



## TNCC & MCYC Safeguarding Policy and Procedures

**Reviewed:** January 2026

**Review due by:** January 2029

### Our Safeguarding Policy

This policy applies to all staff, including the board of trustees, paid workers, volunteers and anyone working on behalf of Merseyside Christian Youth Camps (MCYC)

The purpose of this policy is:

- To protect children, young people and vulnerable adults attending MCYC or using a service provided by MCYC;
- To provide staff and volunteers with the overarching principles that guides our approach to safeguarding.

MCYC believes that a child or young person should never experience abuse of any kind. We have a responsibility to promote the welfare of all children and young people and to keep them safe. We are committed to practise in a way that protects them.

### Legal Framework

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

- Children Act 1989
- United Convention on the Rights of the Child 1991
- UK GDPR and Data Protection Act 2018
- Sexual Offences Act 2003
- Domestic Abuse Act 2021
- Children Act 2004
- Protection of Freedoms Act 2012
- Relevant government guidance on safeguarding children
- Working Together 2023

**Please note that the use of the term 'staff' in this document includes voluntary staff**



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## 1 Introduction

### What is the difference between Safeguarding and Child Protection?

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment
- preventing impairment of children's and learners' health or development
- ensuring children are growing up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

Child Protection is a part of Safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Effective child protection is essential as part of wider work to safeguard and promote the welfare of children. However, all agencies and individuals should aim to proactively safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced.

### We recognise that:

- The welfare of the child is paramount, as enshrined in the Children Act 1989.
- All children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have a right to equal protection from all types of harm or abuse.
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.

There are six main elements to our policy:

- Ensuring we practise safe recruitment in checking the suitability of staff and volunteers to work with children;
- Raising awareness of safeguarding children and child protection
- Equipping children with the skills needed to keep them safe;
- Developing and implementing procedures for identifying and reporting cases, or suspected cases of abuse;
- Supporting children who have been abused in accordance with his/her child protection plan;
- Establishing a safe environment for children

## 1.1 Commitment

- MCYC is committed to creating and maintaining a safe environment for children and young people, identifying where there are child welfare concerns and taking action to address them, in partnership with families and other agencies. This policy is in line with “Working Together” (2023) <http://www.workingtogetheronline.co.uk/>

## 1.2 Duties

To provide a safe environment the TNCC Trust, MCYC Council, the Designated Safeguarding Lead (DSL) and Deputy DSL will:

- Ensure that everyone has appropriate safeguards and supports in place should they choose to raise safeguarding issues, however unusual or sensitive these may be;
- Establish and maintain an environment where children feel secure, are encouraged to talk without coercion and are listened to;
- Ensure children know that if they are worried they can talk to adults;
- Ensure that every effort is made to establish effective relationships with parents other agencies and are fully committed to the provision of Early Help;
- Ensure all adults working with children are aware of the role of the relevant Safeguarding Children’s Board
- Take all reasonable measures to ensure risks of harm to children’s welfare are minimised;
- Take all appropriate actions to address concerns about the welfare of a child, working to local policies and procedures in full working partnership with families and agencies as far as possible;
- Ensure robust safeguarding arrangements are in place and embedded in the daily life and practice of the MCYC;
- Promote health and safety;
- Promote safe practice and challenge unsafe practice in line with procedure;
- Ensure that procedures are in place to deal with allegations of abuse against staff and volunteers
- Put in place and promote a robust anti-bullying policy
- Meet the health needs of children with medical conditions;
- Provide first aid;
- Make reasonable efforts to keep the site secure;
- Undertake risk assessments for safeguarding and security while campers and staff are on or off site
- Tackle drugs and substance misuse;
- Work with all agencies with regard to missing children, anti-social behaviour/gang activity, child sexual exploitation, radicalisation and extremism, and violence/knife crime in the community.



## 2 Responsibilities

The MCYC will identify harm and maintain safety by:

- Everybody having a duty to safeguard children in all aspects of MCYC's operations
- Involving parents and providing advice/guidance regarding safeguarding;
- Maintaining a child focus and listening to children;
- Recognising signs of concern, especially with children who may be vulnerable;
- Documenting and collating information on individual children to support early identification, referral and actions to safeguard;
- Taking appropriate actions to address concerns about a child's welfare in partnership with other organisations and safeguarding agencies;
- Informing all staff and volunteers who the MCYC Designated and Deputy Safeguarding leads are.

### 2.1 The roles and responsibilities of the Designated Safeguarding Lead (DSL) and the Deputy DSL

MCYC Designated Safeguarding Lead: Julie Woods

Supervised by: Joel Fraser

A Deputy DSL has been appointed and will provide additional support to ensure the responsibilities for safeguarding children are fully adhered to and that specific duties are discharged. This will entail supporting the Designated Safeguarding Lead they have received appropriate training and are supported in their role:

Deputy DSL: Joel Fraser

Supervised by: Julie Woods

The Designated Safeguarding Lead will ensure a structured procedure within MCYC, which will be followed in cases of suspected abuse.

#### 2.1.1 Referrals

- Referring cases of suspected abuse or allegations to the relevant investigating agencies;
- Acting as a source of support, advice and expertise when deciding on the most appropriate course of action by liaising with relevant agencies;
- Liaising with the Chair of TNCC trust to inform him/her of any issues and ongoing investigations. The Designated Safeguarding Lead (DSL) will ensure there is always cover for this role in the event of their absence;
- Ensuring that a systematic means of monitoring children known or thought to be at risk of harm is in place.

Following any information raising concern, the Designated Safeguarding Lead (DSL) will consider:

- any urgent medical needs of the child
- the immediate safety and wellbeing of the child
- discussing the matter with other agencies currently known to be involved with the child and family
- the child's wishes and feelings

Then decide:

- wherever possible, to talk to parents, unless to do so may place a child at risk of significant harm, impede any police investigation and/or place the member of staff or others at risk
- whether to make a child protection referral because a child is suffering or is likely to suffer significant harm and if this needs to be undertaken immediately

**OR**

- not to make a referral at this stage

All information and actions taken, including the reasons for any decisions made, will be fully documented on the child's safeguarding file.

**All safeguarding concerns, disclosures, or allegations must be reported immediately to the Designated Safeguarding Lead (DSL) or Deputy DSL. Concerns must never be delayed, deferred until later, or held until the end of an activity or day.**

### **2.1.2 Action following a child protection referral**

The Designated Safeguarding Lead (DSL) or other appropriate person will:

- provide a report for, attend and contribute to any subsequent child protection conference

### **2.1.2 Raising Awareness**

- Working with the TNCC Trust and MCYC to ensure that MCYC's Safeguarding Policy is updated and reviewed annually;
- Ensuring that, in order to avoid conflict and mistrust, parents are aware that referrals may be made and of the role of MCYC
- Cascading safeguarding advice and guidance

### **2.1.3 Training**

The Designated and Deputy Designated Safeguarding Lead (DSL)s will ensure **all** staff receive appropriate Safeguarding training.



The Designated and Deputy Designated Safeguarding Lead (DSL)s will receive appropriate training every two years with annual updates.

All staff will be expected to undergo endorsed Basic Awareness in Safeguarding training before working for MCYC. This will enable them to understand and fulfil their safeguarding responsibilities effectively.

In addition all staff members should receive regular safeguarding and child protection updates (for example, via email and at staff meetings), as required, to provide them with relevant skills and knowledge to safeguard children effectively.

All staff and volunteers will receive:

- a copy of a safeguarding summary document
- induction training to ensure that staff
  - have an overview of the organisation
  - understand its purpose, values, services and structure
  - are able to recognise/identify signs of abuse which may include:
    - significant changes in children's behaviour;
    - deterioration in children's general well-being;
    - unexplained bruising, marks or signs of possible abuse or neglect;
    - children's comments which give cause for concern;
    - any reasons to suspect neglect or abuse outside the setting, for example in the child's home; and/or
    - inappropriate behaviour displayed by other members of staff, or any other person working with the children. For example, inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their usual role and responsibilities; or inappropriate sharing of personal information (e.g. phone numbers, email, social networking) or images.
  - know that they must report any concerns immediately they arise and to whom
  - understand confidentiality issues.

## 2.2 Trustee Safeguarding Responsibilities

- The Trustees hold overall responsibility for safeguarding within Tyn Y Nant & MCYC and for ensuring that appropriate safeguarding policies, procedures, and practices are in place and are effective. Trustees provide oversight and assurance that safeguarding arrangements are being implemented correctly, that concerns are responded to appropriately, and that safeguarding remains a standing consideration in governance and decision-making. The Trustees are responsible for ensuring that any safeguarding matters which meet the threshold for serious incident reporting are reported promptly to the appropriate bodies, including the Charity Commission where required.
- Steve Smith is the **Safeguarding Trustee** and acts as the link between the Trustees and the Designated Safeguarding Lead, providing scrutiny, challenge, and support in relation to safeguarding matters.



- During a week of MCYC Directors may delegate the role of Designated Safeguarding Lead (DSL) to other appropriate staff; however, overall accountability for safeguarding remains with the Director at all times. Delegation of tasks does not remove or reduce responsibility for ensuring that safeguarding duties are properly discharged.

### 2.3 Group Bookings and External Groups

- All group bookings attending MCYC activities must provide accurate and up-to-date parental or carer contact details for all children and young people attending. This information must be provided in advance and be accessible to the MCYC leadership team during the activity.
- Where groups are accompanied by their own leaders or safeguarding representatives, MCYC retains overall responsibility for safeguarding while activities are taking place. Any safeguarding concern, disclosure, or allegation involving a child must be reported immediately to the MCYC Designated Safeguarding Lead (DSL) or Deputy DSL. This applies even where a visiting group has its own safeguarding procedures or designated lead.
- MCYC will work cooperatively with group leaders and relevant organisations, but all safeguarding decisions, referrals, and record-keeping will be managed through MCYC safeguarding procedures.

### 2.4 Safeguarding in Residential and Camp Settings

MCYC operates residential and camp-based activities where additional safeguarding arrangements are required. Specific safeguarding procedures are in place to address risks associated with residential settings, including supervision arrangements, missing children, one-to-one contact, overnight accommodation, transport, intimate care, physical intervention, and visitor management.

All staff and volunteers must follow the agreed MCYC camp safeguarding procedures at all times. Failure to follow these procedures may place children or adults at risk and will be treated as a safeguarding concern.

## 3 Identifying Concerns

Volunteers are well placed to observe any physical, emotional or behavioural signs, which indicate that a child may be suffering significant harm. The relationships between staff, children, parents and the public which foster respect, confidence and trust can lead to disclosures of abuse, and/or being alerted to concerns.

### 3.1 Definitions:

**A child:** As in the Children Act of 1989 and 2004, a child is anyone who has not yet reached his/her 18<sup>th</sup> birthday or in the case of disabled children 25 years.

**Harm** means ill-treatment or impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another;

**Development** means physical, intellectual, emotional, social or behavioural development;

**Health** includes physical and mental health;

**Ill-treatment** includes sexual abuse and other forms of ill-treatment which are not physical.

**Abuse and Neglect** are forms of maltreatment. Somebody may abuse or neglect a child by 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 a stranger. They may be abused by an adult or adults or another child or children.

**Physical Abuse** may involve the 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.

**Sexual Abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily a high level of violence, whether or not the child is aware of what is happening. These activities may involve physical contact, including penetrative (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may include non-contact activities, such as involving children looking at or in the production of, sexual images, watching sexual activities, or 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.

**Emotional Abuse** is the persistent emotional ill treatment 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.
- not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate
- 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.
- may involve seeing or hearing the ill-treatment of another.
- may involve serious bullying (including cyber-bullying) causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

### **Domestic Abuse**

Domestic abuse is recognised as a safeguarding concern. It can include physical, emotional, sexual, or psychological abuse, as well as coercive and controlling behaviour and economic abuse. Domestic abuse can occur between adults and can also have a significant impact on children and young people, even where they are not the direct victims.

Staff must be alert to signs of domestic abuse and understand that coercive control and economic abuse may not involve physical violence but can still cause serious harm. Any concerns relating to domestic abuse must be reported immediately to the Designated Safeguarding Lead (DSL).

**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 or 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-takers
- ensure access to appropriate medical care or treatment.

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

### **Safeguarding Children Who Are Vulnerable to Extremism**

Since 2010, when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been several occasions both locally and nationally in which extremist groups have attempted to radicalise vulnerable children and young people to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.

The current threat from terrorism in the United Kingdom may include the exploitation of vulnerable people, to involve them in terrorism or in activity in support of terrorism. The normalisation of extreme views may also make children and young people vulnerable to future manipulation and exploitation. MCYC's policy is clear that this exploitation and radicalisation should be viewed as a safeguarding concern.

**Definitions of radicalisation and extremism, and indicators of vulnerability to radicalisation are in Appendix 4.**

MCYC seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

Designated Safeguarding Lead will assess the level of risk within the MCYC and put actions in place to reduce that risk.

The Prevent **Single Point of Contact** (SPOC) will be the lead within the organisation for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism (this will normally be the Designated Safeguarding Lead (DSL)). The SPOC for MCYC is Julie Woods. The responsibilities of the SPOC are described in Appendix 5.



When any member of staff has concerns that a child may be at risk of radicalisation or involvement in terrorism, they should speak with the SPOC and to the Designated Safeguarding Lead (DSL) if this is not the same person.

Numerous factors can contribute to and influence the range of behaviours that are defined as violent extremism, but most young people do not become involved in extremist action. For this reason the appropriate interventions in any particular case may not have any specific connection to the threat of radicalisation, for example they may address mental health, relationship or drug/alcohol issues.

### **Safeguarding Children Who Are Vulnerable to Exploitation, Forced Marriage, Honour Based Violence, Female Genital Mutilation, or Trafficking**

MCYC keeps itself up to date on the latest advice and guidance provided to assist in addressing specific vulnerabilities and forms of exploitation.

Our staff are supported to recognise warning signs and symptoms in relation to specific issues

Our Designated Safeguarding Lead (DSL) knows where to seek and get advice as necessary.

**Child sexual exploitation** is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- Children who suffer from changes in emotional well-being;
- Children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late;

**HBV or FGM** - So-called 'honour-based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so called HBV are abuse (regardless of the



motivation) and should be handled and escalated as such. If in any doubts staff should speak to the designated safeguarding lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

If staff have a concern regarding a child that might be at risk of HBV they should report this to the Designated Safeguarding Lead (DSL) immediately.

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

If staff have a concern regarding a child that might be at risk of FGM they should report this to the Designated Safeguarding Lead (DSL) immediately.

**Forced marriage** - Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some communities use religion and culture as a way to coerce a person into marriage.

If staff have a concern regarding a child that might be at risk of forced marriage they should report this to the Designated Safeguarding Lead (DSL) immediately.

Staff can contact the Forced Marriage Unit if they need advice or information. Contact: 020 7008 0151 or email: [fm@fco.gov.uk](mailto:fm@fco.gov.uk).

## **Sexting**

Whilst professionals refer to the issue as 'sexting' there is no clear definition of 'sexting'. Many professionals consider sexting to be 'sending or posting sexually suggestive images, including nude or semi-nude photographs, via mobiles or over the Internet.' Yet when young people are asked 'What does sexting mean to you?' they are more likely to interpret sexting as 'writing and sharing explicit messages with people they know'. Similarly, many parents think of sexting as flirty or sexual text messages rather than images. This only covers the sharing of sexual imagery by young people. Creating and sharing sexual photos and videos of under-18s is illegal and therefore causes the greatest complexity for MCYCs and other agencies when responding. It also presents a range of risks, which need careful management. On this basis current advice introduces the phrase 'youth produced sexual imagery' and uses this instead of 'sexting.' This is to ensure clarity about the issues current advice addresses.

'Youth produced sexual imagery' best describes the practice because:



- 'Youth produced' includes young people sharing images that they, or another young person, have created of themselves.
- 'Sexual' is clearer than 'indecent.' A judgement of whether something is 'decent' is both a value judgement and dependent on context.
- 'Imagery' covers both still photos and moving videos (and this is what is meant by reference to imagery throughout the document).

The types of incidents which this covers are:

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

Staff should report any concerns to the Designated Safeguarding Lead (DSL) without delay.

### **3A Safeguarding Adults at Risk**

MCYC recognises that, in addition to children and young people, some adults may be at risk of abuse or neglect. An adult at risk is defined, under the Care Act 2014, as a person aged 18 or over who has needs for care and support and who is experiencing, or is at risk of, abuse or neglect, and as a result of those needs is unable to protect themselves.

MCYC is committed to safeguarding adults at risk in line with the Care Act 2014 and local Safeguarding Adults Board procedures. All staff and volunteers have a responsibility to act if they are concerned that an adult at risk may be experiencing abuse or neglect.

Concerns about an adult at risk must be reported immediately to the Designated Safeguarding Lead (DSL) or Deputy DSL. The DSL will consider the most appropriate response, including referral to Adult Social Care or other relevant agencies. Consent will be sought wherever appropriate; however, lack of consent must not prevent action being taken where there is a risk of serious harm or where others may be at risk.

### **3.2 Disclosure**

All members of staff and volunteers must know how to respond to a child who discloses abuse, and they must be familiar with procedures to be followed. This section refers to how MCYC staff should deal with matters related to disclosure and describes the approach expected of staff

It takes a lot of courage for a child to disclose that they are being abused. They may feel disloyal, ashamed, particularly if the abuse is sexual, their abuser may have threatened what will happen if they tell, they may have lost all trust in adults, or they may believe, or have been told, that the abuse is their own fault. If a child talks to you about any risks to their safety or wellbeing you will need to let them know that you must pass the information on – you are not allowed to keep secrets. The point at which you do this is a matter for professional judgement. If you jump in immediately the child may think that you do not want to listen, if you leave it till the very end of the conversation, the child may feel that you have misled them into revealing more than they would have otherwise.

During your conversation with the child:

- Allow them to speak freely.
- Remain calm and do not over react – the child may stop talking if they feel they are upsetting you.
- Give reassuring nods or words of comfort – ‘I’m so sorry this has happened’, ‘I want to help’, ‘This isn’t your fault’, ‘You are doing the right thing in talking to me’.
- Do not be afraid of silences – remember how hard this must be for the child.
- Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child’s mother/father think about all this. Use TED – Tell me about that, Explain that to me, Describe that...
- At an appropriate time tell the child that in order to help them you must pass the information on.
- Respect the child’s personal space. Do not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused.
- Avoid admonishing the child for not disclosing earlier. Saying ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be your way of being supportive but the child may interpret it that they have done something wrong.
- Tell the child what will happen next.
- Report verbally to the Designated Safeguarding Lead (DSL).
- Write up your conversation as soon as possible on the record of concern form and hand it to the designated person. (**Appendix 6**)
- If a member of staff has a conversation with a parent that raises a safeguarding concern then the details of the conversation must be recorded and passed immediately to the Safeguarding Lead.
- All other issues concerning children’s behaviour, attitude or otherwise, that does not trigger a safeguarding concern, should be recorded on a confidential note.
- Seek support if you feel distressed.
- 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.

#### **4 Confidentiality**

While it is recognised that all matters relating to safeguarding individual children are confidential, a member of staff or volunteer, if confided in by a child, must never guarantee confidentiality to that child. Staff and



volunteers should explain that information may need to be shared with others in order to keep the child or others safe.

Where there is a Child Protection concern it will be passed immediately to the Designated Safeguarding Lead (DSL), who will consider the most appropriate response and take action in line with statutory guidance, consulting with relevant partners where appropriate.

Information relating to safeguarding will be processed and shared lawfully. In safeguarding situations, the lawful bases for sharing information include the need to protect the vital interests of a child, compliance with a legal obligation, and the performance of tasks carried out in the public interest. Consent is **not required** where there is a concern that a child may be at risk of harm, and a lack of consent must not prevent information being shared where safeguarding is at stake.

The parents of the child should normally be informed as soon as possible, unless it is felt that doing so would place the child at increased risk of harm or would otherwise not be in the best interests of the child.

The Designated Safeguarding Lead (DSL) or Deputy DSL will disclose personal information about a child, including the level of involvement of other agencies, to other members of staff only on a strict 'need to know' basis.

All staff and volunteers must be aware that they have a professional responsibility to share information with other agencies where this is necessary to safeguard children.

## 5 Records and Monitoring

Child protection and safeguarding information will be recorded, stored, and handled in line with data protection legislation to ensure that information is:

- processed lawfully, fairly, and for specific safeguarding purposes
- adequate, relevant, and not excessive
- accurate and kept up to date
- retained only for as long as necessary
- handled in accordance with the rights of the data subject
- kept secure and protected against unauthorised access.

MCYC may use secure electronic systems to enable staff and volunteers to report safeguarding concerns. All electronic reports will be received directly by the Designated Safeguarding Lead (DSL) or Deputy DSL and will be handled in line with this policy and data protection legislation.

The use of electronic reporting does not remove the requirement to report concerns immediately.

During residential activities, arrangements are in place to ensure safeguarding reports submitted electronically are monitored and acted upon without delay.



Safeguarding records are normally exempt from subject access rights where disclosure would place a child or another person at risk of harm. Children and parents do not have an automatic right to see safeguarding records. Any request to access such records must be referred immediately to the Designated Safeguarding Lead.

Data protection legislation does not prevent staff from sharing information with relevant agencies where that information may help to protect a child. Consent is not required for the creation, storage, or sharing of safeguarding records where child protection concerns exist.

Any concerns about a child will be recorded in writing as soon as possible and within 24 hours. All records must be factual, accurate, and evidence-based, clearly distinguishing fact from opinion. Actions taken and decisions made must be recorded. Records will be signed and dated and, where appropriate, witnessed.

Safeguarding records will be stored securely in a separate, confidential file (paper and/or electronic), distinct from any other records. Access to these records will be strictly limited and controlled by the Designated Safeguarding Lead.

Written records of concerns will be kept even where there is no immediate need for further action. These records will be retained in line with safeguarding retention guidance and reviewed regularly.

Records will be kept up to date. Original records will be retained where there are, or may be, criminal proceedings or civil actions arising from current or historical allegations of abuse or neglect.

Timely and accurate recording will take place for every safeguarding concern, incident, or disclosure relating to a child. A clear chronological record will be maintained, including details of concerns, actions taken, decisions made, and any communication with parents or external agencies. Advice sought from Children's Social Care or the Local Authority Designated Officer will be clearly recorded.

### **5.1 Use of Safeguarding Forms**

All staff and volunteers must use the correct MCYC safeguarding forms when recording concerns, disclosures, incidents, or conversations relating to a child's welfare, as set out in the policy appendices.

Records must be completed with care and accuracy, using clear, factual language. Wherever possible, the child's own words should be recorded. Opinions must be clearly distinguished from fact, and all records must be signed, dated, and completed in full.

Failure to record information accurately or to use the correct forms may compromise safeguarding and will be treated as a serious matter.

## **6 Recruitment**

We ensure that all appropriate measures are applied in relation to everyone within MCYC who is likely to be perceived by the children as a safe and trustworthy adult, including volunteers and staff employed by



contractors. Safer recruitment practice includes scrutinising applicants, verifying identity, obtaining references and ensuring that a candidate has the health and physical capacity for their role. It also includes enhanced DBS with barred list checks where needed, references before appointment, safeguarding training required by all.

In line with statutory changes, underpinned by regulations, the following will apply:

An enhanced DBS Check is obtained for **all** staff

## **7 Safe Staff**

All staff will take care not to place themselves in a vulnerable position with a child.

If an allegation is made against another member of staff, the member of staff receiving the allegation will immediately inform the most senior person available. This senior person will then consult with The Designated Safeguarding Lead (DSL), Julie Woods.

Allegations against the most senior person must be reported to the Chair of TNCC Trust.

## **8 Conduct of Staff**

MCYC has a duty to ensure that professional behaviour applies to relationships between staff and children.

All staff should be aware of the dangers inherent in:

- Working alone with a child;
- Physical interventions;
- Cultural and gender stereotyping;
- Dealing with sensitive information;
- Giving to, and receiving gifts from, children and parents;
- Contacting children through private telephones (including texting), e-mail, MSN, or social networking websites;
- Disclosing personal details inappropriately;
- Meeting children outside MCYC or MCYC duties;
- Making inappropriate sexual comments; excessive one to one attention beyond the normal requirements of the role; or inappropriate sharing of images

### **8.1 Staff Boundaries, Oversight, and In-Week Safeguarding Practice**

All staff and volunteers are expected to maintain clear professional boundaries at all times when working with children and young people. This includes appropriate behaviour, language, communication methods, and physical interaction, in line with this policy and the staff code of conduct.



Directors and the Designated Safeguarding Lead (DSL) will provide active safeguarding oversight during MCYC weeks and activities. This includes monitoring practice, responding to concerns, and providing guidance where needed.

Safeguarding expectations and key reminders will be reinforced with staff during the week, including through briefings or meetings, to ensure safeguarding remains a shared and active responsibility throughout the activity.

***If any member of staff has reasonable suspicion that a child is suffering harm, and fails to act in accordance with this policy, this will be viewed as misconduct, and appropriate action will be taken.***

## 9 Allegations

Where an allegation is made against any person working in or on behalf of MCYC that he or she has:

- a. behaved in a way that has harmed, or may have harmed, a child;
- b. possibly committed a criminal offence against or related to a child; or
- c. behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children

We will apply the same principles as in the rest of this document. Detailed records will be made to include decisions, actions taken, and reasons for these. All records will be retained securely.

Whilst we acknowledge such allegations, (as all others), may be false, malicious or misplaced, we also acknowledge they may be with foundation. It is, therefore, essential that all allegations are investigated properly.

Initial action to be taken:

- The person who has received an allegation or witnessed an event will immediately inform the Designated Safeguarding Lead (DSL) and make a record
- In the event that an allegation is made against the Designated Safeguarding Lead (DSL) the matter will be reported to the Chair of TNCC Trust who will proceed as the 'Designated Safeguarding Lead (DSL)'
- The Designated Safeguarding Lead (DSL) will take steps, where necessary, to secure the immediate safety of children and any urgent medical needs
- The member of staff will not be approached at this stage unless it is necessary to address the immediate safety of children
- The Designated Safeguarding Lead (DSL) may need to clarify any information regarding the allegation, however no person will be interviewed at this stage
- The Designated Safeguarding Lead (DSL) will consult with the Local Authority Designated Officer in order to determine if it is appropriate for the allegation to be dealt with by MCYC or if there needs to be a referral and/or the police for investigation
- Consideration will be given throughout to the support and information needs of children, parents and staff



- The Designated Safeguarding Lead (DSL) will inform the Chair of TNCC Trust of any allegation.

## Low Level Concerns

MCYC and TNCC Trust recognises that there may be times when there are concerns about a staff member's behaviour which does not meet the harm threshold as set out in section 9 of this policy. This includes third party staff and volunteers. Concerns such as this may arise in several ways and from a number of sources. Examples of this may be:

- suspicion, complaint or disclosure made by a child, parent or other adult within or outside of our organisation; or
- as a result of vetting checks undertaken during recruitment

Our organisation promotes an open and transparent culture in which all concerns about adults working in or on behalf of MCYC are dealt with promptly and appropriately. Creating this culture in which all concerns are shared responsibly, in a timely way with the right person, and are recorded and dealt with appropriately is critical to effective safeguarding practice. This culture enables us to identify concerning, problematic or inappropriate behaviour at the earliest possible stage, minimises the risk of abuse and ensures that all adults working in or on behalf of MCYC are clear about professional boundaries and act within these, in accordance with our ethos and values. This culture also empowers individuals to share concerns with key staff about their own behaviour at the earliest possible opportunity.

The term 'low level concern' does not mean that the behaviour is insignificant. It means a behaviour towards a child which does not meet the threshold set out in section 9 of this policy. A low level concern is any concern (no matter how small, and even if no more than causing a sense of unease) that an adult working in or on behalf of MCYC may have acted in a way that:

- is not consistent with the staff code of conduct, including conduct outside of MCYC, and/or
- does not meet the allegations threshold or is otherwise not considered serious enough for a referral to the LADO.

Examples of such behaviour could include, but are not limited to:

- being over friendly with children;
- having favourites;
- taking photographs of children on a personal mobile phone;
- engaging with a child on a one-to-one basis in a secluded area or behind a closed door; or,
- humiliating children.

Behaviours which are not consistent with the standards and values of our organisation, and which do not meet the expectations set out in our code of conduct for staff, must be addressed. Behaviours such as this, can exist on a spectrum from inadvertent or thoughtless, or behaviour that may look to be inappropriate, but might not be in specific circumstances, through to that which is ultimately intended to enable abuse.

It is essential that concerns such as this are shared responsibly and with the right person, and that they are recorded and dealt with appropriately. Effective reporting and management of such concerns also protects staff from potential false



allegations of misunderstandings. Concerns should be shared as soon as is reasonably possible, and ideally within 24 hours of becoming aware of a problem, however it is never too late to share a concern. Staff members should report their concerns to the Director or DSL if they are unavailable immediately. Concerns will be recorded and kept in personnel files.

Occasionally a member of staff may find themselves in a situation which could be misinterpreted, or may appear compromising to others. Equally, a member of staff may have behaved in a manner which, on reflection, they consider to fall below the standards set out within our code of conduct for staff. Self-reporting such circumstances is actively encouraged as it allows issues to be dealt with at the earliest opportunity and it is an important means of maintaining our culture of everyone aspiring to have the highest standards of conduct and behaviour.

Staff do not need to be able to determine whether their concern is a low level concern, or if it would be dealt with under our managing allegations policy. Staff must simply be empowered to share their concern. The determination regarding process will be made by the designated safeguarding lead and TNCC Trust.

Low level concerns should be reported in writing to the DSL. Where a low level concern is in relation to a Trustee, it should be shared with the Chair of TNCC Trust.

If a report of a low level concern is received, it will be dealt with responsively, sensitively, and proportionately. Where a concern is reported, the DSL should collect as much evidence as possible by speaking directly with the person who raised the concern (unless it has been raised anonymously), and by speaking to the individual involved along with any witnesses. The information collected will help to categorise the behaviour and determine what further action may needed to be taken. Support and advice will be provided to ensure any identified behaviours can be corrected at an early stage.

All low level concerns will be recorded in writing and this record should include the details of the concern, the context and the action taken, including the rationale for any decisions. Records must be kept confidential and held securely in line with the Data Protection Act 2018 and the UK General Data Protection Regulation. Records will be kept in individual personnel files and will be retained in accordance with the TNCC and MCYC GDPR policy.

Records should be reviewed so that potential patterns of concerning, problematic or inappropriate behaviour can be identified. Where a pattern of such behaviour is identified, TNCC Trust will decide on a course of action either through disciplinary procedures or where a pattern of behaviour moves from a concern to meeting the harms threshold, referral to LADO or the police.

TNCC Trust will regularly review all low level concerns reported to them, along with the outcome of the concern. This is to ensure there is appropriate scrutiny and analysis of information in order to agree at what point a series of low level concerns or a pattern of behaviour would escalate and meet the threshold set out in section 9 of this policy.



## **10 Supporting staff**

We recognise that staff working for MCYC who have become involved with a child who has suffered harm, or who appears likely to suffer harm, may find this situation stressful and upsetting.

We will support such staff by providing an opportunity to talk through anxieties with the Designated Safeguarding Lead (DSL) and to seek further support, if necessary.

MCYC recognises that Directors and senior staff carrying safeguarding responsibility may be exposed to distressing situations and decision-making pressures. Appropriate wellbeing support will be made available, including opportunities for debriefing, peer support, and access to further support where needed.

Supporting the wellbeing of those with safeguarding responsibilities is essential to maintaining safe, effective practice.

## **11 Photographing Children**

MCYC has a separate Images and Social Media Policy which applies to all staff, volunteers, parents, and visitors. This section summarises key safeguarding principles; the full policy sets out detailed expectations regarding digital images, online sharing, and social media use.

The vast majority of people who take or view photographs or videos of children do so for entirely innocent, understandable and acceptable reasons. We acknowledge, however, that some people abuse children through taking, using or circulating images.

### **Staff and Volunteers**

- Parental consent will be sought and permissions noted. This includes permission for photographs taken at MCYC and MCYC events to be used for marketing purposes.
- Staff and volunteers must seek the authorisation of the Designated Safeguarding Lead (DSL) prior to taking photographs/ videos of children and must only use MCYC equipment unless given specific authorisation by the Designated Safeguarding Lead (DSL).
- The use of cameras on mobile phones or the downloading of images onto any internet site is strictly forbidden
- Only the child's first name will be used with an image
- It will be ensured that children are appropriately dressed before images are taken
- Children are encouraged to tell us if they are worried or unsure about any photographs that are taken of them.

The Guidance for Safer working Practices for Adults who work with Children and Young People provides detailed guidance on the taking of photographs and storage of images.



### **Parents or Members of the Public**

We will not allow other people, including staff, to photograph or film children without parental permission. This includes the use of cameras on mobile phones or any other device.

MCYC cannot, however, be held accountable for the use of photographs or video footage taken by parents or members of the public at MCYC camps and events where parental permission has been given.

### **Complaints and Compliments**

Our complaints procedure will be followed where a child or parent raises a concern about poor practice. Poor practice examples include unfairly singling out a child, using sarcasm or humiliation as a form of control, bullying or belittling a child or discriminating against them in some way. Senior staff manage complaints.

Complaints from staff are dealt with under the Complaints, Disciplinary and Grievance procedures.

#### **Record keeping procedure**

- Any member of staff who has concerns about the welfare of a child must share this information, without delay, with the Safeguarding Lead.
- Staff must make a brief accurate record of these concerns using the agreed proforma (Appendix 2 – Internal referral form) recording any allegations that the child makes in the child's own words if possible and passed immediately to the Safeguarding Lead.
- These records must be stored securely and the information shared with staff only on a "need to know basis".
- If a member of staff has a conversation with a parent that raises a safeguarding concern then the conversation must be recorded (Appendix 2) and passed immediately to the Safeguarding Lead.
- All other issues concerning children's behaviour, attitude, outstanding achievement or otherwise, that does not trigger a safeguarding concern, should be recorded on the MCYC Incident Form (Appendix 3)

**Without delay, the MCYC Safeguarding Lead, Julie Woods (or in her absence Joel Fraser) should be contacted.** MCYC has a duty to report disclosures to the relevant authorities as soon as possible.

## Appendix 1 - Signs / Symptoms of abuse

**If you consider a child to be in immediate danger call the police on 999 immediately**

### Signs / Symptoms of abuse

The key objective for all staff is to recognise and act on any signs of abuse. To this end, the following serves as a reminder/check list.

#### Physical Abuse

- Changes in behaviour pattern
- Improbable excuse to explain injury
- Refusal to discuss injury
- Untreated injuries
- Withdrawal from physical contact
- Excuses for not doing PE
- Fear of returning home
- Running away from home
- Fear of medical treatment
- Deliberate self harm
- Aggression to others
- Withdrawal from social situations
- Low self esteem
- Fearful reaction to parent/carer disapproval
- 'Frozen watchfulness'
- Extreme reactions to sanctions

#### Sexual Abuse

- Disclosure
- Genital injuries
- Sexually transmitted diseases
- Forensic/medical evidence
- Vivid details of sexual activity
- Compulsive masturbation
- Sexualised drawings/writing/behaviour
- Chronic urinary/vaginal infections
- Soreness of genitals/bottom
- Developmental regression

#### Neglect

- Cold, inappropriately dressed
- Undernourished, unkempt
- Changes in behaviour pattern
- Unexplained absence from MCYC
- Lethargy, tiredness or aggression
- Constant hunger
- Untreated medical problems
- Deliberate self harm
- Poor social relationships
- Bullying or being a victim
- Running away
- Compulsive stealing/scavenging
- Unacceptable levels of responsibility at home

#### Emotional Abuse

- Physical, mental and emotional development lags
- Changes in behaviour pattern
- Admission of excessive punishment
- Self deprecation/low self esteem
- Sudden speech disorders
- Inappropriate responses to painful situations
- Regressed behaviour patterns
- Deliberate self harm
- Fear of parents/carer being contacted
- Extreme passivity or aggression

These lists are by no means exhaustive and there are obvious overlaps in terms of behaviour that could indicate any one form of abuse. Obviously children may indicate one or two of these symptoms and not be



suffering any form of abuse – clusters of symptoms give higher validity to suspicions. REMEMBER THAT THE CHILD’S WELFARE IS YOUR PARAMOUNT CONSIDERATION.

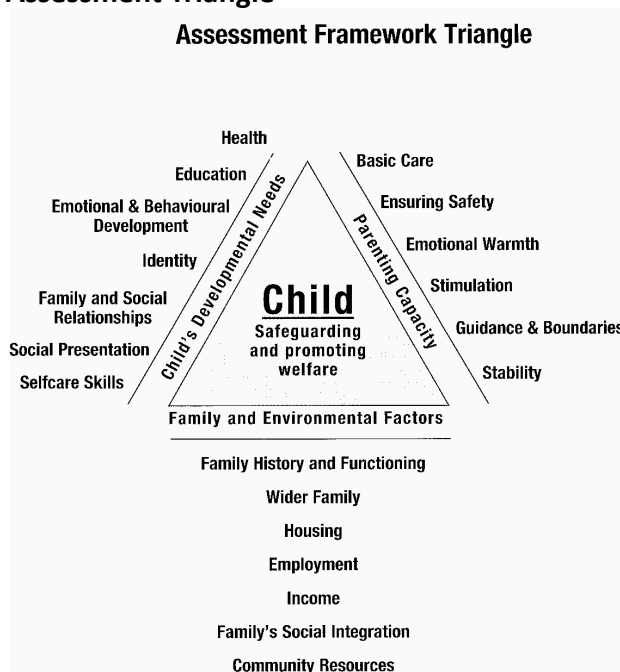
**Appendix 2 - Essential contacts**

Contact Details	
<i>Designated Safeguarding Lead (DSL)</i>	Julie Woods 0773 865 8244
<i>Deputy DSL</i>	Joel Fraser 0773 824 5667
<b>safeguarding@mcyc.online</b>	
<i>Chair of TNCC Trust</i>	chair@tynynant.co.uk

Childline	0800 1111
National Domestic Violence Helpline	0808 2000 247
NSPCC	0808 800 5000
Cheshire West & Chester Safeguarding Board	0300 123 7047, OoH 01244 977277
Gwynedd Safeguarding Referral Line	01758 704 455, OoH 01248 353551
Liverpool Referral Line	0151 459 2606, OoH 0151 233 3700
Wirral	0151 606 2008, OoH 0151 677 6557
Cheshire East	0300 123 5012, OoH 0300 123 5022
St Helens	01744 676767, OoH 0345 050 0148
Sefton	0151 934 4013, OoH 0151 934 3555
Warrington	01925 443322, OoH 01925 444400
Knowsley	0151 443 2600, OoH 0151 443 2600

Other services may need to be contacted if the details above do not cover a particular child's local area.

**Appendix 3 Assessment Triangle**



## Appendix 4 - Indicators of Vulnerability to Radicalisation

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:  
Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
3. Extremism is defined by the Crown Prosecution Service as:  
The demonstration of unacceptable behaviour by using any means or medium to express views which:
  - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
  - Seek to provoke others to terrorist acts;
  - Encourage other serious criminal activity or seek to provoke others to serious criminal acts;or
  - Foster hatred which might lead to inter-community violence in the UK.
4. 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.
5. Children may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that MCYC staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability 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 children’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.
7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.
8. 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.

## APPENDIX 5

### Preventing Violent Extremism – Roles of the Single Point of Contact (SPOC)

The SPOC for MCYC is Julie Woods, or in her absence Joel Fraser. **At a week of MCYC the Director will act as the SPOC.**

The SPOC is responsible for:

- Ensuring that staff are aware that you are the SPOC in relation to protecting children from radicalisation and involvement in terrorism;
- Maintaining and applying a good understanding of the relevant guidance in relation to preventing children becoming involved in terrorism, and protecting them from radicalisation by those who support terrorism or forms of extremism which lead to terrorism;



- Collating relevant information from in relation to referrals of vulnerable children into the Channel\* process;
- Sharing any relevant additional information in a timely manner.

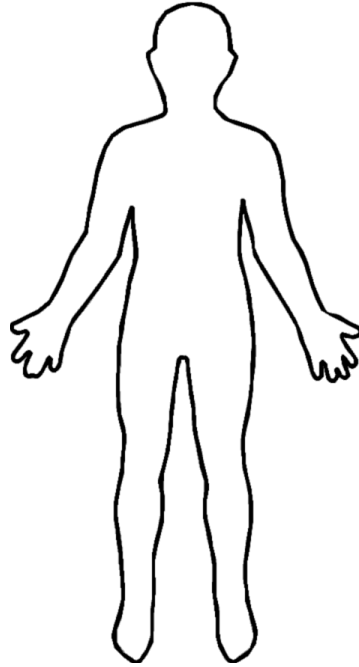
\* Channel is a multi-agency approach to provide support to individuals who are at risk of being drawn into terrorist related activity. It is led by the West Midlands Police Counter-Terrorism Unit, and it aims to

- Establish an effective multi-agency referral and intervention process to identify vulnerable individuals;
- Safeguard individuals who might be vulnerable to being radicalised, so that they are not at risk of being drawn into terrorist-related activity; and
- Provide early intervention to protect and divert people away from the risks they face and reduce vulnerability.

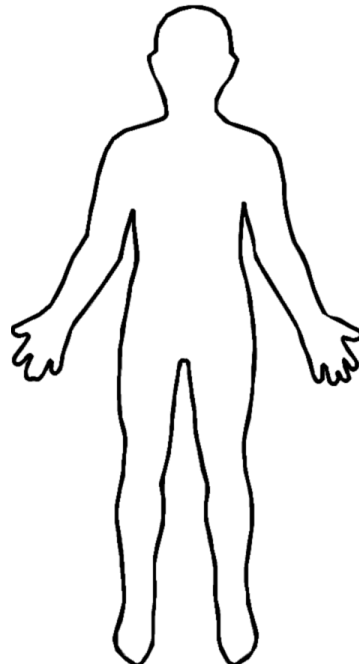


**THIS RECORD IS STRICTLY CONFIDENTIAL AND MUST BE HANDED TO THE DESIGNATED SAFEGUARDING LEAD AT THE EARLIEST OPPORTUNITY**

**Sites of Injury**



**Front**



**Back**



## Appendix 7 - Incident Report Form

### Incident Report Form

*To record general incidents concerning staff or campers such as behaviour, accidents (which should also appear in the medical record) or damage.*

Concerning:			
Completed by:		Time:	

**Description of the incident:**

**Actions taken:**

Signed \_\_\_\_\_ Date \_\_\_\_\_