Safeguarding Policy and Procedures –2019.20

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DOCUMENT CONTROL

Version	Name	Comment	Date
0.1	A Dann	New Issue	01/10/2017
0.2	A Dann	Safeguarding Children & Safeguarding vulnerable adults amalgamated into one policy/ procedure taking into full account legislative changes September 2018	01/10/2018
0.3	A Dann	Policy-Referring concerns outside of the organisation- LADO, Care leavers Appendix 3- signs and symptoms of FGM	01/04/19

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Part 1: Policy- Safeguarding Statement

B2W Group recognises our moral and statutory responsibility to safeguard and promote the welfare of children, young people and adults at risk of harm in our care. We endeavour to provide a safe and welcoming environment where learners are respected and valued. We are alert to the signs of abuse and neglect and the Safeguarding Policy and Procedures will incorporate a wide range of risks we need to safeguard against. This includes the prevention of radicalisation which is listed as a specific safeguarding issue and is addressed by the Government PREVENT strategy.

Terminology

Safeguarding and promoting the welfare of children is defined as: protecting children from maltreatment; preventing impairment of children's health or development; ensuring that children are growing up in circumstances constant with the provision of safe and effective care; and taking action to enable all children to have the best outcomes.

Abuse: could mean neglect, physical, emotional, sexual or a combination of these. Further explanations can be found in **(Appendix 1)**

A child: is defined as under the age of 18 years

- **For B2W this relates to our Apprenticeship learners that are aged between 16-18**

An Adult at Risk is defined as someone 18 years of age or over who is or may need to receive community care services by reason of mental health or other disability, age or illness and who may be unable to take care of themselves or protect themselves against significant harm or exploitation

- **For B2W this relates to any learner who meets the criteria above on either our Apprenticeship programmes and/or Adult provision (Online and Pre - Employment Training)**

Prevent: The Prevent Strategy has three main objectives:

1. responding to the ideological challenge of terrorism and the threat we face from those who promote it;
2. preventing people being drawn into terrorism and ensure they are given appropriate advice and support;
3. working with sectors and institutions where there are risks of radicalisation.

Learners: For the purpose of this policy and in the context of a post 16 environment, young people and adults at risk will be referred to as learners with appropriate adaptions applied to the procedures.

Staff*:* Applies to all those working for or on behalf of the B2W Group, full, part time or on a freelance basis in either a paid or voluntary capacity including, for example, members of the Governing Body, visitors, contractors and partners to whom B2W have subcontracting agreements with.

The Safeguarding Policy and Procedures apply to all learners and staff.

Introduction

This policy has been developed in accordance with the principles and guidance of the; Children Acts 1989 and 2004; Education Act 2002; Working Together to Safeguard Children 2018; Keeping Children Safe in Education 2018; What to do if a child is being abused 2015; Manchester Safeguarding Children Board and MSCB Child Protection Procedures; Safeguarding Vulnerable Groups Act 2006; The Care Act 2014;Manchester Adult Safeguarding Board; Counter-Terrorism and Security Act 2015; Prevent Duty Guidance 2015; Guidance for safer working practice for those working in education settings 2015.

B2W Group takes seriously its responsibility to safeguard and promote the welfare of learners and to work together with other agencies to ensure that adequate arrangements are in place within our B2W Group to identify, assess, and support learners who are suffering harm.

This policy has been written with reference to Manchester Safeguarding Board and the guidance contained in the following key documents:

DfE Revised Working together to safeguard children & Local Safeguarding-Transitional Arrangement (2018) www.gov.uk/working-together-to-safeguard-children–2

- sets out new requirements for improved partnerships to protect children.
- Children at risk of abuse or neglect will now be protected through improved partnerships between local police, councils and health services.
- Strengthened guidance sets new legal requirements for the three safeguarding partners, who will be required to make joint safeguarding decisions to meet the needs of local children and families.
- Senior police, council and health leaders will jointly be responsible for setting out local plans to keep children safe and will be accountable for how well agencies work together to protect children from abuse and neglect.
- A version of the guidance for young people and a separate version suitable for younger children are also available for practitioners to share.
- The **NSPCC** have produced a briefing highlighting the key changes in the new 2018 edition at www.nspcc.org.uk/revised-guidance-working-together-safeguard-children-2018/

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B2W Additional responsibilities- Working Closely with Local Authorities- Serious Incidents (2018)

B2W must work with Local Authorities in England must notify the national **Child Safeguarding Practice Review Panel** within 5 working days of becoming aware of a serious incident.

B2W Safeguarding team should report incidents where the local authority knows or suspects that a child has been abused or neglected and:

- the child dies (including suspected suicide) or is seriously harmed in the local authority's area;
- while normally resident in the local authority's area, the child dies or is seriously harmed outside England.
- Reporting process www.gov.uk/report-a-serious-child-safeguarding-incident

Policy Aims

- To demonstrate the B2W Group's commitment with regard to safeguarding to learners, parents and other partners.
- To provide an environment in which learners feel safe, secure, valued, respected and feel confident to, and know how to, approach adults if they are experiencing difficulties, believing they will be effectively listened to.
- To raise the awareness of all staff, of the need to safeguard learners and of their responsibilities in identifying and reporting possible cases of abuse.
- To provide a structured framework and procedure which will be followed by all staff in cases of suspected abuse ensuring consistent good practice across the B2W Group.
- To provide a systematic means of monitoring learners known, or thought to be at risk of harm, and ensure we, the B2W Group, contribute to assessments of need and support packages for those learners.
- To develop and promote effective working relationships with other agencies.
- To ensure that all staff working within the B2W Group, have been checked for their suitability, including, verification of their identity and qualifications, a satisfactory DBS check and a single central record is kept for audit.

Prevention/Protection

We recognise that the B2W Group plays a significant role in the prevention of harm to learners by providing learners with good lines of communication with trusted adults, supportive friends and an ethos of protection. The B2W Group community will therefore:

- Work to establish and maintain an ethos where learners feel secure, are encouraged to talk and are always listened to.

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- Include regular consultation with learners e.g. through learner surveys and Learner Voice.
- Ensure that learners know that there is an adult in the B2W Group whom they can approach if they are worried or in difficulty.
- Include safeguarding across the induction process and opportunities which equip learners with the skills they need to stay safe and know who to turn to for help.

Safe B2W Group, Safe Staff, Safe learners, Safe Employers We will ensure that:

- Everyone that comes into contact with B2W including learners, employers and other stakeholders, will be made aware of and supported to understand the safeguarding policy and procedures.
- Accessible formats will be made available on request to ensure this document is user friendly and accessible to all.
- Have information about the B2W Group's safeguarding arrangements, safeguarding policy and procedures, the role and names of the Designated Safeguarding Lead and Deputies,
- All staff and learners will receive Safeguarding, Prevent and Online Safety Training at induction, which is regularly updated and will receive updates on safeguarding, online safety, Prevent as required but at least annually.
- Employers will be invited to induction or sent the material to view.
- All staff and governing board including directors have regular safeguarding awareness training, updated by the Safeguarding Team as appropriate, to maintain their understanding of the signs and indicators of abuse.
- Employers are invited to attend safeguarding training either face to face or online.
- The Safeguarding Policy and Procedures, which includes the names of the Safeguarding Team, will be made available via the B2W Group website and will be clearly advertised to learners, staff and parents/carers
- The B2W Group adopts recruitment, selection and pre-employment vetting procedures in line with legislation and best practice available.
- The B2W Group holds a single central register for all staff and volunteers which lists the checks that have been carried out and the date they were completed.

Roles and Responsibilities

All B2W Group Staff:

- Understand that it everyone's responsibility to safeguard and promote the welfare of children and that they have a role to play in identifying concerns, sharing information and taking prompt action
- Be aware of indicators of abuse **(Appendix 1)**
- Know how to respond to a learner who discloses abuse and maintain appropriate confidentiality
- Will never promise a learner that they will not tell anyone about a report of abuse

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- Will refer any safeguarding concern to the Safeguarding Team or if necessary, where there is immediate risk to the learner, to the police or Social Services.
- Should expect to support the Safeguarding Team, social workers and other agencies following a referral
- Consider at all times the best interest of the learner
- Have a responsibility to provide a safe environment in which learners can learn
- Will be aware of systems within the B2W Group which support safeguarding, which is explained as part of staff induction and attend update training offered during CPD
- Have read Keeping Children safe in education part one and the B2W Group Safeguarding Policy and Procedures **(Appendix 2)**

Designated staff with responsibility for Safeguarding:

- The Designated Safeguarding Lead (DSL) is a senior member of staff from the B2W Group senior management team and takes lead responsibility for safeguarding.
- The B2W Group has two Deputy Designated Safeguarding Leads (DDSL's) who are trained to the same standard as the DSL. The DSL and DDSL's carries out those functions necessary to ensure the ongoing safety and protection of learners by ensuring that:
- The Safeguarding Policy and Procedures are implemented and followed by all staff
- They will be available (during B2W Group hours) for staff to discuss safeguarding concerns and will arrange adequate cover for out of hour activities

Designated Safeguarding Lead	Alison Dann Director of Quality and Performance	Telephone Number 0161 474 7603
Deputy Designated Safeguarding Lead 1	Gayle Dawkes Quality Co-ordinator	Telephone Number 0161 974 6517
Deputy Designated Safeguarding Lead 2	Ben Waite Quality/ HR Executive	Telephone Number 07970 756 220
24 hour Safeguarding email **safeguarding@b2wgroup.com**		

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Where there is a safeguarding concern- Roles and Responsibilities of DSL/ DDSL's

- The learners wishes and feelings will be taken into account, when determining what action to take and what services to provide.
- Any disclosures or suspicion of abuse are reported to the appropriate agency, including the police where a crime may have been committed
- They liaise with Local Authorities and work with other agencies and professionals in line with Working Together to Safeguard Children 2018.
- They, or another staff member, will attend case conferences, core groups, or other multiagency planning meetings, contribute to assessments, and provide a report where required.
- Has an understanding of locally agreed processes for providing early help and interventions and will support members of staff where early help is appropriate.
- There are detailed accurate records, either written or using appropriate online software, of all concerns about a learner, even if there is no need to make an immediate referral, which will be kept confidential, stored securely and are separate from learner records until a learner's 25th birthday.
- They organise Safeguarding and Prevent induction training, annual updates, keep a record of attendance and address any absences.
- Undergo training for the role which will be updated every two years and will keep up with any developments relevant to the role
- An annual report is provided to the board setting out how the B2W Group has discharged its duties.
- They have a working knowledge of the MSCB procedures and will if required annually submit the 'Audit of Statutory Duties and Associated Responsibilities' to the Education Safeguarding Team.

Referring Concerns Outside of the Organisation

The Designated Safeguarding Lead has a legal duty to

- Make a referral to Children's Social Care, in accordance with Manchester Safeguarding Boards procedures whenever there is reason to suspect that a child is suffering or likely to suffer significant harm. Where a professional disagreement occurs between workers when working with children and families, the MSCB Escalation Policy should be referred to.

Parents/carers should be informed that a referral to Children's Social Care is going to made, unless informing them may itself place the child, professionals or others at risk e.g.

- where sexual abuse is suspected or disclosed;
- where fabricated or induced illness is suspected;

- where there are fears for the safety of a child, or others when informing parents, carers or others;
- where it is not possible to contact immediately the parents/carers and prompt action is required to establish or ensure the child's safety.

Young people under 16 can only consent to their own treatment if they are assessed as being competent to consent under the **Gillick or Fraser guidelines (Appendix 2).** These guidelines can also be useful when working with 16- and 17-year olds.

- If young people under 18 years old are not competent to consent to their own treatment, consent should be sought from a person with "parental responsibility", although it is good practice to involve all those close to the young person in the decision-making process.
- Any decision not to inform parents/carers should be recorded on the Children's Social Care referral form with the reasons for such a decision and a copy should be kept in the safeguarding file for that learner, held by the Designated Safeguarding Lead/ Deputy dealing with the case.

Child External links

The Designated Safeguarding Lead / Deputy Designated Safeguarding Leads have a duty to seek advice from Children's Social Care if unsure as to whether a referral is appropriate.

- The welfare of the child/children concerned, including the welfare of any other children who may be at risk, must always take precedence over confidentiality. Therefore, these procedures must be followed irrespective of any request to maintain confidentiality.
- The Designated Safeguarding Lead will make every effort to attend any strategy or professionals' meetings to which the Provider is invited or may ask an appropriate colleague to attend on their behalf.
- The Designated Safeguarding Lead/ Deputy Designated Leads are responsible for ensuring that any actions agreed at such meetings are progressed and followed up.

Early Help Assessment (EHA)

- B2W will consider the need for EHA (early help assessment) when it is identified that there are low level concerns or emerging needs. This process provides a way of recording support and interventions that have been provided by B2W to the young person and also supports a referral for additional support that may be needed from more targeted services where a single agency has been unable to meet that need. An EHA can be arranged to ensure that a multi-agency action plan can be developed. **(appendix 3)** It is important that the child and parent's voice are captured as part of this assessment.

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Looked after Children

- Learners who are looked after children may have additional vulnerabilities and needs. It also needs to be acknowledged that learners may be a parent to a young child. In such cases B2W needs to consider safeguarding issues in relation to both the learner and their child as both can be considered a 'child in need' (threshold level 3b) or a child experiencing abuse (threshold level 4).
- B2W may have involvement with Manchester Gateway Services, Children Adults and Families Social Care Department. The Children's and Young Person Service (CYPS) should actively engage in any partnership work aiming to reduce the levels of presenting risk to the learner's child.
- The safeguarding team will take primary responsibility for looked after children by informing relevant trainers/ skills coaches where a learner is a looked after child. The safeguarding team will also engage as requested by local authorities to participate in personal education plans.

Adults External Links

- The Designated safeguarding lead has a duty to make a referral to Adult Social Care, in accordance with Greater Manchester Multi Agency Procedure for Protecting Adults at Risk, whenever there is reason to suspect that a vulnerable adult is suffering or likely to suffer significant harm.
- The Designated safeguarding lead will make every effort to attend any strategy or professionals' meetings to which B2W is invited or may ask an appropriate colleague to attend on their behalf, taking along all relevant details known to B2W.
- The Designated safeguarding lead is responsible for ensuring that any actions agreed at such meetings, as indicated on minutes which will be sent out by the chair, are progressed and followed up.
- If an adult with mental capacity discloses an allegation of abuse or neglect, they must be informed that confidentiality cannot be assured as the alleged abuser may be in a position of trust and maintaining confidentiality may place others at risk of abuse or neglect. If the incident solely relates to the individual and others are not at risk, the individual must give valid consent for the incident to be reported to the Local Authority.
- If an adult lacks mental capacity to understand the concerns raised a best interest decision (as per the Mental Capacity Act 2005) must be made to identify if the concern should be reported to the Local Authority.
- In cases where the allegedly abused person wishes to self-refer to Adult Social Care, the matter must still be referred to the Designated safeguarding lead, who should accordingly refer the matter to Social Care regardless of the individual's decision to self-refer.
- The Designated safeguarding lead has a duty to seek advice from Adult Social Care, if unsure as to whether a referral is appropriate.

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Criminal Convictions:

- The (D)DSL's will carry out risk assessments of learners who declare a prior criminal conviction as outlined in the Safeguarding Procedures. Having a conviction will not bar someone from studying, as this would be dependent upon the background to their offence(s) and if they pose a risk to children and vulnerable adults that access the site. If this is not declared, then potentially the B2W Group could withdraw any offer of enrolment.

The Governing Body

All members of the Governing Body understand and fulfil their responsibilities, namely, to ensure that:

- Reporting member and overall ownership of Safeguarding at B2W is Alison Dann, Director of Quality and Performance, 0161 474 7603.
- They comply with their duties under legislation and guidance as outlined in Keeping Children Safe in Education 2018, to ensure that policies, procedures and training are effective and comply with the law at all times.
- There is a, safeguarding policy, staff behaviour policy, recruitment and managing allegation policy and procedures. These are consistent with Manchester Safeguarding Children's and Adult Board and statutory requirements and are reviewed annually, the safeguarding policy is publicly available.
- The B2W Group operates a safer recruitment procedure that includes statutory checks on staff suitability to work with learners and disqualification by association regulations, by ensuring that there is at least one person on every recruitment panel that has completed safer recruitment training.
- The B2W Group has procedures for dealing with allegations of abuse against staff (including the Board of Directors) and against other children and that a referral is made to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns or would have if had they not resigned.
- All staff are provided with the safeguarding and staff behaviour policy and have read Keeping Children Safe in Education part 2 and annex A. **(Appendix 2)**
- All staff have safeguarding and PREVENT training updated as appropriate.
- Appropriate online filtering and monitoring systems are in place.
- Any weakness in Safeguarding are remedied immediately.
- The board should put into place appropriate responses to children missing from education.
- The Managing Director will ensure that the above policies and procedures, adopted by the board, particularly concerning referrals of suspected abuse and neglect, are followed by all staff.

Multi-agency working

- B2W Group will work in line with statutory guidance Working Together to Safeguard Children by working with social care, police, health and other services to promote the welfare of learners and protect them from harm. This includes providing a coordinated offer of early help, contributing to inter-agency plans and providing additional help to children subject to child protection plans. The B2W Group will allow access to social care workers from the local authority, where appropriate, to conduct, or if considering conducting a, section 17 or section 47 assessment.

Information sharing, GDPR and data protection

- GDPR/Data protection Act places duties on organisations and individuals to process information, fairly and lawfully, and to keep the information they hold safe and secure. However, this is not a barrier to sharing information, where to not do so, would result in a learner being placed at risk of harm.
- Information sharing is vital in identifying and tackling all forms of abuse
- All staff must be aware that they cannot promise to keep a learner's secrets which might compromise their safety or well-being
- Fears about sharing information cannot be allowed to stand in the way of promoting the welfare and protecting the safety of learners
- The B2W Group recognises that matters relating to safeguarding are personal and will respect confidentiality. The Safeguarding Team will only disclose information about a learner to other members of staff on a need to know basis.
- We will always undertake to share our intention to refer a learner to social care with their parents/carers unless to do so could put the learner at greater risk of harm.
- There are detailed accurate records, either written or using appropriate online software, of all concerns about a learner, even if there is no need to make an immediate referral, which will be kept confidential, stored securely and are separate from learner records until a learner's 25th birthday.

Related B2W Group Documents

This policy should not be read in isolation reference should be made to: • Anti- bullying Policy • Staff Behaviour Policy • E-Safety Policy • Health and Safety policy and procedures • Staff Disciplinary Policy • Learner Disciplinary Policy • Recruitment and selection Policy

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Part Two: Safeguarding Procedures

The aim of this procedure is to provide a robust framework, to ensure that all staff take appropriate action when they are worried that a learner is being abused. It is the responsibility of all staff working within the B2W Group, to record and refer safeguarding concerns, even if they are just suspicions or overheard rumours, but they should not discuss this with anyone other than a member of the Safeguarding Team.

All staff must be alert to, and aware of the signs of abuse, these may include changes in behaviour or a failure to perform or develop as expected. However, recognising abuse may be difficult and staff need to take notice not only of major incidents but also other signs which may cause concerns.

Further information about the four categories of abuse: physical, emotional, sexual and neglect can be found in **(Appendix 1)**.

Other signs may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is ill, or an accident has occurred. In these circumstances staff will try to give the learner the opportunity to talk. It is fine for staff to ask the learner if they are OK or if they can give help in any way

Allegations against staff / volunteers

If you have a safeguarding concern about a member of staff working with learners which indicates that they have:

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

It is essential that any allegation of abuse made against a member of staff or volunteer in an education setting is dealt with quickly, fairly and consistently to provide effective protection for the child and at the same time support the person subject to the allegation.

Safeguarding Procedures must be followed whenever an allegation of abuse is made, or concern is expressed regarding the behaviour towards a child or young person by a member of staff/volunteer. It is important for staff to note that under the Sexual Offences Act 2003 it is a criminal offence for a person over the age of 18 in a position of trust to enter into a sexual relationship with any learner under 18 years of age, even if the relationship is consensual, or in the case of a learner over 18 years where the learner is vulnerable.

The Local Authority Designated Officer (LADO) has responsibility for coordinating the process of investigations, providing advice and guidance to the employer, to ensure that cases are dealt with as quickly as possible and consistently with a fair and thorough process. The Director of Quality and Performance, or in their absence/where the allegation relates to

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them, the Directors, should consult the LADO directly. Manchester's LADO can be contacted by calling 0161 234 1214. Or by Email: quality.assurance@manchester.gcsx.gov.uk

The LADO will determine:

- whether it is an allegation or a complaint
- if there is a need to undertake preliminary enquiries and, if so, how the enquiries should be conducted or;
- if the allegation meets the threshold for a Strategy Meeting to be convened
- whether immediate action to protect a child is required.

In the instance of a safeguarding allegation against the Directors, the Designated safeguarding leads **must** liaise directly with the **LADO.**

- Preliminary enquiries should be made by the Designated safeguarding lead, after consultation with the **LADO**.
- Any initial enquiries should be minimal to establish the facts of the allegation if these were not established or were unclear at the time the original concern was raised, i.e. date, time, place of any alleged incident, any witnesses and other relevant factors.
- In-depth questioning of children or professionals/professional carers should not take place.
- Careful records should be made regarding any concerns or allegations and actions taken in response to these.
- When an allegation is made a number of inter-related elements will exist (Safeguarding, Criminal Investigation, Disciplinary, Complaints).
- Where a person has been dismissed as a result of the allegations, B2W is making a decision that they are unsuitable to continue in their role with the organisation.
- B2W must refer the person to the Disclosure and Barring Service. A copy of the referral will be forwarded to the LADO for their records and the confirmation letter issued by the DBS will also be shared with the LADO.
- Where the person resigns prior to the conclusion of the investigation, the LADO process will continue and a referral to the DBS will be made where appropriate by the B2W.
- The Local Authority, on behalf of the Local Safeguarding Children Board, will, therefore, have the key role in co-ordinating the relevant elements and ensuring that all subsequent stages of the Safeguarding Procedures are followed.
- If any individual is unhappy that their concerns are not being taken seriously within B2W, they should raise their concerns with the Designated Safeguarding Lead and consultation with the LADO must take place.

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Whistleblowing

The B2W Group operates in an ethical and committed way and has a Whistleblowing policy and procedure to provide employees with a means for raising genuine concerns. Staff can also use the NSPCC helpline number 0800 028 0285.

How to make a referral to the Safeguarding Team?

Use the dedicated email service**: *safeguarding@B2Wgroup.com*** which will automatically be sent to the Safeguarding Team, entitle the message **My Concern** outlining in the message the key points that a safeguarding concern has been raised

What should be referred to the Safeguarding Team?

(Flowchart and Forms Appendix 5)

Specified Safeguarding Issues include: (Appendix 1)

Child sexual exploitation (CSE)	Breast Ironing	Bullying/ Cyberbullying	Contextual Safeguarding
Child Criminal Exploitation: County Lines	Drugs	Domestic Violence	
Fabricated or induced illness	Faith abuse	Female genital mutilation (FGM) **(Appendix 3)**	
Forced marriage	Gender based violence	Honour based violence	
Homelessness	Initiation/ hazing type violence and rituals	Mental health	
Private fostering	Radicalisation	Sexting	
Teenage relationship abuse: peer on peer	Modern slavery and trafficking	Children with family members in prison	

From (Keeping Children safe in Education: Information for all school and B2W staff, DFE, September 2018, MSB 2019)

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Learners who are particularly Vulnerable

To ensure that all of our learners receive equal protection the safeguarding team will offer additional support and will give special consideration to those who are:

- Looked after children and previously looked after children
- On Child Protection Plans
- Children in Need
- Asylum seekers
- Young Carers
- Living away from home/private fostering
- Children in the court systems/YOT/ pending police investigations

If staff become aware of learners within these specific group, this information should be referred to the safeguarding team.

Safeguarding issues relating to individual learner needs/Wider safeguarding Concerns:

 *Staff should note that wider safeguarding concerns follow a different referral pathway and ensure they have read the related policies and procedures *

Individual need	Related Policy	Procedure/ who to contact
Bullying & Harassment	Anti-Bullying Policy	Refer to Head of Department (HoD), who will ensure that incidents are dealt with in a consistent manner. If behaviour is extreme HoD will report to safeguarding team for advice about whether external agencies need to be involved. Behaviour – negatively effecting the learning and wellbeing of others
Behaviour – negatively effecting	Disciplinary Policy	Will be dealt with by HOD under the B2W Group disciplinary policy

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the learning and wellbeing of others		If behaviour is extreme HOD will report to safeguarding team for advice about whether external agencies need to be involved
First Aid	Health and Safety Policy	Named first aid representatives are available in the policy if intervention is available-Advice and guidance can be provided by HR.
Mental Health	HR Policies https://www.guidelines.co.uk/summaries/mental-health	If there is a safeguarding concern, staff are to follow safeguarding procedure
Pregnancy	Pregnancy Procedures	HOD to complete risk assessment with learner and submit to HR Executive, Ben Waite
Violence/Aggressive Behaviour **Illegal/Dangerous Items. (e.g. drugs, including 'legal highs') or something dangerous (e.g. knife).**	Disciplinary Policy Learner code of conduct Staff behaviour policy	HOD to invoke disciplinary and suspend learner if necessary

What to do if a learner makes a disclosure

- A learner who makes a disclosure may have to tell their story on a number of occasions to the police and/or social workers. Therefore, it is vital that their first experience of talking to a trusted adult is a positive one. During their conversation with a learner staff will:
- Listen to what the learner has to say and allow them to speak freely
- Remain calm and not overact or act shocked or disgusted – the learner may stop talking if they feel they are upsetting the listener
- Reassure the learner that it is not their fault and they have done the right thing in telling someone
- Not be afraid of silences – staff must remember how difficult it is for the learner and allow them to talk
- Take what the learner is disclosing seriously
- Ask open questions and avoid leading questions
- Avoid jumping to conclusions, speculation or make accusations

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- Not automatically offer any physical touch as comfort. It may be anything but comforting to a learner who is being abused
- Avoid admonishing the learner for not disclosing sooner.
- Tell the learner what will happen next
- If the learner talks to any member of staff about any risks to their safety or wellbeing the staff member will let the learner know that they will have to pass the information on - staff are not allowed to keep secrets.

The member of staff should write up their conversation as soon as possible on the documents **(Appendix 5)**

Safeguarding Team

Designated Safeguarding Lead	Alison Dann Director of Quality and Performance	Telephone Number 0161 474 7603
Deputy Designated Safeguarding Lead 1	Gayle Dawkes Quality Coordinator	Telephone Number 0161 974 6517
Deputy Designated Safeguarding Lead 2	Ben Waite Quality/ HR Executive	Telephone Number 07970 756 220
24 hour Safeguarding email- safeguarding@b2wgroup.com **Report all concerns via email immediately**		

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Appendices

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Appendix 1- Key Definitions/ Descriptions

 Abuse and neglect

Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in, the family, an institutional or community setting, by those known to them or by a stranger including via the internet. They may be abused by an adult or adults or by another child or children. An abused child will often experience more than one type of abuse, as well as other difficulties in their lives.

Abuse and neglect can happen over a period of time but can also be a one-off event. Child abuse and neglect can have major- long-term impacts on all aspects of a child's health, development and well-being. There are four main categories of abuse and neglect:

Neglect:

Is a pattern of failing to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It is likely to result in the serious impairment of a child's health or development. Children who are neglected often suffer from other types of abuse. Neglect is not always easy to identify, and it is important that staff remain alert and not miss opportunities to take timely action.

Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol use. Indicators of neglect can include:

- Living in a home that is indisputably dirty or unsafe
- Learners left hungry or dirty
- Learners left without adequate clothing, e.g. not having a winter coat
- Living in dangerous conditions, i.e. around drugs, alcohol or violence
- Learners who are often angry, aggressive or self-harm
- Learners who fail to receive basic health care
- Parents who fail to seek medical treatment when their child is ill or injured

Physical abuse:

Is deliberately physically hurting a child. It might take a variety of forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical abuse can happen in any family and occur outside of the family environment. Children may be more at risk if their parents have problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Some of the following signs may be indicators of physical abuse:

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- Frequent injuries
- Unexplained or unusual fractures or broken bones
- Unexplained, bruises, cuts, burns, scalds, bite marks

Emotional abuse:

Is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate and not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. Emotional abuse may involve serious bullying - including online bullying through social networks, online games or mobile phones, by a child's peers. The following signs may be indicators of emotional abuse:

- Withdrawn, fearful, anxious about doing something wrong
- Parents or carers who withdraw attention from their child, giving the 'cold shoulder'
- Parents or carers blaming their problems on their child
- Parents or carers who humiliate their child, for example, name calling or making negative comparisons

Sexual abuse:

Is any sexual activity with a child. Many victims of sexual abuse do not recognise themselves as such and may not understand what is happening or understand it is wrong. Sexual abuse can have a long-term impact on mental health. Sexual abuse may include physical contact including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing or touching outside of clothing. It may include non-contact activities, such as involving children in the production of sexual images, being forced to look at or watch sexual images and activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The following signs may be indicators of sexual abuse:

- Knowledge or interest in sexual acts inappropriate to their age
- Use of sexual language or sexual knowledge that you wouldn't expect them to have
- Asking others to behave sexually or play sexual games
- Physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy

Adults at risk

An 'adult at risk' is defined by the department of health as a person aged 18 years or older who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to

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protect him or herself against significant harm or exploitation Characteristics/factors that might make someone more at risk of harm include:

- Not having mental capacity to make decisions about their own safety – including having fluctuating mental capacity associated with mental illness
- Communication difficulties
- Physical dependency – being dependent on others for personal care and activities of daily life
- Low self-esteem
- Experience of abuse
- Childhood experience of abuse
- Being cared for in a care setting where they are more or less dependent on others
- Not getting the right amount or the right kind of care that they need
- Living in a family with multiple problems
- Isolation and social exclusion
- Stigma and discrimination
- Lack of access to information and support
- Being the focus of anti-social behaviour

An adult at risk is someone who is unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation. One way to evaluate whether or not someone can take care of themselves is to assess their mental capacity to make decisions about their own safety. In the safeguarding context, mental capacity is the ability of a person to:

- Understand the implications of their situation and the risks to themselves
- Take action themselves to prevent abuse
- Participate to the fullest extent possible in decision making about interventions involving them, be they life-changing events or everyday matters

There are also a number of specific safeguarding concerns that we recognise our learners may experience, these include:

Children Missing Education

All staff should be aware that learners going missing, particularly repeatedly, can act as a vital warning sign of a range of safeguarding possibilities. They may include abuse and neglect, sexual or criminal exploitation. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of FGM or forced marriage.

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The B2W Group has an attendance policy and procedures. Skills coaches and trainers will intervene early, and the B2W Group will feedback data on withdrawn learners to the local authority.

Child Sexual Exploitation (CSE):

Is a form of sexual abuse were children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where the child may believe they are voluntary engaging with sexual activity with the person who is exploiting them.

Child sexual exploitation doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Some of the following signs may be indicators of sexual exploitation:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Older boyfriends or girlfriends
- Sexually transmitted infections or pregnancy
- Changes is emotional well-being
- Misusing drugs and alcohol
- Missing for periods of time or regularly returning home late
- Regularly missing education or don't take part in education

Criminal exploitation: County lines

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity: drug networks or gangs, groom and exploit children and young people to carry drugs and money from urban areas to suburban areas and rural areas, market and seaside towns.

Key to identifying potential involvement in county lines is missing episodes when the victim may have been trafficked for the purpose of transporting drugs. Like other forms of abuse county lines exploitation can:

- Affect young people (male or female) under and over the age of 18
- Still be exploitation even if the activity appears to be consensual
- Involve force, enticement-based methods of compliance and if often accompanied by violence or threats of violence
- Be perpetrated by individuals, groups, males, females, young people and adults

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- Be typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious, power imbalance can be due to other factors such as gender, cognitive ability, physical strengths, status and access to economic or other resources

Domestic Abuse

The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Exposure to domestic abuse and/or violence can have serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

Advice on identifying children who are affected by domestic abuse is available at: https://www.nspcc.org.uk, alcohol and drugs including legal highs. It is not uncommon for teenagers to try drugs or drink alcohol in their teenage years.

For some they may experiment and make the positive choice not to participate but, there are also those who become dependent on drugs or alcohol. It's important to know the difference between drug abuse and addiction. If you become concerned that a learner is harming themselves or at risk of harm through alcohol or substance misuse. This can include being parented or being cared for by an adult that abuses drugs or alcohol then refer to the Safeguarding Team.

Do NOT refer to safeguarding if the learner:

- Is under the influence of drugs or alcohol (follow disciplinary procedure).
- Head of Department should be informed and the learner asked to leave site.
- Requires medical attention - contact the B2W First Aid reps.
- Is in possession of drugs or alcohol - contact security (off site) and MD for Citibase- report all to associated Head of Department.

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Female Genital Mutilation FGM

Comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female organs. It is illegal in the UK and a form of child abuse with long-lasting consequences

FGM mandatory reporting duties the trainer/ skills coach/ member of staff linked to learner/ staff must personally report to the police cases where they discover that an act of FGM appears to have been carried out by calling 101. Unless the reporter (trainer/ skills coach/ member of staff linked to learner/ staff) has good not reason not to they should discuss such cases with the safeguarding team.

The duty does not apply in relation to at risk or suspected cases. Information on when and how to make a report can be found at:

https://www.gov.uk/government/publications/mandatory-reporting-of-female-genitalmutilation-procedural-information

Forced Marriage

A forced marriage is a marriage in which one entered into without full and free consent, of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into marriage. Threats can be physical or emotional and psychological. A lack of full consent can be where a person does not consent or where they cannot consent (if they have learning difficulties for example).

Some communities use religion and culture as way to coerce a person into marriage. B2W Group staff should never attempt to intervene directly, refer to the safeguarding team who will contact the **Forced Marriage Unit 200 7008 0151.**

So called 'Honour-based' Violence Honour based violence (HBV)

Encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including FGM, forced marriage, and practices such as breast ironing (The practice of breast ironing is seen as a protection to girls by making them seem 'child-like' for longer and reduce the likelihood of pregnancy and is usually carried out by the mother or grandmother with the father unaware). Abuse committed in the context of preserving 'honour' often involves a wider network of family or community pressure and can include multiple perpetrators. All forms of HBV are abuse (regardless of the motivation) and staff should refer their concerns to the safeguarding team who will activate the local safeguarding procedures, using national and local protocols for multi-agency liaison.

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Homelessness/Children missing from Home

Learners may run away from a problem, such as abuse or neglect at home, or to somewhere they want to be. They may have been coerced to run away be someone else. Whatever the reason, it is thought that approximately 25 per cent of children or young people that go missing are at risk of serious harm. There are particular concerns about the links between children running away and the risks of sexual exploitation.

Missing children may also be vulnerable to other forms of exploitation, violent crime, gang exploitation, or drug and alcohol misuse. Being homeless or being at risk of becoming homeless presents a real risk to a learner's welfare.

The Homeless Reduction Act 2017 places new duties on the Local Authority to provide those who are homeless or at risk of homelessness to have an assessment of their needs and circumstances, the development of A personalised housing plan, and work to help them retain their accommodation or find a new place to live. It should also be recognised that some 16 to 17-year olds could be living independently from their parents or carers, for example though their exclusion from the family home, and will require a different level of intervention and support.

Children's services will be the lead agency; the safeguarding team will ensure that appropriate referrals are made based of the learner's circumstances.

Private Fostering

Occurs when a child under the age of 16 (18 if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer. Such arrangements may come to the attention of staff.

The Safeguarding Team will need to be notified and will inform the local authority who will check if the arrangement is suitable and safe.

Online Safety

Our learners increasingly use electronic equipment on a daily basis to access the internet and share content and images via social media sites such as Facebook, Twitter, Instagram and Snap Chat. Unfortunately, some adults and other children use these technologies to harm others. The harm might range from sending hurtful or abusive texts or emails, to grooming and enticing learners to engage in sexual behaviour such as webcam photography or face-to-face meetings.

Learners may also be distressed or harmed by accessing inappropriate material such as pornographic websites or those which promote extremist behaviour, criminal activity, suicide

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or eating disorders. B2W has an online safety policy which explains how we try to keep learners safe in B2W Group and how we respond to online safety incidents.

Parental substance abuse, mental health and domestic abuse

The term 'toxic trio' has been used to describe the issues of domestic violence, mental ill-health and substance misuse which have been identified as common features of families where harm to women and young people has occurred. These issues are viewed as indicators of increased risk of harm.

Peer on Peer Abuse

In most instances, the conduct of learners towards each other will be covered by our behaviour policy. However, some allegations may be of such a serious nature that they may raise safeguarding concerns. Peer on peer abuse can take on many forms this can include:

- **Domestic Abuse** – an incident or pattern of actual or threatened acts of physical, sexual, financial and/or
- **Child Sexual Exploitation** – children under the age of 18 may be sexually abused in the context of exploitative relationships and situations by peers who are also under 18.
- **Harmful Sexual Behaviour** – Children and young people presenting with sexual behaviours that are outside of developmentally 'normative' parameters and harmful to themselves and others
- **Serious Youth Violence** – Any offence of the most serious violence or weapon enabled crime, where the victim is aged 1-19' i.e. murder, manslaughter, rape, wounding with intent and causing grievous bodily harm. 'Youth violence' is defined in the same way, but also includes assault with injury offences.
- **Sexual violence** can include rape, assault by penetration and sexual assault
- **Sexual Harassment** -unwanted conduct of a sexual nature

The term peer-on-peer abuse can refer to all of these definitions and a learner may experience one or multiple facets of abuse at any one time. Therefore, our response will cut across these definitions and capture the complex web of their experiences. There are also different gender issues that can be prevalent when dealing with peer on peer abuse (i.e. girls being sexually touched/assaulted, or boys being subjected to initiation/hazing type violence).

Any concerns, disclosures or allegations of peer on peer abuse in any form should be referred to the Safeguarding Team. If a learner's behaviour negatively impacts on the safety and welfare of other learners, then safeguards will be put in place to promote the well-being of the learners affected. Further actions could include a disciplinary hearing, robust risk

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assessments and targeted work for learners identified as being a potential risk to other learners and those identified as being at risk.

Preventing Radicalisation and Extremism

Extremism

Is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

Radicalisation

Refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. Learners may become susceptible to radicalisation through a range of social, personal and environmental factors – it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that all B2W Group staff are able to recognise those vulnerabilities.

 Indicators of vulnerabilities include:

- **Identity Crisis** – distant from cultural/religious heritage and experiences discomfort about their place in society.
- **Personal Crisis** – experiencing family tensions a sense of isolation; low self-esteem; may have discounted from friendship group and become involved with a new and different group of friends; may be searching for answers to identity, faith and belonging.

More critical risk factors could include:

- Being in contact with extremist recruiters;
- Accessing violent extremist websites, especially those with a social networking element
- Possessing or accessing violent extremist literature
- Using extremist narratives and a global ideology to explain personal disadvantage
- Justifying the use of violence to solve societal issues
- Joining or seeking to join extremist organisations
- Significant changes to appearance and / or behaviour
- Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis

The Prevent Duty (2015) under section 26 of the Counter – Terrorism and Security Act 2015 places a duty on education and other services to have due regard to the need to prevent

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people from being drawn into terrorism. The B2W Group Prevent co-ordinator is Alison Dann. **PREVENT concerns in the North West (Appendix)**

Youth produced sexual imagery (sexting)

The practice of children (under the age of 18) sharing images and videos via text message, email, social media or mobile messaging apps has become commonplace. However, this online technology has also given children the opportunity to produce and distribute sexual imagery in the form of photos and videos. Such imagery involving anyone under the age of 18 is illegal.

Youth produced sexual imagery refers to both images and videos where;

- A person under the age of 18 creates and shares sexual imagery of themselves with a peer under the age of 18
- A person under the age of 18 shares sexual imagery created by another person under the age of 18 with a peer under the age of 18 or an adult
- A person under the age of 18 is in possession of sexual imagery created by another person under the age of 18

Cases where sexual imagery of people under 18 has been shared by adults and where sexual imagery of a person of any age has been shared by an adult to a child is child sexual abuse and should be responded to accordingly.

If a member of staff becomes aware of an incident involving youth produced sexual imagery they should confiscate the device involved and set it to flight mode or, if this is not possible, turn it off. Staff should not view, copy or print the youth produced sexual imagery but refer to the Safeguarding Team.

The Safeguarding team will make an immediate referral at the initial review stage to Children's Social Care/Police if;

- The incident involves an adult
- There is good reason to believe that a young person has been coerced, blackmailed or groomed or if there are concerns about their capacity to consent (for example, owing to special education needs)
- What you know about the imagery suggests the content depicts sexual acts which are unusual for the child's development stage or are violent
- The imagery involves sexual acts
- The imagery involves anyone aged 12 or under
- There is reason to believe a child is at immediate risk of harm owing to the sharing of the imagery, for example the child is presenting as suicidal or self-harming.

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If none of the above apply then the safeguarding team will use their professional judgement to assess the risk to learners involved and may decide, to respond to the incident without escalation to Children's Social Care or the police.

Looked After Children (LAC), previously looked after children, care leavers and unaccompanied asylum seekers

The most common reason for children becoming looked after is a result of abuse and/or neglect. A previously looked after child potentially remains vulnerable. The safeguarding Team will record information in relation to a child's looked after status (whether they are looked after under voluntary arrangements or with consent from parents or on an interim of full care order). When dealing with looked after children and previously looked after, it is important that all agencies work together and prompt action is taken to safeguard these children. If staff become aware that a child becomes looked after it is important that they highlight this to the safeguarding team.

- All staff are responsible for ensuring that they attend PEP/Review meetings when requested by the Safeguarding Team. The expectation would be that if staff are unable to attend then HoD will attend in their place.

Young carers

 A carer provides unpaid care for a family member or friend who has a long-term physical or mental health problem, disability, or a drug or alcohol dependency. Some are the main carers in the household; others supplement the caring undertaken by other members of the family. The caring tasks can include:

- Domestic tasks (e.g. cooking, cleaning, shopping)
- Personal care (e.g. helping with mobility; washing; dressing; giving medicine)
- Emotional support & supervision (e.g. watching over someone; providing company and a 'listening ear')
- Sibling care: Looking after an ill or disabled sibling or a non-disabled sibling where an ill or disabled parent is unable to provide care
- Communication support (e.g., interpreting; answering phone or door)
- Financial management: (e.g. budgeting; paying bills)

Many young carers do not realise that they are carers until they perceive the impact of their responsibilities upon their lives. Even if that impact causes significant discomfort or problems, many young people with not identify themselves as carers. For this reason, Young Carers are designated by OFSTED as a vulnerable group of learners and they recommend their identification and support as best practice, making necessary adjustments where able. If you become aware of a learner with a caring responsibilities inform the Safeguarding Team who will offer ongoing mentoring and referral to external agencies if appropriate.

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Children with family members in prison

An estimated 200,000 children in England and Wales experience the imprisonment of a parent each year.[4] This is far greater than the number of Looked After Children. Using the national estimate and population figures for 0 – 19-year olds across Greater Manchester from Public Health England's 2014 Child Health Profile [5] it is possible to estimate that around 10,700 children across Greater Manchester are affected. [6] However in reality nobody really knows how many children are actually affected as this data is not routinely collected therefore there is no way of ensuring their needs are met.

[4] Ministry of Justice (2012) Prisoners' childhood and family backgrounds, London: Ministry of Justice

[5] Public Health England's 2014 Child Health Profile (Archived)
http://www.chimat.org.uk/resource/view.aspx?RID=101746&REGION=101629

[6] It must be noted that this estimate is potentially problematic. This figure does not consider any particular characteristics of the Greater Manchester area which may have implications for the number of people involved in the criminal justice system. If using this figure it is advisable to do so cautiously, and to present it with a statement about how it has been calculated and its limitations.

Impact of Parental Imprisonment on a Child

The impact of having a parent in prison is wide-ranging with potential implications for a child's residential and care arrangements, their mental, emotional and physical health, financial circumstances and educational achievement. For the most part these children remain unnoticed and unsupported despite research which increasingly shows the negative outcomes associated with having a parent in prison. For many families the stigma of having a family member in prison leads them to become isolated, afraid of the repercussions and reactions that may result from disclosure. There is a duty of care and a duty to provide these children with the same opportunities for success as everyone else. Laying a foundation of awareness amongst professionals as to the issues facing prisoners' families is the first step in building an 'offer' for families in this position and in creating a safe space in which families and children feel able to disclose their circumstances and seek support.

Research conducted by Barnardo's (2009) [7], the COPING project (2013) [8] and a number of other studies have identified a number of themes relevant to children and young people:

- **An Invisible Group** There is no standard collection of information about who these children are, who is looking after them, what their needs are and what support they

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require. It is estimated that 7% of children experience the imprisonment of their father during their school years;[9]

- **Experience Stigma** Parental imprisonment can lead to a child experiencing stigma or bullying. Stigma can be perceived or actual and can lead to a child becoming isolated and vulnerable;

- **Experience Disadvantage** A family member in prison increases the likelihood of the child experiencing poverty [10] as their family may become vulnerable to financial instability, debt and housing disruption. A child is likely to experience more stress at home and may experience unstable care arrangements;

- **Have Adverse Outcomes** Parental imprisonment might cause a range of adverse outcomes, including aggressive behaviour, depression, anxiety, sleeping problems, eating problems, running away and delinquency. Children may on some occasions be exposed to substance misuse, violence or other illegal activities by family members and associates;

- **Higher Risk of Mental Health Issues** Children of prisoners are twice as likely to suffer from mental health issues. [11] The sudden removal of a parent from the family can create feelings of separation and loss similar to bereavement that may affect the emotional health of the child. Children may be anxious that their other parent might also be taken away or about the welfare of their imprisoned family member. Anxiety may result from loss of contact with the imprisoned parent or, where contact remains, from missing school to comply with prison visiting hours;

- **Fail to achieve** Children with a parent in prison have been demonstrated to be at risk of poorer academic achievement and poorer attendance at school (including exclusion).[12] The average distance travelled by families to visit a male prison is 50 miles [13] so a visit can often require a whole day and may lead to unauthorised absences in their school record. Children may experience stigma, bullying and teasing as well as unwelcome attention from the media;

- **Are more likely to offend themselves** Children of prisoners have 3 times the risk of anti-social behaviour compared to their peers. [14] 65% of boys with a convicted parent go on to offend. [15]

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[7] Jane Glover, Every night you cry, Barnardos, 2009

[8] The COPING Project; Interventions and Mitigations to Strengthen Mental Health 2012

[9] Department for Education and Skills, Every Child Matters, London: The Stationery Office, 2003

[10] Rowntree Smith R, Grimshaw R, Romeo R, Knapp M, Poverty and disadvantage among prisoner's families, Joseph Rowntree Foundation, 2007

[11] SCIE (Social Care Institute for Excellence). Guide 22 Children of Prisoners; Maintaining Family Ties, 2008 www.scie.org.uk

[12] Naomi Clewett and Jane Glover, Supporting Prisoners' Families, Barnardo's, 2009

[13] Prison Reform Trust, 2013

[14] SCIE. Children's and families resource guide 11: Children of prisoners – maintaining family ties. 2008

[15] Joseph Murray, David P. Farrington, Ivana Sekol, Rikke F. Olsen, Effects of parental imprisonment on child antisocial behaviour and mental health: a systematic review, Campbell Systematic Reviews 2009:4, 2009

Contextual Safeguarding

Contextual Safeguarding has been developed by Carlene Firmin at the University of Bedfordshire over the past six years to inform policy and practice approaches to safeguarding adolescents. Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships.

Therefore, children's social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

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Appendix- 2 Gillick and Fraser guidelines

Gillick competency and Fraser guidelines refer to a legal case which looked specifically at whether doctors should be able to give contraceptive advice or treatment to under 16 year olds without parental consent. Since then, they have been more widely used to help assess whether a child has the maturity to make their own decisions and to understand the implications of those decisions.

Young people under 16 have a right to confidential medical advice and treatment if the provider assesses that the young person:

• Understands the advice and has the maturity to understand what is involved

• Their physical/mental health will suffer if they do not have treatment

• It is in their best interest to give such advice and treatment without parental consent

• Will continue to put themselves at risk of harm if they do not have advice and treatment

• Cannot be persuaded by the doctor or health professional to inform parental responsibility holders, nor allow the doctor to inform them.

The following should be used as guidance for practitioners in determining and recording their decision as to whether a young person is able to engage with services without the involvement and support from their parent(s) / carer(s).

Consider:

1. Has the young person explicitly requested that you do not tell their parents/carers about their involvement with services?

2. Have you done everything you can to support the young person to involve their parents/carers?

3. Have you documented clearly why the young person does not want you to inform their parents/carers?

4. Can the young person understand the advice and information they have been given and have sufficient maturity to understand what is involved in their service provision and what the implications may be? Can they comprehend and retain information relating to the care they are being offered? Can the young person communicate their reasons for any decisions made, are these decisions rational?

5. Are you confident that the young person is making the decision for them and not being coerced or influenced by another person?

6. Are you confident that you are safeguarding and promoting the welfare of the young person?

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7. Without the service being provided would the young person's physical or emotional health be likely to suffer?

8. Would the young persons' best interests require that support be provided without parental consent?

You should be able to answer YES to these questions to enable you to determine that you believe the young person is competent to make their own decisions about consenting to engage with services; limits to confidentiality; and receiving services without their parent's consent. You should record the details of your decision making.

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Appendix 3

EHA (Early Help Assessment)

All school and Learning Provider staff should be prepared to identify children who may benefit from early help. Early help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage years. In the first instance staff should discuss early help requirements with the designated safeguarding lead. Staff may be required to support other agencies and professionals in an early help assessment

This includes identifying emerging problems, liaising with the designated safeguarding officer, sharing information with other professionals to support early identification and assessment and, in some cases, acting as the lead professional in undertaking an early help assessment

If early help is appropriate the designated safeguarding lead should support the staff member in liaising with other agencies and setting up an inter-agency assessment as appropriate.

Early Help will only be completed with the child's and/or parents' permission. The Early Help team can be contacted at the safeguarding hub on Central – 0161 234 1975 to establish whether Early Help or CAF does not already exist. Early Help forms can be accessed via: The forms and will have to be completed as on-line documents.

If at any time during completing Early Help, staff are concerned a child has been harmed or abused or is at risk of being harmed or abused they must follow MSCB's procedures.

The 0-19 Startwell Team:

• Offer a targeted early intervention service to children, young people and families

• Work with families to reduce risk of statutory service involvement

• Undertake screening and assessment to identify, respond to and reduce risk factors.

• Provide systematic approach to offering interventions to children, young people and their families.

• Provide direct support on an individual or group basis to prevent escalation of need and improve outcomes.

• Provide support to manage risk.

 • Practical help to deal with problems.

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Appendix 4

Part 2- Annex A- DfE Keeping Children Safe in Education 2018

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Appendix 5- Signs and Symptoms of FGM

Advice on identifying Cases of Female Genital Mutilation

There are 4 types of procedure:

Type 1   Clitoridectomy – partial/total removal of clitoris

Type 2   Excision – partial/total removal of clitoris and labia minora

Type 3   Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4   All other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl – social acceptance for marriage

- Preserves a girl's virginity

- Part of being a woman / rite of passage

- Upholds family honour

- Cleanses and purifies the girl

- Gives a sense of belonging to the community

- Fulfils a religious requirement

- Perpetuates a custom/tradition

- Helps girls be clean / hygienic

- Is cosmetically desirable

- Mistakenly believed to make childbirth easier

Circumstances and occurrences that may point to FGM happening

- Young person talking about getting ready for a special ceremony

- Family taking a long trip abroad

- Young person's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)

- Knowledge that the young person's sibling has undergone FGM

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- Young person talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from learning and other activities

- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued

- Bladder or menstrual problems

- Finding it difficult to sit still and looking uncomfortable

- Complaining about pain between the legs

- Mentioning something somebody did to them that they are not allowed to talk about

- Secretive behaviour, including isolating themselves from the group

- Reluctance to take part in physical activity

- Repeated urinal tract infection

- Disclosure

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Appendix 6- Safeguarding Flowchart

What to do if you have concerns/suspicions of abuse

DISCLOSURE/SUSPICION

OF ABUSE

CONCERN FOR SAFETY

OR WELFARE

Ensure any discussions take place in a 'suitable' place.

Do not promise to keep the matter confidential, and adhere

to the procedures in the Safeguarding Policy-

Ensure any discussions take place in a 'suitable' place.

Do not promise to keep the matter confidential, and adhere to the procedures in the Safeguarding Policy –

Contact the Designated Safeguarding Lead Protection or available member of the Safeguarding Team. Urgently call using the details provided in the Safeguarding Policy/ Procedure- App/ email- My Concern

Where abuse is suspected or the concern becomes a disclosure

Where abuse is not evident but concerns remain, contact the Safeguarding Team for further advice via email/ App. Or follow wider Safeguarding issues guidance in Safeguarding Policy/ Procedure

A CP1 form should be completed and processed. SG team will provide this form.

The Designated Safeguarding Lead will take any necessary action.

You will be directed to the appropriate procedure to follow. This may include;
* completing a Cause for Concern form which will be sent to the Safeguarding Team.
* you may be referred to your line-manager, e.g. behavioural issues.
* or to the disciplinary procedure.

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SG Priority Action Form- Abuse/ Neglect

Safeguarding Priority Action Statement Form

Details of person the allegation/ issues were reported to/heard by

Staff Name	
Job title, Department/Site	
Telephone Number	
Date allegation /disclosure made :	

Details of person making the allegation/presenting issues

Name		
Learner		**AGE**
Department		
Course		

Details of person allegedly recipient of abuse if different from above

Name	
Learner	
Department	
Course	

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Details of any other persons present

Name	
Department	
Course	

Assigned to: Designated Safeguarding Lead (DSL)	
Date Assigned	

Place the incident occurred	
Nature of the alleged abuse **(see safeguarding policies for guidance.)**	**Physical** ☐ **Neglect** ☐ **Emotional** ☐ **Sexual** ☐ **Financial** ☐ **Institutional** ☐

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ALLEGATION/DISCLOSURE DETAILS

Continue Overleaf if necessary...

ANY RELEVANT ADDITIONAL INFORMATION

Signature of person making statement	

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Safeguarding – Cause for Concern

Confidential

Member of staff making referral
Position
Date of referral
Signature

Name of child/vulnerable adult:		
Gender	**Age**	
D.O.B	**Trainer/ Skills Coach/ Manager**	**Course & Level/ Staff Dept.**

Does the child/vulnerable adult know you will be speaking to the DSL ?
Yes _____   No_____

Summary of reason for concern

To whom have you spoken and what was said? (_State what the child/vulnerable adult said or what you observed that caused concern/suspicion. Include date and time of event. Where reporting what someone has said to you, try to use as close to their words as you can remember._) Continue on another sheet if required.

Have you taken any actions? – _please state here_

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Category of abuse causing concern.

Physical ___   Neglect ___   Emotional ___   Sexual ___   Financial ___   Institutional ___

Please return this form to the Safeguarding Team- safeguarding@b2wgroup.com

To be completed by a DSL	
Office Use Only	
Assigned to: (DSL)	
Date Assigned	
Date of initial meeting.	
Is this Safeguarding ?	**YES** ☐ **(transfer details to SG Priority form)** **NO …** ☐ **(please complete this form fully)**
Confirm Category of Abuse	**Physical** ☐ **Neglect** ☐ **Emotional** ☐ **Sexual** ☐ **Financial** ☐ **Institutional** ☐
Action	

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Appendix 7

Safeguarding Briefing Sheet

Whilst working in or on behalf of B2W Group, you have a duty of care towards our learners. This means that at all times you should act in a way that promotes their safety and welfare. If at any time you have a concern about a B2W learner, particularly if you think that they are at risk of abuse or neglect, it is your responsibility to share your concerns with the B2W Group Safeguarding Team.

This document is for:

- All staff with the inclusion of;
- Temporary and freelance staff
- Apprentices and their employers
- Partners

Everyone has a responsibility to: Recognise – Respond – Report – Record – Refer & PREVENT RECOGNISE What kind of abuse is there? Categories of Abuse (As defined by the Children Act 2004)

- Physical
- Emotional
- Sexual
- Neglect Other causes of concern
- Bullying
- Substance Abuse
- Sexual Exploitation
- Domestic Violence
- Radicalisation* (PREVENT)

RESPOND How to talk to a learner who is disclosing abuse

What you should do

- Listen non-judgmentally and stay calm
- Ask open-ended questions to clarify and re-assure, but do not investigate
- Do not put words in the learner's mouth
- Inform the learner that you must pass on the information but only to those who need to know

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What you should NOT do

- Do not promise confidentially, explain that you may need to discuss with someone else
- Do not investigate the matter yourself
- Do not convey a sense of judgement or shock
- Do not discuss with anyone other than B2W's Safeguarding Team
- Do not take matters into your own hands

REPORT If you suspect abuse

- Contact B2W Safeguarding Team:
- safeguarding@B2Wgroup.com
- RECORD Complete a written report for the Safeguarding Officer, recording the date, time, place and what was said
- REFER the Safeguarding Officer will contact the relevant agencies to ensure that support is given to the Learner. Support from the B2W Group's safeguarding team may be sufficient

PREVENT

PREVENT is a strand of the Government counter terrorism strategy – CONTEST. Everyone has a role to play in supporting the aim of CONTEST. You can do this by remaining vigilant and reporting any suspicious activity which can include someone who:

- Is behaving differently for no obvious reason
- Travels for long periods of time but is vague about where they are going
- Buying or storing large amounts of chemicals for no obvious reason
- Visits or sends out links to extremist internet sites
- Is recording and documenting information in a crowded location
- And includes activity at a property that doesn't fit day to day life

Apprentices

All leaners receive a safeguarding induction, details of support services offered and the Safeguarding Teams contact details. Skills coaches will check the apprentices understanding of all aspects of safeguarding and safe working practice at each review.

The B2W Group has arrangements in place to ensure that, prior to work related activity there are:

- Pre-placement Health and safety checks, including insurance checks
- Employers are made aware of relevant B2W Group policies

Off Site Venues

The B2W Group has arrangements in place to ensure that:

- Health and Safety checks are completed for all training facilities
- Offsite premises are risk assessed
- Insurance documents are checked

The Safeguarding Policy and Procedures apply to all learners on or offsite. Where employer related concerns are raised the Safeguarding Team will liaise with the Head of the Apprenticeship Team: Further Information:

• B2W Group Safeguarding policy and procedures can be found at www.B2Wgroup.com

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Appendix 8

Prevent Concerns in the region

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Greater Manchester's Counter Terrorism Threat Assessment 2018

Overview

- The UK terrorist threat comes from three main areas: **international terrorism; domestic extremism (motivated by a range of causes); and Northern Ireland related terrorism (NIRT)**. International terrorism (most often linked to Islamist extremism) remains the highest threat. The UK threat level from international terrorism is currently 'SEVERE' (an attack is highly likely). There are Greater Manchester examples that relate to a number of types of terrorism, and have been effected by the different threat areas.
- **By a number of measures, the terrorism threat is high and unlikely to subside in the near future**:
  - There have been five terrorist attacks since March 2017 (four Islamist extremist – including the Manchester Arena attack – and one domestic extremist).
  - This has resulted in what the former head of UK Counter Terrorism (CT) Policing described as a 'genuine step-change in momentum' and unprecedented levels of CT Policing activity.
  - Since March 2017 police and the security services have stopped 12 Islamist terrorist attack plots and four plots by far-right wing extremists.
  - In the year ending 31 March 2018, 441 people were arrested on suspicion of terrorism-related activity (a record high and an increase of 17% on the previous year).
  - 228 persons were in custody for terrorism-related offences as at 31 March 2018, a 27% increase from the previous year, and the highest number in custody since records began.
  - Nationally, there are around 600 active investigations into 3000 of the highest priority suspects.

International Terrorism (IT)

- **The main threat is from Islamist extremist groups such as Islamic State/Daesh and Al Qaida (AQ), and individuals inspired by them.** Within the UK, Islamist extremists make up the majority (82%) of the 228 people imprisoned for terrorism related offences.
- Despite the collapse of its caliphate, IS/Daesh as a terrorist group has not been militarily defeated. Its ideology and support base is resilient, and its intent to carry out attacks in the UK and the West is undiminished. IS/Daesh continues to encourage its supporters to carry out attacks by any means at their disposal. The threat from AQ has not gone away.
- There has been a trend towards low complexity attacks, often using bladed weapons and vehicles. This has made involvement in terrorism more straightforward and accessible. Firearms and explosive based attacks remain a possibility and terrorists have used, or explored the use of, non-conventional weapons (for example, poisons or chemical weapons). Terrorists will consider a variety of targets, including crowded public places, transport systems, national infrastructure, police and military personnel, and high profile or publicly significant sites.
- Travel to, or return from, areas of conflict such as Syria can increase the threat as extremists may have joined terrorist groups(1), become further radicalised and gained terrorism related skills. In some cases individuals who have seen their attempted travel thwarted have turned to UK attack planning.
- Support for IT can include activities of radicalisation, fundraising, training, and facilitating people or material. The online space is likely to remain crucial to the terrorist threat as it can be used for a wide variety of purposes, from social networking to encouragement or planning of attacks. (2) Messaging apps such as Telegram that provide strong encryption offer terrorists and other criminals a highly secure means of communication.

Domestic Extremism (DE)

- **Domestic extremists are motivated by a range of causes. Nationalist groups, extreme right- and left-wing extremists (XRW, XLW), animal rights extremists and other militant single-issue protesters may fall into this category.**
- The threat from violent extreme right wing extremism (XRW) appears to be increasing. The number of far-right terrorists imprisoned in Britain has more than tripled in a year. There were 29 people in custody at the end of March 2018, up from nine the previous year (3).
- Banned neo-Nazi group National Action (NA) remains the principal XRW threat but in the last year has suffered disruptions (including arrests and prosecutions). As of June 2018, six individuals from North West England are on trial for membership of NA, including one who has admitted intending to kill a MP as part of his 'white jihad'. A seventh individual (from Stockport) was arrested in January 2018, also for suspected membership of NA.

Northern Ireland Related Terrorism (NIRT)

- **The threat from NIRT is located mostly within Northern Ireland itself, where the threat level is SEVERE.** The main threat is from dissident republican (DR) groups that reject the peace process in Northern Ireland and view the armed struggle as legitimate. The current threat level for Northern Ireland-related terrorism on the Great Britain mainland is MODERATE (an attack is possible, but not likely).

Vulnerabilities in Prevent

Vulnerability has been placed at the centre of Prevent by the Home Office and Counter Terrorism Policing. A vulnerability can contribute, or indeed heighten, the threat and risk of an individual to radicalisation. Through analysis, the most common vulnerabilities in the North West Region during 2017/2018 are:

- *Violent Tendencies/Ideas and Behaviours*
- *Extremist Media*
- *Religious/Racial Hatred*
- *Mental Health*
- *Children in Care/Disrupted family*
- *Social Media*
- *Other Health Issues (i.e. disabilities, learning difficulties)*
- *Travel (both known and desired) to areas of conflict*
- *Criminal Background*
- *Extremist/radical friends*

Two or more of the above vulnerabilities are most commonly present in individual Prevent cases. This does not mean that anyone with, for example, a Mental Health concern, is automatically vulnerable to terrorism. A multi-agency approach is fundamental to the safeguarding of vulnerable people, with each partner agency holding responsibility to use their expertise to assist the individual and have due regard to the need to prevent people from being drawn into terrorism.

1 BBC News: 'Mohammed Abdallah jailed for joining Islamic State' (https://www.bbc.co.uk/news/uk-englan -manchester-42267455), 8 December 2017.
2 Manchester Evening News:' Jailed: The Salford man with 'abhorrent' views who encouraged terrorist attacks on Britain' (https://www.manchestereveningnews.co.uk/news/greater-manchester-news/mujahedeen-poisons-handbook-adam-wyatt-14548292), 19 April 2018; Manchester Evening News: 'Asylum seeker who posted videos supporting ISIS on Facebook is jailed' (https://www.manchestereveningnews.co.uk/news/greater-manchester-news/saer-hussein-shaker-facebook-isis-13660480), 22 September 2017.
3 The Independent: 'Number of far-right terrorists in UK prisons triples as arrests hit new record' (https://www.independent.co.uk/news/uk/crime/uk-prison-far-right-arrests-terrorists-conviction-national-action-a8398146.html), 14 June 2018.

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Appendix 5- PREVENT Concerns in North West
Greater Manchester Context (exerts, a shared future, Greater Manchester Combined Authority July 2018

[Preventing Hateful Extremism and Promoting Social Cohesion Repor.. update_July_31_2%20(1).pdf](#)

- Greater Manchester is the second largest metropolitan area in the UK, and is made up of 10 local authorities, each with their own diverse and unique population. Over 2.8 million people live in Greater Manchester, with the city-region growing by 7.7% between 2006 and 2016. The city-region has the largest travel-to-work area of any conurbation in the UK outside of London.
- The city-region is renowned for its cultural diversity and has a long history of migration from different parts of the UK, Europe and the rest of the world. Between 1991 and 2011, the non-UK born population accounted for nearly three-quarters of total growth across Greater Manchester and it is now estimated that 16% of Greater Manchester's residents are of black, Asian and minority ethnic origin, and 8% of residents do not have English as their first language (New Economy, 2017). There is a vast range of places of worship across the city-region welcoming people from a wide range of religious denominations including synagogues, mosques, Buddhist temples, mandirs and gudwaras. Many of the accolades associated with Greater Manchester were achieved by immigrants to the city region, for example Ernest Rutherford, Karl Marx, Andre Geim and Konstantin Novoselov, illustrating the benefits that immigration can have.

Preventing Hateful Extremism and Promoting Social Cohesion Commission July 2018)

In September 2017, the Mayor of Greater Manchester, Andy Burnham, set up an independent commission to consider how to tackle hateful extremism, social exclusion and radicalisation.

The primary areas of focus were:

- To consider how **Prevent** operates in Greater Manchester
- To look at the broader determinants of **social exclusion** and how we can work collectively to address them
- To investigate the merits of producing a Greater Manchester Charter – **establishing shared values and commitments** that will be the foundations upon which the Greater Manchester Strategy work is built (not just principles which are called into action when something goes wrong)
- To develop a distinctive community-led Greater Manchester approach to **challenging hateful radicalisation** of all kinds and from wherever it comes

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- The terrorist attack at the Manchester Arena on 22nd May 2017 claimed the lives of 22 people, with hundreds more experiencing physical and mental injuries; the incident will forever shape the history of Greater Manchester. However, the spirit, unity and resilience of the people of Greater Manchester shown in the aftermath of such tragedy has been widely commended.
- In spite of the overwhelming community spirit that followed the Manchester Arena attack, an increase in fear and intolerance was seen across the city-region. In the weeks following, Greater Manchester Police reported a 130% rise in hate crime, including a 500% rise in Islamophobic related hate crime.

Main Findings

- The social and economic inequalities that exist across Greater Manchester are likely to have a negative impact on social cohesion and may have an impact on risk of radicalisation.
- There is a distinct lack of mentors and positive role models to support and inspire young and vulnerable people.
- Research suggests that some people believe that Prevent disproportionately targets Muslim communities.
- Social media is used by all forms of extremists to spread propaganda, but it is not used effectively by public sector agencies to promote accurate information or positive new stories.
- There is a distinct lack of support for people who do not meet intervention thresholds. Underlying mental health and/or learning difficulties were a contributing factor to almost all of Channel referrals reviewed. Many people who were referred to Channel had been assessed by other services previously but did not meet the service threshold.

Hateful Extremism in Greater Manchester

- In recent history, Manchester has been the victim of three terrorist attacks. In 1992 and 1996, Greater Manchester experienced terrorist bombings by the IRA. The 1996 explosion in Manchester City Centre was targeted at the city's infrastructure and economy and caused immense amounts of damage. More than 200 people were injured in the attack but, miraculously, there were no fatalities. Last year Manchester was the victim of a suicide bomb attack at the Manchester Arena which claimed the lives of 22 innocent people, including seven children. Hundreds more experienced physical and mental injuries as a result.
- Horrific attacks, such as those experienced by Manchester, have significant impacts on local communities. In recent years, Greater Manchester and the UK has seen rises in community tensions as well as increases in intolerance and inequalities. This has been exacerbated by international conflicts, relatively frequent and visible terrorist activity (Islamist and extreme right inspired, amongst others), both in the UK and abroad, the emergence of extreme right wing groups staging high profile

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demonstrations and targeting particular communities, neighbourhoods and institutions to promote their agenda, as well as the increasingly visible and vocal demonstrations as part of a wider anti-Islam rhetoric. Extremists seek to exploit underlying community tensions and will continue to do so unless everyone takes pro-active measures to prevent them doing so and limiting the impact they are able to have.

- Fear of terrorism is a growing concern and was recently ranked by front line practitioners to be the fourth most prominent community safety concern of Greater Manchester residents (after substance misuse, youth related anti-social behaviour and people being intimidated, threatened, verbally abused or harassed) (Greater Manchester Combined Authority, 2017a). The current threat level for international terrorism in the UK is severe, meaning an attack is highly likely. In 2017, 412 arrests were made in Great Britain for terrorism related offences, a 58% increase in comparison to 2016 (Home Office, 2018a); this increase is not surprising given that the UK experienced five terrorist attacks in 2017. 135 (33%) of these arrests resulted in a charge, of which 110 (81%) were for a terrorism related offence. 86 trials were held in relation to terror offences, resulting in a 90% conviction rate (ibid.). At the end of 2017, there were 224 people in custody for terror related offences. Of those in custody 86% held Islamist extremist views, 9% held far right extremist views and 5% other ideologies (ibid.). Of those in custody for terror related offences, 74% had been convicted, the rest were on remand either awaiting trial or sentencing (ibid.). Currently, data on police and court activity for terrorism offence is only available at a national level, therefore the situation at a Greater Manchester level is not known.

- In the past five years there has been a consistent increase in the number of hate crimes reported to Greater Manchester Police. In the UK, a hate crime is defined as: "Any criminal offence which is perceived by the victim or any other person, to be motivated by a hostility or prejudice based on a person's race or perceived race; religion or perceived religion; sexual orientation or perceived sexual orientation; disability or perceived disability and any crime motivated by a hostility or prejudice against a person who is transgender or perceived to be transgender" (Crown Prosecution Service, 2017).

- Both in Greater Manchester and nationally, significant spikes in reports of hate crime were seen following the EU referendum result and in the immediate aftermath of the Manchester Arena Attack. Subsequent to both of these events, all types of hate crimes increased, however a substantial increase was seen in hate crimes relating to antiSemitism, Islamophobia and sexual orientation following the announcement to leave the EU. Significant increases in hate crimes relating to religion and, in particular Islamophobia and anti-Semitic related attacks were seen following the Manchester Arena Attack. These increases remained even when controlling for the seasonal effects of hate crime (hate crime usually peaks in June/July) (Devine, 2018).

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Prevent and Channel information/ signs

- One in 10 young people have a diagnosable mental health difficulty (Office of National Statistics, 2017a), with boys having a higher prevalence of mental health difficulties than girls (ibid.). Furthermore, suicide is currently the number one cause of death for young people aged 5-19 (Office of National Statistics, 2017b). Mental health difficulties combined with the digital revolution, has meant that access to information has never been easier, increasing young peoples' vulnerabilities to radicalisation. Opportunities for young people to discuss difficult topics and having safe places to go and socialise with peers are fundamental to the development and protection of young people. Youth services also provide further opportunities for parents to interact and socialise.
- Statistics of the number of people referred into the Prevent / Channel process are not available at a Greater Manchester (or lower) level, nor is information regarding the demographics or ideologies of referees. The most recent available data is at a North West level (Home Office, 2018c).
- In 2016/17, 6093 people were referred nationally to Prevent due to concerns that they were vulnerable to being drawn into terrorism. Of this, the North West region made up 12% (745) of the referrals. The majority (64%) of these referrals were made by either education services or the police.
- Of the 745 North West individuals referred, only 93 (12%) were discussed at a Channel panel; this is lower than the national average of 19%. From these 93 individuals, 22 (24%) received Channel support; this again is lower than the national average (29%). There is no available data to inform what happened at a regional level to the individuals who did not receive Channel support. Nationally, of those who have left the Channel process, 79% did so with no further terrorism-related concerns. The remaining 21% individuals withdrew from the Channel process, although in some cases support from other services may still be in place. Any terrorism risk that might be present is managed by the police.
- In 2016/17, a 21% decrease in Prevent referrals in the North West were made in comparison to 2015/16 (20% increase nationally). There was a slight (4%) annual increase in the number of individuals that were deemed suitable through a preliminary assessment to be discussed at a Channel Panel in the North West (compared to 7% increase nationally), however a significant decrease (51%) of individuals who received additional Channel support in the North West (compared to a 13% decrease nationally).