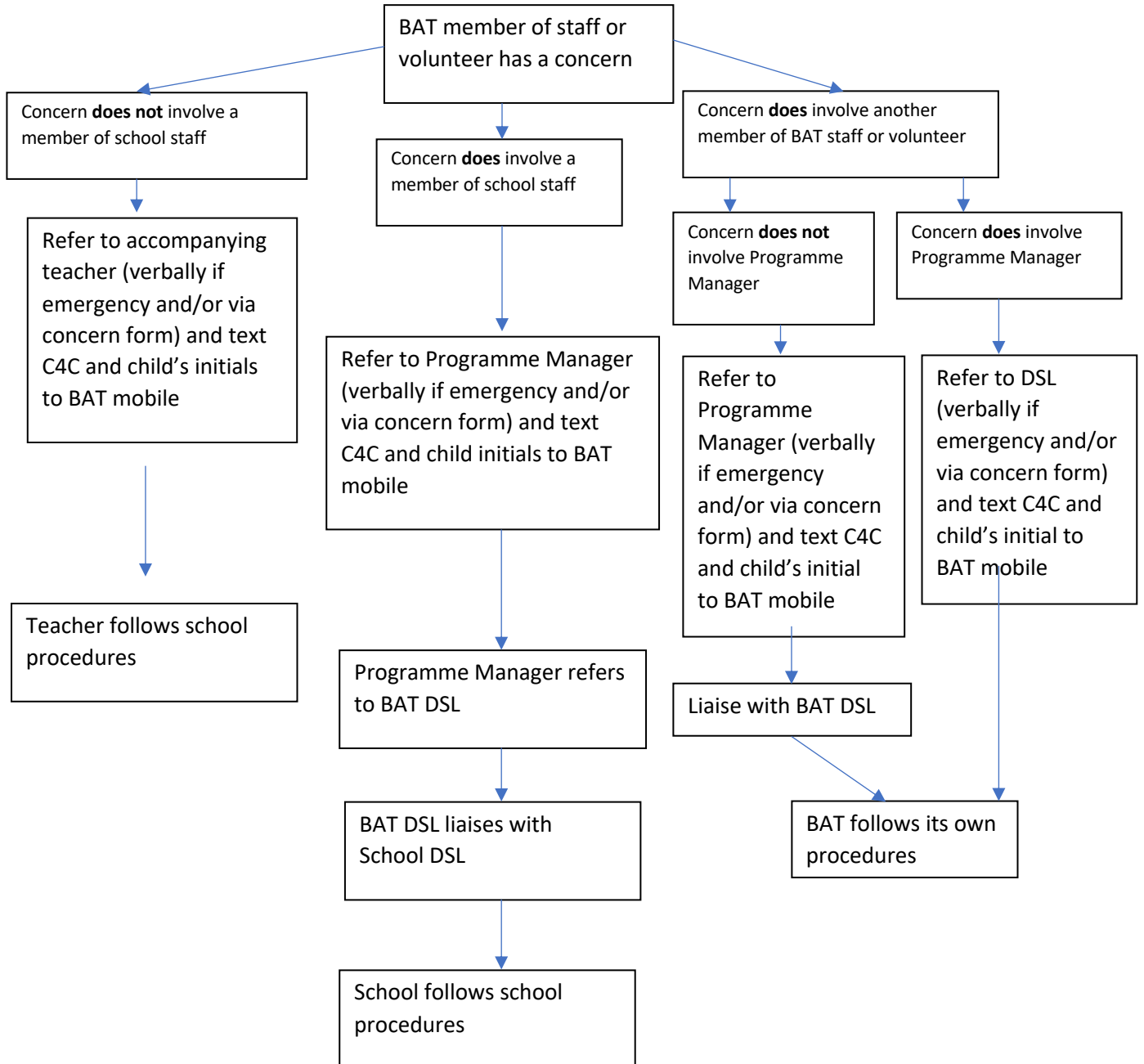
- Alcohol misuse or other drug/substance misuse
- Parents request removal of the child from home
- Violence between adults in the household

BASECAMP ADVENTURE TRUST

SAFEGUARDING POLICY

APPENDIX 2

Referral process in the event of a concern



BASECAMP ADVENTURE TRUST: SAFEGUARDING POLICY

CAUSE FOR CONCERN FORM

APPENDIX 3

Page 1 of 2

(adapted from schools cause for concern form which is from the Leeds Children's Services Model Safeguarding and Child Protection Policy 2021-22)

Strictly Confidential

Note: Please do not interpret what is seen or heard; simply record the facts. After completing the form, pass it immediately to the accompanying teacher (or where necessary, the programme manager)

Name of childSchool.....

Name of staff member/volunteer completing the form

Day..... Date..... Time..... Place.....

(of observed behaviour/discussion/report of abuse)

Nature of incident/concern including relevant background (Record child's words verbatim and any wishes and feelings expressed)

Signed: _____

Action/passed to: _____

For: School Designated Safeguarding Lead Officer Use

Name: _____ Date: _____ Time: _____

Action Taken	By Whom	Outcome
Discussion with child Ensure the child's wishes and feelings are ascertained where appropriate and fully recorded		
Monitoring Sheet		
Check behaviour database for recent incidents that might be significant to inform assessment		
Contact parents Please tick Telephone call _____ Meeting: _____ E mail: _____		
Refer as appropriate (i.e. CSWS, cluster, family support etc.)		
Other (please specify)		

BASECAMP ADVENTURE TRUST

SAFEGUARDING POLICY

APPENDIX 4

GUIDANCE FOR RESPONDING TO CHILDREN WHO REPORT ABUSE

When a child tells me about abuse, s/he has suffered, what must I remember?

- Stay calm
- Do not transmit shock, anger or embarrassment
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed
- Tell the child that it is not her/his fault
- Encourage the child to talk but do not ask “leading questions” or press for information
- Listen and remember
- Check that you have understood correctly what the child is trying to tell you
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected
- Do not tell the child that what s/he experienced is dirty, naughty or bad
- Do not take photographs or make videos of any injuries reported by a child
- It is inappropriate to make any comments about the alleged offender
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know
- As soon as you can afterwards, make a detailed record of the conversation using the child’s own language. Include any questions you may have asked. Do not add any opinions or interpretations

NB It is not a BAT staff or volunteer role to investigate reports of abuse. Their role is to observe that something may be wrong, ask about it, listen, be available and respond appropriately.

Immediately afterwards

You must not deal with this yourself. All reports of abuse must be recorded and responded to in keeping with BAT and School’s professional roles and responsibilities outlined in Appendix 2.