



Integrating Safeguarding Policy For Children

2026

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Statement of Policy

Integrating is committed to safeguarding and promoting the welfare, safety, and wellbeing of all children (everybody under 18) who access our services, activities or facilities. We recognise that every child has the right to be protected from harm, abuse, neglect, exploitation and discrimination, and to grow and develop in an environment that supports their physical, emotional and social needs. As such, our members and their families are at the centre of all our work.

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as:

- providing help and support to meet the needs of children as soon as problems emerge,
- protecting children from maltreatment, whether that is within or outside the home, including online,
- preventing the impairment of children's mental and physical health or development,
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care, and
- taking action to enable all children to have the best outcomes.

Integral to all aspects of our service delivery is the commitment that everybody:

- is treated with dignity, respect, sensitivity and fairness
- is safeguarded and their welfare promoted
- feels safe, but can alert staff if they have any concerns

Safeguarding is central to everything we do. We are committed to incorporating safeguarding principles into all areas of our work, ensuring that safeguarding responsibilities are understood, embedded and actively practised by all staff, volunteers, trustees, tutors and partners.

We are committed to the use of safe recruitment practices, promoting safe working practice, raising awareness of safeguarding and recognising the need for continuous learning and improvement.

Policy and procedures are transparent and open to challenge to ensure an appropriate response.

A copy of this policy will be accessible to everyone in the organisation, who are made aware of its content and any updates.

In addition, we work in partnership with statutory, regulatory and other relevant organisations to ensure that safeguarding concerns are responded to appropriately.

These expectations, safeguards and protections apply to all our members in equal measure, all of whom have a disability and may present with greater vulnerability which needs to be understood and protected. See Annex A (page 18) - Excerpt from 'Durham Safeguarding Children's Partnership' Child Protection Procedures, Safeguarding Disabled Children & Young People'.

Purpose of this policy

The purpose of this policy is to establish a clear framework for embedding safeguarding into our organisation's culture, procedures and daily practice. It aims to:

- Promote a safe environment where children and young people feel valued, respected and listened to.
- Ensure that safeguarding responsibilities are understood by everyone involved in delivering services.
- Prevent harm and respond effectively to concerns, disclosures, allegations, or incidents of abuse.
- Ensure compliance with relevant safeguarding legislation, guidance and best practice.

Legal and regulatory framework

This policy has been developed with reference to the safeguarding framework applicable to charities working with children in England, including:

- *Working Together to Safeguard Children 2026*;
- relevant safeguarding arrangements and procedures issued by the local authority safeguarding partnership;
- relevant legislation concerning children, safeguarding, equality, employment and data protection;
- Disclosure and Barring Service requirements;
- Charity Commission guidance concerning safeguarding and protecting people;
- relevant guidance concerning safer recruitment and allegations against people working with children.

Working Together to Safeguard Children is statutory guidance for multi-agency safeguarding arrangements in England and applies across organisations that have responsibilities for safeguarding children.

The Charity Commission expects trustees to ensure that safeguarding is a governance priority, that appropriate policies and procedures are implemented, that staff and volunteers are appropriately trained, and that concerns and incidents are dealt with effectively.

Where our services operate outside England, we will comply with the safeguarding legislation, statutory guidance and local safeguarding arrangements applicable in that jurisdiction.

Scope

This policy applies to all employees, volunteers, trustees, tutors, visitors and anyone acting on behalf of Integrating. It applies across all activities, online interactions, events, trips, outreach work and partnership activities.

Our Safeguarding Principles

Integrating is guided by the following principles:

- **The welfare of the child is paramount.** All decisions and actions will prioritise the best interests of children and young people.
- **Children and young people have a voice.** We will listen to children, respect their views, and involve them in decisions affecting them wherever appropriate.
- **Everyone has safeguarding responsibility.** Safeguarding is not the responsibility of one individual or team; it is a shared commitment across the organisation.
- **Prevention is essential.** We will take proactive steps to reduce risks and create safer environments.
- **Concerns must be acted upon.** Any safeguarding concern will be taken seriously, reported promptly and managed appropriately.
- **Equality and inclusion matter.** We will ensure all children and young people are protected regardless of age, disability, gender, race, religion, culture, sexual orientation or background.

Safeguarding children with disabilities

Integrating recognises that disabled children may be particularly vulnerable to abuse and neglect.

Additional risks may arise because a child:

- depends on adults for personal care;
- requires assistance with eating, toileting, washing or dressing;
- has limited speech or alternative communication needs;
- has difficulty understanding or recognising inappropriate behaviour;

- may be unable to physically remove themselves from a dangerous situation;
- has limited social networks;
- may rely heavily on particular adults;
- may have difficulty reporting abuse;
- may have communication or cognitive impairments;
- may experience bullying, discrimination or social exclusion;
- may be more exposed to inappropriate restraint or restrictive practices;
- may be less likely to be believed when making an allegation.

We will never assume that a child's behaviour is solely attributable to their disability. Any significant or unexplained change in behaviour, mood, communication, physical condition or presentation will be considered carefully.

Communication and accessibility

We will make reasonable and appropriate adjustments to ensure children can participate in safeguarding processes.

This may include:

- Makaton;
- visual communication systems;
- communication boards;
- symbols and pictures;
- assistive communication technology;
- simplified language;
- additional processing time;
- interpreters;
- communication passports;
- trusted adults where appropriate.

Staff must not assume that a child who is non-verbal has nothing to say.

Where a child communicates through behaviour, staff should consider whether a change in behaviour may be communicating distress, fear, pain or an unmet need.

Where an allegation or disclosure is made, staff should avoid leading questions and should record the child's communication as accurately as possible.

Safeguarding in Practice

Safeguarding will be incorporated into all aspects of organisational activity through:

Leadership and Governance

Senior leaders and trustees will provide clear oversight, accountability and support for safeguarding. Safeguarding responsibilities will be included within organisational planning, decision-making, risk management and quality assurance processes.

Safer Recruitment

We will ensure that appropriate recruitment procedures, including safeguarding checks where required, are followed:

- All staff and volunteers working in eligible roles obtain an appropriate Enhanced DBS check before starting work (or are appropriately supervised until clearance is received).
- DBS checks are part of a **safer recruitment** process and are supported by identity verification, references, qualification checks where relevant, and safeguarding training.
- Staff understand that a DBS check is only one element of safeguarding and does not replace robust supervision, induction and ongoing vigilance.

Recommended best practice for DBS renewal

- **Use the DBS Update Service** wherever possible for staff in ongoing roles. This allows employers (with the individual's consent) to carry out free online status checks rather than requesting a new Enhanced DBS certificate each time.
- **Encourage automatic renewal** of the Update Service subscription to avoid accidental lapses. If a subscription expires, a new DBS application is required before the individual can rejoin the service.
- **Carry out regular status checks** – a minimum of 3 years
- **Request a new Enhanced DBS check** if:
 - the individual changes role and the new role requires a different level of DBS check;
 - their Update Service subscription has lapsed; or

- there are safeguarding concerns or information suggesting a new check is appropriate.

Integrating maintains accurate records of:

- DBS certificate number;
- date of issue;
- level of check;
- Barred List status (where applicable);
- Update Service status;
- dates of employer status checks.

Integrating includes DBS monitoring within safer recruitment procedures, alongside identity verification, references, qualification checks, right-to-work checks, induction, safeguarding training and ongoing supervision.

Training

All staff and volunteers working with children and young people will receive appropriate safeguarding information in their induction, as well as training, refreshed at minimum every 3 years and updates at least annually.

Training is given through DSCP e-learning courses. Each member of staff must complete as a minimum:

- Safeguarding children – Level 1
- Safeguarding children – Level 2
- Safeguarding children with disabilities
- Hidden Harm: Parental Substance Misuse, Parental Mental Ill-Health and Domestic Abuse
- Child Sexual Exploitation - Level 2

In addition, Team Leaders must complete:

- Safer recruitment
- Signs of Safety & Durham Harm /Worry Matrix
- LADO - local authority designated officer Managing Allegations against Staff who work with Children
- Neglect Awareness Training
- Vicarious Trauma Briefing

Documentary evidence of training attended will be kept.

Designated leads (DSL) and deputies complete higher-level training (Level 3 or role-specific statutory training) tailored to managing allegations, making referrals, and working with local authorities. DSL role-specific training must be formally updated and retaken at least every two years.

Policies and Procedures

Safeguarding will be reflected across related policies, including:

- Health and safety
- Equality, diversity and inclusion
- Behaviour management
- Online safety
- Complaints and whistleblowing
- Safer recruitment
- Data protection and confidentiality
- Risk assessments

Risk Management

We will regularly assess and manage safeguarding risks associated with our services, environments, activities and digital platforms. Appropriate measures will be implemented to reduce risks and protect children and young people.

Reporting and Responding to Concerns

All safeguarding concerns, disclosures, allegations, or suspicions of harm must be reported immediately through agreed safeguarding procedures. We will ensure concerns are handled sensitively, confidentially and in accordance with relevant safeguarding guidance.

Partnership Working

We will work collaboratively with parents, carers, schools, local authorities, safeguarding agencies and other partners to promote children's safety and wellbeing while maintaining appropriate confidentiality.

Children and Young People's Participation

We are committed to creating opportunities for children and young people to express their views, raise concerns and contribute to decisions about their safety and wellbeing. We will provide accessible information about safeguarding and ensure they know who they can speak to if they feel worried or unsafe.

Confidentiality and Information Sharing

Information relating to safeguarding concerns will be handled responsibly and shared only with those who need to know in order to protect a child or young

person. Confidentiality will not prevent information being shared where there are concerns about safety, welfare, or risk of harm.

Monitoring and Review

Safeguarding arrangements will be regularly monitored and reviewed to ensure they remain effective, up to date and aligned with current legislation and best practice. Feedback from children, young people, staff, volunteers, and partners will be used to support continuous improvement.

Durham Safeguarding Children Partnership (DSCP)

The DSCP publishes multi-agency child protection and safeguarding procedures for professionals working with children and families across County Durham under the arrangements introduced by the Children and Social Work Act 2017.

Durham Child Protection Procedures

The Durham Safeguarding Children Partnership's child protection procedures provide guidance on how organisations and practitioners should:

- Recognise the signs and indicators of abuse and neglect.
- Respond appropriately to concerns about a child's safety or welfare.
- Share information lawfully and effectively between agencies.
- Make referrals to Children's Social Care when there is concern that a child is suffering, or is likely to suffer, significant harm.
- Work together through multi-agency assessments, child protection conferences, core groups, and child protection plans.
- Ensure the child's wishes, feelings, and best interests remain central to decision-making.
- Record concerns, decisions, and actions accurately and promptly.

The procedures cover all forms of abuse, including:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect
- Domestic abuse
- Child exploitation (criminal and sexual)
- Online abuse
- Female genital mutilation (FGM)
- Forced marriage

- Honour-based abuse
- Radicalisation and extremism
- Missing children
- Self-harm and suicide prevention

Safeguarding Disabled Children and Young People

The Durham procedures recognise that disabled children and young people have the same rights to protection as all children but may face additional safeguarding risks. Professionals are expected to ensure that disability does not prevent concerns from being recognised or acted upon.

Key principles include:

- **Equal protection:** Disabled children must receive the same level of protection from abuse and neglect as any other child.
- **Recognising increased vulnerability:** Disabled children may be at greater risk due to communication difficulties, dependence on carers, intimate personal care needs, social isolation, or reduced opportunities to disclose abuse.
- **Communication:** Practitioners should use communication methods appropriate to the child's needs, including interpreters, visual aids, assistive technology, or specialist support where necessary.
- **Listening to the child:** Every effort should be made to understand and consider the child's views, wishes, and feelings.
- **Multi-agency working:** Education, health, social care, police, and specialist disability services should work together to assess risks and coordinate support.
- **Avoiding assumptions:** Injuries, behavioural changes, or emotional distress should never automatically be attributed to a child's disability; concerns should always be properly assessed.
- **Support for families:** Families should receive appropriate support to reduce stress and promote safe, positive care while ensuring that safeguarding concerns are investigated where necessary.

Good Practice

Professionals working with disabled children should:

- Be alert to signs of abuse and neglect.
- Understand the child's communication needs.
- Complete appropriate risk assessments.
- Record concerns accurately.

- Share information promptly when safeguarding concerns arise.
- Follow local referral procedures without delay if a child is at risk of significant harm.

For the current Durham safeguarding procedures and practice guidance, see the Durham Safeguarding Children Partnership Procedures Manual and the [Durham Safeguarding Children Partnership website](#).

These procedures are designed to work alongside national guidance such as Working Together to Safeguard Children and Keeping Children Safe in Education, ensuring that all agencies take a coordinated approach to protecting children and young people.

Safeguarding individuals

The Durham Safeguarding Children Partnership (DSCP) defines safeguarding and promoting a child's welfare as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- undertaking that role to enable children to have optimum life chances and to enter adulthood successfully.

Integrating will strive to achieve these standards and view this policy as being underpinned by 'Durham Safeguarding Children Partnership' Child Protection Procedures. (durham-scp.org.uk).

This policy is required to be followed by all Trustees, staff and volunteers. Staff will receive induction awareness and regular training. They will be supported to meet standards, but should they fail to do so, they may be subject to disciplinary processes.

Safeguarding is a positive action

The most effective way of creating a safe organisation is to constantly work towards a positive proactive culture. In order to achieve this, we will:

Exclude known abusers from having contact with children and young people

Applicants should note that this position is exempt from the provisions of the Rehabilitation of Offenders Act 1974 (Exceptions) Order. Any offer of employment or voluntary work will therefore be subject to an enhanced

Disclosure and Barring Service (DBS) check, where applicable. The check may disclose relevant spent and unspent convictions and cautions, as well as other relevant information held by the police that may be considered appropriate for disclosure. Where applicable, the check will also include a check of the relevant DBS barred lists.

All applicants for work within Integrating, whether voluntary or paid, will be subject to two positive references, and be interviewed before an appointment is made. Information will also be sought from the applicant's previous employer. In cases of applicants with unexplained gaps in their employment history or who have moved rapidly from one job to another, satisfactory explanations will be sought. All appointments, both paid and voluntary, will be subject to a probationary period and will not be confirmed unless the organisation is confident that the applicant can be safely entrusted with children and young people.

Information for DBS disclosures is obtained through the Disclosure and Barring Service, including information held on the Police National Computer and, where an Enhanced DBS check is required, relevant information held by local police forces.

Where the role is eligible, an Enhanced DBS check with a Children's Barred List check will also be undertaken. The Children's Barred List identifies individuals who are barred from undertaking regulated activity with children.

Employers and organisations that are regulated activity providers have a legal duty to refer individuals to the DBS where the relevant conditions are met, including where they believe an individual has caused harm or poses a future risk of harm to children or other vulnerable groups. It is an offence for an organisation to knowingly employ or engage a person in regulated activity with children if that person is barred from such activity.

Training Staff

We will ensure that all staff and volunteers have knowledge of and access to the child protection and safeguarding guidelines for individuals with learning difficulties or disabilities, which focus on accessible communication, prompt advocacy, and multi-agency support. Whether referring to children with special educational needs (SEND) or parents/carers who have learning difficulties, specific procedures ensure their rights and safety are protected where relevant to their role. These guidelines will support staff and volunteers to maintain clear professional boundaries, use appropriate communication strategies and follow established procedures for managing distress, challenging behaviour or other incidents safely and appropriately.

We will provide regular safeguarding and child protection training and updates for all adults involved with the organisation. This will ensure that staff and

volunteers understand their safeguarding responsibilities, recognise indicators of abuse, neglect, exploitation and other forms of harm, and know how to respond to and report concerns in accordance with our safeguarding procedures. These include, whether online or in person:

- physical or emotional abuse
- neglect
- sexual abuse and exploitation
- criminal exploitation
- bullying or harassment
- financial or material abuse
- discrimination on any of the grounds in the Equality Act 2010
- data breaches, including those under General Data Protection Regulations (GDPR)
- negligent treatment
- domestic abuse
- controlling and coercive behaviour
- self-neglect
- extremism and radicalisation (see separate PREVENT Policy)
- forced marriage
- modern slavery
- human trafficking
- female genital mutilation

Preventing abuse through good practice

A lead trustee will be given responsibility for the oversight of all aspects of safety.

Adults who have not been vetted and gone through Integrating's selection procedures, for example Parents or Trustees, will not be left in sole charge of service users other than their own family members and these individuals will always be supervised by the staff member responsible for the activity.

Staff and volunteers will not be left alone for long periods with an individual or small groups. Staff or volunteers, who need to take an individual aside for any reason, will alert another member of staff to monitor the length of absence. The staff: child ratios, as outlined in the National Care Standards, will always be adhered to and individuals will not be left alone with visitors to the group.

Individuals will be collected from the activity by an adult authorised by parents to do so. There are procedures for managing late collection of members (page 26).

There are no circumstances in which a member of Integrating will be subjected to physical punishment, including smacking, slapping or shaking.

Adults will not use humiliating, degrading or frightening methods of punishment, including ridicule, intimidation or inappropriate exclusion.

All members will be treated with dignity and respect, listened to and supported to develop a sense of autonomy and independence. Adults will provide appropriate support to help members make choices, identify and express their feelings, and develop safe and acceptable ways of communicating their needs and emotions.

We will promote positive relationships and supportive approaches to behaviour, enabling members to develop confidence, self-esteem and effective communication skills. This will help members to recognise inappropriate behaviour or approaches, express concerns and seek help from a trusted adult.

Where physical intervention is necessary to prevent injury or protect a member or others from harm, it will only be used in accordance with the organisation's policy, relevant legislation and current guidance. Physical intervention will never be used as a form of punishment or for the purpose of causing pain, distress or humiliation.

All members of Integrating will be encouraged to be confident in dealing with personal hygiene needs. 'Accidents' will be dealt with in a sensitive manner.

Responding to Signs of Abuse

Adults working for Integrating will develop positive, stable and trusting relationships with the members in their care. They will remain alert to changes in an individual's behaviour, presentation or appearance and will record and monitor any concerns appropriately. Any disclosure or allegation made by a member will be taken seriously, recorded accurately and acted upon in accordance with this safeguarding policy. The welfare and best interests of the child or young person will remain the primary consideration when determining the appropriate response.

A safeguarding concern may arise from:

- something a child says;
- something a child does;
- something a parent or carer reports;
- an observation by a staff member;
- an unexplained injury;
- a change in behaviour;
- an allegation against a member of staff or volunteer;
- information from another organisation;
- an online incident;
- information received anonymously.

- A person does not need to be certain that abuse has occurred before raising a safeguarding concern.

It is not the role of staff or volunteers to investigate allegations.

Contacting First Contact

If a crime is in progress, or an individual in immediate danger, call the police, as in any other circumstances. Dial **999**.

If a member of the public makes their concerns known to a member of the support team, alert the Team Leader in the first instance to inform the Project Manager. The Team Leader should contact the Project Manager for advice where there is any uncertainty about the appropriate course of action. However, seeking internal advice must not delay a referral where there is an immediate or significant safeguarding concern.

If staff have a safeguarding concern, they will complete an incident report with a full record of the safeguarding incident on Integrating's database. The Project Manager will complete a referral form: [Guidance, toolkits and forms for Practitioners](#) and email it to First Contact: firstcontact@durham.gov.uk

Parents or carers should normally be informed and involved where appropriate and where doing so is consistent with safeguarding the child. However, **parental consent is not a prerequisite for making a safeguarding referral**. Information may need to be shared without consent where there is a lawful safeguarding basis for doing so, including where seeking consent or informing the parent or carer could place the child or another person at greater risk of harm, prejudice a safeguarding enquiry, or otherwise undermine the protection of the child.

Decisions about informing parents or carers should be made on a case-by-case basis and, where appropriate, in consultation with children's social care or the relevant safeguarding lead.

The Team Leader should determine, in consultation with the Project Manager or Safeguarding Lead where appropriate, who is best placed to communicate with the parent or carer. Staff should not contact parents or carers about a safeguarding concern where doing so could increase risk or interfere with a safeguarding enquiry. Contact details are provided in **Annex B (page 35)**.

Staff should not feel that they have to wait for a Team Leader or other manager before raising a safeguarding concern if they believe a child may be at risk.

Reference should be made to the **Durham Thresholds Document** [Thresholds Guidance](#) which sets out local thresholds and supports professional judgement about the level of support or intervention required. The DSCP also provides information about Early Help/Family Help and other support available to children and families.

Where a child or family would benefit from additional support and the concern does not meet the threshold for statutory children's social care intervention, an appropriate Early Help/Family Help referral should be considered. Advice regarding Early Help is available from Durham First Contact on **03000 267 979** by selecting the appropriate Early Help option.

Where a safeguarding concern indicates that a child is suffering, or is likely to suffer, significant harm, the matter should not be dealt with solely through Early Help and should be referred promptly to Children's Social Care.

The Trustee responsible for Safeguarding may instruct the member of staff to contact County Durham's First Contact Service which ensures that:

- a trained officer will provide guidance to decide the level of response needed
- any action taken or recommended by First Contact will be based on clear information and analysis of risk and has the individual at risk of/who has suffered harm at the heart of any decisions made about them
- the member of staff knows what action is being taken and the timescales for any activity
- there is a timely and appropriate response to the concerns that have been identified, and
- individuals, and their families, can be fully engaged in any assessment carried out.

The basic information needed when contacting First Contact includes:

- name, address and date of birth of the individual
- the referrer's involvement with the individual
- details of the disclosure or concern
- what led to the disclosure/concern
- what impact this may have on the individual and their family
- any other information regarding the individual and their family which may be helpful.

In exceptional circumstances, First Contact may contact other agencies to clarify the information given at this stage without consent if they consider that an individual may be at further risk of harm.

It is lawful to share relevant personal information to keep an individual at risk safe from harm, address safeguarding risks, prevent issues escalating and promote physical, mental, or emotional well-being. Information sharing is essential to ensure an individual receives the right services at the right time and this is made possible by sharing information across relevant agencies to build a whole picture of need.

Research and serious case reviews have repeatedly shown the dangers of failing to take effective action. Examples of poor practice include:

- failing to act on and refer the early signs of abuse and neglect
- poor record keeping
- failing to listen to the views of the child (for Integrating, all service users)
- failing to re-assess concerns when situations do not improve
- not sharing information with the right people within and between agencies
- sharing information too slowly, and
- a lack of challenge to those who appear not to be taking action.

First Contact will ensure Early Help for individuals and their families is their priority. They will contact the family where contact details are known to discuss the nature of the concerns raised and may:

- provide the referrer with appropriate advice and guidance
- refer to preventative services such as One Point, with a 'team around the family' and a named lead professional
- make a statutory referral to assessment and interventions teams due to safeguarding concerns, with a 'team around the family' and a named lead professional.

The overall aim of supporting individuals and their families is to meet any identified need. In this way, everybody at Integrating can ensure that every service user is healthy and safe; is enjoying and achieving, is making a positive contribution and where appropriate, is achieving economic well-being.

The Project Manager will inform the Trustee responsible for Safeguarding within one working day and will report to Trustees at each meeting any incidents and issues. In cases which may attract public or media attention, the Chair of Trustees will determine appropriate communications and other relevant action.

Keeping records

Any observable changes in one of our member's behaviour, physical condition or appearance, or any disclosures, are noted in a specific and confidential record, which are separate from the usual ongoing records of that individual's progress and development. This is in addition to any existing information already on record about an individual's links to other agencies (subject to Early help, Child in Need or Child Protection, for example).

Records of this nature will include:

- the date and time of the incident/disclosure
- the date and time of the report
- the name and role of the person to whom the concern was originally reported and their contact details
- the name and role of the person making the report (if this is different to the above) and their contact details
- the names of all parties who were involved in the incident, including any witnesses
- the name, age and any other relevant information about the individual who is the subject of the concern (including information about their parents or carers and any siblings)
- what was said or done and by whom (this is a factual account and should not include any personal opinions)
- any action taken to investigate the matter
- any further action taken (such as a referral being made)
- the reasons why the organisation decided not to refer those concerns to a statutory agency (if relevant).

Such records are stored separately and are only accessible to specified personnel as appropriate. Integrating will specify clearly in writing the person[s] identified as having access to information and to the secure files. These names will be reviewed, at least annually, and any changes recorded.

Liaison with other agencies and organisations

Integrating operates in accordance with Local Authority guidelines. Confidential records, kept on individuals about whom the organisation has concerns, will be shared with First Contact, preventative services, assessment or intervention teams, as appropriate, if the organisation feels that adequate explanations for changes in the individual's condition have not been provided.

Integrating will maintain ongoing contact with the Local Authority, including names, addresses and telephone numbers of individual's social workers, to ensure timely and effective communication, in any emergency, between organisations, agencies and practitioners undertaking assessments or providing services.

Integrating will ensure they are up to date with reporting procedures. Contact details will also be kept of the local safeguarding board, Social Work department and other agencies as appropriate.

Trustees are mindful of their reporting obligations to the Charity Commission in respect of Serious Incident Reporting and, if applicable, other regulators. They are aware of the Government guidance on handling safeguarding allegations.

Serious incidents can be reported to the Commission on submission of an annual return, but as a matter of good practice the Commission considers that any serious incident that has resulted in a significant loss of funds or a significant risk to the charity's property, work, beneficiaries or reputation, should be reported immediately.

Reporting and escalation

Any safeguarding concern must be reported promptly to the **Designated Safeguarding Lead (DSL)** or, where the DSL is unavailable, to the **Deputy DSL**.

- a. If the DSL is implicated

The concern must be reported directly to the appropriate senior manager, trustee safeguarding lead, Local Authority Designated Officer (LADO), children's social care or police, as appropriate.

- b. If the concern is not acted upon

Any employee or volunteer who believes that a safeguarding concern has not been appropriately addressed must escalate it.

They may escalate to:

- the DSL;
- Deputy DSL;
- Trustee Safeguarding Lead;
- Chair of Trustees;
- Local Authority Designated Officer;
- children's social care;
- police;
- appropriate regulatory authority.

Low-level concerns

The charity will maintain a culture in which concerns about staff behaviour can be raised before they escalate. A low-level concern may relate to behaviour that:

- is inconsistent with the Code of Conduct;
- falls below expected professional standards;
- causes concern but does not meet the threshold for an allegation of abuse.
- Low-level concerns will be recorded, reviewed and managed appropriately.

Patterns of low-level concerns will be considered carefully because repeated minor concerns may indicate a wider safeguarding risk.

Whistle-blowing

Employees need to feel confident to voice concerns about the behaviour or actions of colleagues. If an employee believes that a reported allegation is not being dealt with appropriately by their organisation, they should report the matter to the LADO.

See Annex B (page 35)

Child-on-Child Abuse

Abuse isn't always perpetrated by adults; children can abuse other children and it can happen in person and online. This is referred to as 'child-on-child abuse' (formally known as peer-on-peer abuse) and can include:

- bullying, including [cyberbullying](#)
- abuse in intimate personal relationships between peers
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; this may include an online element which facilitates, threatens and/or encourages physical abuse
- sexual violence, such as rape, assault by penetration and sexual assault; this may include an online element which facilitates, threatens and/or encourages sexual violence
- sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- causing someone to engage in sexual activity without consent
- consensual and non-consensual [sharing of nude and semi nude](#) images and or videos
- 'Upskirting' which involves taking a picture under someone's clothing without them knowing; this is usually with the intention of viewing their genitals or buttocks for sexual gratification, or cause the victim humiliation, distress or alarm. Upskirting is a criminal offence and anyone of any gender, can be a victim
- initiation/hazing type violence and rituals.

Integrating staff should be able to recognise the indicators and signs of child-on-child abuse and know how to identify it and respond it in line with policy

and procedure. Whilst no reports may exist, this does not mean it is not happening.

All staff should recognise the importance of challenging inappropriate behaviours between children that are actually abusive in nature. Downplaying certain behaviours can lead to a culture of unacceptable behaviours, an unsafe environment for children and in worst case scenarios, a culture that normalises abuse leading to children accepting it as normal and not coming forward to report it.

Child-on-Adult Abuse

Child-on-adult abuse occurs when a child or young person engages in behaviour that causes, or is intended to cause, physical, emotional, psychological, sexual or financial harm to an adult.

This may include physical violence, threats, intimidation, coercive or controlling behaviour, verbal abuse, exploitation or damage to property. Such abuse may occur within a family, caring relationship or other setting and must be taken seriously, regardless of the age, needs or circumstances of the child or young person.

All concerns must be responded to promptly, proportionately and in accordance with safeguarding procedures. Where an adult is experiencing, or is at risk of, abuse or neglect, an appropriate referral should be made to Adult Safeguarding. Where the person causing harm is under 18, Children's Services may also need to be involved to assess the child's needs, circumstances and any risks.

A coordinated, person-centred and trauma-informed approach should be adopted to safeguard the adult, address the behaviour and promote the safety and wellbeing of everyone involved.

County Lines

County lines is a form of child criminal exploitation (CCE) in which organised criminal groups use children and young people to transport, store or sell illegal drugs, often from urban areas to smaller towns and rural locations.

Children may be exploited through coercion, intimidation, violence, grooming, manipulation, debt bondage or the offer of money, gifts and perceived status.

Exploitation may also involve the use of children to move drugs or money, or the takeover of their homes or the homes of vulnerable adults, commonly referred to as *cuckooing*.

Any child or young person may be at risk of county lines exploitation, regardless of their age, gender, background or circumstances. Children who are exploited may not recognise themselves as victims and may be reluctant

to disclose their experiences due to fear, threats or loyalty to those exploiting them.

All concerns, indicators or disclosures of county lines activity must be taken seriously and responded to promptly in accordance with the organisation's safeguarding and child protection procedures.

Staff must report concerns to the Designated Safeguarding Lead (DSL), who will ensure that appropriate referrals are made to Children's Social Care and/or the police, as required. The child's immediate safety and welfare must remain paramount, and a child-centred, trauma-informed approach should be adopted, recognising that children involved in county lines may be victims of exploitation rather than willing participants in criminal activity.

Online abuse

We will promote a culture in which everyone is encouraged to use technology safely, respectfully and responsibly. We will:

- Provide appropriate online-safety guidance and support.
- Encourage individuals to understand and manage online risks.
- Promote respectful and responsible online behaviour.
- Take concerns about online abuse, bullying, exploitation or inappropriate content seriously.
- Provide clear procedures for reporting online safety concerns.
- Respond promptly and proportionately to incidents.
- Protect personal information and respect privacy.
- Keep relevant policies, procedures and safeguarding arrangements under regular review.
- Provide appropriate training and guidance to staff and volunteers.
- Work with parents, carers and relevant external agencies where appropriate.

We recognise that online risks may include cyberbullying, harassment, grooming and exploitation, inappropriate or harmful content, scams and fraud, identity theft, privacy breaches, misinformation, excessive or harmful internet use, unwanted contact, and risks associated with sharing images or personal information. Individuals should be encouraged to:

- Keep passwords secure and use strong, unique passwords where possible.
- Use privacy and security settings appropriately.
- Think carefully before sharing personal information, photographs or other content.
- Be cautious when communicating with people they do not know.

- Check information before sharing or relying upon it.
- Avoid clicking suspicious links or downloading unknown files.
- Block and report abusive, threatening or inappropriate accounts or messages.
- Seek help from a trusted adult, colleague or appropriate organisation when something online causes concern.

Sharing Nudes and Semi-Nudes

Sharing nudes and semi-nudes (sometimes referred to as “sexting”) is the sending or sharing of nude, partially nude or sexually explicit images or videos of a person through mobile phones, messaging applications, social media or other digital platforms, including services such as WhatsApp, Facebook Messenger and Snapchat.

It is illegal to make, possess, distribute or share indecent images of anyone under the age of 18. This includes images or videos created by the young person themselves and then shared with another person.

Any concern involving the creation, possession or sharing of nudes or semi-nudes involving a child or young person must be treated as a safeguarding concern. Staff should not copy, download, save or forward such images. The concern should be reported immediately in accordance with Integrating's safeguarding procedures, and advice should be sought from the appropriate safeguarding authority or the Police where necessary.

Online misrepresentation

Online misrepresentation, popularly known as ‘catfishing’, is when someone pretends to be some else to befriend people online. People often use pictures of people that are younger than themselves of the opposite sex on social media accounts and chat rooms to initiate relationships. These relationships can become romantic and sometimes lead to emotional or sexual abuse.

Cyberbullying

Bullying that occurs on social media, online gaming forums or via mobile phones is called cyberbullying. It can be more harmful than other forms of bullying as it can occur day or night. It is sometimes harder to trace the bully online.

Children and young people can be at risk of online abuse from people they know, as well as strangers. They may or may not be experiencing abuse in the real world as well.

For guidance on dealing with online abuse see:

Annex F 'E-Safety: Children Exposed to Abuse through the Digital Media'

All staff should acquaint themselves with the contents of this Annex.

Support for families

Integrating staff will seek to build trusting and supportive relations with members' families and do all in their power in a supportive capacity to achieve best possible outcomes.

Where abuse at home is suspected, the organisation will continue to welcome the attendee and their family while investigations proceed.

Confidential records will be shared with a member's parent or carer with the stipulation that the care and safety of the individual is always paramount.

Race and Culture

Individuals from all cultures are subject to abuse and neglect. Everybody has the right to grow up safe from harm. Culture is not a reason or excuse for an individual's right to not grow up safe from harm. In order to make sensitive and informed professional judgments about an individual member's needs, and parents' capacity to respond to individual needs, it is important that professionals are sensitive to differing family patterns and lifestyles and to child-rearing patterns that vary across different racial, ethnic and cultural groups. At the same time, abuse cannot be condoned for religious or cultural reasons.

Managing behaviour

For any group to function effectively, there must be an agreed framework of agreed rules, which is the basis for discipline and acceptable behaviour.

Therefore, Integrating recognises its duty to safeguard the well-being of its members and any rules should contribute to providing a safe stimulating environment in which an individual's potential for learning and development is at its best. The purpose of rules is to make expectations for behaviour clear and help to prevent incidents.

We take a preventative and proactive approach utilising risk assessment procedures, including our knowledge of members' individual needs and limitations, and positive reinforcement of the appropriate behaviours, to minimise the risk of incidents.

Integrating aims to provide its members with support to access enjoyable activities of their choosing i.e., they are not obliged to attend. We depend on

families to advise about illness or other factors that may give rise to a particular behaviour.

We aim to promote and acknowledge good behaviour, valuing co-operation and a caring attitude to group aims to help members develop a sense of responsibility and well-being for themselves and others.

At Integrating, we aim to treat everyone as an individual whilst encouraging self-awareness and an appreciation of how individual actions will affect others.

With this in mind, we will:

- establish community rules which set out the code of conduct and behaviour expected in the group
- endeavour to include all members, as well as their families, in the creation of ground rules
- inform members and their families of the rules and check that these are understood and accepted
- provide explanations for why a particular rule should be respected
- encourage all adults to provide positive role models by showing consideration, good manners and respect towards and for others.
- praise and encourage acceptable behaviour
- provide opportunities for freedom, self-expression and exploration without threatening the enjoyment of others
- help members to develop a positive self-image and acquire self-discipline
- understand age/developmentally appropriate behaviour patterns
- be able to differentiate between deliberate and accidental occurrences
- use appropriate respectful language and establish appropriate contact when talking to an individual in the group
- deal sensitively with anyone who breaches the code
- work with families to promote acceptable behaviour
- have knowledge about members' interests/motivators
- review the rules regularly to ensure they are still appropriate.

We recognise that sometimes, despite the best efforts of staff and volunteers, an individual's behaviour may become a cause for concern and require active management. In such circumstances, staff will endeavour to apply strategies to defuse or de-escalate the situation. Staff will:

- be clear with members about behaviour expectations
- gain appropriate contact when communicating with the individual
- state clearly and in a calm, non-confrontational manner what the individual needs to do
- avoid statements with 'no' or 'don't' - always state clearly the expected behaviour e.g., 'Sit there. Stand still.' This is better than leaving the individual with a negative message e.g., 'Don't do that.'

- consider the level at which the individual understands and processes language and amend communication accordingly e.g., speak slowly, use fewer words, make use of gesture
- consider any possible triggers for behaviour problems e.g., some individuals rely on predictable routines, therefore support to predict plans, such as 'now *this*', but 'next *that*', may help to diffuse a situation
- manage any environmental factors that may be exacerbating distress e.g., noise, temperature, crowds, passers-by etc. and where possible, encourage the individual in distress to move to a quieter place or support the individual to manage these factors
- use rewards/motivators with some individuals to de-escalate their distress or divert them to more appropriate behaviour e.g. 'Let's have a drink/snack/sit down and have a chat' - offering choices or other options can also help
- give the individual time to calm down whilst ensuring that staff provide supervision at an appropriate level to keep them safe
- if working alone, feel able to seek support from other support workers or the senior support worker by mobile phone if necessary, or if they feel the situation is unresolved
- build bridges, once the incident is resolved, to enable the individual or individuals to reintegrate positively with the group and the people involved - a 'clean slate' approach should be taken
- end the activity, in certain circumstances, and contact the family to collect the individual
- call the police (in extreme circumstances e.g., sustained aggression or dangerous behaviour) - see 'Aggression' below.

As an organisation, we do not use planned physical restraint or physical intervention practices.

Staff would only ever use physical interventions such as manual guidance to assist a person e.g., hand holding. However, like any carer in an emergency or an unplanned/unforeseen situation, staff may have to act to prevent harm/danger by physically intervening e.g., to prevent an individual from stepping out into the road. This would be in line with staff's duty of care and would involve the minimum force necessary for the minimum time necessary.

Any such events would be reported and recorded using the incident reporting system and be discussed in supervision with the Project Manager. This information would be used to update an individual's risk assessment in order to prevent similar incidents occurring in the future. Updated risk assessments will be shared with an individual's family.

If an individual member's behaviour is giving rise to concern, the group will make every effort to understand why that individual is acting that way and consult with their family to identify ways in which the individual can be better supported. Confidentiality will always be respected.

Staff or volunteers will never smack, shake, humiliate, isolate, threaten or make any individual to feel unwanted or undervalued by any adult whilst in the care of the group.

Aggression

Integrating's policy on aggression and violence is 'zero tolerance'. The Health and Safety of staff is our prime consideration. Any person employed or acting as a volunteer, who displays aggressive behaviour or is violent towards any other person whilst working with Integrating, will be subject to disciplinary procedures and/or a report to the Police and a referral to the Local Authority Designated Officer (LADO).

In the event of violence or aggressive behaviour from other members of staff or members of the public, the following actions must be taken:

- Attempt to calm the violent or aggressive person by talking to them. Be clear, but not confrontational.
- If the situation does not calm down, attempt to walk away.
- Try to alert other members of staff to the problem.
- Do not offer any physical resistance. Where violence is threatened, give the person what they have demanded.
- If there is an attempted robbery, all staff are instructed to comply with the robbers' demands if violence is at all remotely possible.
- After the incident is over, record in writing the time, essential details and description of the person, including noticeable tattoos, marks, accent etc. All staff involved should do this.
- Discuss the incident with the Project Manager and/or other staff in a considered manner.

If anyone is in danger of being harmed or the incident is causing distress, a member of staff should dial 999 to call the police.

The member of staff responsible for the activity should ascertain whether medical help is required for any victims. The incident should be reported to the Project Manager immediately who will:

- gather all the information regarding the incident by interviewing those involved as well as any independent witnesses.
- report the details to the police (where appropriate).
- ensure that everybody has recovered from the incident, and if not, consider seeking professional help for post incident support.
- consider whether disciplinary action is necessary [internal disputes].
- consider whether the incident was handled in the most appropriate manner, or whether there are lessons to be learned for the future.
- ensure any lessons learned are disseminated to all staff.

- ensure that appropriate records of the incident are kept in the Health and Safety manual. Personal details must be kept separate to comply with the Data Protection Act.
- where physical violence has been used, reported the incident to the H.S.E. under RIDDOR.

A report should be forwarded within three working days to the Chair of Trustees who will report all such incidents to the Trustees.

Administration of Medication

Integrating staff will neither *prompt* members to take their medication, *give assistance* nor *administer* any medication. Members must be competent to administer their own medication. This will be documented on the individual risk assessment. Any staff training related to medication at this time is for the purpose of risk assessment.

Late collection of a service user

The nominated adult must supply all necessary details in writing to ensure the safe collection of their child or young person from the charity's activities.

This should include:

- All necessary telephone numbers
- Names and addresses of people nominated to collect on their behalf
- Name and address of a secondary contact authorised to collect

The following procedures shall be put into action if an individual's nominated adult is late or is a no-show.

If the nominated adult is late, the senior worker on duty will:

- a. wait approximately fifteen minutes
- b. attempt to contact the nominated adult on their agreed contact number. One member of staff shall remain with the individual until they are collected
- c. If the nominated adult cannot be contacted, try the secondary contact number and arrange for the safe collection of the individual
- d. notify the Local Authority through First Contact if neither the primary nor the secondary adult is reached (highly unlikely); a member of staff will be appointed to remain with the individual
- e. hand the individual over to the local agent for safety – only when the individual has not been collected by the time the local agent from the contacted agency has turned up at the venue/premises; the most

appropriate worker will share all the relevant details with the local agent as follows:

- Individual's name and address
- Primary contact's name, address and telephone details
- Secondary contact's name, address and telephone details
- Integrating's duty personnel contact details

Every Integrating member's family will be aware of this policy and the procedures outlined above.

Missing service user

Due care and consideration is taken by Integrating staff to ensure the safety of every individual in the group at all times. This includes constant supervision on the charity premises, but also when out on field trips or visits.

In the unlikely event of an individual going missing, the following procedures will be put in action immediately:

- a. The senior member of staff will assemble all service users and staff in one area for a roll call/head count on notification that a member of the group is missing.
- b. Two of the staff team will be detailed to search the last known area where the missing individual was sighted.
- c. The senior member of staff will immediately inform the Project Manager of the incident.
- d. If necessary, the Project Manager will arrange for additional personnel to assist in the immediate search area.
- e. The Project Manager will also have in place a procedure to notify the individual's family and the police if the individual has not been located after the initial search.
- f. If necessary, a copy of the appropriate risk assessment for the outing will be made available to the police with a detailed description, including identifying features or clothing, and any health and/or disability the individual may have.
- g. If the individual is found, this action will be stopped immediately, a report with statements filed in the individual's file and the central Safeguarding Log updated with concerns, actions and outcomes where relevant.

If in the unlikely event that the individual is not found, the Project Manager will:

- notify the individual's nominated adult
- arrange for the prompt collection of all service users in attendance from the venue/activity

- liaise with the police and offer all and any assistance necessary to ensure the safe return of the missing individual
- make any staff members available to assist in the search or any other way that the police may request

These procedures will be used in conjunction with all appropriate risk assessments and will be reviewed on a regular basis, taking into consideration the age, mental awareness and any associated disabilities of the individuals in the group.

All incidents will be reviewed with staff in supervision sessions, and amendments to any individual risk assessments made, to minimise/prevent incidents occurring in the future. The central Safeguarding Log will be updated with concerns, actions taken and outcomes once determined.

Philomena Protocol

The Philomena Protocol is a Durham Constabulary initiative to help locate and safely return a young person as quickly as possible when they are missing. The basis of the scheme is for vital information about the young person to be recorded on a form which can be used to locate them safely and quickly.

The form is available from: [Philomena Protocol form for young people and children at risk of going missing | Durham Constabulary](#)

Once complete, the form should then be stored safely - either in electronic format on a computer, or a printed version. It may need to be located quickly, at any time of day or night, by the person who needs the information to begin the initial searches. When the form is complete, it will contain confidential information about a person so it should be stored securely. Any partner agency required to complete the form will become the owner of the data and must store it appropriately. Always back the form up to password protected online storage.

Further advice is available on the [official guidance](#) from the National Police Chiefs' Council. Once complete, the form belongs to the family or care provider or local authority.

If you discover the young person or child has gone missing, take reasonable steps to try and find them. The form will support you with actions to take.

If you cannot find them, you can [report a missing person online](#). Use the Philomena Protocol form to provide information to the police.

Complaints

At Integrating, we are committed to delivering a quality service to all our members. We aim to take effective action to ensure that standards are upheld. We believe that an effective complaints procedure can contribute to the quality and effectiveness of our service.

Please refer to the separate **Complaints Policy** for further information.

Health and Safety

Integrating's Health and Safety Policy and Procedures are contained in a separate Policy Document maintained at the charity's office. This is open for inspection on request by anyone with a legitimate interest.

Review

This policy will be reviewed by the Trustees every two years or when significant changes occur internally or externally, or when circumstances require.

Approval

Date: 16th January 2013

V1.2	19.03.13 – Amendment
V1.3	21.05.14 – Review and amendment
V1.4	20.06.16 – Review and amendment
V1.5	18.06.17 – Review and amendment
V1.6	05.05.19 – Review and amendment
V1.7	06.11.21 – Review and amendment
V1.8	30.08.22 – Review and amendment
V1.9	31.05.23 – Review and amendment
V2.0	09.07.25 – Review and amendment
V2.1	12.09.26 – Review and amendment

Date of Review: 01.07.27 or earlier should legislation or circumstance require.

Annex A

SAFEGUARDING DISABLED CHILDREN & YOUNG PEOPLE

Excerpt from 'Durham Local Safeguarding Children Board Child Protection Procedures, Safeguarding Disabled Children & Young People'. (Version 7 2012)

Possible Indicators of Abuse

Disabled children can, of course, be abused and neglected in the same way as non-disabled children, however they can also be abused in ways that other children cannot. In addition to this, the early indicators suggestive of abuse or neglect can be more complicated for practitioners to recognise and understand.

- 1.1 Professionals in all agencies who come into contact with disabled children and young people are in a position to identify indicators that the child may be suffering or may be at risk of significant harm. They need to have a greater awareness of the possible indicators of abuse or neglect as the situation can often become more complex. Guidance regarding how to respond to such situations is provided in Section 5 of the Durham Child Protection Procedures which apply equally to disabled children and young people. A child/young person's disability should always be considered when considering whether significant harm might be indicated. For example, a bruise in a site that might not be of concern on an ambulant child/ young person, such as the shin, might be of concern on a non-mobile child/young person.
- 1.2 Disabled children and young people they may also be at risk of being abused in other ways including:
 - **Force feeding** or inappropriate feeding, which would include withholding food or not using prescribed food
 - Their **personal care** needs may not be met adequately e.g. a child who smears or soils is left in unhygienic conditions
 - **Physical restraint** being carried out unnecessarily or not in accordance with available guidelines
 - **Rough handling** for example disproportionate use of force when dressing or undressing a child
 - **Extreme behaviour modification** including the deprivation of clothing, medication or food, limiting movement, restricting freedoms, being locked in or confined in small spaces (see section on restrictive practices below).
 - **Misuse of medication** sedation, heavy tranquillisation or withholding medication against medical advice
 - Being denied **access to medical treatment**
 - **Deliberate misapplication of programmes or regimes** for example Occupational Therapist or Physiotherapist guidance or advice not

being followed which may result in the child experiencing complications in the future

- **Deliberate misuse of ill-fitting equipment** e.g., calipers, sleep board which may cause injury or pain, inappropriate splinting
- They may be more vulnerable to abuse via Information and Communication Technology (**ICT**)
- **Inappropriate restriction** (i.e., long periods in wheelchair/bed when this against professional advice)

1.3 As with other children, disabled children are potentially vulnerable to abuse from **fabricated or induced illness**, which is where parents/carers seek unnecessary medical attention for the child. If this is suspected, then staff should refer to the specific guidance regarding this in Section 6 of these procedures.

1.4 Professionals may find it more difficult to attribute indicators to abuse or reluctant to act on concerns in relation to disabled children and young people because of a number of factors which may include:

- Over identifying with the child/young person's parents/carers and being reluctant to accept that abuse could have taken place, or seeing abuse as being attributable to the stress and difficulties of caring for a disabled child/young person
- A lack of knowledge about the impairment and its impact on the child/young person
- A lack of knowledge about the child/young person e.g., not knowing the child/young person's usual behaviour or demeanor
- Not being able to understand the child/young person's communication
- Confusing behaviours that may indicate the child/young person is being abused with those associated with the child/young person's impairment
- Denial of the child/young person's sexuality
- The child/young person having a number of carers.
- A failure to recognise that behaviour, including sexually harmful behaviour or self-injury, may be indicative of abuse.

1.5 Some health/medical complications may influence the way symptoms present or are interpreted. Certain indicators may be present that are attributable to the child/young person's condition or medical treatment. For example, some anti-convulsant medication may lead to spontaneous bruising and some conditions can cause fragile bones increasing the likelihood of fractures during normal day-to-day activities. It is essential therefore that relevant and pertinent information is incorporated into any assessment and recorded clearly on a child/young person's file. This may include communication methods used by the child/young person to understand and express themselves, impact of disability, numbers of care givers, and level of care required etc. Where there are concerns about a child/young person, it is essential that workers with the required knowledge and skills, and who know that child, are involved promptly.

- 1.6 Where a worker is not clear if a child/young person's particular injury or behaviour is indicative of abuse, or is associated with their disability, they should seek advice from a professional who knows the child and the implications of their disability well, for example, a paediatrician, a school nurse, a teacher.

Annex B

Contact Information

Trustee Responsible for Safeguarding Children	
Jayne Oliver	07815 053404
Chairperson of Board of Trustees	
Richard Taylor	07791 800324
Project Manager/DSL	
David Gaudie	07889 575814
Business Manager/Deputy DSL	
Kathryn Gaudie-Jones	07986 383798
LADO (Allegations against staff or volunteers)	
Contacting the LADO is facilitated through dedicated customer service staff via telephone only	03000 268835

Annex C

Safeguarding Procedures

When someone is at risk, or you have a concern, follow these steps.



1. IMMEDIATE RISK OR CRIME IN PROGRESS

If a crime is in progress, or an individual in immediate danger, call the police, as in any other circumstances.

Dial 999.



2. ALERT THE TEAM LEADER

If a member of the public makes their concerns known to a member of the support team, alert the Team Leader in the first instance to inform the Project Manager.

The Team Leader should contact the Project Manager for advice where there is any uncertainty about the appropriate course of action.



However, seeking internal advice must not delay a referral where there is an immediate or significant safeguarding concern.



3. COMPLETE AN INCIDENT REPORT

If staff have a safeguarding concern, they will complete an incident report with a full record of the safeguarding incident on Integrating's database.



4. PROJECT MANAGER SUBMITS REFERRAL

The Project Manager will complete a referral form: [Guidance, toolkits and forms for Practitioners](#) and email it to First Contact:



firstcontact@durham.gov.uk



Safeguarding is everyone's responsibility.

If in doubt, seek advice. Report concerns. Help keep people safe.

Annex D

RACE, ETHNICITY & CULTURE (from 'Durham Local Safeguarding Children Board Child Protection Procedures')

- 1.1 Children from all cultures are subject to abuse and neglect. All children have a right to grow up safe from harm. In order to make sensitive and informed professional judgments about a child's or young person's needs, and parents' capacity to respond to these needs, it is important that professionals are sensitive to differing family patterns and lifestyles and to child rearing patterns that vary across different racial, ethnic and cultural groups. **At the same time, they must be clear that child abuse cannot be condoned for religious or cultural reasons.**
- 1.2 Professionals should also be aware of the broader social factors that serve to discriminate against black and minority ethnic people. Working in a multi-racial and multi-cultural society requires professionals and organisations to be committed to equality in meeting the needs of all children and families, and to understand the effects of racial harassment, racial discrimination and institutional racism, as well as cultural misunderstanding or misinterpretation.
- 1.3 The assessment process should maintain a focus on the needs of the individual. It should always include consideration of the way religious beliefs and cultural traditions in different racial, ethnic and cultural groups influence their values, attitudes and behaviour, and the way in which family and community life is structured and organised. Cultural and religious factors should not be regarded as acceptable explanations for abuse or neglect and are not acceptable grounds for inaction when a child or young person is at risk of significant harm. Professionals should be aware of and work with the strengths and support systems available within families, ethnic groups and communities, which can be built upon to help safeguard children and young people and promote their welfare.
- 1.4 Professionals should guard against myths and stereotypes - both positive and negative - of black and minority ethnic families. Anxiety about being accused of racist practice should not prevent the necessary action being taken to safeguard and promote a child's welfare. Careful assessment - based on evidence - of a child or young person's needs, and a family's strengths and difficulties, understood in the context of the wider social environment, will help to avoid any distorting effect of these influences on professional judgments.
- 1.5 All children and young people, whatever their religious or cultural background, must receive the same care and safeguards regarding abuse and neglect.

- 1.6 The experience of racism is likely to affect the responses of a child/young person and family to the assessment and enquiry processes and failure to consider the effects of racism will undermine the efforts to protect children and young people from other forms of significant harm. The effects of racism differ between communities and individuals and should not be assumed to be uniform. The specific needs of mixed parentage and refugee children should be given attention, in particular the need for neutral, high quality, gender appropriate translation or interpretation services for children and families whose preferred language is not English.
- 1.7 There may be occasions when the impact of racist incidents is so severe that it constitutes significant harm for the victim. In those instances, consideration must be given as to whether it is appropriate to make a referral under the child protection procedures.

Annex E

BEHAVIOUR MANAGEMENT AGREEMENT WITH PARTNER AGENCY

Purpose

Integrating works with a number of partners. It is expected that agreement will be reached with partner agencies that behaviour of service users will be managed in accordance with the policy outlined below. Partners should agree prior to the commencement of the activity or as soon as practicably possible in the case of current activities.

Background

Integrating supports children, young people and vulnerable adults with disabilities to take part in mainstream activities and as such, helps them to build life skills such as confidence, friendships and being able to interact with others. Our aim is to reduce stigma, promote emotional well-being and have a positive impact on young people's health and self-image.

Activities are negotiated with our service users and their families according to individual interests, wishes and needs. An individualised care plan/risk assessment allows the Project manager to match individuals to activities of their choice. Should an issue arise, a full evaluation of the situation is undertaken with the service user/carer and Support Worker/team Leader or Project Manager.

Behaviour Management

No service user should be prevented from participating in an activity of their choice as a consequence of behaviour unless it becomes dangerous to the individual/staff/volunteers or the community; every effort would be made to take into account individual choice of activity, staff ratio, environmental factors and potential risk to the individual, group, or community, based on a thorough risk assessment. All factors which may impact on participation in an activity are outlined in individual care plans and special consideration is given to potential triggers which may impact on an individual's emotional welfare. A change of activity would only be implemented if all other factors have been taken into consideration and a full discussion with all parties taken place.

Annex F

Online Safety: Children Exposed to Abuse through the Digital Media

AMENDMENT

In May 2025, information was added into Section 1, Definition in relation to sexually coerced extortion.

1. Definition

'Internet Abuse' relates to four main areas of abuse to children:

- Sharing and production of abusive images of children (although these are not confined to the Internet);
- A child or young person being groomed online for the purpose of Sexual Abuse;
- Exposure to pornographic images and other offensive material via the Internet; and
- The use of the internet, and in particular social media sites, to engage children in extremist ideologies or to promote gang related violence.

The term digital (data carrying signals carrying electronic or optical pulses) and interactive (a message relates to other previous message/s and the relationship between them) technology covers a range of electronic tools. These are constantly being upgraded and their use has become more widespread as the internet can be accessed easily on mobile/smart phones, laptops, computers, tablets and games consoles.

Social networking sites are often used by perpetrators as an easy way to access children and young people for sexual abuse. In addition radical and extremist groups may use social networking to attract children and young people into rigid and narrow ideologies that are intolerant of diversity: this is similar to the grooming process and exploits the same vulnerabilities.

Internet abuse may also include cyber-bullying or online bullying (see [Bullying](#)). This is when a child is tormented, threatened, harassed, humiliated, embarrassed or otherwise targeted by another child using the Internet and/or mobile devices. In the case of online bullying, it is possible for one victim to be bullied by many perpetrators. In any case of severe bullying it may be appropriate to consider the behaviour as child abuse by another young person.

Sexting is a term which many young people do not recognise or use, therefore it is important that when discussing the risks of this type of behaviour with children and young people the behaviour is accurately explained.

Sexting (some children and young people consider this to mean 'writing and sharing explicit messages with people they know' rather than sharing youth-produced sexual images) or sharing nudes and semi-nudes are terms used when a person under the age of 18 shares sexual, naked or semi-naked images or videos of themselves or others, or sends sexually explicit messages. They can be sent using mobiles, tablets, smartphones, laptops - any device that allows images and messages to be shared.

The DfE has produced [Guidance for schools and educational establishments](#) which outlines how to respond to an incident of nudes and semi-nudes being shared.

Online safety is the generic term that refers to raising awareness about how children, young people and adults can protect themselves when using digital technology and in the online environment, and provides examples of interventions that can reduce the level of risk for children and young people.

The chapters relating to [Organised and Complex Abuse](#) and [Allegations Against Staff or Volunteers](#) should be borne in mind depending on the circumstances of the concerns.

The Online Safety Act 2023 introduced new criminal offences including:

- Sending a message with information the sender knows to be false with the intention of causing non-trivial psychological or physical harm to a likely audience without reasonable excuse;
- Sending a message with a threat of death, serious injury, rape or serious financial loss where the sender intends the recipient to fear that threat will be carried out (or is reckless as to whether the recipient has such fear);
- Sending or showing an electronic communication with flashing images with the intention to cause harm to a person with epilepsy;
- Communicating, publishing or showing material capable (and with the intention) of encouraging or assisting the serious self-harm of another, even if the sender cannot identify the recipients and even if the self-harm does not occur;
- Intentionally sending or giving images of any person's genitals to another person with the intention to cause the recipient alarm, distress or humiliation, or for the purposes of sexual gratification whilst reckless as to whether the recipient will be caused alarm, distress or humiliation;
- Four offences in relation to intentional sharing or threatening to share intimate images without consent, which do not necessarily require proof that the sender intended to cause alarm, distress or humiliation (This replaces the previous offences relating to so-called 'revenge porn' where there was a requirement for an intention to cause distress).

Sexually coerced extortion or 'sextortion' is a type of blackmail where someone tries to use intimate, naked or sexual photos or videos of children and young people to make them do things they don't want to do. Sometimes, these photos or videos are taken without their knowledge, and the person uses these to blackmail the child and force them to pay money or do something against their will.

Criminals often target people who use dating apps, social media platforms, webcam/live streaming sites or websites related to pornography. They might pretend to be someone else online and become friends with the child. Later, they might threaten to share pictures or videos with a child's family and/or friends.

See also ([Help if you're worried about 'sextortion' or online blackmail](#)).

See also [Sextortion - UK Safer Internet Centre](#).

The National Crime Agency's CEOP Education have issued an alert to education settings across the UK in response to this threat [FMSE Alert](#). The alert will help professionals to:

- Recognise and understand financially motivated sexual extortion;
- Raise awareness and help seeking behaviours amongst children and young people;
- Give suitable messaging and support to parents and carers; and
- Support victims of financially motivated sexual extortion.

2. Risks

There is some evidence from research that the abusive behaviour of people found in possession of indecent images/pseudo images or films/videos of children may escalate and they may become involved directly in child abuse themselves.

In particular, an individual's access to children should be established during an assessment and Section 47 investigation to consider the possibility that they may be actively involved in the abuse of children including those within the family, within employment contexts or in other settings such as voluntary work with children or other positions of trust.

Any indecent, obscene image involving a child has, by its very nature, involved a person, who in creating that image, has been party to abusing that child.

There is a correlation between online risk and real-life vulnerability that means care-experienced children have an increased risk of encountering online harm. Young people with prior off-line vulnerabilities are at greater risk of harm online than children and young people with none. For example, young people with eating disorders, Children and Young People in Care, and those with communication challenges may use technology to communicate and socialise in ways they cannot achieve without it. Denying online access to children can be abusive in itself (e.g., loss of opportunity to develop resilience, risk of alienation, risk of turning to secret devices).

3. Indicators

Often issues involving child abuse come to light through an accidental discovery of images on a computer or other device and can seem to emerge 'out of the blue' from an otherwise trusted and non-suspicious individual. This in itself can make accepting the fact of the abuse difficult for those who know and may have trusted that individual. Partners, colleagues and friends often find it very difficult to believe and may require support.

The initial indicators of child abuse are likely to be changes in behaviour and mood of the child victim. Clearly such changes can also be attributed to many innocent events in a child's life and cannot be regarded as diagnostic. However changes to a child's circle of friends or a noticeable change in attitude towards the use of computer or phone could have their origin in abusive behaviour. Similarly a change in their friends or not wanting to be alone with a particular person may be a sign that something is upsetting them.

Children often show us rather than tell us that something is upsetting them. There may be many reasons for changes in their behaviour, but if we notice a combination of worrying signs it may be time to call for help or advice.

4. Protection and Action to be Taken

Accessing or Creating Indecent Images

Where there is suspected or actual evidence of anyone accessing or creating indecent images of children, this must be shared with the Police and Children's social care in line with the [Referrals Procedure](#).

Where there are concerns about a child being groomed, exposed to pornographic material or contacted by someone inappropriately, via the Internet or other ICT tools like a mobile phone, referrals should be made to the Police and to Children's Social Care in line with the [Referrals Procedure](#).

The [Serious Crime Act \(2015\)](#) introduced an offence of 'sexual communication with a child'. This applies to an adult, who communicates with a child and where the communication is sexual or, if it is intended to elicit from the child a communication, which is sexual and the adult reasonably believes the child to be under 16 years of age. The Act also amended the Sex Offences Act 2003 so it is now an offence for an adult to arrange to meet with someone under 16 having communicated with them on just one occasion, previously it was on at least two occasions.

All such reports should be taken seriously. Referrals will normally lead to a Strategy Discussion to determine the course of further investigation, enquiry and assessment. Any intervention should be continually under review especially if further evidence comes to light.

Due to the nature of this type of abuse and the possibility of the destruction of evidence, the referrer should first discuss their concerns with the Police and Children's Social Care before raising the matter with the family. This will enable a joint decision to be made about informing the family and ensuring that the child's wellbeing is safeguarded.

Extremist Material

Where there are concerns in relation to a child's exposure to extremist materials, the child's school may be able to provide advice and support: all schools are required to identify a Prevent Single Point of Contact (SPOC) who is the lead for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism.

Suspected online terrorist material can be reported through www.gov.uk/report-terrorism. Reports can be made anonymously, although practitioners should not do so as they must follow the procedures for professionals. Content of concern can also be reported directly to social media platforms see [Safety Features on Social Networks](#).

5. Issues

When communicating via the internet, young people tend to become less wary and talk about things far more openly than they might when communicating face to face.

Both male and female adults and some young people may use the internet to harm children. Some do this by looking at, taking and/or distributing photographs and video images on the internet of children naked, in sexual poses and/or being sexually abused.

Children and young people should be supported to understand that when they use digital technology they should not give out personal information, particularly their name, address or school, mobile phone numbers to anyone they do not know or trust: this particularly includes social networking and online gaming sites. The [Digital Passport](#) is aimed specifically at Children in Care, but may be a useful resource that can be adapted for any vulnerable child.

If they have been asked for such information, they should always check with their parent or other trusted adult before providing such details. It is also important that they understand why they must take a parent or trusted adult with them if they meet someone face to face whom they have only previously met on-line.

Children and young people should be warned about the risks of taking sexually explicit pictures of themselves and sharing them on the internet or by text. It is essential, therefore, that young people understand the legal implications and the risks they are taking. The initial risk posed by sexting or sharing nudes and semi-nudes may come from peers, friends and others in their social network

who may share the images. However, once an image has been sent, it can then be shared with others or posted online.

In some cases adults may also groom a young persons into sending such images which can then be used to blackmail and ensnare them – see [Child Exploitation \(including Child Sexual Exploitation and Criminal Exploitation\) Procedure](#).

Where young people (17 or younger) are voluntarily sending/sharing sexual images or content with one another the police may use the 'outcome 21' recording code to record that a crime has been committed but that it is not considered to be in the public interest to take criminal action against the people involved. This reduces stigma and distress for children and helps to minimise the long term impact of the situation. Crimes recorded this way are unlikely to appear on future records or checks, unless the young person has been involved in other similar activities which may indicate they are at risk.

The discretion about whether to disclose non-conviction information rests with each Chief Constable managing the process.

6. AI Imagery

Artificially generated child sexual abuse material describes images of child sexual abuse that are partially or entirely computer-generated. They are usually produced using software which converts a text description into an image. This technology is developing rapidly, the images created can now be very realistic, and recent examples are difficult to differentiate from unaltered photographs.

Many popular, publicly available artificial intelligence tools automatically block attempts to create abusive material, but the large number of child sexual abuse images made using them that have been detected show that individuals have found ways around this. Typically, they are made using publicly available artificial intelligence tools that can be used and manipulated to produce images, (and, increasingly, videos) depicting child sexual abuse.

See [Artificially generated child sexual abuse images: Understanding and responding to concerns/CSA Centre](#).

See also [How AI is being abused to create child sexual abuse material \(CSAM\) online \(iwf.org.uk\)](#)

7. Sharing nudes and semi-nudes

This advice uses the term 'sharing nudes and semi-nudes' to mean the sending or posting of nude or semi-nude images, videos, or live streams by young people under the age of 18 online. This could be via social media, gaming platforms, chat apps or forums. It could also involve sharing between devices via services like Apple's AirDrop which works offline. The sharing of nudes and semi-nudes can happen publicly online, in 1:1 messaging or via group chats and closed social media accounts. Nude or semi-nude images, videos or live

streams may include more than one child or young person. The term 'nudes' is used as it is most commonly recognised by young people and more appropriately covers all types of image sharing incidents. Alternative terms used by children and young people may include 'dick pics' or 'pics'. Many professionals may refer to 'nudes and semi-nudes' as:

- Youth produced sexual imagery or 'youth involved' sexual imagery;
- Indecent imagery. This is the legal term used to define nude or semi-nude images and videos of children and young people under the age of 18;
- 'Sexting'. Many adults may use this term, however some young people interpret sexting as 'writing and sharing explicit messages with people they know' rather than sharing images;
- Image-based sexual abuse. This term may be used when referring to the nonconsensual sharing of nudes and semi-nudes.

Terms such as 'revenge porn' and 'upskirting' are also used to refer to specific incidents of nudes and semi-nudes being shared. However, these terms are more often used in the context of adult-to-adult non-consensual image sharing offences outlined in s.33-35 of the Criminal Justice and Courts Act 2015, Voyeurism (Offences) Act 2019 and s.67A of the Sexual Offences Act 2003. Terms such as 'deep fakes' and 'deep nudes' may also be used by adults and young people to refer to digitally manipulated and AI-generated nudes and semi-nudes.

See [Sharing nudes and semi-nudes: advice for education settings working with children and young people.](#)

8. Further Information

- [Child Safety Online](#)
- [Coram Children's Legal Centre](#) - LawStuff is run by Coram Children's Legal Centre and gives free legal information to young people on a range of different issues. See Children's rights in the digital world in particular.
- [UK Safer Internet website](#) and [CEOP, thinkUknow website.](#)
- [Childnet Advice on Sexting](#)
- [Sexual Violence and Sexual Harassment between Children in Schools and Colleges \(September 2021\)](#)
- [Ofsted Review of Sexual Abuse in Schools and Colleges \(including Online\) This report is useful reading for everyone working in schools or with children and young people](#)

Behaviour that is illegal if committed offline is also illegal if committed online. It is recommended that legal advice is sought in the event of an online issue or situation.

- [Social Media as a Catalyst and Trigger for Youth Violence \(Catch 22\)](#)
- [Sexting Guidance for Schools](#)
- [NICE Guidance on Sexting](#)
- [NSPCC Guidance on Sexting](#)

- [DfE Guidance: Sharing nudes and semi-nudes: advice for education settings working with children and young people](#)
- [NSPCC Report Remove Tool](#) - The tool enables young people under the age of 18 to report a nude image or video of themselves which has appeared online. The Internet Watch Foundation will review these reports and work to remove any content which breaks the law.
- [UK Council for Internet Safety \(UKCIS\) Digital Passport](#) - a communication tool to support children and young people with care experience to talk with their carers about their online lives.
- [Talking to Your Child About Online Sexual Harassment \(Children's Commissioner\)](#)
- [The Risk of Online Sexual Abuse \(ROSA\) Project](#) - report on research with young people between the ages of 10-18 who had exhibited technology-assisted harmful sexual behaviour (TA-HSB)
- [Online Safety SEND Resources](#)
- [The Dark Web Explained \(for Professionals\)](#)
- [The Dark Web Explained \(for Parents and Carers\)](#)
- [Internet Matters](#) - advice for professionals, parents and young people on a wide range of digital safety issues including the digital passport.
- [Refuge and Risk: Life Online for Vulnerable Young People](#) - research into the risks and dangers for vulnerable young people online. The report discusses the types of risk they encounter which is exacerbated by the vulnerabilities.
- [FMSE Alert](#) - The National Crime Agency's CEOP Education have issued an alert to education settings across the UK in response to the threat of 'Sextortion' or online blackmail.
- [Help if you're worried about 'sextortion' or online blackmail](#)
- [Child sexual exploitation by organised networks Investigation Report](#)
- [Child exploitation disruption toolkit - GOV.UK](#)

9. Local Documents

- [Sextortion | Durham Constabulary](#)
- [Get Safe Online in Durham](#)
- [Being safe using your phone and social media](#) (Local Resources)