



Safeguarding Young People

Safeguarding

Safeguarding is protecting children from abuse and neglect, preventing impairment of their health or development, and ensuring they receive safe and effective care to help them achieve the best possible life outcomes.

Child Protection

This is a component of safeguarding and promoting welfare. It refers to the actions taken to protect specific children who are suffering, or likely to suffer, significant harm due to abuse or neglect.

Who is Responsible for Safeguarding?

Everyone has a duty to safeguard children's well-being. This includes creating a safe environment and identifying children who may need extra help or are at risk of significant harm.

All staff and members must take appropriate action and must:

- a) be familiar with the policies, procedures, and systems that support safeguarding.
- b) know who the DSO is and how to contact them.
- c) understand the signs of abuse and neglect and how they may affect a child.
- d) always act in the child's best interests.
- e) report concerns to the DSO in writing.
- f) contact Children's Services directly if there is an immediate risk of serious harm to a child.
- g) press for action if they are not satisfied with the response to their concern.
- h) undertake training if they work directly with young people, including:
 - i. Their personal responsibilities and conduct (see Good and Bad Conduct document)
 - ii. The agreed local procedures
 - iii. The importance of vigilance in identifying abuse
 - iv. How to support a child who discloses abuse
- i) Take steps to protect themselves from allegations by following the EBU guidelines in the Good and Bad Practice document.

Different Types of Abuse

To protect children effectively, we must understand what behaviours constitute abuse and neglect.

Abuse and neglect are forms of maltreatment. This may involve inflicting harm (e.g., hitting a child) or failing to act to prevent harm (e.g., leaving a toddler alone with access to dangerous objects).

There are five categories of abuse:

Physical Abuse

Inflicting physical harm through actions such as hitting, shaking, poisoning, or fabricating illness.

Emotional Abuse

Consistent emotional ill-treatment that causes severe and lasting effects on a child's emotional and behavioural development.

Sexual Abuse

Forcing or enticing a child to take part in sexual activities, including:

- a) Physical acts (penetrative or non-penetrative)
- b) Non-contact activities (e.g., viewing pornography)
- c) Encouraging inappropriate sexual behaviour

Neglect

Failing to meet a child's basic physical, emotional, or psychological needs, which may impair their health or development.

Financial Abuse

While less common among children, young people—particularly those aged 16–17—may be vulnerable. Financial abuse includes theft, fraud, and emotional manipulation regarding money.

Indicators and Signs of Abuse

Physical signs (e.g., bruises or burns) may indicate abuse, but children often hide these due to fear or shame. Non-medical staff may not be able to reliably assess whether injuries are accidental or deliberate.

Staff should be alert to behavioural indicators, such as:

- Unexplained injuries or pain
- Keeping limbs covered in warm weather
- Fearfulness or aggression
- Changes in eating habits or friendships
- Self-harming
- Reluctance to go home or attend school
- Inappropriate sexual knowledge

Indicators rarely provide conclusive proof in isolation and must be viewed collectively. Always report concerns — proof is not required.

Children with ALN and Disabilities

Children with disabilities or behavioural challenges are statistically more vulnerable. Staff must be especially vigilant.

Special consideration must be given to children who are:

- Disabled or have additional learning needs
 - Living with domestic abuse
 - Affected by parental substance misuse
 - Asylum seekers
 - Living away from home or in temporary accommodation
 - Experiencing bullying
 - Facing discrimination
 - Living in chaotic or unsupportive households
 - Involved in child trafficking or prostitution
 - Not fluent in English
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Dealing with Disclosures

When a child discloses abuse:

- Let them speak freely
 - Remain calm and avoid visible distress
 - Offer gentle reassurance (“This isn’t your fault”, “You’re doing the right thing”)
 - Avoid leading or investigative questions
 - Inform them you must pass the information on
 - Avoid physical contact
 - Do not criticise them for not telling sooner
 - Explain what will happen next
 - Verbally report to the DSO
 - Complete the concern form promptly and hand it in
 - Seek support for yourself if needed
 - Explain that confidentiality cannot be guaranteed
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Child-on-Child Abuse and Harmful Sexual Behaviour

EBU/EBED has a zero-tolerance approach. Sexual harassment or violence — including inappropriate physical contact or dismissive behaviour — must never be ignored or minimised.

Definitions

Children’s sexual behaviour exists on a continuum. The term **Harmful Sexual Behaviour (HSB)** refers to problematic or abusive sexual conduct.

Peer-on-peer sexual violence includes:

- Sexual touching
- Assault by penetration
- Rape

Peer-on-peer sexual harassment includes:

- Inappropriate sexual comments or jokes
- Online sexual harassment

Peer-on-peer sexual abuse includes:

- Coercive sexual acts
- Abuse within intimate relationships
- Non-consensual image sharing (including deepfakes and upskirting)
Note: Creating or sharing sexual images of under-18s is illegal, even with consent.

Children under-13s cannot legally consent to sexual activity.

Responding to Image Sharing

If a young person shares nude or semi-nude images:

- Take disclosures seriously
 - Report to the DSO immediately
 - Never view or save the images
 - If viewed accidentally, inform the DSO
 - Do not delete the imagery or ask the young person to do so
 - Do not question those involved
 - Avoid sharing details with others
 - Do not blame or shame the young person
 - Explain you must report it and reassure them of support
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Reporting Procedures

All concerns should be reported immediately:

In schools: Inform the Head Teacher or School DSO.

Elsewhere: Contact the EBU/EBED DSO.

If concerned about the DSO: Contact the Local Authority Designated Officer (LADO) or the NSPCC (0808 800 5000).

For FGM or forced marriage: Report directly to the police.

All reports should be factual, avoiding opinion and hearsay. Include:

- Nature of the allegation
- Description of any injuries
- Child's account
- Witnesses
- Dates and times
- Clear distinctions between fact, opinion, and hearsay

Use the form at Appendix D1 for written reports.

Action Following a Reported Concern

Investigations may include:

- Criminal investigation (police-led)
- Safeguarding investigation (LADO-led)
- Disciplinary investigation (EBU/EBED-led)

Poor Practice

- Handled as misconduct by the designated person
- Serious or repeated issues referred to the EBU/EBED DSO and EBU/EBED CEO
- Actions may include warnings, training, or disciplinary referral

Suspected Abuse

- Report immediately to the DSO
- DSO refers to LADO or police
- Parents informed after LADO advice
- EBU/EBED CEO notified for media enquiries

If the DSO is the subject of the concern, report to the EBU Board or EBED Trustee.

Internal Enquiries and Suspension

The accused will:

- Be notified in writing of the allegations
- Be allowed time to prepare a defence
- Have the right to legal advice and a hearing
- Be entitled to appeal

Penalties may include:

- Temporary or permanent suspension
- Bans from events or clubs

The CEO may impose immediate suspension if needed. The child's welfare is the top priority.

Confidentiality

Confidentiality will be maintained on a need-to-know basis. Information may be shared with:

- Safeguarding Officers
- Parents (as appropriate)
- Local authorities or police
- EBU/EBED leadership

All records will be securely stored in compliance with data protection laws.