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SAFEGUARDING CHILDREN AND VULNERABLE ADULTS POLICY

1.0 POLICY STATEMENT

Policy Statement

This policy applies to anyone working on behalf of Surrey Care Trust including senior managers and the board of trustees, paid staff, volunteers, sessional workers, agency staff and students. Its purpose is to protect and enhance the safety and well-being of all children, young people and vulnerable adults by actively promoting awareness, good practice and sound procedures.

We believe the safety and well-being of children, young people and vulnerable adults is of the utmost importance and that they have a fundamental and equal right to be protected from harm regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation.

We fully recognise our statutory responsibility for safeguarding: the safety, protection and well-being of children and young people that Surrey Care Trust supports and interacts with, is paramount and has priority over all other interests. This includes responding immediately and appropriately where there is a suspicion that a young person under the age of 18 years old may be a victim of bullying, harassment, abuse (including physical, sexual, emotional) or neglect.

'Young Person' means those under 18 years old including all of those up to their 18th birthday – as designated a 'child' within the terms of the Children's Act 1989.

Surrey Care Trust encourages a culture of listening to and engaging in dialogue with children, seeking their views in ways that are appropriate to their age, culture and understanding.

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England including the Children's Act 2004 and "Working Together to Safeguard Children 2018". DfE, 2018 and "What to do if You are Worried a Child is being Abused" (2015) provides the key statutory guidance for anyone working with children and young people. It is underpinned by the guidance set down by the Surrey Safeguarding Children Board (SSCB) Child Protection Procedures and the Surrey Safeguarding Adults Board procedures. The 'Safeguarding Vulnerable Groups Act' 2006, as amended by the 'Protection of Freedoms Act 2012', the 'Health and Social care Act 2008 (regulated activity) regulations 2014 and the 'Care Act 2014' are used to guide us in relation to activities that fall into 'regulated activity' together with other government guidance and definitions. The policy is designed to ensure we discharge our responsibility in delivering regulated activities including STEP Learning Centre and the Family Centre.

All procedures and policies pertaining to safeguarding should be regularly reviewed and updated on an annual basis.

This policy was last reviewed on:

Date: 13/07/23

Name: Kate Lynn, Deputy CEO

Signed: *K.Lynn*

1.1 Aims of the Policy

This policy aims to:

- support a child's development by engaging in practice that provides security, promotes confidence and independence
- provide an environment in which children, young people and vulnerable adults feel safe, secure, valued and respected and feel confident to approach staff and volunteers if they are in difficulties, believing they will be effectively listened to
- raise awareness among all staff and volunteers of the need to safeguard children and vulnerable adults and of their responsibilities in identifying and reporting possible cases of abuse
- provide a systematic means of monitoring children, young people and adults known or thought to be at risk of harm and to ensure we contribute to assessments of need and support packages where appropriate
- emphasise the need for good levels of communication between all members of staff
- develop structured procedures within our different services which will be followed by all staff and volunteers in cases of suspected abuse
- proactively work together with our partners and agencies in establishing collaborative working practices to deal with suspected abuse
- ensure that all staff and volunteers, who have access to children and vulnerable adults, have been appropriately checked during the recruitment process which includes verifying their identification, qualifications and that an enhanced DBS certification has been put in place.

2.0 ORGANISATIONAL RESPONSIBILITIES

Surrey Care Trust will be initially responsible for the implementation of the Safeguarding Policy.

It is the responsibility of the Designated Safeguarding Lead/Manager to take appropriate action following any expression of concern and make referrals to the appropriate agency.

Surrey Care Trust will ensure that the Designated Safeguarding Lead/Manager will have adequate safeguarding training so that they are aware of the procedures of identifying and reporting suspected cases of abuse and neglect and are up to date with any legal changes.

Surrey Care Trust and its Trustees take seriously their legal responsibility¹, to safeguard and promote the welfare of children and adults, including our duty to have due regard to the need to prevent people from being drawn into terrorism – the 'Prevent Duty'². We work together with partner agencies to make appropriate arrangements across our programmes to ensure that staff and volunteers are able to identify, assess and support any child that is suffering harm. It is the responsibility of *all* adults to protect children and adhere to safeguarding and child protection procedures as a child's welfare is paramount.

¹ Including section 175 of the Education Act 2002

² section 26 of the Counter-Terrorism and Security Act 2015

Surrey Care Trust also takes its responsibility to safeguard the vulnerable adults with whom we work seriously, as defined by the Care Act 2014 and in line with the Surrey Safeguarding Adults Board procedures, as revised in July 2018.

2.1 Designated Safeguarding Leads/Manager Responsibilities

Surrey Care Trust will ensure that all members of staff/volunteers who have direct contact with children or vulnerable adults have timely and relevant safeguarding training.

Training for the Designated Safeguarding Leads can be accessed from Surrey Safeguarding Children Partnership.

The Designated Safeguarding Leads will take appropriate action following any expression of concern, disclosure or reported incident and make referrals to the appropriate agency.

The Surrey Care Trust has five trained Designated Safeguarding Leads; Janette Breese, Family Centre Manager (07919 213905), Helen Placito, West Mentoring Manager (07593 438137), Sian Jones, North Mentoring Manager (07765 257 022), Cathy Leamon, East Mentoring Manager (07919 213904), Richard Tweddle, Learning Centre Manager 01483 487037 as well as Deputy Safeguarding Leads; Teresa Bailey, Stanwell Family Centre Outreach Worker (01784 241407) and Emma-Louise Lowe, Assistant Mentoring Manager (07712 653315).

The DSL is responsible for:

- discussing any concerns about abuse with staff and volunteers and
- seeking advice from or referring children to the Children's Services Single Point of Access (C-SPA)
- seeking advice from Adult Social Care (0300 200 1005) in the case of concerns about a vulnerable adult
- seeking advice from LADO on child protection concerns or allegations against members of staff or volunteers.

2.2 Staff and Volunteer Responsibilities

Any new member of staff or volunteer with direct contact with young people will access this safeguarding policy as part of the induction process and offered training soon after commencing their post.

All staff have a duty to ensure that any suspected incident, allegation or other manifestation relating to child protection is reported using the procedures detailed below in this policy.

If in any doubt about what action to take, employees and volunteers must seek advice from one of the named Designated Safeguarding Leads/Managers or in their absence, the CEO or Board of Trustees.

Everyone who comes into contact with children and adults who are at risk of harm has a role to play in safeguarding them; keeping them from harm. Local authorities have an overarching

responsibility for safeguarding and promoting the welfare of all children and young people in their area. ‘Safeguarding and promoting the welfare of children’ includes:

- Protecting them from maltreatment
- Preventing impairment of their health or development
- Ensuring they grow up in circumstances consistent with the provision of safe and effective care
- Taking actions to enable all children to have the best outcomes

(“Working Together to Safeguard Children”, July 2018)

2.3 Specific Trust Responsibilities

Surrey Care Trust will ensure that its Board of Trustees understand and fulfil their safeguarding responsibilities by making certain that:

- there is a Safeguarding Children and Vulnerable Adults Policy, together with appropriate behaviour policies the Head of Safeguarding and the HR Officer will complete Safer Recruitment training and renew their training at requisite intervals, so that recruitment procedures follow safer recruitment practice. SCT will apply the Working Together to Safeguard Children 2018 and Surrey Safeguarding Children’s Partnership Guidelines using the framework for safer recruitment and employment practice
- the Trust has procedures in place for dealing with allegations of abuse against staff or volunteers
- DSLs undergo appropriate training and take refresher courses every 2 years
- we have 5 DSLs, who have undertaken the compulsory training (and all other training) as prescribed and delivered by the SSCB; namely, awareness of safeguarding children; whistle blowing; data protection – record keeping; non- attendance; outings and/or missing child; images of children; internet and social networking; intimate care and toileting and physical intervention. Five Managers, Janette Breese, Sian Jones, Cathy Leamon, Helen Placito and Richard Tweddle have also undertaken SSCB Designated Safeguarding Lead training to reflect the diversity of the Trust’s service users
- Kate Lynn, Deputy CEO has the senior management responsibility for the safeguarding agenda across the Trust
- Phil Osborne is the lead Trustee with responsibility for Safeguarding and will inform and report back to the board on relevant safeguarding matters and practice.
- A Safeguarding Committee formed of the DSLs, a Swingbridge representative and the Trustee with lead for Safeguarding, meets termly to support and improve practice.
- all staff and volunteers receive safeguarding training and updates appropriate to their role, in accordance with Surrey Safeguarding Children’s Board procedures
- Our trained and supervised volunteers will help us deliver our activities, including any regulated activities if applicable.
- any weaknesses identified in the Trust’s safeguarding practices are rectified as a matter of urgency
- all staff and volunteers working for Surrey Care Trust and its Trustees know how to respond to a child or vulnerable adult who discloses abuse, using the principles of ‘Working together

to Safeguard Children’, ‘What to do if you are worried a child is being Abused’ (2015) and the Surrey Safeguarding Adults board procedures

- procedures will be reviewed, updated and published regularly, both on the Surrey Care Trust website and in other formats, as appropriate
- the name of the DSLs will be clearly notified in the Centres
- all new members of staff and volunteers will receive a copy of the Surrey Care Trust’s safeguarding children and vulnerable adults’ policy and be registered with ‘Educare’ for the online Safeguarding training, together with the DSL’s name as part of their induction process
- parents and carers using the services will be made aware of this policy and given the opportunity to receive a copy
- child protection concerns or allegations against members of Surrey Care Trust staff or volunteers are referred to the Local Authority Designated Officer (LADO) for advice. Any member of staff found not suitable to work with children will be notified to the Disclosure and Barring Service (DBS) for consideration for barring following resignation or dismissal. Any volunteer found not suitable to work with children will be notified to the Disclosure and Barring Service (DBS) for consideration for barring following the Trust ceasing to use their services as a result of any substantiated allegation
- if the family centre or learning centre premises are hired to external organisations, they are made aware of the Trust’s safeguarding policy.

2.4 General Safeguarding Advice

- Remember not to be a young person’s friend, always maintain a professional manner when working with them
- Do not accept a young person as a friend on any social networking site that you use
- Always keep a record of any text or email exchanges with a young person (staff will use work telephones where available)
- Always be aware that your comments or actions may be perceived differently than intended, so be sensitive to the situation
- Do not meet a young person alone when not in a public place, this is for the safety and well-being of the young person but also yourself. Where it is necessary to meet alone, try to use public spaces for one-to-one meetings if you are not meeting in the Surrey Care Trust office or premises
- Avoid detailed discussions about your personal experiences, e.g. drugs, alcohol, sex
- Never speak to the press about a child or young person without permission from Surrey Care Trust.

3.0 KEY SAFEGUARDING CONTACTS WITHIN SCT

Role	Name	Phone	Email
Designated Safeguarding Lead (DSL)	Janette Breese	07919 231905	Janette.breese@surreycaretrust.org.uk

Designated Safeguarding Lead (DSL)	Sian Jones	07765 257022	Sian.jones@surreycaretrust.org.uk
Designated Safeguarding Lead	Helen Placito	07593 438 137	Helen.placito@surreycaretrust.org.uk
Designated Safeguarding Lead	Richard Tweddle	01483 487037	Richard.tweddle@surreycaretrust.org.uk
Designated Safeguarding Lead (DSL)	Cathy Leamon	07919 213904	Cathy.leamon@surreycaretrust.org.uk
Deputy Designated Safeguarding Lead	Teresa Bailey	01784 241407	Teresa.bailey@surreycaretrust.org.uk
Deputy Designated Safeguarding Lead	Emma-Louise Lowe	07712 653315	Emma-Louise.Lowe@surreycaretrust.org.uk
Safeguarding Trustee	Phil Osborne	Contacted via Kathryn Davies	Kathryn.davies@surreycaretrust.org.uk
Chief Executive Officer	John Downing	07796 953772	John.downing@surreycaretrust.org.uk
Deputy Chief Executive and head of Safeguarding	Kate Lynn	07718 475996	Kate.lynn@surreycaretrust.org.uk
Swingbridge representative for Safeguarding	Alan Robertson	07771 760284	alanarobertson1@hotmail.co.uk

4.0 DEFINITION OF HARM

For the purpose of this policy, Surrey Care Trust has defined harm as:

- Neglect - the persistent failure to meet the basic physical and physiological needs of the children, young people and adults that results in serious impairment of their health and development, including the failure to provide adequate food, clothing, shelter and failure to respond to basic emotional needs, such as being cared for when sick.
- Abandonment - leaving a child alone and unattended in circumstances that are inappropriate for their age and/ or level of ability.
- Emotional abuse – persistent, emotional ill treatment that has a severe adverse effect on the emotional development of children and young people. It may involve conveying to them that they are not wanted, not loved or worthless. It may involve inappropriate expectations (such as taking on the responsibility of an adult within the family) being placed on the young

person leaving them frightened and unable to cope. It may also involve the threatening, exploitation or corruption of children and young people.

- Physical abuse – hitting, kicking, shaking, slapping, and throwing, scalding, burning, poisoning, drowning, suffocating, or other action intended to cause physical harm or ill health to the child or young person. Physical harm may also be caused when a parent or carer covers up the symptoms of, or deliberately causes ill health to a child or young person within their care.
- Racial abuse – any type of verbal or physical abuse that is directed at an individual or group because of their racial or ethnic background.
- Witnessing ill treatment, including domestic abuse of another person- this may impact the health or development of a child or young person.
- Sexual abuse or sexual exploitation - forcing or enticing a child or young person to participate in sexual activities, whether or not the child or young person is aware or has knowledge of what is happening. It includes child prostitution, encouraging children or young people to watch or participate in the production of pornographic material, online grooming, encouraging children and young people to behave in sexual inappropriate ways. Sexual acts include penetrative (rape or buggery) and non-penetrative acts such as touching or stroking.

The Sexual Offences Act 2003 defines ‘consent’ as ‘if he agrees by choice and has the capacity to make that choice’. The Act, removes the element of consent for many sexual offences for:

- Children/young people under 16 (including under 13).
- Children/ young people under 18 having sexual relations with a person of trust (for example: teachers, youth workers, foster carers, police officers).
- Children / young people under 18 involved with family members over 18.
- Persons with a mental disorder impeding choice or who are induced, threatened or deceived.
- Persons with a mental disorder who have sexual relations with care workers.

In relation to young people under the age of 13, consent is irrelevant. The law says ‘a child under the age of 13 does not, under any circumstances, have the legal capacity to consent to any form of sexual activity’.

The Police must be informed immediately of any sexual activity involving a child under 13 years of age.

5.0 REPORTING CONCERNS AND MAKING REFERRALS

If staff or volunteers are concerned about a safeguarding issue or have received a safeguarding disclosure, they should contact a DSL. In the event that no DSL staff member is available, then the Deputy DSL should be contacted (Teresa Bailey 01784 241407). If there are concerns about possible abuse (or to seek advice regarding a safeguarding issue) the DSL will contact the Single Point of Access (C-SPA) 0300 4709100 and send a Request for Support Form. In case of an emergency

contact³ (01483 517898 out of hours), Adult Social Care (0300 200 1005) in the case of concerns about a vulnerable adult or Surrey Police (101 or 999 in an emergency).

Following a phone call, the DSL will make referrals relating to children in writing within 48 hours to the Children’s Single Point of Access (C-SPA) using the Request for Support Form.

The DSL is also responsible for:

- holding written records of concerns about a child even if there is no need to make an immediate referral
- ensuring that all written records are kept confidential and are separate from all other records for 10 years (or until their receipt is acknowledged by the child’s next school or college)
- liaising with other partners, agencies and professionals
- ensuring that they or the staff member attend case conferences, core groups, multi-agency planning meetings, contribute to assessments, and provide a report which has been shared with the parents
- ensuring a child with a current child protection plan who is absent without explanation is referred to their key workers’ Social Care Team
- providing an update to the Deputy CEO, CEO and Trustees of Surrey Care Trust, which may include detailing any changes to policy and procedures; any training undertaken by the DSL; the number and type of incidents/cases; and the number of children on the child protection register (anonymised)
- Ensuring DBS checks for the staff and volunteers (as documented in the DBS policy)

Concerns about potential abuse to an adult should be referred to Adult Social Care (0300 200 1005) in writing within 48 hours. Please see Appendix 6 for the information that needs to be supplied.

5.1 Managing and Sharing Information

All matters concerning safeguarding are confidential, but where staff or volunteers suspect (or are told) a safeguarding issue, they must not promise to ‘keep it a secret’, but say the information needs to be shared with their manager (or the DSL). The following practice should be observed at all times when a disclosure is made or when making a referral:

- remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately

³ *Emergency Duty Team (EDT), provides an emergency social care service for urgent situations which are out of normal office hours. If your call is not answered, please do leave a message and your contact details for someone to get back to you.*

EDT is available 5pm-9pm, Monday – Friday, Weekends 24 hours a day

Phone: 01483 517898

Email: edt.ssd@surreycc.gov.uk

The LADO service manages allegations against individuals who work or volunteer with children in Surrey. If you have a concern regarding someone who works with children, please contact the LADO on 0300 123 1650

Email: LADO@surreycc.gov.uk

NSPCC Helpline 0808 800 5000

- be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so
- seek advice if in any doubt, without disclosing the identity of the person where possible
- share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. Information can be shared without consent if, in your judgement, the lack of consent can be overridden in the public interest. Judgements must be based on the facts of the case
- consider the safety and well-being of the person and others who may be affected by their actions
- keep a record of information shared and the reasons for it. Record what information is shared, with whom and for what purpose. All adults have a responsibility to share information with other agencies, in instances of suspected abuse to children or vulnerable adults, to safeguard them, but we will ensure that the information that may be shared is necessary for the purpose of sharing it, and only with those people who need to have it. In accordance with the Information Sharing Policy published by HM Government, the Data Protection Act 1998 and General Data Protection Regulations are not a barrier to sharing information where a failure to do so would place a child at risk of harm. Ensure that the information is accurate and up to date, and is shared in a timely and secure process
- ensure only facts, not your interpretation of them, are recorded and shared with safeguarding professionals if appropriate.

6.0 SUPPORTING CHILDREN AND VULNERABLE ADULTS

We recognise that a child or vulnerable adult who is abused or witnesses violence may feel helpless and humiliated, may blame themselves and find it difficult to develop and maintain a sense of self worth.

If a child or vulnerable adult makes a disclosure then it is a matter that all staff or volunteers take seriously. In such circumstances staff and volunteers are to observe the following practice with a child who discloses:

- Listen
- Never promise any particular action or NOT to disclose any information shared
- Allow silence and/or allow children, young people and adults to be upset
- Reassure
- Explain what will happen next and that you will need to share this information
- Record the conversation in the child or adult's words
- Sign and date records
- Provide support
- Not make promises
- Do not ask leading questions (use open questions)
- Do not act upset, shocked or disgusted

- Do not jump to conclusions or display disbelief – provide reassurance that you are taking their disclosure seriously
- Staff must be mindful at all times that it is not the responsibility of the staff member to investigate allegations or to decide if the allegation is true or not. They should not therefore speak to witnesses or alleged abusers about the allegations.

6.1 Parents/Carers

It is good practice to be as open and honest as possible with parents/carers about any concerns. However, you must not discuss your concerns with parents/carers in the following circumstances:

- Where sexual abuse or exploitation is suspected
- Where organised or multiple abuse is suspected
- Where fabricated or induced illness is suspected
- Where female genital mutilation is a concern
- In cases of forced marriage
- Where contacting parents/carers would place a child/young person or others at immediate risk

6.2 Finding a Solution Together (FAST process)

Effective working together depends upon an open approach and honest relationships between agencies and a belief in genuine partnership working. Any disputes about the safety and well-being of a child should be resolved in a timely way with all agencies working together in the best interests of the child so that the welfare of the child remains paramount.

The partners recognise that complexity of need and range of intervention/support will not always fit into a simple formula that leads to ‘the right solution’. Often there may be no right or wrong answer and quite legitimately practitioners may exercise their professional judgment differently. It is also the case that exceptionally, the needs of some young people and families may not easily fit within a conventional application of thresholds. The purpose of the SSCP Finding a Solution Together (FaST process) is to create a transparent process that enables multi-agency practitioners to exercise their professional judgement and provide the best possible service in a timely and safe way.

It is of vital importance that children, young people and their families do not become entangled in professional disagreements. Neither should disputes detract from the focus on the child, delay effective decision making, nor lead to protracted disputes that negatively impact upon the child and/or family and on inter-agency relationships and working practice. In reaching resolution, it is essential that at all times disputes are approached in a considerate manner and one which both respects and seeks to understand the views and concerns of others from their experience and perspective when engaging with the young person/family.

7.0 SAFEGUARDING WHEN WORKING VIRTUALLY/REMOTELY/IN A PANDEMIC

SCT will act in accordance with the principles established in *Keeping Children Safe in Education 2019* and based on the strategic changes agreed by the Trust in relation to a different way of working for

many staff and programmes during a pandemic should the pandemic, or similar, result in remote working practices or isolation. This will allow us to be satisfied that any new policies and processes in response to COVID-19, or similar, are not weakening our approach to safeguarding or undermining our child protection policy. Surrey Care Trust will continue to provide a safe environment for learning, mentoring and support, including online.

7.1 Children and online safety away from Surrey Care Trust

Surrey Care Trust will ensure any use of online learning tools and systems is in line with privacy and data protection (GDPR requirements). The following principles, in conjunction with SCT policies such as IT and code of conduct, will be followed when delivering virtual lessons, counselling sessions and virtual mentoring or support, especially where webcams are involved:

- Staff, volunteers and children must wear suitable clothing
- Any computers should be used in appropriate areas, e.g. not in bedrooms; and the background should be blurred or a blank background
- A live class should be recorded so that if any issues were to arise, the video can be reviewed
- Language must be professional and appropriate, including family members in the background
- Staff must only use platforms provided by Surrey Care Trust to communicate with vulnerable children
- Staff should record the length, time, date and attendances of any sessions held.
- Any personal discussions in where personal data is being communicated, must be done so in private, without the presence of staff/volunteer family members.

7.2 Supporting children not in the STEPS Learning Centre during a pandemic

In the event that a child/vulnerable adult is not in the centre due to a pandemic, isolation or centre closure because of Covid-19/pandemic, Surrey Care Trust will ensure that a communication plan is in place for any child/young person where a DSL has identified vulnerability and possible social care support. The communication plan will consider and record all appropriate methods, including:

- Remote contact
- Phone contact
- Door-step visits where safe to do so
- Other individualised contact methods

All communications plans shall be revised continuously.

8.0 SUPPORTING STAFF

Surrey Care Trust recognise that staff or volunteers who may become involved with a child or adult who has suffered abuse, or appears likely to suffer abuse, may find the situation stressful and upsetting. Surrey Care Trust will support staff and volunteers in these instances through the support of their line manager and by providing the opportunity to talk through their anxieties with the DSL. The DSLs have the opportunity to discuss and review practice.

8.1 Allegations against staff or volunteers

Staff and volunteers should take care not to place themselves in a vulnerable position with a child, parent or vulnerable adult. Staff and volunteers will receive guidance about conduct and safe practice during their induction.

Regardless of the nature of allegations and who receives the allegation, the DSL must discuss the allegation with the Local Authority Designated Officer (LADO) within 24 hours (0300 123 1650). This must include allegations where the worker resigns. Settlement agreements are not acceptable in such circumstances and may put others at risk in the future.

Complaints procedures are separate to the allegations process and just because someone does not wish to make a complaint, this does not mean the allegation should not be considered and investigated. Unless the allegation is malicious, records will be kept for 10 years or until the individual, subject to investigation, retires; whichever is longer.

The LADO will give advice and discuss next steps. Advice will also be given to manage the discussion with the adult about the concern who may have harmed a child or vulnerable adult. The LADO will also discuss how to inform the child's parents or carers, how the employer safeguards children throughout any investigation and what they expect of you and other agencies involved – for instance whether the member of staff or volunteer should be suspended from work whilst an investigation is undertaken.

It is the responsibility of the DSL and Deputy CEO/CEO to make the decision as to whether to inform Social Services and/or the Police Child Protection Unit, depending on the nature of the allegation. In matters of allegations against staff or volunteers working in child protection, information must be provided to the local designated officer.

If the allegation is made concerning the DSL the Deputy Chief Executive of Surrey Care Trust must be notified without informing the DSL. The Deputy Chief Executive will ensure the LADO is contacted by her or another DSL, and then follow the SCT process for reporting and managing the allegation.

8.2 Confidentiality and Whistle Blowing

- Surrey Care Trust operates a confidentiality policy. However, under no circumstances will information be kept confidential that raises concern about the safety and welfare of a child or young person.
- Any staff or volunteers with concerns about anybody providing services to children and young people should report this to their line manager, safeguarding manager/CEO or trustee board member as appropriate. They will be fully supported throughout the process.
- All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children and young people in accordance with the Information Sharing Policy published by HM Government, adopted by the Children's Trust and endorsed by SSCP. The Data Protection Act 1998 and General data Protection Regulations are not a barrier to sharing information where a failure to do so would place a child at risk of harm.

All staff must be aware that they cannot promise a child that they will keep secrets/not disclose potentially harmful information.

All staff have a duty to report the unsafe practice of others in regard to the management of safeguarding. Whistle-blowing is an important aspect of safeguarding, whereby staff and volunteers are encouraged to share genuine concerns about a colleague's behaviour. In cases of whistle-blowing refer to the DSL who will then consult with the LADO. In cases of whistle-blowing in relation to a DSL, staff have a duty to report to the Deputy Chief Executive of Surrey Care Trust who will then consult with the LADO or arrange for another DSL to do so.

The Trust has a Whistle-blowing statement in the staff and volunteer handbooks and a whistleblowing policy.

8.3 Safer Recruitment Policy Statement

Surrey Care Trust will apply the Working Together to Safeguard Children 2018 and SSCP Guidelines using the framework for safer recruitment and employment practice.

This will apply to all staff and volunteers undertaking activities with children and young people including teaching, training or instruction, care or supervision, providing guidance or treatment, fostering and childcare. It could also include specific positions such as school governor, Director of children's social services, and any work carried out in a limited range of specific settings such as schools where children should always be able to build relationships of trust with the people working with them.

The purpose of safer recruitment is to ensure:

1. Applicants who may wish to harm adults at risk, children or young people are deterred from applying for jobs or volunteering opportunities.
2. Any unsuitable applicants are rejected by scrutinising applications and exploring potential areas for concern at interview.
3. Unsuitable appointments are not made by having at least one member of the interview panel trained in safer recruitment; carrying out all relevant pre-employment checks* and ensuring all new staff and volunteers are given an appropriate induction.
4. To identify and manage any identified risks.
5. Maintain a safe and vigilant culture.
6. Compliance with any activity that is class as 'regulated'.

Multi-agency training on safer recruitment is available through the Surrey Children's Services Academy: [Surrey Children's Services Academy \(SCSA\) - Surrey County Council \(surreycc.gov.uk\)](https://www.surreycc.gov.uk)

All new staff and volunteers who have direct contact with children or vulnerable adults are to have a DBS check before commencing employment. An enhanced DBS and barred list check is essential for any staff that deliver regulated activity, including the Family Centre and STEPS Learning centre. Any failure to disclose convictions may result in disciplinary action or dismissal. Any positive disclosures will be discussed with the Safeguarding Manager, CEO and/or trustees. All this information will be kept on the personnel file. The DBS number and date of processing will be held on a secure database.

A risk assessment will be completed if there is a positive DBS check sent back.

‘Regulated activity’ relating to children comprises:

- 1) Unsupervised activities: teach, train, instruct, care for or supervise children, or provide advice/guidance on wellbeing, or drive a vehicle only for children;
- 2) Work for a limited range of establishments (‘specified places’) with opportunity for contact: for example schools, children’s homes, family centres. Not work by supervised volunteers;
- 3) Relevant personal care, for example washing or dressing
- 4) Registered childminding and foster carers.

Work under 1) or 2) above is a regulated activity only if conducted regularly. ‘Regularly’ shall mean on a regular basis generally defined as ‘Carried out by the same person once a week or more or on 4 or more days in any 30 day period. It also includes any activity overnight (regardless of how often this occurs).’

Regulated activity does not include family arrangements and personal, non commercial arrangements. It also does not include work by ‘supervised’ volunteers. The employee who is ‘supervising’ must be someone in regular activity and be “reasonable in all the circumstances to ensure the protection of children£.

Further information and definitions can be found here:

[Department for Education \(publishing.service.gov.uk\)](http://publishing.service.gov.uk)

8.4 Physical intervention

Surrey Care Trust staff and volunteers must only ever use physical intervention as a last resort, when a child or vulnerable adult is endangering or at risk of endangering him/herself or others. At all times it must be the minimal force necessary to prevent injury to another person or to prevent an offence from being committed (In line with The Education and Inspections Act 2006).

Physical intervention of a nature that causes injury or distress may be considered under safeguarding or disciplinary procedures. Any use of physical intervention by staff or volunteers should be recorded as an incident and signed by a witness.

8.5 E-safety

Surrey Care Trust has separate policies in relation to the use of mobile phones, internet and social media their associated risks for safeguarding children See also, section 5 in relation to online safety and measures for remote working/meetings/learning.

8.6 Anti-bullying

Surrey Care Trust has separate policies concerning bullying/harassment.

9.0 RACISM AND RADICALISATION

9.1 Racist incidents

Our Equality and Diversity policy covers all the protected characteristics of the Equality Act 2010. Staff are responsible for challenging any incidents of unfair discrimination, or racial, sexual or other stereotyping.

9.2 Radicalisation and Extremism – PREVENT DUTY

Since 2010 when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism.

From 1 July 2015 all schools, registered early years childcare providers and registered later years childcare providers are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism – the ‘Prevent Duty’.

The Trust supports the Prevent duty through risk assessment, working with its partners, staff training and information, promoting fundamental British values and communication to the public.

This involves:

- Responding to the ideological challenge of terrorism
- Preventing people from being drawn into terrorism
- Working with sectors and institutions where there are risks of radicalisation.
- Responding to any concerns or suspicious activity

Within the Family Centre and Learning Centre, children are encouraged to see their role in the bigger picture, that their views count, value each other’s views and talk about their feelings.

Where there are concerns that children or young adults are becoming radicalised and involved in an organisation which could harm the student and the community, staff and volunteers are encouraged to remain vigilant and report to their manager or the DSL any suspicious activity. This might include someone who:

- Is behaving differently for no obvious reason
- Travels for long periods of time but is vague about where they are going
- Is buying or storing large amounts of chemicals for no obvious reason
- Visits or sends out links to extremist internet sites
- Is recording and documenting information in a crowded location
- And includes activity at a property that doesn’t fit day to day life

The age and profile of our beneficiaries make it crucial to be involved in the PREVENT Strategy and prevent people being drawn into terrorism by:

- Promoting and reinforcing shared values
- Breaking down segregation among different student communities by supporting inter-faith and inter-cultural understanding
- Ensuring student safety and providing an environment that is free from bullying, harassment and discrimination
- Supporting students who may be at risk and providing appropriate advice and guidance
- Ensuring students and staff are aware of their roles and responsibilities in preventing violent and non-violent extremism

Where there are concerns in regard to radicalisation and terrorism staff will refer to the DSL immediately who will share information with the Local Authority through the Multi Agency Information Sharing Protocol (MAISP) and telephone the appropriate RAIS team.

If an immediate risk is identified contact the Police on 101 or 999, the Anti-Terrorist Hotline: **0800 789 321** or Crime stoppers: **0800 555 111**.

The ‘Channel’ programme may be appropriate for anyone who is vulnerable to being drawn into any form of terrorism. ‘Channel’ is about ensuring that vulnerable children and adults of any faith, ethnicity or background receive support before their vulnerabilities are exploited by those that would want them to embrace terrorism, and before they become involved in criminal terrorist related activity.

9.3 FGM (Female Genital Mutilation)

Female Genital Mutilation is concerned with procedures that intentionally alter or injure the female genital organs for non-medical reasons. Female Genital Mutilation is internationally recognised as a violation of human rights of girls and women. It is illegal in most countries including the UK.

Under Government and SSCB (Surrey Safeguarding Children Board) Guidelines all staff working with children, young people and vulnerable adults have a statutory duty to protect women and girls from FGM and therefore must be aware of the signs, symptoms and other indicators of female genital mutilation.

The following circumstances may highlight that FGM may occur:

- Child talking about getting ready for a special ceremony
- Family taking a long trip
- Child’s family being from one of the ‘at risk’ communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non- African communities including Yemeni, Afghanistan, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child’s sibling has undergone FGM
- Child talks about going abroad to be ‘cut’ or to prepare for marriage.

The following signs may indicate that a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to keep still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinal tract infection
- Disclosure

The ‘one chance’ rule

As with Forced Marriage there is the 'One Chance' Rule that we take action without delay and call the Single Point of Access (C-SPA) on 0300 470 9100. Please see appendix 1 for more information about FGM.

10.0 PREVENTION OF HARM

The Trust's services aim to play a significant part in prevention of harm (or further harm) to children and vulnerable adults. We will therefore continue to provide environments where beneficiaries feel secure in being able to talk about their fears or potential harm and are listened to, knowing they will be taken seriously by trusted adults.

10.1 Domestic Abuse

Domestic abuse represents one quarter of all violent crime. It is actual or threatened physical, emotional, psychological or sexual abuse, involving the use of power and control by one person over another. It occurs regardless of race, ethnicity, gender, sexuality, age, religion, mental or physical ability and may involve other types of abuse.

10.2 Forced marriage (FM)

This is NOT the same as arranged marriage. It is a human rights abuse and falls within the Crown Prosecution Service's definition of domestic violence. Both men and women can be at risk in affected ethnic groups.

10.3 Child Sexual Exploitation

Child sexual exploitation is a major child protection issue across the UK and in Surrey. Hidden from view and going unnoticed, vulnerable young girls and boys are groomed and then abused, leaving them traumatised and scarred for life. Sexual exploitation affects thousands of children and young people every year and may not actually involve sex. It could be touching, kissing, or someone asking the young person to send sexual photos to their phone or post them online. Whatever it is, if it does not feel right, it probably isn't – and anyone at risk should rely on their gut instinct to tell them.

By knowing the tell-tale signs, we can all play an important role in reducing that number. Look out for:

- unexplained gifts
- poor self image, eating disorders, self harm changes in mood
- going missing
- regularly coming home late
- being secretive about where they are going
- lack of interest in activities and hobbies
- unexplained absences from school
- unexplained money
- new bank cards
- secretive about mobile phone, late night excessive phone/internet activity, has more than one mobile phone
- reduced contact with family and isolated from friends.
- Associating with unknown adults
- Sexually transmitted infections

- Experimenting with drugs and alcohol
- Meeting people through social media/networking sites

If you are concerned that a child may be a victim of sexual exploitation, or at risk, please speak to the DSL. The DSL will refer to the Single Point of Access (SPA) for advice. You will need to complete a CSE screening tool with the child and other professionals to send to the area hub (see p 5). This will give the level of risk to the child.

If you suspect anyone is in immediate danger, call the Police on 999. If a child/young person is at risk of significant harm, including from CSE, refer immediately to Surrey Children’s Service.

For more indicators and information see Appendix 1

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This Policy will be reviewed regularly by Surrey Care Trust and its Trustees. The process for reviewing policies will take account of the following:

- Reviews of Board meeting minutes and Safeguarding Committee meetings
- Reviews of Team meetings and supervision of staff
- Risk assessment reviews
- Updates to safeguarding and government guidance
- Reviews of any parent feedback and consultations

The Policy may also be read in conjunction with other SCT policies and procedures. The Safeguarding Committee will also review, amend and improve policy and practice where applicable.

APPENDIX 1 – INDICATORS OF ABUSE

Physical abuse

Physical signs

- Bruising on parts of the body where accidental injury is unlikely
- Injuries – unexplained, poor explanations or untreated
- Finger marks or burns
- Scalds – especially with upward splash marks, or rings where made to sit or stand in very hot water
- Broken bones (especially in under 2s)

Bruising in Children who are Not Independently Mobile

The following information provides all staff with knowledge and awareness for the management of children who are Not Independently Mobile (NIM) who present with bruising or suspicious marks. Children with disabilities who are not mobile should also be considered within this guidance (SSCB).

Definition

- Bruising is the most common presented feature of physical abuse in children – the younger a child, the greater the risk that bruising is not accidental.
- Any bruising or mark that might be bruising should be taken as a matter for inquiry and concern.
- Bruising in a child not independently mobile (any child who is not yet crawling, bottom shuffling, pulling to stand, cruising or walking independently; includes all children under 6 months even if they are rolling or children with significant disabilities resulting in immobility) should raise suspicion of maltreatment and should result in an immediate referral to Children’s Services.
- It is the responsibility of the examining paediatrician to decide whether bruising is consistent with an innocent cause or not, even if a plausible explanation is given by the carer.

Immediate response

Any child who is found to be **seriously ill or injured, or in need of urgent treatment**, should be referred immediately to hospital before referral to Children’s Services. **All other cases should be referred immediately to the Single Point of Access.**

Referrals

Where a decision has been made to refer to the Single Point of Access the DSL must be made aware or observe the bruising. It is recommended that a discussion takes place with a senior colleague.

Children must only be examined by a medical practitioner. Referrals should be made to the Single Point of Access (0300 470 9100) within 48 hours with a written referral (using the Request for Support Form) and/or via the main Police switch board (101/999).

Behavioural signs

- Aggressive behaviour and temper
- Child who shows fear of going home or runs away
- Child flinches when approached/touched
- Reluctance to get undressed for sporting activities
- Covering arms/legs even when hot
- Depression
- Overly compliant to parents/carers

Sexual abuse

Physical signs

- Pain, itching, bruising or bleeding in genital or anal areas
- Any sexually transmitted infection (STI)
- Recurrent genital discharge or urinary tract infections without apparent cause
- Stomach pains
- Discomfort when child is walking or sitting down
- Pregnancy

Behavioural signs

- Sudden unexplained changes in behaviour
- Apparent fear of someone
- Being sexually coercive with other children
- Nightmares or bedwetting
- Self-harm, self-mutilation, suicide attempts, abuse of drugs/alcohol, eating problems (anorexia, bulimia, overeating)
- Sexualised behaviour or knowledge, drawings or language
- Running away from home

Emotional abuse

- Failure to grow or to thrive
- Sudden speech disorders
- Delayed development, either physical or emotional

Behavioural signs

- Compulsive nervous behaviours such as hair twisting or rocking
- An unwillingness or inability to play
- Excessive fear of making mistakes
- Self-harm or mutilation
- Excessive defence towards others, especially adults
- Excessive lack of confidence, and need for approval, attention and affection
- Inability to cope with praise

Neglect

Physical signs

- Dirty bedroom, no sheets on bed, inappropriate sleeping place
- Being unkempt, dirty or smelly
- Loss of weight or constantly being underweight
- Dressed inappropriately for the weather conditions
- Learning disabilities due to poor brain development
- Untreated medical conditions

Behavioural signs

- Being tired all the time
- Frequently missing school or being late
- Failing to keep medical appointments
- Reporting that the baby never cries
- Psycho-social development, depression, psychiatric illnesses and personality disorders
- Being left unsupervised regularly

Child Sexual Exploitation

People who exploit children and young people in this way may:

- threaten to end the relationship if the young person doesn't have sex
- ask the young person to (or make them) have sex with other people
- expect sex in return for food or a place to stay
- share drugs or alcohol with the young person in return for sexual acts
- threaten to stop being friends if the young person doesn't perform sexual 'dares'
- give the young person gifts or money in return for sexual acts
- ask the young person to take sexual photos of themselves and share them online or by text
- threaten to humiliate or share sexual images of the young person if they don't carry out more sexual acts
- be violent towards the young person
- threaten to harm the young person's family/loved ones.

Link to Surrey Safeguarding Children Board's CSE screening tool:

<http://www.surreyscb.org.uk/wp-content/uploads/2016/06/SSCB-CSE-Screening-Tool-May-16.pdf>

This form allows you to explore some of the vulnerabilities and indicators present in a child or young person that you know might be at risk of or experiencing sexual exploitation. It is intended to help you think about what the risk might be to the young person and about what to do with the information you have.

For further information see: [www.barnardos.org.uk/what we do/our work/cse-home](http://www.barnardos.org.uk/what_we_do/our_work/cse-home)

Female Genital Mutilation, FGM

Under Government and SSCB (Surrey Safeguarding Children Board) Guidelines all Staff must be aware of the signs, symptoms and other indicators of female genital mutilation.

Female Genital Mutilation is concerned with procedures that intentionally alter or injure the female genital organs for non-medical reasons. There are four types of procedure:

- Clitoridectomy – partial or total removal of clitoris
- Excision – partial or total removal of clitoris and labia minora
- Infibulation entrance to vagina narrowed by repositioning the inner/outer labia
- All other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area

It is stated that the reasons given for these procedures are:

- FGM brings status or respect to the girl – social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman/rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom or tradition
- Helps a girl to be clean/hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Legal position

Female Genital Mutilation is internationally recognised as a violation of human rights of girls and women. It is illegal in most countries including the UK.

The following circumstances may highlight that FGM may occur:

- Child talking about getting ready for a special ceremony
- Family taking a long trip
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non- African communities including Yemeni, Afghanistan, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM

APPENDIX 2 - PREVENT

Further information about Prevent:

www.gov.uk/report-suspicious-activity-to-mi5

www.gov.uk/report-terrorism

APPENDIX 3 – E-SAFETY

Link to Surrey e-safety website: <http://www.surreyesafety.co.uk/>

APPENDIX 4 – CHILD PROTECTION

Further advice on child protection is available from:

www.nspcc.org.uk/

www.childline.org.uk/pages/home.aspx

www.thinkuknow.co.uk

www.anti-bullyingalliance.co.uk

www.beatbullying.org.uk

APPENDIX 5 – REFERRAL PROCESS (VULNERABLE ADULTS)

REFERRAL PROCESS FOR VULNERABLE ADULTS, WHERE ABUSE IS SUSPECTED

- Ensure their immediate safety
- Assess any risk to others
- Provide support and reassurance
- Explain that you will need to take additional advice and that this might mean making a formal referral to adult social care
- Maintain the underpinning principles related to safeguarding adults
- Refer the case to adult social care **within 48 hours** including details of the adult alleged to have been harmed (name, contact details, DOB, gender, ethnicity, principal language).

Policy Review

This policy will be reviewed and updated in line with our ISO 2015 guidelines in order to reflect best practice in information management, security and control and to ensure compliance with most recent Data Protection legislation

Last review date: July 2023 Next review date: July 2024