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1. INTRODUCTION

1.1 Policy Statement:

Shelford and Stapleford Youth Initiative (SSYI) is committed to promoting the welfare of the children and young people who attend its premises, activities and/or events, including having in place a robust system to process child protection concerns and disclosures. **All children and young people should be and feel safe on our premises and at our activities.** Many of the children and young people we work with are vulnerable and we need to be aware that such children and young people can be targeted as a result. It is important to take any concerns seriously and deal with them appropriately. In this document a child is defined as anyone who has not yet reached their 18th birthday. 'Children' therefore means 'Children and young people' throughout.

We wish to prevent any physical, sexual, emotional or spiritual abuse of children and, to this end, we recognise our responsibility to implement, maintain and review procedures. Our policy will assist this process and it will also help to protect all those who work at SSYI. The policy applies to all workers: trustees, staff, students and volunteers.

The policy has been drawn up with close reference to the *Working Together to Safeguard Children (2018)*, *Keeping Children Safe in Education (2022)* the guidance *What to do if you are worried a child is being abused (2015)*, and Romsey Mill's *Safeguarding Policy and Procedures*.

At this point it is worth outlining SSYI's unique working relationship with Romsey Mill and the way the two organisations work together to safeguard children and young people. Romsey Mill is a well renowned and respected charity operating throughout Cambridgeshire with significant experience and expertise in running excellent provision for children, young people and families. To this end SSYI and Romsey Mill have formed a strong partnership relationship as part of this arrangement Romsey Mill provides some administrative, managerial and consultancy support to SSYI with direct implications to this safeguarding policy. In particular, Romsey Mill will underpin SSYI's safeguarding procedures by providing Designated Persons.

This policy aims to clarify roles and responsibilities, procedures and guidelines, definitions and staff awareness, training and support. Child abuse and protection procedures can be difficult and unpleasant. This policy aims to provide a framework to assist workers when dealing with concerns. **It is important to remember that keeping children safe is your responsibility, but that there is help and advice available to support you.**

1.2 Our guiding principles:

All children and vulnerable adults have fundamental rights as individuals that entitle them to dignity and respect and these rights include an absolute right to protection from harm by others regardless of gender, ethnicity, disability, sexuality or beliefs.

We share the guiding principles outlined in the UN Convention on the Rights of the Child.

- Children must be protected from all forms of violence and exploitation;
- Everyone has a responsibility to support the care and protection of children;
- We listen to children, respect their views and respond to them directly;
- Children should be encouraged and enabled to fulfil their potential;
- We challenge inequalities for children ;
- Every child must have someone to turn to

(As paraphrased by the NSPCC)

1.3 Guidelines:

The welfare of each child or vulnerable adult that we are in contact with is the paramount consideration of our organisation and will be reflected in all our actions, policies and activities. Therefore:

- An understanding of this policy is mandatory for all trustees, staff, students, and volunteers who will be trained accordingly;
- It will be approved and endorsed by the board of trustees and will be reviewed every year or whenever there is a major change in the organisation or in relevant legislation;
- Children and, where appropriate, parents will be made aware of the policy so that they know the procedures and their rights;
- We will work to develop effective links with relevant services to promote the safety and welfare of children
- We will work in partnership with others in line with *Working Together to Safeguard Children 2018* – this will include parents and carers, other agencies and the wider community – in order to protect the rights and principles enshrined in law and in the UN Convention on the rights of a Child;
- All concerns and allegations of abuse will be taken seriously and responded to appropriately – this may require a referral to children’s services and in emergencies, the Police;
- Everyone working for SSYI has a duty to share any concerns that they have with their supervisor¹ and/or designated person. There is a process for recording and sharing concerns in this policy;
- In cases of suspected child abuse concerns cannot be kept confidential
- SSYI takes all allegations about staff misconduct seriously, and encourages whistle-blowing (see whistle-blowing policy);
- All staff, students and volunteers will be robustly and adequately supervised and monitored in their work;
- SSYI is committed to safe recruitment, selection and vetting.

2. RESPONSIBILITIES:

2.1 We operate under the following values and principles when working with children:

¹ If concerns arise within a session or activity the ‘supervisor’ is the lead worker for the session/activity. If concerns happen where a lead worker is not present (i.e. outside of a structured session or activity) the ‘supervisor’ refers to the individual’s line manager.

- The safety of children is paramount;
- Children should be listened to and at the centre of any process;
- Children and their cultures should be respected;
- Children should be encouraged to participate in decisions, which affect them.

2.2 We all have a legal responsibility to Safeguard children and refer to Social Care or the police when abuse has occurred:

- We must act;
- We must not investigate;
- We cannot maintain total confidentiality;
- We have to act on concerns, suspicions, facts and disclosures.

2.3 It is the responsibility of the Board of Trustees of SSYI to:

- Ensure the policy for Safeguarding Children and Young People is reviewed and adopted on an annual basis
- Ratify the appointment of Designated Persons (DP)

2.4 It is the responsibility of the Chair of Trustees

- Ensure that the Safeguarding Children Policy and other related policies are implemented;
- Appoint Designated Persons to deal with Safeguarding and Child Protection issues;
- Fulfil the function of the Named Senior Officer when dealing with allegations or serious concerns in respect of any adult who works or volunteers with children at SSYI.

2.5 It is the responsibility of Designated Persons (DP) to:

- Coordinate and oversee the organisation's Safeguarding policy
- Ensure that all employees and volunteers know the policy and are given appropriate training to ensure the procedures operate effectively
- Ensure that the policy is available publicly and on the SSYI website www.ssyi.club
- Take part in a review of the policy on an annual basis

2.6 It is the responsibility of the Lead Youth Worker to:

- Ensure the policy for Safeguarding Children and Young People is implemented throughout the organisation.
- Ensure that all staff and volunteers know the policy and are given appropriate training to ensure the procedures operate effectively².
- Together with the DP and Chair of Trustees, undertake a review of the policy on an annual basis or if major changes to the organisation or legislation takes place.

2.7 It is the responsibility of staff, and volunteers to:

- Identify concerns early and prevent them from escalating;
- Provide a safe environment where children can learn;
- Identify children who may benefit from early help;
- Know what to do if a child tells them he/she is being abused or neglected;

² This includes implementing the SSYI volunteer policy.

- Follow the referral process if they have a concern;
- Be alert and responsive to the signs and indicators of possible abuse including possible child sexual exploitation, female genital mutilation and radicalisation;
- Be alert and responsive to the risks which individual abusers, or potential abusers, may pose to children;
- Share information to enable informed assessments and good practice;
- Keep clear, detailed and accurate records of disclosures or situations;
- Discuss issues and concerns with line managers or designated people immediately;
- Use appropriate behaviour and language when working with children;
- Act on concerns, suspicions, facts and disclosures.

3. DESIGNATED PERSONS (DP)

3.1 A Designated Person will be appointed with responsibility for the co-ordination and implementation of the organisation's Safeguarding Children Policy and Guidelines. The following procedures will be followed:

- The appointment will be made by the Board of Trustees;
- The person must have experience of working with children
- The person must be capable of being sympathetic to children but objective in the pursuance of their task - with an ability to cope with the shock and upset which abuse allegations may produce.
- The person must be able to act confidentially, speedily and decisively, relating well to statutory authorities, parents/carers etc.
- The person must undertake appropriate training prior to taking on this role and it must be updated every two years.

3.2 A designated person has the following responsibilities:

- Receive concerns and disclosures from staff and act decisively over necessary actions relating well to statutory authorities, parents/carers etc.
- Gather information and make referrals to Social Care and/or the police as necessary or support the member of staff to do this
- Ensure policies and procedures are followed and that staff are supported
- Ensure records are completed and filed confidentially
- Ensure staff, students and volunteers receive support and training

3.3 The following are designated persons for SSYI and are trained to deal with Child Protection issues. They should be contacted in the first instance. If they are not available follow the procedure set out in section 9.

Designated Persons:

James Bennett – Romsey Mill, Children's and Youth Work Programme Manager,
Safeguarding Lead

Office: 01223 213162

Mobile: 07818 664178

If no DP is available on a particular day the role will pass to a named member of the Romsey Mill Leadership and Management Team.

4. CONFIDENTIALITY AND INFORMATION SHARING:

It is SSYI's duty to both prevent abuse and to report any abuse discovered or suspected. **Total confidentiality cannot be observed when abuse is disclosed or suspected or children are at risk of abuse, it must be reported.**

4.1 The Data Protection Act 2018 does not prevent staff from sharing information with relevant agencies, where that information may help to protect a child.

4.2. SSYI will

4.2.1 Ensure staff, and volunteers adhere to confidentiality protocols and that information is shared appropriately.

4.2.2 Ensure staff are aware that they have a professional responsibility to share information with other agencies in order to safeguard children (as set out in 'information sharing; Advice for practitioners providing safeguarding services to young people, children, parents and carers', DfE, July 2018)

4.2.3 Ensure that if a member of staff receives a Subject Access Request (under the Data Protection Act 2018) from a child or parent they refer the request to the DSL. A decision will be made about what information to share. This decision will consider the balance between the potential risk to the child and the principle of working openly and honestly with parents.

4.2.4 Ensure that staff, students and volunteers are clear with children that they cannot promise to keep secrets.

4.3 The Designated Safeguarding Lead/Personnel will:

4.3.1 Disclose information about a child to other members of staff on a 'need to know' basis.

4.3.2 Aim to ensure that consent has been given to share information and be mindful of situations where to do so would place a child at increased risk of harm. Information may be shared without consent if a person believes that there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner.

4.3.3 Store child protection information in line with the Data Protection Act 2018.

4.3.4 Record when decisions are made to share or withhold information, who information has been shared with and why (see 'Working together to Safeguard Children' 2018).

4.3.5 Seek advice about confidentiality from outside agencies if required (see 'Information sharing; Advice for practitioners providing safeguarding services to children, young people, parents and carers', DfE, July 2018)

4.3.6 Ensure staff are clear about their obligations and let children know that if they tell them something they may have to act on it and tell someone else; it is vital that children are given space to talk but it is essential that they know the limits of confidentiality.

4.3.7 Ensure staff adhere to the following guidance on talking to children about confidentiality and safeguarding.

- Explain that total confidentiality may not be possible and that concerns will need to be shared with someone else;
- Be honest with the child;
- Reassure the child that they have done the right thing;
- Reassure the child you will do your best to support them;
- Explain the process of reporting child protection issues and ensure the child has understood.

5. DEFINITIONS OF ABUSE:

Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. The following categories and descriptions help understand the different types of abuse that can cause significant harm to a child. Harm is defined in the Children Act 1989 as ill treatment or impairment of health or development. Significant Harm describes the threshold that justifies compulsory intervention in family life in the best interests of children. The definitions are taken from the document 'Working Together to Safeguard Children 2018' and Child Sexual Exploitation 2017.

5.1 **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 fabricates the symptoms of, or deliberately induces, illness in a child.

5.2 **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 the 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 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 (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 of a child, though it may occur alone.

5.3 **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 also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. (Staff should also have an understanding of sexual exploitation see below).

Sexual Exploitation

Child sexual exploitation is a form of child 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 the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. Like all forms of child sexual abuse, child sexual exploitation:

I can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex; can still be abuse even if the sexual activity appears consensual;

- *Can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity;*
- *Can take place in person or via technology, or a combination of both;*
- *Can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;*
- *May occur without the child or young person's immediate knowledge (through others copying videos or images they have created and posting on social media, for example);*
- *Can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse; and*
- *Is typified by some form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.*

The DSL will complete the Safeguarding Children Partnership Board's Exploitation (CSE/Criminal/Gangs) Risk Assessment and Management Tool and refer to Social Care if there is a concern that a young person may be at risk of CSE.

5.4 **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 and clothing, shelter including exclusion from home or abandonment, failing to protect a child from physical and emotional harm or danger, failure to ensure adequate supervision including the use of inadequate supervision including the use of inadequate care-givers, or the failure to ensure access to appropriate medical treatment. It may include neglect of, or unresponsiveness to a child's basic emotional needs.

5.5 **Spiritual abuse** can occur when a child is subject to fear or opposition by the use of spiritual authority, or where a young person's faith is manipulated in order to gain control or complicity that would otherwise be unacceptable.

6. INDICATORS OF ABUSE:

6.1 General Indicators

- Significant changes in behaviour
- Poor attendance at school
- Low self-esteem
- Withdrawal
- Aggressiveness, anger, anxiety, tearfulness
- Fear of parents being contacted
- Running away
- Self-harm

6.2 Possible signs of Physical Abuse

- Refusal to discuss injuries or improbable explanations
- Flinching from physical contact
- Acceptance of excessive punishment
- Pattern of absences which may serve to hide bruises or other physical injuries
- Wearing clothes that may cover bruises, particularly in hot weather
- Fear of undressing
- Aggression towards others
- Over compliant behaviour or a 'watchful attitude'
- Fear of returning home or parents being contacted
- Bruises/marks – on soft parts of the body e.g. cheeks, forearm (in defence), hips, stomach, upper arms, shoulders and neck
- Bite marks, burns/scalds
- Untreated injuries or illness, fear of medical attention

6.3 Possible signs of Emotional Abuse

- Continual self-deprecation
- Developmental delay – physical or cognitive

- Self-harm
- Fearfulness
- Inappropriate emotional responses to painful situations
- 'Neurotic' behaviour – obsessive rocking, thumb-sucking, and so on
- Air of detachment – 'don't care' attitude
- Social isolation – does not join in as few friends
- Desperate attention seeking behaviour
- Eating problems
- Depression, withdrawal
- Sudden speech disorder

6.4 Possible signs of Neglect

- Constant hunger and tiredness
- Underweight or obesity
- Poor personal hygiene
- Inappropriate clothing
- Poor skin or hair tone
- Untreated medical problems and regular accidents
- Child exposed to risks and dangers
- Social isolation
- Destructive tendencies
- Poor relationships with peers

6.5 Possible signs of Sexual Abuse

- Provocative sexual behaviour, overly affectionate behaviour which transgresses the usual boundaries of physical contact
- Sexual awareness inappropriate to the child's age – shown for example, in drawings, language, games etc.
- Sexualises non-sexualised objects or activities
- Attempts to teach other children about sexual activity
- Frequent public masturbation
- Over-compliant behaviour
- Refusing to stay with certain people or go to certain places
- Self-harm

6.6 Possible signs of Sexual Exploitation

- Repeatedly going missing, particularly overnight
- Coming home with unaccounted gifts, i.e. clothes, money, mobile phone, jewellery and drugs
- Excessive secretive use of internet and/or mobile
- Mood swings and changes in behaviour
- Having several SIM cards, frequent mobile phone top ups
- Losing contact with family and friends of their own age and associating with an older age group
- Unexplained injuries
- Low self-esteem, leading to a change in personal appearance
- Excessive washing or bathing particularly when returning from 'missing' episodes
- Sexually transmitted infections or becoming pregnant

6.7 Possible signs of Spiritual Abuse

- Disproportionate dependency on a spiritual leader with a willingness or desire to submit or debase or subject themselves
- Acceptance of guilt or blame for things which are not their fault
- Abusing or punishing themselves especially if this is ritualised or systematic

These signs are not exhaustive, and neither are they definitely signs that a child is being abused but concerns should be reported to a line manager or a designated person.

7. SPECIFIC SAFEGUARDING ISSUES:

7.1 Honour-Based Abuse (HBA) including Female Genital Mutilation (FGM): So called 'honour-based' abuse encompasses incidents which have been committed to protect or defend the honour of the family and/or community, including breast ironing, female genital mutilation (FGM) and forced marriage. SSYI takes these concerns seriously and staff are made aware of the possible signs and indicators that may alert them to the possibility of HBA through training. Staff are required to treat all forms of HBA as abuse and follow the procedures outlined in this policy.

FGM is a procedure involving the partial or total removal of the external female genitalia or other injury to the female genital organs for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and later in life. It is typically carried out on girls aged 4-13, but in some cases FGM is performed on newborn infants or on young women before marriage or pregnancy. FGM is recognised as a violation of the human rights of girls and young women and is illegal in the UK. Any indication that a child is at risk of FGM, where FGM is suspected, or where the woman is under 18, will be dealt with under the procedures outlined in this policy. Staff will report concerns to the DSL, who will make a referral to social care. In these cases, parents will not be informed before seeking advice and the case will still be referred to social care even if it is against the child's wishes.

In accordance with the Female Genital Mutilation Act 2003, there is a mandatory duty to report 'known' cases or where a disclosure of FGM has been made involving someone under-18 to the police. Staff should speak to the DSL and involve social care as appropriate.

7.2 Preventing radicalisation: Protecting children from the risk of radicalisation is similar in nature to protecting children from other forms of harm and abuse. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Extremist groups can attempt to radicalise vulnerable children to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which **an extremist or terrorist** group may appear to provide an answer. The internet and the use of social media in particular has become a major factor

in the radicalisation of children. As with managing 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. The Counter-Terrorism and Security Act, 2015 places a duty on those in authority to have due regard to the need to prevent people from being drawn into terrorism. If a staff member has a concern that a pupil may be at risk of radicalisation or involvement in terrorism, they should speak with the Designated Safeguarding Lead.

7.3 Criminal Exploitation: This is a form of harm that is a typical feature of county lines activity. Drug networks of gangs exploit children to carry drugs and money from urban areas to suburban and rural areas. Exploitation can occur even if activity appears to be consensual. Staff should follow the procedures outlined in this policy if concerns of criminal exploitation arise. The DSL will complete the Safeguarding Children Partnership Board's Exploitation (CSE/Criminal/Gangs) Risk Assessment and Management Tool and refer to social Care if there is a concern that a young person may be at risk of criminal exploitation. Children who go missing can be at increased risk of child criminal exploitation, modern slavery and/or trafficking. The DSL must be notified of any children who go missing, particularly if it is a regular occurrence.

7.4 Misuse of Drugs or Alcohol: The discovery that a child is misusing legal or illegal substances or reported evidence of their substance misuse is not necessarily sufficient in itself to initiate child protection proceedings but such action will be considered when there is evidence or reasonable cause:

- To believe the child's substance misuse may cause him or her to be vulnerable to other abuse such as sexual abuse;
- To believe the child's substance related behaviour is a result of abuse or because of pressure or incentives from others, particularly adults;
- Where the misuse is suspected of being linked to parent/carer substance misuse
- Where the misuse indicates an urgent health or safeguarding concern
- Where the child is perceived to be at risk of harm through any substance associated criminality

7.5 Substance Misusing Parents/Carers: Misuse of drugs and/or alcohol is strongly associated with Significant Harm to children, especially when combined with other features such as domestic violence. If a member of staff receives information about drug and alcohol abuse by a child's parents/carers they will follow appropriate procedures. This is particularly important if the following factors are present:

- Use of the family resources to finance the parent's dependency, characterised by inadequate food, heat and clothing for the children
- Children exposed to unsuitable caregivers or visitors, e.g. customers or dealers
- The effects of alcohol leading to an inappropriate display of sexual and/or aggressive behaviour
- Chaotic drug and alcohol use leading to emotional unavailability, irrational behaviour and reduced parental vigilance
- Disturbed moods as a result of withdrawal symptoms or dependency
- Unsafe storage of drugs and/or alcohol or injecting equipment

- Drugs and/or alcohol having an adverse impact on the growth and development of the unborn child

7.6 Domestic Abuse: is defined as any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse: psychological, physical, sexual, financial and emotional. Where there is domestic abuse in a family, the child will always be affected; the longer the violence continues, the greater the risk of significant and enduring harm, which they may carry with them into their adult life and relationships. Domestic Abuse can also affect children in their personal relationships as well as in the context of home life. Staff must follow the procedures outlined in this policy if concerns of Domestic Abuse arise. SSYI will be vigilant in monitoring the welfare of children living in domestic abuse households, offer support to them and contribute to any Multi-Agency Risk Assessment Conference (MARAC) safety plan as required.

7.7 Children with Disabilities, Additional Needs or Special Educational Needs: are statistically more vulnerable to abuse. SSYI staff who support children with complex and multiple disabilities and /or emotional and behavioural problems should be particularly sensitive to indicators of abuse.

7.8 Child-on-child abuse: can manifest in many ways. This can include but is not limited to: bullying (including cyberbullying, prejudice-based and discriminatory bullying); abuse within intimate partner relationships; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexual harm; sexual violence and sexual harassment; consensual and non-consensual sharing of nudes and semi-nudes images and/or videos; 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; upskirting part of the Voyeurism (Offences) Act, April 2019) and initiation/hazing type violence and rituals. Addressing inappropriate behaviour (even if it appears to be relatively innocuous) can be an important intervention that helps prevent problematic, abusive and/or violent behaviour in the future.

All forms of child-on-child abuse are unacceptable and must be taken seriously, it is not an inevitable part of growing up. Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur wholly online, concurrently online and offline, or technology may be used to facilitate offline abuse. It can occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Girls, children with special educational needs and disabilities (SEND) and LGBTQ+ children are potentially more at risk.

SSYI staff will:

- Seek to create a protective ethos in which child-on-child abuse including sexual violence and sexual harassment will not be tolerated.

- Ensure staff are trained and equipped to provide information, advice and guidance regarding Relationship and Sex Education that supports children in keeping themselves safe from abuse, including abuse from their peers and online.
- Ensure that staff follow the procedures outlined in this policy when they become aware of child-on-child abuse, referring any concerns of child—on-child abuse to the DSL in line with safeguarding reporting procedures. The DSL will refer to the Safeguarding Children Partnership Boards Child Sexual Abuse Assessment Tool if there is a concern that a child may be displaying sexually harmful behaviours, may have experienced sexual violence or sexual harassment or other forms of sexual abuse.

8. DEALING WITH SUSPECTED ABUSE:

8.1 Child protection is very serious and all suspicions and concerns, regardless of how minor they seem should be dealt with seriously and the following steps taken:

- Do not delay.
- Record any observations and keep an account of your suspicions and concerns
- It is not your role to investigate or confront the person suspected of abuse – present information clearly and factually.
- Don't keep it to yourself – discuss it with your supervisor or a designated person.
- Complete a written record of your concerns using the 'Concern form' (see appendix A & B). One small concern raised may be the missing part of a jigsaw that completes a picture that is held centrally. The form should be completed the same day as the concern was raised.

If you cannot contact your line manager or a designated person, call Children's Services using one of the following numbers:

- Cambridgeshire children: 0345 045 5203
- Out of Hours Emergency Duty Team (EDT): 01733 234724 (see section 10)

9. DEALING WITH ALLEGATIONS OF ABUSE:

9.1 If a child makes a disclosure and has suffered abuse the following action must be taken. Our main concern is the child and therefore all decisions should reflect this fact.

- Stay calm and in control but do not delay in taking action.
- You must explain to the child that you cannot keep the information confidential (see section 4).
- You should reassure the child and explain that you need to tell someone and explain who and why. Make it clear that you will only tell the people who need to know and who should be able to help
- It is important to remember that the child is not always in a position to judge risks themselves and they have a right to protection.
- It is not your role to investigate or confront the person about who the allegation is being made
- Don't keep it to yourself – discuss it with your supervisor or a designated person.

- Complete a written record of your concerns using the ‘Concern form’ (see section 14 and appendix A & B). The form should be completed the same day as the concern was raised. Present information clearly and factually, using the child’s words where possible. The form could be used as evidence in court.
- If a child is deemed to be at immediate risk of harm a telephone referral should be made directly to Children’s Services using one of the following numbers:
 - Cambridgeshire children: 0345 045 5203
 - Out of Hours Emergency Duty Team (EDT): 01733 234724
- You will be asked for the child's name and address; this enables Children’s Services to check if the child or children already have an allocated social worker. If there is an allocated social worker, you will be directed to the relevant social worker or team manager. If the child does not have a social worker, you will be asked for:
 - Basic details (correct names and spellings, siblings’ details, date of birth, ethnicity, first language, family composition, school attended, learning needs/disabilities etc)
 - The nature of the concern and the identified risks of significant harm, what the impact is on the child and the evidence to support this as well as what support has been provided previously to help the family address the concerns and what strengths/resilience exist within the family
 - Details of where the child is now and whether you have informed parents/carers of your concerns
 - Details of what you want to see happen as a result of the referral including the views and feelings of the family and, where appropriate, the child.
- Based on the information provided they will consider the action to be taken for appropriate and proportionate intervention. The more information that is provided, the easier it is for Children's Social Care to make a decision about the best course of action to take in respect of the child.
- All telephone referrals must be followed up in writing within 24 hours using the Cambridgeshire & Peterborough Safeguarding Online Referral Form
- If you have a concern regarding a child but they are not at immediate risk of harm should be made using the Cambridgeshire & Peterborough Safeguarding Online Referral Form.
- Don't act alone, speak to your line manager or a designated person. If they are not available, contact Children's Services directly and report the concern.
- Download a copy of the online referral form and email it to the DSL so that a copy can be stored electronically.

If you think the child is in immediate danger and needs urgent help, call the police on 101.

9.2 Good practice guidelines when talking to the child:

- Reassure the child that ‘they did the right thing’ in telling someone.
- Give the child the time they need to explain.

- Avoid 'closed' or 'leading' questions – for example: after noticing a mark on a child, ask: "How did that happen?" and NOT "Did Daddy do that?"
- Do not be judgemental.
- Be attentive and take the child seriously so they feel safe.
- Avoid condemning the alleged abuser.
- Avoid promises you cannot keep.
- Never promise to keep the abuse a secret.
- Repeat back to the child (as accurately as possible) what you have heard to check your understanding of what the child has told you.
- Ask the child if they have told anyone else about these things.
- Explain what will happen next.
- Write down what the child has told you in a Concern Form. Ensure records are accurate and factual and where possible use the child's own words.
- Get advice from line manager or designated person. DO NOT SEND THE CHILD HOME if they are at immediate risk of harm.
- DO NOT CONTACT THE ALLEGED ABUSER – unless this has been discussed with a designated person or Social Care.

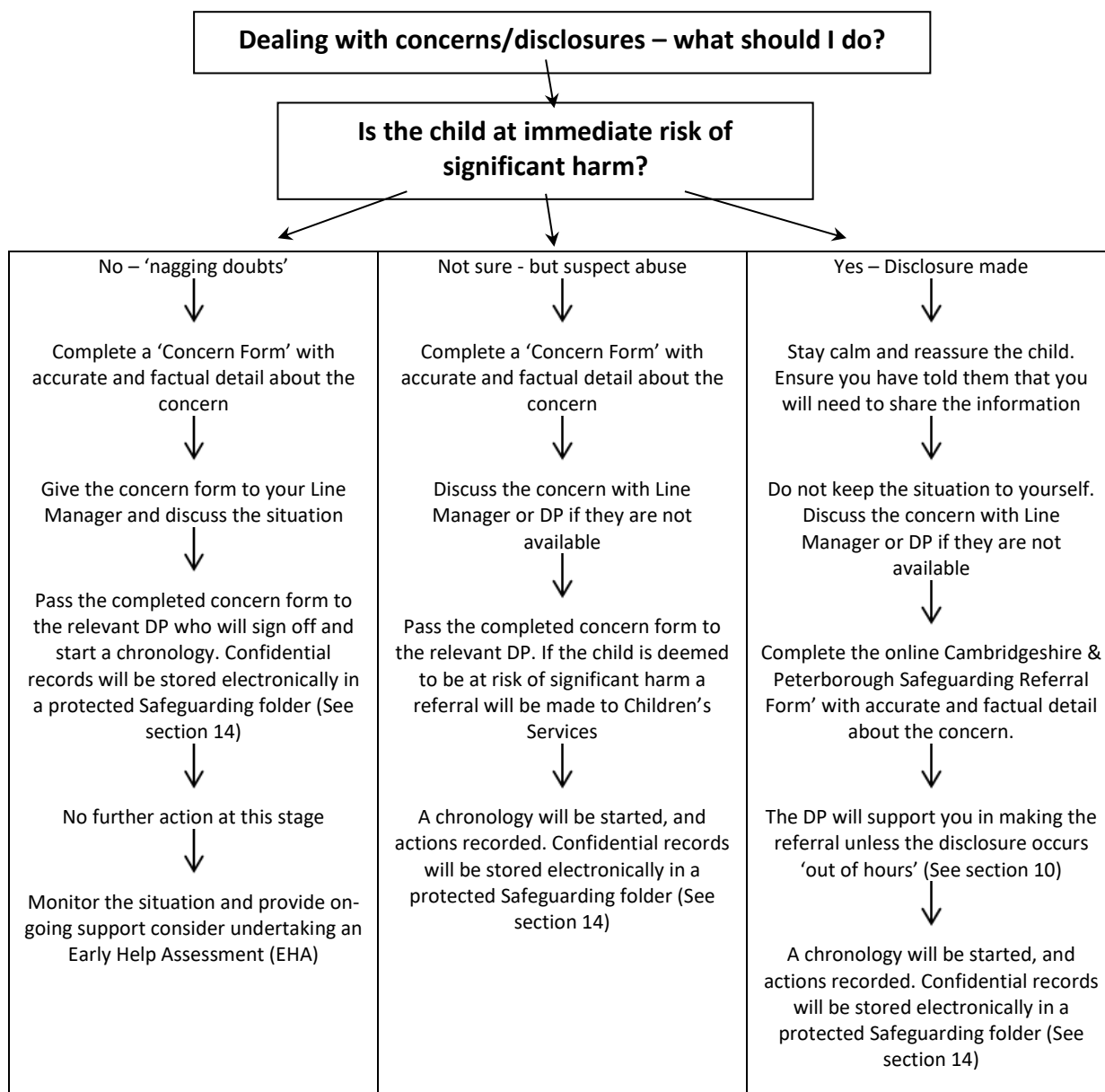
9.3 If a worker suspects abuse or receives a disclosure during a piece of partnership work or while delivering projects commissioned by a school then the relevant organisation's procedures should be followed. The onus is with the member of staff leading SSYI's involvement to be aware of what the procedure is and to ensure that procedures have been followed correctly. If another organisation's 'concern form' has been completed it should be copied and given to their supervisor or designated person for recording. If there are concerns with an agency's response this should come to the Designated Person or if a staff member is unsure as to what action is required of them then they should speak to their Line Manager or a Designated Person.

10. DEALING WITH ALLEGATIONS OF ABUSE 'OUT OF HOURS':

10.1 Workers who deliver evening or weekend sessions may find that there are times when it is not possible to refer or discuss 'suspected abuse' or 'allegations of abuse' with a supervisor and/or a designated person because they are working 'out of hours'. 'Out of hours' refers to 'out of normal office hours' (defined as 9-5pm Monday to Friday) and normal communication links to Line Managers or a designated person may not be available. In these circumstances they follow the steps above in sections 8 and 9.

- It is important to remember not to act alone but seek advice from relevant sources.
- Actions taken must be recorded and given to a supervisor or a designated person at the earliest opportunity.

10.2 Workers need to discuss 'Out of Hour' procedures with their supervisor or a designated person to ensure they are confident in the approved and appropriate action they may need to take.



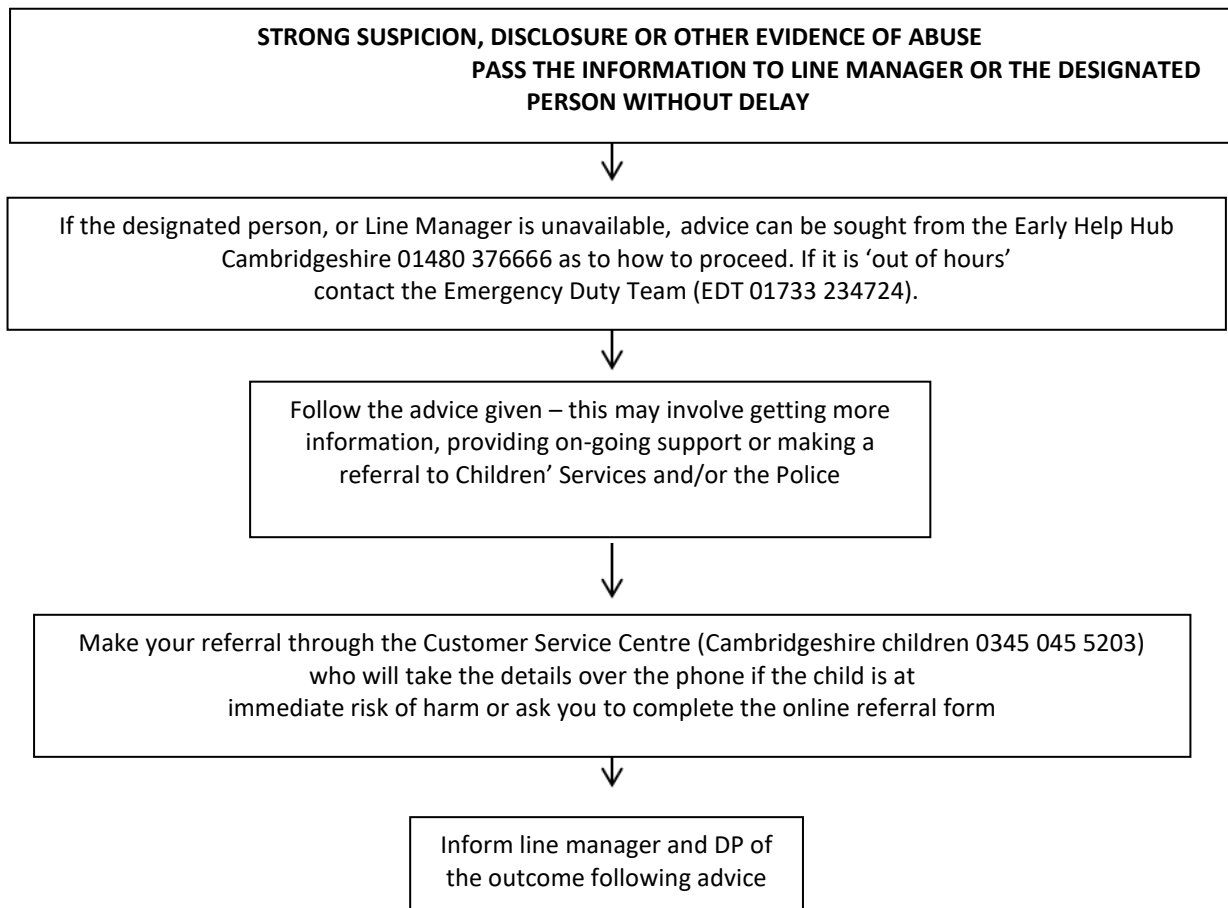
11. MAKING A REFERRAL:

11.1 If you suspect a child is at risk of significant harm **act immediately do not delay.** Designated persons will support staff in making a referral – please see the guidelines and flowchart below:

- Workers should initially inform their Line Manager of any concerns regarding a child and then speak to a Designated Person. However, if the child is at immediate risk of significant harm or the concern is urgent or serious then the staff member can go directly to the appropriate Designated Person for their programme. The worker should then keep their Line Manager informed of their actions.
- It is then the responsibility of the Designated Person to ensure that cases of suspected abuse or allegations of abuse are referred to Children’s Services or the police.

- When making a referral it is essential that you provide as much relevant information as possible. Details of the referral should be recorded on an individual Chronology Sheet including the name of the person you spoke to and any agreed actions.

Making a Referral



12. NEXT STEPS FOLLOWING REFERRAL

- All referrals received by Children's Services are triaged to determine if they meet the threshold for further Social Care involvement. Referring professionals should be contacted within 24 hrs and updated as to the outcome of their referral and what actions if any will be taken within one working day.
- In situations when it is not clear whether there are safeguarding issues/risks referrals will be passed through to the Multi-Agency Safeguarding Hub (MASH) for a MASH enquiry. This is a multi-agency team who undertake information gathering, analysis and decision making about whether there is a need for statutory intervention and if not what the appropriate intervention for the child, and their family, might be.
- If the child is deemed to be at risk of significant harm an initial assessment will be undertaken to determine whether the child is in need (Section 17) and/or is suffering

or likely to suffer significant harm (Section 47). The focus of the assessment will be the welfare of the child and include consideration of the child's wishes and feelings.

- If a child is suspected to be suffering, or likely to suffer significant harm, Social Care are required under Section 47 of the Children Act 1989 (amended 2004) to make enquiries, to enable a decision to be made over whether action needs to be taken to safeguard and promote the welfare of the child. If concerns are substantiated and the child is judged to be at continuing risk of harm a **Child Protection Conference** must be held.
- Where there are no concerns about harm but the assessment confirms that a child is unlikely to achieve or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services a **Child in Need (CIN)** meeting is held in order to agree a plan.
- If the child is considered not in need by the MASH and there is no need for further Social Care involvement the concern may be passed to the Early Help Hub (EHH) for an Early Help Assessment.

13. ATTENDING CHILD PROTECTION CONFERENCES:

13.1 Attending an Initial Child Protection Conference or a Review meeting is of high importance and should take precedence over other commitments. It is essential that the conference is attended in order to represent the child and contribute to the decision making. Those who attend will be asked to make informed decisions about whether the child is at continuing risk of significant harm and if the child should become subject to a child protection plan. When invited to Child Protection Conferences the following procedure should be followed:

- Staff should notify their line manager and the DP, they will make a note of this meeting on the individual chronologies (*see section 14*).
- Staff should prepare a report using the proforma for Social Care (*see appendix D*). The report should summarise all the information you have gathered about the child/ren and the family circumstances. The DP's will provide support around report writing and preparing for a conference.
- It should be concise, free from jargon and clear in distinguishing between fact and opinion. It should focus on specific, observable behaviours.
- It should highlight strengths and weaknesses as well as concerns.
- Reports should be word-processed and emailed to the DP to be reviewed.
- Reports should be emailed to Social Care 48 hours prior to the scheduled conference.
- It is good practice for reports to be shared with the parent's/carers/child at least 24 hours in advance of the conference.
- Following a conference staff should feedback to a DP the outcome and the decisions that were made so records can be updated.

14. KEEPING RECORDS:

14.1 Information about children and their families is defined as personal data, i.e. information that identifies a living individual. Collection, storage and sharing of

personal data is governed by the General Data Protection Regulations (GDPR) & the Data Protection Act 2018. The GDPR and Data Protection Act 2018 do not prevent, or limit, the sharing of information for the purposes of keeping children safe.

14.2 ***What information should be recorded?***

Good record keeping is essential in child protection, particularly with regard to children who are subject to a child protection plan, children 'in need' or who are identified as vulnerable, for the following reasons:

- It is a legal requirement and provides evidence of concerns, discussions and actions taken.
- It can provide evidence for investigations, enquiries, complaints, or court proceedings.
- It provides an accurate documented account of involvement and actions that may have been taken with children and families.
- It supports effective working together.
- It demonstrates professional accountability.

14.3 ***What information should be recorded?***

- A record should be made of any information, including hearsay and 'nagging doubts', which gives cause for concern about a child and their wellbeing. This information may not appear to be very significant on its own, but it could contribute to a 'jigsaw' picture of abuse that should not be ignored. A 'Concern Form' should be completed and given to the DP for their records. Concern forms can be completed electronically and emailed to the DP.
- When a concern results in a referral to Children's Services a copy of the online referral form must be downloaded on completion and given to the DP who is responsible for keeping safeguarding records.
- When the DP receives a completed 'Concern Form' or a referral an electronic Welfare File will be started for an individual child.
- A chronology will be started by the DP for a child when a concern form has been received. All subsequent safeguarding actions taken will be recorded on this chronology. The DSL will utilise the chronology to keep track of cases, recording significant incidents and outlining the involvement and communication with other agencies (see appendix C).
- All Welfare Files will be kept securely in an electronic Safeguarding folder.
- A password protected spreadsheet in the secure electronic Safeguarding folder will be kept detailing all the children who have a welfare file.

14.4 ***How should notes and reports be made?***

- Concern Forms, referral forms, reports for Child Protection Conferences should be word-processed. Copies should not be stored locally but given if printed or emailed to the DP who will start a Welfare file or add to an existing one.
- Concern Forms must be printed on yellow coloured paper so they can be easily identified or emailed directly to the DP if electronic.
- Information should be factual or based on fact. Use the child's own words wherever possible. Record what was seen and heard etc. and try to be specific e.g. 'Jane had 2 circular marks on her arm that had been caused by a cigarette burn' rather than 'Jane had 2 cigarette burns on her arm'. Drawing a sketch showing position and size of any marks should be completed using the Body Maps (see appendix B).
- The source of the information should be identified and the views and thoughts of the child(ren) should be included so their voice is heard.
- Make a note of what you have done with the information e.g. I spoke to my line manager.
- Opinion is acceptable as long as it can be justified in some way e.g. 'Sam ran and hid under the table when his mother arrived to take him home. He appeared to be frightened'.
- Avoid specialist jargon that others may not understand.

14.5 *Who should have access to child protection information?*

- Access to Welfare files should be on a need-to-know basis. The confidentiality of the child and family must be respected as far as possible, but the welfare of the child is paramount.
- Safeguarding information should be shared with another agency where there is concern that a child is at risk of significant harm. For all other information, consideration should be given to the relevance and proportionality of information sharing.
- Information should not be released to solicitors without taking legal advice.
- A person with Parental Responsibility may make a Subject Access Request in relation to the Welfare file. A young person of sufficient age and understanding may also make a Subject Access Request (see section 4). Reports for social care should be shared with the family at least 24 hours in advance of the Child Protection case conference (see section 13).

14.6 *How long should information be kept?*

Child Protection information should be archived and kept until the individual reaches the age of 25.

15. ALLEGATIONS AGAINST WORKERS

“Children can be subjected to abuse by those who work with them in any setting. All allegations of abuse or maltreatment of children by a professional, staff member, or volunteer must therefore be taken seriously and treated in accordance with consistent procedures.”

15.1 The following procedures relate to all cases in which it is alleged that an adult who works with children in any capacity (paid or voluntary) at SSYI has acted inappropriately.

In the rare event of an adult who is working with children presenting an immediate risk of harming one or more children to what is perceived to be a dangerous extent, call the police.

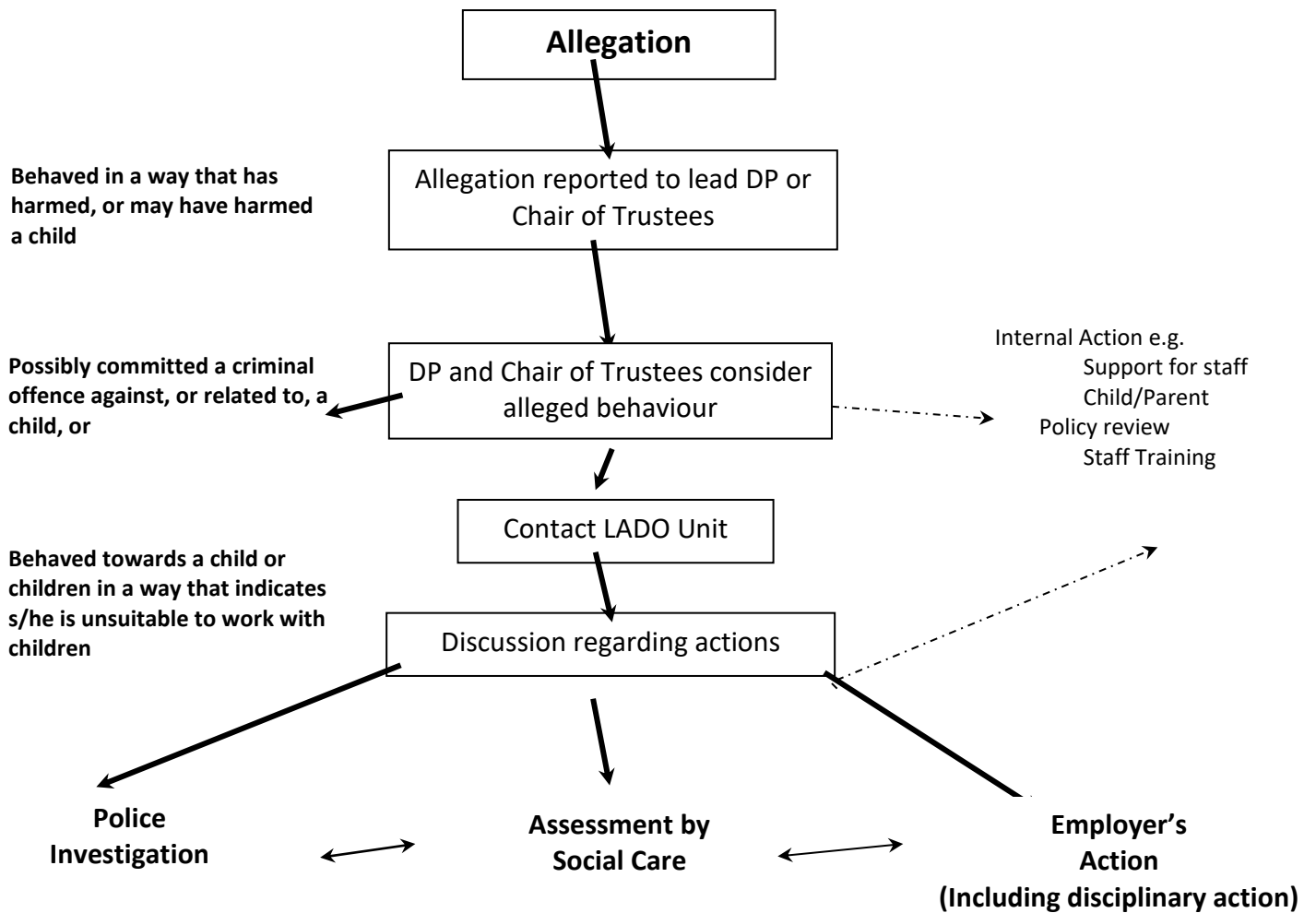
The following actions should be taken immediately on hearing a disclosure or witnessing an incident, if necessary, before informing the Designated Safeguarding Lead or relevant trustee.

15.2 **Initial actions:**

- Ensure the individual child or children are safe. Appropriate attention should be given to any injury, but it is important not to contaminate any potential forensic evidence.
- If a child is making a disclosure, ensure that his/her account is accurately recorded as soon as possible; this must be an unprompted account. Do not discuss the disclosure with him/her but do reassure the child. Make sure the account is signed and dated.
- If there are known witnesses, including yourself, make a note of their names and give them to the Designated Person or Chair of Trustees.
- **Do not undertake any form of investigation at this stage.** If the alleged perpetrator is unaware of the allegation or serious concern, do not alert him/her to it, as this may allow opportunity for him/her to influence others to get rid of potential evidence. If s/he is aware that an allegation has been made, or that his/her inappropriate behaviour has been witnessed, inform the Designated Person or Chair of Trustees as quickly as possible; it may be necessary to suspend the alleged perpetrator to protect all concerned. This will be discussed between the Designated Safeguarding Lead, the relevant trustee and Local Authority Designated Officer (LADO).
- Keep a clear record of all actions and discussions at this stage.
- Keep an open mind about the allegations or serious concerns and close down speculation as much as possible. It is important to be fair to all involved.
- Report the allegation or serious concern to the Designated Person or Chair of Trustees as quickly as possible. If they are both unavailable the LADO Unit (01223 727967) should be contacted for advice. When reporting the allegation, you should have to hand the following:
 - All available accounts of the incident or behaviour
 - Details of the child(ren) concerned, if possible
 - Details of the alleged perpetrator, if possible
 - Names of known witnesses

15.3 *Initial considerations:*

- The **Designated Person and Chair of Trustees** will in the first instance consider the allegation made against the worker and decide whether or not they have:
 - Behaved in a way that has harmed, or may have harmed, a child
 - Possibly committed a criminal offence against, or related to, a child; or
 - Behaved towards a child or children in a way that indicates that s/he is unsuitable to work with children
- If it is clear that the allegation **does not meet** the above criteria the allegation will be addressed directly through SSYI's complaints/disciplinary procedures.
- Where the allegation **meets** the criteria above the following procedure should be followed.
- The **Designated Person and Chair of Trustees** will check whether or not the allegation is unfounded or demonstrably false before a formal investigation. This judgement should only be made on provable facts, not opinions of the alleged perpetrator.
- If further advice or actions are required contact the LADO to assess all the known information.
- If, following discussion between the Designated Person, Chair of Trustees and the LADO Unit, it is assessed that the matter does not reach the threshold for referral to the police; SSYI should conduct an internal enquiry into the allegation or serious concern and follow its own disciplinary procedures.
- If the necessary outcome is to refer to the police the LADO Unit will do this. If it is unclear whether or not such a referral is advisable, then the LADO Unit will take advice from the police before formally referring the matter.
- In cases where the police become involved there will be a Complex Strategy Meeting, convened and chaired by the LADO Unit which will be attended by the Designated Person and Chair of Trustees.
- It may be necessary to suspend the worker to safeguard the child(ren). If this course of action is necessary the LADO and police should be informed that you intend to take this action. This in no way implies guilt but is a measure to protect the child and the staff/volunteer. This should be made clear at the point of suspension. When a formal investigation is taking place, in most cases it is not appropriate to keep a member of staff at work. If suspension is necessary, SSYI has a duty of care to its employee to make support arrangements available. The support person must not be directly involved in the investigation or the management of disciplinary proceedings. In discussion with the LADO, the employee should be kept appropriately informed about the process of the investigation.
- If the allegation is made against the Designated Person or Chair of Trustees, it may not be appropriate to follow an internal reporting route. The LADO Unit should be contacted directly. Alternatively, the member of staff can contact the Education Child Protection Service or NSPCC for advice.



16. TRAINING, SUPPORT AND SUPERVISION:

- All staff and volunteers will be required to read the Safeguarding Children Policy and go through it with their line manager and a DP during their induction. The induction should be within the first week of employment.
- A record will be kept of staff and volunteers who have completed training by the lead youth worker.
- All staff will receive Safeguarding training appropriate to their role within the first month of their employment and will undertake a refresher course every 3 years. A record of training undertaken by staff and volunteers will be kept on a database.
- Safeguarding Children will appear as a standing item on the agenda for staff supervision sessions. Managers will review staff training needs to ensure knowledge of child protection is maintained and up-to-date.
- Regular opportunities will be made for workers to meet together to review and plan their work, to share experiences and to receive training.
- When possible, Line Managers will take opportunities to observe those for whom they are responsible as they work with children.
- It is recognised that safeguarding issues are distressing and difficult to deal with. Staff involved in safeguarding incidents will be offered support through supervisions and meetings with DP's. If additional support is required clinical supervision may be offered.

17. SAFER RECRUITMENT:

17.1 A safe employment process will help promote a safer culture generally and complement other fundamental processes including Health and Safety. It will also serve to help deter, reject, or identify people who might abuse the vulnerable. SSYI and Romsey Mill both have a *Safer Recruitment Policy* that details the procedure involved in recruiting a new member of staff, or volunteer. The following steps must be taken:

- ***Advertising and Application Form*** – when a vacancy is advertised, the advertisement should include a statement about SSYI's/Romsey Mill's commitment to safeguarding and promoting the welfare of children, and reference the need for the successful applicant to undertake an enhanced DBS (Disclosure and Barring Service) check. All staff, students and volunteers will need to fully complete an application form and provide two referees.
- ***Rehabilitation of Offenders Act 1974*** – the application form must include an explanation that the post is exempt from the Rehabilitation of Offenders Act 1974 and therefore that all convictions, cautions and bind-over's, including those regarded as 'spent' must be declared.
- ***Shortlisting*** – all candidates should be assessed equally against the criteria contained in the person specification without exception or variation and will be done anonymously by removing/obscuring the applicant's name. It will be undertaken by at least two people. Any gaps and inconsistencies should be identified for further exploration at interview. Candidates should bring original documents to verify their identity, qualifications and to fulfil the right to work in the UK requirements.
- ***Interview*** – The interview should assess the merits of each candidate against the job requirements and explore their suitability to work with children. Interviews should always be 'face to face' and explore issues relating to the safeguarding of children. At least one member of the interview panel must have undertaken safeguarding training. The interviewers should investigate any apparent sizable gaps in employment history to check for credible reasons and explore concerns or discrepancies arising from the information provided by the candidate. During the interview candidates should be asked if they wish to declare anything in light of the requirement for them to undertake an enhanced DBS check. Where appropriate children will be included on the interview panel.
- ***References*** – will be sought, in writing or over the phone for all paid workers, students and volunteers. It will be made clear that the person will be working with children and that views on their suitability for this type of work are being invited. SSYI will not accept references or testimonials provided by the candidate, or open references and testimonials, i.e. "To Whom It May Concern", as this is open to fraud. If replies are vague or ambiguous they must be followed up in person or by telephone.
- ***Employment Checks*** – An enhanced Disclosure and Barring Service (DBS) check will be undertaken before confirming the appointment of a new staff member, or volunteer. Whilst waiting for the DBS check to be processed, a staff member, student, or volunteer can only begin working if they have a recent enhanced CRB or DBS check (within 6 months) from another similar

organisation and references have been received. At this stage they must not be left unsupervised or alone with any child until their new DBS has been returned. A person who has no valid enhanced CRB or DBS check will be unable to begin work until their enhanced DBS has been processed. If a staff member, or volunteer has indicated that they have criminal convictions then they cannot start volunteering until their enhanced DBS has been completed and returned. The convictions must be discussed with the Lead Designated Person or designated trustee to decide on the individual's suitability and a risk assessment will be carried out. If a DBS check reveals information that a candidate has not disclosed in the course of the selection process then a decision will be made whether or not the offer will be upheld. This may result in a further interview with the candidate. Under no circumstances will a person be offered employment or given the opportunity to volunteer if they have been found to be registered on the Barred List.

- **Volunteers** – SSYI has its own 'Volunteer Policy' detailing the steps involved in processing volunteers in order that they can be a part of SSYI activities and groups. As a matter of course all volunteers undertake a DBS enhanced disclosure check and must provide two character references.

18. E-SAFETY AND TECHNOLOGY

- 18.1 SSYI recognises that there are many educational and social benefits from the use of new technologies both for children and staff but the use of these technologies needs to be monitored. SSYI is committed to establishing safe and responsible communication and online behaviours amongst staff and volunteers. The use of technology for communication purposes between children, staff and volunteers, by whatever method, should take place within clear and explicit professional boundaries. This includes the wider use of technology such as mobile phones, text messaging, emails, digital cameras, video, webcams, websites and blogs.
- 18.2 Staff and Volunteers should be circumspect in their communications with children so as to avoid any possible misinterpretation of their motives or any behaviour which could be construed as grooming. This means that staff and volunteers should:
- not request, or respond to, any personal information from a child, other than that which might be appropriate in a professional role
 - ensure that personal social networking sites are set at private and children with whom they work are never listed as approved contacts
 - only use work social media channels to communicate with children with whom they support
 - only make contact with children for professional reasons and in accordance with job role and purpose
 - not give their personal contact details to children including email, home or mobile telephone numbers but use SSYI email addresses and phone numbers
 - only use equipment e.g. mobile phones and computers, provided by SSYI to communicate with children

- only use social media applications that keep a record of the communication
- seek to avoid long personal conversations that could be misconstrued
- ask for further guidance around appropriate communication if something is unclear
- report and record any incidents (verbal, written or physical) that suggest a child may have developed an infatuation with a staff member, student or volunteer

19. PROTECTIVE ETHOS:

19.1 SSYI is committed to creating an ethos in which children feel secure, their viewpoints are valued, they are encouraged to talk, and they are listened to. This will be achieved in the following ways:

- Writing and adopting a clear Safeguarding Children Policy that is understood by staff, and volunteers. A review will be undertaken annually to ensure that it adheres to the latest guidance and policy around Safeguarding Children
- Regular staff training, especially designated personnel, to ensure required skills and knowledge are up to date.
- Discussions within team meetings and supervisions around Safeguarding to ensure staff remain vigilant and that a team approach to issues is adopted and good practice shared to raise awareness.
- Display information within SSYI owned premises regarding our commitment to Safeguarding the wellbeing of children and families and how individuals can report any concerns.
- Adopting an interagency approach to safeguarding by working effectively and supportively with other agencies, while being aware of information sharing protocols
- Be vigilant in cases of suspected abuse – recognise the signs and indicators, know and adhere to procedures.
- Endeavour to raise children’s awareness and actively promote self-esteem building so that children have a range of strategies and contacts to ensure their own protection.
- Inform children about personal safety and assertiveness skills and help them assess risks.
- Model being a ‘safe person’: respect children’s needs, model appropriate boundaries regarding personal space, avoid having a special relationship with one child and encourage an appropriate degree of independence.
- Be aware of how your actions may look when seen by someone from outside. If in doubt about how your interaction with a child may appear to an objective observer don’t do it.
- If you see a colleague doing something that causes you concern – tell them or their manager this is not seen as ‘telling tales’ but as helping them not to leave themselves open to allegation.

APPENDIX:

A. Safeguarding Children: Concern Form Guidance Notes

This form must be used when a worker has a general or an immediate concern. The form should be used when an incident occurs which causes a worker to be concerned about the immediate safety of a child or young person. It must also be used where concerns about any family situation are believed to be placing a child at a very high risk of harm, or where there are on-going concerns about the physical or emotional well-being of a child.

The completion of these forms must be seen as a priority and carried out as soon as possible to ensure an accurate record of events.

All forms must be:

- Completed by a SSYI employee. Where the concern/incident has been observed by a volunteer the form should be completed by the SSYI employee in conjunction with that volunteer.
- Completed with full reference to SSYI's Safeguarding Children Policy.
- Signed off by an individual's Line Manager and Designated Person who will then start a Chronology for that Child or Young Person.
- Given to the Designated Person who will start an electronic Welfare file for that child or add to an existing one.

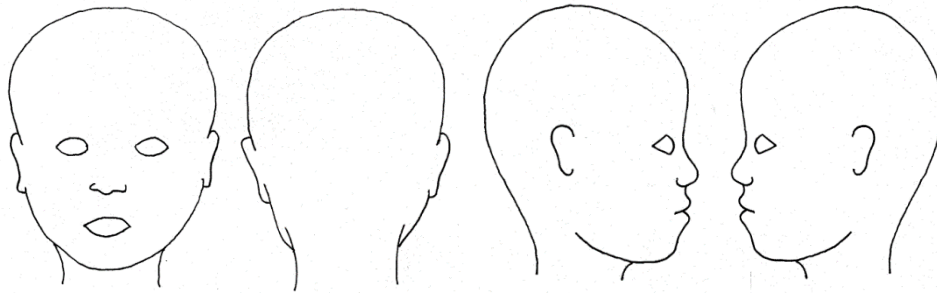
It is important that the forms are used to monitor individual situations but also as a tool through which SSYI can identify gaps in service provision which put children at risk.

No SSYI worker should act alone on a child protection issue, support and advice should always be sought.

B. SAFEGUARDING CHILDREN: CONCERN FORM

Child's Full Name:	DOB:	Gender:
Any other names by which child is known:	Ethnicity:	
Address:	Tel Number:	
Postcode:	Mobile:	
Carer's name:	Relationship to child:	
Siblings (if known give names and approx. ages):		
Date of Concern/Incident:	Time of Concern/Incident:	
Your role:	Programme Area:	
Your Name (print):	Your Signature:	
Line Manager Name:	Database:	
<p>Describe the incident as factually as possible not your opinion. Include who was involved, where it happened, exactly what happened etc. Remember to describe clearly any behavioural or physical signs you have observed.</p> <p style="text-align: right;">(continue overleaf if necessary)</p>		

Attach a body map to log a concern about a child's welfare.

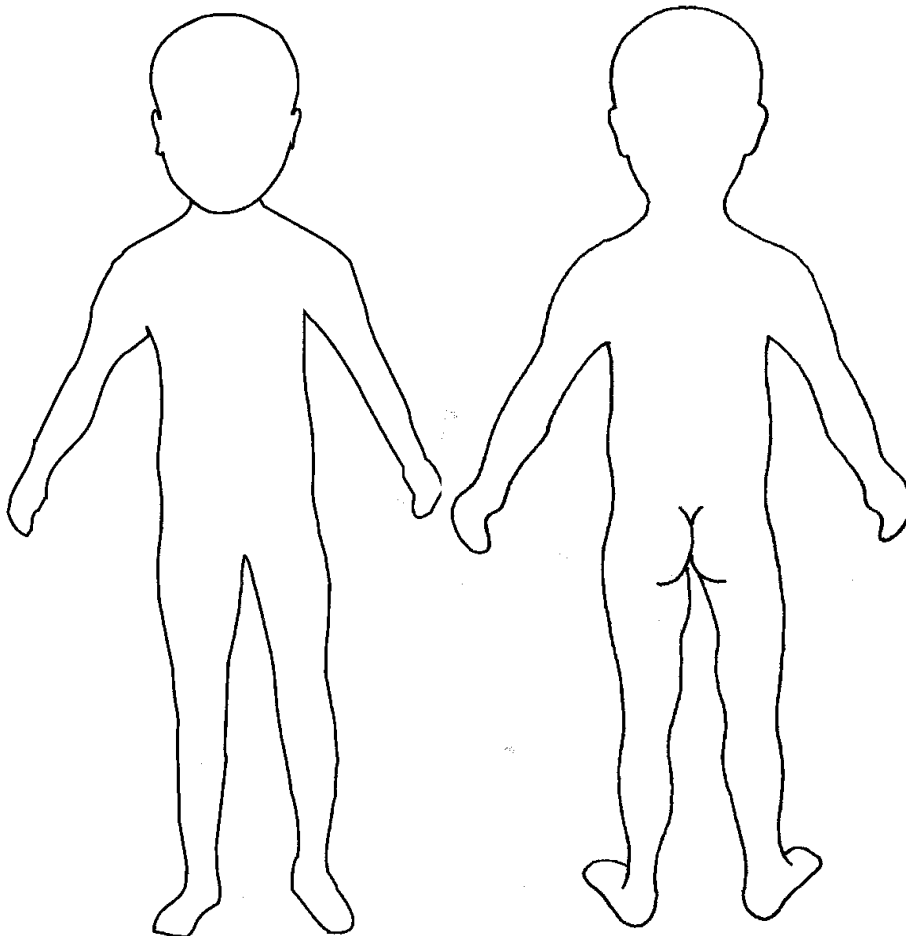


FRONT

BACK

RIGHT

LEFT



Name of Designated Person:
Initial action taken by the Designated Person:
Has the parent/carer been informed of the concern? YES/NO (please circle as appropriate)
If YES, state name of parent/carer:
If YES, state who informed the parent/carer, the action taken and the outcome:
If No, provide the reason why not:
Date: Time: Signature of Designated Person:
Details of any further action taken or relevant information (this may include follow-up calls, feedback from other professionals, etc.)
Designated Person – please ensure a record of this log is added to the child welfare chronology and added to the child’s welfare file. If an urgent referral is required call Children’s Services <ul style="list-style-type: none"> ● Cambridgeshire child: 0345 045 5203 ● EDT (Emergency Duty Team): 01733 234724

To be completed by a Designated Person for Child Protection

C. Chronology of Child Protection Concerns

Name of child:	DOB:
Parents' / Carers' Names:	Contact No:
	Contact No:
Name of school/setting:	Name of Designated Person:
Lead Worker:	Ethnicity:

Date	Event	Action by SSYI	Action by another agency	Signed

GUIDANCE FOR COMPLETING A SOCIAL CARE REPORT

Please read this in conjunction with the proforma '**SSYI Report for Social Care**'

- The report you write should summarise all the information that you have gathered about the child/ren and the family circumstances. Be clear in distinguishing fact and opinion. Opinions and interpretations are important but try to base them on fact.
- The report should highlight strengths and weaknesses as well as concerns. It should be concise and free from jargon.
- Look at each heading on the form and consider whether or not you have anything to contribute under that heading. Make sure you complete all the information that you know but do not worry if you cannot write something under every heading. You may not have all the information required.
- Reports should be sent to the DP for approval before they are shared externally.
- **Reports should be shared with parent/carer/child if appropriate at least 24 hours in advance of the conference, ideally earlier.** Ensure that you have included everything that you will share at the conference.
- Reports should be typed and sent to the Review Manager who will chair the conference and to the social worker who is managing the case at least **48 hours** in advance of the conference. This will assist the Social Worker to identify gaps in information and how these might be filled.
- If you are unable to send the report 48 hours in advance you must take enough copies for each conference member.
- There may be occasions when conferences are convened with very short notice. This sometimes cannot be helped, and you should endeavour to complete as much of the report as you can before the conference.

SSYI Report for Social Care

Details of child/YP	
Child's name: Other known names:	D.O.B.
Details of parents/carers holding parental responsibility	
Name: Relationship to child/YP: Parental responsibility: Yes/No (please delete)	Name: Relationship to child/YP: Parental responsibility: Yes/No (please delete)
1. Details of support and context (include groups attended, length of support, punctuality)	
2. Observations of emotional and behavioural development include any significant changes	
3. Observations regarding the physical care of the child/YP include physical presentation, hygiene, nutrition, general health	
4. Observations of the relationships/interactions between the parent/carer and the child/YP and with peers and staff including examples of what you have seen and heard	
5. What is working well? Include strengths, positive outcomes and developments	

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6. What are you concerned about? Include any previous as well as current concerns

7. Views of the child/YP e.g. what is life like at home? Have they indicated what they would like to change? What do they hope the outcome of the conference will be?

8. Next Steps How can SSYI support the child/family? What other support do you consider the child/family needs?

Signature of staff:

Role:

Print name:

Date:

Has the report been shared with the family?

Yes

No

If not why?

E. SOURCES OF ADVICE AND REFERRAL:

<p>If you are concerned that a child is at immediate risk of harm and need to make a referral contact Children’s Services Customer Service Centre:</p> <p>Cambridgeshire Child: 0345 045 5203</p> <p>Email referralcentre.children@cambridgeshire.gov.uk</p> <p>Emergency Duty Team EDT (out of hours) Tel: 01733 234724</p>	<p>Education Safeguarding Team Education Safeguarding Team People and Communities Cambridgeshire County Council Bernard Sunley Centre Papworth Everard CB23 3RG</p> <p>Advice helpline Tel: 07990 936820 Email: ECPSGeneral@cambridgeshireshire.gov.uk Office hours 8.30am – 4.30pm school term time</p>
<p>For Early Help Services, advice and to send completed Early Help Assessments contact the Early Help Hub (EHH):</p> <p>Cambridgeshire: Tel. 01480 376666 Email: early.helpclub@cambridgeshire.gov.uk</p>	
<p>Cambridgeshire and Peterborough Safeguarding Children Board (CPSCB)</p> <p>Scott House, 5 George Street Huntingdon PE29 3AD Tel: 01733863744 www.safeguardingcambspeterborough.org.uk/children-board/</p> <p>Email: Safeguardingboards@cambridgeshire.gov.uk</p>	<p>Local Authority Designated Officer (LADO) Reporting concerns about another practitioner or volunteer who works with children</p> <p>Tel: 01223 727967 Email: LADO@Cambridghire.gov.uk</p>
<p>SSYI DP (James Bennett (Romsey Mill)) - 07818664178 Chair of Trustees (David Jones) - 07711063722</p>	<p>NSPCC Tel. 0808 800 5000 Email: Help@nspcc.org.uk</p>

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<p>Domestic Abuse and Sexual Violence Partnership Manager – Julia Cullum</p> <p>Julia.cullum@cambridgeshire.gov.uk</p> <p>Duty IDVA (Independent Domestic Violence Advisor) Tel: 01480 84771</p> <p>Women’s Aid 24-hour Domestic Violence Helpline Tel. 0808 2000 247</p>	<p>Child and Adolescent Mental Health Services (CAMHS) Brookside Family Consultation Clinic 18 Trumpington Road Cambridge CB2 8AH Tel. 01223 746001</p>
<p>Trudy Potter Cambs Sexual Behaviour Service</p> <p>Tel. 01223 703591 Email: Trudy.potter@cambridgeshire.gov.uk</p>	<p>Drug & Alcohol Service – Cambridgeshire General Enquires: 0300 555 0101 Cambridgeshirereferrals@cgl.org.uk</p> <hr/> <p>Parent Partnership Service</p> <p>Peter Dawson – 01223 699214</p>
<p>Domestic Abuse - Support and advice</p> <p>Cambridge Women’s Aid (City/South/East) 01223 361214</p> <p>Safe Refuge 01223 460947</p> <p>Cambridge Rape Crisis 01223 245888</p> <p>Women’s Aid 24-hour Domestic Violence Helpline Tel. 0808 2000 247</p>	<p>Cambridgeshire Child and Adolescent Substance Use Service (CASUS) (For support and treatment for people under 18 and their families)</p> <p>Tel. 01223 214614 Email. casus@cpft.nhs.uk www.casus.cpft.nhs.uk</p>
<p>Romsey Mill Hemingford Road Cambridge CB1 3BZ</p> <p>Tel. 01223 213 162</p>	