

Safeguarding children policy & child protection procedure

Control Page

Responsible Person	Children's Home Registered Manager
Approved By	Royal Deaf Education Trust Senior Leadership Team (SLT) and Children's Home Governing Body (CHGB)
Date of Last Approval	Approved at SLT 23/9/26 CHGB 30/6/26 and Sep 26 (by email/Governor Hub)
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Policy Applicable to	Rolle House children and staff

Date	Version	Person	Change / Action
November 2016	V1	James Heaver	First version.
August 2023	V2.1	Sarah Harding	Removed Tina Cureton acting Manager replaced with Sarah Harding Deputy Manager.
October 2023	V2.2	Sarah Harding	Removed Deputy Manager and replaced with Manager. Changed the language from staff to adult/adult team member.
February 2025	V3	Connie Webb	Annual updates following Working Together to Safeguard Children 2024 updates and other government guidance.
June 2026	V4	Connie Webb	Annual updates in line with government guidance and legislation. Added ligature procedure as Appendix 7. Changed language back from 'Adult' to staff.

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2. Keeping children safe at Rolle House

“We see safeguarding as the first responsibility of each member of staff at Rolle House. We aim to create unique and inspiring opportunities for our children to develop but will always do this within a safe framework with vetted staff team members, a good awareness of risks for children and different places, and strong relationships that help children develop the skills to keep themselves safe as young adults. This policy sets out how we achieve such high standards and is regularly reviewed by all staff at Rolle House.”

James Heaver – Registered Manager



Safeguarding Accountability Statement

Everyone is responsible for Safeguarding. While our designated safeguarding leads take lead responsibility, safeguarding forms a huge part of daily practice and it is vital for everyone to do their part. Leaders and managers are accountable for maintaining a strong, open and transparent safeguarding culture within our children's home, to ensure concerns are raised and children are kept safe. Rolle House will actively partake in Child Protection Conferences, Core Groups, Child in Need Meetings, Strategy Discussions and other safeguarding processes. Reports will be completed on time and information shared transparently and proportionately.

3. Leaders and Managers



James Heaver is the Registered Manager of Rolle House and the Designated Safeguarding Lead at the Deaf Academy. He is supervised by Sylvan Dewing, Responsible Individual and Principal. Please contact James with any concerns.

t: 07763 625110

e: jheaver@thedeafacademy.ac.uk



Connie Webb is the Manager at Rolle House. Please contact Connie if you have any concerns about children's care at Rolle House.

t: 07479 613035

e: cwebb@thedeafacademy.ac.uk



Sylvan Dewing is the Responsible Individual of Rolle House Children's Home and the Principal at the Deaf Academy. He has oversight over safeguarding at Rolle House. Please contact Sylvan if you are unable to address your concern with James or Connie.

t: 07814 680090

e: sdewing@thedeafacademy.ac.uk



Dame Angela Pedder is the Chair of Trustees for the Royal Deaf Education Trust

e: apedder@thedeafacademy.ac.uk

4. Our safeguarding team

James, Connie and Sylvan are our safeguarding leads, designated for Rolle House, and will ensure that any concern about a child is reported appropriately and investigated in line with agency

recommendations. Rolle House is also supported by the Safeguarding Team at the Deaf Academy (The Royal Deaf Education Trust):



James Heaver
Designated Safeguarding Lead
jheaver@thedeafacademy.ac.uk
07763 625110



Louise Hammacott
Deputy Designated Safeguarding Lead
lhammacott@thedeafacademy.ac.uk
07880 590246



Sylvan Dewing
Principal and Deputy Designated
Safeguarding Lead
sdewing@thedeafacademy.ac.uk
07814 680090



Bob Spencer
Trustee Lead responsible for
Safeguarding and LAC
bspencer@thedeafacademy.ac.uk
07730 926882

5.Complaints

As well as talking to or emailing the staff above, children or parents can make a complaint about something they have seen at Rolle House. Please see our complaints procedures for more details or contact Connie on 07479 613035. If your complaint is related to James or Connie please contact Sylvan.

6. Who this document applies to

This document applies to all children at Rolle House. Anyone meeting our children or visiting our home must abide by this policy. Everyone working at Rolle House as a trustee, member of the staff team or volunteer has a duty to safeguard and protect our children. They must read this policy and work to it. Visitors to Rolle House such as contractors and visitors must read the following statement:

Keeping Children Safe is our Top Concern.

If on your visit you have any worries at all, please raise them with a member of staff, or ask to speak to the manager.

If you are still worried or do not feel able to share your concerns with us you:

- Speak to Sylvan Dewing, the Responsible Individual, on 07814 680090
- Contact Devon Children's Services on 0345 1551071
- If you have a serious concern about the home that we cannot deal with for you, please contact Ofsted on 0300 1234666

7. Our Statement of Purpose

Rolle House is a trauma informed Children's Home in Exmouth. We provide a nurturing home for children aged between 5 and 17 who are Deaf and have complex needs. We are a team of hearing, and Deaf staff that prioritise a healthy safeguarding culture throughout the home providing trauma informed care in a friendly and safe, environment for children to grow up in.

Our main focus is on developing nurturing and trusting relationships with those in our care to support our children's social and emotional wellbeing and empower them. Our main goal is for the children within our care to lead a fulfilling life.

The training provided for the team is thorough and covers all aspects of residential care in a therapeutic setting. Training is ongoing and bespoke to the children within our care and their ever-changing needs. We have a positive relationship policy that focuses on building trusting safe relationships that are respectful and balanced with protection, guidance, care and fun.

We prioritise the safeguarding and protection of the children within our care and are continually developing our systems, processes and team awareness to keep up to date with the ever-changing needs of our children, and how the dangers presented to them change over time, especially online.

We also recognise there are many risks to our children living together in one home, such as isolation, bullying and abuse. We must also ensure our children are kept safe when out of the home and establish healthy safeguarding practices that we can remain confident in when they are spending time in the community. The home places safeguarding at the core of its care planning to ensure the safety of the children living within it. The home has an impact risk assessment and a location risk assessment which further ensures the effective reduction of safeguarding risks to the children living here.

This policy helps us keep those important safeguarding practices in mind, and reminds us to pay attention to what we are told and what we see, and enables everyone, children, parents, staff and visitors, to know what to do if they are worried about a child in our home. It also reminds the staff team of our duties to children and how our practices ensure we are following the Children's Homes Regulations and the protection of children standard (Appendix 5).

This policy outlines the standards we keep within the home to ensure all the staff team:

- Share safeguarding information promptly
- Attend strategy meetings, safeguarding conferences and core groups where required
- Contribute to reporting
- Exercise professional curiosity
- Escalate concerns where delays may put a child at risk
- Respect professional challenge

8. Voice of the Child

Rolle House recognises that effective safeguarding begins by understanding the child's lived experience. Children who live at Rolle House will be supported to express their views, wishes, feelings and experiences through accessible communication, tailored to BSL, English, or meeting total communication needs unique to each child; this may also require the use of interpreters, relay interpreters, advocates or communication aids or devices. Staff at Rolle House will actively seek, record and consider children's views and share this on our internal monitoring system as 'Significant Discussions' so that the child's voice remains centre of practice at Rolle House.

9. Our Safeguarding Principles

1. We **always** act in the best interests of each child and prioritise their safety and emotional security.
2. We **listen** to children, parents or professionals and always take concerns seriously.
3. We acknowledge there are many **risks** to the children in our care. Without proper care and vigilance, abuse or neglect of children could happen, at Rolle House, outside of Rolle House and online. We talk about these risks with the staff team, parents and placing authorities, and together we plan carefully to keep them safe.
4. We **must** act if we are worried about a child and keep acting until they believe the child is safe.
5. We are **open** in our decisions and let parents and placing authorities know about concerns.
6. We will make it easy to raise a concern, and **anyone** raising concerns will be kept safe.
7. We use professional curiosity and **challenge** things that don't feel right.
8. We listen to and understand the lived experience of children.
9. We work in partnership with families, placing authorities and agencies to achieve the **best outcomes for children**.
10. We endeavour to provide early help and identify support needs before concerns escalate and cause harm.

Professional curiosity is the capacity and responsibility to explore and understand what is happening in a child's life, rather than accepting information at face value. Staff will respectfully question, verify information and report and record concerns where there are inconsistencies or indications of harm. Staff will ensure they remain professionally sceptical where explanations do not fully account for a child's presentation or behaviour.

Rolle House promotes an active safeguarding culture where staff are expected to:

- Notice changes in behaviour, communication, routines or emotional presentation
- Ask respectful but curious questions
- Challenge explanations that minimise risk
- Escalate concerns promptly when responses do not reduce risk

Safeguarding is not viewed as a one-off action but as a continuing responsibility to keep a child safe.

“Staying aware”

10. Being Deaf aware and valuing diversity

This policy and its associated procedures apply to all children regardless of gender, ethnicity, disability, sexuality, or religion. All our children, and many parents and staff members, are Deaf and have an equal right to be protected and responsibility to act if they are worried. We will ensure we do not put barriers in their way and will support children, staff, or parents to access interpreters whenever anyone needs to share a concern about a child. We ensure anti-discriminatory safeguarding practice and understand the intersectionality of race, gender and disability and the barriers that can face children.

If staff members or volunteers behave in a way that is discriminatory, we will take action to rectify things and consider whether this is a breach of our Code of Conduct.

11. The Law

It is important that every agency knows what to do if worried about a child. We follow national guidance so we are clear what to expect and can explain this to children and families. Where there are specific risks, we will access other tailored guidance.

Safeguarding and promoting the welfare of children is defined as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework
 - Outcome 1: Children, young people and families stay together and get the help they need
 - Outcome 2: Children and young people are safe in and outside their homes
 - Outcome 3: Children and young people are supported by their family network
 - Outcome 4: Children in care and care leavers have stable, loving homes

12. Safeguarding in Devon

We work within our local Safeguarding Children Partnership (Devon SCP) which has specific guidance and procedures on:

- Achieving Best Evidence
- Adolescent Safety Framework
- Assessment and support protocol
- Bruising to non-mobile babies
- Child Exploitation Strategy
- Child Sexual Abuse Strategy
- CSPR tools and pathway
- County lines
- Devon step down Protocol (Early intervention and support)
- Early Help
- Escalation
- Gillick and Fraser guidance
- Harmful Sexual Behaviour
- Information Sharing
- LADO service
- Levels of need (threshold tool for support assessing when a MASH referral is required)
- Missing Children
- NICA Guidelines – Child Maltreatment
- Philomena Protocols

Devon has a **Multi-Agency Safeguarding Hub (MASH)**. Where there is cause for concern about a child at Rolle House, we will contact the MASH using their enquiry form or, in urgent situations, by phone on **0345 155 1071** (their answerphone has the out of hours number).

If a child is at immediate risk, we will contact the police on 999 or 999 BSL.

Most of our children are placed by local authorities outside of Devon. If we have concerns about children at home, we contact the child's social worker or make a referral to their social care team. When an incident happens in our home, we ensure transparency by informing the social worker and other relevant parties, including parents or carers where appropriate.

13. Identifying abuse, neglect or exploitation

Abuse or neglect of a child can happen by someone inflicting harm or failing to act to prevent harm. Children may be abused in a family, or in an institutional or community setting, by those known to them or, more rarely, by others unknown to them (for example via the internet). They may be abused by an adult or adults, or another child or children.

Disabled children are at increased risk of abuse and face increased barriers to reporting. We know from research that Deaf children face a significantly higher risk of abuse than their hearing peers, at

rates of two to three times greater. Residential settings compound that risk through increased isolation and communication barriers. The Rolle House team ensure our children have accessible communication and advocacy support to reduce communication barriers. Staff must not assume that indicators of abuse relate solely to disability, ensuring safeguarding concerns are not dismissed.

We ensure that our children are supported by a staff team who can communicate with them and receive the best possible training in being able to support them. This includes training, like ensuring our team understand child and adolescent development, managing boundaries and what to do if they are worried that a child has knowledge beyond their developmental stage/age. We also work with our children to ensure they develop positive, enjoyable, and respectful relationships as they grow up. Where there are serious concerns, we always involve others such as parents, health professionals, police, or social workers, where we deem this appropriate. We believe that successful outcomes for children depend on strong and effective partnership working between parents/carers and all practitioners working with them.

We know that wherever possible, best outcomes are achieved for children by developing positive, respectful and trusting relationships with parents, carers and family workers. Staff will work collaboratively with families wherever possible, identifying concerns and risks, while also trying to support and involve family members in the care of their child, to allow for safe and meaningful relationships to continue while children are in our care.

The staff team build strong relationships with the children to understand them well. This ensures the team can notice changes and raise concerns.

Anyone working with children should see and speak to the child, listen to what they say, observe their behaviour, take their views seriously, and work with them and their families and the people who know them well when deciding how best to support their needs. Practitioners should also be aware that children may find it difficult to always speak about what they need, what is happening to them or what has happened to them. Legal duties under the Equality Act 2010 must be complied with, including putting special provisions in place to support dialogue with children who may not be able to convey their wishes and feelings as they may want to – this includes the children within our care who use BSL as their primary language, and those who require Relay support for full comprehension.

Staff members, volunteers, trustees and anyone else coming into contact with our children have a responsibility to act if they recognise potential indicators of abuse. Children can be abused, neglected or exploited in a range of situations, at home, outside the home and online. Staff members should be familiar with the four main categories of abuse and what to look for (Neglect, Physical Abuse, Emotional Abuse and Sexual Abuse). See appendix 3 for guidance in relation to categories and indicators of abuse, neglect or exploitation.

14. How should I respond?

If a child raises a concern...

Always take the child seriously, listen carefully and report this to the Registered Manager or Safeguarding Team.

Do

Listen and accept

Try not to interrupt

Reassure they have done the right thing by telling you.

Explain what you are going to do next

Make accurate notes using all the child's words as soon as possible

Inform your manager

Do not

Promise confidentiality

Investigate

Use leading questions

Ask the child to repeat the disclosure

Communicate with the alleged abuser

In some cases, to keep children safe from harm, it may be necessary to conduct a bedroom search.

This should only be completed with the Registered Manager's consent.

Usually, rooms should only be searched if the child has been informed or asked for their permission.

Immediate searching may be necessary where there are reasonable grounds for believing that there is a risk to the child's or another person's safety or well-being.

15. Recognise, Report, Record

Safeguarding our young people

Worried that a child/young person is at risk of harm or abuse?



*If the concern relates to a staff member report to the Registered Manager/Responsible Individual. If it relates to the Registered Manager/Responsible Individual report to the Principal or Chair of Trustees

Information about low-level concerns, allegations against staff and whistleblowing can be found in section 26 and 27.

16. How do I tell if a child is at risk of abuse, neglect or exploitation?

It's difficult to be certain, but if you have a reason to worry then that's enough for us to talk more about the child, or to involve other agencies. Use the definitions of likelihood and impact below to support your assessment of risk.

Staff have a responsibility to identify emerging needs or concerns at the earliest opportunity. Concerns that do not meet a child protection threshold may still require an Early Help referral – the contact information for the Devon Early Help team is included in Appendix 1. Rolle House will contribute to meetings, planning and assessments to prevent concerns from escalating, and harm being caused to the child. Staff can raise concerns during supervisions and with their line managers at any time.

17. Risk assessment grid

		Impact			
		Low	Concern	Harmful	Significant harm
Likelihood	Very unlikely				
	Possible				
	Suspected				
	Likely				
	Almost certain				
		LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4

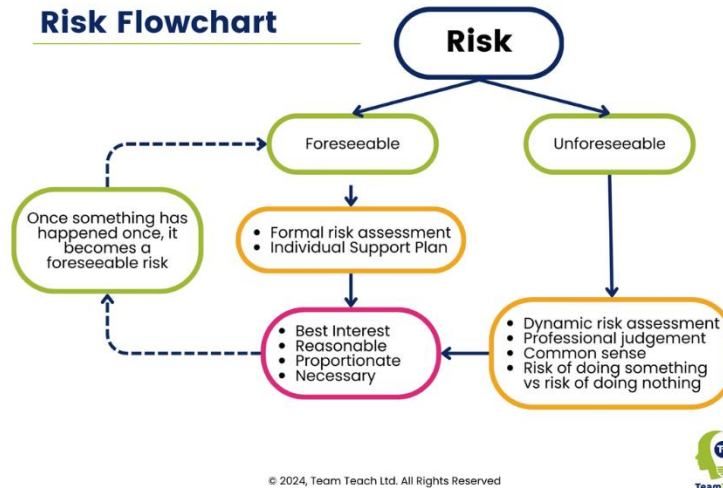
Low	No injury or cause for concern
Concern	A young person isn't doing as well as they should, although there is no evidence of harm. They may benefit from extra help. For example, a young person hits herself but has a plan in place to reduce occasions where this happens... on one occasion they hit themselves but do not leave a mark. We would want to review this periodically, or if it worsens.
Harmful	Harm means ill-treatment or the impairment of health or development, including for example, impairment suffered from seeing or hearing the ill-treatment of another. For example, the above young person injures herself leaving a bruise. This will need to be explored further to establish why they have been harmed.
Significant harm	Neglect, exploitation, physical abuse, sexual abuse, or emotional abuse including for example, impairment suffered from seeing or hearing the ill-treatment of another. Any harm which may be attributable to an adult coming across a young person at work.
Very unlikely	An event that could happen, but is almost certain not to happen
Possible	An event that could happen
Suspected	There is an indication that something has happened or may happen
Likely	Something you believe is more likely to happen than not
Almost certain	Something that will happen unless action is taken

18. Risk assessments and dynamic risk assessing

Known risks to children are identified within their individual Care Plan Risk Assessment, along with the strategies to reduce risk and keep children safe.

All Rolle House staff have access to our activity risk assessments which are saved on our internal system. These are used to assess the safety of each activity and outline general risks and the strategies to reduce risks to children.

Risk Flowchart



The above flowchart outlines how risks are managed. Foreseeable, or known risks, are assessed and outlined in Care Plan Risk Assessments. Unforeseeable, or unknown, risks are mitigated with staff using their professional judgement and dynamically risk assessing situations as they arise. When incidents happen Care Plan Risk Assessments are updated to reflect the necessary strategies to keep children safe.

The staff team role model safe decision making and have conversations about safety to develop an ability to take risks with responsibility in our children, so they are equipped to face the challenges and dangers in the real world independently when that time comes. These are recorded under 'Significant Discussions' on our internal monitoring system.

19. Definitions

Abuse is a form of maltreatment and may involve inflicting harm or failing to act to prevent harm. Appendix 3 defines the different types of abuse, neglect and exploitation.

Neglect is a form of abuse and is the persistent failure to meet basic physical and/or psychological needs, likely to result in the serious impairment of health or development. Appendix 3 defines neglect in more detail.

Exploitation can take many forms. It involves manipulating, coercing, or abusing power over someone for personal or financial gain. It takes several primary forms, ranging from modern slavery and forced labour to criminal and sexual exploitation.

Sharing of nudes and semi-nudes (also known as sexting or youth-produced sexual imagery) is where children share nude or semi-nude images, videos or live streams. This also includes pseudo-images that are computer-generated or AI (Artificial Intelligence) generated images that otherwise appear to be a photograph or video.

Child-on-child abuse refers to abuse between children under the age of 18.

Children or child refers to anyone who has not yet reached their 18th birthday.

Staff refers to all those working for or on behalf of Rolle House, employed by the Royal Deaf Education Trust, full or part time, temporary or permanent, in either a paid or voluntary capacity.

“Strong, collaborative leadership and timely decision-making are crucial to the effectiveness of multi-agency working and to identify and address system issues.” There are three safeguarding partners are responsible and accountable for addressing issues in their local areas:

Safeguarding partners are defined under the Children Act 2004 (as amended by the Children and Social Work Act, 2017) as:

- (a) the local authority
- (b) an integrated care board for an area any part of which falls within the local authority area
- (c) the chief officer of police for an area any part of which falls within the local authority area”

Working Together to Safeguard Children (HM Government, December 2023, updated 2024 guidance)

Victim is a widely understood and recognised term, but we understand that not everyone who has been subjected to abuse considers themselves a victim or would want to be described that way. When managing an incident, we will be prepared to use any term that the child involved feels most comfortable with.

Alleged perpetrator(s) and **perpetrator(s)** are widely used and recognised terms. However, we will think carefully about what terminology we use (especially in front of children) as, in some cases, abusive behaviour can be harmful to the perpetrator too. We will decide what’s appropriate and which terms to use on a case-by-case basis.

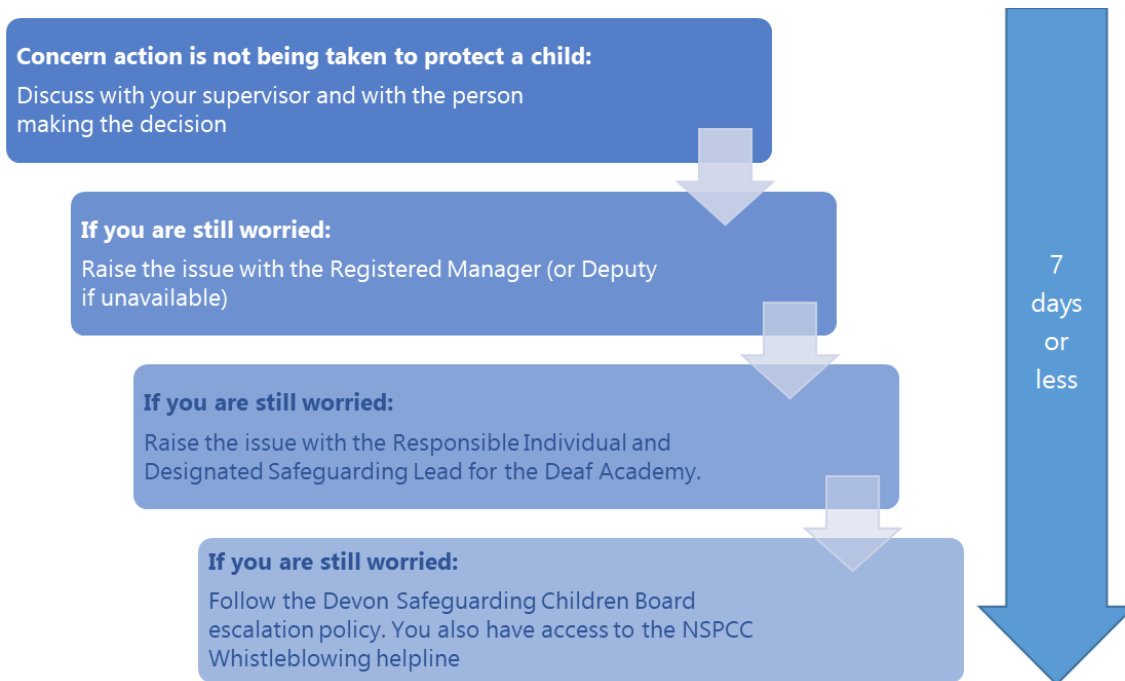
Child protection is part of safeguarding and promoting the welfare of children and is defined for the purpose as activity that is undertaken to protect specific children who are suspected to be suffering, or likely to suffer, significant harm. This includes harm that occurs inside or outside the home, including in foster care and residential care, as well as online.

Working Together to Safeguard Children (HM Government, December 2023, updated 2024 guidance)

20. What to do if you are still worried...

You should always continue to escalate your concerns until the child you have concerns about is safe. You can seek guidance through the Devon Safeguarding Children Partnership Escalation Protocol.

Anyone worried about a child must continue to raise the concern until they have a reason not to be worried about the child anymore.



Every member of the staff team has a responsibility to safeguard the children we work with, by following this process.

Where an immediate decision is needed, and a particular person is unavailable you may move to the next stage. The timescale for the process relates to the urgency of the decision, but in any event should not extend beyond one week.

You must use your professional curiosity and judgement and escalate concerns until children are safe.

21. Information Sharing

Fears about sharing information cannot be allowed to stand in the way of the need to safeguard and promote the welfare of children at risk of abuse or neglect.

Information sharing advice for practitioners, 2024.

Department for Education guidance around information sharing is available for people who provide safeguarding services to children, young people, parents and carers. This can be found on the GOV.co.uk website.

22. Sharing information internally:

Legally, we must share information within the team so that everyone who needs to know information has it to keep children safe and help them develop.

When we are worried about a child it is essential we record the concern and inform the Registered Manager promptly. Unless the concern is about our line managers, it is also important to let them know. Other people in the team will also need to know to provide safe care for the child.

In exceptional circumstances information within Rolle House will be restricted, for example:

- Where there is an allegation about a Residential Support Worker the Registered Manager will decide with other agencies in a Strategy Discussion who within the team must be aware of the concern.
- If the concern relates to the Deputy Manager, please report the concern to the Registered Manager.
- If the concern relates to the Acting Manager or Registered Manager please report to the Responsible Individual or Chair of Trustees.
- Where the detail of information is particularly sensitive this can be restricted, for example the details of sexual abuse or a child sharing worries about their mental health or sexuality. Staff involved in their direct care will probably need to know in general terms the nature of the concern but may not be provided with the more private details.

23. Sharing information with the Academy

Rolle House is a children's home, separate of the Royal Deaf Education Trust's Educational or Residential provisions. We share information with the education team in the same manner we would

share information about a child with any other school, so that they can provide consistent and safe care. This is achieved by regular meetings, telephone calls and emails sharing information such as safeguarding/behavioural concerns.

We share details around high-risk incidents with the education provision, so they are fully aware of any risks to or from each child and how to keep them safe while they are in the education setting.

24. Sharing information with parents and other agencies:

We are caring for other people's children. We will provide regular updates for parents and placing authorities about how their child is doing. The frequency of this will be detailed in the child's Care Plan.

Where a significant issue arises, and the child is deemed to be at risk of significant harm, staff team members or managers will ensure the parent is contacted within 24 hours and placing authority by close of the next working day for level 3 and level 4 incidents (guidance followed by the Risk Assessment Grid).

Six principles for processing personal data:

The UK GDPR is based on six data protection principles you must comply with when processing personal data. These principles relate to:

- **Lawfulness, fairness, and transparency** - you must process personal data lawfully, fairly and in a transparent manner in relation to the data subject.
- **Purpose limitation** - you must only collect personal data for a specific, explicit, and legitimate purpose. You must clearly state what this purpose is and only collect data for as long as necessary to complete that purpose.
- **Data minimisation** - you must ensure that the personal data you process is adequate, relevant, and limited to what is necessary in relation to your processing purpose.
- **Accuracy** - you must take every reasonable step to update or remove data that is inaccurate or incomplete. Individuals have the right to request that you erase or rectify erroneous data that relates to them, and you must do so within a month.
- **Storage limitation** - You must delete personal data when you no longer need it. The timescales in most cases are not set. They will depend on your business's circumstances and the reasons why you collect this data.
- **Integrity and confidentiality** - You must keep personal data safe and protected against unauthorised or unlawful processing and against accidental loss, destruction, or damage, using appropriate technical or organisational measures.

Accountability principle under the GDPR

Accountability is one of the General Data Protection Regulation principles – it ensures you are compliant with UK GDPR and says you must demonstrate your compliance.

Measures to help you meet the accountability requirement may include, for example:

- implementing data protection policies and security mechanisms
- agreeing data protection contracts with third-party processors
- documenting your processing activities
- recording and reporting, where necessary, of personal data breaches
- carrying out data protection impact assessments appointing a data protection officer

As a provision under the Royal Deaf Education Trust, we have an appointed Data Protection Officer and Deputy Data Protection Officer.

25. Safer recruitment

We strive to ensure that we employ safe staff by following the guidance given by the Local Safeguarding Children Board and our individual procedures.

Safer recruitment means that all applicants will:

- a) understand their duties to safeguard children from the outset through the advertisement and in their job description.
- b) complete and sign an application form which includes a full education and employment history (with explanations for any gaps)
- c) provide business contact details for two verified, formal referee statements following our own format, including at least one from someone who can comment on the applicant's suitability to work with young people (the last childcare employer if they have one) and one from someone who has known the candidate for at least 5 years.
- d) provide evidence of identity and qualifications
- e) be checked in accordance with the Disclosure and Barring Service (DBS) regulations as appropriate to their role.
- f) provide evidence of their right to work in the UK.
- g) be interviewed by a panel of at least two people testing skills and abilities. At least one person on the panel will have safer recruitment training.
- h) be of integrity and good character

We ensure that recruitment documentation states our commitment to safeguard children. All new staff members will undergo face to face induction training, which includes familiarisation with our safeguarding policies and procedures and support to identify their child protection training needs. All staff will sign to confirm that they have read and understood the safeguarding policies and procedures and attend relevant safeguarding training.

26. Agency

We obtain written confirmation from agencies that agency staff have been appropriately checked, and their suitability to work with children at Rolle House will be assessed based on the children's needs. This includes a review of all Schedule 2 information outlined in the Children's Homes Regulations (2015):

'Information required in respect of persons seeking to carry on, manage or work at a children's home

1. Proof of identity including a recent photograph.

2. Either—

- (a) where the position falls within regulation 5A of the Police Act 1997 (Criminal Records) Regulations 2002, an enhanced criminal record certificate issued under section 113B of the Police Act 1997 which includes, where applicable, suitability information relating to—

- (i) children (within the meaning of section 113BA(2) of the Police Act 1997);

- (ii) vulnerable adults (within the meaning of section 113BB(2) of the Police Act 1997); or

- (b) in any other case, a criminal record certificate issued under section 113A of the Police Act 1997.'

Our Human Resources department maintains records of recruitment checks undertaken.

Agency staff are expected to sign our Code of Conduct on their first time working within the Children's Home.

27. Support for staff at Rolle House

Code of conduct

We have published a code of conduct which sets out expectations of staff around appropriate boundaries to keep both children and staff members safe; all staff will sign to say they have read this document.

Emotional support

Having to deal with a situation where a child has suffered or appears to be likely to suffer harm can be stressful and upsetting and may bring up challenging memories in one's own life. We will support staff in a variety of ways, including a debrief with a manager. Where necessary confidential counselling services and additional resources will be sought, including external supervision.

Supervision

Staff involved in working directly with children, or supervising staff team members who do, will receive regular supervision. This supervision will take place at least six weekly (we aim for once monthly) and will provide a space for the staff member to talk about issues which they are facing in the work environment, thoughts that they have in terms of developing the service that is provided to the children, and discussion of the emotional impact of the role as well as any other issues that they consider relevant.

Supervision will also be used to reflect on any safeguarding issues that the staff member has been involved in (directly or indirectly) and allow for agreement on any further action required. Managers responsible for conducting supervision will all receive supervision training.



28. Concerns and allegations about staff members

Staff members should take care not to place themselves in a vulnerable position with a young person. Staff must adhere to the risk assessment for Lone Working; these are complete with staff individually and reviewed regularly. All staff understand that a child or other staff member may make an allegation against a member of the staff team.

Where it is alleged that a current staff member (including volunteers) has:

- behaved in a way that has harmed a child or may have harmed a child
- possibly committed a criminal offence against or related to a child
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable to work with children; this includes behaviour taking place both at work and outside of Rolle House

Management will discuss the content of the allegation with the **Devon County Council's Designated Officer (LADO)** for guidance and oversight of allegations. If the allegation concerns the Registered Manager, staff team members should immediately inform the Responsible Individual without notifying the Registered Manager first.

We follow the guidance and procedures of Safeguarding Partnerships (Local Authority, Police and Integrated Care Board) for managing allegations against staff members and notify the Designated Officer's (LADO's) team of the allegation/concerns.

Allegations about prior members of the team or historic allegations will be referred to the police.

Individual gift giving from staff members to children within the home, without the consent of a manager, is not permitted. This would be recorded and treated as a low-level concern. Actions would be taken according to policy and procedure.

Low-level concerns are recorded on our Human Resources system, SAM People, and are recorded and reviewed by the Designated and Deputy Designated Safeguarding Leads.

Rolle House recognises that concerns which do not meet the threshold for an allegation may still indicate a risk of future harm.

Low-level concerns include behaviour that:

- Breaches the Code of Conduct
- Creates discomfort or confusion for a child
- Risks professional boundaries

All low-level concerns are recorded, reviewed and monitored for patterns. Recording ensures a culture of openness and early reporting.

29. Whistleblowing

Our staff team occupy a vital position in promoting good practice and professional conduct throughout the organisation. We recognise that staff are committed to providing a high standard of service. We recognise that children cannot be expected to raise concerns in an environment where staff team members fail to do so.

All staff are aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues. If necessary, they should speak to the Designated Person or Devon's Designated Officer (LADO).

If a member of the staff team notices anything that gives them cause for concern it is vital that this is raised. Acting upon concerns is fundamental to ensure good safeguarding practice and support the staff team.

Resolving issues must be viewed by all staff as a positive action and not a breach of trust between colleagues or an attack on the organisation. Staff should feel confident in using professional challenge to work on a continuous development to best practice.

We value an atmosphere of openness and honesty and welcome suggestions, complaints, and criticisms. Whistleblowing includes raising and passing on concerns about any of the following:

- a) Poor standards of service
- b) Issues of bad practice
- c) The conduct of colleagues or managers
- d) Anything which is not in the best interest of the child or the organisation.
- e) Anything which is illegal or unacceptable behaviour.

Should you feel, you cannot raise a Whistleblowing concern internally you can:

- Contact the NSPCC Whistleblowing Helpline: 0800 0280285
- Report serious wrongdoing, misconduct, or safeguarding concerns to Ofsted:
 - **Phone:** [0300 123 3155](tel:03001233155) (Monday to Friday, 9am to 5pm)
 - **Email:** whistleblowing@ofsted.gov.uk

30. Staff training

Principles

The Registered Manager will ensure all staff members and volunteers have safeguarding training relevant to their role. Our training is specifically tailored to ensure that staff team have a good understanding of the risks that surround children and gives them the tools to manage situations such as disclosures.

We see safeguarding training as an on-going process with safeguarding and child protection updates, and reminders (for example, via email, supervisions, and staff meetings) at least once a month. We will review safeguarding practice following:

- Child protection enquiries
- Complaints
- Ofsted inspections
- Child safeguarding practice reviews
- Near misses
- Serious incidents

Learning will be shared through team meetings, audits, training, email communication and supervisions.

New staff members

The human resources team sends the appointment letter to new staff with links to the safeguarding e-learning and Keeping Children Safe in Education. On the first day of work a manager will:

- Go through the induction checklist.
- Ensure they know what to do if they are worried about a child.
- Ensure they have read all care plans, so they are aware of each child's individual risks.

Agency team members

Agency staff working at Rolle House are required to meet the same standards as permanent team members. Agencies who supply staff members to Rolle House must provide written assurance the member of staff has safeguarding children training to the appropriate level for the role in the relevant period

31. Demonstrating safeguarding impact

At Rolle House we understand that effective safeguarding is demonstrated through its impact on children's safety, wellbeing and progress in every day, not solely through compliance.

We evidence safeguarding impact by:

- Listening to children's views, using accessible communication, and ensure captured views are used to inform planning and decisions around children's care and safety.
- Monitoring and reviewing patterns in incidents, missing episodes and safeguarding concerns
- Tracking whether risks reduce over time and evaluating the effectiveness of safeguarding practice with this in mind
- Reflecting safeguarding learning in supervision and training, with serious case reviews taking place with managers to develop and improve safeguarding practice
- Making changes to practice following reviews, complaints or inspections

Leaders regularly evaluate safeguarding practice to ensure practice improves children's lived experience.

APPENDIX 1 – Safeguarding Contact Details



Devon MASH:

Telephone: 0345 155 1071

www.devon.gov.uk/mash-enquiryform.doc

**Devon County Council out-of-hours
Emergency Duty Team - 0845 6000 388**

Police non-emergency 101

Police emergency 999

Local Authority Designated Officer (LADO) - 01392 384964

<https://devoncountycouncil.outsystemsenterprise.com/devonassist/LADO>
childsc.localauthoritydesignatedofficersecure-mailbox@devon.gov.uk

Early Help Team - 0345 155 1071

Northern Devon: Earlyhelpnorthsecure-mailbox@devon.gov.uk

South and West Devon: Earlyhelpsouthsecure-mailbox@devon.gov.uk

Mid and East Devon: Earlyhelpmideastsecure-mailbox@devon.gov.uk

Exeter: Earlyhelpexetersecure-mailbox@devon.gov.uk

APPENDIX 2 – Physical Intervention and Restraint

Staff members may have to use restraint to safeguard children for a number of reasons. Reason to use physical restraint include doing so to prevent:

- (a) injury to any person (including the child)
- (b) serious damage to the property of any person (including the child); or
- (c) a child who is accommodated in a secure children's home from absconding from the home.

(The Children's Home Regulations, 2015)

Staff must only ever use physical restraint as a last resort, when a child is endangering themselves or others, and it always must be the minimum force necessary to prevent injury and applied for the shortest possible time.

Restraint in relation to a child must be necessary and proportionate. All staff members receive physical restraint training, and refresher training is provided on an annual basis.

Following the use of physical intervention this is recorded on our Child Protection Online Management System (CPOMS) providing a complete account of the incident and reason for use of physical intervention within 24 hours. The staff will be debriefed within 48 hours following the measure taking place by a manager, and children will be debriefed within 5 days of the measure. This follows Regulation 35 of The Children's Homes (England) Regulations 2015.

Children have individual Care Plan risk assessments which outline interventions to use where necessary including Deprivation of Liberty Safeguards (DOLs) if granted by the court that must be adhered to. If a child is deprived of their liberty this must be authorised in accordance with a court order.

All staff members understand that disproportionate physical intervention or restraint of a nature which causes unnecessary injury or distress to a child may be considered a disciplinary matter. Excessive use of physical intervention will be recorded as a low-level concern.

APPENDIX 3 - Definitions of abuse, neglect and exploitation

Physical abuse

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

Emotional abuse

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual abuse

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images or pornography, watching sexual 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.

Neglect

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy because of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing, and shelter (including exclusion from home or abandonment).
- protect a child from physical and emotional harm or danger.
- ensure adequate supervision (including the use of inadequate caregivers); or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Domestic Violence and Abuse

We recognise that Domestic Violence and Abuse (DVA) has a significant impact on a child's development and emotional wellbeing and should always lead to a child protection referral through the safeguarding team to MASH / MARAC / Police.

DVA is very widespread and where team members have concerns for their colleagues they should talk to their line manager.

Bullying

While bullying between children is not a separate category of abuse it is a very serious issue that can cause considerable anxiety and distress. At its most serious level, bullying can have a disastrous effect on a child's wellbeing and in very rare cases has been a feature in the suicide of some children.

All incidences of bullying, including cyber bullying and prejudice-based bullying, should be reported and will be managed to support the child's wellbeing and promote positive relationships. In some circumstances this process could lead to a child protection referral. Staff will work with individual children who have been bullied and those who have bullied others to assist them to understand their actions. If the bullying is particularly serious or if the action taken are ineffective, we will consider implementing child protection procedures.

Staff who allow or condone bullying may face disciplinary proceedings, and incidents where this is believed to be happening would be recorded as a low-level concern. This includes cyber, racist, homophobic and gender related bullying.

Children with sexually harmful behaviour

Children may be harmed by other children. Where there are concerns around the sexualised behaviour of a child staff are given appropriate guidance and support and professionals are consulted to provide assessments where required (potentially including an aims3 assessment). Children who present sexually harmful behaviour may have been a victim of sexual abuse themselves. Where there is concern a child may have been sexually abused the Devon MASH and each young person's placing authority and parents will be contacted and we will plan together how best to respond.

Racist Incidents

We acknowledge repeated racist incidents, or a single serious incident may lead to consideration as a disciplinary matter and under Child Protection procedures. All racist incidents, including for example racist jokes, name-calling or excluding someone based on race, will be taken seriously, and must be reported to the Registered Manager.

Forced Marriages & Honour Based Violence

Forced marriage is when a person faces physical pressure to marry (e.g., threats, physical violence, or sexual violence) or emotional and psychological pressure (e.g., if you're made to feel like you're bringing shame on your family).

'Honour' based violence (HBV) is intended to protect 'family honour' through violence, threats, insults, or other acts around forced marriage, where a cross-cultural relationship is suspected, or

where other 'taboos' are broken such as wearing of non-traditional clothes or attending events that violate a family or cultural norms. If staff members become aware of either of these happening to a child, it must be reported immediately to the Registered Manager or Safeguarding Team to be appropriately escalated.

Child Sexual Exploitation

Child sexual exploitation (CSE) is a form of sexual abuse that involves the manipulation and / or coercion of children, those under the age of 18, into sexual activity in exchange for things such as money, gifts, accommodation, affection, or status. The victims can be male or female. The manipulation or 'grooming' process involves befriending children, gaining their trust, and often feeding them drugs and alcohol, sometimes over a long period of time before the abuse begins. The abusive relationship between victim and perpetrator involves an imbalance of power which limits the victim's options, and ability to escape the situation. It is a form of abuse which is often misunderstood by victims and outsiders as consensual. While children may believe they are in a loving relationship, no child under the age of 18 can ever consent to being abused or exploited. CSE is a serious crime and can have a long-lasting adverse impact on a child's physical and emotional health. It may also be linked to child trafficking. All staff members must report all concerns immediately to the Registered Manager.

Female Genital Mutilation

Female Genital Mutilation (FGM) is a form of violence against women and young girls and considered child abuse in the UK. It is a grave violation of the human rights of girls and women. The UK Government has signed several international human rights laws against FGM, including the Convention on the Rights of the Child. Any staff who become aware that this may be planned or has happened for any girl living in the home must inform the Registered Manager immediately.

One Chance Rule

The 'One Chance Rule' in relation to forced marriage, FGM and HBV is a safeguarding principle that there may only be one opportunity for a child to seek help or protection from these things happened and that the failure to act immediately may cost the child their life. Staff members should act immediately on concerns of this nature and inform the Registered Manager.

Trafficking and exploitation

The two most common terms for the illegal movement of people – 'trafficking' and 'smuggling', are very different. In human smuggling, immigrants and asylum seekers pay people to help them enter the country illegally; after which there is no longer a relationship. Trafficked victims are coerced or deceived by the person arranging their relocation. On arrival in the country of destination the trafficked child or person is denied their human rights and is forced into exploitation by the trafficker or person into whose control they are delivered.

- Children are a special case, any child transported for exploitative reasons is a trafficking victim, whether they have been deceived. This is partly because it is not considered possible for children to give informed consent.
- Even when a child understands what has happened, they may still appear to submit willingly, to what they believe to be the will of their parents. Any concerns about trafficking and exploitation must be reported to the Registered Manager immediately.

Radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism. Support on how to prevent Extremism and Radicalisation is outlined in Prevent Duty Guidance: for England and Wales (2023).

In the context of operational safeguarding and the government's Prevent strategy, the Crown Prosecution Service (CPS) defines **violent extremism** as:

- The demonstration of unacceptable behaviour by using any means or medium to express views that encourage, justify, or glorify terrorist violence in furtherance of beliefs.
- Seeking to provoke others to terrorist acts.
- Encouraging other serious criminal activity or seeking to provoke others to serious violence.

There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity. While there is no specific criminal offense of extremism in UK law, the CPS prosecutes the criminal conduct and actions associated with Extremism under Terrorism and Public Order legislation.

Children may become susceptible to radicalisation and extremism through a range of social, personal, and environmental factors - it is known that violent extremists exploit vulnerabilities in children to drive a wedge between them and their families and communities and then groom children into becoming radicalised. It is vital our staff members can recognise those vulnerabilities.

Vulnerabilities which put children at additional risk include:

- **Identity Crisis** – the child is distanced from their cultural / religious heritage and experiences discomfort about their place in society.
- **Personal Crisis** – the child may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging.
- **Personal Circumstances** – migration; local community tensions; and events affecting the young person's country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy.
- **Unmet Aspirations** – the child may have perceptions of injustice; a feeling of failure; rejection of civic life.
- **Experiences of Criminality** – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration.
- **Special Educational Need** – children may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

This list is not exhaustive, nor does it mean that all children experiencing the above are at risk of radicalisation for the purposes of violent extremism. Looked after children are at increased risk as the children we look after may experience some or all of these throughout their childhood.

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; and
- Significant changes to appearance and / or behaviour.
- Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.

Preventing Radicalisation

To reduce the risks of children being radicalised we will:

- Ensure the Registered Manager completes the required training and develops a growing awareness of Prevent and Channel across our staff group.
- Maintain and apply a good understanding of the relevant guidance in relation to preventing children from becoming involved in terrorism and protecting them from radicalisation by those who support terrorism or forms of extremism which led to terrorism.
- Raise awareness about our role and responsibilities in relation to protecting children from radicalisation and involvement in terrorism.
- Raise awareness about the safeguarding processes relating to protecting children from radicalisation and involvement in terrorism.
- Require the Registered Manager to act as the first point of contact for case discussions relating to children who may be at risk of radicalisation or involved in terrorism.
- Collate relevant information from referrals of vulnerable children into the Channel process.
- Ensure the Registered Manager attends Channel meetings as necessary and carries out any actions as agreed.
- Ensure that progress on actions is reported to the Channel Co-ordinator; and any relevant additional information is shared in a timely manner.
- Ensure the staff team have an awareness of Prevent and what the programme does, understanding that:
 - **Prevent** offers multi-agency management and support for those at risk of radicalisation.
 - **Prevent aims to** support a person who is susceptible to being radicalised, so that they do not become involved in terrorism or terrorism-related activity.

Online Safety, internet use and sexting

Children are increasingly using mobiles phones, tablets, and computers daily. They are a source of fun, entertainment, communication, and education. However, we know that some adults and children will use these technologies to harm others. The harm might range from hurtful and abusive texts and e-mails, to enticing children to engage in sexually harmful conversations, webcam photography or face-face meetings. Our online safety policy explains how we try to keep children safe in the home. Cyber bullying and sexting by pupils, via texts and emails, will be treated as seriously as any other type of bullying and will be managed through our Anti-Bullying procedure.

“Chatrooms” and social networking sites are the more obvious sources of inappropriate and harmful behaviour, but dangers can appear anywhere. We work with children on how to maintain their own

safety online and how to seek help if they are concerned about what they see online. We take measures to keep our children safe online, this may include device health checks, restricting online access to harmful content and installing software which operates surveillance on a child's device and alerts staff if they are accessing harmful, dangerous or inappropriate content online.

With the increasing abilities of Artificial Intelligence (AI) there are increasing ways in which children can be abused and exploited online. AI increases the ability for children to access harmful AI generated material online or for harmful content to be generated of them. Should we suspect harm online we would take further action, involving the police where we suspect a crime has been committed and ensure the child's safety and welfare. We receive sector updates and training from the South West Grid for Learning (SWGfL) and utilise their helplines and support services.

The staff Code of Conduct provides further advice and guidance regarding the use of social networking and electronic communication with children in our care.

Photography and images

Most people who take or view photographs or videos of children do so for entirely innocent, understandable, and acceptable reasons. Sadly, some people abuse children through taking or using images, so we must ensure that the following safeguards are in place.

While parents are permitted to bring in a camera to events, no staff member should use their personal equipment to take photographs of children. Rolle House provides equipment for this purpose. Where a staff member has concerns someone is taking photographs in breach of this policy, they should contact the Registered Manager.

To protect children, we need to:

- a) seek their consent for photographs to be taken or shared
- b) seek parental consent
- c) use only the child's first name with the image
- d) ensure that the child is appropriately dressed
- e) encourage children to tell us if they are worried about any photographs that are taken of them

Staff should be aware that many indecent images in current circulation were taken by the child themselves or peers. Sex, sexuality, and relationships should be an age-appropriate topic in the home and include what to do if children are worried about an image they see. Staff should also ensure they are aware of the dangers of sharing photos of children online – AI can now be used to generate child sexual abuse images from an original image which was decent

Peer-on-Peer Abuse

In most instances, the conduct of children 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. We recognise that children can abuse their peers. It will not be passed off as 'banter', 'part of growing up' or 'just having a laugh' and all concerns raised by children will be taken seriously.

Child Criminal Exploitation - County Lines

Child Criminal exploitation is a geographically widespread form of harm that is a typical feature of county lines criminal activity and also include forced shoplifting or financial fraud. County Lines is when drug networks or gangs groom, exploit children to carry drugs and money from urban areas to suburban and rural areas, market, and seaside towns. Key to identifying potential involvement in county lines are missing episodes when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism should be considered. County Lines grooming, exploitation and abuse:

- can affect any child (of any gender) under the age of 18 years.
- can affect any vulnerable adult over the age of 18 years.
- can still be exploitation even if the activity appears consensual.
- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence.
- can be perpetrated by individuals or groups, males or females, and children or adults.
- is typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.
- may tie children into debt bonds, meaning they feel forced to continue to engage in criminal related to repay financial debts.

Contextual Safeguarding

Contextual Safeguarding recognises that as children grow and develop, they are influenced by a whole range of environments and people outside of their family and home. Staff recognise that risks occur outside of the home's environment, including within education, on public transport, in community locations, on online platforms, within gaming environments and within peer groups. Children and young people may encounter risk in any of these environments. Sometimes the different contexts are inter-related and can mean that children and young people may encounter multiple risks. Contextual safeguarding looks at how we can best understand these risks, engage with children and young people, and help to keep them safe. It's an approach that's often been used to apply to adolescents, though the lessons can equally be applied to younger children, especially in today's changing world. Rolle House applies a contextual safeguarding approach, recognising that:

- Children and young people may be harmed by peers or adults outside their family
- Exploitation can occur alongside perceived choice or independence
- Safety planning must involve education providers, social workers and families

Risk assessments and care plans reflect these contextual risks and are reviewed following incidents, missing episodes or intelligence from partners.

Missing from home

There may be a number of reasons a child goes missing from home. This can be from external factors like the influence of others or in moments of distress. We ensure that, in line with notification and regulatory requirements:

- Missing from home interviews are coordinated with the child's social care team and work will be done to reduce the risk of missing episodes in the future.
- All children within the home have a Philomena protocol which demonstrates an understanding of the child to support faster return to home.

Self-Harm

At times, children can pose a significant risk of harm to themselves. Self-harm is defined as the intentional act of causing direct physical damage, injury, or poisoning to one's own body. It is recognized as a physical expression of profound emotional distress rather than a distinct mental illness, serving as an unhealthy coping mechanism to manage or release overwhelming psychological pain. We may use physical intervention to prevent children from causing significant harm to themselves and take steps to reduce risks within the environment to protect a child who is known to self-harm.

Gender Questioning or Transitioning Children

All children within our care will be supported to identify as they choose. Information will be provided to them without encouragement of changing their identity but to be informed around their rights and support available to them. As a team we will support them to explore their own identity and seek clinical advice that will be fully and explicitly explained, utilising translators and Relay professionals so that children can make informed decisions, and avoid the potential for causing themselves harm from making decisions without full insight to what it means for them.

APPENDIX 4 - Indicators of abuse

Physical signs define some type of abuse, for example, bruising, bleeding, or broken bones resulting from physical or sexual abuse, or injuries sustained while a child has been inadequately supervised. The definition of physical signs is complicated, as children may go to great lengths to hide injuries, often because they are ashamed or embarrassed, or their abuser has threatened further violence or trauma if they disclose the abuse. It is also quite difficult for anyone to categorise injuries into accidental or deliberate with any degree of certainty. For these reasons it is vital that staff are also aware of the behavioural indicators of abuse and report any concerns to the Registered Manager and Safeguarding Team.

It is the responsibility of staff to report their concerns. It is not their responsibility to investigate or decide whether a child has been abused.

A child who has been abused or neglected may:

- Have bruises, bleeding, burns, fractures, or other injuries.
- Show signs of pain or discomfort
- Keep arms or legs covered, even in warm weather.
- Be concerned about changing for PE, swimming or in the residential areas for bathing/ bed.
- Look unkempt and uncared for – present as smelly.
- Change their eating habits.
- Have difficulty in making or sustaining friendships.
- Appear fearful.
- Be reckless regarding their own or others safety.
- Self-harm
- Frequently miss school or arrive late.
- Show signs of not wanting to go home.
- Display a change in behaviour – from quiet to aggressive, or happy go lucky to withdrawn.
- Challenge authority
- Become disinterested in schoolwork.
- Be constantly tired or preoccupied.
- Be wary of physical contact.
- Be involved in, or particularly knowledgeable about drugs or alcohol.
- Display sexual knowledge or behaviour beyond that normally expected for their age.

Individual indicators will rarely, in isolation, provide conclusive evidence of abuse. They should be viewed as part of a jigsaw, and each small piece of information will help managers and involved agencies decide on how to proceed.

APPENDIX 5 - The Children's Homes Regulations (2015)

Regulation 12, the protection of children standard states that children are protected from harm and enabled to keep themselves safe.

In particular, the standard in paragraph (1) requires the registered person to ensure:

(a) that staff:

- (i) assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child;
- (ii) help each child to understand how to keep safe;
- (iii) have the skills to identify and act upon signs that a child is at risk of harm;
- (iv) manage relationships between children to prevent them from harming each other;
- (v) understand the roles and responsibilities in relation to protecting children that are assigned to them by the registered person;
- (vi) take effective action whenever there is a serious concern about a child's welfare; and
- (vii) are familiar with, and act in accordance with, the home's child protection policies;

(b) that the home's day-to-day care is arranged and delivered so as to keep each child safe and to protect each child effectively from harm;

(c) that the premises used for the purposes of the home are located so that children are effectively safeguarded;

(d) that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child from avoidable hazards to the child's health; and

(e) that the effectiveness of the home's child protection policies is monitored regularly.

Appendix 6 - Other relevant legislation and key statutory guidance

When there are specific concerns about a child or family, we can access the following documents for guidance:

- Adoption and Children Act 2002
- Care Standards Act 2000
- Children Act 2004
- Children and Social Work Act 2017
- Children and Families Act 2014
- Children and Young Persons Act 2008
- Children missing from education Statutory guidance for local authorities, DfE January 2015
- Children's Wellbeing and Schools Act 2026
- Communications Act 2003
- Counterterrorism and Security Act 2015.
- Children's Social Care National Framework (2023)
- Data Protection Act 2018 and UK GDPR
- Domestic Abuse Act 2021
- Education Act 2002
- Education and Inspections Act 2006
- The Equality Act 2010
- Female Genital Mutilation Act 2003
- Guidance on Private Fostering, DfE
- Guidance for Safer Working Practice for Adults who Work with Children and Young People, Hall, Revised 2019
- Human Rights Act 1998
- Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers
- Keeping Children Safe in Education (KCSIE) , DfE, September 2024.
- Local Safeguarding Children Board Procedures (LSCB) 2019.
- Malicious Communications Act 1988
- Misuse of Drugs Act 1971
- The Modern Slavery Act 2015
- National Minimum Standards for Children's Homes
- Preventing and tackling bullying, DfE, 2014
- Protection of Freedom Act 2012
- Public Order Act 1986.
- Safeguarding Children and Young People from Sexual Exploitation, DfE 2017
- Safeguarding Children and Safer Recruitment in Education", DCSF Guidance February 2014
- Safeguarding children who may have been trafficked, HMG, 2011
- Safeguarding Vulnerable Groups Act (2006)
- Serious Crime Act 2015
- Sexual Offences Act 2003
- SEND Code of Conduct, DfE, January 2015

- Threshold Matrix December 2012
- Working Together to Safeguard Children (HM Government, December 2023, updated 2024 guidance)
- 'What To Do If You Are Worried a Child Is Being Abused' 2003 –revised 2007'
- What to do if you're worried a child is being abused Advice for practitioner, DfE, March 2015
- Protecting vulnerable people from being drawn into terrorism, DfE
- United Nations Convention of the Rights of the Child (UNCRC) 1991

APPENDIX 7 – Ligature procedure

Self-harm is defined as the intentional act of causing direct physical damage, injury, or poisoning to one's own body. It is recognized as a physical expression of profound emotional distress rather than a distinct mental illness, serving as an unhealthy coping mechanism to manage or release overwhelming psychological pain. Self-harm can be categorised into two further classifications, including suicide attempt (some intent to die) and non-suicidal self-injury (no intent to die).

Ligature is one way someone may choose to cause themselves harm or commit suicide. The following outlines steps to ensure that Rolle House identifies, manages, and responds to ligature risks promptly and safely, to protect children from serious harm or death.

Definition of a Ligature

A ligature is any item or environmental feature that could be used to form a loop or noose and cause harm through strangulation or suspension.

Examples include, but are not limited to:

- Cords, belts, clothing, charging cables, cables from blinds
- Drawstrings, lanyards, shoelaces
- Fixtures such as handles, hooks, bed frames, window fittings where practicable
- Furniture or fittings that present anchor points

Principles

Rolle House is committed to:

- Balancing safety with dignity
- Avoiding blanket restrictions wherever possible
- Using individualised risk assessments
- Responding swiftly and proportionately to risk
- Ensuring children are supported, not punished, for distress-based behaviour

Identification of Ligature Risk

When a child presents with a known ligature risk, prior to the child moving into Rolle House we will:

- Ensure that we can manage and mitigate the risk to keep the child safe.
- complete an environment risk assessment, highlighting all risks of ligature points and this be shared with parents/carers and the local authority to be transparent about the risks within Rolle House; we cannot mitigate all risk by removing all ligature points.
- ensure that the staff team have received sufficient rescue from ligature training
- ensure there is equipment within Rolle House to rescue a child from ligature. These include Tuff Cuts Trauma Shears, Shark Safety Knife, Heavy Duty Wire Cutter. All of these are single use and will be replaced once used.
- seek professional and clinical input to assess the risk of each individual child.

Where a ligature risk presents to a child already living in the home we will risk assess this and include steps to mitigate this risk within the child's individual Care Plan Risk Assessment. We will coordinate

with the local authority to share management of the risk and seek clinical advice should this be required.

Preventative Measures

Depending on assessed risk, preventative actions may include:

- Increased staff presence or supervision
- Removal, substitution, or controlled access to items
- Bedroom or environmental adjustments
- Emotional support and therapeutic input
- Work with the child on safety planning and coping strategies

All measures used would be proportionate to the perceived risk and reviewed regularly.

Responding to a Ligature Incident or Attempt

Immediate Action

If a ligature is discovered or suspected:

1. **Act immediately** to preserve life
2. Remove the ligature
3. Call emergency services (999 or BSL999) if there is:
 - Loss of consciousness
 - Breathing difficulties
 - Any doubt about safety
4. Administer first aid where possible

Following Immediate Safety

- Notify the Registered Manager or on-call manager immediately
- Ensure the child receives medical attention as required
- Provide emotional support to the child and others affected
- Preserve the environment for learning and review where appropriate
- Ensure an incident report is made on CPOMS on the same day.

Post Incident Review

Following any ligature incident:

- The child's Care Plan Risk Assessment will be updated
- Learning will be shared with staff through supervision or team meetings
- Staff involved in the incident will be offered debrief and emotional support, including external supervision
- A regulation 40 notification will be submitted if required