

## Safeguarding Policy

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### Introduction

Heal is an environmental charity that coordinates activities and events that involve both children and adults in the UK. Heal hosts a community of volunteers which is deliberately diverse in age, background and other characteristics. Heal runs both online and in person events and activities.

Heal believes that children and vulnerable adults should never experience abuse of any kind. We have a responsibility to promote the welfare of all children and vulnerable adults to keep them safe. We are committed to practice in a way that protects them.

### Definitions

- Safeguarding**  
 “Safeguarding means protecting a citizen’s health, wellbeing and human rights; enabling them to live free from harm, abuse and neglect.” – *NHS England*
- Vulnerable Adult**  
 “A vulnerable adult is someone aged 18 or above who may need community care services for reasons like mental health issues, disability, age or illness.” – *Mencap*
- Child**  
 “England, Wales, Northern Ireland and Scotland each have their own guidance setting out the duties and responsibilities of organizations to keep children safe, but they agree that a child is anyone who has not yet reached their 18th birthday.” – *NSPCC Safeguarding Information Service, August 2008*
- Child safeguarding**

“Child safeguarding is the protection of the health, well-being, and rights of children. For the purpose of this policy and procedures, the terms ‘child’ and ‘children’ refer to anyone up to the age of 18 years” – *Child Protection Act 1989*

- **Safeguarding adults**

“Safeguarding adults means protecting a person’s right to live in safety, free from abuse and neglect” – *Care Act 2014*

## **Purpose of this policy**

Our main policy objective is to ensure that we will promote safeguarding as the moral norm so that it becomes everybody's business, meaning that Heal staff, volunteers, trustees, partner organisations and individuals working with children, families and vulnerable adults understand their safeguarding responsibilities and their active role in working together to safeguard children and vulnerable adults from harm. For this policy to be effective it is essential that all Heal staff, volunteers, trustees, and partner organisations and individuals have an understanding of what safeguarding means, know that safeguarding is everyone’s responsibility, know the signs and symptoms of potential harm, how to access safeguarding information, advice and guidance, and are committed to making an informed contribution to safeguarding children and vulnerable adults.

This policy outlines the steps Heal is taking to ensure it operates in a way that actively prevents harm, harassment, bullying, abuse and neglect. It also sets out the procedures that enable Heal to be ready to respond safely and well if there is a problem. This policy applies to all organisations we work with, staff, including senior managers and the board of trustees, volunteers, students or anyone working on behalf of Heal Rewilding (“Heal”). The Heal Safeguarding Policy shall be made available to all partner organisations, volunteers, employers and employees of Heal.

## **Legal framework**

This policy has been drawn up on the basis of law and guidance that seeks to protect children and vulnerable adults, namely:

- Children Act 1989
- United Convention of the Rights of the Child 1991
- Data Protection Act 1998
- Public Interest Disclosure Act 1998
- No Secrets, Department of Health Guidance 2002
- Sexual Offences Act 2003
- Children Act 2004
- The Mental Capacity Act 2005
- Safeguarding of Vulnerable Groups Act 2006
- Equality Act 2010
- Protection of Freedoms Act 2012
- The Care Act 2014
- Working Together to Safeguard Children Guidance 2018
- Adult Safeguarding Network, NHS England
- Data Protection Act 2018

## **Guiding principles**

Underpinning the safeguarding of children and vulnerable adults, the safeguarding policy and procedures are guided by the following principles:

- The welfare of the child is paramount, as enshrined in the Children Act 2004.
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, additional needs, communication needs or other needs.
- Working in partnership with children, their parents, carers, communities and other agencies is essential in promoting child welfare.
- All children and adults, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse and a right to equal opportunities.
- People are supported and encouraged to make their own decisions and informed consent.

## **Safeguarding actions**

Heal will seek to keep children and vulnerable adults safe by:

- Valuing, listening to and respecting children and vulnerable adults.
- Adopting safeguarding practices through procedures and a code of conduct for staff and volunteers.
- Providing effective management for staff and volunteers through supervision, support and training.
- Recruiting staff and volunteers safely, ensuring all necessary checks are made.
- Sharing information about the protection of children and vulnerable adults and good practice with children, parents, vulnerable adults, carers, staff, and volunteers.
- Ensuring our Safeguarding Policy is accessible to partner organisations involved directly with our work.
- Ensuring that all concerns and allegations of abuse will be taken seriously by trustees, staff and volunteers and responded to appropriately, this may require involving parents, children, and/or carers, referral to children's social care services, the independent Local Authority Designated Officer (LADO) for all allegations against staff, trustees and volunteers, referral to Multi Agency Safeguarding Hubs (for vulnerable adults), and in emergencies, the Police.

## **Heal Safeguarding Procedure**

### **1. Designated Safeguarding Officers (DSOs)**

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Designated Safeguarding Officer (DSO) and Designated Trustee

Jan Stannard  
Acting CEO  
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#### **1.1 Purpose of the role**

- To take the lead in ensuring that appropriate arrangements for keeping children and vulnerable adults safe are in place at Heal Rewilding.
- To promote the safety and welfare of children and vulnerable adults involved in Heal's activities at all times.

#### **1.2 Duties and responsibilities**

1. Take a lead role in developing and reviewing Heal's safeguarding and child protection policies and procedures.
2. Take a lead role in implementing Heal's safeguarding and child protection policies and procedures: ensuring all safeguarding and child protection issues concerning children and vulnerable adults who take part in Heal's activities are responded to appropriately.
3. Make sure that everyone working or volunteering with or for vulnerable people at Heal, including the board of trustees understands the safeguarding and child protection policy and procedures and knows what to do if they have concerns about a child's welfare.
4. Make sure vulnerable people who are involved in activities at Heal and their parents know who they can talk to if they have a welfare concern and understand what action the organisation will take in response.
5. Receive and record information from anyone who has concerns about anyone who takes part in Heal's activities.
6. Take the lead on responding to information that may constitute a protection concern, including a concern that an adult involved with Heal may present a risk to children or vulnerable adult. This includes:
  - a. assessing and clarifying the information
  - b. making referrals to statutory organisations as appropriate
  - c. consulting with and informing the relevant members of the organisation's management
  - d. following the organisation's safeguarding policy and procedures.

7. Liaise with, pass on information to and receive information from statutory child protection agencies such as:
  - a. the local authority child protection services
  - b. the police.
  - c. This includes making formal referrals to agencies when necessary.
8. Consult the NSPCC Helpline when support is needed, by calling 0808 800 5000 or emailing [help@nspcc.org.uk](mailto:help@nspcc.org.uk).
9. Store and retain protection records according to legal requirements and the organisation's safeguarding and protection policy and procedures.
10. Work closely with the board of trustees to ensure they are kept up to date with safeguarding issues and are fully informed of any concerns about organisational safeguarding and child protection practice.
11. Report regularly to the board of trustees on issues relating to safeguarding and protection, to ensure that child protection is seen as an ongoing priority issue and that safeguarding, and child protection requirements are being followed at all levels of the organisation.
12. Be familiar with and work within inter-agency child protection procedures developed by the local child protection agencies.
13. Be familiar with issues relating to child protection and abuse and keep up to date with new developments in this area.
14. Attend regular training in issues relevant to child protection and share knowledge from that training with everyone who works or volunteers with or for children and vulnerable adults at Heal.
15. Attend team meetings, supervision sessions and management meetings as arranged.
16. Work flexibly as may be required and carry out any other reasonable duties.
17. Log all concerns or safeguarding questions raised by staff, volunteers and visitors in the password protected safeguarding log.

Appointment to this role is subject to satisfactory vetting and barring checks. Child protection leads must have received relevant safeguarding and child protection training that is specific to their role. This training should be refreshed regularly, and they should keep up to date with any changes in safeguarding and child protection legislation and guidance.

## **2. Recruitment and induction**

### **2.1.1 Staff recruitment**

All Heal staff are required to have an up-to-date relevant DBS check where their post is eligible for this (including a check against the relevant barred list if the post involves regulated activity). We use the Disclosure and Barring Service's Eligibility tool to determine the level of check required. More information can be found here: <https://www.gov.uk/government/collections/dbs-eligibility-guidance>.

All prospective Heal staff are subject to comprehensive interviews, must provide a CV, two references from previous employers and account for any gaps in employment.

All prospective Heal staff are required to share any record of cases of child abuse made against them at any time.

### **2.1.2 Staff training and induction**

As part of their induction, all Heal staff must:

- Read this safeguarding policy
- Read the safeguarding code
- Be confident in Heal's safeguarding procedures
- Know who the DSO is and have their contact details

Any staff members who work directly with children or vulnerable adults must:

- Complete two training courses on IHASCO: Safeguarding for children and safeguarding for vulnerable adults
- Obtain an Enhanced DBS check with barring if the role involves working with children at least once a week or more, or 4 days or more in any 30 day period, or overnight (2am to 6am) supervising, teaching, training, instructing, providing advice/guidance, transporting, or moderating a public electronic communication service to be used mainly by children
- Obtain an Enhanced DBS check without barring if the role involves carrying out the above activities with vulnerable groups (including adults at risk and/or children) on a regular basis but not frequently, intensively or overnight

## **2.2 Volunteer recruitment and induction**

Volunteers may work with children and vulnerable adults. In most cases, there will be a group leader/ teacher/ parent or guardian present who is responsible for the children/ vulnerable adult's wellbeing and safety. Volunteers will also be supervised by a staff or volunteer who is DBS checked.

Any volunteers who work directly with children or vulnerable adults must:

- Read this safeguarding policy
- Read the safeguarding code
- Be confident in Heal's safeguarding procedures
- Know who the DSO is and have their contact details

Any volunteers who work independently with children or vulnerable adults must follow the same procedures and training as staff who work directly with children or vulnerable adults.

Anyone who applies to volunteer with children and/or vulnerable adults at Heal is required to share any record of cases of child and/or vulnerable adult abuse made against them at any time.

## **2.3 Under-18 volunteering**

Heal welcomes volunteers under the age of 18. However, specific safeguarding measures must be implemented to ensure their safety and wellbeing.

- **Parental Consent and Risk Assessment**

All volunteers under the age of 18 must provide a signed parental or guardian consent form. Their participation must be explicitly included within the relevant Risk Assessment.

- **Volunteers Under the Age of 14**

Volunteers under the age of 14 must be accompanied by a parent or guardian. In exceptional circumstances, they may volunteer without a parent or guardian present, subject to a prior meeting with the young volunteer and the implementation of appropriate risk control measures.

- **Volunteers Aged 14 to 18**

Volunteers aged 14–18 must be supervised by a designated team manager who holds a valid DBS check. While continuous direct supervision may not be required in all cases, the DBS-checked manager must check in with the young volunteer at least every two to three hours.

- **Adult Presence**

Wherever possible, a minimum of two adults should be present when a young volunteer is engaged in activities. These adults may be staff members or volunteers and do not need to hold a DBS check, but they must have completed basic safeguarding training via IHASCO.

### **3. Code of Conduct**

The following are examples of good practice that all Heal staff, trustees and volunteers will be expected to follow at all times:

- Treat colleagues, children, vulnerable adults and staff from partner organisations with respect at all times
- Attend any meetings or calls at the required time as specified by the Heal's DSO
- Dress in appropriate clothing that isn't 'revealing'
- Report any inappropriate questioning or behaviour to Heal's DSO
- Maintain a safe and appropriate distance with children and vulnerable adults
- Build balanced relationships based on mutual trust, which empower children and vulnerable adults to share in the decision-making process
- Always work in an open environment, encouraging open communication with no secrets
- Be an excellent role model - this includes not smoking or drinking alcohol in the company of children or vulnerable adults
- Give enthusiastic and constructive feedback rather than negative criticism
- Ensure that a Heal staff member is present at all times when interacting in person with children and vulnerable adults
- Ensure that relationships formed with children and vulnerable adults while working with Heal remain professional at all times and are not considered personal relationships by Heal staff, volunteers or by the children/vulnerable adults

Practices that are to be avoided except in emergencies include:

- Spending time alone with a child or vulnerable adult away from others. Where this situation is unavoidable, this should be with the full knowledge and consent of Heal's supervising staff member and/or the child's parents or the vulnerable adult's carers.

Practices that are never to be sanctioned include:

- Swearing, aggressive behaviour or referencing material that is not age appropriate in conversation
- Engaging in rough, physical or sexually provocative games, including horseplay
- Sharing a room with a child or vulnerable adult
- Allowing or engaging in any form of inappropriate touching
- Allowing children to use inappropriate language unchallenged
- Making sexually suggestive comments to a child or vulnerable adult, even as a joke
- Reducing a child or vulnerable adult to tears as a form of control
- Allowing allegations made by a child or vulnerable adult to go unrecorded or not acted upon
- Doing things of a personal nature for children or vulnerable adults that they can do for themselves
- Inviting or allowing children or vulnerable adults to stay with you at your home
- Sharing photos of a child or vulnerable adult on your personal social media platform. Always retweet/share Heal's original content
- Sharing personal information with a child or vulnerable adult, or contacting a child or vulnerable adult online (see our E-Safety Policy)
- Taking photos of a child or vulnerable adult without their consent. Any consensual photos taken on a personal device should be deleted after they have been stored on the Heal SharePoint drive.
- Sharing personal or identifiable information about a child or vulnerable adult, such as their name, school or address, without permission

It is important to understand boundaries when working with children. Below are some examples of boundaries that should not be crossed:

- A student asks if they can add you on Instagram and you say yes (*you should never share your social media account with a child*)
- A student wants work experience in the industry in which your friend works so you offer to put them in touch (*the correct way would be to ask for their parent/guardian's contact details and then put your friend in touch with the parent/ guardian*)
- A student tells you they want to be a 'YouTube influencer' and you tell them that it's a 'silly' idea (*children's ideas and aspirations should not be dismissed and instead supported*)
- A student tells you they'd like a career in nursing, but his parents think it's a 'girl's job', you tell the student his parents are wrong (*it is important to never accidentally or purposefully damage any relationships a child holds for example with their parent, teacher or peers*)
- A student asks if you can keep a secret (*you should never develop secretive relationships/ conversations with a child*)

#### **4. E-safety**



Like most organisations, the internet and digital and mobile technologies play an important role in how we communicate and share information, and we encourage children we work with to use technologies appropriately to share their actions and stay connected.

Heal believes that digital technologies can offer children the opportunity to learn and develop, communicate and be creative; however, we understand that children do not always recognise the inherent dangers of the internet and often do not understand that online behaviour can have consequences. Therefore, Heal believes we have a responsibility to understand the dangers that children can face in the online world and ensure we have procedures in place to protect children from these dangers.

#### **4.1 E-safety risks**

Examples of E-safety risks include:

- Cyberbullying and online abuse
- Exposure of children to age-inappropriate, socially unacceptable or illegal materials
- The use of communication technologies to meet and groom children
- Exposure of children to inappropriate commercial advertising, gambling services and commercial and financial scams

#### **4.2 Actions to keep children safe online**

Heal will seek to keep children safe online by:

- Ensuring that we will, with our partner organisations and schools, promote e-safety of children as the norm so that it becomes everyone's business
- Educating all Heal staff and volunteers, partner organisations, children and parents/carers on their rights and responsibilities regarding the safe use of technology and ensuring they have access to this policy
- Where we encourage the use of technology, ensuring that all children, and where applicable, their parents/carers, are equipped with the knowledge and skillset to undertake this safely
- Working to empower all people we work with, including staff, volunteers, partner organisations and individuals, and children to use the internet safely as an essential tool for life-long learning
- Ensuring that staff, volunteers, partner organisations, children and parents/carers we work with know how to recognise, respond to and report e-safety concerns and access help
- Helping support parents/carers take a more supportive interest in their child's internet activity

All Heal staff should:

- Report any suspected misuse or incidents to the DSO
- Ensure that e-safety issues are considered and safety procedures embedded into materials produced by Heal for children

### 4.3 Cyber-bullying

Cyber-bullying may include:

- Abusive or threatening texts, emails or messages
  - Abusive comments made on social media
  - Spreading rumours online
  - Group bullying or exclusion online
  - Encouraging a child to self-harm
- Bullying can occur across various online platforms, including social networks, apps, when playing games and through emails.

We will encourage children to disclose concerns about cyber-bullying to staff, their parents, carers or guardians

### 4.4 Guidance for appropriate internet use

Email

- Heal staff should only use their business email account and always include their parent/guardian/teacher email address in all communications with children.
- Only staff with the appropriate level of DBS clearance are able to directly contact children and only with their permission.
- Only volunteers with the appropriate level of DBS clearance and permission from the DSO are able to directly contact children and only with their permission. The DSO and/or designated trustee must be copied into all email communications between volunteers and children.
- Communications between staff/volunteer and a child should be conducted in a professional tone.
- Heal staff/volunteer should never include a child's email address in emails with adults who are not Heal staff members and do not have the appropriate level of DBS clearance and should always 'blind copy' a child's email address when writing to groups of children.
- If a child is creating an email address specifically for Heal communications, they should be encouraged to create a non-identifiable email address.
- Emails between Heal staff and children should not be considered private and Heal reserves the right to monitor emails of staff.

Mobile devices

- Heal staff/volunteers should not use a personal phone number to contact children, parents, guardians or carers without permission from the DSO.
- Heal staff/volunteers should not use a personal mobile device to take or store photographs or videos of children for any purpose.

Social media

- Only the Heal Rewilding and Heal Somerset social media account should be used for communications between Heal staff and children or their parents, carers or guardians.
- Heal volunteers should not use social media to communicate with any children that are involved with Heal, or their parents, carers or guardians
- Heal staff/volunteers should not refer to children by their full name or give out any personal details or images which may identify them, their peers, siblings or location on social media sites or on our website. This includes a child's date of birth, address, phone number, email and school name.
- Heal staff/volunteers should not accept friend requests from children on their personal social networking sites and should report any concerning interactions to the DSO.
- Heal staff/volunteers should be aware of the age restriction of various social media networks and should not encourage children to join or use these networks unless they are the appropriate age

#### **4. Anti-bullying**

All reasonable steps should be taken to ensure that every child and vulnerable adult we work with feels safe, happy and supported and protected at all times. Bullying and cyberbullying incidents will always be taken seriously and treated as a safeguarding issue.

Heal will not tolerate unkind actions or remarks, or stand by when someone is being bullied or supporting bullying. It should be noted that abusive comments and interactions should not be passed off as mere 'banter'. Such comments referring to a person's race, religion, ethnicity, sexuality, culture, special educational needs are not acceptable and will be treated as bullying and therefore considered a safeguarding issue.

Any Heal staff member or volunteer who is made aware of or witnesses bullying behaviour should report the incident. Please also refer to our anti-bullying policy.

#### **5. Recognition of abuse**

Staff and volunteers should recognise the following as indicators of abuse:

##### **5.1. Physical abuse**

Physical abuse is when someone hurts or harms a child or vulnerable adult on purpose. Physical abuse includes assault, hitting, slapping, punching, pushing, kicking, misuse of medication, poisoning, drowning, restraint or inappropriate sanctions. It's important to remember that physical abuse is any way of intentionally causing physical harm to a child or vulnerable adult.

Physical indicators of physical abuse include:

- Unexplained bruising
- Bruises which reflect hand marks
- Burns or scalds
- Bite marks
- Broken bones
- Scarring

- Breathing problems from drowning, suffocation or poisoning
- The effects of poisoning, such as vomiting, drowsiness or seizures

Behavioural indicators of physical abuse include:

- Fear of parent or carer being contacted
- Aggression or anger
- Keeping body covered
- Flinching
- Depression
- Withdrawn behaviour

## **5.2. Sexual abuse**

Sexual abuse refers to actual and intended abuse. Sexual abuse can include rape, indecent exposure, sexual harassment, sexual teasing or innuendo, fondling, sexual photography, inappropriate sexual conversation or subjection to pornography or witnessing sexual acts, sexual assault, sexual acts to which the vulnerable adult has not consented or was pressured into consenting.

Physical indicators of sexual abuse include:

- Pain or itching in genital area
- STD
- Vaginal discharge
- Stomach pains
- Discomfort when walking or sitting
- Pregnancy

Behavioural indicators of sexual abuse include:

- Sudden changes in behaviour
- Advanced sexual knowledge
- Self-harm
- Keeping 'secrets'
- Fear of certain people
- Talking about abuse

## **5.3 Emotional abuse**

Emotional abuse is any type of abuse that involves the continual emotional mistreatment of a child or vulnerable adult. It's sometimes called psychological abuse. Emotional abuse can involve deliberately trying to scare, humiliate, isolate or ignore a child or vulnerable adult.

Emotional abuse is often a part of other kinds of abuse, which means it can be difficult to spot the signs or tell the difference, though it can also happen on its own.

Emotional abuse can include:

- Emotional ill treatment or manipulation
- Bullying

- Deliberate rejection
- Lack of love and affection
- Constantly shouting at a child or vulnerable adult
- Threats and taunts
- Constant over protection
- Failure to put a stop to racism

In a work and/or volunteering context, emotional abuse may refer to constant criticism, bullying and unrealistic pressure.

Physical indicators of emotional abuse can include:

- Developmental delay
- Sudden speech disorder

Behavioural indicators of emotional abuse can include:

- Neurotic or paranoid behaviours
- Unable to take part in activities
- Fear of making mistakes
- Self-harm or mutilation
- Fear of parents or carers being contacted

## **5.4 Neglect**

Neglect occurs when a person fails to meet a child or vulnerable adult's basic needs such as warm clothing and provision of food.

It can also include:

- A child or vulnerable adult left constantly alone or unsupervised
- A lack of love, attention and affection
- Failure to ensure a child or vulnerable adult's safety

Neglect of vulnerable adults may occur through a carer's lack of knowledge or awareness, or through a decision not to act when they know the adult in their care needs help. It may impair the health or well-being of a vulnerable adult.

Physical indicators of neglect include:

- Constant hunger
- Unkempt state
- Weight loss, underweight or overweight
- Inappropriate dress

Behavioural indicators of neglect include:

- Missing appointments at doctors and hospital

- Truancy or lateness at school (in the case of children)
- Tiredness or fatigue
- Few friends
- Regularly alone or unsupervised

## 5.5 Self-harm

Self-harm can take lots of physical forms, including cutting, burning, bruising, scratching, hair-pulling, poisoning and overdosing. There are many reasons why children and vulnerable adults try to hurt themselves. And once they start, it can become a compulsion. That's why it's so important to spot it as soon as possible and do everything you can to help.

Self-harm isn't usually a suicide attempt or a cry for attention. Instead, it's often a way for young people and vulnerable adults to release overwhelming emotions. It's a way of coping. So whatever the reason, it should be taken seriously.

Physical indicators of self-harm include:

- Cuts
- Bruises
- Burns
- Bald patches from pulling out hair

Behavioural indicators of self-harm include:

- Depression, tearfulness and low motivation
- Becoming withdrawn and isolated, for example wanting to be alone for long periods
- Unusual eating habits; sudden weight loss or gain
- Low self-esteem and self-blame
- Drinking or taking drugs
- Wearing clothing to conceal physical indicators of self-harm

## 5.6 Bullying and cyberbullying

Bullying is behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone. It can happen anywhere – at school, at home or online. It's usually repeated over a long period of time and can hurt a child or vulnerable adult both physically and emotionally. Bullying that happens online, using social networks, games and mobile phones, is often called cyberbullying.

Physical indicators of bullying include:

- Belongings getting "lost" or damaged
- Physical injuries such as unexplained bruises
- Problems with eating or sleeping
- Spending significantly more/less time online

Behavioural indicators of bullying include:

- Being afraid to go to school (children) or to socialise/take part in activities (vulnerable adults), being mysteriously 'ill' each morning, or skipping school/activities
- Not doing as well at school (children) or in activities (vulnerable adults)
- Being nervous, losing confidence, or becoming distressed and withdrawn
- Asking for, or stealing, money (to give to a bully)
- Bullying others

## **5.7 Online grooming**

Grooming is when someone builds an emotional connection with a child or vulnerable adult to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking.

Physical indicators of online grooming include:

- Unexplained physical injuries
- Changed physical appearance, for example loss of weight

Behavioural indicators of online grooming in children and vulnerable adults include:

- Being very secretive, including about what they are doing online
- Having older boyfriends or girlfriends
- Going to unusual places to meet friends
- Having new things such as clothes or mobile phones that they can't or won't explain
- Having access to drugs and alcohol

## **5.8 Child sexual exploitation**

Child sexual exploitation is a type of sexual abuse. Children in exploitative situations and relationships receive something such as gifts, money or affection as a result of performing sexual activities or others performing sexual activities on them. Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation.

Physical indicators of child sexual exploitation include:

- Unexplained physical injuries
- Changed physical appearance, for example weight loss

Behavioural indicators of child sexual exploitation include:

- Going missing from home, care or education
- Being involved in abusive relationships, intimidated and fearful of certain people or situations
- Hanging out with groups of older people, or antisocial groups, or with other vulnerable peers
- Associating with other young people involved in sexual exploitation
- Having older boyfriends or girlfriends
- Spending time at places of concern, such as hotels or known brothel

## **5.9 Criminal Sexual Exploitation**

Criminal exploitation is child abuse where children and young people are manipulated and coerced into committing crimes. It often involves trafficking, drug dealing and/or violent crime, generally as part of an organised crime network or gang into which the child or young person has been enlisted.

Physical indicators of criminal sexual exploitation include:

- Wearing clothes or accessories in gang colours or getting tattoos
- Self-harming and feeling emotionally unwell
- Unexplained injuries and refusing to seek medical help

Behavioural indicators of criminal sexual exploitation include:

- Frequently absent from and doing badly in school
- Going missing from home, staying out late and travelling for unexplained reasons
- In a relationship or hanging out with someone older than them
- Being angry, aggressive or violent
- Being isolated or withdrawn
- Having unexplained money and buying new things
- Carrying weapons or having a dangerous breed of dog
- Using new slang words
- Spending more time on social media and being secretive about time online
- Making more calls or sending more texts, possibly on a new phone or phones
- Committing petty crimes like shop lifting or vandalism
- Taking drugs and abusing alcohol

### **5.10 Female Genital Mutilation**

FGM is when a female's genitals are deliberately altered or removed for non-medical reasons. It's also known as 'female circumcision' or 'cutting' but has many other names. FGM is a criminal offence in the UK.

Indicators Female Genital Mutilation might happen:

- A relative or someone known as a 'cutter' visiting from abroad
- A special occasion or ceremony takes place where a girl 'becomes a woman' or is 'prepared for marriage'
- A female relative, like a mother, sister or aunt has undergone FGM
- A family arranges a long holiday overseas or visits a family abroad during the summer holidays
- A girl has an unexpected or long absence from school
- A girl struggles to keep up in school
- A girl runs away – or plans to run away - from home

Indicators Female Genital Mutilation might have taken place:

- Having difficulty walking, standing or sitting
- Spending longer in the bathroom or toilet



- Appearing quiet, anxious or depressed
- Acting differently after an absence from school or college
- Reluctance to go to the doctors or have routine medical examinations
- Asking for help – though they might not be explicit about the problem because they're scared or embarrassed

### **5.11 Forced marriage**

A forced marriage is where one or both people do not (or in cases of people with learning disabilities or reduced capacity, cannot) consent to the marriage as they are pressurised, or abuse is used, to force them to do so. It is recognised in the UK as a form of domestic or child abuse and a serious abuse of human rights.

### **5.12 Extremism and Radicalisation**

Extremism goes beyond terrorism and includes people who target the vulnerable – including the young – by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist.

Radicalisation is the process through which a person comes to support or be involved in extremist ideologies. It can result in a person becoming drawn into terrorism and is in itself a form of harm.

Indicators of extremism and radicalisation:

- Spend increasing amounts of time talking to people with extreme views (this includes online and offline communication)
- Change their style of dress or personal appearance
- Lose interest in friends and activities that are not associated with the extremist ideology, group or cause
- Have material or symbols associated with an extreme cause
- Try to recruit others to join the cause

## **6. Reporting Suspected Abuse**

If a disclosure has been made, or staff/volunteers have concerns about the welfare of a child or vulnerable adult, these steps must be followed:

- 1) Complete a Heal Rewilding Safeguarding Report Form as soon as possible:
  - a. The template for this form can be found at the end of this document
- 2) Submit the completed form:
  - a. Give the completed form to a Heal DSO and ensure the form is stored securely
- 3) Direct contact if unsure:

- a. If you do not feel that the concern warrants a report form, contact a Heal DSO directly
- 4) DSO action:
  - a. The DSO will then refer the information to social services (LADO) if necessary, who may subsequently involve the police, or directly to the police if appropriate
  - b. Parents or carers will be contacted as soon as possible, following advice from social services or the police

## **7. Managing Allegations and Concerns About Staff and Volunteers**

While the majority of paid staff and volunteers are dedicated to the wellbeing and care of children, there remains a risk of abuse. Despite the best intentions and efforts of organisations, there have been instances where children have been harmed in organisational settings.

There is no single trait that identifies someone as unsuitable for working with children. However, certain behaviours and attitudes can be assessed through a thorough, multi-layered selection process. Implementing vetting and barring procedures, safer recruitment practices, and value-based recruitment can help protect children and identify individuals who may be unsuitable for working with children and families.

Potential Signs for Concern:

- Staff or volunteers giving a child special attention or preferential treatment
- Spending excessive time alone with a child outside of scheduled activities
- Frequently being alone with a child in private or isolated areas
- Transporting a child to or from school without proper authorisation
- Establishing personal relationships with a child's parents to gain trust
- Acting as the child's confidant or 'listening ear'
- Giving small gifts, money, toys, cards, letters, phone top-ups, cigarettes, etc.
- Inappropriately communicating with a child through texts, phone calls, emails, or social networking sites
- Being overly affectionate with a child
- Flirtatious behaviour or making suggestive remarks or comments of a sexual nature around a child or young person
- Other children or young people making jokes or references about a member of staff or volunteer and a specific child

In all cases, any suspicion that a child or vulnerable adult has been abused by a Heal member of staff or volunteer should be reported to one of the DSOs. The DSO will take the necessary steps to ensure the safety of the child or vulnerable adult in question and any other children or vulnerable adults who may be at risk. If Heal staff are not available, allegations or disclosures can be reported to the police, social services, or the NSPCC helpline (see 'Useful Contacts' section below).

There are three potential elements in managing a safeguarding allegation at the outset:

1. A police investigation of a possible criminal offence

2. Enquiries and assessment by children's social care about whether a child is in need of protection or in need of services
3. Consideration by an employer or organisation of disciplinary action in respect of the individual

In cases where a child may have suffered significant harm, or there may be a criminal prosecution, children's social care services, or the police as appropriate, should consider what support the child or children involved may need.

If someone has a concern about an employee, volunteer, or contractor who may pose a risk of harm to children, they must:

- 1) Fill out a Heal Rewilding Safeguarding Report Form and report the matter to the DSO
- 2) Where there are concerns or allegations about the DSO, this should be referred to the other DSO, senior manager, or Head of HR
- 3) The DSO will need to determine if the allegation meets the criteria for a safeguarding allegation. If it does, they report it accordingly and seek advice for next steps
- 4) Keep records of all actions and decisions taken
- 5) All options to avoid suspension should be considered prior to taking that step, but it is the employer's decision
- 6) Where it is clear that an investigation by the police or children's social care services is unnecessary, the designated officer(s) should discuss the next steps with a senior manager (e.g., it might be an issue of poor practice which requires training and/or disciplinary action)
- 7) If the organisation is a charity, it must comply with the serious incident reporting procedures required by the Charity Commission, which would require notification at the start of managing the allegation and at the end

All concerns raised relating to the conduct of staff and volunteers in relation to safeguarding shall be considered as a matter of urgency, with protecting the interests of children and vulnerable adults being the paramount consideration. Heal reserves the right to make referrals to such organisations as it sees fit, at its absolute discretion. Any decisions about employment or status as a volunteer shall be made in a manner that is fair, lawful, and proportionate.

Heal has a duty of care to its employees and will ensure effective support is provided for anyone facing an allegation, including providing the employee with a named contact if they are suspended. It is essential that any allegation is dealt with promptly, in a fair and consistent manner that provides effective protection for the child, while also supporting the person who is the subject of the allegation.

Heal is also aware of the impacts of secondary trauma and will ensure effective support is provided for employees and volunteers who need it.

## **8. Information sharing**

Everyone, including children and vulnerable adults, has a right to confidentiality (see Article 8 of the European Convention on Human Rights). The individual level of a child's maturity will affect their ability to express a view or take decisions about issues of confidentiality and sharing information, but

Heal staff members and volunteers should always have regard to a child's right under the United Nations Convention on the Rights of the Child (UNCRC) to express their views freely in all matters affecting them, and to have those views given due weight in accordance with their age and maturity.

Sharing confidential information without consent will normally be justified in the public interest in the following circumstances:

- When there is evidence that the child is suffering or is at risk of suffering significant harm
- Where there is reasonable cause to believe that the child is suffering or is at risk of suffering significant harm
- To prevent serious crime, i.e. significant harm arising to children or adults, including through the prevention, detection and prosecution of serious crime

Vulnerable adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding these rights can be overridden in certain circumstances. Emergency or life-threatening situations may warrant the sharing of relevant information with the relevant emergency services without consent.

The law does not prevent the sharing of sensitive, personal information within organisations. If the information is confidential, but there is a safeguarding concern, sharing it may be justified.

The law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality – for example, where a serious crime may be prevented.

In order to protect vulnerable adults who lack capacity and enable them to take part, the following statutory principles set out in the Mental Capacity Act 2005 apply:

1. You must always assume a person has capacity unless it is proved otherwise
2. You must take all practicable steps to enable people to make their own decisions
3. You must not assume incapacity simply because someone makes an unwise decision
4. Always act, or decide, for a person without capacity in their best interests
5. Carefully consider actions to ensure the least restrictive option is taken

There are eight golden rules for information sharing as outlined below:

1. The protection of the child or vulnerable adult is the most important consideration in information sharing issues.
2. The Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
3. Be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so
4. Seek advice if in any doubt, without disclosing the identity of the person where possible.
5. Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case.
6. Consider safety and wellbeing: base your information sharing decisions on considerations of the safety and wellbeing of the person and others who may be affected by their actions.

7. Necessary, proportionate, relevant, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
8. Keep a record of your decision and the reasons for it - whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

### 8.1 Talking to Parents about Child Protection Concerns

Tips for staff:


- Consider whether speaking with parents/carers would put the child at greater risk, if not, share your concerns with them and:
- Use language that can be understood by everybody – avoid jargon
- Give precise descriptions and information rather than vague references
- Acknowledge feelings – imagine how you might feel in the other person’s situation
- Listen to what parents say and reflect back the words used
- Report observations accurately - do not interpret or make judgements. Stick with professional comments and avoid being personal or judgemental
- The purpose of speaking with parents is to ensure transparency and openness about your concerns and gather further information if appropriate, remember though it is not your job to investigate

### 9. Useful contacts for reporting

- **Local Authority’s Children’s Social Care (LADO)** phone number 0300 123 2224 or email: [childrens@somerset.gov.uk](mailto:childrens@somerset.gov.uk)
- **Childline** number 0800 1111 or website: <https://www.childline.org.uk/>
- **Hourglass** for support where there are concerns that an older person is at risk of, experiencing or recovering from any form of abuse or neglect, call the 24/7 helpline on 0808 808 8141 or email [helpline@wearehourglass.org](mailto:helpline@wearehourglass.org)
- **Child Exploitation Online Protection Command** reporting guide and form: <https://www.ceop.police.uk/Contact-Us/What-are-you-reporting/>
- **Early Help Assessment:** <https://www.somerset.gov.uk/children-families-and-education/the-local-offer/about-the-local-offer/early-help/early-help-assessment-eha/>
- **NSPCC helpline:** phone number: 0808 800 5000. Email: [help@NSPCC.org.uk](mailto:help@NSPCC.org.uk) Website: <https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/nspcc-helpline/>
- In an emergency or if you feel that a child or vulnerable adult is in immediate danger call **emergency services** on 999 or the **NSPCC Helpline** on 0808 800 5000

### 10. Review

We are committed to reviewing this policy and procedures annually.

<b>Policy</b>	Safeguarding Policy
<b>Recent review date</b>	21/11/2024
<b>Next review date</b>	21/11/2025
<b>Designated Safeguarding Officer</b>	Jan Stannard
<b>Signature</b>	

CEO signature



**Safeguarding Report Form Template – Please save separately and email a completed copy to SMT for saving in the password protected incident folder**

Heal Rewilding Safeguarding Report Form	
Reporting guidelines	
Do	Don't
Do listen to the child or vulnerable adult and write down everything they say	Don't make promises you can't keep
Do treat any allegations extremely seriously and act at all times towards the child or vulnerable adult as if you believe what they are saying	Don't interrogate the child or vulnerable adult or use leading questions - it is not your job to carry out an investigation, this will be up to the police and social services, who have experience in this
Do tell the child or vulnerable adult that they are right to tell you	Don't cast doubt on what the child or vulnerable adult has told you
Do reassure the child or vulnerable adult that	Don't interrupt or change the subject

they are not to blame	
Do be honest about your own position, who you have to tell and why	Don't say anything that makes the child or vulnerable adult feel responsible for the abuse
Do tell the child or vulnerable adult what you are doing and when, and keep them up to date with what is happening	React strongly
Do take further action as you may be the only person in a position to prevent future abuse	Tell the person to stop talking to fetch the DSO
Do tell the DSO immediately	Don't do nothing - make sure you tell the nominated DSO immediately - they will know how to follow this up and where to go for further advice
<b>Your name:</b>	
<b>Your position:</b>	
<b>This report relates to a:</b>	<input type="checkbox"/> Child
	<input type="checkbox"/> Vulnerable adult
<b>Child/vulnerable adult's name:</b>	
<b>Child/vulnerable adult's address:</b>	
<b>Name and address of parents and/or carers:</b>	
<b>Location of incident(s) e.g. online chat, online meeting, in-person meeting:</b>	
<b>Date and time of incident(s):</b>	
<b>Your observations (describe your overall impression):</b>	

<b>What the child/vulnerable adult said (be as precise as you can about the words used):</b>	
<b>What you said (be as precise as you can about the words used):</b> <i>Remember: do not lead the child/vulnerable adult - record actual details. Continue on separate sheet if necessary</i>	
<b>Action taken so far:</b>	
<b>Information shared (and with whom):</b>	
<b>Signature:</b>	
<b>Print name:</b>	
<b>Date:</b>	
<b>For Designated Safeguarding Officer Only</b>	
<b>Police contacted?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No



<b>If yes, name of name of person contacted:</b>	
<b>If yes, phone number of person contacted:</b>	
<b>Details of advice received from police:</b>	
<b>Local authority's social care contacted?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If yes, name of name of person contacted:</b>	
<b>If yes, phone number of person contacted:</b>	
<b>Details of advice received from local authority's social care</b>	
<b>Other organisation(s) contacted e.g. NSPCC?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If yes, name of name of person contacted:</b>	
<b>If yes, phone number of person contacted:</b>	
<b>Details of advice received from local authority's social care</b>	

<b>Additional notes</b>	
<b>Signature of DSO</b>	
<b>Date</b>	