



Safeguarding Children at Baobab: Policy and Practice Guidance

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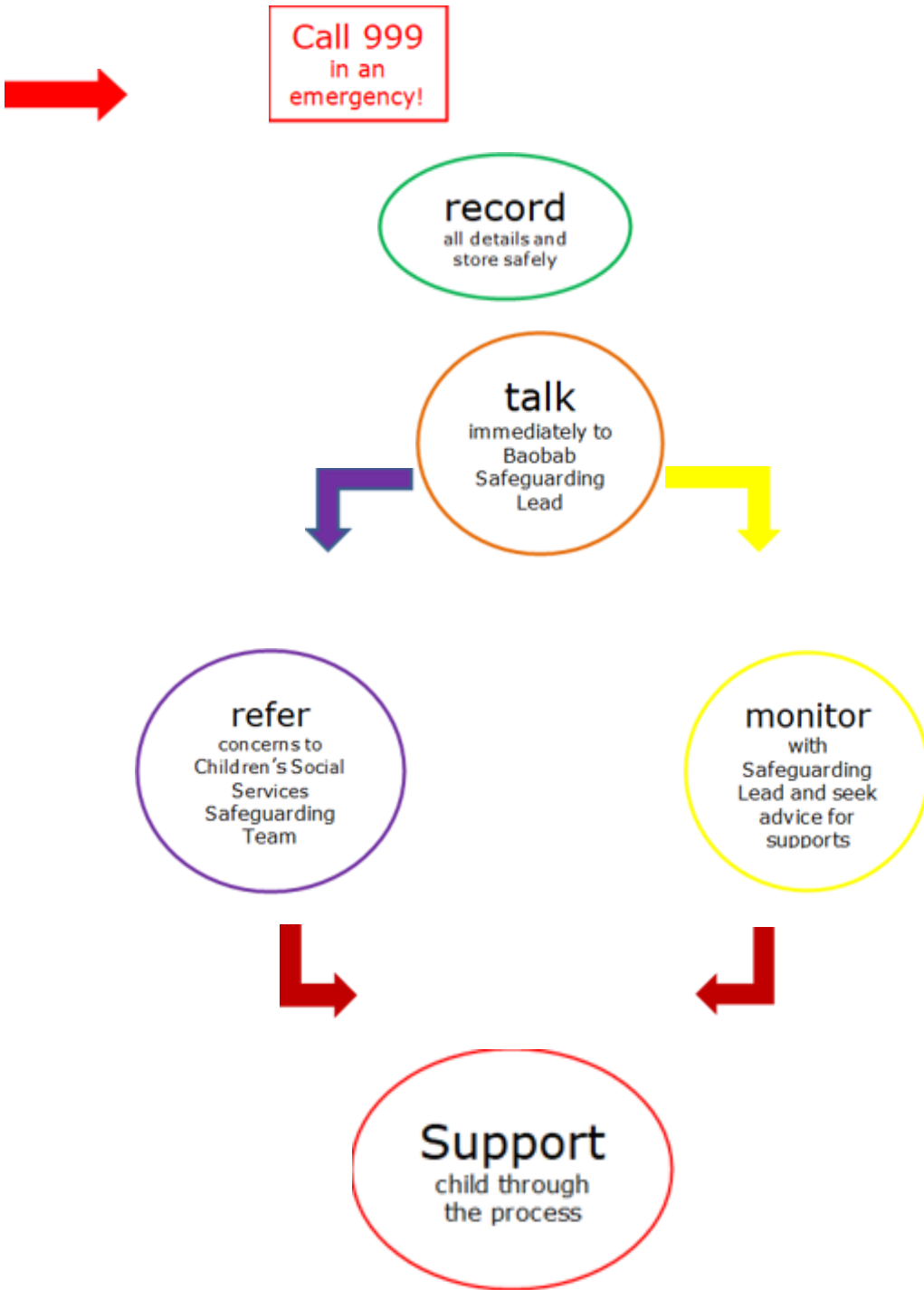
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Safeguarding Children at Baobab

Listen carefully to each young person **Observe** non-verbal communication



It is very important to be clear and straight forward to the child about the need to share their story with others to ensure they are safe and protected. They need to be reassured that they have a right to be protected.

Baobab Centre Safeguarding Children

Policy and Practice Guidance

Safeguarding at the Baobab Centre for Young Survivors in Exile refers to the act of protecting an individual's human and civil right to live in safety and free from abuse. This Safeguarding Children Policy and Practice Guidance document focusses on how the Baobab Centre safeguards and protects children and young people who are under the age of 18 years old.

1. Baobab Centre Safeguarding Policy Statement

1.1 The terms '**child**' or '**children**' throughout the document **refer to both children and young people** who are under the age of 18 years old and receiving Baobab support services.

1.2 The term '**staff**' is used throughout this policy and practice document to refer to both **paid staff and volunteers** at the Baobab Centre. Its purpose is to outline what safeguarding refers to, the legislative framework and statutory obligations guiding our practice and makes clear the procedures that all Baobab staff must follow when safeguarding concerns are identified.

1.3 The Baobab Centre upholds that all children and young people have the right to be safe and to be protected from harm, either deliberate or unintentional.

1.4 The Baobab Centre recognises that some groups of children may be more vulnerable to harm or exploitation because of disability, Immigration /refugee status, Care Status, and other social and economic factors. They may also be more vulnerable owing to their history of child and adolescent specific human rights abuses and specifically being hurt by others more powerful than them or being forced to carry out actions against their will in very frightening situations where they felt that they might be further hurt or killed.

1.5 *Safeguarding is everyone's responsibility* and for Baobab's services to be effective, each individual and organisation must play their full part in protecting children and their best interests, by following a child centred approach. This is paramount.

1.6 The Baobab Centre recognises its organisational responsibilities and those of all its staff, in accordance with the government legislation and guidance relating to safeguarding and protecting children. Adults working at the Baobab Centre need to be aware of the general situation of all young people in the Baobab Community and think about their history and their current situation. Many young people at Baobab have a history of abuse in both community and interpersonal contexts that make some vulnerable to further abuse.

1.7 The Baobab Centre is committed to safeguarding and promoting the welfare of each child and operates in accordance with the Children Act 1989 and Children Act 2004, which provide the legal framework for the care and protection of children and young people (defined as up to 18 years old) in England. The associated statutory guidance 'Working Together to Safeguard Children', updated in 2018 outlines how the legal framework is implemented in practice.

1.8 The statutory guidance "Working Together to Safeguard Children", updated in 2018, promotes inter-agency working to safeguard and promote the welfare of children. It outlines specific and detailed guidance for agencies, such as the Baobab Centre, who work to safeguard and protect

children. As a response, Multi -Agency Safeguarding Hubs (MASH) including Children’s Social Services, Police, Health and Education have been established.

1.9 The guidance, outlined the need for Local Safeguarding Children Partnerships to be established across the UK to develop and promote this multi-agency approach to working together to safeguard children. Each London borough has formed their own Local Safeguarding Children Partnerships consisting of statutory and voluntary non- government agencies to monitor safeguarding practice and ensure children are protected.

1.10 The London Safeguarding Children Partnership safeguarding and child protection procedures, incorporate statutory services legal obligations and duties related to the mandatory reporting of Female Genital Mutilation and Prevent Strategy practice requirements, which all agencies, including the Baobab Centre, must adhere to.

1.11 Whilst not having statutory duties or power under the Children Act (s) to investigate any suspicions or allegations of abuse, the Baobab Centre does have a duty to report safeguarding concerns, so that agencies powered with investigative responsibility, can do so.

1.12 Baobab Staff must refer to the legislation, statutory guidance: including the London Safeguarding Children Partnership child protection procedures by referring to the online links in Appendix 8.

1.13 The Baobab Centre has a duty under its charitable status to provide:

- Training in child safeguarding and protection for all staff and trustees at least once per year.
- An awareness of roles and responsibilities of staff
- Clear procedures about reporting incidents/ concerns.
- A good working relationship with agencies charged with investigative responsibilities.
- Procedures to ensure safe recruitment of staff.
- Procedures to cover allegations against staff.

1.14 This Safeguarding Policy and Practice Guidance is for the protection of all children and staff at the Baobab Centre regardless of their race, culture, gender, religion, refugee status, ability, or disability, marital status and medical condition.

1.15 Most children at the Baobab Centre are supported by local authority Children’s Social services teams or Leaving Care teams, living in semi- independent accommodation with an allocated Social Worker (up to 18 years) or Personal Adviser (16-18 years). A small number of children who attend the Baobab Centre are residing with a family relative or have been placed in foster care by children’s social services. Some may have been age disputed by social services and are not provided with any social services support. This group is particularly vulnerable. Staff need to think about two key points:

A) that an age assessment is not a simple and clear process.

B) that all the young people attending the Baobab Centre are traumatised, most suffer from complex post- traumatic stress disorder, a cluster of symptoms which include developmental difficulties so young people tend to function developmentally in an unstable way and mostly at the developmental phase they were in when they initially experienced overwhelming and traumatic events.

1.16 Baobab supports some adults who have children of their own. These families may have some involvement with children’s social services or may be receiving leaving care service provision themselves. Some of these families are under the ‘care’ of the Home Office Asylum Support system. These young people are not offered involved support and care but simply material ‘care’ in the form of accommodation and a small subsistence allowance.

1.17 Baobab children may be involved in domestic violence in their home, be it foster care, semi-independent or supported care, and may be at risk of physical or emotional abuse. Baobab staff must report any signs or allegations of domestic abuse to the SL.

1.18 The Baobab Centre emphasises a key message that if you are concerned about the welfare of any child or suspect that a child is being, or is at risk of being, neglected or abused physically, emotionally or sexually:

Do not keep ANY safeguarding concerns to yourself.

1.19 All safeguarding concerns must be communicated with the **Baobab Centre Safeguarding Lead (SGL)** who will advise on what immediate action is to be taken. It is critical that staff feel able to discuss any concerns they may have and ask for advice if they are unsure.

2. Role and Responsibility of the Safeguarding Lead

2.1 The Baobab Centre SGL is **Jodie Bourke, Senior Social Worker** at the Baobab Centre. The SGL is the person staff must talk to about any safeguarding concerns they may have.

2.2 In the absence of the SGL, **Sheila Melzak, Director of the Baobab Centre and Consultant Clinical Child and Adolescent Psychotherapist** must be consulted about all safeguarding concerns. Where both are not available, the Board of Trustees Committee Chairperson or the trustee with particular responsibilities for safeguarding who is currently Gill Martin.

2.3 Baobab Centre SGL responsibilities include:

- To arrange regular annual safeguarding children training for all Baobab staff
- To review and update the Baobab Centre Safeguarding Children Policy and Guidance document annually
- To ensure all staff have a thorough knowledge and understanding of the guidance document and to whom the SGL is to report any concerns they may have
- To be available to staff when necessary and offer advice and support on all safeguarding matters.
- To record and monitor children, that present safeguarding concerns,
- To ensure that staff with concerns both communicate verbally and in writing.
- To ensure that a professional level of confidentiality is exercised and that information about children are conveyed on a “need to know” basis.
- To refer concerns to the relevant Children’s Social Services Teams as they arise
- To inform parents and carers about safeguarding concerns and any referrals to social services, UNLESS, informing parents will put children at risk of harm. In such situations a plan of action needs to be thought about and decided.

2.4 In the absence of the SGL, the Director of the Baobab Centre, Sheila Melzak will assume the SGL role and meet all responsibilities as outlined above.

3. Related Policy and Practice Documents

2.5 The following are related to and are to be read in conjunction with this Safeguarding Children Policy and Practice Guidance document. All policies can be located on the Baobab Centre Database in the One Drive ALL FILES in the staff resources 'final policies' folder.

- Whistle Blowing
- General Data Protection Regulation (GDPR) -Confidentiality and Access to Information
- Recruitment and Selection
- Induction, Training and Development
- Support Planning
- Disciplinary Action and Grievance procedure
- Volunteering
- Risk Assessment and Trustees
- Safeguarding Vulnerable Adults Policy and Procedure Guidance

3. Recruitment of Staff

2.6 All Baobab staff are provided with a hard copy of all policies, including the Safeguarding Children Policy and Practice document. Digital copies of all policies are accessible to all staff on the Baobab Centre One Drive database system in the ALL-FILES, staff resources folder.

2.7 All Baobab staff are inducted and provided with annual training and are expected to have a thorough knowledge and understanding of the Baobab Centres Safeguarding Children Policy and Practice Guidance, along with the other key policy documents mentioned above.

2.8 The Baobab Centre implements a 'Safer Recruitment' process to recruit all staff. Safer Recruitment is designed to protect children's welfare at every point where they are in contact with professionals in a safeguarding role. Our Safer Recruitment policy assists to identify and deter or refuse individuals who are deemed to be at risk of abusing children.

The recruitment legislation enforces pre-employment checks for all prospective staff to seek out anyone who may not be suitable to work with children and vulnerable young people. Our safer recruitment process is in adherence to recruitment legislation and is in line with our Equal Opportunities policy.

2.9 Staff must complete an application form, providing contact details for two referees. The Baobab Operations Manager is responsible for ensuring that referees are contacted, and written references are provided. Referees are asked to provide information on records of disciplinary procedures and any safeguarding matters involving the prospective staff member.

2.10 Applicants for all posts at the Baobab Centre are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974.

2.11 Applicants for all posts are informed of the need to carry out enhanced disclosure checks with the Disclosure and Barring Service (DBS) before the post can be confirmed; staff who are in the process of waiting for DBS clearance will not have unsupervised access to children. A photo check of all new staff against official documentation such as a passport or driving licence is completed. Additional identification documents are required such as utility bills and bank statements to confirm identity and current address.

2.12 The Baobab Centre abides by Ofsted requirements in respect of references and DBS checks for all staff to ensure that no disqualified person or unsuitable person works at the Baobab Centre or has any access to children.

2.13 The Baobab Centre maintains an up-to-date register of staff DBS details and review dates. Staff are supported to add their details to the online automatic DBS updating system to ensure details are correct at review and are regularly updated.

2.14 The Baobab Centre operates a recruitment probationary period of 6 months. This enables staff practice to be reviewed and monitored to ensure policy and practice guidance requirements are implemented and that staff are developing understanding of the needs of our population who have all had overwhelming and traumatic experiences including violence to their bodies, their minds and the course of their development.

3. Staff Awareness of Safeguarding Policy and Practice Guidance

3.1 The Baobab Centres Safeguarding Policy and Practice Guidance is made readily available to all staff, volunteers, and trustees. All staff are required to attend a thorough induction when they start in the role.

3.2 A copy of the document is provided to all staff in hard copy form and in addition to this, all staff have access to the digital policy document folder on the Baobab Centre database system.

3.3 Every member of staff must attend annual safeguarding trainings and are expected to know how and when to respond to suspected abuse. Staff supervisions will be utilised to review and develop safeguarding practice.

3.4 All staff, are provided with copies of the Baobab Centre Incident/ concern reporting form attached in Appendix 1. Baobab staff are trained on how to complete the form, file the form and the importance of discussing the information on the form with the SGL.

4. Parent/ Carer Safeguarding Partnership

4.1 The majority of children who attend the Baobab Centre arrived in the UK as unaccompanied minors, separated from their families (who may have disappeared, who may be dead and who may be in their home country.). Most have no family in the UK. Where children are accompanied by parents/ carers, significant family members, Baobab works in partnership with parents/ carers and Children's Social Services Teams, if they are involved in the child's care, to ensure children are adequately supported and safeguarded against risk of harm.

4.2 When a child begins attending the Baobab Centre, their parents/carers are informed about the safeguarding at the Baobab Centre and duties to report any safeguarding and protection concerns to the relevant authorities if required.

4.3 Parents/ Carers and any allocated Social Worker or Personal Advisers from Children's Social Services team are encouraged to bring any concerns about the child's welfare to the attention of the child's key worker at the Baobab Centre, promoting a working together approach to their care. For the majority of children attending the Baobab Centre their key worker is also their individual psychotherapist

4.4 The Baobab Centre will ensure that Children Social Services are updated about the child's welfare and any accidents / incidents records. The child's Baobab key worker must regularly update the SL on the child's progress.

4.5 Baobab staff will continue to welcome the child and the parent/ carer as normal whilst any assessments/ investigations are being carried out unless advised otherwise by Children's Social Services or the Police.

5. Definitions of Abuse

5.1 The Baobab Centre is committed to providing all its staff members, trustees and volunteers with adequate safeguarding training, to ensure they understand the primary types of abuse, the main indicators and the subsequent damage to children. Four categories of abuse are usually identified:

a) Physical abuse - is causing physical harm to a child. This may involve injuring a child by hitting, shaking, throwing, poisoning, burning, or scalding, drowning or suffocating. It may also be caused when a parent / carer fabricates symptoms of or induces illness in a child.

b) Emotional and psychological abuse - is the persistent emotional ill treatment of a child such as to cause severe and persistent effects on the child's emotional development

c) Neglect - Neglect involves 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 and development. Neglect may occur during pregnancy as a result of maternal substance misuse. Particularly when we think about troubled children, placed in independent accommodation, neglect of their needs by the local authorities or the agencies to whom care is outsourced by SS is a common feature.

d) Sexual abuse - Sexual abuse involves forcing or enticing a child to take part in sexual activities, including prostitution, whether or not s/he is aware of what is happening.

Activities may involve physical contact, including penetrative and non-penetrative acts. Sexual activities may also include non-contact activities, e.g. involving a child in looking at / production of abusive images, watching sexual activities, or encouraging her/him to behave in sexually inappropriate ways.

Children under sixteen years of age cannot lawfully consent to sexual intercourse, although in practice may be involved in sexual contact to which, as individuals, they have agreed. A child of under thirteen is considered in law incapable of providing consent..

The following descriptions of abuse often involve a combination of abuse types and are often more difficult to identify impact and risk. It is critical for staff to discuss any indications a child may be at risk due to these specific examples of abusive situations.

Young people referred to the Baobab Centre after experiences of trafficking for labour, crime or sexual exploitation routinely find it hard to care for themselves and are vulnerable to re-trafficking for a variety of reasons.

5.2 Domestic violence

Domestic abuse can be characterised by *any of the types of abuse* outlined above. It is important for staff to consider all indicators where there is a suspicion or reported incident involving a child in a domestic situation. Where there is domestic violence occurring, children are in significant risk of harm.

- physical
- psychological
- sexual
- financial
- emotional.

5.3 Self-Neglect

Can be identified where an older child is seen to be not looking after themselves appropriately. Many children aged 16 – 18 years old are supported live in semi-independent accommodation with very limited adult supervision and support. Therefore, they may be at risk of self-neglect. Some indicators may include:

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one's personal hygiene, health or surroundings
- Inability to avoid self-harm
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one's personal affairs

5.4 Discriminatory abuse

This is where a child is suffering harassment, bullying or ill-treatment because of their age, disability, ethnic origin, sexuality or gender. Unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, (ethnicity and nationality) religion and belief, sex or sexual orientation (known as 'protected characteristics' (under the Equality Act 2010) Some examples of discriminatory abuse may include:

- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic use
- Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic.

For the Baobab population key issues of discrimination include re-trafficking, racism and xenophobia, and intolerance of mental health symptoms.

5.6 Organisational or institutional abuse

This refers to repeated poor care of young person at risk through neglect or poor professional practice in a paid or regulated support setting. For example, in contracted semi-independent housing provider accommodation where key workers are on the premises. Some types of abuse which may occur for Baobab young people include:

- Authoritarian management or rigid regimes
- Lack of leadership and supervision

- Insufficient staff or high turnover resulting in poor quality support
- Abusive and disrespectful attitudes towards people using the service
- Lack of respect for dignity and privacy
- Not providing adequate food and drink, such as in asylum support accommodation
- Limited supervision and support in semi-‘independent living accommodation’ by contracted key workers
- Not offering choice or promoting independence
- Not taking account of individuals’ cultural, religious or ethnic needs
- Failure to respond to abuse appropriately
- Failure to respond to complaints

5.7 Modern Slavery

Children receiving support from Baobab may have experienced modern slavery and some may still be at risk. Modern slavery has many forms, but some examples include human trafficking, forced labour and domestic servitude where people are forced into a life of abuse and inhumane treatment.

- Mandatory reporting and Modern Slavery

From the 1st November 2015, specified public authorities have a duty to notify the Home Office of any individual encountered in England and Wales who they believe is a suspected victim of slavery or human trafficking. The ‘duty to notify’ provision is set out in the Modern Slavery Act 2015 and applies to all police forces and local authorities in England and Wales, the Gangmasters Licensing Authority, and the National Crime Agency. Home Office staff within UK Visas and Immigration, Border Force and Immigration Enforcement are also required, as a matter of Home Office policy, to comply with the duty to notify.

Baobab Staff must discuss any concern with the Baobab SGL and ensure children at risk or survivors of modern slavery are encouraged to talk to their legal representatives and allocated Social Workers or Personal Advisers at social services where it has been identified they are a potential victim or survivor of modern slavery. This will enable further advice to be shared and decisions to be made to safeguard and protect.

‘First Responders’ are organisations who have been identified by the government as authoritative bodies who can place reports via the Home Office National Referral Mechanism (NRM) which aims to provide some protection whilst the level of risk is determined. Police may be involved, and the disclosure may lead to prosecution of perpetrators and help to protect other adults at risk of harm.

5.8 A further description of categories of abuse, signs and symptoms is provided in Appendix 2. Further guidance is available from the Baobab Safeguard Lead who is available to provide information and advice on all risk categories that may impact the safeguarding of children. Again, where there is any concern, it is always good practice to talk about this with the SGL and utilise supervision to process and review decisions made.

6. Female Genital Mutilation

6.1 FGM is a form of abuse and is a criminal offence under the UK Serious Crime Act 2015. FGM is a dangerous practice often performed by someone with no medical training. It is used to control female sexuality and can cause long-lasting damage to physical and emotional health. FGM can happen at different times in a girl or woman’s life including when a baby is new-born, during childhood or as a teenager, just before marriage or during a pregnancy.

6.2 All professionals and volunteers working with children must be aware of which girls are at risk of experiencing FGM, be prepared to ask questions of those girls and their network of family and friends and refer any concerns to the Police and Children's Social Services for further investigation.

6.3 Mandatory Reporting of FGM - The Serious Crime Act 2015 introduced a legal duty for *all* professionals to report to the Police any girl who is suspected as having had or has had FGM. This is referred to as a 'mandatory reporting' legal duty and applies when a girl informs a professional that FGM has been carried out on her and/or the professional observes physical signs on the girl appearing to show that FGM has been carried out. NB Many girls attending the Baobab Centre have experienced FGM as children or young adolescents in their home countries. These cases do NOT need to be reported to the authorities.

6.4 The legal duty applies to all teachers and all regulated health and social care professionals in England and Wales. Regulated health and social care professionals include all professions regulated by a body overseen by the Professional Standards Authority. Baobab is a regulated organisation by way of charitable status.

6.5 Baobab staff are subject to the mandatory reporting legal duty. They are required to report any suspicion or known incidents of FGM. Where a staff member has been told by a girl that she has had FGM or where staff have observed a physical sign indicating that a girl has had FGM this should be immediately reported to the Baobab SL who will report the concern to the Police and the relevant local authority children social services team.

6.6 Where a girl is thought to be at risk of FGM in the present either in the UK or by being sent to another country, Baobab staff must record their concerns and alert the SL immediately to reduce any risk of FGM being carried out. If any girl has symptoms or signs of FGM, or if there is good reason to suspect they are at risk of FGM, a referral will be made by the SL to the children's social services team.

6.7 FGM should be assessed and a referral to Children's Social Services should be considered.

6.8 Indicators of FGM - Baobab Centre staff must have an awareness of the warning signs that FGM has taken place or may be about to take place and report these concerns. Baobab staff must be aware of certain indicators of FGM and how to support survivors. Some indicators to consider:

- Girl's family comes from a community that practices FGM
- Members of a family, or the girl herself, say they support FGM.
- She has female relatives who have had FGM.
- She confides that she is to have a 'special procedure' or to attend a special occasion.
- She discloses concerns that she is at risk.
- She requests long or repeated toilet breaks – this may be the result of with bladder or menstrual problems if she has undergone Type 3 FGM.
- Members of a family appear ambivalent about FGM or refuse to discuss it.

6.9 Baobab staff must be aware of how to support girls who have survived FGM or may be at risk. The following points should be taken into consideration when offering support:

- Girls may not know they have had FGM and may find it very difficult to come to terms with finding out.

- Girls may need to be supported in order to understand the implications of FGM on their bodies especially in relation to future sexual intercourse or pregnancy and labour.
- Girls who come from practicing communities and do not go through FGM may experience rejection and intimidation from the community or family's members. They may also fear their own sexuality and require support to understand the implications of not having experienced FGM.

7. Prevent Strategy Duty

7.1 Under Section 26 of the Counterterrorism and Security Act 2015, in the exercise of their functions, 'specified authorities' (schedule 6 of the Act) must have "*due regard to the need to prevent people from being drawn into terrorism*". This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies referred to as 'specified authorities':

- Local Authorities.
- Education and early years providers.
- Health services.
- Prisons and probation.
- Police.

7.2 The Prevent strategy has been re-focused following a review in 2018 however it remains an integral part of the government's counter-terrorism strategy, CONTEST, as updated 2018.

The Prevent strategy now contains three objectives:

- 1) to respond to the ideological challenge of terrorism and the threat from those who promote it
- 2) to prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support.
- 3) to work with sectors and institutions where there are risks of radicalisation that we need to address.

7.3 Channel is a Prevent strategy programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. Channel uses existing collaboration between local authorities, the police, statutory partners (such as the education sector, social services, children's and youth services and offender management services) and the local community to:

- Identify individuals at risk of being drawn into extremism.
- Assess the nature and extent of that risk.
- Develop the most appropriate support for the individuals concerned.

7.4 The Prevent Strategy states that it is the responsibility of professionals and volunteers to intervene effectively to prevent the grooming of children for involvement in extremist activity. It encourages staff to safeguard children by:

- being alert to the ways in which young people can become vulnerable to radicalisation, this involves staff being informed about extremist views expressed by different religious and political groups that young people who feel dis-orientated and lost in exile and alone who may be drawn towards. Baobab aims to provide information related to organisations with extremist ideas and practices operating in the UK. Baobab staff must:
- being aware of indicators that they are being radicalised
- being willing to question attitudes and beliefs.

7.5 Baobab Centre Staff have a duty under the Counterterrorism and Security Act 2015 to report concerns regarding children who may be at risk of harm as a result of their involvement or potential involvement in extremism and / or terrorist activity.

7.6 Baobab Centre Staff must gather information, record, and discuss any concerns with the Baobab SL who will contact the London Borough of Islington Prevent Strategy Coordinator to discuss the information gathered and assess the level of risk to the child. If there is immediate cause for concern, a referral to Children’s Social Services will be made by the SL or, in case of an emergency situation, the Police must be contacted immediately on 999

**London Borough of Islington
Prevent Strategy Coordinator:**

Tel: 0207 527 4277 [email prevent@islington.gov.uk](mailto:prevent@islington.gov.uk)

Safeguarding Children Practice at the Baobab Centre

8. Responding to Abuse at Baobab

8.1 If a child makes an allegation of abuse to a member of staff, that person should:

- a) **Listen** to what is said, allowing the child to proceed at his or her own pace and explain to the child that this information will probably need to be shared with others and never promise to “keep a secret” Ask questions for clarification only, careful not to probe.
- b) **Observe** non-verbal communication including level of anxiety of child. Think about young person’s experiences of talking with adults in past ie cultural quality relationships between YP and adults.

Call 999 in emergency

- c) **Record** details in a detailed report of exactly what was said, not an interpretation or opinions. The report must include details such as:
 - **Date and time** of the observation or the disclosure.
 - **Exact words** spoken by the child as far as possible (e.g., “Then X said, “P touched my bum” NOT “Then X told me his friend had touched him inappropriately”).
 - **Names** of all involved including the person to whom the concern was reported, with the date and time and names of any other person present at the time.
 - **8.2** These records must be **signed, dated, and filed** in the child’s file on the Baobab database system.

d) **Talk** to the SGL about the safeguarding concerns and any allegations that the child has made. Discuss all incidents, events leading to the incident and any suspicions you may have and risks identified. Share report with recorded information.

e) **Refer, Monitor and Support.** The SGL will decide on the most appropriate action, in consultation with the **KEY WORKER** and will seek advice from Children Social Services as required.

8.2 Some child protection concerns arise over a period from observations of a child’s behaviour or through observation of someone else’s behaviour towards the child. If this is the case, a detailed written report about what has led to the suspected child protection concern must be prepared and dated. As with a verbal disclosure this report must be objective, with specific and observable incidences and should distinguish fact from opinion.

8.3 Where there is any concern about a child, this must be discussed as soon as possible with the Safeguarding Lead. In an emergency, 999 must be called immediately.

8.4 The SGL will be available to talk through any concerns a staff member may have about a child. It is important staff know that support and guidance is always available. The SL will review the information gathered and a decision will be made about how best to respond, if necessary, in discussion with Clinical and Executive Director of Baobab.

8.5 Where the SGL decides the safeguarding concerns require further investigation, in accordance with safeguarding legislation and guidance, they will refer Children's Social Services team to report all concerns.

8.6 All local authority children's social services teams have a role to safeguard and protect children. The Baobab Centre supports the government guidance of 'Working Together to Safeguarding Children' as updated 2018, and therefore requires all staff to discuss concerns with the SGL who will report safeguarding concerns to the relevant local authority to safeguard children who may be at risk of harm from abuse. Referral details will be provided, and information about further investigations obtained.

8.7 The local authority Children Social Services team responsible for each child attending the Baobab Centre is recorded in their digital file and is regularly updated, along with the name of any allocated Social Worker or Personal Adviser. If a child is living out of the local authority area responsible for their care, the concern must still be reported to the team responsible for the child.

8.8 In an emergency, where a child makes a serious allegation, there has been an assault or a worker witnesses an incident, and the child is believed to be in *immediate* risk of significant harm, the staff member involved will need to call 999 immediately to report the incident and if necessary for alternative accommodation to be found for the child.

8.9 If it is not possible to discuss the situation immediately with the SGL or Baobab Centre Director, a more senior staff member or the child's key worker will need to contact the Police or the relevant local authority children's social services duty team to discuss concerns with a Social Worker. Where the concern arises out of hours and the staff member feels it cannot wait until the following day as the child is at risk of further harm, the out of hours Emergency Duty Social Worker can be contacted.

8.10 Baobab Centre staff are not required under the law to be 'mandatory reporters' of safeguarding protection concerns. However, if concerns relate to children who may be at risk of Female Genital Mutilation (FGM) practices or are involved or at risk of extremist and terrorism activities as outlined under the Prevent Strategy, there is a legal duty to report all concerns to Police or the local authority.

8.11 Baobab Staff must refer to Appendix 3 and 4 for further guidance on responding to disclosures and a summary of the procedures of recording and reporting safeguarding incidents/concerns.

9. Reporting safeguarding concerns to Children Social Services

9.1 Baobab staff have a legal duty to report FGM and concerns as outlined in the Prevent Strategy to the Police and local Children's Social Services Safeguarding Team. All safeguarding concerns at Baobab must be discussed with the SL report these concerns who will report these concerns as required. In the absence of the SL, concerns should be reported to the DSL.

9.2 Local Authority Children's Social Services Teams have a legal duty to care and protect children. They have the power to investigate concerns and allegations and decide on the most appropriate action to be taken.

9.3 All contact details for the child's relevant Local Authority Children Social Services Team can be found on their named case files in the Baobab Centre One Drive, ALL FILES database system. Out of Hours (5pm-9am) referrals can be made by contacting the Emergency Duty Team for the same local authority. Contact details on child's file.

9.4 The SL will make the referral in consultation with the child's Key Worker at Baobab . Staff must provide the Children's Social Services with the child's full name, date of birth and current address as well as any relevant information/reports required.

9.5 If any member of the Baobab Centre staff believes that a decision by the Baobab Centre SGL to not refer a matter of concern was wrong, they should refer the matter directly to Children's Social Services Team themselves, and then inform the child, any family member/carer/ guardian, as appropriate, and update the SGL, that they have done so.

10. Informing Parents/ Carers

10.1 Where a child has parents/carers, they are normally the first point of contact to inform about safeguarding concerns.

10.2 If suspected abuse is recorded and a referral is made to the local authority Children's Social Services team, parents/ carers are informed at the same time as the report is made, except where the guidance of the Local Safeguarding Children Partnership does not allow this, such as where the child may be at risk of further harm.

10.3 This will usually be the case where the parent is the likely abuser. In these cases, the investigating officers will inform the parents/carers.

10.4 Baobab will continue to welcome the child and parent/carers whilst investigations are being made in relation to any alleged abuse.

10.5 Confidential records kept on a child are routinely shared with the child's parents or those who have parental responsibility for the child under the guidance of the Local Safeguarding Children Partnership.

11. How to record safeguarding concerns

11.1 Safeguarding/Child Protection concerns must be recorded in the child's file at the first opportunity by the staff member who has raised the concern. The case notes and Baobab Safeguarding Incident Form must be completed.

11.2 Records of concerns should quote all statements from the child, in their own words and any agreed actions / outcomes must be recorded clearly.

11.3 Children who have made allegations must be supported to understand why a referral has been made and, if possible, what will happen. Baobab staff must not make any false promises or assurances to the child.

11.4 Consultations between staff, outside advisors, parents/carers or other support networks must be recorded. Any decisions made and any actions taken, must be noted.

11.5 Records and incident report must be signed and dated by both SGL and staff member and need to be kept in chronological order for five years after the closure of the child's case.

11.6 Records will be kept securely in adherence to GDPR and will be accessible only to staff who are authorised to access them via a password protected file.

11.7 Child protection referrals will be made to responsible Children's Social Services team as detailed above.

11.8 A verbal and written referral will be made to the Children's Social Services team by the SGL via email, with a hard copy posted within 24 hours of making the referral. Often social services teams have their own referral forms and SGL to clarify.

11.9 A copy of the referral form will be kept confidentially on the child's file.

11.10 The SGL will attend subsequent Children Social Services meetings as part of the child's Care Plan/ Pathway Plan as necessary.

11.11 Following a referral, detailed records of all decisions, meetings and work with children and/or their parent/ carers must be kept. This will enable staff to feedback to social services for the child's Care Plan/ Pathway Plan updates.

12. Working together with other agencies

12.1 The Baobab Centre will work within the Local Safeguarding Children Partnership child protection guidelines and statutory frameworks. See links in Appendix 2. This is complicated for organizations like Baobab working with children and young people from a variety of different boroughs.

12.2 The Baobab Centre SGL is to maintain regular contact with the responsible Children's Social Services team to follow up on child protection issues, maintain contact with allocated Social Workers, Personal Advisers and support agencies, ensuring working together practice.

13. Allegations of abuse against a staff member.

13.1 If an allegation is made against staff regardless of on the premises or elsewhere, the matter must be shared with the SGL, who will discuss the allegations with the Baobab Director immediately.

13.2 Any allegations against staff must be discussed on the same day with the SGL. The SGL in consultation with the Director, after discussions with the staff member (s) and any others involved, will make a decision as to whether the situation warrants suspension, a referral to the Children's Social Service and/ or Police if an emergency.

13.3 Baobab Centre SGL and Director will ensure the appropriate procedures are implemented regarding an allegation against a staff member, in consultation with the Baobab Centre Chairperson of the Board of Trustees Committee.

14. Managing allegations made against staff

14.1 If an allegation is made against a member of staff, the SGL will meet with the staff member and child involved separately to gather information and decide on the action to be taken. Where an allegation is made against the SGL, the staff member who has been made aware of the allegation,

must immediately inform the Baobab Centre Director. The Chairperson of Baobab Board of Trustees will be notified.

14.2 Baobab staff must follow the Baobab Centre policy and Practice Guidance with regards to recording information relating to the allegation. Staff must **Listen, Observe, Record, Talk, Refer, Monitor** and **Support** The following information must be recorded:

- **Date and time** of the observation or disclosure.
- **The exact words** spoken by the child/staff member/ parent/volunteer, as far as possible.
- **The name of the person** to whom the concern was reported (with date and time).
- **The names of any other person** present at the time.
- Wider, relevant knowledge or background information.

NB: It is **not appropriate** at this stage to conduct formal or informal interviews or take written statements from staff, as this could compromise a later Children's Social Services or Police investigation.

14.3 If the Baobab Centre decision is to refer, Children's Social Services will be contacted and the member(s) of staff will be suspended on full pay. Baobab Centre will await information from Children's Social Services and the Police regarding a further course of action.

14.4 If the Baobab Centre decision is to *not* refer, there will be a further decision as to whether to follow its own complaints or disciplinary procedures. The member(s) of staff may be suspended on full pay. Suspension is a neutral (not natural) act and allows a full investigation to take place. The incident should be documented, and a clear and honest explanation given to the person who made the original disclosure (if appropriate).

14.5 The Baobab Centre must ensure that all parents/ carers know how to complain about the behaviour or actions of the named Baobab staff member (s) at the Baobab Centre or in writing.

14.6 If a criminal allegation is made, e.g., of sexual abuse and impropriety, or physical assault, or inappropriate behaviour, the Baobab Board of Trustees Chairperson will activate the Disciplinary procedure and suspend the person from any activity. The suspension will remain in force unless and until the Police and/or Children's Services confirm there was no substance to the report.

14.7 If there is no criminal allegation, the Chairperson will gather as much detail as possible from available sources of information and seek further advice from authorities. The Chairperson must consider whether suspension of the worker is advisable and recommend accordingly to the Board of Trustees. This may include a situation which, though non-criminal, could lead on to a decision of gross misconduct.

14.8 The staff member (s) who such non-criminal allegations are made will have the opportunity to give an explanation or answer to any allegation at an interview conducted by the Chairperson and the course of such an interview should be recorded in minutes by another member of the board of trustees who should be present.

14.9 The Chairperson will report to the committee on the outcome of such an investigation and will recommend whether the circumstances constitute grounds either:

- a) to treat the matter as a disciplinary issue, either as misconduct or gross misconduct, with associated rights of appeal
- b) to dismiss the allegations as unfounded or to make such other disciplinary recommendations as is appropriate. The Chairperson shall consider such recommendations and report to the next meeting of the Trustees of action taken.

14.10 The staff member (s) suspended must be advised by the Chairperson of a named person in the committee with whom s/he can communicate during the period of suspension on matters relating to their employment. Contact details and the hours/times of contact must be provided.

14.11 In the case of point **a)** above, the suspension will remain in force on completion of the Chairperson's enquiries if the Chairperson is of the view that the misconduct is as serious as to constitute grounds for immediate termination of either employment or voluntary service until the dismissal procedure has been implemented. If legal proceedings result in the conviction of the person for a serious offence involving a child, the Chairperson shall consider any report or information from the Police and/or Children's Social Services and shall recommend to the Board of Trustees a course of action up to and including instant dismissal. If the proceedings do not result in a conviction but there is evidence to suggest misconduct, the disciplinary procedure may be invoked.

14.12 In the situation of **a)** above the Chairperson shall write to the person concerned to inform them of the outcome of the investigation and, if the worker was suspended, the Chairperson will inform the person of the date and conditions, if any, of a return to duties, where a disciplinary offence has been committed but is not of a nature as to warrant immediate dismissal.

14.13 Under no circumstances is any person suspended to re-enter premises or property or attend a session on site or communicate in any way with any colleagues or parents of children whilst under suspension. This prohibition includes activities where there are no children/young persons present.

14.14 In appropriate circumstances, in consultation with the committee, the Chairperson may affect an instant dismissal if the evidence warrants it.

14.15 Lesser forms of misconduct involving a worker in a child-related incident, where the staff member (s) actions or behaviour are inconsistent with children's welfare, should be reported and dealt with under the ordinary disciplinary procedure. If judged appropriate, a record will be made in their personnel file. Each case will be individual, judged on its own merits. The committee and the Chairperson will liaise on such issues with the Director and the SGL, and a report with recommendations will be made if necessary, to the Trustees Board's next meeting.

14.16 Baobab Centre will cooperate entirely with any investigation carried out by Children's Social Services in conjunction with the Police.

15. Proven misconduct

15.1 In a situation where it has been decided by the Board of Trustees Committee that there has been misconduct proven however the appropriate actions have not been followed the procedure must be :

- If the member of staff feels that no or insufficient action has been taken, then it is their responsibility to report the matter directly to Islington Children's Social Care Tel: 020 7 527 7400 (9am – 5pm) or if out of hours Emergency Duty Team on .0207 226 0992 only where the concern requires immediate reporting due to a high level of risk and cannot wait until the following day.

16. False Allegations

16.1 If an allegation against a staff member (s) is determined to be false, the SGL will consult with Children's Social Services to see if the child concerned will be referred to any support services or if further investigations will follow to identify if the child may have been abused by someone else. If the allegation was made by an adult the SGL may consider asking the Police to take action against the person who made it

17. Whistle Blowing

17.1 It is the responsibility of all staff at Baobab Centre to report any allegations of abuse if they believe a member of staff is harming or using unacceptable behaviour towards a child. Some staff may feel uneasy about reporting situations that constitute or may lead to an investigation particularly when this involves a work colleague. In such circumstances they should follow the Baobab Centre's policy and procedures on Whistle Blowing. The SL and Director will attempt to work with the staff member to avoid any adverse repercussions and look at all options available so that they feel supported.

17.2 Whistle blowing is the mechanism by which staff can voice their concerns, made in good faith, without fear of repercussion, relating to the Public Interest Disclosure Act 1998. Staff should acknowledge their individual responsibilities to bring matters to the attention of the Director and Trustees Committee and/or relevant external agencies. This is particularly important where the welfare of the child/ren may be at risk. In investigating allegations, all actions will be conducted in a way that recognises the vulnerability of staff and seeks to protect them as far as possible from mistaken or false allegations.

17.3 In the unlikely event that a member of staff feels that their concern has not been taken seriously by the SGL and / or the necessary procedure has not been implemented, placing the child in potential risk of harm, it then becomes the individual staff members' responsibility to immediately contact any of the following:

- Baobab Centre Director, Sheila Melzak
- The Chair of Baobab Board of Trustees, Claire Helman
- Local Authority Children Social Services

18. Vetting and Barring

18.1 Where a member of staff is dismissed because of misconduct relating to a child, Baobab will notify the Disclosure and Barring Service (DBS). Depending on the profession there may be other professional registration bodies who will be informed such as the National Register of Psychotherapists and Counsellors or Social Work England.

19. Confidentiality

19.1 All suspicions of abuse and investigations are kept confidential and shared only with those who need to know. Any information is shared under the guidance of the Local Safeguarding Children Partnership. Confidential information is stored on the Baobab Centre database, with sensitive information related to safeguarding and protection being password protected.

19.2 Baobab Staff must ensure that any taking of and/ or displaying photographs of children attending centre events and activities must be affirming and validating.

19.3 Staff will seek written permission from children (16-18years), parent/ carer or relevant Children Social Services (under 16 years) prior to photographing or filming children. This is to ensure all are made fully aware of intended use of images and to confirm they are in agreement.

19.4 Where Baobab is approached to provide anonymised case studies or anonymised broadcasts of children and these are live cases, the child's parent/carers, Social Services and any legal representatives should be consulted beforehand so that they can give advice to their clients before any public/media appearances occur.

20. Child protection investigations

20.1 Where services with statutory powers under the Children Act (s) decide to carry out a Section 47 enquiry, all Baobab staff and Trustee Committee Members must cooperate fully and share all relevant information. This may involve witness statements, or participation in a Child Protection Case Conference Reviews.

21. Other safeguarding considerations

21.1 When it is alleged that a child has been abused by another child, this must be discussed with the SGL who must refer to Children's Social Services. This may result in investigation of each child's needs separately or it may be agreed that the needs of the two children can be addressed via an alternative route.

21.2 Where a Baobab staff member suspects or witnesses self-harm in a child or young person, they should regard this as a possible indicator of abuse. It is in any case cause for concern and SGL should discuss with Children's Social Services

21.3 Baobab will keep its safeguarding policy under review in view of changes to the Vetting and Barring Scheme

22. Responsibilities

22.1 Incidents/ concerns should be reported to the Baobab Centre Safeguarding Lead, Jodie Bourke, who is the Senior Social Worker at the Baobab Centre. In her absence incidents/ concerns must be reported to Sheila Melzak the Baobab Centre Director and Consultant Clinical Child and Adolescent Psychotherapist.

22.2 It is not the role of the Safeguarding Lead to decide whether a child has been abused or not. This is the task of Children's Social Services, who have the legal responsibility. But it is the responsibility of the Safeguarding Lead to ensure that concerns are shared, and appropriate action taken.

23. Safeguarding requirements for Members of Trustees Board

23.1 Trustee Board Members must undergo regular training in safeguarding children.

- Board Members must ensure their knowledge is up to date so that they can recognise indicators of abuse and respond appropriately and effectively to allegations.
- Where a Board Member (s) become concerned that any child might be at risk of abuse, it is their duty to discuss this with the SGL to ensure the appropriate action will be taken.
- Board Members must ensure that all members of staff have a recent Enhanced DBS. which are required for any professional who works with children. It is the responsibility of the Trustees Committee to ensure that this occurs and review that DBS records are up to date.
- Baobab will maintain appropriate boundaries regarding confidential information regarding children except where a decision has been made that a child may be at risk of harm.
- Baobab will promote a culture of value and respect for the individual, having positive regard for children's heritage arising from their race, ethnicity, languages spoken at home, cultural and social background.

Appendix 1

BAOBAB CENTRE INCIDENT/CONCERN REPORTING FORM

Child's Name		Child's Date of Birth:	
Child's Address:			
Borough/ County of Residence		Child's Gender:	
Please state if an interpreter is required:		Language Spoken:	
Child's Local Authority Social Services Team:			
Duty Worker:			
Details of Child's Network: Please give details of parents, carers, other family members or friends, professionals supporting child, religious leaders, etc.			
Staff member reporting incident: (Name and Position)			
Date of incident (dd/mm/yyyy):		Time of incident:	
Responding to: Please tick is appropriate	Own concerns: Concerns raised by someone else:	If responding to concerns raised by someone else, please give their name and contact details:	
DETAILS OF THE INCIDENT/ CONCERNS			

Reported by Baobab Staff member

Note the reasons for recording the incident. Ensure the following **factual information** is provided – who, what, when and where. Include names of witnesses, if relevant, and immediate actions taken.

Please use continuation sheet

....

I understand the information given above is correct to the best of my knowledge, and that any information disclosed in good faith will be treated in the strictest confidence:

Reporting staff member's signature

Date

REPORT TO :**Baobab Safeguarding Lead:**

Jodie Bourke – Senior Social Worker

6-9 Manor Gardens, London N7 6LA

Tel: 02072631303

Mobile: 07860945028

jodie.bourke@baobabsurvivors.org

****Where Safeguarding Lead is not available****

REPORT TO:

Sheila Melzak – Director and Consultant Clinical Child and Adolescent Psychotherapist

6-9 Manor Gardens, London N7 6LA

Tel: 0207 263 1303

Mobile: 07788 425087

sheila.melzak@baobabsurvivors.org

The Safeguarding Lead should record the response to the incident or concern and outcomes.

ACTIONS:

Safeguarding Lead to record conversations, and actions, including names of anyone to whom your information was passed.

OUTCOMES:
Safeguarding Lead to record outcomes of the actions taken

**Safeguarding
Lead's Name:**

**Safeguarding
Lead's
signature:**

Date:

Data protection

The Baobab Centre for Young Survivors in Exile will use the information in this form in line with Baobab's Safeguarding Children Policy and Procedures. ***All suspicions of abuse and investigations are kept confidential and shared only with those who need to know. Information is shared under the guidance of the Local Safeguarding Children Board. Records are kept securely and accessible only to professionals who have an authorised requirement to access them.***

CONTINUATION SHEET			
Name of Child:			
Details of the incident			
Reporting staff member's signature:		Date	
Safeguarding Officer's signature		Date	

Appendix 2

Signs, and symptoms of abuse.

It is often the case that signs of abuse can be identified through a child's day to day behaviours. An abused child may use language which is inappropriate or even sexually explicit and far beyond their years. A child suffering abuse may act and interact inappropriately with their peers. On the other hand, a child may become introverted, fearful and anxious. It is important to know what signs to look for and so all staff will receive continuous training and updating in this area.

Staff will also be aware of children who may be socially, emotionally and physically impaired as the indicators of abuse in these children may be different from other children simply because they may be unable to express themselves, socially, emotionally and physically.

Lists of signs and symptoms are not fail-safe mechanisms but they can be helpful indicators in certain combinations.

These are lists of some of the signs and behaviours which may indicate that a child is being abused. In themselves they are not evidence of abuse, but they may suggest abuse if a child exhibits several of them or if a pattern emerges.

Remember that there can be other explanations for a child showing such signs or behaving in such ways. There is considerable overlap between signs and symptoms of different kinds of abuse, particularly between emotional abuse and other forms of abuse.

SIGNS TO BE AWARE OF:

Signs of low self-esteem

- Repeated talk of failure
- Seeking failure
- Destruction or denial of anything good
- Rejecting praise
- Pleasure in criticism
- Lying, exaggerating
- Self-blame

Verbal signs of distress

- Self-denigration – worthlessness
- Pessimism – hopelessness

- Morbid thinking – suicidal thoughts
- Pathological thinking – self-blame

Non-verbal signs of distress

- Loss of interest and withdrawing
- Irritability and tearfulness
- Tiredness

Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning, or scalding, drowning, suffocating or otherwise causing physical harm to a child.

It may also be caused when a parent or carer fabricates symptoms of or induces illness in a child.

Possible signs of physical abuse

- Unexplained injuries, marks or burns, particularly if they are recurrent
- Any injury to a pre-mobile baby
- Refusal to discuss injuries or evading talking about them
- Improbable explanations for injuries from parent or child or both
- Different explanations given by a child for the same injury
- Untreated injuries or illness not attended to
- Admission of punishment which seems excessive or inappropriate
- Shrinking from physical contact or flinching
- Fear of going home or of a parent/carer being contacted
- Fear of undressing or changing or being changed
- Fear of medical help
- Aggression/bullying
- Over-compliant behaviour or a 'watchful attitude'
- Running away
- Significant changes in behaviour with no explanation
- Deterioration in work
- Unexplained patterns of attendance
- Covering up i.e., wearing seasonally inappropriate clothing
- Signs of physical discomfort without explanation
- Female genital mutilation- partial or total removal of the external female genitalia or injury to the female genital organs

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent effects on the child's emotional development, and may involve: Conveying to a child that s/he is worthless, unloved, inadequate, or valued only insofar as s/he meets the needs of another person; Imposing developmentally inappropriate expectations e.g. interactions beyond the child's developmental capability, overprotection, limitation of exploration and learning, preventing the child from participation in normal social interaction; Causing a child to feel frightened or in danger e.g. witnessing domestic violence, seeing or hearing the ill treatment of another; Exploitation or corruption of a child

Some level of emotional abuse is involved in most types of ill treatment of children, though emotional abuse may occur alone.

Possible signs of emotional abuse

- Continual self-deprecation, low self esteem
- Fear of new situations, beyond what would be appropriate
- Inappropriate emotional responses to new, difficult or painful situations
- Self-harm (this can present in young children as well as older ones)
- Compulsive stealing, scrounging

- Obsessive behaviours such as rocking or thumb-sucking
- Detachment – ‘Don’t care’ attitude
- Social isolation – does not join in and does not have friends
- Attention-seeking behaviour beyond what would be age appropriate
- Eating problems including lack of appetite or over-eating
- Depression, withdrawal
- Inability to concentrate
- Obsessive masturbation in public
- Acting out aggression between parents or talking about domestic violence at home
- Attaching inappropriately to strangers or people that they do not know well

Neglect

Neglect involves 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 and development.

Neglect may occur during pregnancy as a result of maternal substance misuse.

Possible signs of neglect

- Constant or frequent hunger
- Small stature or growth or, in babies or young children, not meeting milestones with no medical explanation
- Poor personal hygiene – in babies or young children this might present as always having nappy rash or regularly being left in dirty, soiled clothes/underwear
- Frequently being sent to school or nursery when ill
- Inappropriate clothing (too large, too small, clothes for the opposite gender)
- Frequent lateness or non-attendance
- Medical needs not met or treatment not sought
- Low self-esteem, sense of unworthiness
- Poor social and peer relationships
- Constant tiredness or hunger
- Compulsive stealing or scrounging
- Constant lack of response or interest from parent/carer
- Under-achieving at school or nursery
- High and unusual levels of anxiety or being preoccupied

Sexual abuse

Sexual abuse involves forcing or enticing a child to take part in sexual activities, including prostitution, whether or not s/he is aware of what is happening.

Activities may involve physical contact, including penetrative and non-penetrative acts.

‘Penetrative acts’ include ‘rape’ (forced penetration of vagina, anus or mouth with a penis) and ‘assault by penetration’ (sexual penetration of vagina or anus of a child with a part of the body or an object).

Sexual activities may also include non-contact activities, e.g. involving a child in looking at / production of abusive images, watching sexual activities or encouraging her/him to behave in sexually inappropriate ways. It may include use of photos, pictures, cartoons, literature or sound recordings via internet, books, magazines, audio cassettes, tapes or CDs.

Children under sixteen years of age cannot lawfully consent to sexual intercourse, although in practice may be involved in sexual contact to which, as individuals, they have agreed. A child of under thirteen is considered in law incapable of providing consent.

Possible signs of sexual abuse

- Bruises, bites or marks on the body
- Scratches, abrasions or persistent infections in anal or genital regions

- Age-inappropriate sexual awareness, may be evident in play, drawings, vocabulary, writing or behaviour towards children or adults
- Frequent or obsessive masturbation
- Attempts to teach other children about sexual activity
- Attempting to coerce other children into sexualised games or behaviours
- Refusal to stay with certain people or to go to certain places
- Aggression, anger, anxiety, tearfulness
- Withdrawing from friends
- Complaining of frequent non-specific illness
- Pain when sitting down
- Odour

A child may be subjected to a combination of different kinds of abuse. It is also possible that a child may show no outward signs and hide what is happening from everyone

Appendix 3

GUIDELINES ON HANDLING A DISCLOSURE

If a child discloses to you:

1. **STAY CALM.** Try not to transmit your anger, shock or embarrassment to the child. Remaining calm will help lessen the effect of the trauma. It will also help the child to know you are in control.

If you have had similar experience in childhood this may be difficult for you to do. You may need to pass the child on to someone else who is more able to cope.

However, if a child chooses to speak to you, it means they have placed a great deal of trust in you. It takes a lot of courage to speak to someone about what has happened to them.

2. **LISTEN TO THE CHILD WITH AN OPEN MIND.** Children rarely lie about abuse.
3. **REASSURE THE CHILD.** Children often feel responsible for or guilty about the incident. Emphasise it is not the child's fault. Tell the child it was right for them to tell you.
4. **DO NOT PROMISE TO KEEP IT A SECRET.** You cannot and it would be wrong to deceive the child. Explain as simply as you can what and how you will have to tell. A child may beg you not to say anything because they are frightened but remember they would not have said anything unless they wanted the abuse to stop.
5. **ALLOW THE CHILD TO TALK BUT DO NOT PRESSURISE.** Remember it is better if the child does not have to repeat the story over and over again. Do not question the child about what he/she is saying. Make a full written record as soon as possible after the child has spoken to you.
6. **REPORT THE INCIDENT AND, IF YOU FEEL ABLE, REMAIN WITH THE CHILD TO SUPPORT DURING THE FORMAL INTERVIEW.**
7. **AFTER THE INVESTIGATION, ENSURE THAT YOU HAVE SOMEONE TO TALK TO.** You will need to unburden yourself and come to terms with the emotions and feelings you have been experiencing.

DON'T PANIC. YOU ARE NOT ALONE. THERE SHOULD ALWAYS BE A SUPPORT NETWORK TO SHARE YOUR ANXIETIES AND FEELINGS WITH YOU. NO ONE CAN HANDLE THIS TYPE OF ABUSE ALONE EFFECTIVELY.

Appendix 4

HOW TO REACT WHEN A CHILD WANTS TO TALK ABOUT ABUSE

General Points

- Accept what the child says
- Keep calm
- Look at the child directly
- Be honest
- Let them know you will need to tell someone else - don't promise confidentiality
- Even when a child has broken a rule they are not to blame for the abuse
- Be aware the child may have been threatened
- Never push for information

Helpful thing to say

- I believe you
- It was right for you to tell
- It is not your fault
- I will help you

Avoid saying

- Why didn't you tell anyone before?
- I can't believe it
- Are you sure this is true?
- Why? How? When? Who? Where?
- Never make false promises
- Never make statements such as "I am shocked, don't tell anyone else"

Concluding

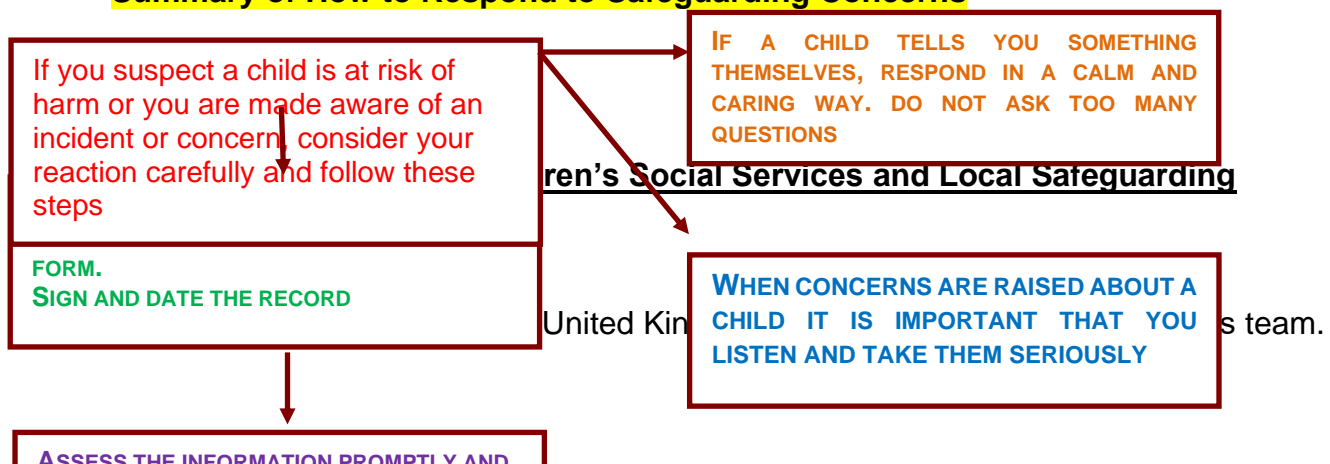
Again, reassure the child they were right to tell you and you believe them. Let the child know what you are going to do next and that you will let them know what happens.

Immediately refer to a senior worker/appointed person/someone appropriately qualified.

Make notes as soon as possible, writing down exactly what the child said and when he/she said it. Record dates and times of these events and when you made the record. Keep all hand-written notes, even if subsequently typed up.

Appendix 5

Summary of How to Respond to Safeguarding Concerns



Children's Social Services Teams deliver a range of support services to support and protect children. They are legally responsible under the Children Act (s) 1989 and 2004 to safeguard and protect children. The 'Working Together to Safeguard Children, updated 2018, is the statutory guidance outlining the requirement to develop Local Safeguarding Partnerships to oversee borough/ county multi-agency safeguarding arrangements. Children Social Services form part of these multi-agency teams who assess risk of harm. They work alongside Police, education bodies and health trusts to safeguard and protect children.

Children Social Services are divided into various teams. The teams are named differently across areas of the UK; however, most Children Social Services are structured as follows:

Referral and Assessment Teams receive the initial safeguarding referrals and have a duty to assess the immediate risk and need for further care or investigation. Where a serious safeguarding concern is identified a multi-agency safeguarding response is triggered, and full assessment and investigations take place as required. Where a child is assessed as needing longer term Social Work intervention, they are referred to the Children in Need Team. If a child protection investigation is carried out and risk of harm is identified, court proceedings are initiated. A child may then be referred to the Looked After Children Team.

- **Children in Need Teams** receive the referrals from the Referral and Assessment Team where a child has been identified as needing further Social Worker assessment and support. Social Workers carry out more intensive multi-agency assessments to identify what level of support the child and their parents/ carers, if they have any, need. (under Section 17 Children Act 1989)
- **Looked After Children Teams** provide support when a child is initially assessed as needing immediate protection the child may not have parents/ carers or there is an identified safeguarding and protection risk. Child Protection proceedings are initiated, and the Local Authority assumes care as the child's 'corporate parent' and a Care Plan for the child is initiated and implemented up to age of 18 years.
- **Leaving Care Teams** support children who are transitioning out of care from the Looked After Team into more independent living. Leaving Care Teams can be responsible for a child from the age of 16 years up to adult years of 25 years depending on their individual circumstances and complexity of needs.
- **Disabled Children Teams** specialist teams for disabled children and their families offering universal, targeted and specialist support to improve the outcomes for disabled children. These teams work in partnership with other teams to support and protect children.

Local Safeguarding Partnerships

The establishment of Local Safeguarding Children Partnerships (LSCP), (formerly Local Safeguarding Children Boards) across all areas of the UK is an important element of the improved safeguards for children under the Children Act 2004. The Children Act 2004, required each local authority to establish a LSCB by 1st April 2006. Local Authorities across London have developed local safeguarding partnerships, some are still known as safeguarding 'boards'.

London Safeguarding Children Partnership – oversees all London borough safeguarding partnerships as a single point of contact. Established an agreed set of child protection procedures for all partnerships to implement.

London Safeguarding Children Partnership Manager
 Alison Renouf
alison.renouf@londoncouncils.gov.uk
 Tel: 020 7934 9714

Baobab Centre and the London Borough of Islington

The Baobab Centre is located in the London Borough of Islington and staff are encouraged to seek advice and support from Islington Children Social Services Teams to develop their knowledge of statutory guidance and current practice.

As mentioned throughout, any safeguarding concerns about children must be reported to the relevant local authority responsible for the child for whom concerns have been raised. Many Baobab Centre children live in Islington or a neighbouring borough.

Please see Appendix 5 for Islington Children Services contacts as well as neighbouring or most relevant boroughs such as Haringey, Enfield, Camden, Hackney, Brent, Croydon, and Newham. Contacts for other areas can be found on the child's Baobab Centre case files.

Appendix 7

Useful Safeguarding Children Contact Details:

Police:

CALL 101 non-emergency

CALL 999 emergency

CHILDREN SOCIAL SERVICES and LOCAL SAFEGUARDING PARTNERSHIPS

ISLINGTON:

Islington Children's Services Contact Team (CSCT)

Tel: 0207 527 7400 Duty Team (9am – 5pm)

Tel: 020 7226 0992 Emergency Duty Team (5pm - 9am, Weekends and Bank Holidays)

Email: csctreferrals@islington.gov.uk

Web: [Children's Services Contact Team \(CSCT\), Children's Social Care | Islington Directory](#)

Islington Safeguarding Children's Board (ISCB)

Tel: 020 7527 4234

Email: iscb@islington.gov.uk

Web: www.islingtonscb.org.uk

HARINGEY:

Haringey's Multi-Agency Safeguarding Hub (MASH)

Tel: 020 8489 4470 (9am – 5pm)

Tel: 020 8489 0000 Emergency Duty Team (5pm – 9am)

Email: MashReferral@haringey.gov.uk

Web: [Child Protection | Haringey Council](#)

Haringey Local Safeguarding Children Partnership

Tel: 020 8489 3145

Email: iscb@haringey.gov.uk

Web: www.haringeyscp.org.uk

CAMDEN:

Camden Children and Families Contact Service - Multi-Agency Safeguarding Hub (MASH)

Tel: 020 7974 3317

Tel: 020 7974 4444 Emergency Duty (after 5pm, weekends and bank holidays)

Email: LBCMASHadmin@camden.gov.uk

Web: [Children's safeguarding and social work - Camden Council](#)

Camden Local Safeguarding Children Partnership

Tel: 020 7974 6658

Email: dinishia.mitford@camden.gov.uk

Web: www.cscb-new.co.uk/

ENFIELD:

Enfield Children Multiagency Safeguarding Hub (MASH)

Tel: 020 8379 5555 (9am -5pm)

Tel: Emergency Duty 020 8379 1000 (out of hours 5pm – 9am)

Email: ChildrensMASH@enfield.gov.uk

Web: www.enfield.gov.uk/childrensportal

Enfield Local Safeguarding Children Board

Email: local.safeguarding.children.board@enfield.gov.uk

HACKNEY:

Hackney Children and Families Services First Access Screening Team (FAST)

Tel: 020 8356 5500.

Tel: 020 8356 2710 Emergency Duty Team (out of hours 5pm – 9am)

Web: [If you're worried about a child or young person | Hackney Council](#)

City of London & Hackney Safeguarding Children Partnership

Tel: 020 83564183

Email: chscp@hackney.gov.uk

Web: www.chscp.org.uk

BRENT:

Brent Family Front Door

Tel: **020 8937 4300** (9am-5pm)

Tel: **020 8863 5250** Emergency Duty (out of hours 5pm – 9am)

Web: [Brent Council - Contact Brent Family Front Door if you are concerned](#)

Brent Safeguarding Partnership

Email: Brent.SCF@brent.gov.uk

Web: brentsafeguardingpartnerships.uk

Other useful services related to safeguarding children

NSPCC Helpline:

Tel: 0808 800 5000

Web: www.nspcc.org.uk

ChildLine

Tel: 0800 1111

Web: www.childline.org.uk

Trafficking Advice and Support

If you want confidential advice about trafficking before calling the police, there are a number of specialist organisations you can talk to. You can contact:

- [Salvation Army's 24 hour confidential helpline](#) for reporting modern slavery on 0800 818 3733
- [Modern Day Slavery Foundation's helpline](#) on 0800 0121 700, open 24 hours a day
- [NSPCC's helpline](#) on 0808 800 5000 if you think a child is in danger of trafficking

Appendix 8

Legislation and Statutory Guidance related to Safeguarding Children

- **Children Act (s) 1989, 2004**
[Children Act 1989 \(legislation.gov.uk\)](#)
[Children Act 2004 \(legislation.gov.uk\)](#)

- **Working Together to Safeguard Children**
[Working together to safeguard children - GOV.UK \(www.gov.uk\)](#)

- **Leaving Care Act 2000, 2018**
[Children \(Leaving Care\) Act 2000 \(legislation.gov.uk\)](#)
[Extending Personal Adviser support to age 25 - GOV.UK \(www.gov.uk\)](#)

- **London Safeguarding Children Partnership**
[London Safeguarding Children Board \(londonscb.gov.uk\)](#)
[London Child Protection Procedures \(londoncp.co.uk\)](#)

- **Female Genital Mutilation (FGM)**
[Female Genital Mutilation Act 2003 \(legislation.gov.uk\)](#)

- **Prevent Strategy Duties**
[Prevent duty guidance - GOV.UK \(www.gov.uk\)](#)
[Counter-Terrorism and Security Act - GOV.UK \(www.gov.uk\)](#)