**Safeguarding Policy**

**Children and Young People**

Reviewed July 2022

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|  | **The purpose and scope of this policy statement**  Step Out Mentoring works with children, young people and families as part of its activities. These include: 1:1 mentoring sessions, youth clubs, group workshops, in-school coaching, holiday activities and trips out.  This policy statement applies to anyone working on behalf of Step Out including the board of trustees, paid staff, volunteers and agency staff. |
| **1.1** | **The purpose of this policy statement is:**   * To protect children and young people who attend Step Out services. * To provide parents, staff and volunteers with the overarching principles that guide our approach to child protection. * The Children Act 2004 places a duty on organisations to safeguard and promote the well-being of children and young people. This includes the need to ensure that all adults who work with or on behalf of children and young people in organisations are competent, confident and safe to do so. (Guidance for Working together to safeguard children July 2018) |
| **1.2** | **Legal framework**  This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England. A summary of the key legislation and guidance is available from <https://learning.nspcc.org.uk/safeguarding-child-protection/> |
| **2.** | **Our Principles**  **We believe that:**   * children and young people should never experience abuse of any kind * we have a responsibility to promote the welfare of all children and young people, to keep them safe and to practise in a way that protects them     **We recognise that:**   * the welfare of the child is paramount * all children, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation have a right to equal protection from all types of harm or abuse * some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues * working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people’s welfare   **We will seek to keep children and young people safe by:**   * valuing, listening to and respecting them * appointing a designated safeguarding lead, a deputy child safeguarding lead and a lead trustee/board member for safeguarding * developing child protection and safeguarding policies and procedures which reflect best practice * using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and carers appropriately * creating and maintaining an anti-bullying environment and ensuring that we have a policy and procedure to help us deal effectively with any bullying that does arise * developing and implementing an effective online safety policy and related procedures * sharing information about child protection and safeguarding best practice with children, their families, staff and volunteers via leaflets, posters, group work and one-to-one discussions * recruiting staff and volunteers safely, ensuring all necessary checks are made * providing effective management for staff and volunteers through supervision, support, training and quality assurance measures * implementing a code of conduct for staff and volunteers * using our procedures to manage any allegations against staff and volunteers appropriately * ensuring that we have effective complaints and whistleblowing measures in place * ensuring that we provide a safe physical environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance * recording and storing information professionally and securely. |
| **3.** | **What constitutes safeguarding and child protection?**  Safeguarding concerns relate both to children at risk of abuse or neglect and to children who are at risk of not being able to thrive and meet positive outcomes in their lives. Safeguarding is defined for the purposes of this policy as:   * protecting children from maltreatment; * preventing impairment of children's health or development; * ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and * taking action to enable all children to have the best life chances. (Source: Working Together, 2015)     Child protection is part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm. Child protection relates mainly to the four categories of abuse identified:   * Physical abuse * Sexual abuse * Emotional abuse * Neglect |
| **3.1** | **Definitions of abuse and neglect**  The definitions of abuse and neglect that follow are taken from Working Together 2015.  **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, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children.  **Physical Abuse** is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.    **Emotional Abuse** is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.    **Sexual Abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, 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.  **Neglect** is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:   * provide adequate food, clothing and shelter (including exclusion from home or abandonment); * protect a child from physical and emotional harm or danger; * ensure adequate supervision (including the use of inadequate care-givers); or * ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs. |
| **3.2** | **Other forms of abuse:**   * **Domestic Abuse:** Domestic abuse is an incident or pattern of incidents of controlling, coercive, threatening, degrading and violent behaviour, including sexual violence. Witnessing domestic abuse is child abuse, and teenagers can suffer domestic abuse in their relationships. * **Online Abuse:** any type of abuse that happens on the web, whether through social networks, playing online games or using mobile phones. * **Child sexual exploitation:** is a type of sexual abuse in which children are sexually exploited for money, power or status. * **Female genital mutilation (FGM):** is the partial or total removal of external female genitalia for non-medical reasons. * **Bullying and cyberbullying:** Bullying can happen anywhere – at school, at home or online. It’s usually repeated over a long period of time and can hurt a child both physically and emotionally. * **Child trafficking:** is a type of abuse where children are recruited, moved or transported and then exploited, forced to work or sold. * **Grooming:** Grooming is when someone builds a relationship, trust and emotional connection with a child or young person so they can manipulate, exploit and abuse them. Children and young people can be groomed online or in the real world, by a stranger or by someone they know - for example a family member, friend or professional. * **Harmful sexual behaviour:** Children and young people who develop harmful sexual behaviour harm themselves and others. * **Radicalisation:** refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. * **Criminal Network/ Gang involvement:** this could lead a child or young person to be at risk of or commit serious violent crime, drug offenses and other criminal behaviour.   Further information about forms of abuse and neglect are available from the NSPCC website. <https://www.nspcc.org.uk/what-is-child-abuse/types-of-abuse/> |
| **4.** | **Recognising signs of abuse**  All Step Out staff, trustees and volunteers need to be vigilant to possible indicators of abuse and neglect in children at different stages of child development. If you're worried that a child is being abused, watch out for any unusual behaviour. Sometimes the first indicators that a child or young person is experiencing abuse or neglect can be seen in their play. Indicators of abuse include, but are not limited to, those listed below.  **Whilst these signs do not necessarily mean that a child is being abused, they probably indicate that the child or family is having some problems which should be investigated. Further information about signs and symptoms of abuse and neglect are available on the NSPCC website.** |
| **4.1** | **Signs that a child or young person is at risk that are sometimes seen in Play, Youth and Mentoring settings:**   * extremely challenging behaviour (where the child replicates abusive or violent behaviour through their play, e.g. in role play, fantasy play or socio-dramatic play). This can be an indicator that the child has been on the receiving end of this behaviour themselves * difficulties interacting with other children/adult or responding to play cues, where the child persistently misreads or responds in a negative way to other children, e.g. persistently destroying or disrupting other children’s play. This can be indicative of low resilience linked with emotional abuse * excessive risk-taking behaviours, e.g. we would have concerns where the child is either unable to make reasonable judgements about risk for themselves or engages in extreme levels of risk taking that could be a cry for help or an attempt at self-harm * behaviours that are inconsistent with the age range of the child, e.g. younger children exhibiting adolescent behaviours * attempting to bring drugs, alcohol or weapons onsite/ into a session (please remove these from the child and report immediately) * aggressive, evasive or inappropriate behaviour by parents when they are dropping off or collecting, either towards children or towards our staff/volunteers. e.g. shouting, humiliating, violence, threats, being under the influence of drugs or alcohol, very sexualised clothing, failing to respond or engage about concerns about the child’s welfare * disclosures from parents, e.g. that they are experiencing domestic violence, mental health problems, drug or alcohol problems, that they have concerns about their child or that our staff/volunteers are unable to contact parents or get them to respond to concerns in a timely way * unexplained disappearance or absences. Please be aware that in some cases we may be the only professionals who are in regular contact with a child or family, e.g. particularly in the case where a child is being home schooled or is out of school due to moving home or exclusion. In these cases it is even more important to be alert and to report any concerns about the child’s safety and wellbeing. |
| **4.2** | **Signs and Symptoms of Physical Abuse:**   * unexplained recurrent injuries or burns * improbable excuses or refusal to explain injuries * wearing clothes to cover injuries, even in hot weather * bald patches * chronic running away * fear of medical help or examination * self-destructive tendencies * aggression towards others * fear of physical contact - shrinking back if touched * admitting that they are punished, but the punishment is excessive (such as a child being beaten every night to 'make him study') * fear of suspected abuser being contacted |
| **4.3** | **Signs and Symptoms of Emotional Abuse:**   * physical, mental and emotional development lags * sudden speech disorders * continual self-depreciation ('I'm stupid, ugly, worthless, etc') * overreaction to mistakes * extreme fear of any new situation * inappropriate response to pain ('I deserve this') * neurotic behaviour (rocking, hair twisting, self-mutilation) * extremes of passivity or aggression |
| **4.4** | **Signs and Symptoms of Sexual Abuse:**   * being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age * medical problems such as chronic itching, pain in the genitals, venereal diseases * other extreme reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia * personality changes such as becoming insecure or clinging * regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys * sudden loss of appetite or compulsive eating * being isolated or withdrawn * inability to concentrate * lack of trust or fear of someone they know well, such as not wanting to be alone with a babysitter or child minder * starting to wet again, day or night/nightmares * become worried about clothing being removed * suddenly drawing sexually explicit pictures * trying to be 'ultra-good' or perfect * overreacting to criticism |
| **4.5** | **Signs and Symptoms of Neglect**:   * constant hunger * poor personal hygiene * constant tiredness * poor state of clothing * emaciation * untreated medical problems * no social relationships * compulsive scavenging * destructive tendencies |
| **5.** | **Roles and Responsibilities**  Step Out policy and procedures are available to all staff and volunteers and the public. All Step Out staff, trustees and volunteers have a duty to safeguard and promote the welfare of children and adults. Step Out does not have statutory duties or powers under the Children’s Act to carry out investigations into suspicions or allegations of abuse – our role is to identify and report any concerns about the children and young people that we work with.  **All staff, trustees and volunteers should:**   * be familiar with and follow the organisation’s policy and procedures for safeguarding the welfare of children * know who to contact to express concerns about a child’s or adult’s welfare * remember that an allegation of child abuse or neglect may lead to a criminal investigation and therefore practitioners should not do anything that may jeopardise a police investigation, such as asking leading questions or attempting to investigate the allegations of abuse * attend training that raises awareness of safeguarding issues and equips them with the skills and knowledge needed. |
| **5.1** | **Designated Safeguarding Lead**  Step Out Co-ordinator-Phil White is the Designated Safeguarding Lead with overall responsibility for safeguarding and child protection.  The role of the Designated Safeguarding Lead is to:   * make sure all staff are aware how to raise safeguarding concerns * ensure all staff understand the symptoms of child abuse and neglect * oversee referrals of any concerns to social care (or the appropriate agency, eg CAHMS, Southwark/Lambeth Safer Children or call the police) * oversee monitoring of children who are the subject of child protection plans * maintain accurate and secure child protection records |
| **5.2** | **Deputy Safeguarding Lead**  There are 2 Deputy Safeguarding Leads at Step Out:   * Mrs Fiona Blyth * Mrs Rachel Young   The role of the Deputy Safeguarding Leads is to:   * refer any concerns to social care (or the appropriate agency, eg CAHMS, Southwark/Lambeth Safer Children or call the police) * Deputise for the Designated Safeguarding Lead (Phil) when he is not available. * monitor children who are the subject of child protection plans * inform the Designated Safeguarding lead for the organisation, Phil White, of all referrals and any developments relating to children who are subject to child protection plans * assist with record keeping, ensuring that staff are familiar with the signs of abuse and neglect and know how to raise safeguarding concerns and staff training. |
| **5.3**  **5.4** | **The role of the Board**  Step Out comes under the governance of the Wells Trust. Fiona Wells is the senior board level lead for safeguarding. The role of the board level lead for safeguarding is to provide challenge and support on safeguarding matters to the senior management team. The board of trustees is responsible for regularly reviewing and approving the Safeguarding Policy and procedures in response to changes in legislation, guidance and best practice. Trustees also play a role in safe recruitment of senior staff, dealing with allegations against staff or volunteers, disciplinary proceedings, complaints, whistleblowing, safeguarding audits and risk management, as set out in the relevant policies and procedures.  **Safeguarding Training and DBS checks.**  All volunteers and staff taking on roles with Step Out will have an Enhanced Disclosure and Barring Service (DBS) check. The DBS checks will be refreshed annually for all volunteers and staff.  We welcome volunteers from a range of different backgrounds and having a criminal record will not necessarily bar someone from volunteering with us. This will depend on the nature of the position and the circumstances and background of their offence. Risk assessments will be caried out for all those who have a criminal record.  All staff must have level 3 safeguarding training which must be refreshed annually. All volunteers must complete a level 1 safeguarding course before they can start volunteering. This is refreshed annually. Those volunteers that stay over a year will be asked to complete a level 2 safeguarding course. |
| **6.** | **Guide for dealing with concerns relating to child abuse**  Staff member, volunteer, mentor or parent/carer has concerns about a child  or  A child has disclosed information relating to safeguarding to you    **Complete the Safeguarding Concern Form recording all details given**  **Contact your Designated Safeguarding Person**  Pass on completed Incident Report Form  (See list)  NO  YES  **Designated Safeguarding Person to decide:**  Is the concern relating to the safeguarding?  Inform the emergency services on 999  Follow reporting procedure  NO  YES  **Is the child in need of the emergency services?**   * Stay Calm * If child or young person is present reassure them * Don’t make promises of confidentiality or outcome * Keep questions to a minimum   NO  YES  Concern referred to Lambeth Social Care / Police Services for action to be taken. Use First Response phone line for Safeguarding issues  Where the child may benefit from additional support, fill in the First Response, Request for Services On-Line Form.  If no further action required, store Incident Report Form in lockable file within Human Resources.      Concern referred to Lambeth/Southwark Social Care / Police Services for action to be taken. Use First Response phone line for Safeguarding issues. Always ask for feedback from the referral.  Where the child may benefit from additional support, staff to signpost to other services if helpful. Discussion with parent/carer where appropriate.  If no further action required, store Incident Report Form in lockable file within the Step Out offices. |

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| **IDENTIFY** |
| You may become concerned through being told or shown something, your observations, or an accumulation of these factors. |
| * Act quickly (within 30 minutes) if you are in any way concerned. If in doubt, escalate. It is always better to share a query or issue than not raising something that could be (or become) a more serious concern. * The 4 main categories of abuse for children are: Neglect; Emotional Abuse; Physical Abuse; Sexual Abuse. |
| * A disclosure is never ‘a joke’. Even if they say they did not mean it, or made it up. This could be an attempt to retract or reduce a disclosure, and should not prevent Mentors from following procedure in the same way. * Mentors should not try to address safeguarding concerns outside of the guidance below, or share their views on any concerns with parents, children or families – this is the role of Step Out staff or other trained professionals. |
| In order to assess the most appropriate response to a disclosure or concern, Mentors should consider:   * The SEVERITY (or IMPACT) of harm to child or adult * The LIKELIHOOD of this harm occurring * WHEN the harm may happen   It is vital that whatever your concern, you should act QUICKLY. |
| If a child or adult tells you they have been harmed or abused:  1. Listen carefully and calmly to what they say. Move to a calmer space if necessary. Don’t interrupt.  2. Ask them when it happened but nothing else. Do not ask probing questions, or express your views on what they have told you.  3. Tell them that: “It is not your fault that this has happened” “Telling someone was the right thing to do” “I will have to tell someone else, and they will be able to help” |
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| **CALL** |
| 1. Try calling Step Out’s Designated Safeguarding lead’s Work Mobile (Phil-07503586565) for advice and guidance. If you cannot get through to them please call the deputy safeguarding leads Mrs Faye Thomson and Mrs Fiona Blyth.   Please call within 30 minutes of noticing the concern.  Examples of when to call Step Out Staff   * Child says Mum burned a bag full of the children’s toys last week * Mum asks you for money for food and the heating * Dad says that Mum is using drugs again in her hostel * Child seems to have unrestricted internet access at home * Several teenagers stop you as you leave the home and demand to know where the child’s elder brother is * Mum was very tearful and upset when you dropped the child home * Another child is now staying in the family home * Mum says elder brother has not come home for two days |
| **2)** If you cannot get through to any of Step Out’s designated safeguarding leads, please call Social Care in the child’s home borough. They will assist and guide you through the concern.  1. Call Social Care (of the child’s home borough). If out of office hours, call the Duty Team. Explain who you are and who you work/volunteer for. Then explain your concern to them.  2. Contact Step Out and inform them of this immediately afterwards.  Examples of when to call Social Care   * Child tells you that the bruises on their arms were from Mum who was cross with them yesterday * Child explains that their elder sister made them watch a pornographic video online last weekend * Mum says as she leaves the home that the children (all under 14) are always fine alone at home overnight when she does work shifts * After a late session, the child’s carer is unexpectedly not at home and none of the child’s safety contacts are available, despite you trying for over an hour; it is very late and there is still no response |
| **3)-** If you think the child is in immediate harm please contact the Police.  1. Call 999 and ask for the Police. Explain who you are and what the concern is.  2. Contact Step Out and inform them of this immediately afterwards.  Examples of when to call 999   * Child says that Dad (who is not allowed any contact with the children) is staying in the home with them this week * Child says that they were threatened with a knife outside school today * Mum says that their neighbour exposed himself to the children yesterday evening * Nan tells you that Mum kicked the child in the ribs this morning |
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| **EVIDENCE** |
| It is important that after calling-in an incident or concern, Mentors make careful note of what happened, as soon as possible after the event. This will help ensure an accurate account of the situation, and help find appropriate support if/where this is needed.  Tips on good evidencing include:   * Note what happened, before during and after, in chronological order. Note the time of events if possible. * Use clear language, and quote any words or phrases used wherever possible. * Describe any actions clearly, and be clear about what you did or said. * Mention who else was there, or who else may have heard or seen your concerns. Context is important. * Distinguish between what actually happened and your thoughts or views. Avoid making any assumptions.   If after any safeguarding event Mentors feel that they need any additional support, they should contact Step Out Staff |
| **Session Reports** |
| Session reports need to be submitted weekly.  Safeguarding concerns should be raised directly with the Step Out Co-ordinator over the phone as soon as possible. Including a safeguarding concern on a Session Report will NOT alert staff quickly enough for appropriate action to be taken. If in doubt, call.  Examples of what should be included on a Session Report as a concern  • Child’s home is becoming very dirty and smelly  • Mum blamed the child for her partner leaving  • Child says last year Auntie’s baby died  • Elder brother is unable to talk but seems very upset when Mum closes the door of his room  • Dad says it is fine for the Child to eat sweets daily on their way to school |
| |  |  | | --- | --- | | **6.2**  **6.3** | **What to do if a child discloses to you?**  If you are approached by a child or young person, with a disclosure that s/he is being, or has been harmed or abused, or you are informed of such a disclosure by a staff member or member of the public:  **Do:**  **•** stay calm  • listen to what is said, allowing the child to proceed at his or her own pace  • 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, and not to elicit a particular answer  • at the earliest opportunity, and within a maximum of 24 hours of the incident taking place, write a report of exactly what was said, not an interpretation (e.g. “Then X said “P touched my bum” NOT “Then X told me his friend had touched him inappropriately”) and ensure this report is signed and dated. (Use incident report form Appendix 2)  **Don’t:**  • promise to keep the information secret. Make it clear that you have a duty to refer the matter on.  • stop the individual who is freely recalling significant events  • make the individual tell anyone else. S/he may have to be formally interviewed later and it is important to minimise the number of times information is repeated  • make any suggestions to the individual about how the incident may have happened.  • question the individual, except to clarify what they are saying  • discuss the information with anyone other than a Designated Safeguarding Officer or an appropriate external agency  If child protection concerns have arisen over a period of time from observations of a child’s behaviour or through observation of someone behaviour towards the child, the Step Out worker should write a detailed report with dates, about what has caused him/her to suspect a child protection concern. As with a verbal disclosure this report must be objective, with descriptions of specific and observable incidences and should distinguish fact from opinion. (Use incident report form Appendix 2).  **Allegations against members of staff/ volunteer**  If you share a concern that a person may have behaved inappropriately, or you are concerned that a member of staff or any other person is harming or abusing a child or vulnerable adult or you have received information that may constitute an allegation you should:   * report it to the Designated Safeguarding Lead (DSL) as soon as possible, however trivial it may seem; * make a signed and dated written record of your concerns, observations or the information you have received to pass on to the DSL; * maintain confidentiality and guard against publicity while an allegation is being considered or investigated and follow local information sharing protocols   If the allegation concerns a member of staff or a volunteer the DSL must inform the Trustee Safeguarding Lead immediately and this also confirmed in writing.  If the allegation concerns the Designated Safeguarding Lead, the Trustee Safeguarding Lead, Mrs Fiona Wells should be informed directly.  The Designated Safeguarding Lead should pass on all concerns relating to staff to the Local Authority Designated Officer (LADO, see Appendix 1 for contact details).  In the first instance this can be verbal but should be followed up by a written referral form (available at:<https://www.lambethscb.org.uk/professionals/managing-allegations>). <https://www.southwark.gov.uk/assets/attach/6057/LADO-Referral-Form-August-2018.doc> | | **6.4** | **What to do if there are concerns about the way another agency responds to a child protection issue**  Step Out staff and volunteers must ensure that before entering into partnerships with other organisations due diligence is carried out to ensure partners have robust safeguarding policies and procedures in place. The Step Out Co-Ordinator will ensure that a Service Level Agreement (SLA) must be put in place to govern the principles of working and the processes for safeguarding.  If you are at all concerned about how another agency responds to a child you must raise this with the Designated Safeguarding lead as soon as possible. | |  | We are committed to reviewing our policy and good practice annually. | |

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| **7.** | This policy was last reviewed in: | July 2022 |
|  | Signed: Phil White, Rachel Young |  |
|  | Date:12/7/2022 | Next review-July 2023 |

**Appendix 1. Contact Details**

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| **Designated Safeguarding Lead** | Name: Phil White  Role: Step Out Co-Ordinator  Contact: info@step-out.org.uk  Mobile: 07503586565 |
| **Deputy Safeguarding lead** | Name: Fiona Blyth  Contact: fiona.s.blyth@gmail.com  Mobile: 07951827471 |
| **Lead Trustee for safeguarding and child protection** | Name: Fiona Wells  Contact: 07906868684 |
| **Lambeth Children’s Services First Response Team** | Professional’s Line: 02079263100  Public Line (24 hours): 02079265555  Referral forms available at: <https://www.lambethscb.org.uk/> |
| **Southwark Multi Agency Safeguarding Hub** | Professional Line: 020 7525 1921 (weekday 9-5)  Out of hours line: 020 7525 5000  Referral Forms available at: <https://safeguarding.southwark.gov.uk/policies-procedures-guidance/policies-children/> |
| **Local Authority Designated Officer Lambeth**  Local Authority Designated Officer Southwark | Andrew Zachariades  Contact: 02079264279 / [LADO@lambeth.gov.uk](mailto:LADO@lambeth.gov.uk)  Referral From available at :  <https://www.lambethscb.org.uk/professionals/managing-allegations>  Eva Simcock  Contact: 020 7525 0689  Referral form available at:  <https://www.southwark.gov.uk/assets/attach/6057/LADO-Referral-Form-August-2018.doc> |
| **NSPCC Helpline** | 0808 800 5000 |

**Appendix 2. Safeguarding Concern Report Form.**

**Safeguarding Concern report form**

This form will be used by members of staff or volunteers to record concerns, disclosures or suspicions of abuse. The competed form should be sent to the Designated Safeguarding Lead.

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| Your name | Your position |
| Place of work | Contact phone number |
| The child’s details | |
| Full Name | |
| Address/phone number | |
| Date of birth | |
| Other relevant details about the child:  *Eg family circumstances, physical and mental health, any communication difficulties.* | |
| Parent/guardian/carers details | |
| Details of the allegations/suspicions | |
| Are you recording:   * Disclosure made directly to you by the child? * Disclosure or suspicions from a third party? * Your suspicions or concerns? | |
| Date and time of disclosure | |
| Date and time of incident | |
| Details of the allegation/suspicions. *State exactly what you were told/observed and what was said. Use the persons own words as much as possible*  *(use additional sheet if necessary)* | |
| Action taken so far:  *(use additional sheet if necessary)* | |
| Signed | Date |
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**Appendix 3. Updated Safeguarding Procedures in response to the COVID-19 Pandemic and Government enforced Lockdown.**

Due to the Government enforced lockdown face to face delivery has been suspended and services delivery has moved online. In light of these changes all staff must read the following updated policies and procedures:

* E-safety policy
* Code of Conduct for staff
* Whilsteblowing (found in staff handbook)
* Guide for online working

The safeguarding policy must continue to be adhered to during this time with all concerns shared via email to the designated Safeguarding Lead with the subject heading URGENT, PRIVATE AND CONFIDENTIAL with initials used in the body of the email. The safeguarding concern sheet must be attached and password protected. Only work email addresses and work mobiles should be used, contact details for designated leads can be found on page 12.

During this time Children and Young People may be particularly vulnerable to additional pressures and other forms of abuse. As delivery moves to online, remote working staff must continue to be professionally curious about how families engage with the services provided. Additional attention may need to be paid to the physical surroundings of children and young people during online work as well as their behaviours and the behaviours of those around them. All concerns must, as always be shared with the Designated Safeguarding Lead.