



The
Dyslexia
Association

Safeguarding & Protection of Young People Policy

Named Designated Safeguarding Officers

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Definitions

1. Safeguarding is defined by the Children's Act 1989 and Joint Chief Inspectors Report on Arrangements to Safeguard Children (2002) as meaning:
 - Agencies [and organisations] working with children and young people take all reasonable measures to ensure that the risks of harm to the individual's welfare are minimised.
 - Where there are concerns about children and young people's welfare, all agencies [and organisations] take all appropriate actions to address those concerns, working to agreed local policies and procedures, working in partnership with other local agencies.
2. A **child** or **young person** is anyone who is under the age of 18.
3. A **vulnerable adult** is someone over the age of 18 who may be in need of community care services by reason of mental or other disability, age or illness and who is, or may be, unable to take care of him or herself or unable to protect him or herself against significant harm or exploitation.
4. **Regulated activity** "is the teaching, training or instruction of children, carried out by the same person frequently (once a week or more often) or on 4 or more days in a 30-day period or overnight."*

* Source: 'Regulated activity in relation to children: scope Factual note by HM Government' 2012.
5. An **associate** is an individual who delivers services for The Dyslexia Association on a self-employed or casual worker basis.

The Principles of this Policy

The policy is applicable to all, but any adults who work in regulated activity for The Dyslexia Association are bound by this policy.

The principles are:

- The welfare of the young person or vulnerable adult is paramount.
- The Dyslexia Association will work together with other relevant agencies.
- The Dyslexia Association will be open with parents as long as this does not put the vulnerable adult or young person at risk.

- Confidentiality is important in all cases but not at the expense of the welfare of the vulnerable adult or young person.
- The Dyslexia Association accepts the duty of care to all vulnerable adults or young people with whom it works and will ensure that the activities it runs and the environment it works in are safe.
- The Dyslexia Association recognises the existence of unidentified abused children or vulnerable adults and that some of these may present in activities organised by The Dyslexia Association.
- Each staff member, associate, volunteer or staff contracted from outside agencies is responsible for ensuring that the policy is translated into action through his or her daily practice.
- The Dyslexia Association and its partners will ensure that all staff, associates and volunteers interacting with young people are aware of their responsibilities for safeguarding the welfare of the vulnerable adults or young people. This will be done through providing training and support in helping them understand the needs of individuals with whom we work, as well as ensuring they understand their individual and organisational responsibilities when working with young people.
- The Dyslexia Association will facilitate regular updating of training for all those engaged in delivering its services. It is the responsibility of all to ensure that their working knowledge is updated at this training. Safeguarding training starts at the induction programme for all engaged in the activities of The Dyslexia Association.

Commitment to Procedures

The Dyslexia Association is committed to the principles which have been outlined and will implement them through the guidelines laid out in this policy. Each individual is responsible for ensuring that the policy is translated into action through his or her daily practice.

Legal Basis of the Role of The Dyslexia Association

The role of The Dyslexia Association is not to investigate these matters. As issues arise, The Dyslexia Association's role will be to record events. All concerns should be referred immediately to the Designated Safeguarding Officer from where the matter will be referred (where relevant) to the designated local authority and their safeguarding/child protection procedures.

The Role of the Designated Safeguarding Officer

It is the role of the designated safeguarding officer (DSO) to follow up all potential safeguarding issues and to make referrals to other agencies when appropriate. A designated safeguarding officer will always be available (during teaching hours) to discuss any safeguarding concerns. At least one

member of the DSO team will be available to contact during any out of hours activities.

The DSOs will complete refresher training at least every two years. They will also take part in internal safeguarding meetings and local authority organised events in order to keep up-to-date with issues and serious case reviews.

Safer Recruitment

The Dyslexia Association ensures safe recruitment by undertaking the following procedures:

- All those involved in recruitment are aware of and implement safer recruitment practices
- Qualification checks
- Enhanced DBS checks for those working in regulated activity
- Photo ID information
- Reference checks

All those individuals involved in the management of The Dyslexia Association will be subject to an enhanced DBS check and added to the single central register.

An accompanying policy outlines our recruitment policy in detail, including all procedures and practice for recruitment.

Records of Issues and Incidents

The vulnerable adult or young person at the centre of any safeguarding issue has a need for confidentiality. Therefore, The Dyslexia Association has a need for security to ensure this confidentiality. However, this is not absolute confidentiality and all records should be available for inspection by any investigating body.

All safeguarding incidents will be recorded using an agreed format and will be stored securely in a separate safeguarding file.

Sharing of Information

No one will make decisions within The Dyslexia Association about safeguarding issues on his or her own. The only decision to make is whether to refer the matter on to an investigating body. This decision will normally be made through discussion between the individual raising the concern and a Designated Safeguarding Officer.

Relationships with Parents

The Dyslexia Association wishes to preserve its good relationships with the parents of the young people associated with it, both as service users and volunteers. However, the first principle on which The Dyslexia Association's work is based is that the welfare of the young person is paramount. Consequently, The Dyslexia Association will consult and confer with parents of the young person involved in a safeguarding matter openly and honestly, except in circumstances where the young person's welfare may be harmed by doing so.

Maintaining High Standards

The Dyslexia Association places people in positions of responsibility for vulnerable adults and young people. Consequently, The Dyslexia Association seeks to do all that is reasonable to ensure the good character of all who deliver its services, including volunteers, and the safety of young people. Therefore, recruitment and induction procedures are necessarily robust and enhanced DBS checks are undertaken where necessary. The Dyslexia Association recognises however that these checks are not a guarantee that the checked person's behaviour will always continue to be appropriate. All individuals are responsible for maintaining high standards of behaviour when engaged in the The Dyslexia Association's provision and are encouraged to raise their own concerns about others' inappropriate behaviour with any of the Designated Safeguarding Officers. We maintain a single central register with all necessary details which is updated, monitored and reviewed.

Safeguarding of Young People with SEND

A very high percentage of learners with The Dyslexia Association have an education, health and care plan (EHCP) or some form of special educational need and/or disability (SEND). It is recognised that additional barriers can exist with this group of learners when recognising abuse and neglect. These barriers can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- The potential for children with SEND and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs;
- Communication barriers and difficulties in overcoming these barriers.

The Dyslexia Association recognises these as potential barriers and takes them into account when dealing with potential safeguarding issues. Our knowledge of the learner's individual needs and our

relationships with learners are paramount to any issue we deal with and inform our practice at all times.

Support for Staff, Associates and Volunteers Involved in Safeguarding Issues

The Dyslexia Association recognises that safeguarding issues are likely to be stressful for all involved and will seek to provide a reasonable and appropriate level of support. If anyone delivering services for The Dyslexia Association is cited in any way as part of an incident this individual will be removed from the situation immediately.

If individuals have concerns about anything that could be a safeguarding issue, they will talk to their line manager or anyone who is responsible for managing the provision for the young person. All concerns will be recorded using the agreed format (Appendix 1).

Training for Staff, Associates and Volunteers

Designated Safeguarding Officers will complete refresher training at least every two years. Staff, associates and volunteers will be provided with regular training. This may be in the form of e-learning such as that provided by Nottinghamshire Safeguarding Children Partnership.

Supervision of Young People

The young people in The Dyslexia Association's care will be properly supervised at all times.

Visitor Policy

The Dyslexia Association is located in a shared building and visitors may be greeted at the shared reception point. All visitors are required to sign the Signing-in Form in The Dyslexia Association reception area.

Dealing with Disclosure

This is a quick reference guide to working with young people under the Safeguarding Principles.

1. An open and honest disclosure of abuse by a young person to a member of staff, associate or volunteer is an indication of the high level of esteem and trust that the young person has for the member of staff, associate or volunteer. The member of staff, associate or volunteer should reciprocate that respect by supporting the young person appropriately.
2. Any allegation of any form of abuse by a young person must be taken seriously. This can also include any allegations made by a learner against another learner.

3. As soon as you have a safeguarding concern:

- Do not question the young person - just listen.
- Do not promise confidentiality; explain your responsibilities.
- Do not use leading questions.
- Do not stop a young person who is freely recalling significant events.
- Do not ask the young person to repeat his or her story to a colleague.
- Do not ask the young person to write down his or her story.
- Do not conduct your own investigation into any incident.
- Keep control; the young person will be depending on you.
- Keep an open mind.
- Respond to the young person's emotional state appropriately.
- Beware of your own interpretation of what you hear.
- If the child is in immediate danger all staff, associates and volunteers MUST take emergency action, i.e. call the relevant emergency service.
- Contact the Designated Safeguarding Officer to discuss the disclosure and take further advice immediately.
- As soon as possible, record information including times and those in attendance, as well as what was said.
- Record all subsequent events up to the time of police or children's social care intervention in your own handwriting. Sign and date each page.
- Support the young person's feelings and manage your own or seek support if you require it.
- Do not make statements to any media or any member of the public.
- All external enquiries (from media or public) must be directed towards the Designated Safeguarding Officer.

By following these guidelines, be assured that what you have done is right and you are following the best procedure for supporting the young person.

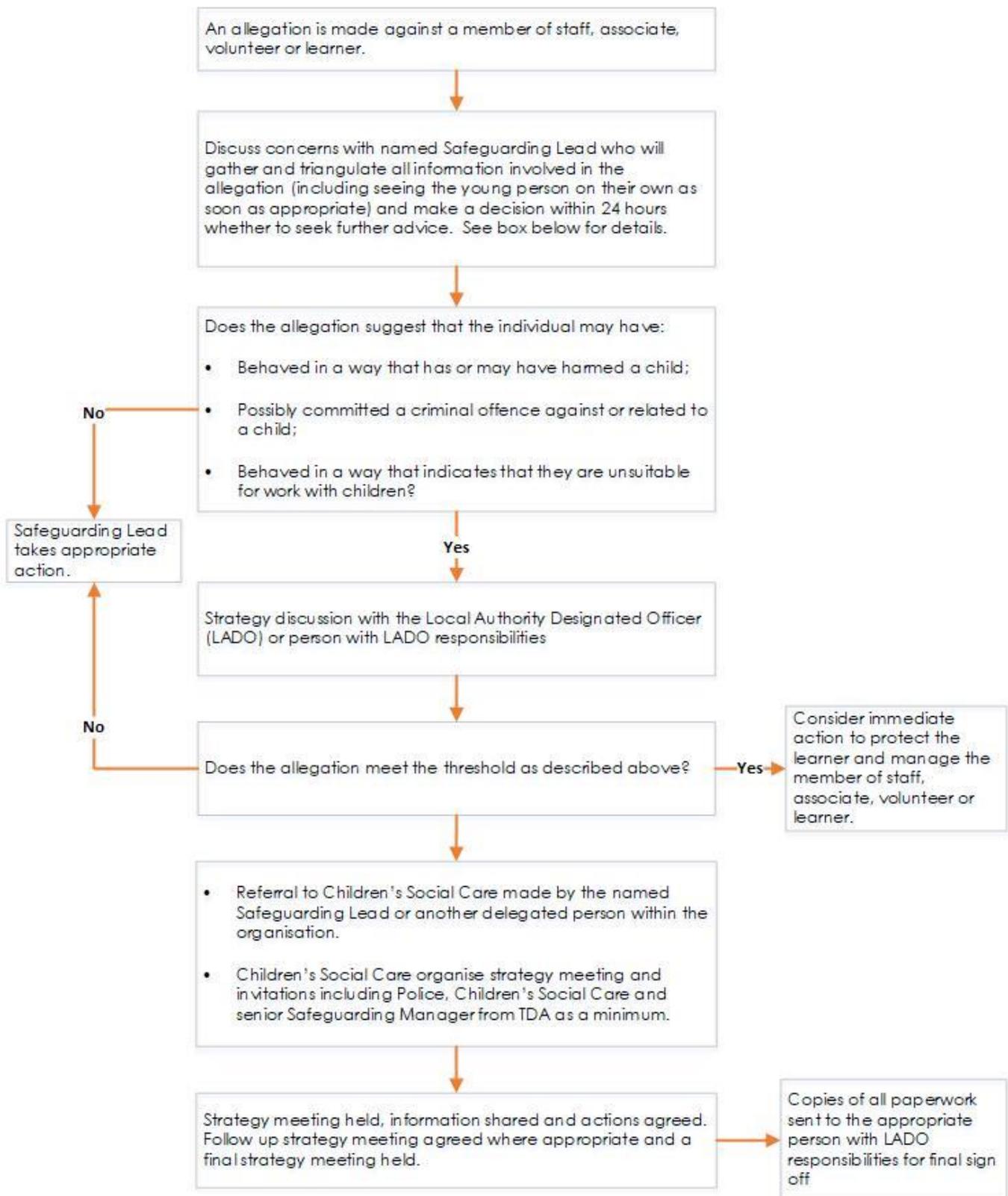
As an organisation we fully understand the trauma involved in dealing with disclosure. Discuss any personal needs initially with your line manager and/or the Designated Safeguarding Officer and

make any arrangements for further support you may require. Do not feel isolated in these matters.

Guidance Information for Allegations Made Against a Member of Staff, Associate or Volunteer

There are strict local authority procedures around the management of allegations made against a member of staff, associate or volunteer working for an organisation. So that allegations made against a member of staff, associate or volunteer are dealt with objectively and without prejudice, the local authority enforces that any allegation against a member of staff, associate or volunteer within an organisation must then be discussed with the Local Authority Designated Officer (LADO). Following any formal referral, the LADO will take further decisions including protocols and procedures involving the police.

Managing an allegation made against a member of staff, associate, volunteer or another learner



Guidance Information for Staff, Associates and Volunteers

Categories of Young Person Abuse - Definitions to Support Your Work

It is accepted that any definition has its limitations in terms of accuracy and relevance. Bearing this in mind, the following definitions are offered to help our understanding.

Bullying

Bullying is repeated behaviour that hurts someone, either physically and/or emotionally. It includes hitting, pushing, spreading rumours, threatening or undermining a person and it can happen anywhere. Cyberbullying takes place online.

There are several signs which may indicate that an individual is being bullied. These include:

- physical injuries, such as unexplained bruises
- eating or sleeping problems
- being distressed, nervous, withdrawn or losing confidence
- underperforming
- belongings being damaged or 'lost'
- bullying others.

Child Sexual Exploitation

The sexual exploitation of children and young people under-18 (CSE) is defined as that which:

'involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities'.

Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.' (Department for Education, 2012)

Child sexual exploitation is a form of abuse which involves children (male and female, of different ethnic origins and of different ages) receiving something in exchange for sexual activity. Schools are well placed to prevent, identify and respond to children at risk of sexual exploitation.

Who is at Risk?

Child sexual exploitation can happen to any young person from any background. Although the research suggests that females are more vulnerable to CSE, boys and young men are also victims of this type of abuse.

The characteristics common to all victims of CSE are not those of age, ethnicity or gender, rather their powerlessness and vulnerability. Victims often do not recognise that they are being exploited because they will have been groomed by their abuser(s). As a result, victims do not make informed choices to enter into, or remain involved in, sexually exploitative situations but do so from coercion, enticement, manipulation or fear. Sexual exploitation can happen face to face and it can happen online. It can also occur between young people.

In all its forms, CSE is child abuse and should be treated as a child safeguarding issue.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a young person such as to cause severe and persistent adverse effects on the young person's emotional development. It may involve conveying to a young person that he or she is worthless or unloved, inadequate or valued only in so far as he or she meets the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on a young person. It may involve causing a young person frequently to feel frightened or in danger or the exploitation or corruption of a young person. Some level of emotional abuse is involved in all types of ill treatment of a young person, though it may occur alone.

Female Genital Mutilation (FGM)

The World Health Organisation defines FGM as "all procedures (not operations) which involve partial or total removal of the external female genitalia or injury to the female genital organs whether for cultural or other non-therapeutic reasons" (1996).

It is illegal in the UK to subject a child to FGM or to take a child abroad to undergo FGM. A child for whom FGM is planned is at risk of significant harm through physical abuse and emotional abuse, which is also categorised by some as sexual abuse. Despite the harm it causes, many women from

FGM practising communities consider FGM normal to protect their cultural identity. Although FGM is practised by secular communities it is most often claimed to be carried out in accordance with religious beliefs. However, neither the Bible nor the Koran supports the practice of FGM. In addition to giving religious reasons for subjecting girls to FGM, adults may say that they are acting in a child's best interests because it:

- Brings status and respect to the girl
- Preserves a girl's virginity / chastity
- Is a rite of passage
- Gives a girl social acceptance especially for marriage
- Upholds the family honour
- Helps girls and women to be clean and hygienic.

The age at which girls are subjected to FGM varies greatly, from shortly after birth to any time up to adulthood. The average age is 10-12 years. Health implications can range from severe pain and emotional/psychological trauma to, in some cases, death.

Therefore, it is our duty as an educational provider to ensure that:

- Staff, associates and volunteers have an awareness of FGM and understand the signs indicating that a girl has undergone FGM or is at risk of this practice;
- We follow local authority procedures when a girl is at risk of or is suspected to have undergone FGM. These procedures include a referral to the relevant local authority social care (following local procedures) and reporting to the police when known cases have occurred with girls under the age of 18.

Neglect

Neglect is the persistent failure to meet a young person's basic physical and/or psychological needs, likely to result in the serious impairment of the young person's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect the young person from physical harm or danger or the failure to ensure access to appropriate medical aid or treatment. It may also include neglect of, or unresponsiveness to, a young person's basic emotional needs.

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a young person. Physical harm may also be caused when a parent or carer feigns the symptoms of or deliberately causes ill health to a young person whom he or she is looking after. This is commonly described using terms such as induced/fabricated illness by carer or Munchausen's Syndrome by Proxy or more recently "facilitated illness".

Preventing Radicalisation

Preventing violent extremism by countering the ideology of extremism and by identifying those who are being drawn into radicalism has for some time formed part of our approach to safeguarding. The Counter-terrorism and Security Act 2015 now imposes a duty on a wide range of bodies including all education providers.

Our practice in this area is taken from the revised Prevent Duty Guidance. As an education provider, we are expected to:

- Assess the risk of children being drawn into terrorism and have clear procedures in place for protecting children at risk of radicalisation;
- Work in partnership with our local authorities by ensuring our safeguarding arrangements take into account the policies and procedures of the relevant local authority Safeguarding Children's Board;
- Work in partnership with parents/carers by ensuring effective engagement with them when concerns are raised about their children;
- Ensure staff, associates and volunteers are trained to identify children at risk of being drawn into terrorism and challenge extreme ideas;
- Ensure that children are safe from terrorist and extremist material when accessing the internet at The Dyslexia Association;
- Understand when it is appropriate to make a referral to the Channel Programme, the panel that reviews and refers individuals to programmes that challenge extremist ideology.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the young person is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities such as involving a young person looking at, or in the production of, pornographic material or watching sexual activities or encouraging a young person to behave in sexually inappropriate ways.

Youth Produced Sexual Imagery

Youth produced sexual imagery is the definition The Dyslexia Association uses for the activities usually known as sexting. These activities are those covered by the 'the sending or posting of sexually suggestive images, including nude or seminude photographs via mobiles or via the internet.'

Imagery and images cover photographs and moving images sent by young people and images they, or another young person, may have created.

The law states that the making, possessing and distributing any imagery of someone under 18 which is indecent is illegal and this includes imagery of yourself.

However, The Dyslexia Association does not want to criminalise young people and certain incidents can be treated as a safeguarding issue but only in very specific circumstances.

An immediate referral to the police and/or children's social care will be made if:

1. The incident involves an adult;
2. There is reason to believe that a young person has been coerced, blackmailed or groomed or there are concerns about his or her capacity to give informed consent;
3. What you know about the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental and/or cognitive age;
4. The imagery involves sexual acts and any young person under the age of 13;
5. There is reason to believe a learner is at immediate risk of harm owing to the sharing of the imagery e.g. presents as suicidal or is self-harming.

Where a referral is not made, the following risks will be considered when treating the incident as a safeguarding concern and, dependent on the outcome, a referral may still be made:

1. Why was the imagery shared? Was the young person coerced or put under pressure to produce the imagery?

2. Who has shared the imagery? Where has the imagery been shared? Was it shared/received with the knowledge of the pupil in the imagery?
3. Are there any adults involved in the sharing of the imagery?
4. What was the impact on the young person involved?
5. Do the pupils involved have additional vulnerabilities?
6. Does the young person understand consent?
7. Has the young person taken part in this kind of activity before?

The youth produced imagery should not be viewed by adults, unless:

- It is the only way to make a decision about whether to involve other agencies;
- It is necessary to report the image to the website, app or suitable reporting agency to have it removed or to support the young person in making a report;
- It is unavoidable because the young person has presented the image or it has been found on The Dyslexia Association network.

If the imagery is to be viewed these points will be followed:

Do

- ✓ Discuss and record decisions with the support of the Designated Safeguarding Officer.
- ✓ Ensure that the viewing takes place with the Designated Safeguarding Officer.
- ✓ Ensure viewing takes place on The Dyslexia Association premises.
- ✓ Ensure viewing is done by a member of the same sex.
- ✓ Record the viewing of the imagery in the safeguarding records.

Never

- ✗ Print, copy or share the imagery.

- ✘ View unnecessarily.
- ✘ Put the child at further risk.
- ✘ Allow any people other than the Designated Safeguarding Officer to view the imagery.

All decisions taken will be recorded and any viewing of imagery for the reasons above will be recorded as a safeguarding and e-safety incident and will follow the procedures for the reporting of such incidents.

Managing Incidents of Self Harm

Introduction

Self-harm is often an indicator of emotional distress and can be a sign of mental health problems. The purpose of this guidance is to provide additional support for staff, associates and volunteers working with children and young people who are either self-harming or at risk of self-harm or suicide. The Dyslexia Association aims to provide a non- judgemental, consistent and caring response to all incidents. Our aim is to support staff, associates and volunteers to feel confident and informed in order to appropriately support children and young people. Staff, associates and volunteers should know who to consult with and possible referral pathways.

What is Self-harm?

Self-harm is where someone does something to deliberately hurt him or herself. This non- exhaustive list may include behaviours such as cutting, scratching, tying something around the body, inserting items into the body, hitting or punching self, pulling out hair, over/under eating, burning or scalding themselves, hitting head, self-strangulation, taking nonprescription drugs, overdosing or self-poisoning.

Signs and Symptoms

Signs and symptoms are sometimes absent or easy to miss. It is not uncommon for individuals who self-harm to offer stories which seem implausible or which may explain one of, but not all, the physical signs. If a pupil says he or she is not self-harming or evades the question, you can 'keep the door open' by reminding him or her that you are always available to talk about anything, should he or she so wish. Try to stay connected to the pupil and look for other opportunities to ask, particularly if there are continuing signs that your suspicion is correct.

Guidance for Managing Incidents of Self-harm

- Do find out about potential triggers and what to look for where there is a history of self-harm.
- Do remain calm and find somewhere private to talk.
- Do not promise absolute confidentiality.
- Do provide or seek medical first aid if necessary.
- Do think about managing contagion and keeping the environment safe for other vulnerable adults, children and young people.
- Do speak to the Designated Safeguarding Officer to assess risk and think about protective factors. This will include a discussion around intent for each individual incident.

Recording of Incidents

Do record every incident, in a timely manner, and store within the separate safeguarding file.

Seeking Support

The Dyslexia Association is committed to ensuring the welfare of staff, associates and volunteers to ensure that they are able to effectively manage the needs of vulnerable adults, children and young people. Please do look after yourself and access support from your line manager or Designated Safeguarding Officers.

For more information and advice on self-harm and suicide prevention: www.harmless.org.uk
www.youngminds.org.uk

Student Safeguarding Statement to Learners

The safety of all children and young people is paramount and all staff, associates and volunteers will listen to every concern and disclosure with sensitivity and respect and take what is said seriously.

The Dyslexia Association needs to make sure that it does "the right thing" for learners who disclose a concern or safeguarding issue. So if what is said to staff, associates or volunteers makes them concerned then they will need to discuss your concern or disclosure so that decisions can be made about what to do next. You will be fully informed about any decisions that are made.

If appropriate, children's social care or the police may then start an investigation and they may want to talk to you or other people involved. In these matters, your safety is paramount so you can be sure that they will only do what is right and proper.

If any member of staff believes you are in immediate danger he or she will contact the relevant

emergency service (e.g. police, ambulance) so help can be sought straight away.

Student Safeguarding Statement to Parents/Carers

The safety of all children and young people is paramount and all staff, associates and volunteers will listen to every concern and disclosure with sensitivity and respect and take what is said seriously.

The Dyslexia Association needs to make sure that it does 'the right thing' for learners who disclose a concern or safeguarding issue. So if what is said to staff, associates or volunteers makes them concerned then they will need to discuss the learner's concern or disclosure so that decisions can be made about what to do next. The learner will be fully informed about any decisions that are made.

If appropriate, children's social care and the police may start an investigation and they may want to talk to you or other people involved. In these matters, the safety of all children and young people is paramount so parents/carers can be sure that investigators will only do what is right and proper.

If any member of staff, associate or volunteer thinks that a learner is in immediate danger, emergency help (e.g. police, ambulance) will be sought straight away.

Child Protection

Child Protection Procedures

All learners at some point may require additional support to keep them safe in the interest of their own welfare. However all practitioners have a responsibility to refer a child to children's social care under section 11 of the Children Act 2004 if they believe or suspect that the child:

- Has suffered significant harm;
- Is likely to suffer significant harm;
- Has a disability, developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent) under the Children Act 1989;
- Is a Child in Need whose development would be likely to be impaired without provision of services.

Anyone can make a referral directly to children's social care (using the details below), or the police, if he or she suspects a child is suffering significant harm and not in immediate danger (call 101) or in immediate danger or an emergency (999).

Alternatively, for further support and advice contact a Designated Safeguarding Officer without delay to discuss your concerns. You may be asked to put your concerns in writing with further details. These details may be used to make a direct referral to social care so be sure to include as much information about the incident/disclosure/concern as you can.

Access to child protection services are local to the area in which the child or family reside. Contact details are below. Click on the link to access further information on how to report a concern about a child.

Area	Child Protection	Local Safeguarding Board
Derby City	<u>Derby Children's Social Care</u>	https://www.derbyscb.org.uk/
Derbyshire	<u>Starting Point</u>	https://www.derbyshirescb.org.uk/home.aspx
Leicester City	<u>Childrens Social Care Referrals</u>	http://www.lcityscb.org/
Leicestershire	<u>First Response</u>	http://lrsb.org.uk/
Lincolnshire	<u>Children's Services Customer Service Centre</u>	https://www.lincolnshire.gov.uk/
Nottingham City	<u>Children and Families Direct</u>	https://www.nottinghamcity.gov.uk/children-and-families/nottingham-city-safeguarding-children-board/
Nottinghamshire	<u>MASH</u>	http://www.nottinghamshire.gov.uk/nscb

Please Note:

This policy links directly to other policies of The Dyslexia Association. These are:

- Whistleblowing Policy (Please see Staff Handbook)
- Recruitment Policy
- IT User Policy (Please see Staff Handbook)
- Equality and Diversity Policy (Please see Staff Handbook)
- The General Data Protection Regulations Policy

This policy will be reviewed on an annual basis by The Dyslexia Association's Designated Safeguarding Officers and ratified by the Trustees. It will be reviewed in line with any lessons learnt through safeguarding incidents, audits and training. This process informs the quality assurance of this policy.

Revision History:

12.02.19 - Policy revised and rewritten for The Dyslexia Association