



Child Safeguarding Policy

The trustees and staff of Her Centre will exercise the highest levels of responsibility in safeguarding children and young people from harm.

We are committed to ensuring that our range of programs and services meets this expectation. These include the provision of education and training activities, staff recruitment and personnel practices.

All employees are required to report concerns about suspected risk of harm to children and young people to the designated lead on safeguarding (IDVA Services Director, Dorothy Ghanekar). This policy mainly addresses safeguarding of children and young people in their families and their communities. In cases where there are allegations against an employee in relation to child abuse and/or suspected risk of harm specifically related to the actions of an employee, please refer to section on employee risks.

Responsibilities

In its provision of services Her Centre recognises its responsibility to:

- Inform service users of the rights of children and young people to be protected from abuse and of avenues for support if they have concerns about any form of abuse
- Recognise that the needs of children are paramount.
- Encourage and promote child protection education to the community i.e. service users, schools etc and teach protective strategies as appropriate
- Ensure that all members and staff, management and volunteers, are aware of the procedures and policies related to safeguarding and protecting children and young people from harm and any other obligations relating to the specific activity in which they are involved

As an employer, Her Centre will:

- Ensure that all employees are aware of their obligations to report suspected risk of harm and of the procedure for doing so
- Ensure that all employees are aware of the indicators of child abuse and neglect of children and young people through safeguarding training
- Provide support for employees in maintaining professional standards related to staff relationships with stakeholders in the recognition and reporting of suspected risk of harm
- Ensure that all employees have enhanced Disclosing and Barring Service checks completed before working with families, and are aware of the support services available if an allegation is made against them.



- Assist employees in implementing relevant support strategies in such cases
- Ensure that procedural fairness applies in situations where a decision is to be taken which could have a detrimental effect on the rights of an individual
- Exchange relevant information to progress investigations, assessments and case management as permitted by law (see Confidentiality Policy)

Confidentiality

The key factor in deciding whether or not to disclose confidential information should be proportionate to the need to protect the child's welfare. The amount of confidential information disclosed and the number of people to whom it is disclosed should be no more than is necessary to meet the public interest in protecting the health and well-being of the child.

The approach to confidential information should be the same whether any proposed disclosure is internal (within Her Centre) or between agencies.

European Convention on Human Rights

Article 8 of the above Convention states that:

Everyone has the right to respect for her/his private and family life, home and correspondence.

However the right is **not** absolute and there are certain situations when Article 8 enables "professionals" to disclose information without consent - e.g. to:

- Safeguard a child
- Protect her/his health or morals
- Protect the rights and freedoms of others or
- Prevent disorder or crime

Data Protection Act 2018

The Data Protection Act 2018 regulates the use and storage of information kept about an individual on a computer or in a manual filing system and requires that personal information is:

- Obtained and processed fairly and lawfully
- Processed for limited purposes and not in any manner incompatible with those purposes
- Accurate and relevant
- Held for no longer than necessary
- Kept secure
- Only disclosed if specific conditions set out in the Act are satisfied

All Her Centre information is kept in line with the Data Protection Act 2018.



Overall Legal Position

In general, the law does not prevent individual sharing information with other practitioners if:

- Those likely to be affected consent
- The public interest in safeguarding the child's welfare overrides the need to keep the information confidential
- Disclosure is required under a court order or other legal obligation

Procedures

All staff (paid and unpaid) are required to share concerns with the designated safeguarding lead (**IDSVA Service Director, currently Dorothy Ghanekar, 0203 260 7715**). If the situation is clearly an urgent case, the child or young person is too frightened to go home or there are very serious doubts about the young person's or vulnerable adult's safety, the staff member will contact Greenwich Children Services Multi Agency Safeguarding Hub on 02089213172 or if immediate action is required then staff should phone the Police (999). As the Her Centre works mainly with parents rather than children, we will mainly pick up abuse issues from the parent, but will pass on any observed signs of abuse in children to the MASH.

Staff should refer to the London Child Protection Procedures for further clarity about roles and responsibilities in relation to safeguarding children and young people and for indicators of risk.

Recognition – examples (Includes standard definitions for abuses).

Child abuse is:

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, sometimes, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children.

Physical Abuse:

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent fabricates the symptoms of, or deliberately induces illness in a child

Physical abuse indicators:

Bruising, Bite Marks, Burns and Scalds, Fractures, Scars.

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents / carers are uninterested or undisturbed by an accident or injury

- Repeated presentation of minor injuries (which may represent a 'cry for help' and if ignored could lead to a more serious injury)
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries
- Weight loss – due to malnutrition or dehydration, complaints of hunger
- Untreated medical problems
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse
- It may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child. This unusual and potentially dangerous form of abuse is now described as fabricated or induced illness in a child

Emotional abuse:

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent effects on the child's emotional development, and may involve:

- Conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- Imposing age or developmentally inappropriate expectations on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- Seeing or hearing the ill-treatment of another e.g. where there is domestic violence and abuse;
- Serious bullying, causing children frequently to feel frightened or in danger;
- Exploiting and corrupting children.

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

Emotional abuse indicators

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Indiscriminate attachment or failure to attach

- Aggressive behaviour towards others
- 'Scape-goated' 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
- Ambivalence towards staff, teachers etc.
- Deference
- Depression

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. This may involve failure to provide adequate food, shelter or clothing, failure to protect from physical harm or danger or failure to ensure access to appropriate medical care or treatment. It may also include neglect of a child's basic emotional needs.

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
- A child seen to be listless, apathetic and unresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Sexual abuse indicators

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

Sexual abuse includes non-contact activities, such as involving children in looking at, including online and with mobile phones, or in the production of pornographic materials, watching sexual activities or encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

In addition; Sexual abuse includes abuse of children through sexual exploitation. Penetrative sex where one of the partners is under the age of 16 is illegal, although prosecution of similar age, consenting partners is not usual. However, where a child is under the age of 13 it is classified as rape under s5 Sexual Offences Act 2003.



Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child / family. Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional / behavioural. Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised behaviour
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self mutilation and suicide attempts
- Concerns about child sexual exploitation including indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes for - e.g. sports events (but this may be related to cultural norms or physical difficulties)

Parental factors:

Included in the four categories of child abuse and neglect above, are a number of factors relating to the behaviour of the parents and carers which have significant impact on children such as domestic violence. Research analysing Serious Case Reviews has demonstrated a significant prevalence of domestic abuse in the history of families with children who are subject of Child Protection Plans. Children can be affected by seeing, hearing and living with domestic violence and abuse as well as being caught up in any incidents directly, whether to protect someone or as a target. It should also be noted that the age group of 16- and 17-year-olds have been found in recent studies to be increasingly affected by domestic violence in their peer relationships.

Parental factors may include:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic violence

Parental Consultation

Where practicable, concerns should be discussed with the family and agreement sought for a referral to Children's Social Care **unless** this may, either by delay or the behavioural response it prompts, place the child at risk of significant harm.

A decision by any professional not to seek parental permission before making a referral to Children's Social Care must be recorded and the reasons given. Where a parent has agreed to a referral, this must be recorded and confirmed in the referral to Children's Social Care.



Referrals from named professionals cannot be treated as anonymous, so the parent will ultimately become aware of the identity of the referrer.

Where the parent refuses to give permission for the referral, further advice should, unless this would cause undue delay, be sought from a manager or the designated safeguarding lead and the outcome fully recorded.

If, having taken full account of the parent's wishes, it is still considered that there is a need for a referral:

- The reason for proceeding without parental agreement must be recorded
- Children's Social care should be told that the parent has withheld her/his permission
- The parent should be contacted to inform her/him that after considering their wishes a referral has been made
- Confirmation is provided within 24 hours on a completed referral form

Allegations against staff or volunteers working with children, young people and vulnerable adults:

In cases where there are allegations against an employee or volunteer in relation to child abuse and/or suspected risk of harm specifically related to the actions of an employee staff are required to ensure that the Local Authority Designated Officer (LADO) based in the Quality Improvement Service of the Royal Borough of Greenwich Children's Services is contacted and relevant information is shared within one working day. In some circumstances a referral to the Commission for Social Care Inspection might also be required though the LADO can provide advice on this issue.

The Her Centre will:

- Report child abuse allegations and/or suspected risk of harm specifically related to the actions of an employee and ensure appropriate action is taken in relation to the finding
- Ensure staff are supported where allegations are made by assigning a specific Trustee to oversee their rights and their access to independent advocacy support as needed

To minimise risk from employees Her Centre will follow Safer Recruitment guidelines which include:

- Ensure all participants in its programs involving children and young people disclose that they are not a prohibited person by completing an *Employment Declaration Form*.
- Make a request for previous addresses on all job application forms
- Ask for the names of two referees who will be prepared to provide a written reference



- Conduct the necessary checks for all employees (Criminal Records Bureau, References – written and verbal)
- Follow up each reference with a telephone call or personal contact during which we will discuss the applicant's suitability to work with children. A record of this discussion will be kept in the applicant's file
- Carry out a probationary period for all volunteers and staff of at least 3 months (6 months for all staff) when additional supervision is carried out

Recording

The referrer should keep a written record of:

- Discussions with child
- Discussions with parent
- Discussions with managers
- Information provided to Children's Social care
- Decisions taken (clearly timed, dated and signed)

The referrer should confirm verbal and telephone referrals and complete an inter-agency referral form within 48 hours.

Her Centre will work with other agencies within agreed, co-ordinated procedures for the care and protection of children and young people in ways that strengthen and support the family. To this end, all staff will follow the procedures below.

1. Her Centre recognise that the responsibility to make enquiries and investigate concerns about the welfare of children lies with the lead agencies, Children's Social Care and the Police
2. Upon the receipt of any information from a child or individual relating to a concern or suspicion, the initial response will be to listen to the child or individual carefully to:
 - Clarify the concerns
 - Offer re-assurance about how s/he will be kept safe and
 - Explain what action will be taken
3. The child or individual is encouraged to share their concerns with the designated lead manager or in their absence the Director.
4. Whilst the child's view should be considered, it remains the responsibility of the professional to take whatever action is required to ensure the safety of that child and any other children
5. **Always REFER never INVESTIGATE any suspicions or allegations about abuse.** Where a young woman or child (under 16) is being abused and seeks



Her Centre support this will be reported to the Safeguarding team but the young woman will be supported by the Her Centre IDVA service.

Format for Recording

It is necessary to record what you have seen, heard or know accurately at the time the event occurs

Child’s full name:

DOB:

Language/s spoken at home:

Ethnic origin:

Religion:

Legal status of child:

Date	Family Contact		Communication		Response or Outcome	Source of Evidence	Comment
	Child Specify if views recorded & if seen alone	Adult Specify if views recorded	Within Agency Specify if Communication by phone, written or at face to face meeting	External to Agency Specify If by phone, written or at meeting			

Making a referral to Royal Borough of Greenwich Children’s Safeguarding and Social Care

If it believed that a child has been or is likely to be harmed by abuse or neglect Social Services should be notified. The referral should be made to the:

1. Contact and Referral Team on Tel: 020 8921 3172
Out of hours referrals requiring immediate action should be made to the emergency duty team on 020 8854 8888
2. Where a child is believed to be in immediate danger, contact the Police on 999 and then contact Children’s Social Care
3. If a child is already subject of a child protection plan or is allocated to a social worker, the referral should be made directly to the social worker or their manager. In their absence it should be made to the social worker “on duty” in the team.

If there are allegations in relation to an employee then the Local Authority Designated Officer should be contacted at the Children’s Safeguarding Unit on 0208 921 3930 or by



emailing childrens-Lado@royalgreenwich.gov.uk within one working day. The 'LADO' will provide advice to the Director on what action will be required

Useful contact numbers

1. **NSPCC - Tel:0800 800 5000 / text phone 0800 056 0566**
2. **Asian Child Protection help-line - Tel: 0800 096 7719** (provides advice in Punjabi, Hindi, Urdu, Gujarati, Bengali and Sylheti)
3. **Child-Line - Tel: FREEPHONE 0800 1111**
4. **Family Rights Group - Tel: FREEPHONE 0800 731 1696**
5. **London Refuge for Runaway Children - PO Box 3652 London N7 9HY Tel: 020 7700 7541 FREEPHONE 0800 389 2168**
6. **Metropolitan Police Service Child Pornography Information Line - 0808 100 0040**, has been established to enable members of the public to pass information to the police about child pornography: Information from persons who wish to remain anonymous may be passed to CRIME-STOPPERS on FREEPHONE 0800 555 111
7. **OFSTED - Complaints & Enforcement Help-line, London Regional Centre 0845 601 4772 Child protection Liaison Officer 0207 560 7101**
8. **LONDON CHILD PROTECTION COMMITTEE - 59 ½ Southwark St. London lcpc@alg.gov.uk**
9. **Public Concern At Work - Can give free confidential advice on how to raise a concern about malpractice at work Tel: 020 7404 6609**
10. **CHILD-LINE - FREEPHONE 0800 1111 (24 hours)**
11. **Family Rights Group - Offers specialist advice for parents involved in child protection via a free service 1- 30pm – 3-30pm Monday to Friday on FREEPHONE 0800 731 1696**
12. **Internet Watch Foundation - (www.iwf.org.uk/hotline/)** acts as a focal point for removing illegal materials from the internet.

This policy has been reviewed by Greenwich Safeguarding Children's Unit and is recognised as appropriate for a domestic abuse advice service.

Onder Beter, Children's Safeguarding lead and Assistant Director Greenwich Children's Services

Review date Policy reviewed January 2026 by the Trustees and staff. Next review date will be January 2028