

SAFEGUARDING & SAFEGUARDING POLICY

Safeguarding Officer	Mr Jacob Adams
Last reviewed:	November 2022
Next review	November 2023

Safeguarding Management

Mr Jacob Adams Safeguarding Officer

Mr P Stanford is responsible in Mr Jacob Adams is absent

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Company Policies on Related Safeguarding Issues which are not included and stored separately

- E-Safety Policy and Social Media Policy
- Behaviour Management Policy
- Health and Safety Policy
- Bullying / Anti-Bullying Procedure
- Racism / Anti-Racism Policy
- Guidance on the Use of Photographic Images
- Keeping Children Safe in Education
- Whistle-Blowing Policy
- Risk Assessment Document
- First Aid and Accident Report

These documents can be found at **37 Mead Lane, Chertsey, Surrey, KT16 8NJ**

1. Introduction

This policy has been developed in accordance with the principles established by the Children Act 1989 and Education Act 2002 and in line with various government publications:

All relevant policies will be reviewed on an annual basis by the Company which has responsibility for oversight of safeguarding and safeguarding systems. The Designated Safeguarding and Welfare Coordinator will ensure regular reporting on safeguarding activity and systems.

We recognise that all adults, including temporary staff, volunteers and self-employed staff have a full and active part to play in protecting children from harm, and that the child's welfare is our paramount concern.

All staff members believe that our company should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child.

2. Specific Safeguarding Issues

- child sexual exploitation (CSE);
- bullying including cyberbullying;
- domestic violence;
- drugs;
- fabricated or induced illness;
- gender-based violence/violence against women and girls (VAWG);
- mental health;

3. Ethos

Elevate Sports Coaching (Elev8) recognises the importance of providing an ethos and environments that will help children to feel safe, secure and respected in sport; encourage them to talk openly; and enable them to feel confident that they will be listened to.

We recognise that children who are abused or witness violence are likely to have low self-esteem and may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame. Our sessions may be the only stable, secure and predictable element in their lives.

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as: protecting children from maltreatment; preventing impairment of children's health or development; ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and acting to enable all children to have the best outcomes.

Children include everyone under the age of 18.

Where a child is suffering significant harm, or is likely to do so, action should be taken to protect that child. Action should also be taken to promote the welfare of a child in need of additional support, even if they are not suffering harm or are at immediate risk.

Staff members working with children are advised to maintain an attitude of ‘it could happen here’ where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.

Elevate sports Coaching will endeavour to support the welfare and safety of all children through:

- maintaining children’s welfare as our paramount concern;
- referring safeguarding concerns about adults to the Designated Welfare and Safeguarding Officer
- providing suitable support and guidance so that children know who to approach if they are in difficulties;
- raising the awareness of all staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse by ensuring all staff can recognise the signs and symptoms of abuse and are aware of the company’s procedures and lines of communication;
- supporting the child’s development in ways that will foster security, confidence and independence;
- providing an environment in which children and young people feel safe, secure, valued and respected, and feel confident and know how to approach adults if they are in difficulties believing they will be effectively listened to;
- ensuring all steps are taken to maintain site security and children’s physical safety;
- working with parents to build an understanding of the company’s responsibility to ensure the welfare of all children including the need for referral to other agencies in some situations;
- developing a structured procedure within the company which will be followed by all staff of the company in cases of suspected abuse;
- monitoring children and young people who have been identified as having welfare or protection concerns;
- keeping confidential records, which are stored securely and shared appropriately with other professionals;
- developing and promoting effective working relationships with other agencies, especially the Police and Social Care;
- ensuring that all adults within our company who have substantial access to children have been checked as to their suitability in accordance with Keeping Children Safe in Education (2014);
- ensuring all staff are aware that safeguarding issues can happen anywhere, and all staff should be alert to possible concerns being raised in the company;

4. Procedures

Our company procedures for safeguarding children will ensure that:

- we have a nominated designated member of staff;
- our designated safeguarding officer has undertaken the Safeguarding training
- we have a member of staff who will act in the designated member of staff’s absence;
- all members of staff are provided with Safeguarding training;
- all members of staff and volunteers know the signs and symptoms of concern, how to respond to a child who discloses abuse and what to do if they are concerned about a child;
- all parents/carers are made aware of the responsibilities of staff members with regard to safeguarding procedures through publication of the company’s Safeguarding Policy and reference to it in our introductory company materials;
- staff organising activities for children are aware of the company’s safeguarding guidelines and procedures;

- we will ensure that our selection and recruitment of staff meet the requirements as set down in Keeping Children Safe in Education (2014);
- if staff members have concerns about another staff member then this should be referred to the Safeguarding and Welfare Officer .
- all staff can make direct referrals to Children Social Care Services.

Our procedures will be regularly reviewed and updated.

All new members of staff will be sign posted to a copy of our Safeguarding policy.

5. Roles and Responsibilities

Everyone who comes into contact with children and their families has a role to play in safeguarding children. Elevate Sports Coaching staff are particularly important as they are in a position to identify concerns early and provide help for children, to prevent concerns from escalating. The company and its staff form part of the wider safeguarding system for children. This system is described in statutory guidance Working Together to Safeguard Children 2015. The company should work with social care, the police, health services and other services to promote the welfare of children and protect them from harm.

The company has a designated Safeguarding and Welfare officer who will provide support to staff members to carry out their safeguarding duties and who will liaise closely with other services such as children's social care.

All company staff have a responsibility to provide a safe environment for children.

The company staff have a responsibility to identify children who may be in need of extra help or who are suffering, or are likely to suffer, significant harm. All staff then have a responsibility to take appropriate action, working with other services as needed.

In addition to working with the designated Safeguarding and Welfare Officer staff members should be aware that they may be asked to support social workers to take decisions about individual children.

Staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the company's safeguarding regime. Appropriate whistleblowing procedures, which are suitably reflected in staff training and staff behaviour policies, should be in place for such concerns to be raised with the company's management team.

Where a staff member feels unable to raise the issue with their employer or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them.

The Designated Safeguarding and Welfare Officer is responsible for:

- referring a child if there are concerns about possible abuse, to the Children Services Social Work Duty and Assessment Team and act as a focal point for staff to discuss concerns. A written record of the referral will be sent to the Assessment Team by the end of the working day the referral is made;
- keeping written records of concerns about a child even if there is no need to make an immediate referral, ensuring that all such records are kept confidentially and securely.
- liaising with other agencies and professionals;
- organising safeguarding training for all company staff;

6. Supporting Children

We recognise that a child who is abused or witness's violence may feel helpless and humiliated, may blame themselves and find it difficult to develop and maintain a sense of self-worth.

We recognise that we may provide the only escapism in the lives of children who have been abused or who are at risk of harm.

We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

Our company will support all children by:

- encouraging development of self-esteem and self-assertiveness;
- promoting a caring, safe and positive environment within the company;
- liaising and working together with all other support services and those agencies involved in the safeguarding of children;
- notifying the Children Services Social Work Duty and Assessment Team as soon as there is significant concern;

7. When to be concerned

All staff and volunteers should be aware that the main categories of abuse are:

- *physical abuse;*
- *emotional abuse;*
- *sexual abuse;*
- *neglect.*

All staff and volunteers should be concerned about a student if he/she presents with indicators of possible significant harm – see **Appendix 1 for details**.

8. Action when a child has suffered or is likely to suffer harm

This diagram illustrates what action should be taken and who should take it where there are concerns about a child. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately. **Anybody can make a referral.**

9. Social Media Policy

Our company promotes the safety of children by having adopted the Social Media Policy which ensures that staff members keep their personal and professional lives separate when using any form of social media.

10. Dealing with a disclosure

If a child discloses that he or she has been abused in some way, the member of staff / volunteer should:

- listen to what is being said without displaying shock or disbelief;
- accept what is being said;
- allow the child to talk freely;
- reassure the child, but not make promises which it might not be possible to keep;
- not promise confidentiality – it might be necessary to refer to Children's Services: Safeguarding and Specialist Services;
- reassure him or her that what has happened is not his or her fault;
- stress that it was the right thing to tell;
- listen, only asking questions when necessary to clarify;
- not criticise the alleged perpetrator;

- explain what has to be done next and who has to be told;
- make a written record (see Record Keeping below);
- pass the information to the Designated Safeguarding and Welfare Officer without delay

Support

Dealing with a disclosure from a child, and safeguarding issues can be stressful. The member of staff/volunteer should, therefore, consider seeking support for him/herself and discuss this with the Designated Safeguarding and Welfare Officer.

11. Confidentiality

We recognise that all matters relating to safeguarding are confidential.

The Designated Safeguarding and Welfare Officer will disclose any information about a child to other members of staff on a need to know basis only.

All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.

All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.

We will always undertake to share our intention to refer a student to Children Services Social Work Duty and Assessment Team with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with the Duty Manager at the Assessment Team on this point.

12. Supporting Staff

We recognise that staff working in the company who have become involved with a pupil/student who has suffered harm or appear to be likely to suffer harm may find the situation upsetting.

We will support such staff by providing an opportunity to talk through their anxieties with the DCPT and to seek further support as appropriate.

13. Allegations of abuse made against staff

Duties as an employer and an employee

This part of the policy is about managing cases of allegations that might indicate a person would pose a risk of harm if they continue to work in regular or close contact with children in their present position, or in any capacity. It should be used in respect of all cases in which it is alleged that a coach or member of staff (including volunteers) in the company 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; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children.

This part of the policy relates to members of staff who are currently working in the company regardless of where the alleged abuse took place. Allegations against a staff member who is no longer working for the company should be referred to the police. Historical allegations of abuse should also be referred to the police.

Employers have a duty of care to their employees. They should ensure they provide effective support for anyone facing an allegation and provide the employee with a named contact if they are suspended. It is essential that any allegation of abuse made against a member of staff or volunteer in the company is dealt with very quickly, in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

Initial Considerations

The procedures for dealing with allegations need to be applied with common sense and judgement. Many cases may well either not meet the criteria set out above or may do so without warranting consideration of either a police investigation or enquiries by local authority children's social care services. In these cases, local arrangements should be followed to resolve cases without delay.

Some rare allegations will be so serious they require immediate intervention by children's social care services and/or police. The designated officer should be informed of all allegations that come to the company's attention and appear to meet the criteria, so they can consult police and children's social care services as appropriate.

The following definitions should be used when determining the outcome of allegation investigations

- **Substantiated:** there is sufficient evidence to prove the allegation;
- **Malicious:** there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive;
- **False:** there is sufficient evidence to disprove the allegation;
- **Unsubstantiated:** there is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence.

Supporting those involved

Employers have a duty of care to their employees. They should act to manage and minimise the stress inherent in the allegations process. Support for the individual is vital to fulfilling this duty. Individuals should be informed of concerns or allegations as soon as possible and explained the likely course of action, unless there is an objection by the children's social care services or the police. The individual should be advised to contact their trade union representative, if they have one, or a colleague for support. They should also be given access to welfare counselling or medical advice where this is provided by the employer.

Parents or carers of a child or children involved should be told about the allegation as soon as possible if they do not already know of it. However, where a strategy discussion is required, or police or children's social care services need to be involved, the Safeguarding and Welfare Officer should not do so until those agencies have been consulted and have agreed what information can be disclosed to the parents or carers. Parents or carers should also be kept informed about the progress of the case and told the outcome where there is not a criminal prosecution, including the outcome of any disciplinary process. The deliberations of a disciplinary hearing, and the information considered in reaching a decision, cannot normally be disclosed, but the parents or carers of the child should be told the outcome in confidence.

Parents and carers should also be made aware of the requirement to maintain confidentiality about any allegations made against staff whilst investigations are ongoing.

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

Managing the situation and exit arrangements

Resignations and 'settlement agreements'

If the accused person resigns, or ceases to provide their services, this should not prevent an allegation being followed up in accordance with this policy. A referral to the DBS must be made, if the criteria are met. If the accused person resigns or their services cease to be used and the criteria are met it will not be appropriate to reach a settlement/compromise agreement. A settlement/compromise agreement which prevents the company from making a DBS referral when the criteria are met would likely result in a criminal offence being committed as the company would not be complying with its legal duty to make the referral.

It is important that every effort is made to reach a conclusion in all cases of allegations bearing on the safety or welfare of children, including any in which the person concerned refuses to cooperate with the process. Wherever possible the accused should be given a full opportunity to answer the allegation and make representations about it. But the process of recording the allegation and any supporting evidence and

Reaching a judgement about whether it can be substantiated on the basis of all the information available, should continue even if that cannot be done or the accused does not cooperate. It may be difficult to reach a conclusion in those circumstances, and it may not be possible to apply any disciplinary sanctions if a person's period of notice expires before the process is complete, but it is important to reach and record a conclusion wherever possible.

'Settlement agreements' (sometimes referred to as compromise agreements), by which a person agrees to resign if the employer agrees not to pursue disciplinary action, and both parties agree a form of words to be used in any future reference, should not be used in cases of refusal to cooperate or resignation before the person's notice period expires. Such an agreement will not prevent a thorough police investigation where that is appropriate.

Record keeping

Details of allegations that are found to have been malicious should be removed from personnel records. However, for all other allegations, it is important that a clear and comprehensive summary of the allegation, details of how the allegation was followed up and resolved, and a note of any action taken, and decisions reached, is kept on the confidential personnel file of the accused, and a copy provided to the person concerned.

The purpose of the record is to enable accurate information to be given in response to any future request for a reference, where appropriate. It will provide clarification in cases where future DBS checks reveal information from the police about an allegation that did not result in a criminal conviction and it will help to prevent unnecessary re-investigation if, as sometimes happens, an allegation re-surfaces after a period. The record should be retained at least until the accused has reached normal pension age or for a period of 10 years from the date of the allegation if that is longer.

The Information Commissioner has published guidance on employment records in its Employment Practices Code and supplementary guidance, which provides some practical advice on record retention.

References

Cases in which an allegation was proven to be false, unsubstantiated or malicious should not be included in employer references. A history of repeated concerns or allegations which have all been found to be false, unsubstantiated or malicious should also not be included in any reference.

Timescales

It is in everyone's interest to resolve cases as quickly as possible consistent with a fair and thorough investigation. All allegations should be investigated as a priority to avoid any delay. Target timescales are shown below: the time taken to investigate and resolve individual cases depends on a variety of factors including the nature, seriousness and complexity of the allegation, but these targets should be achieved in all but truly exceptional cases. It is expected that 80 per cent of cases should be resolved within one month, 90 per cent within three months and all but the most exceptional cases should be completed within 12 months.

For those cases where it is clear immediately that the allegation is unsubstantiated or malicious, they should be resolved within one week. Where the initial consideration decides that the allegation does not involve a possible criminal offence it will be for the employer to deal with it, although if there are concerns about safeguarding, the employer should discuss them with the designated officer. In such cases, if the nature of the allegation does not require formal disciplinary action, the employer should institute appropriate action within three working days. If a disciplinary hearing is required and can be held without further investigation, the hearing should be held within 15 working days.

Oversight and monitoring

The designated officer has overall responsibility for oversight of the procedures for dealing with allegations; for resolving any inter-agency issues; and for liaison with the Local Safeguarding Children Board (LSCB) on the subject. The designated officer will provide advice and guidance to the case manager, in addition to liaising with the police and other agencies and monitoring the progress of cases to ensure that they are dealt with as quickly as possible consistent with a thorough and fair process. Reviews should be conducted at fortnightly or monthly intervals, depending on the complexity of the case.

Police forces should also identify officers who will be responsible for:

- liaising with the designated officer;
- taking part in the strategy discussion or initial evaluation;
- subsequently reviewing the progress of those cases in which there is a police investigation; and
- sharing information on completion of the investigation or any prosecution.

If the strategy discussion or initial assessment decides that a police investigation is required, the police should also set a target date for reviewing the progress of the investigation and consulting the Crown Prosecution Service (CPS) about whether to: charge the individual; continue to investigate; or close the investigation. Wherever possible, that review should take place no later than four weeks after the initial evaluation. Dates for subsequent reviews, ideally at fortnightly intervals, should be set at the meeting if the investigation continues.

Suspension

The possible risk of harm to children posed by an accused person should be evaluated and managed in respect of the child(ren) involved in the allegations. In some rare cases that will require the case manager to consider suspending the accused until the case is resolved. Suspension should not be an automatic response when an allegation is reported; all options to avoid suspension should be considered prior to taking that step. If the case manager is concerned about the welfare of other children in the community or the teacher's family, those concerns should be reported to the designated officer or police. But suspension is highly unlikely to be justified based on such concerns alone.

Suspension should be considered only in a case where there is cause to suspect a child or other children at the company is/are at risk of harm or the case is so serious that it might be grounds for dismissal. However, a person should not be suspended automatically: the case manager must consider carefully whether the circumstances warrant suspension from contact with children at the company or until the allegation is resolved and may wish to seek advice from their personnel adviser and the designated officer.

The case manager should also consider whether the result that would be achieved by immediate suspension could be obtained by alternative arrangements. In many cases an investigation can, be resolved quickly and without the need for suspension. If the designated officer, police and children's social care services have no objections to the member of staff continuing to work during the investigation, the case manager should be as inventive as possible to avoid suspension. Based on assessment of risk, the following alternatives should be considered by the case manager before suspending a member of staff:

- redeployment within the company so that the individual does not have direct contact with the child or children concerned;
- providing an assistant to be present when the individual has contact with children;
- redeploying to alternative work in the company so the individual does not have unsupervised access to children;
- moving the child or children to sessions where they will not come into contact with the member of staff, making it clear that this is not a punishment and parents have been consulted; or
- temporarily redeploying the member of staff to another role in a different location.

If immediate suspension is considered necessary, the rationale and justification for such a course of action should be agreed and recorded by the designated officer. This should also include what alternatives to suspension have been considered and why they were rejected.

Where it has been deemed appropriate to suspend the person, written confirmation should be dispatched within one working day, giving as much detail as appropriate for the reasons for the suspension. It is not acceptable for an employer to leave a person who has been suspended without any support. The person should be informed at the point of their suspension who their named contact is within the organisation and provided with their contact details.

Children's social care services or the police cannot require the case manager to suspend a member of staff or a volunteer, although they should give appropriate weight to their advice. The power to suspend is vested in the proprietor of the company who are the employers of staff at the company. However, where a strategy discussion or initial evaluation concludes that there should be enquiries by the children's social care services and/or an investigation by the police, the designated officer should canvass police and children's social care services for views about whether the accused member of staff needs to be suspended from contact with children in order to inform the school or company consideration of suspension. Police involvement does not make it mandatory to suspend a member of staff; this decision should be taken on a case-by-case basis having undertaken a risk assessment.

Information sharing

In a strategy discussion or the initial evaluation of the case, the agencies involved should share all relevant information they have about the person who is the subject of the allegation, and about the alleged victim.

Where the police are involved, wherever possible the employer should ask the police to obtain consent from the individuals involved to share their statements and evidence for use in the employer disciplinary process.

This should be done as their investigation proceeds and will enable the police to share relevant information without delay at the conclusion of their investigation or any court case.

Children's social care services should adopt a similar procedure when making enquiries to determine whether the child or children named in the allegation are in need of protection or services, so that any information obtained in the course of those enquiries which is relevant to a disciplinary case can be passed to the employer without delay.

Specific actions

Following a criminal investigation or a prosecution

The police should inform the employer and designated officer immediately when a criminal investigation and any subsequent trial is complete, or if it is decided to close an investigation without charge, or not to continue to prosecute the case after the person has been charged. In those circumstances, the designated officer(s) should discuss with the case manager whether any further action, including disciplinary action, is appropriate and if so, how to proceed. The information provided by the police and/or children's social care services should inform that decision. The options will depend on the circumstances of the case and the consideration will need to take into account the result of the police investigation or the trial, as well as the different standard of proof required in disciplinary and criminal proceedings.

On conclusion of a case

If the allegation is substantiated and the person is dismissed or the employer ceases to use the person's services, or the person resigns or otherwise ceases to provide his or her services, the designated officer should discuss with the case manager and their personnel adviser whether the school or company will decide to make a referral to the DBS for consideration of inclusion on the barred lists is required.

There is a legal requirement for employers to make a referral to the DBS where they think that an individual has engaged in conduct that harmed (or is likely to harm) a child; or if a person otherwise poses a risk of harm to a child.

Where it is decided on the conclusion of a case that a person who has been suspended can return to work, the case manager should consider how best to facilitate that. Most people will benefit from some help and support to return to work after a stressful experience. Depending on the individual's circumstances, a phased return and/or the provision of a mentor to provide assistance and support in the short term may be appropriate. The case manager should also consider how the person's contact with the child or children who made the allegation can best be managed if they are still a student at the school or company.

In respect of malicious or unsubstantiated allegations

If an allegation is determined to be unsubstantiated or malicious, the designated officers should refer the matter to the children's social care services to determine whether the child concerned is in need of services, or may have been abused by someone else. If an allegation is shown to be deliberately invented or malicious, the headteacher, principal or proprietor should consider whether any disciplinary action is appropriate against the student who made it; or whether the police should be asked to consider if action might be appropriate against the person responsible.

Learning lessons

At the conclusion of a case in which an allegation *is* substantiated, the designated officer should review the circumstances of the case with the case manager to determine whether there are any improvements to be made to the company's procedures or practice to help prevent similar events in the future. This should include issues arising from the decision to suspend the member of staff, the duration of the suspension and whether suspension was justified. Lessons should also be learnt from the use of suspension when the individual is subsequently reinstated. The designated officer and case manager should consider how future investigations of a similar nature could be carried out without suspending the individual.

14. Physical Intervention

Our policy on physical intervention by staff is set out separately and acknowledges that the decision whether or not to intervene is down to the professional judgement of the staff member concerned and should always depend on the individual circumstances.

Staff use physical intervention as a last resort, but staff are empowered to use reasonable force to prevent students from hurting themselves or others, from damaging property, or from causing disorder.

15. Bullying

Our policy on bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under safeguarding procedures. This includes homophobic and gender related bullying. The company delivers a zero-tolerance approach to all forms of bullying including verbal, physical and cyber.

16. Racist Incidents

Our policy on racist incidents is set out in a separate document and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under safeguarding procedures.

17. Prevention

We recognise that the company plays a significant part in the prevention of harm to children by providing them with good lines of communication with trusted adults, supportive friends and an ethos of protection.

The company community will therefore:

- establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.
- ensure that all children know there is an adult in the company whom they can approach if they are worried or in difficulty.
- include opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help.

18. Health & Safety

Our Health & Safety policy, set out in a separate document, reflects the consideration we give to the protection of children both physically within the company environment.

19. Security

All staff have a responsibility for maintaining awareness of buildings and grounds security and for reporting concerns that may come to light. We welcome comments from children, parents and others about areas that may need improvement as well as what we are doing well.

The company will not accept the behaviour of any individual (parent or other) that threatens company security or leads others (pupil/student or staff) to feel unsafe. Such behaviour will be treated as a serious concern and may result in a decision to refuse access for that individual to the company site.

20. Safer Recruitment

Recruitment, selection and pre-employment vetting

It is vital that Elevate Sports Coaching creates a culture of safe recruitment and as part of that, adopt recruitment procedures that help deter, reject or identify people who might abuse children. This part of the policy describes in detail those checks that are, or may be, required for any individual working in any capacity at company. The employer must act reasonably in making decisions about the suitability of the prospective employee based on checks and evidence including: criminal record checks (DBS checks), barred list checks and prohibition checks together with references and interview information.

The level of DBS certificate required and whether a prohibition check is required, will depend on the role and duties of an applicant to work in the company, as outlined in this policy.

For most appointments, an enhanced DBS certificate, which includes barred list information, will be required as most staff will be engaging in regulated activity. In summary, a person will be engaging in regulated activity if as a result of their work they:

- will be responsible, on a regular basis in a school or company, for coaching, training, instructing, caring for or supervising children; or
- will carry out paid, or unsupervised unpaid, work regularly in a school or company where that work provides an opportunity for contact with children or
- engage in intimate or personal care or overnight activity, even if this happens only once.

For all other staff who have an opportunity for regular contact with children who are not engaging in regulated activity, an enhanced DBS certificate, which does not include a barred list check, will be appropriate.

Regulated activity

The full legal definition of regulated activity is set out in Schedule 4 of the Safeguarding Vulnerable Groups Act 2006 as amended by the Protection of Freedoms Act 2012. HM Government have produced a [factual note on Regulated Activity in relation to Children: scope](#).

Regulated activity includes:

- a) teaching, training, instructing, caring for (see (c) below) or supervising children if the person is unsupervised, or providing advice or guidance on wellbeing, or driving a vehicle only for children,
- b) work for a limited range of establishments (known as ‘specified places’, which include schools and companies), with the opportunity for contact with children, but not including work done by supervised volunteers;

Work under (a) or (b) is regulated activity only if done regularly.¹ Some activities are always regulated activities, regardless of their frequency or whether they are supervised or not. This includes:

- b) relevant personal care, or health care provided by or provided under the supervision of a health care professional:
 - personal care includes helping a child, for reasons of age, illness or disability, with eating or drinking, or in connection with toileting, washing, bathing and dressing;²
 - health care means care for children provided by, or under the direction or supervision of, a regulated health care professional.

Types of check

Disclosure and Barring Service (DBS) checks

The DBS is responsible for administering three types of checks

- **Standard:** a check of the Police National Computer (PNC) records of convictions, cautions, reprimands and warnings;
- **Enhanced:** a check of the PNC records as above, plus other information held by the police that is considered relevant by the police; and
- **Enhanced, which will automatically include barred list information:** for people working in regulated activity with children. This adds checks of the DBS Children’s Barred List to the enhanced check.

More information is available on the [DBS website](#).

When the DBS has completed its check of an applicant’s PNC record and if appropriate, whether they are on the barred list, the relevant information will be recorded on a certificate (the DBS certificate) that is sent to

the applicant. The applicant must show the original DBS certificate to their potential employer before they take up post or as soon as practicable afterwards.

Where a school or company allows an individual to start work in regulated activity before the DBS certificate is available, then they should ensure that the individual is appropriately supervised and that all other checks, including a separate barred list check, have been completed.

For staff who work in childcare provision or who are directly concerned with the management of such provision, the company needs to ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the Childcare (Disqualification) Regulations 2009. Further information on the staff to whom these regulations apply, the checks that should be carried out, and the recording of those checks can be found in [Disqualification under the Childcare Act 2006](#) statutory guidance.

If a school or company knows or has reason to believe that an individual is barred, it commits an offence if it allows the individual to carry out any form of regulated activity. There are penalties of up to five years in prison if a barred individual is convicted of attempting to engage or engaging in such work.

Pre-appointment checks

All new appointments

Any offer of appointment made to a successful candidate, including one who has lived or worked abroad, must be conditional on satisfactory completion of the necessary pre-employment checks.

When appointing new staff, schools and companies must

- verify a candidate's identity. [Identification checking guidelines](#) can be found on the [DBS website](#);
- obtain a certificate for an enhanced DBS check which will include barred list information, for those who will be engaging in regulated activity;
- obtain a separate barred list check if an individual will start work in regulated activity before the DBS certificate is available;
- verify the candidate's mental and physical fitness to carry out their work responsibilities. A job applicant can be asked relevant questions about disability and health in order to establish whether they have the physical and mental capacity for the specific role;
- verify the person's right to work in the UK. If there is uncertainty about whether an individual needs permission to work in the UK, then prospective employers, or volunteer managers, should follow advice on the [GOV.UK](#) website;
- if the person has lived or worked outside the UK, make any further checks the school or company consider appropriate and
- verify professional qualifications, as appropriate.

Employment history and references

Employers should always ask for written information about previous employment history and check that information is not contradictory or incomplete. References should be sought on all short-listed candidates, including internal ones, before interview, so that any issues of concern they raise can be explored further with the referee and taken up with the candidate at interview.

The purpose of seeking references is to obtain objective information to support appointment decisions. References should always be obtained, scrutinised and any concerns resolved satisfactorily, before the appointment is confirmed. They should always be requested directly from the referee and employers should not rely on open references, for example in the form of 'to whom it may concern' testimonials. If a candidate for a teaching post is not currently employed as a teacher, it is also advisable to check with the school, company or local authority at which they were most recently employed, to confirm details of their employment and their reasons for leaving.

On receipt, references should be checked to ensure that all specific questions have been answered satisfactorily. The referee should be contacted to provide further clarification as appropriate: for example, if the answers are vague. They should also be compared for consistency with the information provided by the candidate on their application form. Any discrepancies should be taken up with the candidate.

Any information about past disciplinary action or allegations should be considered carefully when assessing the applicant's suitability for the post (including information obtained from the Employer Access Online checks referred to previously).

Existing staff

If a company has concerns about an existing staff member's suitability to work with children, the company should carry out all relevant checks as if the person were a new member of staff. Similarly, if a person working at the company moves from a post that was not regulated activity, into work which is regulated activity, the relevant checks for the regulated activity must be carried out. Apart from these circumstances, the school or company is not required to request a DBS check or barred list check.

Schools and companies have a legal duty to refer to the DBS anyone who has harmed, or poses a risk of harm, to a child or vulnerable adult; where the harm test is satisfied in respect of that individual; where the individual has received a caution or conviction for a relevant offence, or if there is reason to believe that individual has committed a listed relevant offence; and that individual has been removed from working (paid or unpaid) in regulated activity, or would have been removed had they not left.³ The DBS will consider whether to bar the person. Referrals should be made as soon as possible after the resignation or removal of the individual. Guidance on referrals can be found on [GOV.UK](https://www.gov.uk).

Volunteers

Under no circumstances should a volunteer in respect of whom no checks have been obtained be left unsupervised or allowed to work in regulated activity.

Volunteers who on an unsupervised basis teach or look after children regularly or provide personal care on a one-off basis in schools and companies will be in regulated activity. The school or company should obtain an enhanced DBS certificate (which should include barred list information) for all volunteers who are new to working in regulated activity. Existing volunteers in regulated activity do not have to be re-checked if they have already had a DBS check (which includes barred list information). However, schools and companies may conduct a repeat DBS check (which should include barred list information) on any such volunteer should they have concerns.

Schools and companies may obtain an enhanced DBS certificate (not including barred list information), for volunteers who are not engaging in regulated activity, but have the opportunity to come into contact with children on a regular basis, e.g. supervised volunteers (see paragraph below regarding The Protection of

Freedoms Act 2012 for supervision). Employers are not legally permitted to request barred list information on a volunteer who, because they are supervised, is not in regulated activity.

The school or company should undertake a risk assessment and use their professional judgement and experience when deciding whether to seek an enhanced DBS check for any volunteer not engaging in regulated activity. In doing so they should consider:

- the nature of the work with children;
- what the establishment knows about the volunteer, including formal or informal information offered by staff, parents and other volunteers;
- whether the volunteer has other employment or undertakes voluntary activities where referees can advise on suitability; and
- whether the role is eligible for an enhanced DBS check.

Adults who supervise children on work experience

When the company organises work experience placements it should ensure that policies and procedures are in place to protect children from harm.

Barred list checks by the DBS might be required on some people who supervise a child under the age of 16 on a work experience placement. The company should consider the specific circumstances of the work experience, in particular the nature of the supervision and the frequency of the activity being supervised, to determine what, if any, checks are necessary. These considerations would include whether the person providing the teaching/training/instruction/supervision to the child will be:

- unsupervised; and
- providing the teaching/training/instruction frequently (at least once a week or on more than three days in a 30 day period, or overnight).

If the person working with the child is unsupervised and the same person is in frequent contact with the child, the work is likely to be regulated activity. If so, the company could ask the employer providing the work experience to ensure that the person providing the instruction or training is not a barred person.

If the activity undertaken by the child on work experience takes place in a ‘specified place’, such as a school or company and gives the opportunity for contact with children, this may itself be considered to be regulated activity. In these cases and where the child is 16 years of age or over, the work experience provider should consider whether a DBS enhanced check should be requested for the child/young person in question. DBS checks cannot be requested for children/young people under the age of 16.

21. Contacts

Local Authority Designated Officer (LADO) 0300 123 1650 Children’s Safeguarding Unit 01323 466606

<https://www.essex.gov.uk/topic/report-a-concern-about-a-child>

or use the link above to report issues to local Authorities

Elevate Sports Coaching

▪ Mr Jacob Adams

Jacob@Elev8sports.co.uk Tel:07582379139

Appendix 1: Definitions of Abuse and Indicators of Harm

PHYSICAL ABUSE

Physical abuse 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.

Indicators in the child:

Bruising

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non accidental unless there is evidence or an adequate explanation provided:

- bruising in or around the mouth;
- two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive);
- repeated or multiple bruising on the head or on sites unlikely to be injured accidentally, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas;
- variation in colour possibly indicating injuries caused at different times;
- the outline of an object used e.g. belt marks, hand prints or a hair brush;
- linear bruising at any site, particularly on the buttocks, back or face;
- bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting;
- bruising around the face;
- grasp marks to the upper arms, forearms or leg;
- petechae haemorrhages (pinpoint blood spots under the skin). Commonly associated with slapping, smothering/suffocation, strangling and squeezing.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a student will have had a fracture without the carers being aware of the student's distress.

If the student is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.

There are grounds for concern if:

- the history provided is vague, non-existent or inconsistent;
- there are associated old fractures;
- medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement.

Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.

Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the student will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

Mouth Injuries

Tears to the frenulum (tissue attaching upper lip to gum) often indicates force feeding of a baby or a student with a disability. There is often finger bruising to the cheeks and around the mouth. Rarely, there may also be grazing on the palate.

Poisoning

Ingestion of tablets or domestic poisoning in children under 5 is usually due to the carelessness of a parent or carer, but it may be self-harm even in young children.

Fabricated or Induced Illness

Professionals may be concerned at the possibility of a student suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:

- discrepancies between reported and observed medical conditions, such as the incidence of fits;
- attendance at various hospitals, in different geographical areas;
- development of feeding / eating disorders, as a result of unpleasant feeding interactions;
- the student developing abnormal attitudes to their own health;
- non-organic failure to thrive - a student does not put on weight and grow and there is no underlying medical cause;
- speech, language or motor developmental delays;
- dislike of close physical contact;
- attachment disorders;
- low self-esteem;
- poor quality or no relationships with peers because social interactions are restricted;
- poor attendance at company and under-achievement.

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded.

Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.

Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a student, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:

- a responsible adult checks the temperature of the bath before the child gets in;
- a child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet;
- a child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks.

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse.

Emotional/behavioural presentation:

- refusal to discuss injuries;
- admission of punishment which appears excessive;
- fear of parents being contacted and fear of returning home;
- withdrawal from physical contact;
- arms and legs kept covered in hot weather;
- fear of medical help;
- aggression towards others;
- frequently absent from company;
- an explanation which is inconsistent with an injury;
- several different explanations provided for an injury.

Indicators in the parent:

- may have injuries themselves that suggest domestic violence;
- not seeking medical help/unexplained delay in seeking treatment;
- reluctant to give information or mention previous injuries;
- absent without good reason when their student is presented for treatment;
- disinterested or undisturbed by accident or injury;
- aggressive towards students or others;
- unauthorised attempts to administer medication;
- tries to draw the student into their own illness;
- past history of childhood abuse, self-harm, false allegations of physical or sexual assault;
- parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids;
- observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care;
- may appear unusually concerned about the results of investigations which may indicate physical illness in the child;
- wider parenting difficulties may (or may not) be associated with this form of abuse;
- parent/carer has convictions for violent crimes.

Indicators in the family/environment:

- marginalised or isolated by the community;
- history of mental health, alcohol or drug misuse or domestic violence;
- history of unexplained death, illness or multiple surgeries in parents and/or siblings of the family;
- past history of childhood abuse, self-harm, false allegations of physical or sexual assault or a culture of physical chastisement.

EMOTIONAL ABUSE

Emotional abuse is 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 children 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 the 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 cyberbullying), 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.

Indicators in the child:

- developmental delay;
- abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment;

- aggressive behaviour towards others;
- child 'scapegoated' within the family;
- frozen watchfulness, particularly in pre-school children;
- low self-esteem and lack of confidence;
- withdrawn or seen as a 'loner' - difficulty relating to others;
- over-reaction to mistakes;
- fear of new situations;
- inappropriate emotional responses to painful situations;
- neurotic behaviour (e.g. rocking, hair twisting, thumb sucking);
- self-harm;
- fear of parents being contacted;
- extremes of passivity or aggression;
- drug/solvent abuse;
- chronic running away;
- compulsive stealing;
- low self-esteem;
- air of detachment – 'don't care' attitude;
- social isolation – does not join in and has few friends;
- depression, withdrawal;
- behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention;
- low self-esteem, lack of confidence, fearful, distressed, anxious;
- poor peer relationships including withdrawn or isolated behaviour.

Indicators in the parent:

- domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse;
- abnormal attachment to child e.g. overly anxious or disinterest in the child;
- scapegoats one child in the family;
- imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection;
- wider parenting difficulties may (or may not) be associated with this form of abuse.

Indicators of in the family/environment:

- lack of support from family or social network;
- marginalised or isolated by the community;
- history of mental health, alcohol or drug misuse or domestic violence;
- history of unexplained death, illness or multiple surgeries in parents and/or siblings of the family;
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

NEGLECT

Neglect is 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 as a result 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 care-givers); or*
- *ensure access to appropriate medical care or treatment.*

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

Indicators in the child:

Physical presentation:

- failure to thrive or, in older children, short stature;
- Underweight;
- frequent hunger;
- dirty, unkempt condition;
- inadequately clothed, clothing in a poor state of repair;
- red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold;
- swollen limbs with sores that are slow to heal, usually associated with cold injury;
- abnormal voracious appetite;
- dry, sparse hair.
- recurrent / untreated infections or skin conditions e.g. eczema or persistent head lice / scabies/ diarrhoea;
- unmanaged / untreated health / medical conditions including poor dental health;
- frequent accidents or injuries.

Development:

- general delay, especially speech and language delay;
- inadequate social skills and poor socialization.

Emotional/behavioural presentation:

- attachment disorders;
- absence of normal social responsiveness;
- indiscriminate behaviour in relationships with adults;
- emotionally needy;
- compulsive stealing;
- constant tiredness;
- frequently absent or late at company;
- poor self-esteem;
- destructive tendencies;
- thrives away from home environment;
- aggressive and impulsive behaviour;
- disturbed peer relationships;
- self-harming behaviour.

Indicators in the parent:

- dirty, unkempt presentation;
- inadequately clothed;
- inadequate social skills and poor socialisation;
- abnormal attachment to the child .e.g. anxious;
- low self-esteem and lack of confidence;

- failure to meet the basic essential needs e.g. adequate food, clothes, warmth, and hygiene;
- failure to meet the child's health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy;
- child left with adults who are intoxicated or violent;
- child abandoned or left alone for excessive periods;
- wider parenting difficulties may (or may not) be associated with this form of abuse;

Indicators in the family/environment:

- history of neglect in the family;
- family marginalised or isolated by the community;
- family has history of mental health, alcohol or drug misuse or domestic violence;
- history of unexplained death, illness or multiple surgeries in parents and/or siblings of the family;
- family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement;
- dangerous or hazardous home environment including failure to use home safety equipment; risk from animals;
- poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating;
- lack of opportunities for child to play and learn.

SEXUAL ABUSE

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 or not 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, 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.

Indicators in the child:

Physical presentation:

- urinary infections, bleeding or soreness in the genital or anal areas;
- recurrent pain on passing urine or faeces;
- blood on underclothes;
- sexually transmitted infections;
- vaginal soreness or bleeding;
- pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father;
- physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing.

Emotional/behavioural presentation:

- makes a disclosure;
- demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit;
- inexplicable changes in behaviour, such as becoming aggressive or withdrawn;
- self-harm - eating disorders, self-mutilation and suicide attempts;
- poor self-image, self-harm, self-hatred;
- reluctant to undress for PE;
- running away from home;
- poor attention / concentration (world of their own);
- sudden changes in company work habits, become truant;
- withdrawal, isolation or excessive worrying;
- inappropriate sexualised conduct;
- sexually exploited or indiscriminate choice of sexual partners;
- wetting or other regressive behaviours e.g. thumb sucking;
- draws sexually explicit pictures;
- depression.

Indicators in the parents:

- comments made by the parent/carer about the child;
- lack of sexual boundaries;
- wider parenting difficulties or vulnerabilities;
- grooming behaviour;
- parent is a sex offender.

Indicators in the family/environment:

- marginalised or isolated by the community;
- history of mental health, alcohol or drug misuse or domestic violence;
- history of unexplained death, illness or multiple surgeries in parents and/or siblings of the family;
- past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement;
- family member is a sex offender;
- physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to the child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

Appendix 2: Safeguarding and Wellbeing Concerns

SAFEGUARDING INCIDENT / WELFARE CONCERN FORM

Student Name:	Mentor:	House:
Name and position of person completing form (please print):		
Time and Date of Incident / Concern:		
Incident / Concern (who / what / where / when?):		
Any other relevant information (witnesses, immediate action taken):		
Action taken:		
Reporting Staff Signature		Date:

DCPT – Response / Outcome

DCPT Signature

Date:

Appendix 3: Disclosure and Barring Service checks

These are the types of checks available to those working with children:

Type of check	What the check involves	Positions eligible for this level of check
Standard check	Check of the Police National Computer records of convictions, cautions, reprimands and warnings.	The position being applied for must be covered by an exempted question in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.
Enhanced check	Check of the Police National Computer records plus other information held by police such as interviews and allegations. This information must be relevant to the sector and be approved by the police for inclusion on the certificate.	The position being applied for must be covered by an exempted question in both the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and in Part 5 of the Police Act 1997 (Criminal Records) Regulations.*
Enhanced criminal record check with children's and/or adult's barred list information	Check of the Police National Computer records plus other information held by police plus check of the DBS Children's Barred List plus check of the DBS Adults' Barred List.	The position must be eligible for an enhanced level criminal record check as above and be for a purpose listed in Regulation 5 of the Police Act 1997 (Criminal Records) Regulations* as able to check the barred list(s).

* This legislation does not provide a list of job roles that are eligible for this check – such a list does not exist. Instead, the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 sets out the 'exempted questions' for which a standard check can be obtained. Similarly, the Police Act 1997 (Criminal Records) Regulations 2002 set out the purposes for which an enhanced check can be obtained, and the Police Act 1997 (Criminal Records) (No 2) Regulations 2009 list the circumstances in which an enhanced check will automatically include a barred list check. It is important to note that the Regulations can also remove roles, duties or activities through the removal of an exempted question or of a particular purpose. The Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, the Police Act 1997 (Criminal Records) Regulations 2002 and the Police Act 1997 (Criminal Records) (No 2) Regulations 2009 can all be found on the [legislation website](#).

The basic criminal record check can be undertaken on any applicant for work which does not involve working with children. Currently, this service is available to any employer and self-employed people anywhere in the UK but it must be requested through Disclosure Scotland. The DBS plans to offer basic criminal record checks in the future.