

Dedham Therapy Farm CIC

Safeguarding policy and procedure.

Next review: September 2026

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Signed by DSL		Date 02.09.2025
Signed by independent consultant - Mrs Caroline Allen (PGDip. Ed., EYPP., Mont.Int.Dip., B.A.)		
Next Review	September 2026	

Introduction

This policy applies to all staff, including Directors, management, volunteers, sessional workers, students or anyone on behalf of the above.

Safeguarding is the action that is taken to promote the welfare of children and protect them from harm.

Safeguarding means:

- Protecting children from abuse and maltreatment.
- Preventing harm to children's health and development.
- Ensuring children grow up with the provision of safe and effective care.

Statutory Framework

There is government guidance set out in [Working Together to Safeguard Children \(DfE 2023\)](#) on how agencies must work in partnership to keep children safe. This guidance places a shared and equal duty on three Safeguarding Partners (the Local Authority, Police and Health) to work together to safeguard and promote the welfare of all children in their area under multi-agency safeguarding arrangements. These arrangements sit under the [Essex Safeguarding Children Board](#) (ESCB). In

Essex, the statutory partners are Essex County Council, Essex Police and three NHS Integrated Care Boards covering the county.

Section 175 of the Education Act 2002 (*Section 157 for Independent schools*) places a statutory responsibility on the governing body to have policies and procedures in place that safeguard and promote the welfare of children who are pupils of the school.

Definition

In accordance with the Children Act 1989 and 2004, a child is any person who has not yet reached their 18th birthday. For the purpose of these procedures the reference to children therefore means 'children and young people' throughout.

"Farm Assistant" – Throughout this document Farm Assistant refers to a child or young person accessing Dedham Therapy Farm as a service user.

"SEMH" **SEMH** stands for **Social, Emotional, and Mental Health** needs. It refers to a type of special educational need where children may struggle with managing their emotions or behaviour due to unmet social or emotional needs. , UKCIS, LADO, HCPC, NICE, DSL, DDSL.

"LADO" The **Local Authority Designated Officer (LADO)** is responsible for overseeing concerns and allegations involving individuals working with children and young people. Their role includes:

- Coordinating responses to allegations against professionals or volunteers working with children, ensuring these are handled quickly, fairly, and effectively.
- Managing allegations against adults who work with children, collaborating with police, children's social care, and other professionals.

"HCPC" - The Health and Care Professions Council (HCPC) is a statutory regulator in the UK responsible for overseeing and regulating over 280,000 professionals from 15 health and care professions. Its primary purpose is to protect the public by setting and maintaining standards of proficiency and conduct for the professions it regulates. The HCPC also ensures that education and training programs meet predetermined professional requirements and standards of practice.

"NICE" - Nice guidelines refer to the **evidence-based recommendations** developed by the National Institute for Health and Care Excellence (NICE) in the UK.,

"DSL" - The term DSL stands for Designated Safeguarding Lead. A DSL is a senior staff member responsible for safeguarding and child protection within an organisation, particularly in educational settings. Their role includes being the main contact for any safeguarding concerns, ensuring that the organization adheres to statutory safeguarding policies, and taking appropriate actions if abuse or neglect is suspected

“DDSL” - The term DDSL stands for Deputy Designated Safeguarding Lead. A DDSL is a senior staff member responsible for safeguarding and child protection within an organisation, particularly in educational settings. Their role includes being the main contact for any safeguarding concerns, ensuring that the organization adheres to statutory safeguarding policies, and taking appropriate actions if abuse or neglect is suspected

Policy Statement

Dedham Therapy Farm CIC is committed to safeguarding all children and young people involved in its services. We ensure their welfare is paramount by:

- Creating a safe, respectful environment for children, staff, and volunteers.
- Listening to children and valuing their voices.
- Appointing a nominated child protection lead and a board-level safeguarding lead.
- Developing and maintaining clear safeguarding and child protection procedures.
- Staff will be trained to Level 2 at least annually. DSL team to be trained to Level 3 at least every 2 years. Plus other relevant CPD in safeguarding topics.
- Making safeguarding policies accessible to children, young people, and families.
- Promoting a safeguarding culture where concerns can be shared without fear.
- Acting appropriately when concerns or disclosures of abuse/neglect arise.
- Encouraging feedback through anonymous post boxes, online forms, and parent/carer input.
- Supporting children’s SEMH (social, emotional, and mental health) in every session.
- Following Essex Safeguarding Children Board SET Child Protection Procedures (2022).
- Applying a safer recruitment policy, including enhanced DBS checks and online searches.
- Monitoring, updating, and communicating Codes of Conduct and safeguarding practices.
- Ensuring all staff and volunteers complete induction and remain familiar with safeguarding responsibilities.

Commitment

Act promptly when a child discloses abuse/neglect or when staff/volunteers raise concerns

Ensure all staff/volunteers understand indicators of abuse and the correct actions to take and remain familiar with their responsibilities

Encourage child/parent input through anonymous post boxes and online feedback forms

Underpin all sessions with Behaviour Policy and pastoral systems, reinforcing SEMH throughout

Keep activities safe and engaging working towards positive outcomes

Apply safer recruitment: enhanced DBS checks (kept up to date) and online searches for shortlisted candidates

To protect staff, volunteers and Farm Assistants Dedham Therapy Farm CIC working alone with children and young people

Maintain, monitor, and communicate Codes of Conduct across the organisation

Keep information and data safe and secure

Appoint a Designated Safeguarding Person (DSP) as first point of contact for concerns and action decisions - 01206 326428

Linked Policy

Safeguarding Procedures & Whistleblowing policy

[Training & supervision Policy](#)

Participation & Feedback Policy

Behaviour Policy / SEMH Support Policy

[Risk assessment policy & Health and safety policy](#)

[Safer Recruitment Policy](#)

[Lone working procedure](#)

Code of Conduct – staff handbook

[Privacy, data protection policy](#)

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Designated Safeguarding Leads responsibilities (DSL & DDSL)

Dedham Therapy Farm CIC will ensure an appropriate senior member of staff, is appointed to the role of Designated Safeguarding Lead. The DSL & DDSL should take lead responsibility for safeguarding and child protection (including online safety and understanding the filtering and monitoring systems and processes in place). This should be explicit in the role holder's job description. The DSL & DDSL should have the appropriate status and authority within the setting to carry out the duties of the post. The role of the DSL & DDSL carries a significant level of responsibility, and they should be given the additional time, funding, training, resources and support they need to carry out the role effectively. Their additional responsibilities include providing advice and support to other staff on child welfare, safeguarding and child protection matters, taking part in strategy and inter-agency meetings, and/or supporting other staff to do so, and contributing to the assessment of children.

Any deputies should be trained to the same standard as the designated safeguarding lead and the role should be explicit in their job description. Whilst the activities of the designated safeguarding lead can be delegated to appropriately trained deputies, the ultimate lead responsibility for child protection, as set out above, remains with the designated safeguarding lead, this lead responsibility should not be delegated.

Availability during term time the designated safeguarding lead (or a deputy) should always be available (during term and opening hours) for staff in the organisation to raise any safeguarding concerns. Whilst generally speaking the designated safeguarding lead (or a deputy) would be expected to be available in person, it is a matter for the directors, working with the designated safeguarding lead, to define what "available" means and whether in exceptional circumstances availability via phone and or Skype or other such media is acceptable. It is a matter for the setting and the designated safeguarding lead to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

Abuse, neglect & exploitation

Recognising Abuse

Child abuse occurs to children of both sexes and all ages, in all cultures, religions, and social classes and to children with and without disabilities. All staff and volunteers should be alert to signs that a child may be at risk of significant harm.

Abuse

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or

community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

Child on child abuse

Child-on-child abuse is most likely to include, but may not be limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying)
- abuse in intimate personal relationships between children (sometimes known as ‘teenage relationship abuse’)
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)
- sexual violence, such as rape, assault by penetration and sexual assault; (this may include an online element which facilitates, threatens and/or encourages sexual violence) Consensual image sharing, especially between older children of the same age, may require a different response. It might not be abusive – but children still need to know it is illegal- whilst non-consensual is illegal and abusive. UKCIS provides detailed advice about sharing of nudes and semi-nude images and videos
- sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party
- consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)
- upskirting, which typically involves taking a picture under a person’s clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm, and
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

Domestic Abuse

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects

of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). All of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

Physical abuse

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

Emotional Abuse

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

Sexual Abuse

Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (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 in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to

behave in sexually inappropriate ways, or grooming of a child in preparation for abuse Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation

Is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if their sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Harmful Sexual Behaviour (HSB)

Children's sexual behaviour exists on a wide continuum, ranging from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. HSB can occur online and/or face-to-face and can also occur simultaneously between the two. HSB should be considered in a child protection context. When considering HSB, both ages and the stages of development of the children are critical factors. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature. Dedham Therapy Farm recognises that often children that display harmful sexual behaviour have often experienced their own abuse or trauma.

Children who have experienced sexual violence display a very wide range of responses to their experience, including in some cases clear signs of trauma, physical and emotional responses, or no overt signs at all. Dedham Therapy Farm remains alert to the possible challenges of detecting those signs and show sensitivity to the needs of the irrespective of how overt the child's distress is.

FGM Female Genital Mutilation

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.

- A relative or someone known as a 'cutter' visiting from abroad.
- A special occasion or ceremony takes place where a girl 'becomes a woman' or is 'prepared for marriage'.
- A female relative, like a mother, sister or aunt has undergone FGM.
- A family arranges a long holiday overseas or visits a family abroad during the summer holidays.
- A girl has an unexpected or long absence from school or sessions.
- A girl struggles to keep up in school.
- A girl runs away – or plans to run away - from home.
- Having difficulty walking, standing or sitting.
- Spending longer in the bathroom or toilet.
- Appearing quiet, anxious or depressed.
- Acting differently after an absence from school, college or farm sessions.
- Reluctance to go to the doctors or have routine medical examinations.
- Asking for help – though they might not be explicit about the problem because they're scared or embarrassed

If Staff have concerns regarding FGM. The safeguarding procedure must be followed and details must be reported to relevant services within 48 hours of concern raised.

Forced Marriage

When it comes to the marriage of an adult, a forced marriage is not the same as an arranged marriage. There are clear distinctions between them. In an arranged marriage, the families of both spouses take a leading role in the arrangements, but the choice of whether to go ahead with the

marriage remains the decision of the prospective spouses. However, in a forced marriage, one or both spouses do not consent to the marriage but are coerced into it. An arranged marriage can, however, become a forced marriage if there is any form of coercion. Forcing someone to marry against their will can include in some cases physical violence and/or psychological, financial, sexual and emotional pressure. In cases of vulnerable adults who lack the capacity to consent, coercion is not required for a marriage to be forced.

When it comes to the marriage of a child, the distinction between a forced marriage and an arranged marriage does not exist. Following legislation which came into force on 27 February 2023, it is an offence to engage in any conduct for the purpose of causing a child to marry before their eighteenth birthday, even if violence, threats or another form of coercion are not used. Such a marriage is deemed a forced marriage.

Forced marriage can happen to both women and men, although many of the reported cases involve young women and girls aged between 16 and 25. There is no “typical” victim of forced marriage. They can be over or under 18 years of age, some may have a disability, some may have young children and some may also be spouses from overseas.

Neglect

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

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

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

Prevent

NAMED CHANNEL Safety Lead – Megan Dack megan.dack@dedhamtherapyfarm.org.uk

Dedham Therapy Farm staff and volunteers are committed to working with other organisations and young people accessing the service to reduce the risks and ensure prompt support network is in place for those vulnerable or at risk of radicalisation. All Staff are aware and frequently trained in prevent training. Staff training database to be kept up to date.

Children may be susceptible to radicalisation into terrorism. Similar to protecting children from other forms of harms and abuse, protecting children from this risk should be a part of the settings safeguarding approach. Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.

Radicalisation is the process of a person legitimising support for, or use of, terrorist violence.

Terrorism is an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate

the public and is made for the purpose of advancing a political, religious or ideological cause.

Although there is no single way of identifying whether a child is likely to be susceptible to radicalisation into terrorism, there are factors that may indicate concern. It is possible to protect people from extremist ideology and intervene to prevent those at risk of radicalisation being drawn to terrorism. As with other safeguarding risks, staff should be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or a deputy) making a Prevent referral.

Children potentially at risk of greater harm

We recognise that some children may potentially be at risk of greater harm and require additional help and support. These may be children with a Child in Need or Child Protection Plan, those in Care or previously in Care or those requiring mental health support. We work with Social Care and other appropriate agencies to ensure there is a joined-up approach to planning for these children and that they receive the right help at the right time.

Our setting understands that children with special educational needs (SEN) and / or disabilities can face additional safeguarding challenges. Barriers can exist when recognising abuse and neglect in this group of children. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability, without further exploration
- That they may be more prone to peer group isolation than others
- The potential to be disproportionately impacted by things like bullying, without outwardly showing signs
- Communication difficulties in overcoming these barriers

Children who may benefit from Early help intervention

Signs that a child or young person may benefit from early help include:

- displaying disruptive or anti-social behaviour
- being bullied or bullying others
- having poor attendance
- being involved in, or at risk of, offending
- having poor general health
- having anxiety, depression or other mental health issues
- misusing drugs or alcohol
- having a particularly challenging relationship with parents or appearing to be unusually independent from their parents
- experiencing difficulties at home, such as domestic abuse, parental substance abuse or parental mental health problems
- Is disabled or has certain health conditions and has specific additional needs
- Has special educational needs (whether or not they have a statutory Education, Health and Care plan)
- has a mental health need
- is a young carer
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing/goes missing from education, home or care.
- Is deliberately missing education or has persistent/or unexplainable absences
- has experienced multiple suspensions, is at risk of being permanently excluded from schools, colleges and in Alternative Provision or a Pupil Referral Unit.
- is at risk of modern slavery, trafficking, sexual and/or criminal exploitation
- is at risk of being radicalised or exploited
- has a parent or carer in custody, or is affected by parental offending

- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing alcohol and other drugs themselves
- is at risk of so-called 'honour'-based abuse such as Female Genital Mutilation or Forced Marriage
- is a privately fostered child.

Some groups of children may be more likely to need early help than their peers. These include children who:

- have been excluded from school
- have special educational needs
- are disabled
- are in care
- are leaving or preparing to leave care
- are young carers
- are young parents (or about to become young parents)
- are experiencing housing issues
- LGBT - Lesbian, Gay, Bi - Sexual, Transgender
- Missing from education
- Absent from education

In line with managing internally, the setting may decide that the children involved do not require referral to statutory services but may benefit from early help. Early help is support for children of all ages that improves a family's resilience and outcomes or reduces the chance of a problem getting worse. Providing early help is more effective in promoting the welfare of children than reacting later. Early help can be particularly useful to address non-violent HSB and may prevent escalation of sexual violence. It is particularly important that the designated safeguarding lead (and their deputies) know what the local early help process is and how and where to access support.

Criminal Court

Children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. There are two age appropriate guides to support children 5-11-year olds and 12-17 year olds. The guides explain each step of the process, support and special measures that are available. There are diagrams illustrating the courtroom structure and the use of video links is explained. Making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. The Ministry of Justice has launched an online child arrangements information tool with clear and concise information on the dispute resolution service. This may be useful for some parents and carers

Children with special educational needs or disabilities (SEND) or certain medical or physical health conditions can face additional safeguarding challenges both online and offline. Dedham Therapy recognises additional barriers can exist when recognising abuse, neglect & exploitation in this group of children. These can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's condition without further exploration
- these children being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children
- the potential for children with SEND or certain medical conditions being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs, and
- communication barriers and difficulties in managing or reporting these challenges.
- cognitive understanding – being unable to understand the difference between fact and fiction in online content and then repeating the content/behaviours in sessions or the consequences of doing so.

LGBT

The fact that a child or a young person may be LGBT is not in itself an inherent risk factor for harm. However, children who are LGBT can be targeted by other children. In some cases, a child who is perceived by other children to be LGBT (whether they are or not) can be just as vulnerable as children who identify as LGBT.

However, the Cass review identified that caution is necessary for children questioning their gender as there remain many unknowns about the impact of social transition and children may well have wider vulnerabilities, including having complex mental health and psychosocial needs, and in some cases additional diagnoses of autism and/or attention deficit hyperactivity disorder.

It is recommended that when families/carers are making decisions about support for gender questioning children, they should be encouraged to seek clinical help and advice. When parents are supporting pre-pubertal children, clinical services should ensure that they can be seen as early as possible by a clinical professional with relevant experience.

As such, when supporting a gender questioning child, the setting should take a cautious approach and consider the broad range of their individual needs, in partnership with the child's parents (other than in the exceptionally rare circumstances where involving parents would constitute a significant risk of harm to the child), including any clinical advice that is available and how to address wider vulnerabilities such as the risk of bullying. The setting should refer to our Guidance for Schools and Colleges in relation to Gender Questioning Children, when deciding how to proceed.

Risks can be compounded where children who are LGBT lack a trusted adult with whom they can be open. It is therefore vital that staff endeavour to reduce the additional barriers faced and find a safe space for them to speak out or share their concerns with members of staff they trust.

- Children missing education are children of compulsory school age who are not registered pupils at a school and are not receiving suitable education otherwise than at a school. Children missing education are at significant risk of underachieving, being victims of harm, exploitation or radicalisation, and becoming NEET (not in education, employment or training) later in life.
- Staff should be aware of the safeguarding response to children who are absent from education, particularly on repeat occasions and/or prolonged periods.

Effective information sharing - between parents, schools, local authorities and Dedham Therapy Farm CIC is critical to ensuring that all children of compulsory school age are safe and receive a suitable education. A member of staff will never guarantee confidentiality to anyone (including parents/carers or pupils) about a safeguarding concern, nor promise to keep a secret. In accordance with statutory requirements, where there is a child protection concern, this must be reported to the designated safeguarding lead and may require further referral to and subsequent investigation by appropriate authorities.

In some cases, it may be necessary for the designated safeguarding lead (or deputy) to share information on individual child protection cases with other relevant staff members. This will be on a 'need to know' basis only and where it is in the child's best interests to do so. Where there are concerns about the safety of a child, the sharing of information in a timely and effective manner between organisations can reduce the risk of harm. Whilst the Data Protection Act 2018 places duties on organisations and individuals to process personal information fairly and lawfully, it is not a barrier to sharing information, where the failure to do so would result in a child or vulnerable adult being placed at risk of harm. Similarly, human rights concerns, such as respecting the right to a private and family life, would not prevent sharing information where there are real

safeguarding concerns. Fears about sharing information cannot (and will not) stand in the way of the need to safeguard and promote the welfare of children at risk of abuse or neglect.

Recording concerns

It's important to record any concerns you may have about a child, to build up an overview of the child's lived experience so patterns of potentially abusive behaviour can be identified. These records should be shared with Dedham Therapy Farm DSL and DDSL who will consider all the available information and decide whether a referral to the local child protection services is necessary.

Dedham Therapy Farm CIC commit to reporting low level concerns but accepts it is up to the education provider that has referred to the organisation to decide whether these are reported to their DSL or the Principal.

Some general considerations are as follows:

- Identification of child abuse may be difficult; it normally requires both medical and social assessment.
- Different types of child abuse may be present at the same time, e.g. a child who is being sexually abused may also be being physically abused. When enquiring into one type of abuse staff needs to be alert to potential signs of other abuse.
- Always listen carefully to the child – pay particular attention to any spontaneous statement. In the case of children without speech or with limited language, pay attention to their signing or other means of expression, including behavior and play.
- Any delay in seeking medical assistance or indeed none being sought at all, could be an indicator of abuse.
- Beware if explanation of an accident is vague, lacking detail, is inconsistent with the injury, or varies with each telling.
- Take note of inappropriate responses from parents or carers.
- Observe the child's interaction with the parents – particularly wariness, fear or watchfulness.
- Any history or patterns of unexplained injury/illness requires the most careful scrutiny.

The fact that the parent/carer appears to be highly attentive and concerned should not divert attention from the assessment of risk.

- Beware if the child's injury is inconsistent with the child's development and mobility.
- Beware if there are indications of or a history of domestic violence. Violence towards adults may also indicate violence towards children and may be emotional abuse, if not physical.
- Children who are being abused often do not say and tend to perceive themselves as deserving of ill treatment. This is particularly so for children who are being emotionally abused.
- All staff should be aware that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, children may feel embarrassed, humiliated, or are being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the designated safeguarding lead (DSL). It is also important that staff determine how best to build trusted relationships with children and young people which facilitate communication.

Alternative provision

Whilst school and college still remains responsible for the pupils accessing alternative provision at Dedham Therapy Farm CIC. It remains the responsibility of staff and volunteers at Dedham Therapy Farm CIC to work collaboratively with the responsible school, college and local authority to ensure the safeguarding of the pupils referred by their education provider.

Online Safety

NAMED ONLINE SAFETY LEAD – Tom Clapson – tom.clapson@dedhamtherapyfarm.org.uk

Dedham Therapy Farm doesn't not provide access to the internet or any other forms of social media during activities with children and young people. However, it recognises the responsibility it has in supporting young people to understand the importance of safety online. Dedham Therapy Farm is likely to be in regular contact with parents and carers and education providers. Those communications should be used to reinforce the importance of children being safe online and help young and vulnerable people to understand the importance of being safe when online, including but not limited to social media use, conspiracy theories and disinformation. The use of AI is not required during activities and any use by staff must be online with data protection policy and regulations.

Filtering and monitoring

Dedham Therapy Farm understands and accepts its responsibility for ensuring the online safety whilst using Dedham Therapy Farm IT equipment.

Megan Dack, Amy Boyce and Sara Marshall - Directors are responsible for ensuring expected standards are met.

Decisions on filtering and monitoring will be reviewed annually.

Reasonable force/safe touch policy

There are occasions when staff will have cause to have physical contact with children and young people for a variety of reasons, this may include:

- to comfort a child or young person in distress (*appropriate to their age and individual specific needs identified through a risk assessment*);
- to direct a child or young person;
- in an emergency, to avert danger to the child, young person or others;

The guidance produced by the Department for Education [Use of Reasonable Force \(DfE, 2013\)](#) states that:

*“Schools **should not** have a ‘no contact’ policy. There is a real risk that such a policy might place a member of staff in breach of their duty of care towards a child or young person or prevent them taking action needed to prevent a child or young person causing harm.”*

The term ‘reasonable force’ covers a broad range of actions used by staff that involve a degree of physical contact to control or restrain children. There are circumstances when it is appropriate for staff to use reasonable force to safeguard children and young people, such as guiding a child to safety or breaking up a fight. ‘Reasonable’ means using no more force than is needed. Our setting works in accordance with statutory and local guidance on the use of reasonable force and recognises that where intervention is required, it should always be considered in a safeguarding context.

Dedham Therapy Farm CIC procedure for dealing with suspected abuse of trust by staff members/volunteers:

When dealing with issues concerning abuse of trust, Directors must remember that the welfare of the children participating in Dedham Therapy Farm CIC is paramount, but that we also have a responsibility to ensure that our staff & volunteers are treated fairly and with respect. This procedure is designed to meet both those objectives. The Directors should ensure that every member of staff is fully aware of these procedures.

Allegation received against staff/volunteer/organisation using site



Concern form must be completed and sent to DSL team within 24 hours or sooner if child in immediate danger Subject heading: Safeguarding



Consult the Local Authority Designated Officer (LADO) for advice before investigating or acting.



DSL and Management team to agree next steps after receiving advice from LADO



Apply safeguarding procedures following steps agreed after LADO consult.



Review outcome on an ongoing basis until satisfactory outcome has been achieved.

Action to be taken if a child or young person discloses abuse to you.

If a Farm Assistant approaches you about a safeguarding concern, you must follow the safeguarding procedure flow chart (page 21), considering points below.

- offer the Farm Assistant the opportunity to have someone else present when talking about the subject.
- assure them you will offer them support but must pass on information shared to another professional who may take appropriate action to keep them safe. Explain who in the team that will be.
- do not use physical contact, make judgement or offer opinions during the disclosure, allowing the Farm Assistant to use their own words.
- Explain what will happen next. Find out when the child is next due to see the individual who is the subject of the complaint. (You will then be able to make a judgement as to the appropriate timing of your follow-up actions to ensure that the child remains safe.)

After any concern form is received by the safeguarding team they must action the following:

- Safeguarding team to make decision on how to proceed, using risk assessment tools, and other governing bodies i.e consultation line, as to whether disclosure warrants reporting to external body and to document the outcome on the form.
- DSL to action referral where necessary and inform referring school where appropriate.
- DSL to save all relevant documents into child safeguarding file on their farm assistant folder and the designated safeguarding monitoring folder.
- If an allegation involves a member of the team, management and DSL to hold minuted meeting with the alleged. Staff member or volunteer to be suspended upon further investigation. All communication with alleged and rest of team to cease until investigation complete. Alleged to keep line of communication open with management, DSL and investigating body. All communication to be in writing or minuted.
- All documentation to be kept until retirement age of the alleged staff member
- All documentation to be kept on file for 25 years in relation to vulnerable person.
- Any false allegations or unfounded allegations will be permanently deleted and destroyed immediately. Other than information documented in session progress note.
- DSL and DDSL to monitor progress of any referral to LADO and follow up if no contact from ESCB following any referral.

Safeguarding Procedure

Staff member with a concern must complete a concern form for any concern they have for a Farm Assistant in any of the following areas - **Safeguarding, Bully, Behaviour, Other**

A concern form must be completed & sent in the same day as concern raised.

If child is in immediate danger DSL must be informed immediately so the emergency protocol can be followed – Police called – keeping Farm Assistant at the farm until risk can be mitigated



Create a safeguarding folder in the Farm Assistant File and name is Safeguarding – Save the concern form using the heading concern form DD.MM.YYYY.



Email the concern form to the Designated Safeguarding Lead and Deputy Safeguarding Lead – Using the subject Concern Form

A concern form must be completed & sent in the same day as concern raised.



DSL and DDSL will assess next steps and follow safeguarding protocol



DSL/DDSL will update the individual risk assessment and update the relevant staff member with next steps or plans of support.



If the staff member raising the concern feels the concern has not been dealt with adequately or needs more information they should go to the DSL or DDSL in the first instance to follow up. If they still are not confident the concern has been dealt with are concerned for the welfare of the Farm Assistant, the staff member should follow the farm whistle blowing policy.

Contacts for safeguarding board in Essex

- If you have an immediate safeguarding concern call 0345 603 7627 and ask for the priority line.
- Out of hours or bank holidays, call the emergency duty team on 0345 606 1212.
- You can also report a level 3 or 4 concern using the online form.

The Children and Families Hub continues to offer a consultation line for professionals providing advice and guidance. This can be accessed by calling 0345 603 7627 and asking for the 'Consultation Line'.

Suffolk Children Safeguarding Team

0808 800 4005

Signposting

The Special Educational Needs and Disabilities Information and Support Services (SENDIASS). SENDIASS offer information, advice and support for parents and carers of children and young people with SEND. [Essex SEND - Information, Advice and Support Service \(essexsendiass.co.uk\)](http://essexsendiass.co.uk)

All local authorities have such a service: Find your local IAS service councilfordisabledchildren.org.uk)

Mencap - Represents people with learning disabilities, with specific advice and information for people who work with children and young people • NSPCC - Safeguarding children with special educational needs and disabilities (SEND) and NSPCC - Safeguarding child protection/deaf and disabled children and young people [Access Learning Disability Advice and Support | Mencap](#)

Families in Focus Essex - [Home - Families InFocus Essex](#)

Shore Space – offers confidential chat service supporting young people concerned about their own or someone else’s sexual thoughts and behaviours [Home - Shore](#)

CSA Centre – Supporting practise in tackling child sexual abuse [Home | CSA Centre](#)

National Crime agency - The National Crime Agency's CEOP Education team aim to help protect children and young people from online child sexual abuse. [CEOP Education](#)

Appendix

In addition to national statutory guidance, in Essex, all professionals must work in accordance with the [SET Procedures](#). Our setting also works in accordance with the following legislation and guidance (*this is not an exhaustive list*):

- [Keeping Children Safe in Education \(DfE 2025\)](#)
- [Working Together to Safeguard Children \(DfE 2023\)](#)
- [Working Together to Improve Attendance \(DfE 2024\)](#)
- Education Act (2002)
- [Essex Effective Support](#)
- [Counter-Terrorism and Security Act \(HMG, 2015\)](#)
- [Serious Crime Act 2015](#) (Home Office, 2015)
- Children and Social Work Act (2017)
- [Children Missing Education - statutory guidance for local authorities \(DfE, 2016\)](#)
- Sexual Offences Act (2003)
- Education (Pupil Registration) Regulations 2006
- [Information sharing advice for safeguarding practitioners \(HMG, 2018\)](#)
- [Data Protection Act \(2018\)](#)
- [What to do if you're worried a child is being abused](#) (HMG, 2015)
- [Children Act \(1989\)](#)
- [Children Act \(2004\)](#)
- [Preventing and Tackling Bullying \(DfE, 2017\)](#)
- Female Genital Mutilation Act 2003 (S. 74 - Serious Crime Act 2015)
- [Preventing youth violence and gang involvement \(Home Office, 2015\)](#)
- [Criminal Exploitation of children and vulnerable adult - county lines guidance \(Home Office, 2018\)](#)
- [Teaching online safety in schools \(DfE, 2023\)](#)
- [Education Access Team CME / Home Education policy and practice \(ECC, 2023\)](#)
- [Behaviour in Schools \(DfE 2022\)](#)
- [School suspensions and permanent exclusions \(DfE, 2024\)](#)
- [Searching, screening and confiscation \(DfE 2022\)](#)
- [Let's talk: reducing the risk of suicide \(ESCB 2021\)](#)
- [Understanding and supporting behaviour and appendices \(ECC 2024\)](#)
- [Filtering and Monitoring Standards \(DfE, 2024\)](#)
- [Domestic Abuse Act \(2021\)](#)
- [Victims and Prisoners Act \(2024\)](#)

Dedham Therapy Farm CIC will adhere to all legislation and support schools in adhering to these legislations when providing intervention to their young people.

As an occupational therapy service Dedham Therapy Farm is required to adhere to [NICE guidelines](#).

- [The Human Rights Act 1998](#)

- [Equality Act 2010](#)
- [Public Sector Equality Duty](#)
- [Data Protection Act](#)
- [GDPR](#)

Human Rights Act

The Human Rights Act 1998 (HRA) sets out the fundamental rights and freedoms that everyone in the UK is entitled to and contains the Articles and protocols of the European Convention on Human Rights (ECHR) (the Convention) that are deemed to apply in the UK. It compels public organisations to respect and protect an individual's human rights when they make individual decisions about them.

- Article 3: the right to freedom from inhuman and degrading treatment (an absolute right)
- Article 8: the right to respect for private and family life (a qualified right) includes a duty to protect individuals' physical and psychological integrity
- Article 14: requires that all of the rights and freedoms set out in the Act must be protected and applied without discrimination,
- Protocol 1, Article 2: protects the right to education. Being subjected to harassment, violence and or abuse, including that of a sexual nature, may breach any or all of these rights, depending on the nature of the conduct and the circumstances. Further information (including on absolute and qualified rights) can be found at [Human Rights | Equality and Human Rights Commission](#).

Schools and colleges and Alternative provision have obligations under the Equality Act 2010 (the Equality Act). According to the Equality Act, schools and colleges and Alternative provision must not unlawfully discriminate against pupils because of their sex, race, disability, religion or belief, gender reassignment, pregnancy and maternity, or sexual orientation (protected characteristics). Whilst all of the above protections are important in the context of safeguarding, this guidance and the legal duties placed on schools and colleges and settings, in relation to safeguarding and promoting the welfare of children, governing bodies and proprietors should carefully consider how they are supporting their pupils and students with regard to particular protected characteristics - including disability, sex, sexual orientation, gender reassignment and race.

Provisions within the Equality Act allow settings to take positive action, where it can be shown that it is proportionate, to deal with particular disadvantages affecting pupils or students with a particular protected characteristic in order to meet their specific need. This includes a duty to make reasonable adjustments for disabled children and young people, including those with long term conditions. A setting, could, for example, consider taking positive action to support girls if there was evidence they were being disproportionately subjected to sexual violence or sexual harassment.