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SOSRC

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Safeguarding Children is the Responsibility of Everyone

This Safeguarding Policy is a key document about how we respond when we know someone is at risk and the expectations of SOSRC Worker in responding to Safeguarding concerns. This document should be used in conjunction with other SOSRC Policies and internal Safeguarding processes.

SOSRC recognises that Safeguarding is everyone's responsibility and understands its role to promote and engage in the Safeguarding of Vulnerable Adults and Children. All Workers will be expected to adhere to working practices in accordance with maintaining choice, rights, fulfilment, independence, privacy, and dignity for the individuals concerned. We will give equal priority to keeping everyone safe regardless of their age, disability, gender, race, religion or belief, sex, or sexual orientation".

SOSRC will ensure all Worker understand Safeguarding and Child Protection procedures and have appointed Designated Safeguarding Leads and a Designated Trustee Safeguarding Lead who has overall responsibility.

SOSRC recognises its responsibility to safeguard and promote the welfare of children within the following legal frameworks:

- The Children Acts 1989, 2004
- The Children & Families 2014
- The Care Act 2014
- The Education Act 2002
- The Equality Act 2010
- SET Procedures 2019

SOSRC work to the Southend, Essex and Thurrock Safeguarding Child Protection Procedures.

<https://www.escb.co.uk/media/2739/set-procedures-may2022.pdf>. The SET procedures are available to all Workers, volunteers and are part of the induction process.

We are aware that many children and young people are the victims of different kinds of abuse and that they can be subjected to social factors that have an adverse impact upon their lives –including domestic and sexual violence, sexual exploitation, substance misuse, bullying, child prostitution and ritualistic abuse.

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as

- protecting children from maltreatment
- preventing impairment of children's health or development;
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best outcomes
- all Children have the Right to be Protected

Children who have a disability or come from a different ethnic or cultural group can easily become victims of discrimination and prejudice. Any discrimination is harmful to a child's wellbeing and may mean that they don't obtain the services they need to keep them safe.

At SOSRC we will challenge any form of discrimination to ensure that that all children regardless of age, gender, disability, sexual orientation or identity, ethnic or cultural group have the right to equal protection from all types of abuse and that the appropriate services are in place.

We are also aware of the impact of bullying on children and how this increases each year. At SOSRC we have clear guidelines about bullying, and the consequences of bullying and the support available.

We are aware that bullying can reach the threshold where children are being abused or at risk of being abused and know it is our responsibility to act appropriately to ensure this is dealt with effectively. We have access to information and services that offer different languages for anyone whose preferred language is not English, or in other formats for disabled people, for example Braille or large text.

We aim to create a safe environment within which children and young people can thrive and adults can work with the security of clear guidance.

Under the terms of the Children Act 2004 anyone under the age of 18 is considered to be a child/young person. These guidelines are for the use of all paid Workers, volunteers and visitors. We will make them available to the parents and carers of the children and young people to whom we offer a service.

The key objectives of this policy are to ensure

- Children and young people are listened to, valued and respected (A child centred approach).
- All paid and unpaid Worker are alert to potential indicators of abuse or neglect; and know what to do with their concerns
- All paid and unpaid Worker are alert to the risks which individual abusers or potential abusers, may pose to children.

- All paid and unpaid Worker are alert to the impact on the child of any concerns of abuse or maltreatment.
- All paid and unpaid Workers are able to gather and analyse information as part of an assessment of the child's needs.
- All paid and unpaid Workers are subject to rigorous recruitment procedures including enhanced DBS checks and reference checks.
- All paid and unpaid Workers are given appropriate support and training to at least level 2 and this refreshed every 2 years
- All paid and unpaid Workers are familiar with safeguarding procedures which forms part of induction and ongoing training.

All safeguarding concerns should be acted upon immediately. If you are concerned that a child might be suffering abuse or at risk of abuse, you should tell the Designated Safeguarding Lead (DSL) immediately.

These guidelines are divided into the following sections:

- Recognising signs of abuse
- What to do with your concerns
- Allegations made against worker
- Safe recruitment
- Good practice
- Safeguarding children in SET

Concept of Significant Harm

Some Children are in need as they are suffering or likely to suffer significant harm. The concept of Significant harm as a threshold was introduced by The Children's Act 1989 and justifies compulsory intervention for the best interest of children. There is no absolute criteria to define significant harm but consideration of the severity of the harm may include the duration and frequency of the abuse, extent of premeditation, the presence or degree of threat and extent of physical harm. A single incident may also constitute significant harm such as a violent assault. Significant harm is associated with more severe affects for the child which can interrupt, change or damage the child's physical and psychological development.

Recognise Signs of Abuse

It can often be difficult to recognise abuse. The signs listed in these guidelines are only indicators and many can have reasonable explanations. Children may behave strangely or seem unhappy for many reasons, as they move through the stages of childhood or their families experience changes. It is nevertheless important to know what could indicate that abuse is taking place and to be alert to the need to consult further.

You should be alert to potential indicators of abuse or neglect and risks which individual abusers, or potential abusers, may pose to children. If you are worried about a child, it is important that you keep a written record (including dates and times) of any physical or behavioural signs and symptoms. Recordings should be made on as safeguarding Record of Concerns (ROC) form which is then held securely by the Designated Child Protection officer.

Abuse

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

Physical abuse can involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, and suffocating. It can also result when a parent or carer deliberately causes the ill health of a child in order to seek attention; this is called fabricated illness or Munchhausen's Syndrome by Proxy. Symptoms that indicate physical abuse include but is not limited to:

- Bruising in or around the mouth, on the back, buttocks or rectal area
- Finger mark bruising or grasp marks on the limbs or chest of a small child
- Bites
- Burn and scald marks; small round burns that could be caused by a cigarette
- Fractures to arms, legs or ribs in a small child
- Large numbers of scars of different sizes or ages

The [SET Protocol/Management of Suspicious Unexplained Injuries and Bruising in Children \(May 2022\)](#), should be used as guidance in conjunction with SET Safeguarding and Child Protection Procedures when concerns are physical abuse identified.

Emotional Abuse

Emotional abuse happens when a child's need for love, security, praise and recognition is not met. It usually co-exists with other forms of abuse. Emotionally abusive behaviour occurs if a parent, carer or authority figure is consistently hostile, rejecting, threatening or undermining. It can also result when children are prevented from social contact with others, or if developmentally inappropriate expectations are imposed upon them. It may involve seeing or hearing the ill-treatment of someone else or exploiting and corrupting children. Symptoms that indicate emotional abuse can include:

- Excessively clingy or attention-seeking behaviour
- Very low self-esteem or excessive self-criticism
- Excessively withdrawn behaviour or fearfulness; a 'frozen watchfulness'
- Despondency
- Lack of appropriate boundaries with strangers; too eager to please
- Eating disorders / self-harm

Neglect

Neglect is the persistent failure to meet a child's basic physical and / or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance misuse, maternal mental ill health or learning difficulties or a cluster of such issues. Where there is domestic abuse and violence towards a carer, the needs of the child may be neglected.

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

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers);
- Ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional, social and educational needs.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (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).

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. See Part B1, Practice Guidance. Symptoms of sexual abuse include:

- Allegations or disclosure
- Genital soreness, injuries or discomfort
- Sexually transmitted diseases; urinary infections
- Excessive preoccupation with sexual matters; inappropriately sexualised play, words or drawing
- A child who is sexually provocative with adults
- Repeated sleep disturbances through nightmares and/or wetting

Older children and young people may additionally exhibit:

- Depression
- Drug and/or alcohol abuse
- Eating disorders; obsessive behaviours
- Self-mutilation; suicide attempts
- School/peer/relationship problems

In addition, child sexual exploitation is also form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

A common feature of child exploitation is that the child or young person does not recognise the coercive nature of the relationship and does not always see themselves as a victim. For guidance, please see the SET Partnership pathway <https://www.escb.co.uk/media/2585/set-partnership-child-exploitation-pathway-final-version.pdf>. SOSRC have internal CSE Champions Jenny Benet and Anjie Gaywood, contact details can be found on the Record of Concern (ROC) form on page 17/18 of this document.

Controlling & coercive behaviour

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim."

Some members of our communities hold beliefs that may be common within particular cultures, but which are against the law in England. SOSRC does not condone practices that are illegal or harmful to children. Examples of particular practices are:

Forced Marriages

No faith supports the idea of forcing someone to marry without their consent. This should not be confused with arranged marriages between consenting adults.

Under-age Marriages

In England, a young person cannot legally marry or have a sexual relationship until they are 16 years old or more.

Female Genital Mutilation

Comprises all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons. This is against the law, yet we know that for some in our communities it is considered a religious act and a cultural requirement. It is also illegal for someone to arrange for a child to go abroad with the intention of having her genital mutilation. There are mandatory reporting duties for social care and healthcare workers for anyone under the age of 18.

Ritualistic Abuse.

Some faiths believe that spirits and demons can possess people (including children). What should never be condoned is the use of any physical violence to get rid of the possessing spirit. This is physical abuse and people can be prosecuted even if it was their intention to help the child.

Radicalisation

Radicalisation is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups.

Exploitation and Trafficking

This includes exploitation of children to become involved in county lines and through online technologies. Such abuse may also include trafficking children into, within, and out of the UK for the purposes of exploitation.

Trafficking is often an integral part of the exploitation itself, and therefore should be a consideration when identifying, assessing and responding to all forms of exploitation. Some trafficking is by organised gangs, in other cases, individual adults' traffic children for their own personal gain. Exploitation includes children being used for:

- sexual abuse
- domestic servitude
- labour exploitation - Nail bars, car washes, factories, etc.
- drug dealing - most often linked to county lines
- drug cultivation criminality
- credit card fraud, begging or pickpocketing
- benefit fraud
- drug mules or decoys for adult drug traffickers
- forced marriage
- trade in human organs; and in some cases;
- ritual killings.
- other forms of slavery.

Risks outside the home/Contextual Safeguarding

Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. These extra-familial threats might arise at education settings, from within peer groups, or more from within the wider community and/or online. These threats can take a variety of different forms and children can be vulnerable to multiple threats, including exploitation by criminal gangs and organised crime groups such as county lines, trafficking, online abuse, teenage relationship abuse, sexual exploitation and the influences of extremism leading to radicalisation.

What to do with your concerns?

In the event that a child makes an allegation or disclosure of abuse against an adult or another child or young person, it is important that you:

- Listen to them and/or closely observe their presentation and behaviour;
- Let them know that you take what they are saying seriously;
- Clarify the concerns
- Do not attempt to question or interview them yourself;
- Let them know that you will need to tell someone else in order to help them.
- Do not promise to keep what they tell you secret;
- Offer re-assurance about how the child will be kept safe
- Explain what action will be taken and within what timeframe.
- Inform your designated safeguarding officer as soon as possible.

Make a written record of the incident or events in chronological order

- Discussions with the child;
- Discussions with the parent;
- Discussion's managers/ Supervisors
- Information provided to LA children's social care;
- Decisions and actions taken (with time and date clearly noted, and signed)

Once the concerns have been identified the worker should pass the concern onto the Designated Safeguarding Lead (DSL) or Deputy by completion of a Record of Concern Form (ROC). However, if there is an immediate risk of significant harm and or medical treatment required there should be no delay and a 999 call should be made followed by a call to the Children and Families Priority Line or the MASH within Local Authority Children's Social Care. Details including dates, times, actions taken and who you spoke with Police, Ambulance or Social Care should also be recorded on the ROC.

All Worker should be sufficiently knowledgeable and competent to contact local authority children's social care or the police about their concerns directly and to complete the appropriate referral form.

Where practical concerns should be discussed with a parent and consent sought for a referral to Local Authority Children's care, unless it will put the child and further risk of harm to do so. Reasons for completing a referral without consent should be recorded.

Sometimes you may just feel concerned about a child but do not know whether to share your concerns or not. In this situation, you should always raise your concerns with your Designated Safeguarding Lead/Deputy, who will help you to decide what to do.

Following raising a safeguarding concern you should be available for Safeguarding leads to contact you regarding the concern, be ready to act if instructed by a Safeguarding Lead and update the Safeguarding Lead of any developing or new updates regarding the concerns as soon as possible.

SOSRC Safeguarding Process

Emergency:

- Concern is brought to your attention
- If concern is an emergency or a child is an immediate risk of harm, without delay contact 999 followed by Social Care Priority line (Essex), MASH (Thurrock & OS)
- Contact Safeguarding lead and inform of actions taken
- Keep a copy of any referrals made
- Complete ROC same day as concern
- Send to Designated Safeguarding Lead/Deputy log and record
- Update DSL of any updates or increase of risk

Ongoing Safeguarding:

- Concern is brought to your attention.
- You are concerned but it is not an emergency, contact the Safeguarding champion as soon as possible within the same day of concern raised, and complete ROC.
- Follow advice given by safeguarding champion/DSL
- If any referrals have been made keep a copy for SOSRC's internal safeguarding log
- Complete safeguarding services on DPMS.
- DSL to update log.
- Update DSL of any updates or increase of risk.

Concern to monitor:

- Something is brought to your attention which could be a cause for concern
- Contact the Designated Safeguarding Lead/ Deputy and complete a ROC if advised
- Keep a log of any additional concerns and follow the steps above if concern or risk escalates.

The responsibility for investigating allegations of abuse, whether they result from the disclosure of a child or the concerns of an adult, lies with social workers (Thurrock/Essex Children's Service) and the Police Child Abuse Investigation Team (CAIT).

The Children's Service has phone lines with support, information and Duty Social Workers who you can contact in office hours for further specialist guidance, contact numbers are included at the end of this document. They will advise you when or whether to inform the child's parents or carers about any concerns. If they decide to pursue a child protection investigation, you should:

Work closely and collaboratively with all professionals involved in the investigation, in order to keep the child safe:

- Attend a child protection conference if you are invited.
- You will be asked to provide information about your involvement with the child, which is why it is important to keep records of your concerns.
- Attend any subsequent child protection review conferences.

Third Party Safeguarding

SOSRC recognises that safeguarding concerns may, at times, involve third parties who are not directly receiving services from the organisation, but whose welfare may be impacted through our work, disclosures, or other contact. In such instances, SOSRC is committed to taking appropriate and proportionate action to ensure the safety and wellbeing of all individuals involved.

All concerns involving third parties will be assessed on a case-by-case basis. When a safeguarding concern arises involving a third party, the following process must be followed:

Initial Identification: The worker who identifies the concern will record all relevant information clearly and sensitively in line with SOSRC's safeguarding reporting procedures.

Internal Review: The worker must promptly raise the concern with one of the following senior representatives:

- The Chair of Trustees
- The Trustee Safeguarding Lead
- The Vice Chair of Trustees

Discussion and Decision-Making: The concern will be reviewed collaboratively to assess the level of risk and determine appropriate action. This may include further information gathering, contacting external agencies, or taking protective steps, depending on the circumstances.

Documentation: All discussions, decisions, and actions taken must be documented accurately and stored securely in accordance with SOSRC's data protection and safeguarding policies.

Ongoing Monitoring: If action is taken, a designated lead will be assigned to monitor the situation, with regular updates provided to the appropriate trustee lead(s).

Allegations made against Workers or volunteers

Organisations that work or meet children and young people need to be aware of the possibility that allegations of abuse will be made against members of their Worker.

Please see Managing Allegations against Worker procedure (located on W Drive and Breathe HR Application)

Safe recruitment

The application of rigorous procedures for the recruitment of any SOSRC Worker who come into contact with children, both directly and indirectly, can reduce the likelihood of allegations of abuse being made that are founded. As an absolute minimum, the following standards should be followed:

All prospective workers (paid and unpaid) should complete an application form which asks for details of their previous employment and for the names of two referees;

All prospective workers (paid and unpaid) should have an up to date Disclosure & Barring Service registration (DBS) before they start employment with SOSRC – anyone who refuses to do so should not be employed;

All prospective workers (paid and unpaid) should be interviewed to establish previous experience of working in an environment where there is contact with children and perceptions of acceptable behaviour;

Nobody should start work before references have been received. Referees should be reminded that references should not misrepresent the candidate or omit to say things that might be relevant to their employment;

All appointments to work with children should be subject to an agreed probationary period;

New members or Workers should be clear about their responsibilities and wherever possible, work to an agreed job description;

These guidelines should be available to everyone and fully discussed as part of an induction process.

Good Practice

Designated Safeguarding Leads must undergo level 3 safeguarding training (every year). It is the responsibility of this person to make themselves available for consultation by Workers, volunteers, visitors, children and their families;

All Workers are responsible for children while on these premises and must make sure that health and safety guidelines are adhered to;

All Workers working with children should receive regular supervision from a more experienced Worker member and be encouraged to attend basic safeguarding training;

Under no circumstances should visitors be allowed to wander around the premises unaccompanied when children and young people are present;

Where possible, there should always be at least two adults present with a group of children. It is vital that the ratio of adult to child is adequate to ensure safety.

For children under 8 the ratio should be no more than 1:8; for children under 5 it should be no more than 1:6.

Worker should be alert to strangers frequently waiting outside a venue with no apparent purpose. Children should not be collected by people other than their parents unless notification has been received;

If a child is not collected after a session, it is reasonable to wait approximately half an hour for a parent or carer to arrive. If the parent or carer cannot be contacted, Workers should contact the relevant Children & Families Duty Team or the police and request assistance.

DBS checks are subject to appropriate recruitment procedures. All drivers and escorts should agree to abide by these guidelines;

In the event that a room or rooms on the premises are used by other organisations, the letting agreement should ensure that the hiring organisation works to approved safeguarding procedures and/or that they read and agree to abide by these guidelines.

Implementation Checklist

These safeguarding procedures will only be effective if all Workers and volunteers at SOSRC:

- Identify the Designated Lead for Safeguarding and Deputies
- Ensure all Worker attend regular Safeguarding Training both SOSRC's internal yearly training as well as level 2 (every 2 years) for all Worker and level 3 for Leads (yearly)
- Worker contributes to whatever actions are needed to safeguard and promote the child's welfare
- Ensure all Workers and volunteers have a copy of safeguarding procedures
- Ensure that all Workers and volunteers know what to do if they have concerns about a child
- Ensure all existing Worker and volunteers who have contact with children have Enhanced DBS Disclosures
- Ensure that new Worker/volunteers who have contact with children have enhanced DBS Disclosures before they start work
- Ensure that the premises conform to health and safety guidelines
- We will review this policy at least annually or more frequently if required (e.g. law change, new processing).

Safeguarding Contacts

- Southend - 01702 215007 (office hours) - 0345 6061212 (Out of office hours – MASH)
<https://www.southend.gov.uk/childrens-social-care/child-protection>
- Essex – www.escb.co.uk
- Consultation Line and Priority line – 0345 6037627 For an electronic copy of the SET Procedures -
<https://www.escb.co.uk/media/2739/set-procedures-may2022.pdf>
- All ESCB Policies and Guidance - <http://www.escb.co.uk/working-with-children/policies-and-guidance/>

Review Statement

This policy has been reviewed as part of the SOS Rape Crisis annual review cycle. It is to be reviewed annually as standard, or earlier if required in response to legislative, organisation, or operational changes.