The Island Safeguarding Policy

2026

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Section 1: Our Vision, Mission and Values statement:

The Island Youth is a Registered Charity (1120420) and operates from premises situated on New Lane, Huntington, York. email: enquiries@theislandyork.org

Vision
A York where every child and young person has a trusted adult who listens, champions and helps them thrive.

Mission
Our Mission is to help transform the lives of children and young people in York by providing them islands of time and space.
We do this by:

- Creating safe, compassionate and consistent spaces where children and young people can feel heard by adults, are valued and supported. We help young people build their confidence, advocate for themselves and navigate challenges. We do this through early intervention support, mentoring and meaningful opportunities.
- Working alongside families, schools, community partners and local services to provide joined-up, preventative support. We offer trusted relationships and strengthen the network of support around each young person, fostering a sense of belonging.
- Supporting and strengthening the skills of volunteer mentors, staff, and youth sector professionals so more children and young people in York can benefit from positive adult relationships and thrive.

Values
Compassion
We lead with kindness, empathy and respect.
We take the time to understand each young person's experience, creating a safe environment where they feel valued, supported and treated with dignity. Compassion shapes how we listen, respond and build trust every day.

Connection
We believe strong relationships change lives.
We build genuine, trusting connections with young people, families, volunteers and partners, creating a sense of belonging in communities across York. Through honesty and integrity, we connect people to each other, to opportunities and to the wider city.

Consistency
We are reliable, committed and present.
We provide steady, high-quality support that young people and families can depend on, building trust over time. Our consistency creates stability, strengthens resilience and enables lasting change.

1.1 Policy Definitions:

- "Participants" means children, young people, adults and any other user of the services offered by The Island.
- References to adults include community members, visitors, trustees, staff and volunteers.
- "Worker" means anyone working on behalf of The Island including (but not by way of limitation) Senior Managers, members of the Trustees of The Island, paid staff (whether full time, part time or ad-hoc), volunteers, sessional workers, project workers, agency staff and students.
- "Lead" means a member of staff responsible for delivering youth services at The Island

1.2 Aim of this Policy Document:

- To protect all children and adults who access The Island's services.
- To provide workers with the overarching principles that guide our approach to safeguarding children, young people and adults.
- To provide a working document which provides guidance and further references to support workers and volunteers in managing safeguarding scenarios.

1.3 The Island believes

- Safeguarding is everybody's responsibility
- No-one should experience abuse of any kind
- We have a responsibility to promote the welfare of all participants and workers, to keep them safe and to practice in a way that both protects them and improves outcomes for all.
- Doing nothing is not acceptable. The Island has a zero tolerance of abuse wherever it occurs and whoever is responsible.
- Working in partnership with relevant agencies, in conjunction with local safeguarding procedures is imperative.
- Safeguarding training is compulsory for all staff working with children and service users, and for all volunteers working with young people and/or vulnerable adults.

1.4: Specific Policy Definitions

When referring to abuse within this policy we are including and working from the definitions in the appendices at the end of the document. The term abuse within this policy also covers neglectful treatment of children, young people and adults. The non-exhaustive list of definitions includes types of abuse. Within the glossary there is further explanation and the more common signs and symptoms of each type.

For the purpose of this policy the definition of a child or children and young people applies to all under the age of 18 years, adults are considered those over 18.

Section 2: Safeguarding Children and Young People

2.1: Legal Framework

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect people in England. For the purpose of this policy children and young people includes individuals aged up to 18 years. Workers have a legal duty to follow this policy and related UK legislation within their roles. The core principles of this policy are taken from the following:

- Working Together to Safeguard Children (2026)
- The Children's Act. (1989) & (2004)
- The Children and Families Act (2014)
- Keeping Children Safe in Education (2026)
- Childcare Act (2006)
- The Equality Act (2010)
- The Counter Terrorism and Security Act (2015)
- Prevent Duty (2019)
- The Mental Capacity Act (2005)
- Safeguarding Vulnerable Groups Act (2006)
- Modern Slavery Act (2015)
- Human Rights Act (1998)
- Serious Crime Act (2003)
- Sexual Offences Act (2003)
- Antisocial Behaviour, Crime & Policing Act (2014)
- Data Protection Act and GDPR (2018)

- Children's Well-Being and Schools Act (2026)

2.2 What do we mean by safeguarding children and young people?

- Protecting children from abuse and maltreatment
- Preventing harm to children's physical and mental health or development
- Ensuring children have safe and effective care
- Ensuring all children are enabled to achieve the best outcomes

We have a legal and moral duty keep to children safe from harm linked to the following acts

- Abuse (act of commission)
- Neglect (act of omission)

2.3: **Types of abuse or maltreatment:**

- Physical
- Sexual
- Emotional
- Child Sexual Exploitation (CSE)
- Child Criminal Exploitation (CCE)
- Female Genital Mutilation (FGM)
- Radicalisation
- Bullying
- Domestic Abuse
- Cohesive control

For definitions, explanations, signs and symptoms for the above see Appendix 1.

2.4 Identifying abuse

The definitions and indicators are not a definitive or exhaustive list, but act as guidance. It is important to remember that many children and young people may exhibit some of these indicators at some time and that the presence of one or more should not be taken solely as proof that abuse is occurring. However, staff and volunteers have a responsibility to report anything that they consider a potential cause for concern. It is better to raise concerns about issues that do not turn out to be abusive rather than miss a potential problem.

In order for those who have experienced abuse to receive support from the range of support agencies we need to be vigilant.

We do this by:

- Valuing, listening to and respecting them
- Appointing a nominated senior safeguarding lead, a deputy safeguarding lead and a lead trustee for safeguarding and making all workers aware of who they are and how to contact them. The current role holders are detailed in section 4 of this policy.
- Using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children and young people appropriately when safe to do so
- Developing and implementing an effective online safety policy and related procedures
- Sharing information about child protection and safeguarding best practice with staff and volunteers via leaflets, posters, group work and one-to-one discussion

2.3: Managing a disclosure

How to act whilst a disclosure is taking place:

- **Show you care:** Give your full attention to the child, young person or adult at risk and keep your

body language open and encouraging. Be compassionate, be understanding and reassure them that their feelings are important.

- **Do not lead:** Do not ask any leading questions or make suggestions about how the incident occurred. It is your role to report the initial disclosure, not to investigate it.
- **Be aware of special considerations for children and individuals with Special Education Needs and Impaired Communication:** report what you have heard, do not prompt the child to say more than what they initially have done as these children may just repeat what you say — just report that you have heard something concerning and let the DSL conduct further investigations
- **Give them time**: Respect pauses and don't interrupt — let them go at their own pace. Recognise and respond to their body language.
- **Once the child has finished their initial disclosure:** reassure them that they have done the right thing in telling you and you are going to get some help.
- **Do not promise to keep secrets**: even if it means they may not repeat what they said to you.
- **It is very important to ensure they are offered privacy to disclose:** Encourage them to go into an area that is private. However, if this is not possible, alert another staff member to get others away so privacy is maintained
- **Reassure them!** If someone tells you they are experiencing abuse, it's important to reassure them that they've done the right thing in telling you. Make sure they know that abuse is never their fault

Next steps following the disclosure:

- **Make a written record as soon as possible**: if there is risk of immediate danger, phone 999. If not, then ensure you capture as much detail as possible through writing notes on the disclosure, in order to share accurately with others.
- **Reporting the disclosure to The Island:** The person who received the disclosure needs to be the one reporting it as they need to use the exact words uttered by the child and themselves.
- **Report Accurately:** The disclosure information could, potentially, be used in legal proceedings so needs to be recorded accurately – this is why it's so important to make a written record whilst the disclosure is fresh in your mind
- **Report immediately:** in order to obtain support for the child or young person in a timely manner, you need to report the disclosure immediately
- **Security of information:** Do not share with anyone the disclosure that has been made — it should remain confidential and information only shared through the agreed procedures. The Island Staff Team may discuss safeguarding cases to ensure awareness across the team, but will keep disclosure information confidential from other departments.
- **Never talk to the alleged perpetrator about a disclosure.** This could make things a lot worse for the child even if this is a parent or carer
- **Seek support.** If you need support or would like to talk about the disclosure with a trusted professional, speak with the DSL or your line manager/ mentor supervisor.

Section 3: Safeguarding Adults at Risk

3.1 Legislation

- Care Act 2014
- Safeguarding Vulnerable Groups Act 2006
- Health and Social Care Act 2012
- Mental Capacity Act 2005
- Equality Act 2010
- Human Rights Act 1998
- Data Protection Act and GDPR 2018
- Public Interest Disclosure Act 1998

3.2 Defining adults at risk

- Over 18 years old
- Someone who needs care and support
- At risk of experiencing abuse or neglect
- Someone who can't protect themselves from harm or exploitation.

Adults are at risk from the following issues:

- Self-neglect
- Modern slavery
- Financial abuse
- Neglect or act of omission
- Physical abuse
- Domestic abuse
- Sexual abuse
- Psychological abuse
- Discriminatory abuse
- Organisational abuse
- Coercion

If one of our adults lacks capacity, then it is the duty of those working with them to be vigilant to abuse or neglect. Some of our adults will have communication issues, but the worker should not prompt them to make a disclosure but should report their concerns directly to the DSL in the normal way.

For adults with capacity, the same procedure is applied to reporting any concerns. Just because someone has capacity, does not mean they fully understand the circumstances of their concerns or can access support for themselves.

It is the responsibility of the DSL to decide how to proceed and whether to contact adult social care for a referral.

This definition of an 'Adult at risk' is taken from the Care Act 2014.

Section 4: Reporting Procedure within The Island

Under law it is essential that information is appropriately shared and accurately recorded where there is a concern or an allegation involving the maltreatment or safety of a child or adult. Your first point of contact is the Designated Safeguarding Lead (DSL) or Deputy in their absence. The DSL can offer support to ensure all information required is included. They are also to be utilised as a debriefing and supervision service to ensure you are left confident you have done all you can. There may be slight variations in how reports are processed based on who the allegation relates to. In all circumstances, a safeguarding log record must be completed by the staff member who received the disclosure, either from a volunteer, or a young person directly.

4.1 Concern about a child's or adult's wellbeing or safety

If you have a safeguarding concern for a child or adult who attends The Island or any other child or adult at risk you may know of or have contact with, this should be referred to the Designated Safeguarding Lead or Deputy in their absence.

In the unlikely event that neither is available proceed to follow the reporting flow charts for Managers and Leads (see appendices 4-8).

4.2: Allegations against adults - trustees, staff and volunteers

In the first instance any concern should be reported to the Designated Safeguarding Lead, or lead on shift. However, if an allegation is against a staff member, the DSL or lead staff member may have a conflict of interest, in which case you should also contact the Trustee safeguarding lead. Alternatively, staff or volunteers may

proceed to report directly to the relevant agency if they are concerned that their report is not being taken seriously.

If the concern is deemed a serious allegation e.g., involves abuse or neglect towards a child, a referral to The Local Authority Designated Officer (LADO) will be made by the Duty Safeguarding Lead or Safeguarding Trustee. For guidance on referring to LADO, please see section 4.4

Safeguarding allegations are not always dealt with the same as a general misconduct situation. It may be that the worker must take leave or alternative duties whilst issues are fully investigated. The priority is to ensure no further risk of harm or contamination of evidence is allowed and therefore, gaining accurate information from both parties. These will be dealt with case by case based on the allegation and information which is presented.

4.3 Allegations against The Designated Safeguarding Lead or Deputy.

If the allegation is made against the Designated Safeguarding Lead or Deputy, it should be reported to the opposite and to the Designated Safeguarding Trustee. Where this is not possible, or to do so would create a delay, a lead should take the lead on making the report. Alternatively, staff may proceed to report directly to the relevant agency if they are concerned that their report is not being taken seriously.

If workers are unsure whether an allegation meets the threshold for LADO Review, they should consult with the Multi Agency Safeguarding Hub with full details of concern (where it relates to a person under the age of 18 years). They will then be given advice on how to proceed.

4.3: Role of the LADO

Local Authority Designated Officer

The Local Authority has a Designated Officer (LADO) to:

- Provide advice and guidance to employers and voluntary organisations
- Liaise with the police and other agencies
- Monitor the progress of cases to ensure that they are dealt with as quickly as possible consistent with a thorough and fair process.

The role of the York LADO is to coordinate all allegations and concerns made against a person who works with children within the City of York. As such, all allegations and concerns must be reported to the LADO (see below).

The LADO will maintain a database of all allegations and concerns received and will provide reports to the CYSCP at least annually or on request.

The LADO will advise, in discussion with the Lead within the Organisation, on what action should be taken by the employer and whether the matter should be referred to Children's Social Care and the Police for a decision on whether to convene a strategy meeting or an initial evaluation meeting.

If you wish to make an allegation or you have a concern about a professional working with children, young or vulnerable people *in the City of York,* a referral should be sent to the Local Authority Designated Officer using the LADO Referral Form available at https://www.saferchildrenyork.org.uk/allegations-against-childcare-professionals-andvoluntee rs.htm

Completed LADO Referral Forms must be emailed using secure mail to: lado@york.gov.uk. If you do not have secure email, please contact 01904 551783 to make your referral or to seek advice.

IMPORTANT- All allegations and concerns must be reported to the Local Authority Designated Officer (LADO) within the same working day.

4.4: LADO Scope

These procedures should be followed by all organisations that provide services for children or young people or provide staff or volunteers to work with or care for children or young people. These procedures should also be applied to foster carers and prospective adopters.

The scope of these procedures is not just for those cases relating to significant harm and should be applied in all circumstances where an allegation is made or a concern arises that any person who works or has worked with children, in a paid or unpaid capacity, has, towards any child:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child, or
- Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children

Allegations may arise in many ways from a number of sources e.g. a concern, suspicion, complaint or report from a child, parent or other adult within or outside of the organisation; information arising from a disciplinary, criminal or Section 47 child protection investigation.

4.5 Children and Young People's Safeguarding Reporting Flow Chart:

A reporting flow chart can be found in Appendix 4

This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that a child or young person has been abused. Promises of confidentiality must not be given as this may conflict with the need to ensure the safety and welfare of the individual.

4.6 Adult Safeguarding Reporting Procedure Flow Chart

A reporting flow chart can be found in Appendix 5

This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that a vulnerable adult has been abused.

4.7: Mental Health Crisis Reporting Flow Chart.

A reporting flow chart can be found in Appendix 6

This procedure must be followed whenever a worker is concerned that a child or adult is a risk to themselves or others due to a mental health crisis. Promises of confidentiality must not be given as this may conflict with the need to ensure the safety and welfare of the individual.

4.8 The Island Safeguarding Incident Form

The Safeguarding Incident form is a Microsoft Form on SharePoint, which all members of the core team have access to. A new record by a staff member is to be completed if there has been an **incident of disclosure requiring escalation.** If a disclosure does not require escalation, it should be noted in the session logs by the staff member receiving the disclosure.

If there is a risk of harm or risk of significant harm, the appropriate procedure should be followed prior to completing the incident form record. For more guidance on the procedures, refer to appendices 4-6.

Section 5: Procedures and the role of the Designated Safeguarding Lead

5.1 Designated Safeguarding Lead Responsibility

The Designated Safeguarding Lead (DSL) is responsible for overseeing that all safeguarding procedures are followed and implemented in line with The Island Policy, Local Authority Guidance and the law in England. They are also responsible for reviewing and updating policies relating to this area. The DSL attends additional training in this area to ensure they are as informed and up to date as possible with current legislation. In the absence of the DSL the Deputy DSL takes on this responsibility. Despite the DSL having ultimate responsibility within The Island for Safeguarding, safeguarding is every worker's responsibility. Unless workers keep accurate records and report all concerns a clear picture cannot be formed and a child or adult at risk could experience significant harm.

In the event that there is a concern that meets threshold, the DSL or Deputy DSL will contact the relevant statutory services. In the case of a cause for concern that does not meet threshold it is still essential this information is recorded. The Designated Safeguarding Lead will then review any concerning patterns.

The DSL also is responsible to ensure:

- The Island's Core Team Lead will complete training designed for Designated Safeguarding Leads a minimum of every 2 years and update training every year.
- All volunteers working with young people or vulnerable adults will complete The Island's in-house safeguarding training.
- The Island's Safer Recruitment and DBS checks will be carried out in line with the relevant policy and procedures.
- Trustees who are recruited after October 2019, or those prior to this date who will come into direct contact with young people or have input in safeguarding policy will be subject to the same recruitment processes as above. Those recruited prior to this date and/ or not involved in direct work will be subject to DBS checks every 3 years
- Providing effective management for staff, trustees and volunteers through support, training and quality supervision and reflective practice meetings
- Using our procedures to manage any allegations against staff, trustees and volunteers appropriately
- Ensuring that we have effective complaints and whistleblowing measures in place
- Ensuring that we provide a physically safe environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance
- Recording and storing information professionally and securely in line with current legislation.

5.2 Worker's responsibility

As an Island worker, if you're concerned about a child, young person or adult you must follow this policy and associated reporting procedures to remain within the remit of the law. All concerns and observations must be accurately recorded and passed to The Designated Safeguarding Lead or (deputy in their absence).

In the event that the Designated Safeguarding Lead or Deputy Safeguarding Lead is unavailable, the staff member must following the procedure outlined the reporting flow chart (see appendices 4-7)

Section 6: Related policies and procedures

This policy statement should be read alongside our organisational policies and procedures.

More information about what these policies and procedures include is available from our website: www.theislandyork.org

Section 7: Safeguarding Contact details

7.1 The Island's Designated Safeguarding Lead / Deputy Safeguarding Lead

Designated Safeguarding Lead
Name: Chloe Deyes
Email: Chloe@theislandyork.org

Deputy Safeguarding Lead
Name: Lyndsay Fleming
Email: supervisor@theislandyork.org

Trustee for Safeguarding
Name: Bob Purrington
Email: bob@theislandyork.org

All the above Safeguarding Leads are contactable on the office number 01904 628449.

7.2: York's Multi Agency Safeguarding Hub (MASH)

The Multi Agency Safeguarding Hub (MASH) is a multi-agency single point of contact for all concerns about children and to make sure that children receive the right level of support. If there are immediate concerns about the safety of a child, contact North Yorkshire Police on 999

MASH Monday to Friday, 8.30am to 5.00pm: 01904 551900
mash@york.gov.uk

Contact MASH Early Help Team to make an early help referral or access advice: 01904 551900
earlyhelp@york.gov.uk

Outside office hours, at weekends and on public holidays, contact the emergency duty team: 0300 131 2131
edt@northyorks.gov.uk

More information can be found on https://www.saferchildrenyork.org.uk/

7.3 City of York Council Adult Social Care

City of York Adult Social Care Monday to Friday, 8.30am to 5.00pm: 01904 555111
Referral form - https://www.safeguardingadultsyork.org.uk/raise-concern

Outside office hours, at weekends and on public holidays, contact the emergency duty team
telephone - 0300 131 2131 or edt@northyorks.gov.uk

7.4 Mental Health Crisis Services

Crisis Home Resolution Team Tel: 01904 615348 (under 18 years:10am — 10pm)

York Adult Crisis Team 01904 526582 (after 10pm for ages 16+)
NHS - TEWS Crisis Service (24 hours, 7 days a week)(all ages): 0800 0516 171

7.5 Local Area Designated Officer (LADO)

York Telephone: 01904 551783 lado@york.gov.uk
LADO Referral Form Link: https://www.saferchildrenyork.org.uk/cyscp-1/report-concern-child-young-person

Section 8: DBS and Safeguarding training requirements

8.1 DBS policy for The Island staff and volunteers

The Island will ensure that disclosure information is treated fairly and without discrimination, whilst ensuring a

safe and robust recruitment process.

The Island pays for the costs of DBS Disclosures for both staff and volunteers. The Island uses a third-party supplier to process DBS Checks, therefore, personal data will be processed outside the organisation for the sole purpose of completing DBS applications.

The Island will accept a DBS Check undertaken by another organisation, but may only do so if the disclosure was obtained during the previous 12 months, and is at the appropriate level for the post.

Where the employee or volunteer has registered with the DBS Update Service, the check is at the required level, The Island has been granted permission to register and interest in their DBS Statement and is able to confirm a valid DBS check is in place, they will not require a new check. However, a new check will be required where a disclosure appears on the current certificate.

The DBS process will form part of the pre-employment checks for all newly appointed staff when recruiting staff into eligible positions.

The Island will assess the relevance of disclosure information to the suitability for employment / taking up a voluntary role of an individual.

The Island will comply with equality, human rights, employment legislation and all statutory and mandatory compliance. The Island will comply with Disclosure and Barring Service guidance documents.

8.2 DBS validity period

The Island registers all staff and volunteers with the DBS update service and can access checks annually. We require a full update in the DBS certificate every three years.

8.3 Safeguarding training requirements for staff and volunteers

The Island delivers bespoke safeguarding training for all volunteers in eligible positions. This training is mandatory, and volunteers are only accepted into their role once complete.

Staff members in eligible roles are required to complete a minimum of Level 2 Safeguarding Training with a registered provider. Staff holding particular safeguarding responsibilities, such as the DSL and DDSL, are required to complete Level 3 safeguarding training with a registered provider.

8.4 Safeguarding training validity period

Volunteer and Level 2 trained staff must refresh their training after three years.

Staff holding particular responsibility for safeguarding must complete Level 3 refresher training every twelve months, and full training every three years.

Appendix 1: Definitions of abuse

Abuse defined summary

This is defined as an act of commission or an act that is deliberately carried out.

Neglect defined summary

This is defined as an act of omission or the failure to meet a need.

Signs of Neglect

Neglect can be a difficult form of abuse to recognise, yet it can have some of the most lasting and damaging effects on children and young people. Workers must be vigilant towards this, as it is the most common form of abuse in teenagers. Neglect leaves victims more vulnerable to other forms of abuse and exploitation due to low self-esteem and self-worth. Neglect is the persistent failure to meet a Childs' basic physical and/or psychological needs, likely to result in the serious impairment of their health or development. The physical signs of neglect may include constant hunger, stealing food from others, constantly dirty or 'smelly', loss of or rapid gain of weight, or being constantly underweight or excessively overweight and inappropriate clothing for the conditions.

Changes in behaviour which may indicate neglect include complaining of being tired all the time, not requesting medical assistance and/or failing to be taken to or attend appointments, having few friends and mentioning being left alone or unsupervised.

Signs of Physical Abuse

Most children will collect cuts and bruises as part of the rough-and-tumble of daily life. Injuries should always be interpreted considering the child's medical and social history. Most accidental bruises are seen over bony parts of the body e.g., elbows, knees, shins and are often on the front of the body. Accidental bruising is generally less common in older children and adults. However, again, physical ability, mental ability to coordinate etc should be taken into consideration alongside reasonable explanation by the individual.

Bruising that is more likely to have been inflicted rather than accidental could include bruises or injuries that are either unexplained or inconsistent with the explanation given. Other signs of this include those visible or the 'soft' parts of the body where accidental injuries are less likely, this could be on their cheeks, abdomen, back and buttocks.

Physical abuse may involve hitting, shaking, throwing, drowning, burning or scalding, poisoning, suffocating, or otherwise causing physical harm to an individual or failing to protect them from that harm. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in another person.

Signs of Sexual Abuse

Sexual abuse involves forcing or enticing a child 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. In fact, many children who are sexually abused will have no visible signs due to the perpetrator not wanting to leave evidence. Children may be afraid to tell due to fear of the consequences of disclosure amongst many other reasons in the grooming process.
Sexual abuse is not solely perpetrated by adult males; women also commit acts of sexual abuse, as do

other children. The idea of strangers as potential abusers is not a helpful message to convey because in most child sexual abuse cases the perpetrator is someone who had a responsibility to keep them safe. Sexual abuse may involve physical contact including both penetrative and non-penetrative acts such as masturbation, kissing, rubbing and touching the outside of clothing.

They may also include non-contact activities, such as watching sexual activities, encouraging children to behave in sexually inappropriate ways, involving children in looking at, or in the production of, sexual images and grooming a child in preparation for abuse (including via the internet).

Signs can include extreme insecurity, lack of trust, disturbed, age inappropriate or harmful sexual behaviours; personality changes, sexual knowledge and terminology which is beyond their age or what should be outside of their experiences; sexual drawings, language which can be verbal or body language. Young people experiencing sexual abuse may talk about nightmares or it may be noticed they report poor sleep/ seem exhausted. In addition, an indicator can be promiscuity or acting in an overly sexualised way towards others including adults (due to the normalisation of sexual activities.)

Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE): These are complex areas and will be explained more fully in a later section. Both CSE and CCE involve the use of power over and exploitation of a young person under the age of 18 years by another individual by means of coercive or threatening behaviour for the gain or gratification of the abuser. Although usually perpetrated by adults, peer on peer exploitation does happen. The age of consent for mutually consensual sexual activity in England is 16 years. However, in cases of CSE a young person under the age of 18 years can be a victim due to the abuse of power dynamics.

A child under the age of 13 years cannot legally be considered as consenting to any sexual act with another person and would be categorised as a crime irrelevant of the child's views. This would immediately be a safeguarding referral and would need to be reported to police and social work teams.

Signs of Child Sexual & Criminal Exploitation (CSE & CCE)

Sexual and Criminal Exploitation signs differ to other types of abuse as the victim may have been heavily coerced and not realise that they are being abused. The coercive control element within CSE and CCE can be extremely complex. It is important to note that due to how complex this issue is children can be both experiencing child sexual exploitation and perpetrating it at the same time.

Abusers typically exploit a power imbalance whereby they take advantage of having access to something the child does not have to the same level or is struggling with. The most common factors include age, gender, sexual identity, cognitive ability, physical strength, status, access to economic resources. The most obvious signs of both sexual and criminal exploitation include the following:

- Being especially secretive and not engaging with their usual friends
- Associating with or developing a sexual or other relationship with older men and/or women
- Missing from home and defensive about their location and activities, often returning home late or staying out all night
- Odd calls and messages on their mobiles or social media pages from unknown, possibly older, associates from outside their friendship circle
- New belongings which they could not normally afford, such as mobile phones, trainers, clothes or jewellery
- Dressing differently
- Looking tired and/or unwell, and sleep at unusual hours
- Having marks or scars on their body which they try to conceal.

Unfortunately, an exploited child is often judged as if he or she is thinking logically and that the abuse happening to him or her is a result of 'poor lifestyle choices.' As professionals we recognise that this is not

the case. Instead, we view this as children who are experiencing trauma bonding due to exploitation tactics. This is when a child's ability to make safe choices for themselves is impaired and they act in an irrational way to ensure immediate survival - “survival brain”.

A brief explanation of “survival brain” can be defined as: when confronted with dangerous situations, the logical part of the brain that thinks, reasons and exercises choice is NOT the part of the brain that takes control. In these circumstances, the response to threat is not logical. In reality, fear activates a more primitive part of the brain responsible for ensuring survival and fear chemicals suppress the part of the brain that makes logical decisions. The survival brain is concerned with immediate survival, not long-term psychological impact. The brain will respond: ‘this won't kill you, so freeze and endure it'. However, if in that moment the child resisted abuse it is their belief that they would come to greater immediate harm.

Female Genital Mutilation (FGM)

FGM short for Female Genital Mutilation, is when a female's genitals are deliberately altered or removed for non-medical reasons. It is also known as ’female circumcision’ or ’cutting', but it has many other cultural names. FGM is carried out for a number of cultural, religious and social reasons. Some families and communities believe that FGM will benefit the girl in some way, such as preparing them for marriage or childbirth. As professionals we view FGM as a harmful practice because it is not required by any religion and there are no health benefits of FGM. It is also illegal in the UK and many other countries.

Girls living in communities that have a history of practicing FGM are most at risk. It can happen in the UK or abroad. The Home Office has identified girls and women from certain communities as being more at risk: Somali, Kenyan, Ethiopian, Sierra Leonean, Sudanese, Egyptian, Nigerian, Eritrean, Yemeni, Kurdish & Indonesian

Children are at a higher risk of FGM if it has already happened to their mother, sister or another member of their family. Signs that a girl maybe at risk of having FGM carried out include mention of the following: a relative or someone known as a 'cutter’ visiting from abroad; a special occasion or ceremony where a girl 'becomes a woman' or is 'prepared for marriage’. Other indicators of risk could be that a female relative, like a mother, sister or aunt has undergone FGM or the family arranges a long holiday overseas or visits a family abroad in one of the above-mentioned areas during the summer holidays.

A mandatory reporting duty for FGM requires youth work professionals in England and Wales to report known cases of FGM in under 18-year-olds to Childrens' Social Care and also the Police. The FGM duty came into force on 31 October 2015.

Signs of Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child, such as to cause severe adverse effects on their health and emotional development. It may involve conveying to them that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

Emotional abuse can be difficult to measure, as there are often no outward physical signs. Indicators of emotional abuse may include interactions that are beyond the individual's developmental or intellectual capability, as well as overprotection and limitation of exploration and learning, or preventing them from interacting socially with others. It could involve rejecting or ignoring them completely, using degrading language or behaviour towards them, threatening or bullying them and encouraging them to develop behaviours that are self-destructive.

Radicalisation - Prevent Duty

Emotional abuse also includes the act of radicalising a child, young person or vulnerable adult who may be

subsequently drawn into terrorist-related activity. Signs can include repeating statements from political or religious extremism; attending radicalised community and religious centres or expressing a desire to go to locations known to harbour extremist groups. As Youth and Community workers, we must legally report any incidence where we suspect someone is being drawn into terrorism under the Counter Terrorism Act (2015). The assessment procedure for this is known as the Prevent Duty, speak to your The Island Safeguarding Lead or Deputy if you are concerned or unclear about how to proceed with this.

Bullying and Domestic Abuse

Bullying and being a victim of or witnessing domestic abuse can produce the same or similar signs and symptoms to that of emotional abuse, more so in children and young people.
Evidence includes young people often taking on the victim or perpetrator's behaviours and acting them out towards others. Both aspects of abuse are about control over others, which is why young people may bully others if they are experiencing bullying themselves - they have lost the control when they are being bullied so they seek it by gaining control over others. In the case of children witnessing domestic abuse, they are legally viewed as a victim of domestic abuse even if the abuse is aimed at someone else.

Further definitions

Please see our separate policies regarding Prevent Duty, Domestic Abuse and Bullying for further guidance on spotting the signs and supporting individuals with these issues.

Other signs and symptoms of abuse or neglect can include:

- Self-harm
- Disordered eating
- Suicidal tendencies
- Poor mental health
- Low ability to self-regulate emotion and behaviour

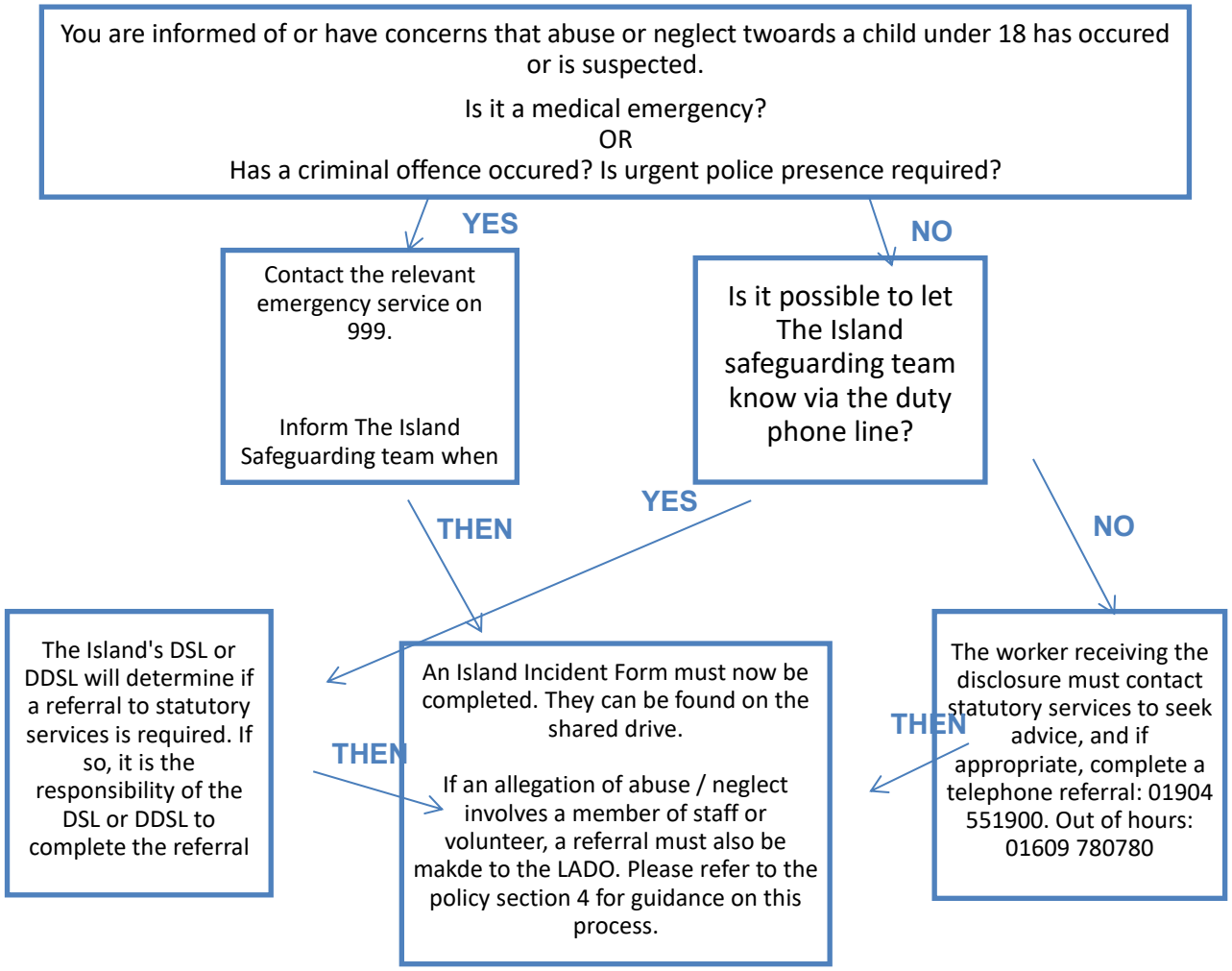
Appendix 2: Further Support Agencies
Services Telephone Contact

- Crisis Home Resolution Team Tel: 01904 615348 (young people:10am — 10pm)
- NHS (non-emergency) 111
- Police Non-emergency 101
- Police emergency 999
- York Adult Crisis Team (after 10pm for ages 16+) 01904 526582 • 30 Clarence Street, Young Peoples Service: Text: 07624 802244.
- Tel: 01904 555400
- IDAS Domestic Violence 0300 011 0110
- IDAS Sexual Abuse: 03000 110 110
- Changing Lives (Substance Misuse): 01904 621776
- Hand in Hand Project (Child Exploitation) 0113 387 6410/ 07715 122569 Email: handinhand@childrenssociety.org.uk
- PACE (Parents against child exploitation) 0113 240 5226 or 0113 240 3040
- Survive 01904 638813
- York Mind 01904 643364

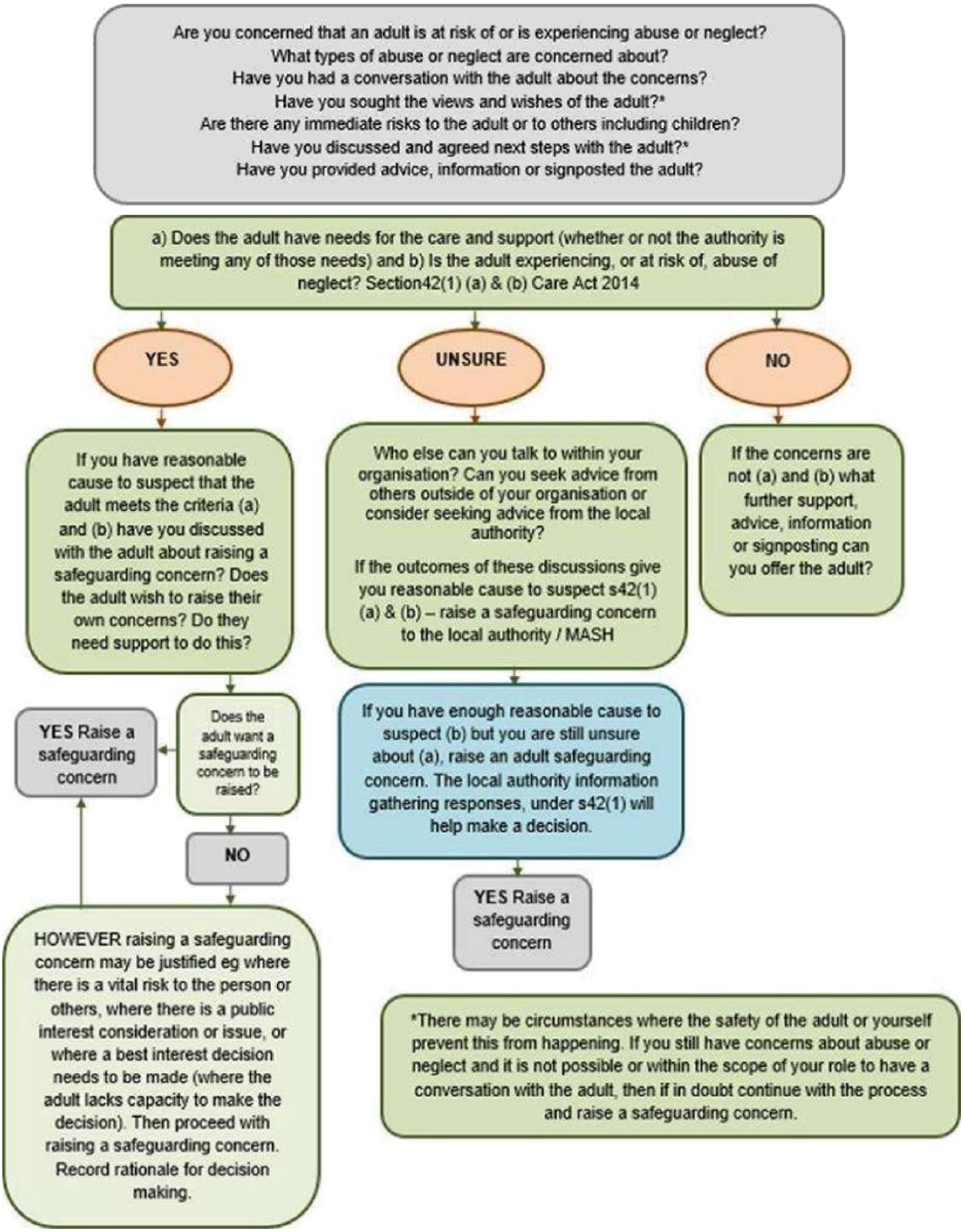
Appendix 3: Ensuring Good Safeguarding Governance (Trustees)



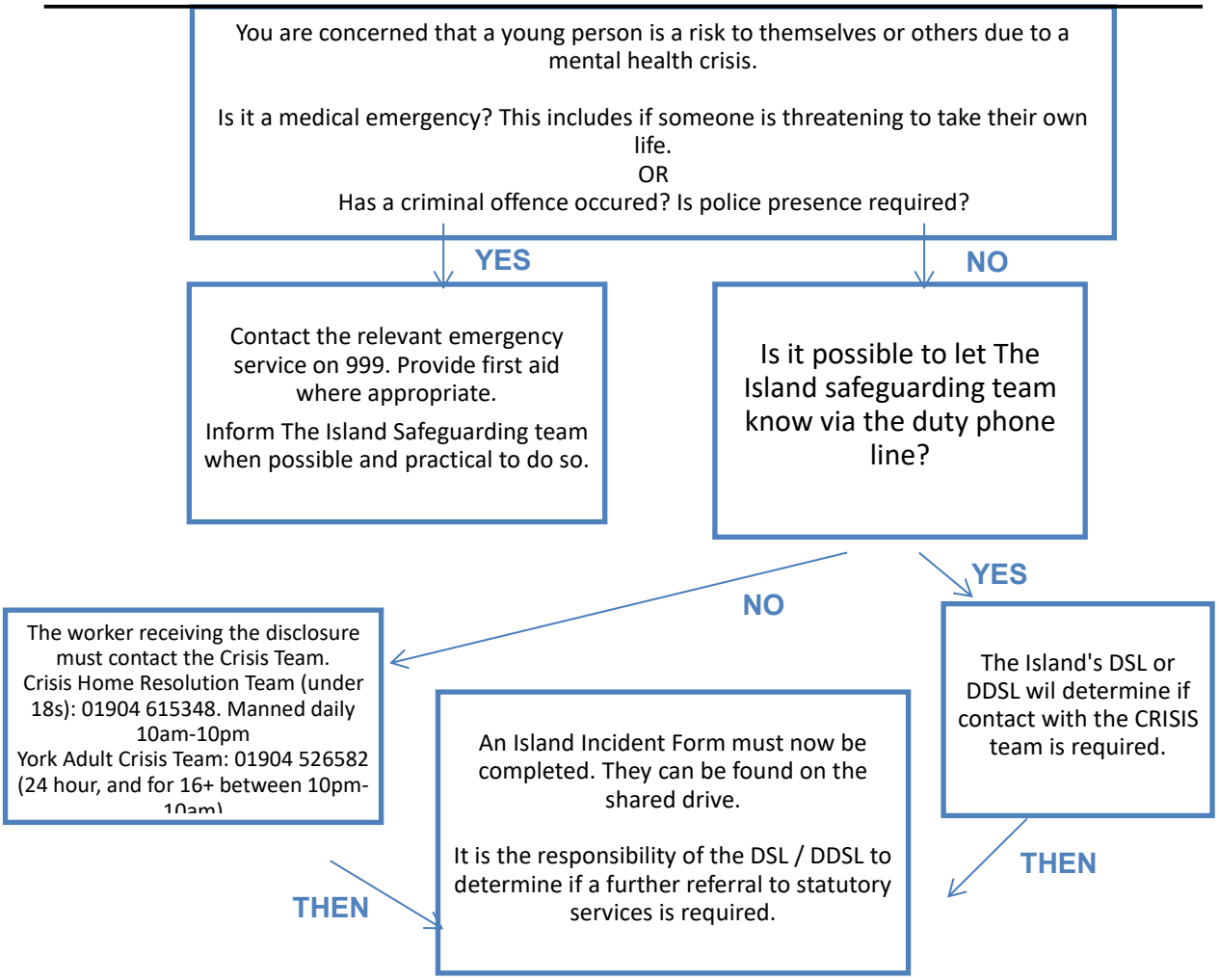
Appendix 4: Safeguarding Children and Young People - Reporting Flow Chart


You are informed of or have concerns that abuse or neglect twoards a child under 18 has occured or is suspected.
Is it a medical emergency?
OR
Has a criminal offence occured? Is urgent police presence required?
YES
NO
Contact the relevant emergency service on 999.
Inform The Island Safeguarding team when
Is it possible to let The Island safeguarding team know via the duty phone line?
THEN
YES
NO
The Island's DSL or DDSL will determine if a referral to statutory services is required. If so, it is the responsibility of the DSL or DDSL to complete the referral
THEN
An Island Incident Form must now be completed. They can be found on the shared drive.
If an allegation of abuse / neglect involves a member of staff or volunteer, a referral must also be makde to the LADO. Please refer to the policy section 4 for guidance on this process.
THEN
The worker receiving the disclosure must contact statutory services to seek advice, and if appropriate, complete a telephone referral: 01904 551900. Out of hours: 01609 780780

Appendix 5: Safeguarding Adults at Risk - Reporting Flow Chart



Appendix 6: Mental Health Crisis - Reporting Flow Chart


You are concerned that a young person is a risk to themselves or others due to a mental health crisis.
Is it a medical emergency? This includes if someone is threatening to take their own life.
OR
Has a criminal offence occured? Is police presence required?
YES
NO
Contact the relevant emergency service on 999. Provide first aid where appropriate.
Inform The Island Safeguarding team when possible and practical to do so.
Is it possible to let The Island safeguarding team know via the duty phone line?
YES
NO
The worker receiving the disclosure must contact the Crisis Team.
Crisis Home Resolution Team (under 18s): 01904 615348. Manned daily 10am-10pm
York Adult Crisis Team: 01904 526582 (24 hour, and for 16+ between 10pm-10am)
The Island's DSL or DDSL wil determine if contact with the CRISIS team is required.
THEN
THEN
An Island Incident Form must now be completed. They can be found on the shared drive.
It is the responsibility of the DSL / DDSL to determine if a further referral to statutory services is required.