

1. Safeguarding Children Policy

2. Policy Statement

Bromsgrove District Housing Trust is fully committed to safeguarding the welfare of all children and young people by taking all reasonable steps to protect them from abuse and neglect.

This Policy and Procedure will place clear guidelines for safeguarding children and young people and promoting their welfare. In this context, the term 'employee' is used to include all bdht employees, full or part-time, volunteers and anyone working on a paid or unpaid basis on behalf of bdht.

This Policy relates to children and young people under the age of 18. The Policy and procedures apply to all children and young regardless of gender; ethnicity; disability; sexual orientation or religion.

bdht supports Worcestershire Safeguarding Children Board (WSCP) Inter-Agency Children Protection procedures for safeguarding children. Since 2017 Worcestershire County Council have adopted the Policies and Procedures of the West Midlands Consortium. Their Policies and Procedures can be found here: <http://westmidlands.procedures.org.uk/>

2.1 Responsibilities

bdht will:-

- Ensure that all staff who will carry out a "regulated activity" in their employment receive an enhanced Disclosure and Barring Service (DBS) check.
- Other pre-employment checks will also be made including the receipt of two satisfactory employment references, a health declaration that the prospective employee is fit to carry out the role and Right to Work Verifications.
- Through bdht's induction process we will ensure all new starters are made aware of the Safeguarding Policies and the Safeguarding Procedures.
- We will provide training in Safeguarding consistent with job roles and responsibilities to ensure staff are aware of their duty to report any allegations or suspicions of abuse to their line manager, and that staff are aware of how to identify children at risk and to ensure Safeguarding alerts are raised as appropriate, and in line with the Safeguarding Procedure.
- Support staff through regular supervisions with their managers to review caseloads, and through the monthly 1:1 process.
- We understand that dealing with safeguarding can be difficult. Staff wellbeing will be managed under the Wellbeing at Work Policy.

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- Where a staff member has been alleged to be involved in a safeguarding incident, we will act in accordance with the Disciplinary Policy and Procedure and will comply with any police investigation.
- bdht is committed to creating an open and transparent culture where employees feel confident to raise concerns about safeguarding practice, including concerns about the conduct of colleagues or managers.
- Any safeguarding concerns raised in good faith will be taken seriously and employees will be protected from victimisation or retaliation in line with the Public Interest Disclosure Act 1998 and bdht's Whistleblowing and Anti-Fraud and Corruption Policies.
- Ensure that any member of staff or volunteer who may have caused harm is not in contact with the alleged victim, other service users or others who may be at risk.
- Apply the Anti-Fraud and Corruption Policy and Procedure to protect any of our staff against victimisation when a genuine concern has been raised about malpractice in regard to this policy.
- Be committed to working together with other local authorities, Police, National Governing Bodies, Children's Services, and the Worcestershire Safeguarding Children's Partnership in accordance with their procedures.

2.3 Principles

The guidance given in the procedures is based on the following principles:-

- The welfare of the child is the primary concern;
- All children, whatever their age; gender; racial origin; religious belief; disability and sexual identity have the right to protection from abuse;
- It is everyone's responsibility to report concerns but it is the responsibility of Children's Services or the Police to determine whether or not abuse has taken place;
- All incidents or allegations of suspicious poor practice or abuse will be taken seriously and responded to appropriately;
- In cases of Domestic Abuse, children will be seen as victims in their own right in line with the Domestic Abuse Act 2021
- Confidentiality will be managed in line with our GDPR policy and procedure;
- There is a consistent understanding of acceptable behaviour of children towards other young people within any organised activity, service or programme.
- Discrimination, prejudice and oppressive behaviour or language is unacceptable within all activities, programmes or services.

3.0 Recognition of Abuse

3.1 Introduction

It is not always easy to recognise a situation where abuse may occur or has already taken place. bdht employees have a responsibility to act if they have any concerns about the behaviour of an individual towards a child.

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bdht encourages and expects employees to discuss any concern they may have about the welfare of a child immediately with their line manager or other designated Officer within their services. The line manager or other designated Officer will in turn discuss the matter with the bdht's Safeguarding Lead when appropriate.

Bdht has a duty to cooperate and refer to Children's Social Care if there are signs that a child or an unborn baby:

- Is suffering significant harm through abuse or neglect
- Is likely to suffer significant harm in the future.
- Has a disability, developmental and welfare needs which are likely only to be met through provision of social work led family support services (with agreement of the child's parent) under the Children Act 1989

3.2 Abuse and Neglect

Abuse and neglect are forms 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 a stranger. They may be abused by an adult or adults, or another child or children.

3.3 Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after.

3.4 Neglect

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

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers);
- Ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, basic emotional needs.

3.5 Self Neglect

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The term 'self-neglect' refers to an unwillingness or inability to care for oneself and/or one's environment. It encompasses a wide range of behaviours, including hoarding, living in squalor, and neglecting self-care and hygiene.

3.6 Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on the child. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

3.7 Sexual Abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, including prostitution, whether or not the child 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 in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

3.8 Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) is a form of abuse involving procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. It is illegal in the UK and is recognised as a serious violation of human rights.

bdht employees should be aware that FGM can affect children and young people from a range of communities. Any concerns that a child may be at risk of FGM or has undergone FGM must be reported immediately to the Safeguarding Lead and managed in accordance with safeguarding procedures and statutory guidance.

3.9 Child Sexual Exploitation

Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation,

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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.

In respect of suspected Child Sexual Exploitation, contact bdht's Safeguarding Lead in order to follow the CSE Pathway for Worcestershire.

3.10 Online abuse and Digital Safeguarding

Online abuse is any type of abuse that occurs through digital platforms, including social media, online gaming, messaging apps, and websites. Children may be at risk of harm through online grooming, sexual exploitation, coercion, harassment, exposure to harmful or age-inappropriate content, or being pressured to share sexual images.

bdht employees should be alert to indicators of online abuse and recognise that online harm can occur alongside other forms of abuse. Concerns relating to online safety must be treated with the same seriousness as other safeguarding concerns and reported in line with this policy and safeguarding procedures.

bdht will work with partner agencies, including Children's Services and the Police, where there are concerns that a child is at risk of online harm.

3.11 People with a disability

Children with a disability are particularly vulnerable to abuse for several different reasons more often than not depending on their impairment. Dependency on others may make a child feel powerless to report abusive treatment. Different communication methods or an individual's lack of vocabulary might also prove to be a barrier for a child wanting to communicate their concerns.

3.12 Race and Racism

Children from black and minority ethnic groups (and their parents / carers) may have experienced harassment, racial discrimination and institutional racism. Although racism can cause significant harm, it is not, in itself, a category of abuse, any form of racism will be dealt with in line with our Hate Crime Policy. The experience of racism is likely to affect the responses of the child and family to assessment and enquiry processes.

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Failure to consider the effects of racism undermines efforts to protect children from other forms of significant harm. The effects of racism differ for different communities and individuals, and should not be assumed to be uniform. Attention should be given to the specific needs of those of mixed parentage and refugees. In particular, the need for neutral, high-quality, gender-appropriate translation or interpretation services should be taken into account when working with people whose preferred language is not English.

3.13 Financial or material abuse

This includes theft, fraud, exploitation, pressure in connection with wills or property and the misappropriation of property or benefits. It also includes the withholding of money or the unauthorised or improper use of a person's money or property, usually to the disadvantage of the person to whom it belongs. Staff borrowing money or objects from a service user is also considered financial abuse.

3.14 Institutional abuse

Institutional abuse is the mistreatment, abuse or neglect of a child by a regime or individuals in a setting of service where the child lives or that they use. Such abuse violates the person's dignity and represents a lack of respect for their human rights.

3.15 Modern Day Slavery

This can include victims that have been brought from overseas, and vulnerable people in the UK, being forced to illegally work against their will in many different sectors, including brothels, cannabis farms, nail bars and agriculture.

3.16 County Lines

County lines is the organised criminal distribution of drugs from the big cities into smaller towns and rural areas using children and vulnerable people, this can include cuckooing (befriending someone and then taking over their home to sell and store drugs and sometimes live in the property) We will work with the Police to try and resolve any reports.

3.17 Radicalisation and Extremism

Radicalisation refers to the process by which individuals come to support terrorism or extremist ideologies. Children and young people can be vulnerable to radicalisation due to a range of social, emotional, and environmental factors.

bdht recognises its responsibility to be alert to concerns relating to radicalisation and extremism and will take appropriate action in line with local safeguarding procedures. Any concerns should be reported to the

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Safeguarding Lead, who will determine whether a referral to Children's Services, the Police, or other relevant agencies is required'

3.18 Listening to the child

Whenever a child reports that they are suffering or have suffered [significant harm](#) through abuse or [neglect](#), or have caused or are causing physical or sexual harm to others, the initial response from all professionals should be limited to listening carefully to what the child says to:

- Clarify the concerns
- Offer re-assurance about how the child will be kept safe
- Explain what action will be taken and within what timeframe.

4.0 Mental Capacity

4.1 The presumption is that young people over the age of 16 have the mental capacity to make informed choices about their own safety and how they live their lives. Issues of mental capacity and the ability to give informed consent are central to decisions and actions in Safeguarding Children and Young People. All interventions need to take into account the ability of young person to make informed choices about the way they want to live and the risks they want to take. This includes their ability:-

- To understand the implications of their situation;
- To take action themselves to prevent abuse;
- To participate to the fullest extent possible in decision-making about interventions.

The Mental Capacity Act 2005 provides a statutory framework to empower and protect people who may lack capacity to make decisions for themselves and establishes a framework for making decisions on their behalf. This applies whether the decisions are life-changing events or everyday matters. All decisions taken in the Safeguarding children's process must comply with the Act.

5.0 Safeguarding Lead Officer

5.1 bdht have identified three designated Safeguarding Leads at a senior management level to be responsible for the safeguarding of our customers. The Safeguarding Team are responsible for managing and responding to safeguarding concerns.

5.2 bdht's Safeguarding Leads have undertaken an Enhanced Disclosure and will receive appropriate training and information.

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- 5.3 The Safeguarding Leads will be responsible for informing Children's Services of any alleged incident of child abuse without delay and will be required to follow this up in writing within 24 hrs of the report
- 5.4 The Safeguarding Team:
- Director of Housing & Communities
 - Head of Sustainable Homes (Safeguard Lead)
 - Head of Sustainable Communities (Safeguard Lead)
 - Head of People (Safeguard Lead)
 - Independent Living Manager
 - Communities Manager
 - 360 Support Manager
 - Building Compliance Manager
 - Head of Asset Management and Development
 - Head of Customer Delivery
- 5.5 If a report needs to be escalated due to the seriousness of its offences, where staff are involved or a complaint we are aware of that has led to a Serious Case Review then the safeguarding team will escalate this to EMT level and Board if necessary.

6.0 Records and Information

- 6.1 Information that is passed to agencies relating to Safeguarding must be as factual as possible. It is therefore essential that a detailed record be made at the time of the disclosure / concern.
- 6.2 All alleged incidents of child abuse are to be reported to the Police or Children's Services without delay. Referrals made by telephone to Children's Services or the Police are to be confirmed in writing within 24 hours. A record will be kept of the name and position of the Officer to whom the concerns were passed, of advice given, together with the date and time of the call and agreed actions including feedback to bdht's Safeguarding Lead.
- 6.3 Where possible you must speak to the parent of the child at risk, discuss your concerns with them and seek agreement to refer to ensure they feel as involved in the process as possible. Where you don't feel it's appropriate to discuss with the family, seek guidance from the Safeguarding Lead(s).
- 6.4 The Lead Safeguarding Officers is responsible for reviewing the cases detailed on QL, on a regular basis to identify trends and for to share best practice.
- 6.5 A summary of all safeguarding reports will be presented to Board on an annual basis

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7.0 Escalating a Concern

- 7.1 Occasionally situations arise when workers within one agency feel that the decision made by a worker from another agency on a safeguarding case is not a safe decision. Disagreements could arise in a number of areas, but are most likely to arise around:
- Levels of need;
 - Roles and responsibilities;
 - The need for action;
 - Communication.
- 7.2 The safety of an individual child is the paramount consideration in any professional disagreement and any unresolved issues should be addressed with due consideration to the risks that might exist for this person.
- 7.3 All workers should feel able to challenge decision-making and to see this as their right and responsibility in order to promote the best multi-agency safeguarding practice.
- 7.4 Where issues remain unresolved it should be discussed with the line manager who can agree to support a resolution process with the professionals concerned and / or with their line managers. Consultation with the Safeguarding Lead and senior managers within each organisation can be used if this would be felt to assist resolution. Care should be taken to agree a way of managing conflict, which allows children and their families to understand the issues under discussion.
- 7.5 bdht are committed to partnership working to ensure the best outcomes for customers. Our approach to safeguarding will be to work with and alongside our partner agencies. bdhts active role in partnership meetings will support our approach to safeguarding.

8.0 Safeguarding of Employees

- 8.1 bdht acknowledges that employees may too find themselves in challenging personal situations that may be considered a safeguarding concern. Should this be brought to a Manager's attention, the following resources should be discussed with the employee, in confidence; after first speaking to Human Resources.
- Use of the Employee Assistance Programme, a confidential support line.
 - Seeking the advice and guidance of their GP.
 - In certain circumstances seek consent to refer to Safeguarding.
 - Wellbeing at Work Policy

The Manager has the confidential support of Human Resources

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throughout the management of this situation.

9.0 Legal & Regulatory Requirements

The Care Act 2014
Data Protection Act 2018
UK General Data Protection Regulation (UK GDPR)
Mental Capacity Act 2005
Equality Act 2010
Domestic Abuse Act 2021
Human Rights Act 1998
Police and Crime Act 2017
Public Interest Disclosure Act 1998
The Adoption and Children Act 2002
Children and Social Care Act 2017
The Children Act 1989 (as amended)
“Working Together to Safeguard Children” 2018
Keeping Children Safe in Education (Statutory Guidance)
Childcare Act 2006 (as amended in 2018)
Modern Slavery Act 2015
Mental Health Act 1983 (amended 2007)
Children Act 2004
Children and Families Act 2014
Safeguarding Vulnerable Groups Act 2006
Sexual Offences Act 2003
Education Act 2002
Counter-Terrorism and Security Act 2015
Female Genital Mutilation Act 2003 (as amended 2015)
Online Safety Act 2023

10.0 Links to other policies and guidance

Domestic Abuse Policy (customer)
Recruitment Policy;
Disciplinary and Grievance Policy;
Complaints Procedure;
Dignity at Work Procedure
Code of Conduct
ICT Policy and procedures;
Anti-Fraud and Corruption Policy;
Health and Safety Regulations;
Harassment and Bullying Policy;
Bdht Safeguarding Children Procedure
Worcestershire County Council adopt the West Midlands Safeguarding Children Policy <http://westmidlands.procedures.org.uk/>;
Independent Safeguarding Authority;

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Worcestershire Safeguarding Children's Board (WSCB) policies and guidance.
Freedom from violence and abuse: a cross-government strategy
<https://www.gov.uk/government/publications/freedom-from-violence-and-abuse-a-cross-government-strategy>

11.0 Board/EMT Approval was gained

11.1 Approved by Board on 12th May 2026.

12.0 Review Date

12.1 This policy will be reviewed in 2029.

13.0 Equality Policy Statement

- 13.1 At bdht, we are proud to serve and work within a diverse society. We recognise that some individuals and communities face systemic barriers, disadvantage, and discrimination, including those related to socio-economic background, caring responsibilities, and the impact of intersectionality.
- 13.2 We believe that discrimination in any form is unacceptable. In all our areas of work we are committed to ensuring that our policies, practices, and services promote fairness, equity, and respect for all. We aim to reduce inequalities, promote respect, and create an equitable culture within our organisation.
- 13.3 bdht fully complies with the Equality Act 2010 and all relevant statutory and regulatory guidance, including that issued by the Regulator of Social Housing, Homes England, the Government Equalities Office, and our funding partners.
- 13.4 We believe that equality of opportunity is fundamental to delivering excellent services and building vibrant communities together. Our commitment is underpinned by clear policies, regular monitoring, and continuous review, all of which are actively supported by our Board and Teams.

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