SAFEGUARDING CHILDREN POLICY

Organisation: BEAT (Belonging, Empowering & Thriving)
Location: BEAT Lea farm Mount LS53PX
Policy Status: Final
Date of last review: November 2026
Date of next review November 2027
(To be read alongside BEAT's Safeguarding Children & Young People's Procedures Document)

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1. INTRODUCTION

BEAT is a grassroots charity based in Hawksworth Wood, Leeds, collaborating with local people to build a stronger, more connected community. We believe that everyone has something valuable to contribute and we focus on creating spaces and opportunities where those contributions can flourish. Our work is shaped by the voices, talents and aspirations of the people who live here.

The purpose of this policy is to define how BEAT operates to safeguard children to protect them from harm and provide staff and volunteers with the overarching principles that guide our approach. We recognise we have a duty of care and are committed to the safety of everyone who comes into contact with our organisation, including children as visitors and participants.

This policy is a fundamental part of our governance. Trustees are responsible for ensuring BEAT provides a safe environment and protects everyone from abuse or maltreatment. We are committed to ensuring safeguarding practice reflects our legal responsibilities, government guidance, and Leeds Safeguarding Children Partnership requirements, including the Children Act 1989 and Working Together 2023.

2. BEAT SAFEGUARDING OFFICERS AND EMERGENCY CONTACTS

Designated Safeguarding Lead for BEAT is **Sadie Oddy, Chief Executive Officer**
Sadie Oddy Sadie@beatls5.co.uk 0113 2942553 / 07968941344

Deputy Safeguarding Lead is **Andrea Brough ABCD Community Builder**
Andrea Brough andrea@beatls5.co.uk 0113 2942553 /07856062621

Trustee Safeguarding Lead is **BEAT Chair Rev Stephen Kaye:**
Stephen Kaye revstephenkaye@gmail.com 07375125348

Emergency Contacts:

- **Children's Social Care (Duty & Advice):** 0113 376 0333
- **Out of Hours Emergency Duty Team:** 0113 535 0600
- **Immediate Danger: Call 999**

3. RECOGNISING SIGNS OF ABUSE AND PROFESSIONAL CURIOSITY

Children are defined as persons aged under 18. Safeguarding includes protecting children from maltreatment, preventing health impairment, and ensuring they grow up in safe circumstances.

Professional Curiosity

In line with Leeds Safeguarding Children Partnership (LSCP) guidance, BEAT practitioners will practice "Professional Curiosity." This is the capacity to explore and understand what is happening within a family rather than accepting things at face value. This includes:

- **Respectful Uncertainty:** Taking what is said seriously but looking for information that confirms or challenges it.
- **Looking Beyond the Obvious:** Noticing when something "feels off" and asking deeper questions to uncover hidden risks.
- **Triangulation:** Checking information from different sources to gain a holistic view of the child's life.

4. PERSONS AFFECTED AND TRAINING REQUIREMENTS

This policy applies to everyone working or volunteering on behalf of BEAT, including the board of trustees, paid staff, volunteers, sessional workers, contractors, and agency staff.

Training and Compliance:

- **Induction:** All new staff and volunteers must complete a safeguarding induction before commencing work with children.
- **Refresher Training:** Mandatory safeguarding training will be refreshed every **2 years** for all staff and volunteers to ensure knowledge remains up to date with current legislation.
- **Safe Recruitment:** All eligible roles including volunteers will be subject to an enhanced Disclosure and Barring Service (DBS) check in line with Charity Commission requirements.

5. SAFEGUARDING POLICY

- We believe everyone has a responsibility to promote the welfare of children.
- We have a zero-tolerance approach to abuse, exploitation, and radicalisation.
- We recognise that all children have equal rights to protection regardless of age, ability, gender, or background.

We Will Keep Children Safe By:

- Valuing, listening to, and respecting them.
- Using our procedures to report concerns to internal leads and external authorities swiftly.
- Managing allegations against staff using the Local Authority Designated Officer (LADO) process.
- Following professional behaviour standards as set out in our **Code of Conduct** and **Boundaries** policies.
- Recording, storing, and using information securely in line with data protection legislation.
- Maintaining a culture that enables safeguarding and professional practice issues to be raised through our **Whistleblowing** and **Complaints** procedures.

6. STATEMENT OF COMMITMENT

By signing below, the Trustees of BEAT confirm their commitment to this policy and the safety of all children involved with the charity.

Signed:  (**Chair of Trustees**)

Date: 10 November 2026

Safeguarding Children & Young People Procedures

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1. INTRODUCTION

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BEAT SAFEGUARDING CONCERN FLOWCHART

STEP 1

You see, hear, notice, witness or receive information that causes concern about a child or young person.

STEP 2

DO	DO NOT
• Stay Calm • Listen Carefully • Take the child seriously. • Reassure the child or young person. • Record facts, dates, times, and the child's own words	• Promise confidentiality. • Investigate • Ask leading questions. • Make assumptions

STEP 3

Is the child in immediate danger or at a risk of significant harm?

YES	NO
• **CALL 999 IMMEDIATELY** • Contact the Deputy Safeguarding Lead (DSL) as soon as possible	• Report the concern immediately to the DSL or Deputy DSL

STEP 4: How to contact a Safeguarding Lead

ROLE	NAME	CONTACT
Designated Safeguarding Lead (DSL)	Sadie Oddy	07592565446
Deputy DSL	Andrea Brough	07856062621
Trustees Safeguarding Lead	Rev. Stephen Kaye	07375125348
Main Office	BEAT	0113 2942553

STEP 5: DSL Action

The Designated Safeguarding Lead will:

1. Assess the concern.
2. Complete safeguarding records
3. Consider Early Help support
4. Seek consent where appropriate.
5. Refer to Children's Social Work if required.
6. Contact Police where necessary

STEP 6: Leeds Safeguarding Contacts

Emergency Services	999
Duty & Advice Team (Professionals)	0113 376 0336
Children's Emergency Duty Team	0113 535 0600
Public Reporting Line	0113 222 4403
Leeds LADO	0113 378 9687
LADO Email	lado@leeds.gov.uk

STEP 7: Complete Records	
1. Complete a BEAT Cause for Concern Form 2. Store records securely	3. Follow agreed safeguarding actions. 4. Continue to monitor and support the child where appropriate

KEY REMINDERS	
ALWAYS	**NEVER**
Take concerns seriously.	Promise confidentiality.
Be professionally curious.	Investigate concerns yourself.
Record facts	Record opinions
Report concerns immediately.	Ask leading questions.
Follow BEAT safeguarding procedures.	Delay sharing concerns.
Put the child / young person first	Assume someone else will report.
	Ignore a concern

3. BEAT SAFEGUARDING OFFICERS

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4. RECOGNISING CHILD ABUSE SIGNS AND SYMPTOMS

Child abuse is often hidden from view however it is important that all staff and volunteers understand the different forms of abuse. We support staff and volunteers at BEAT to access training to help them identify and act upon any form of abuse that they may encounter.

Below are definitions and descriptions of behavioural signs which may be indicators of child/ young person abuse. It is important to recognise that abuse can take many forms and the examples in the definitions below are not exhaustive.

There may be other situations not covered in the examples below that give you concern for a child's safety and wellbeing. The same approach should be taken when looking at the following behavioural signs. they may be indicators of child/young person abuse, but care should be taken in interpreting them in isolation.

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.

PHYSICAL SIGNS

- Injuries which occur to the body in places which are not normally exposed to falls, rough games, etc.
- Any injuries, bruises, bites, bumps, fracture, etc. which are not consistent with the explanation given for them.
- Injuries which appear to have been caused by a weapon e.g. cuts, welts, etc. Injuries which have not received medical attention.
- Instances where children/young people are kept away from the group inappropriately or without explanation.
- Self-mutilation or self-harming e.g. cutting, slashing, drug abuse.

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 in so far 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 involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

EMOTIONAL SIGNS

- Changes or regression in mood and behaviour, particularly where a child/young person withdraws or becomes clinging.
- Depression /aggression.
- Nervousness or inappropriate fear of particular adults.
- Changes in behaviour e.g., under-achievement or lack of concentration, inappropriate relationships with peers and/or adults e.g., excessive dependence attention-seeking behaviour.
- Persistent tiredness, wetting or soiling of bed or clothes by an older child.

SEXUAL ABUSE

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving high levels of violence, whether or not the child is aware of what is happening.

The activities may involve physical contact, including penetrative (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 in looking at, or in the production of, sexual online 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.

PHYSICAL SIGNS OF SEXUAL ABUSE

- headaches
- stomach aches
- bed-wetting

- change in appetite
- weight loss
- nightmares and sleep disturbances
- bruises on soft parts of the body, like buttocks or thighs
- changes in the genital area, such as redness, swelling, or discharge
- sexually transmitted infections
- pain or burning when going to the toilet, including frequent urinary tract infections.

BEHAVIOURAL SIGNS OF SEXUAL ABUSE

- Depression, anxiety, and mood changes, including social withdrawal and disassociation
- sudden disinterest in previously enjoyed activities.
- self-harm or suicidal ideation
- poor self-care or personal hygiene
- harmful and volatile substance use
- over-compliance and eagerness to please
- aggressiveness and anger
- running away
- sexual knowledge or activity that is inappropriate for their age.
- overly sexualised behaviours, including towards other children or adults, dressing in highly sexualised ways or mimicking sexual activity during games.
- drawings or descriptions that are sexually explicit and not age appropriate.
- early or excessive use of pornography
- displaying intense fear or discomfort if topics related to sex (including child sexual abuse) are raised.
- desexualisation – for example, wearing baggy clothes to hide their gender.
- anxiety-related illnesses such as anorexia or bulimia
- unusual or new fears, such as avoidance of certain people and places, being alone or being close to others.
- asking questions or making references to secrets and unusual ‘games.

For very young children, or children and young people with disability, there are extra signs to consider:

- behavioural issues, particularly those the child or young person has not

shown in the past, including emotional outbursts, self-harm, and heightened aggression.

- regression in developmental achievements
- developmental delays, for example, delayed speech, crawling, or walking
- self-stimulatory behaviours, for example, rocking and head banging.

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 caregivers); ensure access to appropriate medical care or treatment It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. (Definitions from Working together to safeguard children, 2018)

SIGNS OF NEGLECT

- Persistent tiredness
- Regular poor hygiene
- Inadequate clothing
- Excessive appetite
- Failure to thrive e.g. poor weight gain, consistently being left alone and unsupervised Indicators of possible sexual abuse.
- Any direct disclosure made by a child/young person concerning sexual abuse.
- Child/Young person with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age-inappropriate sexual play.
- Preoccupation with sexual activity through words, play, or drawing.
- Child/Young person who is sexually provocative or seductive with adults.
- Inappropriate bed-sharing arrangements at home.
- Severe sleep disturbances with fears, phobias, vivid dreams, or nightmares, sometimes with overt or veiled sexual connotations.

Other emotional signs (see above) may be indicative of sexual or some other form of abuse.

5. WHAT TO DO IF YOU ARE CONCERNED ABOUT A CHILD

It is important to treat any allegation seriously. Never think that someone else may be dealing with it.

If you receive information that a child may be at risk, you must respond Safeguarding is everyone's responsibility and here at BEAT we want to create a culture of awareness that is embedded in our organisation and is a core value. Prioritising the safety of all children consistently to avoid reactive situations when incidents occur.

All members of staff (paid and unpaid) are required to report any suspected abuse and be aware of the appropriate reporting and support procedure for safeguarding. Staff will exercise a **'professional curiosity.'**

Professional curiosity is where a practitioner seeks to explore and understand what is happening in someone's life, rather than making assumptions or accepting what they are told at face value. It involves looking out for signs that things are not right and seeking out the evidence of what is really happening. It is a combination of looking, listening, asking direct questions, checking out, and reflecting on ALL the information you receive.

Sometimes practitioners can feel they are being intrusive or that they may be overstepping their role if they ask that extra question, if they consider alternative explanations, if they start contacting others to check out their concerns. This is not the case. Safeguarding is everyone's responsibility.

Professional curiosity is a core responsibility of all practitioners. Many people are unable, or feel unable, to speak up for themselves. Many people are relying on us to identify the signs, to uncover what is really happening in their life, and to provide them with help to be safe.

Staff will respond to all concerns, worries, suspicions, disclosures, allegations. If there is a safeguarding concern staff must not keep information about their concerns to themselves, they must follow the procedure set out in this document. The Safeguarding Officer(s) will work in a way that ensures that Children at risk of harm are safeguarded from harm and promotes their welfare. They are responsible for following up any suspected reports of abuse and for informing the police or other appropriate external bodies.

The Board of Trustees is responsible for safeguarding governance and may discharge some of the functions to the Chief Executive who is responsible for supervision of these activities.

Stage 1

- Take seriously what the child/young person says (however unlikely the story may sound)
- Keep calm.
- Look at the child/young person directly.
- Be honest.

- Let them know you will need to tell someone else, do not promise confidentiality Reassure them they are not to blame for the abuse.
- Be aware that the child/young person may have been threatened.
- Never push for information
- Ask questions for clarification only; avoid asking questions that suggest a particular answer.

Helpful things to say or show:

Show acceptance of what the child/young person says.

- "I am glad you have told me."
- "It's not your fault."
- "I will help you" Avoid saying Why didn't you tell anyone before?"
- "I can't believe it."
- "Are you sure this is true?"
- Never make false promises
- Never make statements such as "I am shocked!" or "don't tell anyone else."

Concluding

Reassure the young person that they were right to tell you and that you take them seriously. Let the young person know what you are going to do next and that you will let them know what might happen Immediately report the matter, as per procedures explain to the child that you will share any information that puts them at risk. Record what was said as soon as possible after any disclosure

(Use the BEAT *Cause for Concern Form* To record all information)

Stage 2

If the child / young person is immediate danger of harm call the emergency services 999.

If the danger is not immediate discuss your concerns in the first instance with your Safeguarding Lead or line manager, The named person should take immediate action if there is suspicion that a child has been abused or likely to be abused.

The named person should contact the police and/or the Duty and Advice Team. If a referral is made directly to the Duty and Advice Team, this must be followed up in writing within 24 hours.

Before speaking with your line manager or Safeguarding Lead, it is important to gather as much relevant information as possible. However, collecting this information should not delay your initial discussion with them, particularly where there are immediate safeguarding concerns.

The following information will be important to share:

- All the details known to you/your agency about the child.
- The family composition including siblings, and where possible extended family members and anyone important in the child's life.
- The nature of the concern and how immediate it is.
- Details of any work/support that you have provided to the child or family to date.
- Details of where the child is.
- Whether you have informed parents/carers of your concern.

NB Parents/Carers will need to be informed about any referral to the Children & Young People's Social Care unless to do so would place the child at an increased risk of harm.

What will happen when I make contact with the duty and advice team?

All child protection contacts are taken very seriously, and your concerns will be properly considered by a qualified Social Worker. You may be contacted for further information as part of the initial enquiries. In most cases there will be a discussion with the parents and the child as appropriate. Sometimes it becomes clear at a very early stage that concerns are not founded. If initial enquiries do reveal significant concerns about the child or young person's welfare, then the formal child protection enquiry procedures will begin immediately.

Will I have to give my name?

All practitioners must give their name and the agency they work for. If you are a member of the public and you feel very strongly that you cannot give your name, you need not do so – your concerns for a child or young person will still be considered. Your name and address will be kept confidential if you request it.

Will I be kept informed of progress?

Because of the highly confidential nature of this work, you will not be given detailed information about the outcome of an enquiry. However, you may be contacted for further information.

DUTY AND ADVICE CONTACT NUMBERS

During office hours (9.00am – 5.00pm) call the Duty & Advice Team on 0113 376 0336 (select option 4 to speak to a Social Worker)

Out of office hours (evenings, weekends, and bank holidays) call the Children's Emergency Duty Team (EDT) on 0113 5350600.

If you think a child is immediate danger, call the police on 999 and if the concern is raised outside of normal office hours such as evenings, weekends, and bank holidays.

If the child or young person is not at immediate risk of being significantly harmed practitioners should consider and Early Help response. (See section 12 of this document)

NB Parents/Carers will need to be informed about any referral to the Children & Young people's Social Care unless to do so would place the child at an increased risk of harm.

6. PRINCIPLES OF SAFER RECRUITMENT

Sometimes there are people who work or seek to work with children and young people who may pose a risk to children and may harm them. BEAT will ensure that we have a clear process for recruiting staff and volunteers. Everyone applying to work or volunteer at BEAT will go through the same process.

Four Principles of Safe Recruitment (Leeds City Council Guide)

Deter

Discourage applicants with inappropriate motivations from applying by clearly communicating that the organisation is not a "soft target" for abuse. This can be achieved by referencing safeguarding policies in job advertisements and application processes.

Reject

Identify and exclude unsuitable individuals during the recruitment process, such as through rigorous interviews and thorough assessments.

Prevent

Minimise opportunities for abuse in the workplace by creating a safe environment. This involves assessing risks, establishing clear behavioural standards, and implementing robust appointment and induction processes.

Detect

Identify and address inappropriate behaviour or abuse at the earliest opportunity by fostering a safe working culture and responding effectively to concerns. Organisations should ensure their recruitment processes align with these principles and promote a

safe working culture. This includes following best practices throughout the entire employment cycle, from identifying a vacancy to onboarding and inducting a new team member.

Safe Working Culture

A safe working culture is one where everyone is dedicated to ensuring that all practices are carried out in the most effective and appropriate ways to protect the children and young people in their care. Additionally, staff should feel supported and confident in responding to concerns about the behaviour or practices of their colleagues.

Key Features of a safe working culture:

- An open environment where secrecy is not tolerated.
- A shared belief that abuse could occur and vigilance is essential.
- Well-defined processes for reporting concerns about practitioner behaviour
- Support for children and staff who raise concerns, along with a firm commitment to take appropriate action.
- A code of conduct that clearly sets out acceptable and unacceptable behaviour Policies, procedures, and codes of conduct are consistently applied, and individuals are held Accountable for following them.
- Comprehensive induction programmes and effective use of probationary periods
- A collective commitment from all staff to safeguard and protect children, alongside a continuous culture of vigilance.

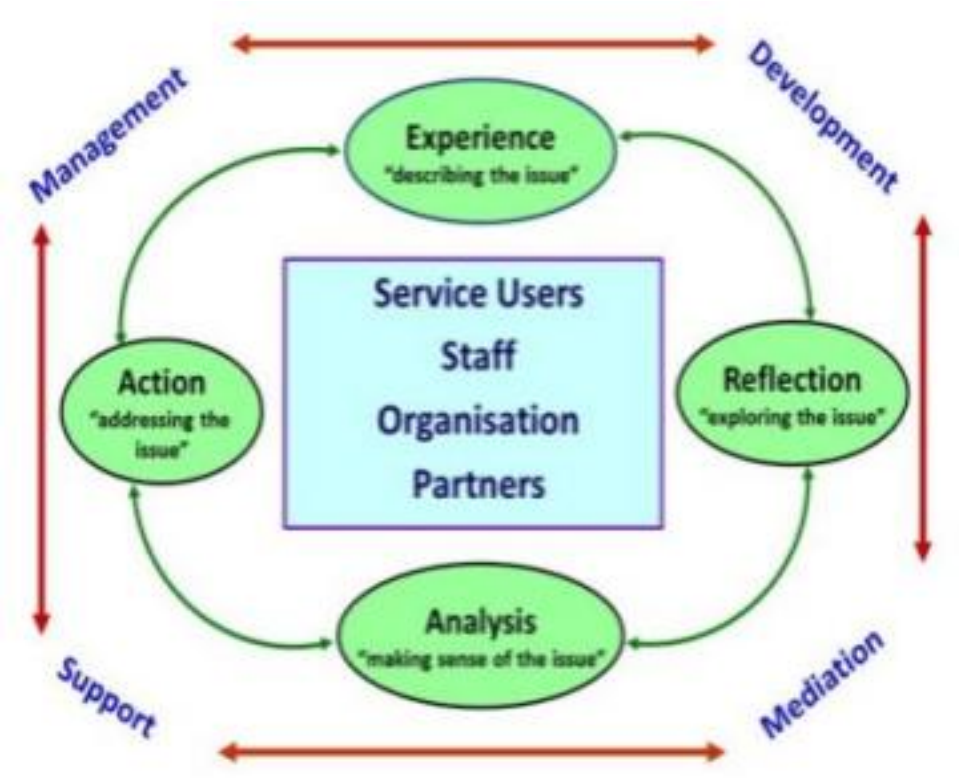
7. SUPERVISION

Supervision is the name for the regular, planned, and recorded sessions between staff and their line manager. It is sometimes known as formal supervision. It is a partnership between the supervisor, the supervisor, and the setting. It is a key task that supports the development of staff skills and practices in work with and safeguarding children, young people, and families.

BEAT will offer staff specific child protection supervision, in addition to informal supervision as staff seek advice and help in situations that they deal with daily.

Leeds Safeguarding Children Partnership Supervision and Management Support: 4x4x4 Model of Supervision

The **4x4x4 Model of Supervision**, developed by Tony Morrison, is a widely respected framework for reflective safeguarding supervision. It is called “4x4x4” because it brings together three sets of four elements.



Four Functions of Supervision:

Management: Ensuring accountability, compliance, and clarity of roles

Support: Providing emotional support and resilience for practitioners

Development: Building skills, knowledge, and professional growth

Mediation: Linking the individual with the wider organisation and its goals

Four Stakeholders

- The supervisee (practitioner)
- The service user (child or family)
- The organisation
- Partners (other agencies involved)

Four stages of the Supervision Cycle

- Experience: What happened?
- Reflection: What does it mean?
- Analysis: Why did it happen? What are the implications?
- Action Planning: What next?

How To Use The 4x4x4 Model

Get Ready for Supervision:

- Bring any case details you want to discuss.
- Think about challenges, decisions, or feelings you need support with Cover the Four Key Functions
- Management: Check roles, responsibilities, and compliance
- Support: Talk about emotional impact and ways to stay resilient
- Development: Identify learning needs and build skills
- Mediation: Link your work to organisational goals and partner agencies Think About the Four Stakeholders
- You – Your wellbeing and growth
- Child/Family – Their experience and safety
- Organisation – Standards and accountability
- Partners – Collaboration with other agencies
- Follow the Four-Step Cycle
- Experience: What happened?
- Reflection: How do you feel? What stands out?
- Analysis: Why did it happen? What are the risks and options?
- Action: What will you do next? Agree clear steps.

This model keeps supervision structured, reflective, and focused on the child, while balancing support, accountability, and learning.

8. REPORTING ALLEGATIONS OF ABUSE OR MALPRACTICE AGAINST A MEMBER OF BEAT STAFF INCLUDING VOLUNTERS.

It is essential that any allegation of abuse made against a person who works with children and young people including those who work in a voluntary capacity are dealt with fairly, quickly, and consistently, in a way that provides effective protection for the child, and at the same time supports the person who is the subject of the allegation.

This procedure applies to a wider range of allegations than those in which there is reasonable cause to suspect a child is suffering, or likely to suffer, significant harm. It also includes allegations that might indicate that the alleged perpetrator is unsuitable to continue to work with children in their present position, or in any capacity. This may be due to concerns about the person's conduct in their personal or professional life that might indicate their unsuitability to work with children.

It must be used in respect of all allegations that are consistent with the guidance in *Working Together to Safeguard Children 2026* i.e. cases in which it is alleged that a person who works with children has: behaved in a way that has harmed, or may have harmed, a child possibly committed a criminal offence against, or related to, a

child; or behaved in a way that indicates s/he is unsuitable to work with children.

If the allegation is against a BEAT member of staff or volunteers the allegation must be reported immediately, at least within one working day, to BEAT's Safeguarding Lead. If the allegation is against the Safeguarding Lead, then the allegation must be reported to BEAT's Deputy Safeguarding Lead. All Staff will ensure that the child is safe and away from the person against whom the allegation is made.

The BEAT Safeguarding Lead/or Deputy must then report the allegation to Leeds Children's Social Work Services during office hours at 0113 222 4403, or the Duty and Advice team at 0113 376 0336. For emergencies outside of office hours, contact the Children's Emergency Duty Team at 0113 535 0600.

The police and relevant emergency services will be contacted in an emergency by calling 999.

The matter must be discussed with the Local Authority Designated Office (LADO) The Local Authority Designated Officers in Leeds can be contacted Monday to Friday on 0113 378 9687, operating a duty system for notifications. They can also be contacted by email via lado@leeds.gov.uk

The discussion should also consider whether there is evidence/information that establishes that the allegation is false or unfounded. If the allegation is not patently false and there is cause to suspect that a child or young person is suffering, or is likely to suffer, significant harm, LCC Duty and Advice team will follow their procedures.

Action following initial consideration.

Where the initial evaluation decides that the allegation does not involve a possible criminal offence, it is dealt with by the BEAT Safeguarding Officer or Chair. In such cases, if the nature of the allegation does not require formal disciplinary action, appropriate action should be instituted within three working days. If a disciplinary hearing is required and can be held without further investigation, the hearing should be held within fifteen working days.

Where further investigation is required to inform consideration of disciplinary action, the Safeguarding Officer or Chair will discuss who will undertake that investigation. In some settings and circumstances, it may be appropriate for the disciplinary investigation to be conducted by a person who is independent of BEAT or the person's line manager to ensure objectivity.

In any case, the investigating officer should aim to provide a report to the employer within ten working days. On receipt of the report of the disciplinary investigation, the Safeguarding Officer or Chair should decide whether a disciplinary hearing is needed within two working days, and if a hearing is needed it should be held within fifteen working days.

Suspension

The possible risk of harm to children posed by an accused person needs to be managed and evaluated. The evaluation will be in respect of the child/ren involved in the allegation and any other children in the individual's home, work, or community life. In some cases, it will require consideration to be given to the use of suspension for the person involved in the allegation. This may be until the matter is resolved. A BEAT member of staff must not be automatically suspended without careful thought and consideration of the circumstances of the allegation. In making the decision, the Safeguarding Officer must consider whether the person should be suspended from contact with children for the duration of the investigation, or until resolution has been reached. In any case, alternatives to suspension should be explored and advice sought from Leeds City Council.

If the allegation has been referred and a strategy meeting is to be convened, it will be a task of the strategy meeting to consider the facts of the allegation, and although a senior manager of BEAT cannot be directed to suspend, they will be supported in making the decision. This should be done after the views of the designated senior named officer from the police and Area Safeguarding Manager have been canvassed.

9. RECORDING AND MANAGING CONFIDENTIAL INFORMATION (To be read in conjunction with BEATS Data Protection and Confidentiality policy and procedure.)

Through the safe and effective sharing of information it aims to ensure that vulnerable adults and or children get the support they require from external services and that the people it works with are protected from harm, abuse, or neglect. It also seeks to prevent them from offending.

In many reviews into deaths of children the lack of information sharing between agencies and organisations is often highlighted as a contributory, if not causal, factor in the death. It is imperative that BEAT staff understand the requirement to share safeguarding information to protect vulnerable children from harm.

Confidentiality and information sharing must be integrated across all aspects of BEAT services and management as its users have the right to privacy and confidentiality and to understand when "secrets" cannot be protected for their best interests.

Information Sharing Definitions

Confidentiality: Not all information is confidential. Confidential information is information of some sensitivity, which is not already lawfully in the public domain or readily available from another public source, and which has been shared in a relationship where the person giving the information understood that it would not be shared with others.

BEAT understands confidentiality to mean that no information regarding a service user shall be given directly or indirectly to any third party which is external to the Staff, without that service user's prior expressed consent to disclose such information.

Breach of confidentiality: Confidence is only breached where the sharing of confidential information is not authorised by the person who provided it or to whom it relates.

If the information was provided on the understanding that it would be shared with a limited range of people or for limited purposes, then sharing in accordance with that understanding will not be a breach of confidence. Similarly, there will not be a breach of confidence where there is explicit consent to the sharing.

Even where sharing of confidential information is not authorised, BEAT may lawfully share it if this can be justified in the public interest. Seeking consent should be the first option, if appropriate. Where consent cannot be obtained to the sharing of the information or is refused, or where seeking it is likely to undermine the prevention, detection or prosecution of a crime, the question of whether there is a sufficient public interest must be judged by the Manager with the CEO on the facts of each case.

Therefore, where you have a concern about a child or young person, you should not regard refusal of consent as necessarily precluding the sharing of confidential information public interest: A public interest can arise in a wide range of circumstances, for example, to protect children or other people from harm, to promote the welfare of children or to prevent crime and disorder. There are also public interests, which in some circumstances may weigh against sharing, including the public interest in maintaining public confidence in the confidentiality of certain services. The key factor in deciding whether to share confidential information is proportionality, i.e. whether the proposed sharing is a proportionate response to the need to protect the public interest in question. Serious crime: This means any crime which causes or is likely to cause significant harm to a child or young person or serious harm to an adult.

The BEAT *cause for concern form* should be used for recording outlining the details of the concern. We will store all information securely and ensure that any files have restricted access and are password protected.

10. DISTRIBUTION AND REVIEWING POLICIES AND PROCEDURES

BEAT will display the Safeguarding policy.

- On the notice boards in the building
- On the BEAT Website
- At all staff/Volunteers induction sessions
- In the BEAT office

Copies will be available for parent/carers and young people. All safeguarding policies at BEAT will be reviewed annually and signed by the Trustee Board.

11.RESPONSIBILITIES OF BEAT'S SAFEGUARDING TRUSTEE

The Charity Commission is clear that Trustees have primary responsibility for safeguarding at BEAT; while some responsibilities can be delegated, overall responsibility lies with the Board. To enable the Board not only to support the

management and staff team in the organisation, including the Safeguarding Lead Officer, but also to provide an important mechanism for critically evaluating the information presented to the Board by the management team, and, where necessary, challenging and checking it out.

To ensure that BEAT is taking steps to safeguard and take responsibility for the children with whom it works and is acting in their best interests, taking all reasonable steps to prevent any harm to them, assessing and managing risk, ensuring safeguarding policies and procedures are in place, undertaking ongoing monitoring and reviewing of policies and procedures including complaints and recruitment, to ensure that safeguards are being implemented and are effective, that BEAT is responding appropriately to allegations of abuse.

Review of BEAT's Safeguarding Policies and Procedures

This policy will be monitored by the CEO and the board of Trustees on a regular basis for compliance and will be review at least annually.

12. EARLY HELP – LEEDS CITY COUNCIL

Leeds is ambitious for its children and young people, with the aim of making the city truly child-friendly, and the best in the UK for children to grow up in. Central to this ambition is to ensure that all children, young people, and their families in Leeds receive the help they need as soon as they need it from people they know already. This is termed as having the right conversation with the right person at the right time.

Key to achieving this ambition is a citywide, multi-agency commitment to providing effective, proportionate, and high-quality early help and supporting families to have their needs met in their local communities.

Common across recent reviews and policy developments such as Working Together 2023 and the Munro Report is the recognition that effective early help for children and families improves outcomes long-term.

In Leeds, our early help approach has been informed by what children, young people and families tell us about what they find helpful when they need help additional to that which is universally available.

What do we mean by Early Help?

Early Help is the term used in Leeds to describe our approach on a whole range of individual social, health and educational issues when providing support to children, young people, and their families as soon as problems emerge or re-emerge.

Families should be enabled and supported to have the right conversations, with the right people and at the right time about their needs or concerns, so that statutory interventions can be avoided where this is appropriate.

Early Help is voluntary and consent from children, young people, and their families to work with them should always be sought.

Intervening as early as possible, regardless of the age of the child or young person, can

positively improve their outcomes.

Early Help is a collaborative approach not a provision and relies on local agencies working together effectively with families to identify who needs help and then to meet their varied needs. Early help can be provided through a single agency or a multi-agency response as appropriate to the needs of the child and family and the concern.

Leeds Early Help approach:

1. Early in the life of the problem - whatever the age of the child or young person.
2. Early to respond when problems emerge or re-emerge.
3. Help to prevent concerns getting worse and avoid the need for statutory intervention.
4. Support in school, home, and community through a graduated approach.



Quality work with families already takes place across Leeds, day in and day out, by schools, health services, children centres and other early year's settings, services provided or commissioned through our cluster collaborative model and a range of other agencies and services.

Our early help approach includes our commitment to shifting the balance of power so that our work is family led and not led by practitioners. An element of this involves.

families being supported to come together to utilise their own resources and strengths to overcome challenges.

The Leeds early help approach in line with Working Together to Safeguard Children 2023 also includes proactive and planned support for those children and young people stepping down from statutory social work interventions or specialist care.

Our commitment – 'Early Help is Everybody's Business'

Leeds benefits from robust, effective, successful, and longstanding multi-agency working

across the diverse and rich partnership in the city. The Leeds partnership is committed to providing the support that children, young people and their families need, as soon as they need it, when they need it and by the people who are best placed to help. All agencies see early help as part of our ‘day job’ and work to the following early commitment:

We will provide help and support to those who need it without delay. By establishing positive and trusting relationships with families, we will work with them to identify what they need to address their concerns and problems.