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Guidance

Keeping children safe during community activities, after-school clubs and tuition: Questions to help parents and carers choose out-of-school settings

Updated 4 April 2022

Applies to England

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Introduction

This guide will help parents and carers choose a safe out-of-school setting for their children to attend. 'Children' refers to people who have not yet reached their 18th birthday.

An out-of-school setting (OOSS) can mean many things, from places like community and youth centres, sports clubs, and places of worship, to individuals offering tuition in their own home, or providing one to one coaching at a playing field or local park. Fees may or may not be charged. Some settings may be run as businesses.

A typical provider may be a tutor who works alone from their home or coach who runs training sessions in a sports field for children.

When we refer to a 'large' OOSS provider in this guidance, we mean there are 5 or more volunteers or paid staff members. A 'small' OOSS provider will have 4 or fewer volunteers or paid staff members. A 'lone' provider means that a single individual runs the setting and does not employ any staff or engage volunteers, for example a private tutor.

How this guidance can help you

There is no single legal framework that governs how these settings operate, and they are not inspected or assessed by a single regulator. This means there is no single responsible body with complete oversight of these settings or the quality and safety of their provision.

As a minimum, providers of these settings should have policies on health and safety, safeguarding and child protection (including online and digital safety), and suitability of staff.

This guide contains:

- questions you may wish to ask a provider
- examples of the types of good answers you should expect to hear back
- warning signs you may wish to look out for when choosing a provider

You should feel able to ask questions about the provider's activities and policies. A well-run and trustworthy provider will welcome questions. They should be willing to give this kind of information to anyone who leaves a child in their care.

As a rule, if a provider is reluctant to answer, or cannot answer, your questions, or you are not satisfied with their answers, you may wish to consider sending your child elsewhere.

To satisfy yourself that it is a safe environment, you may wish to meet with the providers before your child attends a first session, or ask providers if you are able to meet with them during a session, before deciding whether to send your child to a particular provider.

If a provider is going to be working on a one-to-one basis with your child (such as in the case of a private tutor), you may wish to supervise sessions.

What to do if you have concerns

If you have concerns about a setting your child attends, first raise concerns with the provider. If the situation is not resolved, please escalate the issue by calling the NSPCC helpline on 0808 800 5000 or contacting the local authority designated officer (LADO). To find your local authority, go to [Find your local council](https://www.gov.uk/find-local-council) (<https://www.gov.uk/find-local-council>) and enter the postcode of your setting.

If you believe a child is in immediate danger of harm, please call the police on 999.

Questions for parents/carers to ask and answers they may expect

Here are some of the questions you may wish to ask. Some of the questions will not be relevant to all providers, and answers may vary depending on the size and type of provision. Where appropriate, we have made clear how answers may vary for lone providers versus large providers with multiple staff members.

Example Your child attends piano lessons once a week with a private piano tutor who does not employ any staff. We would not expect the tutor to have written step-by-step child protection procedures. However, we would expect them to have a written child protection policy, and be able to explain to you in detail what action they would take if faced with a safeguarding issue.

May I have a copy of your child protection policy?

All providers should have a clear set of guidelines on how they will keep children safe and respond to child protection concerns. A copy should be available on the provider's website or given to you on request.

At a minimum, the policy should include:

- short policy statement, setting out the priority the provider gives to keeping children and young people safe and, in broad terms, how they seek to achieve this
- a commitment that under no circumstances should any staff member or volunteer inflict physical or psychological harm on a child

- a list of procedures that enable staff and volunteers to keep children safe – lone providers and volunteers do not need to write down each procedure step-by-step, but they should be able to describe to you in detail how they would handle specific safeguarding issues
- any additional guidance, information or expectations that you need to be aware of, including details of the person who has overall responsibility for keeping children in the setting safe, also known as the designated safeguarding lead, and how to contact them, as well as contact details for local safeguarding services such as the local authority and the police

If the provider has one or more employees or volunteers, they should also be able to provide you with a written copy of specific steps staff members will take when there are concerns about a child's safety or wellbeing, including:

- steps the providers will take if they are concerned that a child may be at risk of abuse
- a procedure to use in the event of peer-on-peer abuse (for example, bullying) in their organisation
- steps to deal with allegations or concerns that an adult working with children and young people in the organisation may present a risk of abuse themselves
- a complaints procedure that enables children, young people and families to raise a safeguarding concern

Providers with staff members should also be able to provide you with additional written guidance, information and expectations around the behaviour of employees and volunteers, such as a staff code of conduct and information on how staff will respond directly to a child who discloses abuse.

Who is the lead person responsible for safeguarding children and what training have they had? How recently were they trained?

The provider should be able to name a lead person who is responsible for safeguarding children in the setting. In this guidance, we refer to this person as the designated safeguarding lead. A lone provider will be the designated safeguarding lead.

At the least, a designated safeguarding lead should have training on:

- bullying
- physical abuse

- sexual harassment
- sexual violence
- sexting: sending, receiving, or forwarding, sexually explicit messages, photographs, or images, primarily between mobile phones
- hazing or initiation ceremonies: the practice of rituals, challenges, and other activities involving harassment, abuse or humiliation used as a way of initiating a person into a group
- online safety
- substance abuse

You may also wish to ask if they have had training on extremism and radicalisation.

The designated safeguarding lead should have had training that gives them the knowledge and skills they need for their role. Training should be repeated at frequent intervals or if the provider's circumstances change.

Do you have a complaints policy?

Sometimes you may be alerted to a concern regarding an out-of-school setting by your child or another parent. All providers should have a clear policy to deal with complaints. This should include instructions on how to raise a concern, whether in person or in writing, who to complain to, and how it will be dealt with.

Lone providers should give you instructions on how to raise a concern with the local authority, including contact details for the designated officer or children's social care. The complaints policy should be on the provider's website or displayed clearly in the setting.

What training have staff had?

Training will differ according to the type of provider but all staff should, at the least, have good working knowledge of and be suitably trained in health and safety and safeguarding and child protection. As part of their policies and procedures, providers should be able to tell you what training the staff have done and how recently.

Who is in charge of first aid?

Regardless of the type of provision offered providers should be able to name an appointed person in charge of first aid, and tell you what first aid training this appointed person has had that is appropriate to the circumstances identified in the provider's risk assessment.

All providers should have carried out a risk assessment to identify what could cause injury or illness in their setting, decide how likely it is that someone could be harmed, and how seriously, and take action to control or eliminate the hazard. Providers should manage illnesses in their settings by following the guidance on [Health protection in schools and other childcare facilities](https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities) (<https://www.gov.uk/government/publications/health-protection-in-schools-and-other-childcare-facilities>).

They should also let you know that they have a first aid kit available.

Do you have a parental consent and emergency details form that I need to return to you?

All providers should ask you for more than one emergency contact number and any necessary medical information for your child. This information should be collected at or before the first session.

Providers might collect the information through an electronic or printed form. If your child attends the setting for over a year, the provider should ask you for updated information.

How will you securely store the information you hold on my child? Who has access to it and will you give it to anyone else?

The provider should be able to detail how they are storing paper and electronic copies of files. If they are storing electronic data, it should be encrypted and password protected. If they are storing paper data, it should be secured with a lock.

Only the designated safeguarding lead, or someone high enough in the organisation to be trusted with it, should have access. Lone providers can appoint themselves as the designated safeguarding lead. This information should not be given to other parties without your child's consent (and your consent if your child is under 13).

If a large or small provider, how are staff and volunteers recruited? What checks do you undertake to ensure that they are suitable to work with children? How recent were the checks?

Regardless of type and size, all providers should safeguard and promote children's welfare by making sure they have robust procedures in place to prevent unsuitable people from working or volunteering in their setting.

Providers should be able to describe to you a range of checks that they have undertaken to reassure you that your child is safe in the care of their staff and volunteers. It is important that providers do not rely on one single check (for

example, DBS check) to determine whether staff or volunteers are suitable.

Some of the many checks that providers can undertake are:

Recruitment checks

For example, it is best practice for providers to check that prospective volunteers or employees have the right skill set, such as teaching experience. Providers might choose to ask for details of previous experience by interviewing candidates for instance.

Pre-employment checks

Before employing a person, providers must confirm their identity and that they are permitted to work in the UK.

References

Seeking references allows providers to get independent and factual information before appointing a volunteer or staff member.

DBS checks

[The Disclosure and Barring Service \(DBS\)](https://www.gov.uk/government/organisations/disclosure-and-barring-service)

[\(<https://www.gov.uk/government/organisations/disclosure-and-barring-service>\)](https://www.gov.uk/government/organisations/disclosure-and-barring-service) issues criminal record certificates to help the provider decide on the suitability of staff, especially when working with children. There are different levels of DBS check depending on the type of work or activities being undertaken.

Providers should also be able to give you details of the staff code of conduct which will describe what acceptable behaviour is for staff and volunteers.

You may also wish to ask the provider to describe to you how the performance of individuals in post is regularly monitored and reviewed to ensure they continue to have the necessary skills and training to carry out their role.

For lone providers: What checks have you undertaken that show you are suitable to work with children?

There is no single check that can be undertaken to show that a provider is suitable to work with children, so, to satisfy yourself that your children will be safe in the care of a provider, you may wish to ask for, or carry out, some of the checks described below:

DBS checks

You can ask the provider if they have undertaken a DBS check. A self-employed person can apply for a basic DBS check. They may also be able to obtain a standard or enhanced check if they are working for another body that would qualify

them for a more detailed check (for example, a school or a local authority).

Testimonials

You may also wish to ask a lone provider to show you testimonials, or you could ask other parents or carers about the lone provider, to check whether the provider is suitable.

[Child Sex Offender Disclosure Scheme \(https://www.gov.uk/guidance/find-out-if-a-person-has-a-record-for-child-sexual-offences\)](https://www.gov.uk/guidance/find-out-if-a-person-has-a-record-for-child-sexual-offences)

You can also make an application to the police for disclosure about a person who has some form of contact with a child or children under the Child Sex Offender Disclosure Scheme (known as Sarah's Law). In the event that the person has convictions for sexual offences against children, poses a risk of causing harm to the child concerned, and disclosure is necessary to protect the child, the police will reveal details confidentially to the person most able to protect the child (usually parents, carers or guardians).

Will any adults besides yourself (if a lone provider), and staff or volunteers, be present while my child is there? If so, will they be there regularly?

This is especially important to ask if the provider operates from home. If other adults will be present besides the tutor or coach, you may wish to ask for their names, and whether they will be in the room alone with your child at any point. If the adults are staff or volunteers, ask whether they have been DBS checked.

Is my child allowed unsupervised access to the internet?

Your child should be 13 or older to access the internet unsupervised.

If a setting provides internet connectivity or internet-connected devices, the provider should be able to show you their online safety policy or an acceptable use statement. This should outline specific examples of what behaviour is acceptable online for children and staff.

You should also consider whether your child is likely to have access to the internet from their own devices via 3G, 4G or 5G or public Wi-Fi. Providers should show awareness that the misuse of technology plays a significant part in many safeguarding issues and should be able to identify and intervene in incidents where appropriate.

If your provider allows your child to access the internet unsupervised, they should have filtering and monitoring systems as outlined below.

What filtering and monitoring systems do you have for managing internet access?

Your provider should have age-appropriate systems in place.

These should filter out:

- inappropriate or harmful material such as pornography, or racist, radical or extremist views
- any means of being subjected to harmful online interaction with other users such as chatrooms, where adults can pose as children or young people

My child has special educational needs (SEN) or a disability or both. How will you cope with this?

The provider may not always have the skills and resources required to meet SEN and disability needs. You should always ensure that you understand what the provider can and can't do.

For example, you may want to know whether they have a member of staff who is trained to work with children who have SEN or disabilities. However, if you are not satisfied, ask follow-up questions or consider sending your child elsewhere.

My child needs help with using the toilet, changing, feeding, their medication, or other needs. How will you cope with these personal care needs?

The provider may not always be able to cope with personal care needs. You should always ensure that you understand what the provider can and can't do. If you are not satisfied, ask follow-up questions or consider sending your child elsewhere.

Choosing a suitable provider

Some of the information below provides a summary to help you make good choices. If you spot any of the below warning signs when asking the above questions, or when visiting the setting, you may wish to send your child elsewhere.

You should report serious incidents to the NSPCC, your local authority or the police.

Positive signs to look out for

All providers:

- health and safety has been considered – large providers should have a written policy; small and lone providers do not need to have a written policy but should be aware of the risks and how to reduce them
- the environment appears safe (for example, a well-maintained building with a clear exit route in case of emergencies, and a first-aid kit available) – the provider knows what to do in the event of a fire or emergency
- an appointed person is responsible for first aid
- the provider has relevant training to deal with child protection and safeguarding issues (for example, abuse and neglect)
- a child-protection policy can be given to parents on request – this should say how children can report concerns and how the provider will make parents aware of them
- there is an appointed designated safeguarding lead
- parents or carers can meet with providers either before or during sessions to ensure the setting is well-managed
- an internet safety policy is in place and monitored
- a parental consent form, which asks for medical information and emergency contact details, is needed before the child attends for the first time
- registered charity status (where applicable) – [the Charity Commission](https://www.gov.uk/charity-commission) (<https://www.gov.uk/charity-commission>) has a register for all charities which are registered in England and Wales
- a complaints process is in place

Providers with staff members;

- staff members and volunteers have relevant training to deal with child-protection issues such as physical, emotional or sexual abuse
- staff and volunteers have completed relevant qualifications and checks (for example, pre-employment references and DBS checks)
- if a provider has many staff or volunteers, their roles and responsibilities are clear

Warning signs to look out for

All providers:

- little or no consideration for health and safety, including general lack of awareness of the risks and how to reduce them
- evidence of a dangerous environment for example:
 - loose wires
 - damp
 - no clear emergency exit route
 - no first aid kit
- lack of awareness of what to do in the event of a fire or an emergency
- no appointed person responsible for first aid
- no child-protection policy – the provider does not have clear steps for how concerns (for example, peer-on-peer abuse) can be reported, and how parents will be made aware of concerns
- no appointed designated safeguarding lead
- signs of abuse on other children who attend the setting, for example, unexplained bruises
- there are unknown adults in the setting
- there do not seem to be enough staff or volunteers to supervise all the children in their care
- staff members or other adults have unsupervised one-to-one contact with children without parental or carer consent
- no internet safety policy in place or monitored
- parents are not asked to provide a consent form or to sign one
- no process in place for dealing with complaints

Providers with staff members:

- staff have not completed relevant training, qualifications or checks (for example, DBS checks)
- staff or volunteers appear not to acknowledge or raise potential safeguarding concerns
- staff and volunteers do not know what to do if they have a child protection concern (for example, if a child makes a disclosure about abuse)

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