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**E.A.S.E (Empowering Action & Social Esteem) Ltd**

**POLICIES AND PROCEDURES**

**FOR**

**SAFEGUARDING & PROTECTING CHILDREN,  
YOUNG PEOPLE AND VULNERABLE ADULTS**

Updated June 2024  
Working Together to Safeguard Children December 2023  
Updated names of LADO and Assistant Director

Date of approval by Trustees: 19<sup>th</sup> June 2024

Policy Review date: 19<sup>th</sup> June 2025

Signed: Sharon Ali, Safeguarding Lead – Board of Trustees

A handwritten signature in black ink, appearing to read 'S.V.A.', is written over a horizontal line.

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## Key contacts

Immediate help if you have a concern about the welfare or safety of a child:

Call **Ealing Children's Integrated Response Service (ECIRS)** on:

📞 **020 8825 8000** (Mon to Fri, 9am - 5pm)

Out of hours call the Emergency Duty Team (EDT) on the same number

If it is an emergency call the Police on 999

If you are in need of advice or are unsure about whether to make a referral to ECIRS you can contact:

**ECIRS Professional Consultation Line** on

📞 **020 8825 5236** (Mon to Fri, 9am - 5pm)

**Ealing Local Authority Designated Officer (LADO) for Allegations Against Staff and Volunteers (ASV)** on:

📞 **020 8825 8930** or [asv@ealing.gov.uk](mailto:asv@ealing.gov.uk)

## **1. Introduction**

This policy outlines EASE's approach to safeguarding children, young people and vulnerable adults (for the purposes of this policy children are under the age of 11, young people are 11-17 years old and vulnerable adults are 18-25 years old).

This policy is written in accordance with the:

- The Children's Act 1989 and 2004
- The Care Act 2014
- The Safeguarding Disabled Children's Act 2009
- Working Together to Safeguarding Children 2018 and 2023
- The Safeguarding Vulnerable Groups Act 2006

EASE also adopts and follows the procedures set out in Ealing's Child Protection Policies and Procedures (Yellow Book 2022, the London Child Protection Procedures; and (as applicable), The Early Years Foundation Stage, and the Department for Education's Keeping Children Safe in Education September 2018 updated and supplementary document: Regulated Activity in Relation to Children Scope (DBS guidance).

This policy will be reviewed annually, added to, or modified from time to time and may be supplemented in appropriate cases by further statements related to the work of EASE. Copies and subsequent amendments will be made available to all employees.

EASE recognise their legal duty to safeguard children, including their legal duty to refer concerns of child abuse or neglect to the appropriate investigating agency, and also recognise that this duty of care extends to protecting children from harm and neglect outside of EASE.

This Safeguarding Policy sets out the organisation and arrangements for achieving this aim including the detailed responsibilities for key staff.

The definition of a vulnerable adult is a person who is or may need community care services by reason of mental or other disability, age or illness, and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

## **2. Policy Objectives**

The objectives of this policy are to:

- Raise the awareness of everyone working at children and youth services of their duty to act immediately in identifying and reporting concerns about children, young people, vulnerable adults/families.
- Clarify roles and responsibilities in relation to safeguarding children, young people and vulnerable adults
- Clarify safeguarding roles and responsibilities for different organisations that deliver services at Children and Youth services.
- Set out the procedures for reporting initial concerns and making referrals.
- Set out the procedures for the ongoing monitoring of children, young people and vulnerable adults identified to be at risk.
- Set out the procedures for reporting to and attending child protection meetings.
- Set out the procedures for safer recruitment including volunteers
- Set out the procedures for managing allegations against staff and volunteers

### **3. Policy Statement**

EASE trustees, staff, volunteers and contractors have a legal duty to safeguard children, young people and vulnerable adults, regardless of age, disability, gender, reassignment, race, religion or belief, sex, or sexual orientation and provide equal protection from harm. This is including a duty to refer concerns regarding the safety of a child, young person or vulnerable adult to the appropriate service. This duty of care includes how EASE works to safeguarding and child protection policies and procedures which are available for parents and families to see on request.

#### **Definitions:**

**Safeguarding and promoting the welfare of children, young people and vulnerable adults** is the process of:

- Protecting children, young people and vulnerable adults from maltreatment
- Preventing impairment of children, young people and vulnerable adult's health or development
- Ensuring that children, young people and vulnerable adults are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children, young people and vulnerable adults to have the best life chances

**Child protection:** is the process of protecting children, young people and vulnerable adults identified as either suffering, or at risk of suffering, significant harm as a result of abuse or neglect.

#### **Keeping children, young people and vulnerable adults safe is at the centre of all we do, we will:**

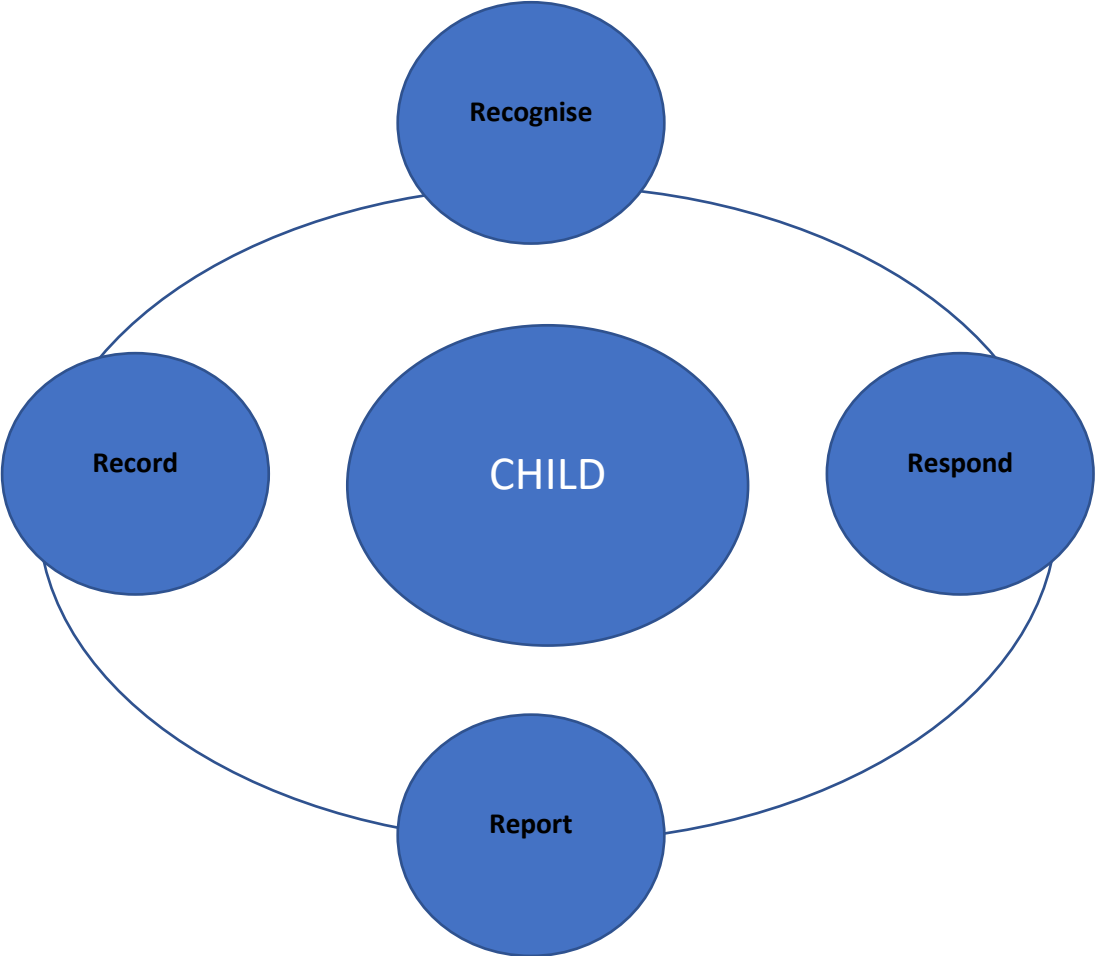
- Provide a safe place for children, young people, vulnerable adults and their families
- Listen to children, young people, vulnerable adults and families
- Value and treat children, young people and vulnerable adults with respect
- Support children, young people, vulnerable adults and families to develop skills to keep themselves safe
- Provide a named person at EASE who has overall responsibility for safeguarding and protecting children, young people and vulnerable adults.
- Ensure parents know the name and contact details of EASE's Nominated Safeguarding Person.
- Ensure all staff, contractors and volunteers have appropriate checks so they can work at the centre.
- Train all staff on local policy and procedures for safeguarding and protecting children
- Follow up concerns raised about staff, students or volunteers working in the centre which will affect the safety of children.
- Raising the profile of Safeguarding and Child Protection, including the need for constant vigilance amongst staff and adults working at EASE
- Sharing the safeguarding and information with parents on admission and by publicising these policies
- Establishing and implementing effective procedures for identifying, reporting, and monitoring all concerns about children/families
- Identifying children who may benefit from Early Help. Early Help providing support as soon as a problem emerges at any point in a child, young person or vulnerable adult's life

- Ensuring that staff are aware that children with special educational needs and disabilities (SEND) can face additional safeguarding risks and reduce the barriers that can exist when recognising abuse and neglect in this group of children and young people.
- Establishing and implementing effective working arrangements to support children, young people and vulnerable adults in accordance with agreed child protection/child in need plans/SAFE plans and EHAP
- Providing a learning environment, which promotes the development of the attitudes and skills children, young people and vulnerable adults need to keep safe
- Promoting e-safety for staff, parents and children, young people and vulnerable adults
- Establishing and implementing the recommended procedures for safer recruitment as they apply to staff, students and volunteers
- Ongoing safeguarding training for all colleagues appropriate to their role and level of responsibility
- Act on all safeguarding concerns immediately
- Discuss concerns with parents, before making a referral regarding the safety of a child unless there is a risk of further harm to the child.

Nominated Safeguarding Person	Contact Details
<b>Michelle Bailey</b>	<b>02085756139 or 07830 338969</b>

Deputy Nominated Safeguarding Person	Contact Details
<b>Benna Brophy</b>	<b>020 85756139 or 07903526325</b>

The 4 r's



<p><b>Recognise</b></p> <ul style="list-style-type: none"> <li>• Be vigilant</li> <li>• Know the children, young people and vulnerable adults you work with</li> <li>• Be familiar with the types and indicators of abuse</li> </ul>	<p><b>Respond</b></p> <ul style="list-style-type: none"> <li>• Never ignore concerns, signs or reports related to a child, young person or vulnerable adults' safety and wellbeing</li> <li>• Do not delay your response</li> </ul>
<p><b>Report</b></p> <ul style="list-style-type: none"> <li>• Always report concerns to the DSL (NSP nominated safeguarding lead) or their deputy</li> <li>• Ensure every member of staff/volunteer is aware of who the DSL and Deputy DSL are</li> <li>• All cases where there is a concern about significant harm or risk must be referred to Children's Social Care via Ealing Children's Integrated Response Service (ECIRS) on <b>020 8825 8000</b>). This will usually be done by the DSL, but all staff and volunteers should be familiar with the process too.</li> </ul>	<p><b>Record</b></p> <ul style="list-style-type: none"> <li>• Always make a record of what happened – the incident or concern, the exact words of the child, young person or vulnerable adult where possible and any immediate actions taken</li> <li>• Use EASE's recording log</li> <li>• Don't delay it – record information as soon as possible.</li> </ul>

#### **4. Roles and Responsibilities**

##### **Trustees**

The Charity Commission is clear that Trustees have primary responsibility for safeguarding in their charity. In fulfilling their duty of care to EASE, trustees need to take steps to safeguard and take responsibility for the children and young people with whom EASE works.

This means:

- acting in their best interests
- taking all reasonable steps to prevent any harm to them
- assessing and managing risk
- putting safeguarding policies and procedures in place
- undertaking ongoing monitoring and reviewing to ensure that safeguards are being implemented and are effective
- responding appropriately to allegations of abuse

Within EASE the Trustee with responsibility for Safeguarding will also be responsible for informing the Charity Commission of any serious incidents in line with the Charity Commission's Reporting Serious Incidents Policy.

The Trustee responsible for Safeguarding is: Sharon Ali, email: [Sharonvali@icloud.com](mailto:Sharonvali@icloud.com), Telephone no: 07771614458.

The Trustees are also responsible for reviewing major risks from the risk register at every Board meeting and reviewing the organisational risks twice a year.

##### **Designated Safeguarding Lead (Nominated Safeguarding Person) and Deputy NSP**

Within EASE there must be one NSP and one Deputy NSP, with the lead NSP being the overall manager or designated member of staff for EASE.

*The role of the Nominated Safeguarding Person (NSP) and Deputy NSP is to:*

1. Take the lead in safeguarding all children, young people and vulnerable adults accessing services.
2. Ensure a named NSP and deputy is in place.
3. Ensure that all staff know how to contact the NSP and Deputy NSP.
4. Ensure that all staff and volunteers are inducted and have read the policy and Procedures for Safeguarding and Protecting Children, Young People and Vulnerable Adults, and maintains a record of this.
5. Support the staff from LBE and Early Help as appropriate, act as a lead professional, liaise with other agencies undertaken and Early Help Assessment and Plan (EHAP) with the parents/carers consent.
6. Keep up to date with new initiatives and local and national requirements including Child Sexual Exploitation (CSE), Female Genital Mutilation (FGM), E-Safety and Disclosure by Association, Prevention of Extremism, Knife Crime etc.
7. Ensure that all staff have regular up to date introduction and refresher Safeguarding and Child Protection training (within two years).
8. Keep their local knowledge of Safeguarding and Child Protection policy and procedures current in line with local guidance (Yellow Book 2022) and Government policy (London Child Protection procedures and guidance)

9. Provide advice to staff and volunteers about how to take a concern or complaint forward and keep a record of all communications, date, time and who with (including role/agency) and when this will be reviewed and by whom. Record all reviews.
10. Liaise with local statutory agencies to seek any further advice and guidance as needed and record this.
11. Keep securely following Data Protection Act 2018 protocols (GDPR) all records of any concerns, discussions, decisions and referrals made, these records must be signed and dated.
12. Keep accurate records for all Children and Young People on Children in Need (CIN), Child Protection and SAFE Plans. Records should include attendance/punctuality monitoring and any other tasks set by the core group.
13. Contribute to and attend case conferences, core groups or strategy meetings as required.
14. Hold an overview of cases involving social care.
15. Participate in Locality Early Help meetings, which should include an overview of cases involving social care input know to EASE.
16. Ensure all staff are inducted and understand their role in local Safeguarding and Child Protection policies and procedures in line with Ealing's Yellow Book 2022.
17. Understand their role and responsibility in identifying and addressing concerns around extremism and radicalisation in accordance with Prevent Duty Guidance for England and Wales 2015<sup>1</sup>.

The Nominated Safeguarding Person (NSP) is responsible for:

**The NSP and Deputy NSP within EASE will be required once made aware of a concern to follow the procedures below. Once actions have been taken an NSP should ensure that the overarching NSP of EASE is aware of the concerns and the actions taken.**

1. Reporting immediate concerns, where the child, young person or vulnerable adult is considered to be at imminent risk of harm to the police by dialling **999**.
2. Reporting urgent concerns, including concerns relating to Prevent Duty, immediately to Ealing's Children and Young People's Integrated Response Service (ECIRS) :  
Tel: **(020) 8825 8000**
3. Following up your telephone contact with ECIRS in writing. Information can be sent securely via Egress Email: [ecirs@ealing.gov.uk](mailto:ecirs@ealing.gov.uk). If you cannot initiate an Egress email please ask the ECIRS worker to send you a secure email that you can reply to with your attachments.
4. Taking advice from the local authority Child Protection Advisors or ECIRS professional consultation line, if unsure whether to make a referral, Child Protection Admin: Tel: **020 8825 8930** (CPA) or ECIRS consultation line **0208825 5236**
5. Following the completion of reporting your concerns please notify Isha Dhody Children's Centre Strategic Lead in their absence Sally Osmond Children's Centre Lead and Childcare Manager for Children in Need
6. Discussing concerns with parents, before making referral unless there is a risk of further harm to the child or young person.
7. All allegations made against staff, volunteers, young people or trustees must be reported:
  - a. To the Designated Officer (LADO) Natalie Cernuda Tel: **07890940241** Email: [cernudan@ealing.gov.uk](mailto:cernudan@ealing.gov.uk) and [ASV@ealing.gov.uk](mailto:ASV@ealing.gov.uk) immediately or a nominated



person in her absence will support the DSL in following through appropriate procedures and actions. **Follow point 5 above.**

- b. Follow guidance on notifying OFSTED
  - c. And if the allegation is against the head/manager/proprietor this must be reported immediately to the LADO as above
8. Ensuring information is recorded and appropriate records maintained and stored securely
  9. Ensuring records and information are shared with appropriate professionals, in line with information sharing policy.
  10. Managing the monitoring of attendance, development and wellbeing of Children and Young People subject to Child Protection or Children and Young People in Need plans.
  11. EASE's NSPs will provide supervision and guidance to staff working with Children and Young People subject to Child Protection or Children and Young People in Need plans
  12. Ensuring that the EASE children, young people and vulnerable adults safeguarding and protecting policies and procedures for safeguarding are known and adhered to by colleagues.
  13. Identifying and addressing deficiencies in the internal safeguarding procedures as they arise and ensuring that procedures are reviewed if required.
  14. Ensuring the appropriate person attends and contributes to case conferences and core group meetings using the strengthening families case conference report format (appendices)

**The staff, volunteers and other adults working with the children are responsible for:**

1. Actively protecting the children, young people and vulnerable adults they work with, including challenging parents in the inappropriate handling of their child's behaviour e.g. smacking or where parents are suspected to be under the influence of alcohol or drugs (if it is judged safe to do so).
  2. Following EASE's procedures.
  3. Immediately reporting and recording causes for concern to the NSP or Deputy. Taking the concern forward immediately in the event of the NSP or Deputy's absence (to the Local Authority).
  4. Understand their duty to have "due regard to the need to prevent people from being drawn into terrorism<sup>2</sup>" by being able to recognize areas of concern in relation to Prevent and to report these concerns on to the NSP or Deputy.
  5. Providing written records stating the names of those involved i.e. children, parents, staff and date and time concerns were noted, reporting exactly what was seen and heard, this should be recorded as early as possible.
  6. Reporting any concerns about staff (Including Whistleblowing)
  7. To write reports as required for case conferences and core group meetings. These must be shared with parents prior to meeting
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8. Attending case conferences and core group meetings when asked to do so (staff will be given support in this).
9. Reporting “near misses” where a child, young person or vulnerable adult could have potentially been at risk to ensure steps can be taken to avoid an incident occurring.
10. All staff must be aware of their role in identifying and reporting children, young people or vulnerable adult who under the law would be considered to be privately fostered and staff must:
  - a. ensure that they understand the definition of private fostering
  - b. inform parents/carers of their legal requirement to contact the Council where there are thought to be private fostering arrangements
  - c. notify the organisations NSP and report to ECIRS by phone 020 8825 8000 and follow up by secure Email (Egress): [ecirs@ealing.gov.uk](mailto:ecirs@ealing.gov.uk)

## **5. Identifying, reporting, referring and monitoring concerns**

Staff and volunteers must be as objective as possible in observing and reporting concerns, writing down exactly what they see and hear, and keeping this distinct from their opinions and beliefs. Staff must also act sensitively at all times with the child and ensure only to ask non-leading questions e.g. ‘How did you get the bruise?’ **not** ‘Did daddy/mummy hit you?’ It is good practice to have another member of staff within the vicinity to witness conversation.

- EASE’s Nominated Safeguarding Person (NSP & Deputy) must be informed at all times if there is a safeguarding concern within EASE.
- Professionals delivering services at EASE from an independent organisation must inform the NSP/Deputy if they have any safeguarding concerns relating to Children, Young People or Vulnerable Adult using the services.

If a safeguarding concern is raised by a visiting member of staff about a child or young person who is receiving a service that is delivered by the lead organisation for EASE, EASE’s Nominated Safeguarding Person/Deputy (NSP) must be informed and take forward the complaint or concern. EASE’s NSP or Deputy must inform the NSP of the other organisation of this concern and the actions being taken as long as these do not relate to the other organisation itself. EASE’s NSP/Deputy must enter the details of their information in the flow chart and display this prominently within the setting they are delivering. They should also ensure that all staff are aware of these reporting responsibilities

If a safeguarding concern is raised by a member of staff about a child, young person or vulnerable adult that is receiving a service being delivered solely by the other organisation and the DSL for that service or organisation must take forward the complaint or concern.

**Appendix 1 flowchart: process for dealing with concerns**

**Appendix 2 flowchart: allegations against staff or volunteers.**

**Procedures for raising concerns:**

When raising a concern, the following procedures will be followed:

1. Staff, and volunteers, who have concerns about any child, young person or vulnerable adult's wellbeing or safety or any parent/carer's behaviour, must record their concerns, using the Safeguarding Issue Log (**Appendix 3**) noting the:
  - a. Date and time
  - b. What they saw and heard,
  - c. Who else was involved, and
  - d. Share this immediately with The Nominated Safeguarding Person (NSP).
2. All notes must be signed and dated by the person making the report.
3. In order to make the process objective and maintain confidentiality, concerns should not be discussed with colleagues at this stage - the NSP/Deputy will decide whether, when and how best to consult colleagues.
4. The NSP/Deputy will draw together the immediate evidence/concerns about the young person/family to inform the decision to make a referral. This should not delay the process of a making a referral.
5. In cases where threshold is not met for referral the individual with concerns or the DSL must keep a written record of concern and monitor the situation and consider early help services ie. EHAP, Early Start referral
6. If further concerns are observed or the situation does not improve for the child, young person or vulnerable adult the individual concerns must press for reconsideration around referral. **Note in circumstances such as an emergency or genuine concern that the appropriate action has not been taken anybody can make a referral to ECIRS.**

**When making a referral, the following procedures will be followed.**

1. The initial contact with parent/s must be well planned to ensure the child, young person or vulnerable adults' welfare and parent/s understanding and cooperation. Parents will normally be told of the referral unless this puts the child at risk, or in the case of suspected sexual abuse.
2. Prepare a chronology of significant events using the Ealing Children and Young People's Services-Interagency Referral Form (Appendix 4). **Note: Although this is required there must be no delay in making a referral if this information is not ready to hand.**
3. **Phone ECIRS: Tel: (020) 8825 8000** and discuss concerns for follow up information Email: [ecirs@ealing.gov.uk](mailto:ecirs@ealing.gov.uk). **Note: If the child, young person or vulnerable adult lives in another Borough, then the Social Services in that local authority should be contacted. Never leave a message on an answer machine when making a safeguarding referral, always make sure you speak to someone and record the name of the person who you have made the referral to.**
4. If you have made the decision not to inform the parents of the referral you must speak to a Social Worker in order to plan who will contact parent/s and when.
5. If you are not contacted by a Social Worker by the time the young person is due to go home, **phone ECIRS again.** You should phone the police if the young person is about to go home and you are concerned that they are at immediate risk of significant harm.
6. At the end of the referral discussion the referrer and ECIRS should be clear about proposed action, timescales and who will be taking action, or that no further action will be taken.
7. All referrals from professionals should be confirmed in writing, by the referrer, within 48 hours.
8. If the referrer has not received an acknowledgement of the referral within three working days, they must contact ECIRS again.

9. Where there is to be no further action by Children and Young People's Services, feedback should be provided by Children and Young People's Services to the referrer about the outcome of this stage of the referral.

#### **Procedures for monitoring children, young people or vulnerable adults thought to be at risk.**

When monitoring a child thought or known to be at risk, the following procedures will be followed:

1. Written records of concern/incidents must be kept even if there is no immediate plan for a referral.
2. The Nominated Safeguarding Person (NSP/Deputy) will inform the key person of their responsibility to keep and maintain record of information about the child.
3. Consider if the Early Help Services would reduce concern, and with parental agreement instigate an EHAP Early Start team for family support.
4. The key person is responsible for maintaining records of wellbeing and progress. When levels of concern are high or a child is subject to a Child Protection or Child in Need plan, daily records will be needed for detailed monitoring of the child's emotional wellbeing; relationships; physical wellbeing; play; toileting issues etc.
5. Aspects of a child, young person or vulnerable adults' wellbeing and progress are discussed at team meetings when relevant to obtain feedback from all colleagues, and to plan future action as a team. These plans must be recorded and reviewed.
6. The NSP/Deputy must maintain a record of telephone and other relevant contacts with outside agencies, staff, and parents/carers in the child's file.
7. Children and Young People's files are stored in a locked filing cabinet in a lockable room.

#### **Procedures for reporting to and attending review meetings**

When reporting to and attending review meetings, the following procedures will be followed:

1. The Nominated Safeguarding Person (NSP/Deputy) notifies Children and Young People's Services immediately of any concerns or unauthorised absences involving Looked After Children and Young People and Children and Young People subject to Child Protection or Child in Need plans and records it on the young person's file.
2. The NSP provide reports for and attend case conferences, core group meetings, and professionals' meetings as required.

### **6. Whistleblowing**

It is important that any fraud, misconduct or wrongdoing by staff, volunteers or others working on behalf of EASE is reported and properly dealt with. We therefore require all individuals to raise any concerns that they may have about the conduct of others in EASE or the way in which the organisation is run. This policy sets out the way in which individuals may raise any concerns that they have and how those concerns will be dealt with.

#### **Background**

The Public Interest Disclosure Act 1998 amended the Employment Rights Act 1996 to provide protection for workers who raise legitimate concerns about specified matters in the public interest. These are called "qualifying disclosures". A qualifying disclosure is one made by an employee who has a reasonable belief that

- a criminal offence.
- a miscarriage of justice.
- an act creating risk to health and safety.
- an act causing damage to the environment.
- a breach of any other legal obligation; or
- concealment of any of the above.

is being, has been, or is likely to be, committed. It is not necessary for you to have proof that such an act is being, has been, or is likely to be, committed - a reasonable belief is sufficient. You have no responsibility for investigating the matter - it is EASE's responsibility to ensure that an investigation takes place.

If you make a protected disclosure you have the right not to be dismissed, subjected to any other detriment, or victimised, because you have made a disclosure. We encourage you to raise your concerns under this procedure in the first instance.

### **Principles**

- Everyone should be aware of the importance of preventing and eliminating wrongdoing at work. Staff and others working on behalf of EASE should be watchful for illegal or unethical conduct and report anything of that nature that they become aware of.
- Any matter raised under this procedure will be investigated thoroughly, promptly, and confidentially, and the outcome of the investigation reported back to the person who raised the issue.
- No employee or other person working on behalf of EASE will be victimised for raising a matter under this procedure. This means that the continued employment and opportunities for future promotion or training of the worker will not be prejudiced because they have raised a legitimate concern.
- Victimisation of an individual for raising a qualified disclosure will be a disciplinary offence.
- If misconduct is discovered because of any investigation under this procedure our disciplinary procedure will be used, in addition to any appropriate external measures.
- Maliciously making a false allegation is a disciplinary offence.
- An instruction to cover up wrongdoing is itself a disciplinary offence. If told not to raise or pursue any concern, even by a person in authority such as a manager, you should not agree to remain silent. You should report the matter to the Chief Executive or the Chair of the Board of Trustees.

### **Procedure**

This procedure is for disclosures about matters other than a breach of your own contract of employment, which should be raised via the Grievance Procedure.

**Stage 1:** In the first instance, any concerns should be raised with the CEO, who will arrange an investigation of the matter. The investigation may involve you and other individuals involved giving a written statement. Any investigation will be carried out in accordance with the principles set out above. Your statement will be considered, and you will be asked to comment on any additional evidence obtained. The CEO will take any necessary action, including reporting the matter to the Chair of the Board of Trustees and any appropriate government department or regulatory agency.

The CEO will also invoke any disciplinary action required. On conclusion of any investigation, you will be told the outcome and what EASE has done, or proposes to do, about it. If no action is to be taken, the reason for this will be explained.

**Stage 2:** If you are concerned that the CEO is involved in the wrongdoing, has failed to make a proper investigation or has failed to report the outcome of the investigations to the relevant person, you should escalate the matter to the Chair of the Board of Trustees. The Chair will arrange for a review of the investigation to be carried out, make any necessary enquiries, and make their own report to the Board.

**Stage 3:** If on conclusion of stages 1 and 2 you reasonably believe that the appropriate action has not been taken, you should report the matter to the relevant body. This includes:

- HM Revenue & Customs
- The Health and Safety Executive
- The Environment Agency
- The Serious Fraud Office
- Charity Commission
- The Pensions Regulator
- The Information Commissioner
- The Financial Conduct Authority
- The Competition and Markets Authority
- The Independent Office for Police Conduct

You can find the full list in The Public Interest Disclosure (Prescribed Persons) Order 2014:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/496899/BIS-16-79-blowing-the-whistle-to-a-prescribed-person.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/496899/BIS-16-79-blowing-the-whistle-to-a-prescribed-person.pdf)

## 7. Safer recruitment

EASE follows the Safer Recruitment Practices outlined by the Keeping Children Safe in Education (September 2018 updated), which aims to identify people who might be harmful or unsuitable at the outset and prevent them from working with children and young people.

EASE's aims to ensure in so far as is possible, that anyone seeking paid or voluntary work at EASE is safe to work with children, young people and vulnerable adults by following safer recruitment practice.

EASE expects all staff and volunteers to share commitment to safeguarding and promoting the welfare of children, young people and vulnerable adults.

Safer Recruitment requires EASE to embed child protection and the safeguarding of children, young people and vulnerable adults at every stage of the recruitment and selection process.

When recruiting staff, the following procedures will be followed:

1. At least one member of the interviewing panel will have attended appropriate safer recruitment training (provided by LA)

2. Ensuring job descriptions clearly state the responsibility staff have for safeguarding Children, Young People and Vulnerable Adults and promoting their welfare.
3. Including specific reference to applicants' suitability to work with Children, Young People and Vulnerable Adults future person specifications.
4. Use of application forms, which include necessary statements relating to the Rehabilitation of Offenders Act, and a Safeguarding Statement, which summarises the vetting process that will be undertaken.
5. Scrutinising applicants' education and employment history.
6. Completely resolving apparent gaps/discrepancies in the application (including gaps in employment) at the interview stage, all gaps /discrepancies must be accounted for.
7. Obtaining independent references to assess the applicants' suitability to work with Children and Young People and addressing concerns that may arise.
8. EASE must ask for previous allegations founded and unfounded and if subject to any disciplinary procedures even if time scale is spent.
9. A formal interview, which will include questions relating to safeguarding of Children, Young People and Vulnerable Adults.
10. Verifying the successful applicants: identity, academic/vocational qualifications, employment history and experience and resolving anomalies, health and physical capacity for the job.
11. Processing the application for and obtaining clearance from the Disclosure and Barring Service (DBS) for an Enhanced DBS check before staff take up employment.
12. In exceptional circumstances if a staff member is required to start before a satisfactory DBS check has been received a risk assessment must be carried out, reviewed and signed by the overarching NSP. The member of staff must never be left unsupervised with children, young people and vulnerable adults.
13. At recruitment a Disclosure by Association check will be conducted, this will be rechecked regularly (as advised by HR) in personal supervision of staff.

### **Single Central Register and DBS's**

EASE keeps a Single Central Record of Recruitment and Vetting checks and a Record of ID Checks for all staff and volunteers who work at EASE.

The Single Central Record of DBS disclosures should include details of:

1. Name
2. Role
3. Organisation
4. DBS number
5. Date of DBS Disclosure
6. Confirmation that the delegated person has had sight of the disclosure
7. Confirmation that the NSP has seen proof of identification such as a passport or Photo ID from a statutory agency
8. Copies of disclosures must not be kept on site.

EASE provide regulated activity as set below:

1. Regulated activity includes unsupervised activities e.g. teaching, training, instructing, **care or supervision of children, young people or vulnerable adults or providing guidance or advice on well-being,**
2. Regulated activity also includes work for a limited range of establishments (specified places) where there is an opportunity for contact e.g. schools, children's homes, children's centres and childcare premises (but not work by supervised volunteers – unless this is frequent see point 5 below)
3. If you are on the payroll working at a school / children's centre / childcare provider/youth club, this is classed as Regulated Activity
4. Contractors or any employee of the contractor has to have an appropriate level DBS checks. Contractors engaging in regulated activity will require an enhanced DBS certificate (including barred list information). For all other contractors who are not engaging in regulated activity, but whose work provides them with an opportunity for regular contact with children, an enhanced DBS check (not including barred list) will be required. When considering whether the contact is regular (regular is defined as carried out by the same person frequently (once a week or more often), or on 4 or more days in a 30-day period, it is irrelevant whether the contractor works on a single site or across an number of sites) Temporary and maintenance workers are not in regulated activity, it is the school's children's centre and childcare providers responsibility to ensure the safety of the children through supervising these staff at ALL times.
5. Frequency and intensity comes into play with children. Even if a role is unregulated e.g. volunteer, **if they were to be at the school / children's centre / childcare provider/ youth club once a week or four times in a month, because of the frequency they would need to have a DBS check carried out, but not a Barred List check.**
6. Those roles that used to be in Regulated Activity but are no longer in Regulated Activity (i.e. they are fully supervised) **can still have an enhanced DBS check** but no Barred List check.



These are the types of checks available to those working with children: <b>Type of check</b>	<b>What the check involves</b>	<b>Positions eligible for this level of check</b>
<b>Standard check</b>	Check of the Police National Computer records of convictions, cautions, reprimands and warnings	The position being applied for must be covered by an exempted question in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975.
<b>Enhanced check</b>	Check of the Police National Computer records <b>plus</b> additional information held by police such as interviews and allegations. Additional information will only be disclosed where a Chief Police Officer reasonably believes it to be relevant and considers that it ought to be disclosed.	The position being applied for must be covered by an exempted question in the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 and by provisions in the Police Act 1997 (Criminal Records) Regulations 2002.*
<b>Enhanced criminal record check with children's and/or adult's barred list information</b>	Check of the Police National Computer records <b>plus</b> additional information held by police <b>plus</b> check of the DBS Children's Barred List <b>plus</b> check of the DBS Adults' Barred List.	The position must be eligible for an enhanced level criminal record check as above and be for a purpose listed in the Police Act 1997 (Criminal Records) (No.2) Regulations 2009 as qualifying for a barred list(s) check.

For staff working in a regulated activity managers **must apply for the: Enhanced criminal record check with children's and/or adults' barred list information, check.**

For staff (or volunteers work who work frequently) in a regulated activity and are supervised **can apply for an: Enhanced check.**

#### **Frequency of DBS checks**

EASE staff must follow guidance on frequency of DBS renewal that relates to their service type and organisation as follows:

1. All employees who work in a regulated activity and have undertaken a DBS check have an obligation to notify their manager/employer of any incidents that may affect this status. Manager must then carry out an additional check.

## **8 MANAGING ALLEGATIONS AGAINST STAFF AND VOLUNTEERS ASV (ALLEGATIONS AGAINST STAFF)**

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EASE has a professional duty to provide a safe and happy environment and nurturing ethos, which fosters confidence, independence and learning, and:

1. Recognises the importance of close contact with trusted adults for young children's healthy development and its importance in building self-esteem and positive attachments

between the staff and the children. This is especially important for the youngest children who require the greatest amount of physical care, handling, and comforting.

2. Fosters the development of natural relationships between staff and children based on care, respect and love for the children, which includes close physical contact and warmth. This sort of contact is not encouraged with **students, volunteers and short-term agency staff**. Everyone is nevertheless, expected to always observe professional and appropriate boundaries in their relationships with the children.

To ensure a safe environment, the following procedures will be followed:

1. Activities where staff are alone with a child or group of children, young people or vulnerable adults for a short period of time – e.g. during story times, must be planned, agreed and recorded by the delegated manager to ensure that staff qualification and ratios are met at all times, and risk assessment carried out as appropriate.
2. Students, volunteers, visitors or agency staff are not allowed to be alone with children, young people or vulnerable adults (with the exception of agency staff/students on long term placement who have been observed to work safely and respectfully with the children, young people and vulnerable adults over a period of time and agreed and recorded by Head of Centre or delegated manager and have DBS clearance).
3. Permanent members of staff should change children's clothes, or long-term agency staff, that have a key person role. This should be agreed and recorded by Centre Head or delegated manager.
4. Staff must inform colleagues when they are changing a child.
5. Staff must keep a record of nappy changes, or changes of children's clothing, toilet training and any other occasion when it is necessary to change a child or help them in the toilets.
6. If parents take their own child to the toilet area, staff must ensure that no other children are left alone in this area at the same time.
7. Contractors working on site must not be allowed in changing areas if children are being changed.

In the event of an allegation being made against staff the procedure is to:

1. Report the allegation to The Designated Safeguarding Lead (DSL) except for allegations against the DSL, which must be reported to the person who is at next level of management). This person will report it to The LADO Natalie Cernuda Tel: 07890940241 **immediately** and follow up information can be sent securely to [cernudan@ealing.gov.uk](mailto:cernudan@ealing.gov.uk) and [ASV@ealing.gov.uk](mailto:ASV@ealing.gov.uk) and copy to Isha Dhody [dhodyl@ealing.gov.uk](mailto:dhodyl@ealing.gov.uk) and Sally Osmond [osmonds@ealing.gov.uk](mailto:osmonds@ealing.gov.uk)
2. The person who has reported the incident to The Designated Officer **must not talk to any members of staff or other person until advised to do so by The LADO. The member of staff concerned must not be told about the subject of the allegation as this can hinder and affect the investigation procedure.**
3. All communication and related evidence and actions must be recorded, dated and signed.
4. The LADO will consult as necessary with the Head of Centre/Police/Child Protection Advisor and HR to consider the evidence/information and will advise on the required course of action.
5. Refer to Ealing's Yellow Book 2022, for more detailed procedures.

6. Organisations must follow their own procedures regarding Allegations against staff and volunteers (ASV) and if the requirements are met for a member of staff to be temporarily relocated, redeployed or suspended this must be actioned accordingly.
7. The manager responsible must only communicate information with the affected member of staff as agreed by the LADO, e.g. to state the reasons for management action are that an allegation has been made not what the allegations relate to)

## 8. Safer Working

### **EASE's Duty of Care**

We at EASE take the care and well-being of all our children, young people and vulnerable adults very seriously and hold it in the upmost importance. Matters around safeguarding and well-being will be kept confidential unless it puts children, young people, vulnerable adults or other individuals at risk of harm or their health and well-being is put at risk.

Staff's first step is to always consult with services users to support on matters, if risk to individuals is not a concern. However relevant information may have to be passed on to external services if there is a risk to person or people, as we have a duty of care to ensure as much as we can, the well-being of individuals who use the services provided is met.

### **How children, young people and their families are Involved in safeguarding**

Children, young people and their families are aware of all of EASE's safeguarding procedures and they are well publicised both within sessions and on noticeboards. We consult our beneficiaries regularly asking them for ideas on processes' and procedures, including what makes a good children's or youth worker in your project when recruiting. Young people have inputted in policies such as behaviour and anti-bullying. EASE is currently putting together a Youth Council that will have great impact to the way safeguarding and the charity is run as a whole.

### **Staff and Volunteer Code of Conduct**

It is important that everyone working with vulnerable adults, children and young people understands that the nature of their work, and the responsibilities related to it, place them in a position of trust. This code of conduct gives clear advice on appropriate and safe behaviours for all adults working with children, young people and vulnerable adults whether they are paid staff or volunteers, in all settings and in all contexts. It is not an exhaustive list.

This code of conduct aims to:

- Clarify which behaviours constitute safe practice and which behaviours should be avoided.
- Assist people to carry out their work safely and responsibly and to monitor their own standards and practice.
- Support managers and employers in setting clear expectations of behaviour.
- Give a clear message that unlawful or unsafe behaviour is unacceptable and that, where appropriate, disciplinary, or legal action will be taken.
- Minimise the risk of allegations made against adults who work with vulnerable clients, children, and young people.
- Reduce the incidence of positions of trust being abused or misused.

### **Underpinning principles:**

- The vulnerable adult, child/young person's welfare is paramount.
- It is the responsibility of all adults to safeguard and promote the welfare of the child/young person and vulnerable adult. This responsibility extends to a duty of care for those adults employed, commissioned, or contracted to work with children.
- Adults who work with vulnerable clients, children/young people are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions.
- Adults should be seen to work in an open and honest way.
- The same professional standards should always be applied regardless of culture, disability, gender, language, racial origin, religious belief and/or sexual identity.
- Adults should continually monitor and review their practice and ensure they follow this guidance.
- EASE's expectations about safe practice and professional standards should be made clear to staff from the point of recruitment and reviewed on a regular basis.

### **At all times, you should:**

- Be aware that the child/young person/vulnerable adult is your main priority.
- Keep the vulnerable client, child/young person/vulnerable adult in focus/at the centre of your work.
- Listen to the vulnerable client, child/young person and talk with them about their right to be kept safe from harm.
- Respect the race, culture, faith, religion etc. of the children/young people/vulnerable adult you work with and their families.
- Seek advice and support from your Nominated Safeguarding Person (NSP) and their deputy, your colleagues, supervisor, and manager.
- Inform your NSP/Deputy immediately if you already know or have a friendship or relationship with a family who interacts with your organisation.
- Inform your NSP if you have been cautioned, charged, or convicted of any offence as soon as possible.
- Be careful about forming personal relationships with parents/carers. This could make it difficult for you to report allegations/suspensions of abuse. Remember your duty of care is to the child/young person/vulnerable adult.
- Ensure personal friendships made within the team do not impact on the quality of care provided.
- Be aware that friendships within the team could make it difficult for reporting concerns.
- Never discuss your organisation or individual children/young people/vulnerable adult and families outside of the workplace in a non-professional capacity, for example on social network sites.
- Never babysit for the children/family interacting with your organisation.
- Never socialise with children/young people/vulnerable adult and/or members of their family outside the workplace, including befriending or accepting friend request on social networking sites, such as Facebook, Twitter, or other social media websites.
- Never share your mobile phone number, email address, home address or personal information with parents/carers.
- Never take photographs of injuries to/on a child/young person/vulnerable adult
- Never offer a lift to a vulnerable client, child/young person/vulnerable adult, or their parent/carer.
- Be clear about when information held by EASE about a child/young people/vulnerable adult/family can be shared and in what circumstances it is appropriate to do so.

- Wear clothing which is not considered to be discriminatory and is culturally sensitive.
- Wear clothing which is appropriate to your role and is not likely to be viewed as offensive revealing or sexually provocative.
- Ensure that the clothing you wear for work does not distract, cause embarrassment, or give rise to misunderstanding.
- Be aware of EASE 's policy on the giving and receiving of gifts.
- Ensure that you declare any gifts you give or receive that may be misconstrued.
- Never engage in any sexual activity (this would include using sexualised language) with a young person/vulnerable adult you meet through your duties or start a personal relationship with them – this is an abuse of trust and illegal.
- Do not communicate with a vulnerable client, child/young person in any way which could be interpreted as sexually suggestive or provocative, including verbal comments, letters, notes, email, phone calls, texts, and physical contact.
- Never use any kind of physical punishment or chastisement such as smacking or hitting.
- Never use language that is belittling, sarcastic or hurtful.
- Be aware that physical contact should be open and initiated by the child/young person's needs, e.g., for comfort when upset or help with toileting. Always prompt children/young person to carry out personal care themselves and, if they cannot manage, ask if they would like help.
- Never touch a child or young person in a way that may be considered indecent and be aware that even well-intentioned physical contact may be misconstrued by the vulnerable client, child/young person, or an observer.
- Develop positive physical handling plans in respect of children and do not use force as a form of punishment. If, however, any physical intervention has been used, this must be reported and recorded immediately.
- Ensure that when lone working, full and appropriate risk assessments have been conducted and agreed
- Exercise caution about being alone with a child, young person or vulnerable adult. In situations where this may be needed (for example where a young person wants to speak in private) think about ways of making this seem less secret, for example by telling another worker or volunteer what you are doing and where you are or leaving a door open. Remember to keep a record of your conversation.
- Do not investigate any concerns or reports. Instead, you should contact your NSP or Deputy NSP immediately.

### **Good practice in establishing professional boundaries for you**

Code of conduct for staff and volunteers The Children Act 2004 places a duty on organisations to safeguard and promote the wellbeing of children and young people. This includes the need to ensure that all adults who work with or on behalf of children/young people are competent, confident, and safe to do so.

The principles and guidance in this chapter should be followed by all adults whose work brings them into contact with children and young people. All adults who work with children and young people have a crucial role to play in shaping their lives and have a duty of care to safeguard and promote their welfare. It is the responsibility of staff and volunteers to establish safe and responsive environments which safeguard children and young people and reduce the risk of adults being unjustly accused of improper or unprofessional conduct.

All adults who work with and on behalf of children, young people and vulnerable adults are accountable for the way in which they exercise authority, manage risk, use resources, and safeguard children/young people/vulnerable adults. Whether working in a paid or voluntary capacity, these adults have a duty to keep children and young people safe and to protect them from sexual, physical, and emotional harm.

Children, young people/vulnerable adults have a right to be treated with respect and dignity. It follows that trusted adults are expected to take reasonable steps to ensure the safety and wellbeing of children and young people. Failure to do so may be regarded as neglect. The duty of care is, in part, exercised through the development of respectful and caring relationships between adults and children. It is also exercised through the behaviour of the adult, which always should demonstrate integrity, maturity, and good judgement.

A complete checklist of what is or is not inappropriate behaviour in all circumstances cannot be provided in this chapter.

### **Power and positions of trust**

High standards of behaviour are expected from all adults who work with children and young people. When individuals accept such work, they need to understand and acknowledge the responsibilities and trust inherent in that role. All adults working with children, young people and vulnerable adults are in positions of trust. A relationship of trust can be described as one in which one party is in a position of power or influence over the other by virtue of their work or the nature of their activity. Adults should always maintain appropriate professional boundaries and avoid behaviour which might be misinterpreted by others. They should report and record any incident with this potential.

Where a person aged 18 or over is in a specified position of trust with a child under the age of 18, it is an offence for that person to engage in sexual activity with or in the presence of that child or young person, or to cause or incite that vulnerable client, child/young person/vulnerable adult to engage in or watch sexual activity.

### **Propriety and behaviour**

All adults working with children, young people, vulnerable adults have a responsibility to maintain public confidence in their ability to safeguard the welfare and best interests of children. It is therefore expected that they will adopt high standards of personal conduct to maintain the confidence and respect of the public in general and all those with whom they work. There may be times, for example, when an adult's behaviour or actions in their personal life come under scrutiny from local communities, the media, or public authorities. This could be because their behaviour is considered to compromise their unsuitability to work with children, young adults and vulnerable adults.

Misuse of drugs, alcohol or acts of violence would be examples of such behaviour. Adults in contact with children and young people should therefore understand and be aware that safe practice also involves using judgement and integrity about behaviours in places other than the work setting. The behaviour of an adult's partner or other family members may raise similar concerns and require careful consideration by an employer as to whether there may be a potential risk to children and young people in the workplace.

### **Dress and appearance**

A person's dress and appearance are matters of personal choice and self-expression. However, adults should dress in ways which are appropriate to their role and this may need to be different to how they dress when not at work. Adults who work with children, young people and vulnerable adults should take care to ensure they are dressed appropriately for the tasks and the work they undertake. Those who dress in a manner which could be considered as inappropriate could render themselves vulnerable to criticism or allegations.

### **Personal living space**

No child or young person should be in, or invited into, the home of an adult who works with them, unless the reason for this has been firmly established and agreed with parents/carers and senior managers, or the home has been designated by the organisation or regulatory body as a workplace, such as childminders or foster carers.

### **Gifts, rewards, and favouritism**

The giving of gifts or rewards to children or young people should be part of an agreed policy for supporting positive behaviour or recognising achievements. There are occasions when adults may wish to give a child or young person a personal gift, but this is only acceptable in line with agreed policy; the gift and the reason for it should be discussed with a senior manager and/or the child's parent/carer, and the results of this discussion must be recorded. Gifts should be given openly, not based on favouritism, and adults must be aware that this can be misinterpreted as a gesture either to bribe or groom a child, young person or vulnerable adult. Care should also be taken to ensure that adults do not accept any gift that might be construed as a bribe by others or lead the giver to expect preferential treatment.

### **Infatuations**

Occasionally, a child, young person or vulnerable adult may develop an infatuation with an adult who works with them. These adults should deal with these situations sensitively and appropriately to maintain the dignity and safety of all concerned. If an adult becomes aware of such a situation, they should discuss, at the earliest opportunity, with a manager or the child/young person/ vulnerable adult's parent/carer so that appropriate action can be taken to avoid any hurt, distress or embarrassment. Discussions with managers need to be clearly recorded. Communicating with children and young people (including the use of technology)

Communication between adults and children, young people/vulnerable adults, by whatever means, should take place within clear and explicit professional boundaries. This includes the wider use of technology such as mobile phones, text messaging, e-mails, digital cameras, videos, webcams, websites, and blogs. Adults should not share any personal information with a child or young person. They should not request, or respond to, any personal information from the child, young person or vulnerable adult other than that which might be appropriate as part of their professional role. Adults should ensure that all communications are transparent and open to scrutiny. They should not give their personal contact details, including e-mail, home, or mobile telephone numbers, unless the need to do so is agreed with senior management and parent. E-mail or text outside agreed protocols may lead to disciplinary and/or criminal investigations. This also includes communications through internet websites.

### **Social contact**

Adults who work with children/young people/vulnerable adults should not seek to have social contact with them or their families. If a vulnerable client, child/young person, or parent seeks to

establish social contact, the adult should exercise professional judgement in making a response but should always discuss the situation with their manager and with the parent/carer. Where social contact is an integral part of work duties, such as pastoral work in the community, care should be taken to maintain appropriate personal and professional boundaries. Where safeguarding concerns arise during social contact, these must be followed up and referred to the NSP as required.

### **Sexual contact**

Intimate or sexual relationships between children/young people and the adults who work with them will be regarded as a grave breach of trust. Allowing or encouraging a relationship to develop in a way which might lead to a sexual relationship is also unacceptable. Any sexual activity between an adult and the vulnerable client, child/young person may be regarded as a criminal offence and will always be a matter for disciplinary action. Children/young people/vulnerable adults are protected by specific legal provisions regardless of whether the child/young person's consents or not. The sexual activity referred to does not just involve physical contact including penetrative and non-penetrative acts. It may also include non-contact activities, such as causing children or young people to engage in or watch sexual activity or the production of pornographic material. Another aspect of potential sexual contact is the behaviour known as 'grooming', where an adult works to gain the trust of a child or young person and manipulate that relationship so sexual abuse can take place.

### **Physical contact**

Many jobs within the children's and young people's workforce require physical contact with children/young people/vulnerable adults as part of their role. There are also occasions when it is entirely appropriate for other adults to have some physical contact with the child. However, it is crucial that, in all circumstances, adults should only touch children and young people in ways which are appropriate to their professional or agreed role and responsibilities.

When physical contact is made with a child/young person/vulnerable adult, this should be in response to their needs at the time, of limited duration and appropriate to their age, stage of development, gender, ethnicity, and background. Physical contact which occurs regularly with an individual vulnerable client, child/young person/vulnerable adult is likely to raise questions unless there is explicit agreement on the need for, and nature of, the contact. This would then be part of a formally agreed plan or within the parameters of established, agreed, and legal professional protocols on physical contact, such as during sport activities or medical procedures.

Physical contact should never be secretive, or for the gratification of the adult, or represent a misuse of authority. Where a vulnerable client, child/young person/vulnerable adult seeks or initiates inappropriate physical contact with an adult, the situation should be handled sensitively, and care taken to ensure that contact is not exploited in any way. It is the responsibility of the adult to sensitively deter the vulnerable client, child/young person and help them understand the importance of personal boundaries.

### **One-to-one situations**

One-to-one situations have the potential to make a vulnerable client, child/young person more vulnerable to harm by those who seek to exploit their position of trust. Staff who may work in one-to-one settings with children or young people may also be more vulnerable to unjust or unfounded allegations being made against them. Both possibilities should be recognised so that when these are unavoidable, reasonable, and sensible precautions are taken. Every attempt should be made to



ensure the safety and security of children, young people, young people and adults who work with them.

### **Home visits**

Home visits are an integral part of work for some roles, so it is essential that appropriate policies and related risk assessments are in place to safeguard children, young people and adults who work with them. A risk assessment should include an evaluation of any known factors regarding the child, parents and others living in the household. Risk factors such as hostility, child protection concerns, complaints and grievances can make adults more vulnerable to an allegation. Specific consideration should be given to visits outside of office hours or in remote, secluded locations. Following an assessment, appropriate risk management measures should be in place before visits are agreed. Where little or no information is available visits should not be made alone. A record should always be made of the circumstances and outcomes of the home visit. Under no circumstances should an adult visit a vulnerable client, child/young person/young person in their home outside agreed work arrangements or invite a child/young person to their own home or that of a family member, colleague, or friend.

## **9. Social Media and Photography**

EASE works with children, young people, vulnerable adults and families as part of its activities. The purpose of this policy statement is to:

- protect children, young people and vulnerable adults who take part in EASE's services, events and activities, specifically those where photographs and videos may be taken
- set out the overarching principles that guide our approach to photographs/videos being taken of children and young people during our events and activities
- to ensure that we operate in line with our values and within the law when creating, using and sharing images of children, young people and vulnerable adults.

This policy statement applies to all staff, volunteers and other adults associated with EASE.

### **Legal framework**

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England. We believe that:

- children and young people should never experience abuse of any kind
- we have a responsibility to promote the welfare of all children, young people and vulnerable adults and to take, share and use images of them safely.

We recognise that:

- sharing photographs and films of our activities can help us celebrate the successes and achievements of our children, young people and vulnerable adults, provide a record of our activities and raise awareness of our organisation
- the welfare of the children, young people and vulnerable adults taking part in our activities is paramount

- children, young people, vulnerable adults and their parents and carers have a right to decide whether their images are taken and how these may be used, regardless of age, disability, gender reassignment, race, religion or belief, sex or sexual orientation
- consent to take images of children, young people and vulnerable adults is only meaningful when they, their parents and carers understand how the images will be used and stored, and are fully aware of the potential risks associated with the use and distribution of these images
- there are potential risks associated with sharing images of children online.

We will seek to keep children and young people safe by:

- always asking for written consent from a child, young person, vulnerable adult and their parents or carers before taking and using the image
- always explaining what images will be used for, how they will be stored and what potential risks are associated with sharing images of children, young people and vulnerable adults
- making it clear that if a child, young person or vulnerable adult, or their family withdraw consent for an image to be shared, it may not be possible to delete images that have already been shared or published
- changing the names of children, young people and vulnerable adults whose images are being used in our published material whenever possible
- never publishing personal information about individuals and disguising any identifying information (for example the name of their school or a school uniform with a logo)
- making sure children, young people, vulnerable adults and their parents and carers understand how the images will be securely stored and for how long (including how we will control access to the images and their associated information)
- reducing the risk of images being copied and used inappropriately by:
  - only using images of children, young people and vulnerable adults in appropriate clothing (including safety wear if necessary)
  - avoiding full face and body shots of clients taking part in activities such as swimming where there may be a heightened risk of images being misused
  - using images that positively reflect young people's involvement in the activity.

We will also develop a procedure for reporting the abuse or misuse of images of children as part of our child protection procedures. We will ensure everyone involved in our organisation knows the procedures to follow to keep children safe.

### **Storing images**

We will store photographs and videos of children, young people and vulnerable adults securely, in accordance with our safeguarding policy and data protection law. We will keep hard copies of images in a locked drawer and electronic images in a protected folder with restricted access. Images will be stored for a period of 3 years. We will never store images of children, young people or vulnerable

adults on unencrypted portable equipment such as laptops, memory sticks and mobile phones. EASE does not permit staff and volunteers to using any personal equipment to take photos and recordings of children, young people or vulnerable adults. Only cameras or devices belonging to EASE should be used.

## **10. Managing staff and volunteers**

All staff, both paid and voluntary, will receive an induction, support and supervision throughout their employment/volunteering, and appropriate training in the recognition and response to potential child protection concerns and the operation of safeguarding policy and procedures. Paid and voluntary appointments should be conditional on successful completion of a probationary period.

### **Induction**

The induction process within organisations working with children/young people/vulnerable adults and families clearly define the expectation of commitment to safeguarding and the requirement to comply with the organisation's safeguarding policies and procedures and the code of conduct. These include:

- Individual safeguarding responsibilities, including what to do if concerns about a child's welfare arise.
- Providing the name, contact details and responsibilities of the Nominated Safeguarding Person (NSP) and their deputy within the organisation.
- Providing a copy of your organisation's safeguarding children policy statement.
- Providing a copy of your organisation's code of conduct.
- Undertaking relevant training related to the post.

### **Supervision**

Supervision is essential in organisations providing services to children, young people and vulnerable adults, as it allows staff and volunteers to reflect on their own practice and their relationship with children, and to raise concerns or difficulties. It also enables the organisation to ensure that staff and volunteers are always clear about professional standards, boundaries and organisational objectives. Though supervision may be more formal for paid staff than for volunteers, it should always:

- Follow a standard format.
- Occur on a regular basis (every 4-6 weeks).
- Clarify the objectives of your organisation and the expectations on the individual and their role in meeting those objectives.
- Support the individual in fulfilling their role and responsibilities.
- Ensure an anti-discriminatory approach to practice which puts the welfare of children/young people/vulnerable adults first.
- Be clear about confidentiality and its limits.
- Be appropriately recorded.
- Ensure that standards, content, storage, and status of records are agreed by both parties.

- Be jointly reviewed and evaluated.
- Ensure both parties share responsibility for ensuring supervision is regularly undertaken and outcomes acted upon.
- Ensure both parties share responsibility for being open and honest in raising concerns about practical, developmental or emotional blocks to effective delivery of service, and work together to identify solutions.
- Child Protection, Safeguarding, Prevent, Changes to DBS to be a headline for each supervision.

## **Training**

All EASE staff, volunteers and trustees will be given safeguarding training. Staff are required to attend the internally run training course within the first three months of their employment. Volunteers will be given safeguarding training relevant to the position in which they are volunteering, this could be their manager talking through the EASE Safeguarding policy with them or they may need to attend EASE's Safeguarding training. This will be organised locally through their manager. Trustees will be invited to attend Safeguarding Training courses.

Having undertaken the basic awareness course, staff and volunteers should undertake refresher courses every two years thereafter to keep their knowledge and skills up to date.

Staff and volunteers are also required to partake in additional safeguarding training that is relevant to their clients such as:

- NSP Training (For NSP and Deputy)
- Managers and those working with children, young people and vulnerable adults will be required to partake Level 2 and Level 3 courses (working together, managing allegations against professionals, drugs and alcohol awareness etc).
- Child sexual exploitation (CSE)
- Domestic abuse (DA/DV)
- Honour based violence (HBV)
- Female Genital Mutilation (FGM)
- Preventing radicalisation (Prevent/Channel)
- On line safety

## **11. Confidential Information, Retaining Records and Information Sharing**

All children, young people and vulnerable adults, and their families, are entitled to their privacy. However, where there are concerns about the safety or welfare of a child, young person or vulnerable adult, those concerns and the necessary personal information will need to be shared with those who can make decisions about action to safeguard the child, young person or vulnerable adult.

These detailed records should be kept until EASE is confident that the information is held accurately with the agency responsible for taking further action to safeguard the child, young person or vulnerable adult i.e. partner agencies, social services or the police. A chronology of decisions made and actions taken can then be kept on file, once the detailed records are deleted or destroyed. This record should be held for 50 years. More information can be found in the government document Working Together to Safeguard Children 2018 and 2023.

With regarding to the welfare of children, young people and vulnerable adults, information sharing can be key to enabling early intervention and preventative work. By sharing genuine concerns about

a child, young person, vulnerable adult or family, professionals can construct a more accurate picture about their safety and wellbeing.

**Seven rules for information sharing**

- Remember that the Data Protection Act, GDPR and human right law is not a barrier to sharing information. It provides a framework to ensure that personal information about living persons is shared appropriately.
- 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 you are 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. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case. Seek advice from the Local Authority Designated Officer LADO if needed
- Consider safety and wellbeing. Base your information-sharing decisions on considerations of the safety and wellbeing of the person and others who may be affected by their actions.
- Necessary, proportionate, relevant, accurate, timely and secure. Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
- Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Appendix 5 details a flowchart of key questions for information sharing.

**12. Adult-to-child Ratios**

When working with groups of children, young people or vulnerable adults, it is important that the level of supervision is appropriate to their age group and their needs, which may be very specific.

In general, young children need to be more closely supervised and will require a higher adult-to-child ratio. The following are the adult-to-child ratios that EASE abide by which are based on Ofsted guidelines.

Child's age	Number of adults	Maximum number of children per adult
0-2	1	3
2-3	1	4
4-8	1	6
9-12	1	8
13-18	1	10

### 13. Types and Indicators of Abuse

Working Together to Safeguarding Children sets out definitions and examples of the four main categories of abuse.

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

These categories can overlap and an abused child does frequently suffer more than one type of abuse. Child abuse and neglect is a generic term encompassing all ill treatment of children including serious physical and sexual assaults as well as cases where the standard of care does not adequately support the child's health or development.

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#### Physical abuse

Physical abuse is a form of abuse which 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.

##### Physical signs

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies, which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used (e.g. belt marks, hand prints or a hair brush)
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks
- Bruising on the arms, buttocks and thighs
- Human bite marks
- Any burn with a clear outline (circular burns from cigarettes, linear burns, scalds that have a line indicating immersion or poured liquid)
- Fractures (especially in non-mobile children; unexplained fracture in the first year of life; if there are associated old fractures; if the history provided is vague, non-existent or inconsistent with the fracture type)
- Female genital mutilation (FGM)

##### Behavioural signs

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents or carers are uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a 'cry for help' and if ignored could lead to a more serious injury)
- Frequent use of different doctors and Accident & Emergency departments
- Reluctance to give information or mention previous injuries

## Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

Emotional abuse may involve:

- Conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- Imposing age or developmentally inappropriate expectations on a child. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- Seeing or hearing the ill-treatment of another, such as domestic abuse.
- Serious bullying (including cyber bullying), causing a child to frequently feel frightened or in danger, or the exploitation or corruption of a child.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical.

The indicators of emotional abuse are often also associated with other forms of abuse. Professionals should therefore be aware that emotional abuse might also indicate the presence of other kinds of abuse.

### Physical signs

- Developmental delays – emotional or physical
- Failure to grow or thrive

### Behavioural signs

- Abnormal attachment between a child and parent (e.g. anxious, indiscriminate or no attachment)
- Indiscriminate attachment or failure to attach
- Aggressive behaviour towards others
- Appeasing behaviour towards others
- Scapegoated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a 'loner' – difficulty relating to others

## Neglect

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

Once a child is born, neglect may involve a parent or carer failing to:

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

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

### Physical signs

- Failure by parents or carers to meet essential physical needs (e.g. adequate or appropriate food, clothes, warmth, hygiene and medical or dental care)
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- A child seen to be listless, apathetic and unresponsive with no apparent medical cause

### Behavioural signs

- Failure by parents or carers to meet essential emotional needs (e.g. to feel loved and valued, to live in a safe, predictable home environment)
- Child frequently absent from school
- Child left with inappropriate carers (e.g. too young, complete strangers)
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods



## Sexual abuse

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 (for example, 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 a child or young person in looking at, or in the production of, sexual images, watching sexual activities, encouraging a child or young person 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. Sexual abuse can be very difficult to recognise and reporting sexual abuse can be an extremely traumatic experience for a child. Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear.

If a child makes an allegation of sexual abuse, it is very important that they are taken seriously. Allegations can often initially be indirect as the child tests the professional's response. There may be no physical signs and indications are likely to be emotional or behavioural.

### Physical signs

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a child
- Physical symptoms such as:
  - injuries to the genital or anal area
  - bruising to buttocks, abdomen and thighs
  - sexually transmitted disease
  - presence of semen on vagina, anus, external genitalia or clothing

### Behavioural signs

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Contact or non-contact sexually harmful behaviour
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorders, self-mutilation and suicide attempts)
- Involvement in sexual exploitation or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes in situations such as sports events or medical exams

## **Recognising Potential Risk to an unborn Child**

In some circumstances, agencies or individuals are able to anticipate the likelihood of significant harm with regard to an expected baby. Indicators may include

- Domestic abuse within the household
- Alcohol and substance misuse by mother, leading to possible harm to the unborn child, or by others with risk to new-born
- Secret or hidden pregnancy or the mother's mental health problems

These concerns should be addressed as early as possible in order to provide sufficient time for full assessment and support so as to enable the parents (wherever possible) to provide safe care.

## **People with Disabilities**

EASE is wholly committed to upholding the rights of children, young people and vulnerable adults with disabilities who use our services and particularly their right to be free from violence, abuse or neglect by their parents or anyone else who looks after them. Research suggests that children and young people with disabilities are more vulnerable to physical, emotional or sexual abuse or neglect than a non-disabled child. The level of risk may be raised by

- A need for practical assistance in daily living, including intimate care from what may be a number of carers
- Carers and staff lacking the ability to communicate adequately with the child
- A lack of continuity in care leading to an increased risk that behavioural changes may go unnoticed
- Physical dependency with consequent reduction in ability to be able to resist abuse
- An increased likelihood that the child is socially isolated
- Lack of access to "keep safe" strategies available to others
- Communication or learning difficulties preventing disclosure
- Parents' or carers' own needs and ways of coping conflicting with the needs of the child

In addition to the indicators of abuse and neglect listed above, the following indicators must also be considered in relation to disabled children:

- Force feeding, or impatience in feeding leading to under feeding/under nourishment
- Unjustified or excessive physical restraint
- Rough handling
- Extreme behaviour modification, including the deprivation of liquid, medication, food or clothing or social contact
- Misuse of medication, sedation, heavy tranquillisers
- Invasive procedures against a child's will

- Deliberate failure to follow medically recommended regimes
- Misapplication of care programmes or regimes
- Ill-fitting equipment (e.g. callipers, sleep board causing injury or pain, inappropriate splinting)
- Undignified or culturally inappropriate intimate care practices.

Some sex offenders may target children and young people with disabilities in the belief they are less likely to be detected.

### **Institutional Abuse**

Children and young people with disabilities are particularly vulnerable to this kind of abuse where practices and behaviours by staff in organisations have become institutionalised or commonly accepted practice. However, those behaviours may cause significant harm (as above) and/or may be an abuse of the child's rights. Examples of the latter could be

- Where a child's communication board does not accompany the child everywhere
- Staff who assume a child's wishes or communication and speak for them
- Staff who do not facilitate a child's own communication because of the difficulty or time it takes
- Attributing difficult or challenging behaviour to the child's condition rather than identifying it as communication

All staff and volunteers within YYY must be alert to signs of institutional abuse or unprofessional practices or behaviour and raise their concerns as per the procedures outlined above.

### **In addition to the above all staff understand the signs that could indicate:**

- **Child sexual exploitation (CSE)**
- **Domestic abuse (DA/DV)**
- **Honour based violence (HBV)**
- **Female Genital Mutilation (FGM)**
- **Preventing radicalisation (Prevent/Channel)**
- **On line safety**

**DSLs should keep up to date with developing guidance in this aspect of child protection, including attending training opportunities to supplement their child protection training.**

**Child sexual exploitation** *Keeping Children Safe in Education September 2018 Pages 77/78*

Child sexual exploitation is a form of child sexual 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 sex abuse, child sexual exploitation:

- 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 (e.g. through others copying videos or images they have created and posted on social media);
- 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.

**Some of the following signs may be indicators of child sexual exploitation:**

- **Children who appear with unexplained gifts or new possessions;**
- **Children who associate with other young people involved in exploitation;**
- **Children who have older boyfriends or girlfriends;**
- **Children who suffer from sexually transmitted infections or become pregnant;**
- **Children who suffer from changes in emotional well-being;**
- **Children who misuse drugs and alcohol;**
- **Children who go missing for periods of time or regularly come home late; and**
- **Children who regularly miss school or education or do not take part in education.**

**Domestic abuse** KCSIE 2018 page 17/18

The cross-government definition of domestic violence and abuse is:

Any incident or pattern of incidents of controlling, coercive, 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. The abuse can encompass, but is not limited to:

- psychological;
- physical;
- sexual;
- financial; and
- emotional

Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. Domestic abuse affecting young people can also occur within their personal relationships, as well as in the context of their home life.

Advice on identifying children who are affected by domestic abuse and how they can be helped is available at:

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/domestic-abuse/signs-symptoms-effects/>

<http://www.refuge.org.uk/get-help-now/support-for-women/what-about-my-children/>

<http://www.safelives.org.uk/knowledge-hub/spotlights/spotlight-3-young-people-and-domestic-abuse>

### **Further information on so-called ‘honour based’ violence**

So-called ‘honour-based’ violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the designated safeguarding lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

### **Indicators**

There are a range of potential indicators that a child may be at risk of HBV. Guidance on the warning signs that FGM or forced marriage may be about to take place, or may have already taken place, can be found on pages 38-41 of the Multi agency statutory guidance on FGM PAGES 13-14 of the Multi-agency guidelines: Handling case of forced marriage.

<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

### **Actions**

If staff have a concern regarding a child that might be at risk of HBV or who has suffered from HBV, they should speak to the designated safeguarding lead (or deputy). As appropriate, they will activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children’s social care. Where FGM has taken place, since 31 October 2015 there has been a mandatory reporting duty placed on **teachers** that requires a different approach (see following section).

Parents who attend EASE’s services may have been subject to HBV and this may have an impact of their lives, particularly during pregnancy and this experience could impact on their expectations both positively and negatively with regard to their daughters and FGM

All staff should have an understanding of the signs that could indicate HBV and DSLs should keep up to date with developing guidance in this aspect of child protection, including attending training opportunities to supplement their child protection training.

### **FGM and mandatory reporting duty KCSIE September 2018 page 81-82**

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon **regulated health and social care professionals** in England and Wales, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18.

Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils, but the same definition of what is meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory reporting duty applies. Information on when and how to make a report can be found at [Mandatory reporting of female genital mutilation procedural information](#).

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/573782/FGM\\_Mandatory\\_Reporting\\_-\\_procedural\\_information\\_nov16\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/573782/FGM_Mandatory_Reporting_-_procedural_information_nov16_FINAL.pdf)

Regulated health and social care professionals **must** personally report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the worker has a good reason not to, they should also still consider and discuss any such case with the school or college’s designated safeguarding lead and involve children’s social care as appropriate.

The duty does not apply in relation to at risk or suspected cases (i.e. where the staff does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over. In these cases, teachers should follow local safeguarding procedures. The following is a useful summary of the FGM mandatory reporting duty: [FGM Fact Sheet](#).

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/416323/Fact\\_sheet\\_-\\_FGM\\_-\\_Act.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/416323/Fact_sheet_-_FGM_-_Act.pdf)

### **Preventing radicalisation *KCSIE September 2018 page 82-84***

Children are vulnerable to extremist ideology and radicalisation. Similar to protecting children from other forms of harms and abuse, protecting children from this risk is part of EASEs’ safeguarding approach.

Extremism is the vocal or active opposition to our fundamental values, including democracy, the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

There is no single way of identifying whether a child is likely to be susceptible to an extremist ideology. Background factors combined with specific influences such as family and friends may contribute to a child’s vulnerability. Similarly, radicalisation can occur through many different methods (such as social media) and settings (such as the internet).

However, it is possible to protect vulnerable people from extremist ideology and intervene to prevent those at risk of radicalisation being radicalised. As with other safeguarding risks, staff should be alert to changes in children, young people and vulnerable adults’ behaviour, which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children, young people and vulnerable adults who might be at risk of radicalisation and act proportionately which may include the designated safeguarding lead (or deputy) making a referral to the Channel programme.

As part of wider safeguarding responsibilities staff will be alert to

- Disclosures by young people of their exposure to the extremist actions, views or materials of others, especially where the young person has not actively sought these out.
- Graffiti symbols, writing or art work promoting extremist messages or images
- Young people accessing extremist material online, including through social networking sites
- Distributing extremist literature and documentation
- Young people voicing opinions drawn from extremist ideologies and narratives
- Changes in behaviour which could indicate that they are in need of help or protection
- Use of extremist or 'hate' terms to exclude others or incite violence
- Intolerance of difference, whether secular or religious or views based on, but not exclusive to, gender, disability, homophobia, race, colour or culture
- Attempts to impose extremist views or practices on others
- Anti-Western or Anti-British views
- Use of extremist language. 'Dawlah' – term used by ISIL to refer to the 'Islamic state' 'Jihad' – means 'struggle' or 'violence' 'Caliphate' – ISIL supporters describe the territory they control in Iraq / Syria 'Mujahid' – someone who wants to fight as part of the 'Jihad' 'Shahada' – refers to someone considered to be a martyr 'Kuffar' – a term used by ISIL to describe non-Muslims 'Ummah' – the phrase is used by ISIL to refer to the 'world community of Muslims' 'Rafidha' – word used by ISIL to refer to those who refuse to accept the Islamic state

If a member of staff has a concern that a young person or vulnerable adult is at risk of being radicalised this should be raised to a designated person in the same way as any other safeguarding concern

### **The Prevent duty**

EASE is subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions, to have “due regard<sup>103</sup> to the need to prevent people from being drawn into terrorism”.<sup>104</sup> This duty is known as the Prevent duty.

The Prevent duty should be seen as part of EASE's wider safeguarding obligations. Designated safeguarding leads and other senior leaders should familiarise themselves with the revised Prevent duty guidance: for England and Wales, especially paragraphs 57-76, which are specifically concerned with childcare.

### **Channel**

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for EASE to make referrals if they are concerned that an individual might be vulnerable to radicalisation. An individual's engagement with the programme is entirely voluntary at all stages. Guidance on Channel is available at: Channel guidance, and a Channel awareness e-learning programme is available for staff at: Channel General Awareness.

EASE's designated safeguarding lead (and any deputies) should be aware of local procedures for making a Channel referral. As a Channel partner, EASE may be asked to attend a Channel panel to

discuss the individual referred to determine whether they are vulnerable to being drawn into terrorism and consider the appropriate support required.

### **Children missing from education *KCSIE September 2018***

All staff should be aware that children going missing, particularly repeatedly, can act as a vital warning sign of a range of safeguarding possibilities. This may include abuse and neglect, which may include sexual abuse or exploitation and child criminal exploitation. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation or risk of forced marriage. Early intervention is necessary to identify the existence of any underlying safeguarding risk and to help prevent the risks of a child going missing in future. Staff should be aware of their school's or college's unauthorised absence and children missing from education procedures.

### **Forced marriage**

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some communities use religion and culture as a way to coerce a person into marriage.

The Forced Marriage Unit has published [Multi-agency guidelines](#), EASE can contact the Forced Marriage Unit if they need advice or information: Contact: 020 7008 0151 or [emailfmu@fco.gov.uk](mailto:emailfmu@fco.gov.uk).

<https://www.gov.uk/guidance/forced-marriage>

Parents who attend EASE may have been subject to forced marriage and this may have an impact of their lives and this experience could impact on their expectations with regard other members of their families

All staff should have an understanding of the signs that could indicate forced marriage and DSLs should keep up to date with developing guidance in this aspect of child protection, including attending training opportunities to supplement their child protection training.

### **Bullying**

Bullying is deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for the victims to defend themselves.

The damage inflicted by bullying is often underestimated. It can cause considerable distress to children, young people and vulnerable adults, to the extent that it affects their health and development and can be a source of significant harm, including self-harm and suicide. Professionals should be aware that bullying can rapidly escalate into sexual or serious physical or emotional abuse.

Bullying can take the following forms: physical abuse (e.g. hitting or kicking); verbal or mobile telephone/online (internet) message abuse (e.g. racist, sexist or homophobic name calling or threats); mobile telephone or online (internet) visual image abuse – these can include real or manipulated images; emotional abuse (e.g. isolating an individual from the group or emotional blackmail).



**EASE seeks to prevent bullying by (as set out in EASE's behaviour Policy):**

- developing a code of behaviour that sets out how everyone involved in our organisation is expected to behave, in face-to-face contact and online, and within and outside of our activities
- holding regular discussions with staff, volunteers, children, young people, vulnerable adults and families who use our organisation about bullying and how to prevent it
- providing support and training for all staff and volunteers on dealing with all forms of bullying, including racist, sexist, homophobic, transphobic and sexual bullying
- putting clear and robust anti-bullying procedures in place.

**Our regular discussions with staff, volunteers, children, young people and families will focus on:**

- group members' responsibilities to look after one another and uphold the behaviour code
- practising skills such as listening to each other
- respecting the fact that we are all different
- making sure that no one is without friends
- dealing with problems in a positive way
- checking that our anti-bullying measures are working well.

**Responding to bullying**

We will make sure our response to incidents of bullying takes into account (as set out in EASE's anti-bullying policy):

- the needs of the person being bullied
- the needs of the person displaying bullying behaviour
- needs of any bystanders

**EASE as a whole.**

We will review the plan we have developed to address any incidents of bullying at regular intervals, in order to ensure that the problem has been resolved in the long term.

**We will be proactive about:**

- seeking opportunities to learn about and celebrate difference
- increasing diversity within our staff, volunteers, children and young people
- welcoming new members to our organisation.

**Online Abuse/E-Safety**

The internet, mobile phones, social networking and other interactive tools and spaces have transformed the way in which we live. Children, young people and vulnerable adults are among the early adopters of the new technologies and move effortlessly between the various interactive services and devices to communicate, create and share content with family and friends.

While most children, young people and vulnerable adults use the internet responsibly and safely, it is essential that all potential risks are recognised, identified and mitigated, and that staff and volunteers feel confident about evaluating e-safety and seeking help when needed.

E-safety can be broken down into four over-arching issues:

- Unwanted contact/grooming.
- Cyberbullying.
- Harmful content or illegal materials.
- Privacy/digital footprints.

EASE has the responsibility to firstly support children, young people and vulnerable adults to stay safe online and secondly to manage an e-safe environment within their organisation. Supporting children, young people and vulnerable adults to stay safe online.

All staff and volunteers have the responsibility to support children and young people to stay safe and use internet responsibly by:

- Educating children, young people and young people about the potential risks and ways of avoiding/mitigating them.
- Raising awareness of issues such as grooming, cyberbullying, technology-based sexual exploitation and pornography.
- Providing children, young people and vulnerable adults with information about expert organisations and sources of help and advice.
- Supporting parents and carers to effectively monitor their children's access to and use of internet and help their children stay safe online. Key messages for children and young people:
  - Know who you're talking to, as people aren't always who they say they are.
  - Learn how to use and set security settings across a range of devices.
  - Keep your personal information private.
  - Know how to report on sites and services you are using.
  - Implications of owning a mobile and location services.
  - Understand your digital footprint.
  - Implications of self-taken images and video.
  - Future implications of actions of online behaviour.

### **EASE's e-safe environment**

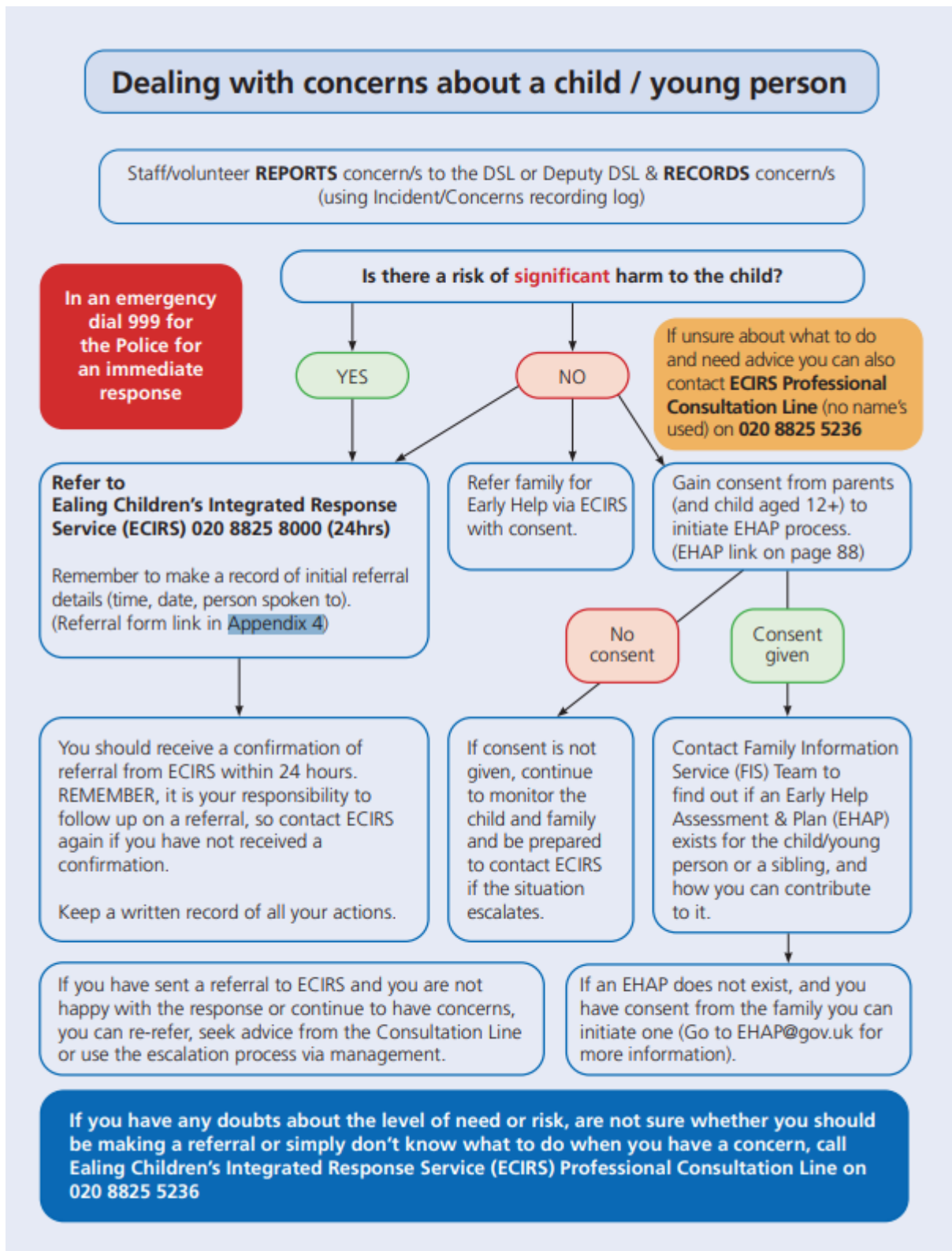
It is the responsibility of the Nominated Safeguarding Person (NSP) and management to ensure EASE has an e-safety policy and clear rules regarding the use of the internet, social media, mobile phones and any other modern technology tools within the workplace.

The main rules that staff and volunteers should follow are:

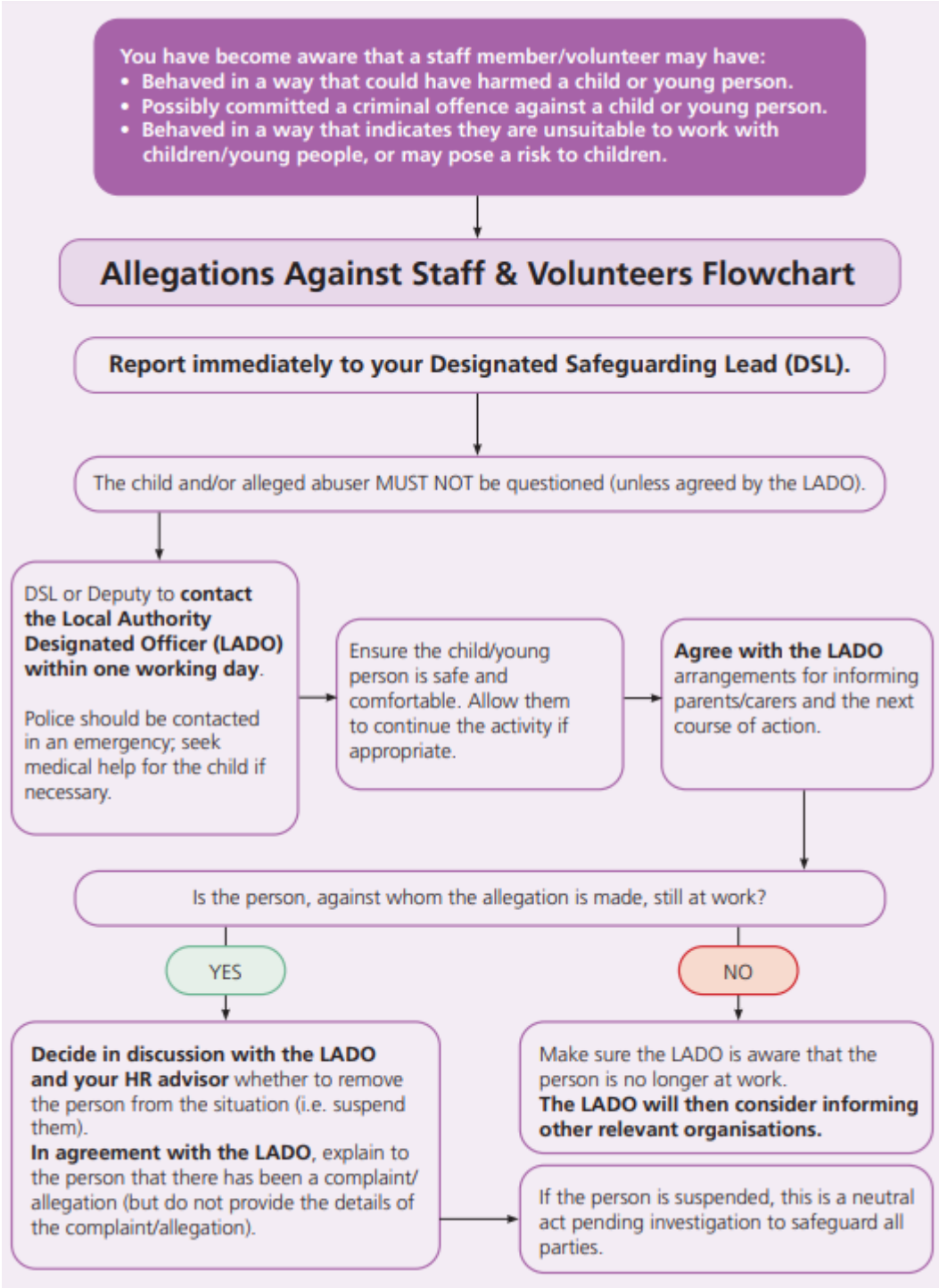
- Avoid using personal technology (mobile phones, email addresses etc.) for professional business. Use equipment provided by EASE.
- Do not take photographs of children, young people or vulnerable adults on your mobile phone or personal camera.
- Do not accept or invite children or their families as 'friends' or contacts on social networking sites.
- Remember if you use social networking sites and your security settings are public these can be viewed by the children, young people or families you are working with. Ensure your personal profile on social media websites (such as Facebook) is not publicly visible and that it does not contain any inappropriate content (such as pictures of you while drunk or wearing revealing clothing).
- Make all staff, children, young people and vulnerable adults aware of the meaning and importance of professional boundaries and how they impact on the relationship between children/young people and staff/volunteers.

Appendix 6 shows an e-safety/online abuse flowchart of responding and reporting if a child/young person/vulnerable adult or member of staff raises a concern.

Appendix 1



Appendix 2



**MULTI- AGENCY REFERRAL WHEREBY AN ALLEGATION HAS BEEN MADE AGAINST STAFF OR VOLUNTEER WHO WORKS WITH CHILDREN**

Note to Referrers:

This form should be used to make a referral to children’s social care, regarding a staff member/volunteer against whom an allegation has been made, in line with Chapter 7 of the London Child Protection Procedures, Keeping Children Safe in Education and Working Together 2015, 2018 and 2023.

Once completed please return securely within 1 working day of the incident to: [aap@ealing.gov.uk](mailto:aap@ealing.gov.uk) or [child.protection@ealing.cjsm.net](mailto:child.protection@ealing.cjsm.net)

Contact telephone number for LADO queries: 020 8825 8930

**LADO REFERRAL FORM**

Incident Date	
Referral Date	
Reason, if more than 24hrs since incident	
<b>Details of Staff/Volunteer subject to Allegation:</b>	
Name of staff/volunteer	
Date of Birth	
Language spoken	
Ethnicity	
Home/main address incl. postcode	
Occupation	
Place of Work address	
<b>Details of Employer/organisation:</b>	
Name of employer/organisation	
Address	
Contact name and tel number	
<b>Details on Children involved:</b>	
CP Process initiated?	
Name of allocated social worker /team	
Name/s and dates of birth of child/ren	
Home address	
Language spoken	
Ethnicity	
Does allegation relate to child’s LAC placement?	
<b>Details of Referrer:</b>	

Name	
Contact tel number	
Position/role	
Name and address of organisation	
<b>Details of the Allegation:</b>	
<p>Please provide the following information regarding the allegation</p> <ul style="list-style-type: none"> <li>• Details of the allegation</li> <li>• Date/s of the allegation</li> <li>• Details of where the incident is alleged to have taken place</li> <li>• Details of any injuries</li> <li>• Details of any witnesses and involvement of police or other agencies to date</li> <li>• What actions have been taken forward to date i.e. has the professional been suspended or moved to a different place of work</li> </ul>	
Main abuse category	Physical      sexual      emotional      neglect If physical did allegation result from staff/volunteer using authorised physical intervention?
What safeguarding arrangements have been put in place for the child?	
Are there any relevant concerns about the child we need to be aware of?	

Have Human Resources been informed?	
-------------------------------------	--

**Feedback to Referrers:**

Your referral will be forwarded to the LADO who will aim, **as a guideline**, to respond to your referral within 24 hours.

Please contact us

- If you do not hear back from us within 3 working days regarding the outcome and/or progress of your referral
- If you wish to discuss the decision made regarding your referral
- If you encounter any difficulties in relation to your referral that you wish to bring to the attention of the LADO

**Appendix 3 – Incident/Concern Recording Log**

<b>Section 1: Details of the child and their parent/carer</b>		
Name of child/young person:		
Gender:	Date of birth:	
Ethnicity:	Religion:	Childs first language:
Name of parent/carer(s):		
Home address (including postcode) and address of parent, if different to child:		
Communication needs (interpreter/signer/other):		
Additional Needs/Disability:		
Sibling info:		
<b>Section 2: Your details</b>		
Your name:	Your position:	Date and Time of Incident:
<b>Section 3: Your report</b>		
Are you reporting your own concerns or responding to concerns raised by someone else?		
<input type="checkbox"/> Responding to my own concerns <input type="checkbox"/> Responding to concerns raised by someone else	If responding to concerns raised by someone else, please provide their name and position within the organisation:	
Please provide details of the incident or concerns you have, including times, dates or other relevant information (such as a description of any injuries, whether you are recording fact, opinion or hearsay):		



The child / young person's account, if it can be given, of what has happened and how:

Please provide details of the person alleged to have caused the incident / injury including, where possible, their name, address and date of birth (or approximate age):

Please provide details of any witnesses to the incident(s):

Your signature:

**Designated Safeguarding Lead (DSL) received information**

Date:

Time:

DSL's signature:

Appendix 4



# Referral Form



## Ealing Children's Integrated Response Service (ECIRS)

If you are a professional and are worried about a child and would like to discuss your concerns, you can contact the ECIRS Consultation Line to obtain help or advice.

**ECIRS Consultation Line for Professionals Telephone: 020 8825 5236 Monday to Friday, between 9am and 5pm**

If at any time you become concerned that a child has been harmed or is at risk of harm – call ECIRS immediately on 020 8825 8000 (24-hour number). After office hours calls to this number will go the Emergency Duty Team (EDT).

**NB:** Where there is an urgent and immediate need to protect a child, dial **999** to contact the Police.

Date Completion of Form

### 1) Child / Young Person Details

Forename  Surname

DOB or expected date of delivery  Gender  Male  Female  Other  Unknown

Address  Postcode

NHS Number

Immigration Status (Right to remain in UK)  Yes  No  Unknown  Pending

Mobile  Email

Interpreter Required  Yes  No First Language

School, Nursery or College name and Postcode

Does the child/young person have an additional need, disability or significant health issue?

Yes  No  Unknown If Yes add details below

Does the child / young person have an Education, Health and Care Plan (EHCP)  Yes  No  Unknown

Is there an Early Help Assessment and Plan (EHAP)? If yes attach the EHAP form to this referral  Yes  No  Unknown

Is the child/young person a Child Looked After?  Yes  No  Unknown

If Yes name of responsible authority

### Child / Young Person Ethnicity

Asian or Asian British  British Indian  Pakistani  Bangladeshi  Any other Asian background\*

Black or Black British  Caribbean  African  Any other Black background\*

Chinese or other ethnic group  Chinese not given  Arab  Any other ethnic group\*

Mixed  White & Black Caribbean  White & Black African  
 White & Asian  Any other mixed background\*

White  White British  White Irish  Gypsy/Roma  Traveller of Irish heritage  
 Any other White background\*

Not Given \*If other please specify:

**If at any time you become concerned that a child has been harmed or is at risk of harm call ECIRS immediately on 020 8825 8000 (24-hour number).**

## 2) Parent Carer Details

### Parent/Carer 1

Forename  Surname   
 Date of Birth/Age  Gender  Male  Female  Other  Unknown  
 Address if same as child please tick   Postcode   
 Mobile  Email   
 Ethnicity  Relationship   
 Interpreter Required  Yes  No First Language

### Parent/Carer 2

Forename  Surname   
 Date of Birth/Age  Gender  Male  Female  Other  Unknown  
 Address if same as child please tick   Postcode   
 Mobile  Email   
 Ethnicity  Relationship   
 Interpreter Required  Yes  No First Language

## 3) Other children and adults living in the home

Forename	Surname	DOB/Age	Relationship	Gender	Same Address	Ethnicity	School/Setting
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 4) Agencies currently involved with the child/ren and their family

Agency	Named worker	Telephone number	Email address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 5) General Practitioner (GP) Details

Is the family registered with a GP  Yes  No Practice / Health Centre   
 Telephone  Email

If at any time you become concerned that a child has been harmed or is at risk of harm call ECIRS immediately on 020 8825 8000 (24-hour number).

**6) Area/s of Safeguarding Concern – tick all those that apply & expand/describe why in section 7**

Physical Abuse	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Private Fostering	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Neglect	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Young Carers	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sexual Abuse	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Domestic Abuse	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Emotional Abuse	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Radicalisation / Extremism -Prevent	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Substance Misuse	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Female Genital Mutilation (FGM)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Missing from Home, Care, Education	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Modern Slavery / Trafficking	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Parental Mental Health	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have the police been called or involved	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Online abuse	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes provide CAD number	<input type="text"/>		<a href="#">Contextual Safeguarding</a> e.g. child exploitation – sexual, criminal; serious youth violence; gangs	<input type="checkbox"/> Yes	<input type="checkbox"/> No

For further guidance see also: [Thresholds of Need and Assessment Protocols 2019/20 | Ealing Council](#)

**7) Reason for Referral (please provide as much details and context as possible)**

What are you worried about?

What is the immediate risk?

Based on your concern what is the impact on the child/young person?

What is keeping the child/young person safe?

What intervention or support have you given the family?

What are the views of the parent/s or carer/s and young person?

Other comments

**If at any time you become concerned that a child has been harmed or is at risk of harm call ECIRS immediately on 020 8825 8000 (24-hour number).**

### 8) Consent Details

You should seek consent and explain to parents/carers why, what, how and with whom, their information will be shared. The GDPR and Data Protection Act 2018 do not prevent, or limit, the sharing of information for the purposes of keeping children and young people safe.

There are certain circumstances in which consent or informing parent/carers of a referral to ECIRS is **not** required or in the child's best interests, this is when seeking consent would:

1. Put the child at further risk of harm
2. Compromise a criminal investigation
3. Cause undue delay in taking action to protect the child

Further guidance <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>

Has consent been obtained for sharing and storing the child and family's information?

Yes  No

If No state reason why consent has NOT been obtained

### 9) Referrer Details

Full name  Position / Role

Organisation

Address  Postcode

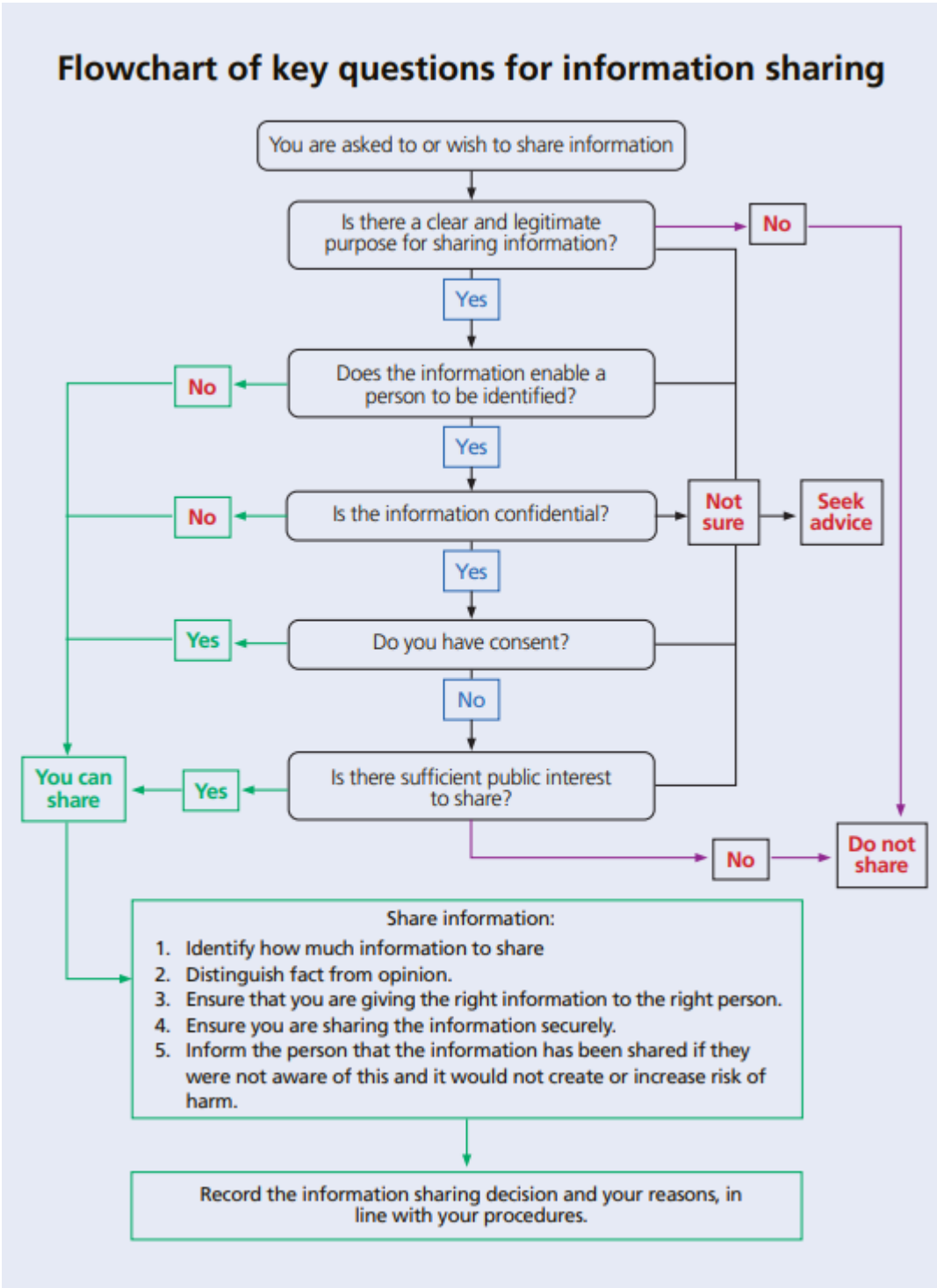
Telephone  Email

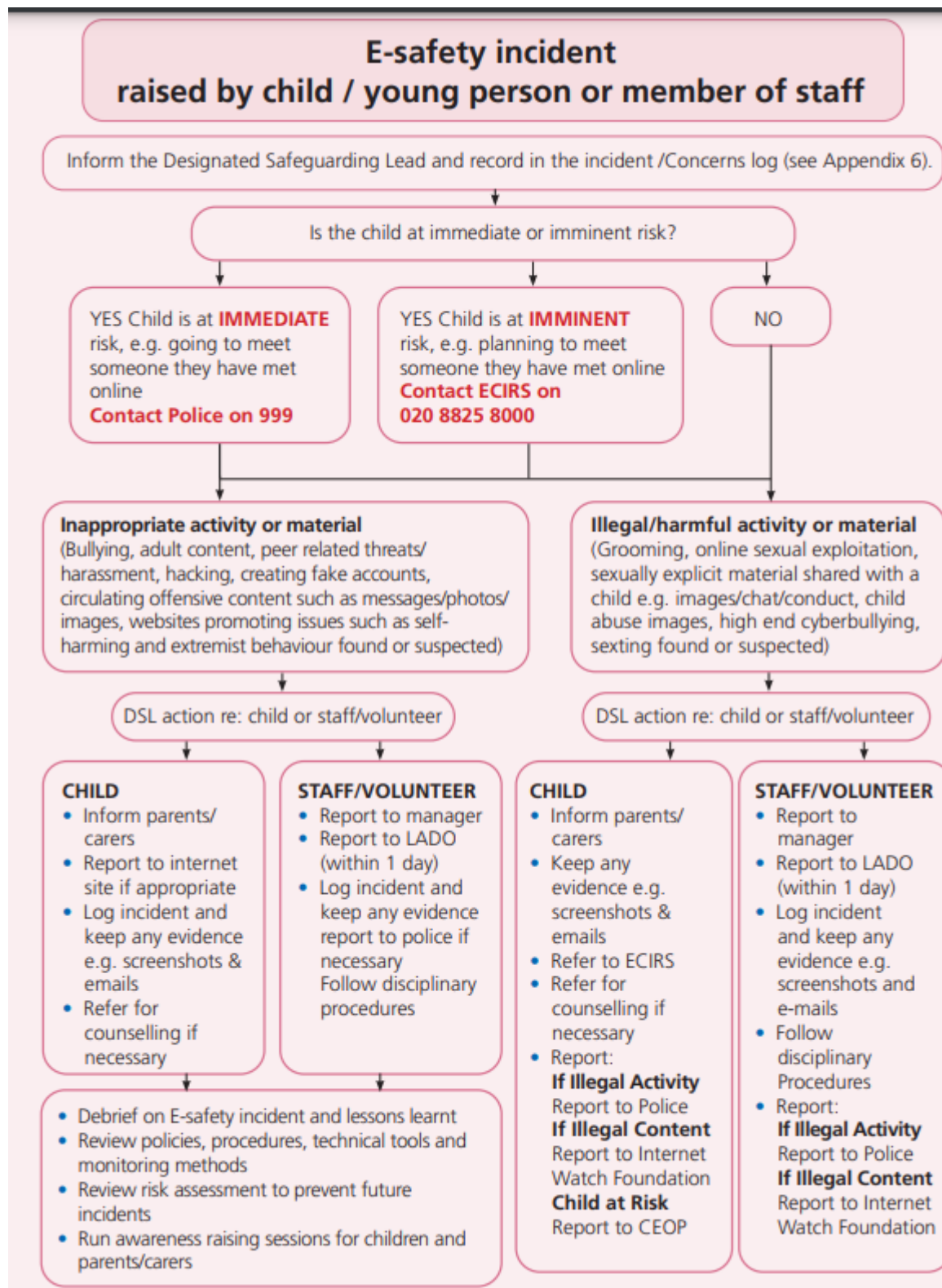
Please send your completed form securely to Ealing Children's Integrated Response Service: [ECIRS@ealing.gov.uk](mailto:ECIRS@ealing.gov.uk)  
You will initially receive an automated response. If you do not receive this immediately please telephone ECIRS who will contact you directly to discuss the referral.

**If at any time you become concerned that a child has been harmed or is at risk of harm call ECIRS immediately on 020 8825 8000 (24-hour number).**

All appendixes can be found on the system and in the Safeguarding Folder

Appendix 5





# ECIRS CONSULTATION LINE

## 020 8825 5236

A telephone Consultation Line for professionals provided by Ealing Children's Integrated Response Service (ECIRS) & Multi Agency Safeguarding Hub (MASH).

**No matter how experienced you are as a professional, there may be times when you want to discuss a worry about a child. You may be unsure about what action to take and need some support and guidance to make the most appropriate decision.**

If you are a professional and are worried about a child and would like to discuss your concerns, you can contact the **ECIRS Consultation Line** to obtain help or advice.

#### The ECIRS Consultation Line will:

- Offer quick and easy access to Children's Social Care advice
- Provide advice regarding Ealing Children's Services Thresholds of Need
- Provide advice about universal, targeted and early help services within Ealing
- Provide the opportunity for professionals to discuss concerns, to help determine the appropriate response, without giving a name or making a referral.

**If ECIRS considers that your worry about a child is a safeguarding concern, you will be informed to make a direct referral to ECIRS on 020 8825 8000 (option 1)**

#### What to do prior to contacting the Consultation Line

- If the child has an allocated social worker, you should contact them directly
- Do consider whether you have the appropriate resources within your own organisation to help and assist the child before contacting the Consultation Line.

#### What to expect from the Consultation Line

- There will be consultation offered by a qualified and experienced social worker based in ECIRS/MASH who will offer advice and support
- There will be a record of the nature of the discussion for monitoring and trend purposes
- The Consultation Line is not to be used to discuss or make a referral ECIRS/MASH. It is not a short cut to a referral into ECIRS/MASH
- The Consultation Line is open from Monday to Friday between 9am and 5pm.

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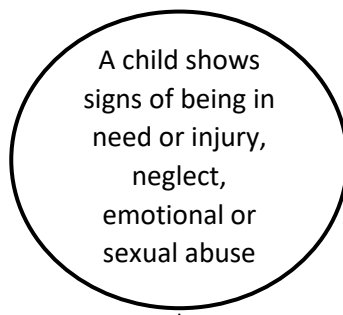
## Children's Services





<b>Copley Close Children's Centre</b>	
<b>Name of lead Organisation:</b>	EASE
<b>Name of lead Organisation's Designated Safeguarding Lead</b>	MICHELLE BAILEY -EASE and Copley Close Children's Centre

When following your procedures for reporting a concern regarding a child, young person or vulnerable adult, please refer to Ealing's Thresholds of Need Guide 2016



Please note: If the concern relates to actions of lead or other organisation, staff members follow guidance for Allegations against Professionals and volunteers (in the Yellow Book 2022)

**Immediately inform the Designated or Deputy Safeguarding Lead and The Nominated Safeguarding Person (NSP) for EASE**

**If you work for the lead organisation and the child is in your care**

**If you work for another organisation and the child is in your care**

The DSL/Deputy follows procedures and reports concerns to Children's Services

The DSL/Deputy of your organisation follows procedures and reports concerns to Children's Services

Regardless of the route taken, The DSL/Deputy involved **MUST** feedback to each other the nature of the concern, actions taken and the outcome of the referral (if made)

DSL/Deputy must consider the needs of any siblings accessing a service delivered by the lead or other organisation at or through the centre.

**If threshold is not met for a referral the individual with concerns or the DSL should monitor the situation. If the child's situation does not appear to improve, you must reconsider a referral to ECIRS**

**IN AN EMERGENCY OR IF YOU HAVE A GENUINE CONCERN THAT APPROPRIATE ACTION HAS NOT BEEN TAKEN, INDIVIDUALS CAN MAKE REFFERAL DIRECTLY TO ECIRS**