

# The GUARDIAN FAMILY network



## Safeguarding Children and Child Protection

This policy summarises current working practices in relation to safeguarding children and young people, who may be at risk of abuse. This document details the policy aims, safeguarding measures, safer recruitment strategy, response to individual concerns, use of IT and the internet, Information Sharing and Confidentiality. It also describes The Guardian Family Network's response to dealing with students who are suspected of, or are suffering abuse or neglect, or who are at risk of suffering from harm because of abuse or neglect.

This document also details the child protection roles and responsibilities of employees, the procedures for identifying and managing child protection concerns and issues and for mitigating risks to the safety and welfare of students.

Hampden House, Monument Park, Warpsgrove Lane  
Chalgrove, Oxon, OX44 7RW

T | 01865 893213 | 24/7 07539 021684  
Travel: 07930 604335

E | [office@guardianfamily.co.uk](mailto:office@guardianfamily.co.uk)  
W | [www.guardianfamilynetwork.com](http://www.guardianfamilynetwork.com)

**Policy owner:**  
Siobhan Skaife

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# 1. Guiding Principles

Safeguarding children from abuse or neglect is everybody's business. At the Guardian Family Network (GNet), the welfare of the children staying with our homestay families is paramount and we fully recognise our responsibilities to protect and safeguard the welfare of those children. We are committed to working together with other agencies to ensure adequate arrangements are in place to identify, assess, and support those children who are suffering or likely to suffer harm. Where there is a safeguarding concern, GNet will take into account the child's wishes and feelings when determining what action to be taken and what services to provide.

All homestay families and GNet employees have a responsibility to report, at the first available opportunity, any concerns they have that a child is suffering, or likely to suffer, from abuse or neglect. The concerns should be shared with the employees identified by this policy, who will ensure that all allegations and concerns are taken seriously, and will consider whether it is necessary to share those concerns with the appropriate services such as the local children's social care directorate, the police, Ofsted, the local authority designated officer (LADO), or the NSPCC.

Action on safeguarding concerns does not necessarily mean that the child will be subject to child protection processes. Early intervention in such circumstances may result in the child and their carers being provided with necessary support to prevent the situation from worsening, and therefore improving the child's outcomes.

The procedures below are compulsory and apply to all our employees, volunteers, homestay families, and any other persons working with the organisation whether on a paid, voluntary, or temporary basis. Any failure to comply with them will be addressed through the appropriate GNet disciplinary procedures.

GNet's commitment to safeguarding includes:

- a. Ensuring we practice [safe recruitment](#) of our employees and homestay families by checking their suitability to work with and care for children placed in our care.
- b. [Raising awareness](#) of child protection issues with homestay families and giving them access to training and pertinent information on what action to take when they have concerns.
- c. Giving parents, via the relevant overseas agency in the child's country of origin (hereinafter referred to as the placement agency) and children the [information they need](#) on what action to take if they have concerns.
- d. Appointing a [Designated Safeguarding Lead \(DSL\)](#) and Deputy Designated Safeguarding Lead (DDSL) and ensuring that they undergo the appropriate DSL training every 2 years.
- e. [Training](#) all employees and volunteers about the need to safeguard children and their own responsibilities in safeguarding, together with ensuring they have access to the relevant policies and procedures. This training will be made available to them, within the first 3 months and will be reviewed and refreshed at least every 3 years.
- f. Developing and implementing relevant [policies and procedures](#) and ensuring annually that employees, volunteers, homestay families, parents and children are aware of how to access them.
- g. The Directors have agreed that this [policy will be reviewed every year](#). This review will take into consideration all aspects of applicable legislation and advice current at the time of the review. The next 'Period of Review' will be **September 2023**.

[Appendix 1](#) provides the Definitions of Key Terms relevant to our safeguarding procedures.

As the children within our organisation live in different areas of the UK, they are subject to different safeguarding arrangements according to the local authority area in which they live. Further information is available via the Local Safeguarding Partner (LSP) procedures for that specific area. These can be found by conducting an internet search for 'Local Safeguarding Partner procedures' and the name of the town, city or area in which the child is living.

All staff and homestay families should be aware that children, especially those from overseas, may not feel ready or know how to tell someone they are being abused, exploited or neglected, and/or they may not recognise their experiences as harmful. This should not prevent staff from having a professional curiosity and raising concerns with the DSL if they have caused to do so. All staff and homestays should determine how to build trust with the young people in their care in order to best facilitate communication.

## 2. Policy

- 2.1 This document details the policy aims, safeguarding measures, safer recruitment strategy, response to individual concerns, use of IT and the internet, Information Sharing and Confidentiality. It also describes GNet's response to dealing with students who are suspected of, or are suffering abuse or neglect, or who are at risk of suffering from harm because of abuse or neglect. This document details the child protection roles and responsibilities of employees, the procedures for identifying and managing child protection concerns and issues and for mitigating risks to the safety and welfare of students.
- 2.2 This policy can be accessed via the website. The policies are referenced in the student and homestay family handbooks, and parent information as well forming part of the induction process for new employees, volunteers, and homestay families. Safeguarding awareness and policy review are covered in the student Initial Visit.
- 2.3 This policy focuses on the measures in place for students who are under the care of GNet
- 2.4 This policy supports GNet's duty to safeguard and promote the welfare of students. This policy is made with reference to Statutory Guidance for Schools and Colleges on Safeguarding Children and Safer Recruitment in Education, Department for Education; Keeping Children Safe in Education (September 2019) and Working Together to Safeguard Children, 2019. GNet's policies and processes are in line with the requirements of the Association of Education and Guardianship of International Students (AEGIS), National Minimum Boarding Standards and sector specific training experts. GNet refers to various expert sources providing advice on child abuse and safeguarding such as the Local Safeguarding Partners, NSPCC website and Barnardo's when developing policies, procedures and managing incidents.
- 2.5 Safeguarding & Prevent Contacts – The contact information below is provided via the company website, policies, handbooks, guides and publications, to all those who come into contact with GNet including, employees, volunteers, parents, students, schools, homestay families, drivers, local coordinators and agents. All local contacts for students are in the student profile and provided to the student and homestay family when hosting. Students prior to arrival in the UK receive Pre-Arrival details which refers to the policies as well as highlighting how to access help and support. This is discussed at the Initial Visit which takes place in the first few weeks of school when a member of the team will go through the Student Handbook.

Designated Safeguarding Lead & Prevent Lead – Director Siobhan Skaife

01865 893213 / 07961 490673 | [siobhan@guardianfamily.co.uk](mailto:siobhan@guardianfamily.co.uk)

Deputy Designated Safeguarding Lead – Emily Cavender-Dengel

01865 893213 / 07539 021684 | [emily@guardianfamily.co.uk](mailto:emily@guardianfamily.co.uk)

- 2.6 Concerns in relation to any employee, should be directed to the DSL. If the concern relates to the Director, concerns should be directly to the DDSL on a confidential basis without disclosing to the safeguarding officer the matter it relates to. Concerns about either the DSL or DDSL can also be addressed with our Safeguarding Partners as detailed below.

## Safeguarding Partners

All LADO contacts are contained in Appendix 8, by county and are made accessible to all concerned. GNet registered office is in Oxford, whose current safeguarding contact details are as follows:

Oxfordshire Safeguarding Children Board (OSCB)

<https://www.oscb.org.uk/about-us/> | [oscb@oxfordshire.gov.uk](mailto:oscb@oxfordshire.gov.uk) | 01865 815843

LADO.SafeguardingChildren@oxfordshire.gov.uk 01865 810603

Alison Beasley - Interim Designated Officer  
Tel: 01865 815956 | Mob: 07833 436649  
Email: [alison.beasley@oxfordshire.gov.uk](mailto:alison.beasley@oxfordshire.gov.uk)  
Sandra Pasquet - Assistant Designated Officer  
Tel: 01865 323457 | Mob: 07785 453264  
Email: [Sandra.Pasquet@oxfordshire.gov.uk](mailto:Sandra.Pasquet@oxfordshire.gov.uk)  
Children and Families Assessment Duty Teams  
South Assessment Team - 01865 323041  
Oxford City Assessment Team - 01865 328563  
North Assessment Team - 01865 323039

Donna Crozier - Assistant Designated Officer  
Tel: 01865 816382 | Mob: 07901 331799  
Email: [donna.crozier@oxfordshire.gov.uk](mailto:donna.crozier@oxfordshire.gov.uk)  
Hannah Burke-Smith - Assistant Designated Officer  
Tel: 01865 813032 | Mob: 07867 467822  
Email: [Hannah.Burke-Smith@oxfordshire.gov.uk](mailto:Hannah.Burke-Smith@oxfordshire.gov.uk)  
Safeguarding Service Manager  
Hazel Cringle - Interim Safeguarding Manager  
Tel: 07825 865668  
[hazel.cringles@oxfordshire.gov.uk](mailto:hazel.cringles@oxfordshire.gov.uk)

Multi Agency Safeguarding Hub (MASH) 0345 050 7666 - MASH details are provided to all Homestay families.

### 3. Key Principles

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- 3.1 GNet understands 'safeguarding' to be a recognised multi-agency pro-active process for protecting children at risk of harm or potential abuse. Effective safeguarding will reduce the need for action to protect children from harm.

GNet aims to protect children from all types of abuse:

- child sexual exploitation
- radicalisation and extremism
- female genital mutilation
- physical, emotional, sexual abuse or neglect
- domestic abuse
- online abuse
- bullying and cyber bullying
- child trafficking
- grooming

- 3.2 GNet has a structure in place for safeguarding young people. The Designated Safeguarding and Prevent Lead (DSL) – Siobhan Skaife has designated safeguarding and prevent responsibilities.
- 3.3 Employees, homestay families, volunteers and drivers working in direct contact with young people and / or vulnerable individuals on a day-to-day basis may come across signs of harm and/or abuse. Employees and homestay families need to ensure that any concerns for the wellbeing of a student is reported to the DSL as quickly as possible (at most, within 24 hours).
- 3.4 The DSL will invoke the appropriate procedures to protect the young person involving Social Services and the Police if appropriate. Where anyone is unsure and needs guidance about safeguarding issues, they are encouraged to seek support from the DSL.
- 3.5. Further guidance can be obtained later in this policy under the heading Child Protection and this policy should be read in conjunction with 'Working together to Safeguard Children', 'Keeping Children Safe in Education' and Local Child Safeguarding Board guidance in the area. This policy is in line with AEGIS accreditation.
- 3.6 GNet is committed to the welfare and safeguarding of all children and embraces a best practice approach to further educate and support their employees, homestay families and drivers

### 4. Safeguarding training and development

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- 4.1 GNet guardianship students are provided with the student handbook highlighting safeguarding considerations with details of the company's 24-hour seven-day a week emergency numbers and alternative communication methods including social media options such as WhatsApp should they wish to speak to a representative from GNet.
- 4.2 GNet aim to ensure that the students in our care experience always a caring and secure environment in which they feel safe respected and valued. GNet promote an environment of trust, openness communication between students, schools and GNet employees and homestay families, so that the student welfare, safety, and pastoral care is recognised as a top priority.
- 4.3 GNet takes its statutory responsibility seriously in maintaining links with the appropriate agencies involved with child welfare and will report any child it believes is suffering from any form of abuse. All children, employees, homestay families and volunteers are required to report concerns immediately in confidence to DSL by telephoning the office or out of hours by mobile telephone.
- 4.4 Employees, Homestay Families and volunteers are provided with opportunities for continued training and development in their Safeguarding and child protection knowledge. Opportunities arise through in-house training, homestay family annual update visits and periodic information sharing via email.
- 4.5 All employees are required to obtain a minimum level 1 in Safeguarding & Child Protection, with the DSL and DDSL holding a minimum level 3

- 4.6 GNet is committed to safeguarding and ensuring the welfare of children, young people and vulnerable adults and expects all employees and volunteers to share this commitment. The suitability of all prospective employees, volunteers and homestay families will be assessed during the recruitment process in line with this commitment.

## 5. Employees & Safer Recruitment

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GNet's Safer Recruitment Policy outlines the procedures and steps taken to ensure that the organisation upholds its commitment to safeguarding and ensuring the welfare of children. This policy along with all other policies are available on the website and upon request.

## 6. Homestay family recruitment and procedures

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- 6.1 GNet follows their Safer Recruitment Policy document for the recruitment of homestay families, as well as maintaining ongoing monitoring and providing continued support.
- 6.2 All GNet homestay families are advised to minimise physical contact with students, except for reasons of health and safety, or where physical contact may be a necessary part of organisation (e.g. safe manual handling).
- 6.3 GNet has a responsibility for the safety of their students and therefore reserves the right to deny appointment to individuals where DBS checks suggest that they may pose a danger.
- 6.4 GNet will only use homestay families with a current enhanced DBS clearance on all adults and children within the household aged 16 and above.
- 6.5 GNet will evaluate information about any homestay family criminal record and make sensible, fair, and consistent judgements about whether the individual is safe to engage (or remain engaged) in the employment role, office, or voluntary activity.
- 6.6 A social services background check (part of the Enhanced Disclosure) will also be acquired for individuals after completing an application form and signing the appropriate authorisation form. GNet will evaluate information about the homestay family social services record and make sensible, fair, and consistent judgements about whether the individual(s) is/are safe to engage as a host family.
- 6.7 On receipt of the signed application form personal and professional references will be sought and verified
- 6.8 On receiving positive references and after a telephone conversation with both referees, GNet will then apply for the Enhanced DBS check on the main carers in the household. A decision will be necessary as to ascertain if the homestay family will be suitable.
- 6.9 A homestay visit will be arranged. This visit will be used to carry out a risk assessment of the property, review any current DBS certificates and to speak to the family about caring for an international student in their home and to answer any questions on our safeguarding and child protection policy and to give details of how to contact the Safeguarding team.
- 6.10 A fair and consistent decision will be made based on the result provided by the Enhanced DBS.
- 6.11 Further to consistent positive information being received a Homestay Handbook will be issued to the homestay family and details of their first student placement will be arranged.
- 6.12 The homestay family will be offered opportunities for engaging with safeguarding training as well as being informed of Safeguarding updates and changes through periodic communications and their annual visit.
- 6.13 Safer recruitment and safeguarding training for homestay families will be recorded and monitored.

## 7. Safeguarding for Taxi Recruitment and Travel

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- 7.1. GNet have an established transport and travel procedures which ensure our internal processes provide the highest levels of safeguarding to our students. The procedures outline processes for booking transfers, sending taxi requests and confirmations to guarantee that students are safely transported to and from the destinations.
- 7.2. GNet follows the Safer Recruitment Policy document for the recruitment of transport companies and drivers as well as, maintaining ongoing monitoring of the companies and individual.

## 8. Responding to wellbeing concerns

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- 8.1. Not all concerns regarding a GNet student will be safeguarding concerns. Concerns of a wellbeing nature will be monitored via student, school, homestay family and parent feedback. Feedback is obtained and gathered via regular communication with schools, parents, students, and homestay families as well as the requisite feedback forms being distributed to school tutors, homestay families and students.
- 8.2. Wellbeing concerns are recorded and monitored regularly, and any actions decided by the directors on a per case basis and recorded in the student's personal file.
- 8.3. Where the concern is of a safeguarding nature, employees and homestay families must respond promptly and submit their concerns in writing as laid out in this policy.
- 8.4. All reports to GNet from homestay families, schools, students, and parents are initially regarded as "A Child in Need". The DSL is notified, and a record is created in the student record file for the incident to be effectively managed, the safety of the student to be maximised and any risk to be minimised. Any report pertaining to child protection will be automatically classified as highest priority.
- 8.5. An additional student folder will be created for the DSL and DDSL to manage all correspondence and recorded actions.
- 8.6. Information will be evaluated on the day of receipt and a decision made and recorded regarding the next course of action and/or outcome. This could include no further action, GNet emergency meeting to decide on future actions, or emergency action to protect a child through the statutory authorities (example police or social services) where there is a risk to the life of a child or the possibility of serious immediate harm.
- 8.7. Where a crime may have been committed the police must be informed at the earliest opportunity, and they will decide whether to commence a criminal investigation. Reporting the matter to the police must be recorded in the student file.

## Relevant Guidance

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This policy takes into consideration the following legislation and guidance:

- Working Together to Safeguard Children
- Keeping Children Safe in Education
- What to do if you are Worried a Child is being Abused
- Children Act 1989 and Children Act 2004
- Guidance for Safer Working Practice in Education
- Information Sharing: Guidance for practitioners and managers

This policy should be read in conjunction with our other relevant safeguarding policies.

## 9. Safeguarding and Child Protection Responsibilities

To ensure our organisation is prepared for and able to discharge its safeguarding responsibilities:

GNet has a Designated Safeguarding Lead (DSL) (and Deputy to act in their absence) and all children, homestay families, employees and volunteers are aware of the named person and the process of reporting concerns to them.

The name of the designated employee and their contact details are included throughout this policy and at [Appendix 2](#). The role of the DSL includes:

- Monitoring and recording concerns about the well-being of a child or young person
- Giving advice to employees and homestay families
- Being an identifiable point of contact both inside and outside of the organisation
- Making referrals to the Local Authority Children's Services and the police
- Liaising with other agencies such as schools
- Arranging training for employees, volunteers, and homestay families
- Drafting, implementing, and reviewing policies and procedures
- Ensuring safer recruitment practices are followed
- Liaising with the Designated Safeguarding Director (DSD)

We have procedures for reporting, recording, and reviewing cases where suspected abuse or neglect has been identified.

All employees and homestay families have a clear understanding of our Code of Conduct.

At least one Director has designated safeguarding responsibility as part of their role, including governance and scrutiny of policies and procedures, day to day management of safeguarding concerns, information sharing and recording, handling allegations made against employees, and generally supporting the work of the DSL.

The DSL contacts each relevant LSP to make them aware of the activities undertaken by GNet in their area via email, letter, or telephone. The DSL makes contact and liaises with their counterparts in each of the partner schools attended by children placed with the GNet.

Where there is a safeguarding concern, the DSL liaises with the school, local children's social care, police, and the LSP as necessary, and ensures that all local inter-agency procedures relevant to the area in which the child is living are followed and documented.

Where there are safeguarding concerns a Record of Concern is completed (ROC). Such records will be kept in a secure manner, and in accordance with retention policies of the organisation.

## 10. Defining Child Abuse and Neglect

### 10.1 What is Abuse and Neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or **by failing to act to prevent harm**.

All employees, volunteers and homestay families should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to, bullying (including cyberbullying), gender-based violence / sexual assaults and sexting. It is important that this is recognised as and responded to as a safeguarding issue.

Someone might become concerned for a child because of:

- [comments](#) made by the child, parent, homestay family members, school employees or friends
- [changes in a child's behaviour](#) or mood which may indicate abuse or neglect
- indications that the homestay family is under [extreme stress](#), which may be because of issues such as financial pressures, relationship difficulties, domestic abuse, or violence
- [by a series of events](#), which, may not be thought to be of concern individually, but when they are viewed together can be considered as significant



## 10.2 Who Abuses Children?

Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger (for example, via the internet). They may be abused by an individual adult a group, or another child/ren. Children may be also experience abuse when attending clubs or associations, and at leisure or sporting facilities, events, or activities.

Children who are [living away from their families](#) are especially vulnerable to being abused.

## 10.3 Categories of abuse and neglect

There are four defined categories of child abuse and forms of significant harm. These are:

[Neglect](#)      [Physical abuse](#)      [Emotional abuse](#)      [Sexual abuse](#)

### Neglect

**Neglect** is the persistent failure of a parent or carer to meet a child's basic physical and / or psychological needs, which is likely to result in the serious impairment of the child's health or development.

Neglect may occur during pregnancy because of a mother's drug or alcohol misuse, parental mental ill health, learning difficulties, or because of a combination of these factors. Where a parent or carer is suffering domestic abuse or violence, the needs of the child may be neglected.

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

- provide adequate food, clothing, and shelter (including excluding the child from the home or abandoning them elsewhere)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision, including using inappropriate people to care for the child
- ensure access to appropriate medical care or treatment, as required

It may also include being unresponsive to, a child's basic emotional, social, and educational needs.

### Physical abuse

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

Physical harm may also be caused when a parent makes up symptoms of, or deliberately makes a child ill (also known as fabricated or induced illness).

### Sexual abuse

**Sexual** abuse involves forcing or enticing a child or young person to take part in sexual activities whether the child is aware of what is happening. It may not necessarily involve violence. Sexual abuse may involve physical contact, including assault by penetration (vaginal, anal, or oral); or non-penetrative acts such as masturbation, kissing and rubbing, including touching the child's body outside of their clothing.

Sexual abuse includes non-contact actions, such as involving children in looking at or in the production of pornographic materials, watching sexual activities, or encouraging them to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse can take place via the internet and mobile phone technology. It is not just perpetrated by adult males; women can also sexually abuse, as can other children.

Sexual abuse includes children being abused through organised networks of perpetrators or peers via gang membership or association.

### Emotional Abuse

**Emotional** abuse is the persistent emotional maltreatment of a child, which can have significant and long-standing effects on their emotional development. This may include:

- telling 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 beyond the child's developmental capability, as well as overprotection, limiting exploration, and learning or preventing the child participating in normal social interaction

- seeing or hearing the ill-treatment of another for example 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 also occur alone.

A list of possible indicators of abuse and neglect is included at [Appendix 3](#).

## 10.4 Children in Specific Circumstances

GNet has due regard to government guidance for children in specific circumstances as outlined below:

- child sexual exploitation (CSE) \*
- preventing radicalisation and extremist behaviour \*
- 'sexting', online safety, and teenage relationship abuse \*
- female genital mutilation (FGM) \*
- bullying including cyberbullying
- domestic violence
- faith abuse
- forced marriage
- gangs, youth violence and trafficking

Further information (\*) is contained at [Appendix 4](#). Government guidance can be found at [www.gov.uk](http://www.gov.uk)

## 10.5 Upskirting

Since 12 April 2019, upskirting has been a criminal offence in England and Wales.

Due to upskirting now being classified as a crime, the guidance in KCSIE 2019 has been updated to include it as an example of peer on peer abuse.

Upskirting is described in the following way by KCSIE: "Upskirting typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm".

Under the Voyeurism Act, upskirting offenders can now be arrested, face up to 2 years in prison and have their name placed on the sex offenders register if caught upskirting. This includes instances where culprits say the images were taken just for a laugh.

What may seem like harmless fun can have deeper consequences for both the victim and the perpetrator and everyone should be made aware of this."

## 11. Acting on Concerns

Homestay families, GNet employees and volunteers need to be vigilant about safeguarding concerns and **act appropriately, effectively, and promptly** when dealing with such concerns.

It should never be assumed that someone else will pass on information which may be critical to the safety and wellbeing of the child. Everyone has a duty of care to pass on their concerns and therefore would be failing in this duty if they did not do so.

### 11.1 Taking Immediate Action

Anyone concerned that a child may be suffering, or is at risk of experiencing, abuse or neglect should ensure the safety and wellbeing of the child and / or others. Depending on each individual situation, the following should be considered:

1. Immediately evaluate the risk and take steps to ensure the child is in no immediate danger
2. Dial 999 for an ambulance or take appropriate action to provide medical assistance or treatment
3. Contact the police if a crime has been or may have been committed
4. Contact the DSL to discuss the situation and receive advice
5. Make a written complete a Record of Concern (ROC) (shown at **Appendix 5**)
6. If the DSL or DDSL cannot be contacted, and there is an immediate concern for the safety of the child, advice should be sought directly from children's social care or the police in the area where the child is living. Details of who to contact are contained in Appendix 8 and further information can be found on the LSP individual websites. Direct links to these can be found at:

<https://www.childprotectionuk.co.uk/local-safeguarding-children-boards-for-england-and-wales.php>

All homestay families, family members, GNet employees and volunteers are authorised to call emergency services, without referral, to ensure there is no delay. The DSL should be contacted as soon as is practicable afterwards to inform them of the situation and seek further advice.

Although all employees and homestay families should do what they can to ensure the immediate safety of a child, they must not put themselves in risky or dangerous situations.

### 11.2 Preserving Evidence

The police are responsible for the gathering and preservation of evidence to pursue criminal allegations against people causing harm. Where it is likely that a criminal act has been committed against a child, the police should be contacted immediately.

The first concern is always to ensure the safety and wellbeing of the alleged victim. However, in situations where there has been or may have been a crime and the police have been called it is important that forensic and other evidence is collected and preserved. The police will attend the scene, and agencies and individuals can ensure evidence is not contaminated by:

- disturbing a 'scene' as little as possible, sealing off areas if possible
- discouraging washing / bathing / eating / drinking / smoking and use of the toilet in cases of sexual assault
- not cleaning or allowing further use by others of a toilet used by the victim since the alleged incident in cases of sexual assault
- not handling items which may have DNA evidence on them
- putting any bedding, clothing which has been removed, or any significant items given to them (weapons etc) in a safe, dry place in bags (for example bin liners or paper bag)

Homestay families, GNet employees or volunteers can also contribute to evidence by recording their observations in relation to what the child has said, the appearance and behaviour of the child, anyone else involved, and any actions taken by them or others – see ROC at Appendix 5.

### 11.3 Responding to Disclosures

Disclosures by the child should be listened to and recorded carefully on the ROC, as soon as possible, using their own words where possible. Homestay families, GNet employees and volunteers should also:

- given assurances that they are taking the concerns seriously
- listen carefully to what the child is saying, staying calm, getting as clear a picture as possible, and avoid asking leading questions (questions which suggest an answer to the child) or speculating about what has happened to the child or who has harmed them
- not give promises of confidentiality

The child should not be questioned in detail by anyone at this stage, to avoid creating unnecessary stress through repeatedly describing events or creating a perception that they are not believed. Such questioning can also risk the contamination of evidence. This should not detract from the initial seeking of information to establish basic facts.

The person alleged to have caused harm should not be contacted, unless this is part of an emergency action to safeguard the child or others (for example, if it is necessary to suspend a homestay family or other member of employees or volunteer following allegations of abuse or neglect – see Allegations against a Person who works with Children and Young People).

A written record (ROC) of the disclosure should be made as soon as possible (see Section 6 below).

### 11.4 Referrals to Children's Social Care

When concerns are raised by employees, volunteers, children, parents or homestay families, the DSL should:

- ascertain whether the situation falls within the definitions of abuse outlined in this policy
- decide upon immediate action required
- consider whether an internal investigation is necessary (for example if an allegation has been made against a homestay family, employees or volunteer) and ensure that the procedures set out in the relevant policy are followed, and the LADO is informed
- where abuse is suspected, make a referral to the appropriate agency
- preserve any evidence
- support the child and any employees involved
- seek advice (for example from the NSPCC).

Where the DSL makes a referral to Children's Social Care the following should be taken into consideration:

- is the consent of the parent necessary (although refusal should never be a barrier to sharing information where there are concerns about a child)? Consent should not be sought where doing so would place a child at further risk of harm, cause delay, impede a criminal investigation or place any other person at risk of harm
- Follow up any information shared over the telephone in writing in accordance with LSP procedures (usually within 24 hours)
- seek feedback concerning the referral, if it is not forthcoming, no later than 3 working days after referral
- where the DSL is not satisfied with the outcome of the referral, the escalation policy in the relevant local authority should be implemented
- what action is necessary, following the referral, to continue to safeguard and support the child, employees and, where appropriate, homestay family or parent via the placement agency
- the DSL should attend any relevant multi-agency meetings, contribute to any plans concerning the child, and liaise with the child's school, and parent via the placement agency
- the DSL should also ensure that careful written records are made of the concern raised, action taken, information shared, and any further action points to be taken in the future

## 12. RECORDING CONCERNS

It is vital that the homestay family, employee, or volunteer makes a written record of any incident or allegation is made as soon as possible after the information is obtained.

Written records must reflect as accurately as possible what was said and done by those initially involved in the incident either as a victim, suspect or potential witness. The notes must be kept safe as it may be necessary to make records available as evidence and to disclose them to the police and/or a court.

The record should include:

- date and time of the incident
- exactly what the child said, using their own words, about the abuse and how it occurred or exactly what has been reported
- appearance and behaviour of the child including any changes noticed
- any injuries observed
- any evidence such a screen shot, and anything the child has written or drawn
- any actions taken (for example contacting police or other emergency services)
- name and signature of the person making the record.

The record should be factual. However, if the record does contain opinion or an assessment, it should be clearly stated as such and be backed up by factual evidence. Information from another person should be clearly attributed to them.

This guidance and example record of concern (ROC) contained in Appendix 5 are to clarify what is considered good practice and meets statutory requirements when recording concerns. There can sometimes be confusion regarding expectations of information sharing about children and their families e.g. what is required and what is not.

GNet use either paper or an electronic ROC to record concerns, this guidance is applicable to both and should be read in conjunction with the updated Safeguarding Records Practice Guidance.

### 12.1 Background

Safeguarding records have been highlighted as an issue within individual management/serious case reviews in counties nationally and the need for robust procedures for the recording, sharing and transfer of information within and between educational establishments.

For some children, a one-off serious incident or concern may occur, and employees will have no doubt that this must be immediately recorded and reported. More often however, it is the accumulation of several small incidents, events or observations that can provide the evidence of harm being caused to a child.

Records should be factually accurate, clear, relevant, up to date and auditable. They should support monitoring, risk assessment and planning, enabling informed and timely referrals to be made when necessary. Safeguarding and promoting the welfare of children is the responsibility of all employees.

#### Statutory Framework (Keeping Children Safe in Education)

- No single professional can have a full picture of a child's needs and circumstances. If children and families are to receive the right help at the right time, everyone who meets them has a role to play in identifying concerns, sharing information, and taking prompt action. (Para 3) Guidance for recording concerns about Children and Young People (CYP)
- All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing. If in doubt about recording requirements, employees should discuss with the designated safeguarding lead. (Para 29)
- It is important for children to receive the right help at the right time to address risks and prevent issues escalating. Research and Serious Case Reviews have repeatedly shown the dangers of failing to take effective action. Poor practice includes: failing to act on and refer the early signs of abuse and neglect; poor record keeping; failing to listen to the views of the child; failing to re-assess concerns when situations do not improve; sharing information too slowly; and a lack of challenge to those who appear not to be taking action. (Para 30)

## 12.2 Role of the DSL

- Ensure all employees know when and how to record concerns about a child's welfare, however small or apparently insignificant.
- Ensure all employees know where to locate key documents such as record of concern forms/have access to an electronic recording system, have access to Part 1 and Annex A of Keeping Children Safe in Education, the GNet code of conduct, child protection policy, What to do if you are worried a child is being abused.
- The DSL or DDSL in their absence, will act on concerns raise as appropriate to the circumstance and in accordance with the procedures contained within this policy.

## 12.3 Safeguarding and Welfare Requirements.

- When a record of concern form is passed to the DSL or completed electronically, it is important that the DSL checks that this is sufficiently detailed and has been signed and dated by the employee reporting the concern.
- The DSL needs to consider the safety and wellbeing of the child and whether the concern raised indicates emerging/unmet needs for the child. The DSL needs to make a professional judgement about how the concern should be responded to. The DSP must record the action taken in response to every record of concern form, regardless of outcome.
- The level of detail will depend on the nature and seriousness of the concern and may include:
  - Requests to employees for monitoring specific aspects of the child/young person's presentation, behaviour, attendance, etc. Be specific in your recording- give timescales /frequency.
  - Discussions and telephone calls, with colleagues, children/young people, and parents, along with a record of full names and dates
  - Record of any professional consultations where advice/guidance has been sought. This should include a record of who was consulted (full name and job title) and date/s consulted
  - Letters sent and received record of the outcomes of any responses or action the DSP/L took, with dates updating the chronology (examples available at: [http://www.thegrid.org.uk/info/welfare/child\\_protection/proformas/index.shtml](http://www.thegrid.org.uk/info/welfare/child_protection/proformas/index.shtml))
  - Updating the child/young person's file as new documents are produced or received
  - Filing all copies of referrals or letters sent
  - Updating the front sheet, if necessary (examples available at: [http://www.thegrid.org.uk/info/welfare/child\\_protection/proformas/index.shtml](http://www.thegrid.org.uk/info/welfare/child_protection/proformas/index.shtml))
  - cross-referencing to files for other children/young people within the family

## 12.4 Summary

- Use of a standard 'record of concern' form by all employees, irrespective of their role, and some guidance about completion is strongly recommended. A proforma for the record of concern form can be found at Appendix 5:
- Blank copies of the record of concern form are easily accessible to all employees
- No sensitive material is communicated by insecure means. This would include email, but also notes left for colleagues. In all cases where specific safeguarding concerns arise, employees must be aware of their responsibility to complete the formal record of concern form.
- A record of concern form or electronic entry should be completed as soon as is reasonably possible (at the latest within 24hours) following a safeguarding concern, to ensure that no details are forgotten.
- The expectation would be that employees would ensure the DSL was informed of the concern in a timely manner, even if this means recording the concern after passing the information on verbally
- Records relating to work with the child and his or her family should use clear, straightforward language, be concise and be accurate not only in fact, but also in differentiating between opinion, judgement, and hypothesis. Employees should be mindful of the need to record information in an objective and professional manner, as it may be shared with the child, parents, and other agencies, as part of an investigation or inquiry. Additionally, safeguarding records may be required for disclosure in court proceedings.

## 12.5 Model – Illustrating Information to Intelligence

T Morrison and J Wonnacott Model of Information to Intelligence 2009 illustrates how we may respond to information, the process in which we gather further evidence and what may get in the way.

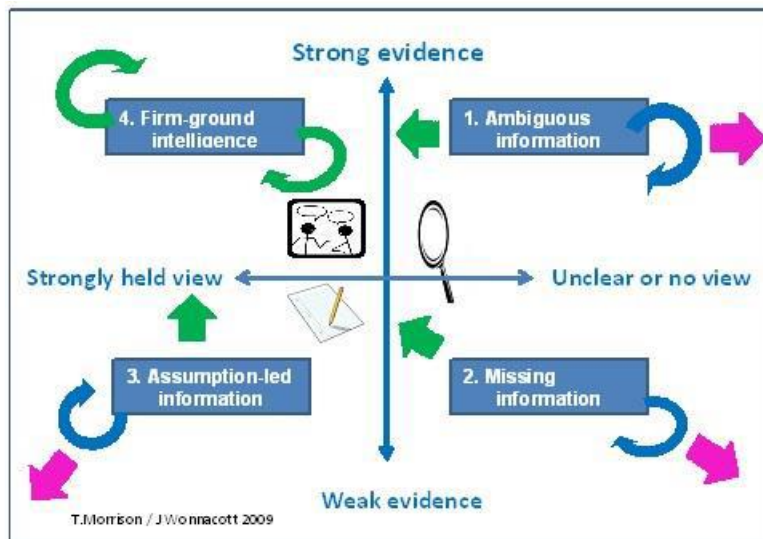
**Types of information** - The nature and presentation of information in any field is rarely straightforward. In the field of children's safeguarding, it can be particularly complex and ambiguous due to professional and inter-agency anxiety, fear of getting it wrong and the difficulties of getting information from anxious and sometimes reluctant service users. In other words, information in this field rarely comes with clarity about what it is, how it has been obtained and what it means.

It is the task of employees to share, sift, search for, and determine how important their information is. It is through this process that raw data (facts, feelings, and beliefs) can be transformed into useful intelligence that helps describe and evidence our concerns. Serious case reviews often provide key messages of how one piece of the jigsaw only makes sense when fitted together with the other pieces.

The diagram shows how different types of evidence and belief can produce four types of information:

1. ambiguous information
2. missing information
3. assumption-led information, or
4. firm-ground intelligence (coherent information)

The Process from information to intelligence



- The curved arrows indicate the need to inquire further and dig deeper to decide whether the information is useful and relevant. If so, it moves towards coherent information (**green arrow**).
- Alternatively, testing information may eliminate it as irrelevant or as ungrounded (**pink arrow**).
- The figures in the middle symbolise scrutiny (magnifying glass), face-to-face discussion (matchstick people) and the recording of information (notebook and pen). These actions are fundamental in helping the worker sift and test the information. This can lead to highlighting and exploring discrepancies in information and deciding whether further inquiries are needed to clarify whether the information is valuable.

This approach starts from the viewpoint that raw information is almost always complex and problematic. However, we need to test and explore assumptions, ambiguities, or gaps in information, ensuring that analysis and planning are on solid foundations and firm ground.

Note- this model illustrates the full circle of the process from identification of a concern to reporting and response, employees will be involved at different levels of this

## 13. Working with parents

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Parents via the overseas partner should be aware that our organisation will take any reasonable action to safeguard the welfare of children in our care.

In cases where GNet has reason to be concerned that a child may be suffering significant harm, ill treatment or neglect or other forms of harm, the procedure as detailed earlier in this policy will be followed.

Where appropriate, GNet will approach parents through the overseas partner after consultation with the DSL. However, there may be occasions when we may need to contact another external agency before informing parents of the situation and action taken. This will be carried out on a need to know basis and GNet will make direct contact first with the parent, if possible.

External Agencies who may be consulted include:

- ❖ The local authority
- ❖ The police
- ❖ The local safeguarding partner (LSP)
- ❖ The National Society for the Prevention of Cruelty to Children (NSPCC)

Or other specific agencies involved directly with caring for the child, including:

- health care professionals, including health visitors, midwives, doctors and hospital staff
- other professionals who work with children, including play workers and youth and community workers
- probation officers
- teachers and other school staff
- nursery staff
- education welfare officers
- educational psychologists.

We recognise that parents have placed considerable faith and trust in us to care for their children. We shall ensure the overseas partner and parents are provided with contact details for the DSL to speak to concerning any safeguarding issue raised in connection with a child, so that they can liaise with the parents and keep them informed.



## APPENDIX 1: Definition of Key Terms

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**A child or young person (CYP)** is defined by the Children Act 1989 as anyone who has not yet reached their 18th birthday.

**Safeguarding and promoting the welfare of children** is defined 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
- undertaking that role to enable those children to have optimum life chances and to enter adulthood successfully

**A child in need** is defined under the Children Act 1989, if:

- they are unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services by a local authority
- their health or development is likely to be significantly impaired, or further impaired, without the provision for him/her of such services; or
- they are disabled

**Child protection** is a part of the overall concept of safeguarding and promoting the welfare of children. This refers to professional action that is undertaken to protect children who are suffering, or are likely to suffer, significant harm.

**Harm** is defined as the ill treatment or impairment of health and development. This definition was clarified in the Adoption and Children Act 2002 to include, "impairment suffered from seeing or hearing the ill treatment of another".

**Significant harm** was introduced by the Children Act 1989 as the threshold that justifies compulsory intervention in family life by specific professionals, in the best interests of children. Suspicions or allegations that a child is suffering or likely to suffer significant harm should result in an assessment by the local authority in which the child is living. This may include a Section 47 enquiry.

**Physical abuse, sexual abuse, emotional abuse, and neglect are all categories of significant harm**

There are no absolute criteria which can be applied when deciding what constitutes significant harm. Sometimes it can be a single episode, but it is more likely to be an accumulation of significant events, both acute and longer term, which can interrupt, damage, or alter the child's development.

## APPENDIX 2: Useful Contact Numbers

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### Guardian Family Network

Designated Safeguarding Director/Lead	Siobhan Skaife	07961 490673
Deputy DSL	Emily Cavender-Dengel	07539 021684

### NSPCC

0808 800 5000

### Whistleblowing advice line

Concerns relating to the handling of workplace child protection issues 0800 028 0285

8:00 AM to 8:00 PM, Monday to Friday

GNet has a comprehensive Whistleblowing policy, attached as Appendix 9 to this policy, available online and further copies upon request

### Childline

0800 1111

## APPENDIX 3: Indicators of Abuse

### Indicators of Physical Abuse

- Injuries in unexpected places or injuries that look like something (i.e. a cigarette burns, finger marks etc.).
- Unexplained recurrent injuries
- Improbable explanations or inability to explain injuries
- Wearing clothes to cover injuries, even in hot weather
- Fear of medical help or examination
- Aggression towards others or self
- Fear of physical contact – shrinking back if touched
- Admitting that they are punished
- Fear of suspected abuser being contacted

### Indicators of Sexual Abuse

- Sexual health issues such as urinary tract infections, STIs, repeated pregnancy tests or termination of pregnancies
- Other reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia or eating disorder
- Age inappropriate sexual knowledge/behaviour
- Displaying inappropriate sexual behaviour towards others
- Behaving in a sexually provocative way
- Learning problems, poor concentration
- Wetting/soiling
- Sleeplessness, nightmares, fatigue
- Psychosomatic symptoms like abdominal pain
- Multiple sexual partners
- Obsessive cleanliness
- Compulsive vomiting
- Unwillingness to undress in front of others
- Lack of trust or fear of someone they know well, such as not wanting to be alone with an individual

### Indicators of Neglect

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing or general appearance
- Emaciation
- Untreated medical problems
- No social relationships
- Compulsive scavenging
- Destructive tendencies

#### In younger children:

- Short stature and underweight
- Red/purple mottled skin or poor skin
- Swollen limbs with sores that are slow to heal
- Constant tiredness
- Dry sparse hair

- General physical apathy
- Unresponsiveness or indiscriminate in relationships with adults
- Poor dental health
- Medical needs not attended to
- Poor or inappropriate diet leading to diarrhoea, or abnormally voracious appetite indicating hunger
- Poor personal hygiene
- Severe nappy rash
- Emaciation
- Compulsive stealing
- Scavenging for food or clothes
- Inappropriate drinking patterns, e.g. from drains
- Not reaching developmental milestones
- Disordered behaviour
- Low self-esteem
- No social relationships
- Poor intellectual development and underachieving
- Repeated accidents or ingestion of harmful substances arising from inadequate supervision
- Failure to thrive, without an organic reason

### Indicators of Emotional Abuse

- Sudden speech disorders
- Continual self-deprecation
- Overreaction to mistakes
- Extreme fear of any new situation
- Inappropriate response to pain ('I deserve this')
- Neurotic behaviour (rocking, hair twisting)
- Extremes of passivity or aggression
- Fear of parents being contacted
- Self-harm
- Wetting/soiling
- Substance misuse
- Chronic running away
- Inability to play
- Compulsive stealing
- Low self esteem
- Apathy
- Excessively clingy or attention seeking behaviour
- Poor growth
- Distractibility and delayed language development

#### Carers' responses which give cause for concern: -

- Scapegoating
- Ostracising from activities
- Indifference to the person's needs
- Hostility towards the victim
- Ridicule, sarcasm, deliberate frightening, threatening
- Cruelty, like being locked up in cold, dark surroundings or deprived of something
- Encouraging others to respond to the victim in any of these ways

## APPENDIX 4: Specific Safeguarding Concerns

### Child Sexual Exploitation

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

### Radicalisation and Extremist behaviour

See the Radicalisation and Extremism policy and procedure.

Radicalisation can be defined as the action or process of causing someone to adopt radical positions on political or social issues. Signs that may indicate a child is being radicalised include:

- isolating themselves from family and friends
- talking as if from a scripted speech
- unwillingness or inability to discuss their views
- a sudden disrespectful attitude towards others
- increased levels of anger
- increased secretiveness, especially around internet use.

Children who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. Extremists might target them and tell them they can be part of something special, later brainwashing them into cutting themselves off from their friends and family.

### Peer on Peer Abuse

Peer on peer abuse can include: all forms of bullying, being coerced into sending sexual images (sexting), physical or sexual assaults, child sexual exploitation or teenage relationship abuse. Peer on peer abuse is a defined safeguarding issue and should be responded to in the same way as any other concern about a child.

### Upskirting

Since 12 April 2019, upskirting has been a criminal offence in England and Wales. Due to upskirting now being classified as a crime, the guidance in KCSIE has been updated to include it as an example of peer-on-peer abuse.

Upskirting is described in the following way by KCSIE: "Upskirting typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm".

Under the Voyeurism Act, upskirting offenders can now be arrested, face up to 2 years in prison and have their name placed on the sex offenders register if caught upskirting. This includes instances where culprits say the images were taken just for a laugh. What may seem like harmless fun can have deeper consequences for both the victim and the perpetrator and everyone should be made aware of this.

### Children Missing from Home and Education

See the Absent and Missing Child policy and procedure.

Children are best protected by regularly attending school where they will be safe from harm and where there are professionals to monitor their well-being. Any absence by a child from their guardian family or school could be indicative of other safeguarding issues such as bullying, peer on peer abuse, emotional abuse, child sexual exploitation and radicalisation, and should be responded to by following the LSP procedures for the area in which the child lives.

## Self-Harm

GNet homestay families can play an important role in preventing self-harm and supporting children currently engaging in self-harm. Anyone who is aware of a child engaging in or suspected of being at risk of engaging in self-harm should always consult with the DSL.

## Female Genital Mutilation (FGM)

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

Section 5B of the Female Genital Mutilation Act 2003 places a statutory duty upon certain professionals to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. In addition, it is illegal for someone to arrange for a child to have this procedure. Therefore, if concerns are raised about the possibility of this taking place Children's Social Care and/or the Police will be notified. Refer to the Home Office guidance - Mandatory Reporting of Female Genital Mutilation – procedural information, October 2015.

## Forced Marriages

A forced marriage is a marriage in which one or both spouses do not (or, in the case of children and some adults at risk, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual, and emotional pressure. Homestay families may encounter situations where a child is expressing worry or unhappiness over a forthcoming family trip, celebration, or meeting and any concerns regarding this should be raised with the DSL immediately so that any necessary action to protect the child can be undertaken.

## Child's emotional well-being and mental health

Children placed with GNet may be vulnerable through issues such as:

- Missing their birth family
- Missing their home country and friends
- Struggling to adapt to a new country, its language, and customs
- Feeling isolated at their school
- Pressure to perform well academically

Nearly all safeguarding issues that involve targeting, befriending, or grooming (such as child sexual abuse and exploitation) concern children who are unhappy, vulnerable or feel isolated. Other safeguarding issues such as going missing or self-harm, can be as a direct result of these issues. In such cases, GNet can identify early warning signs, and through work with partnership agencies, formulate an early intervention plan that stops the problem from escalating and causing long term harm to the child.

Any employee, volunteers or any homestay family who has concerns about a child's well-being should discuss this with the DSL as soon as possible.

## APPENDIX 5: RECORD OF CONCERN (ROC)

<b>Name of CYP:</b>		<b>Date of Birth/Age:</b>	
<b>Male/Female:</b>	<b>Ethnic Origin:</b>	<b>Disability Y/N:</b>	<b>Religion:</b>
<b>Day/Date:</b>	<b>Month:</b>	<b>Year:</b>	<b>Time reported:</b>
<p><b>Initial Report of Concern:</b></p> <p>In factual terms, use of open-ended questions to clarify e.g. Who, What, When, Where and How? What did the CYP say? How are they feeling? How is their behaviour? Are there any signs of injuries or pain (if so, illustrate on body-map)? Are any other CYP or adults involved?</p>			
<p><b>Additional Information:</b></p> <p>Your views on what you know about CYP e.g. any previous concerns? How are they doing in school? Any comment on their presentation, personal circumstances (health, development, additional needs), identity, race, religion and/or if known, their social relationships with their family, friends, and wider network?</p>			
<p><b>Your response and actions to the concern:</b></p> <p>What you have said to CYP / done / agreed to do?</p>			
<b>Name of referrer:</b>		<b>Role of referrer:</b>	

<p><b>DSL's immediate response and actions taken:</b></p> <p>Including sharing and gathering information, speaking to CYP, parents or homestay families and gauging their response. This may include undertaking a professional consultation. Has any immediate risk assessment been carried out, if so, what?</p>			
<p><b>Information shared with parents / homestay family:</b></p> <p>Are they aware of GNet's concerns / actions carried out to support / safeguard CYP? Do you have consent for this? If not rationale for not sharing information</p>			
<p><b>Information shared with other employees/agencies:</b></p> <p>Who, What, How and your rationale for this</p>			
<p><b>Outcome for the CYP:</b></p> <p>What level of intervention is required to safeguard and promote the CYP's welfare? i.e. where does this level of need sit on the Continuum of Need document – Universal, Targeted, Intensive Support or Specialist/Safeguarding?</p>			
<p><b>Feedback given to person reporting concern:</b></p> <p>This should be an overview omitting any confidential information, consider "need to know".</p>			
<b>Name:</b>		<b>Date:</b>	...../...../.....
<b>Position:</b>		<b>Signature:</b>	

## APPENDIX 6: Guidance on completing a ROC

Headings on the ROC	What is required or / and what to consider about child Note: All the white boxes on ROC to be filled out by the person who has a concern to report, suspects a CYP is at risk of abuse / neglect or the concern has come to you by other means. The grey boxes on ROC to be completed DSL e.g. record their response and actions taken.
CYP Name	Always use the child's full name and any aliases with correct spelling
CYP DOB /age	Need full DOB; this is often needed by other agencies to trace records
Male/Female	If child has unusual spelling of name is clear of their identity / sex
Ethnic Origin	Helpful particularly if concern is in relation to faith abuse, e.g. beliefs held about certain punishment (chastising child with belt) or FGM forced marriage. Help us understand that parent may consider their actions legitimate because of their beliefs and religion
Disability Y/N	Helpful to gauge CYP understanding of the situation / incident and their capacity to protect themselves and consent
Religion	Understanding how child perceives and integrates with within a western society e.g. different values and beliefs. Is CYP able to identify with their culture and belief systems without being made to feel oppressed by other family members, friends, and institutions?
Day, date (including year) and time of concern	It is imperative to provide a timeline for recognition, reporting and response to CYP needs. All services responsible for safeguarding children are required to act in a timely way as delay exposes children to further abuse and neglect and provide evidence that there is no time delay and the safety of children is prioritised.
Initial report of the concern/s	This is to be recorded by the person/s who the disclosure is made or the person who has witnessed or suspects abuse and neglect. This includes any employee, homestay family member or volunteer.
In factual terms	What did the child say? How are they feeling? Any comments about their behaviour? Are there any obvious signs of injuries or pain? (if so, use body map and attach) Are any other children or adults involved? Clarify using open ended questions to clarify, who, what, when and how etc Do not be afraid ever to talk and listen to a CYP, you can clarify with a child what may of happened, is happening etc the more information the better as the process to support and protect child rely on firm grounded information. Children can disclose in stages and so this may be their first attempt and if ignored an opportunity could be lost. Be 'professionally curious' always
Additional information	Your opinion, context of concern/disclosure you may know of the CYP well and their family, friends' peers, because you have spent a lot of time with them. You may live in the area and have local community information, gossip what people have said, if so, record this as it is e.g. 'hearsay' Your views on what you know about the CYP e.g. Any previous concerns? How are they doing in school? How do they get on with others, employees their peers, Any comments on their presentation, their personal circumstances (such as health, development and whether they have any additional needs), their identity, race, religion and/or if known, their social relationships with their family, friend and wider networks?
Your response and actions to the concern	A factual account of what you have said to CYP and agreed to do? This is taking concerns seriously listening and talking to the CYP and being honest and open with them about what your role is e.g. to pass on if child presents as needing support or protection. Apply all the rules of talking and listening to children that accompanies your stage one statutory training. • Recognise • Respond • Record • Report If you hear something and you are concerned say something. This may be a little part of a puzzle that you are unaware as there could be other information on record held by other agencies. You must follow child protection procedures which requires you to pass on to your DSL or DDSL.
Name , Role and Signature	Name needs to be in full and always signed contact details. Never abbreviate as when a CYP records are passed on or information needed by specialist and safeguarding services, following the CYP story / journey can be made difficult if it is not clear who is who and what their role is
DSL's immediate response and actions taken	Your role: GNet have very specific roles for safeguarding including making sure that there is always some available to respond to concerns raised about CYP. Included in this section sharing and gathering information, verification, speaking to CYP, parents or carers and gauging their response. This may also include undertaking a professional consultation. Has any immediate risk assessment been identified / carried out?
Information shared with Parents / carers	Are they aware of concerns / actions carried out to support / safeguard CYP? Do you have consent for this? If not rationale for not sharing information? If not to both why? The only time you would not be speaking to a parent is if you believe that this would place the CYP at risk. Therefore, you should always work openly and honestly with parents and cares and although at times this is difficult in the longer term the outcomes for children is much improved for all parties. Consider that we are responsible for safeguarding and within this required to 'promote the welfare' of CYP. This means that working at this level with CYP and their families is primarily early help and support.
Information shared with other employees/ agencies	Who, what, how and your rationale for this? Consent needed for this. Reminder of confidentiality



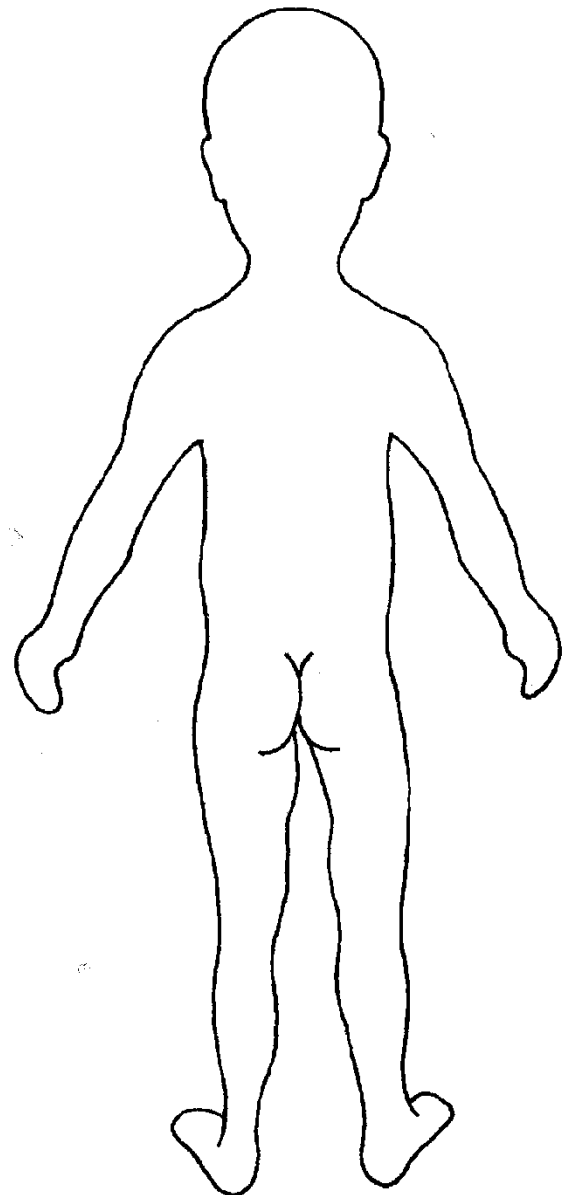
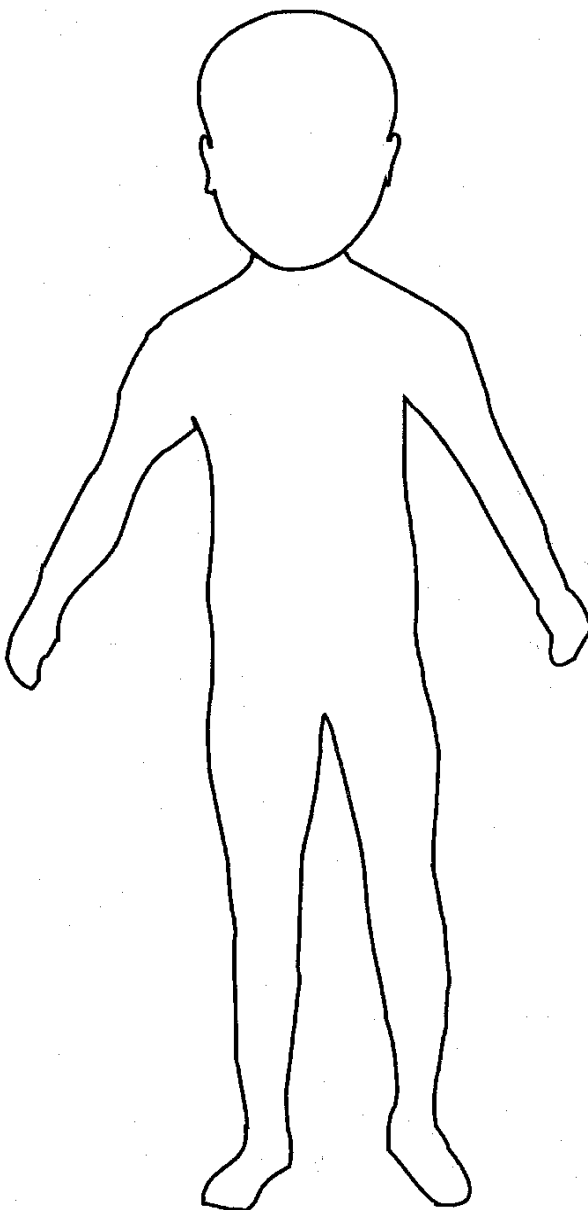
Outcome for the CYP	What level of intervention is required to safeguard and promote the CYP welfare? i.e. where does this level of need sit on the Continuum of Need document <a href="http://www.thegrid.org.uk/info/welfare/child_protection/referral/index.shtml#need">www.thegrid.org.uk/info/welfare/child_protection/referral/index.shtml#need</a> - Universal, Targeted, Intensive Support or Specialist/Safeguarding? If parents are not informed prior to a referral then a clear rationale for not informing needs to be on the referral form but could also be in this section
Feedback given to person reporting concern	Basic outline of the plan for the CYP, consider 'need to know' and GNet's policy on confidentiality. However, this should never get in the way of sharing important information to employees that you have identified as a key part to monitoring and supporting a CYP. Information shared with other member of employees /other agencies? If so, what information was shared and what was the rationale for this? Who, what, how and your rationale for this
Your name Your role or position: Date, day + time of recording Your signature	Name needs to be in full and always sign contact details. Do not abbreviate your name as when a CYP records are passed on or information needed by specialist and safeguarding services, the courts; following the CYP story / journey can be made difficult if it is not clear who is who and what their role was etc It is imperative to provide a timeline for recognition, reporting and response to CYP needs. All services responsible for safeguarding children are required to act in a timely way as delay exposes children to further abuse and neglect. Regulators such as Ofsted scrutinise children's records and expect data controllers to audit children files and evidence that there is no time delay and the safety of children is prioritised

## Checklist and ROC audit for DSL

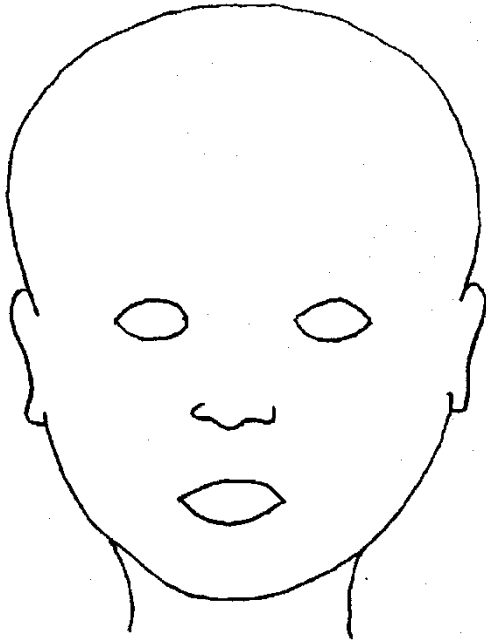
- Child/Young Person (CYP) clearly identified
- Name, designation, and signature of the person completing the record populated
- Date, day, and time of any incidents or when a concern was observed
- Date, day, and time of written record
- If a third party has raised concerns, are details of this person included (name, relationship to the child and their contact details if relevant)
- Distinguish between fact, opinion, and hearsay
- Concern described in sufficient detail, i.e. no further clarification necessary
- Child's own words used
- Swear words, insults, or intimate vocabulary should be written down verbatim
- Are the names of all parties who were involved in the incident, including any witnesses to an event included? Is it clear what their relationship is to the child?
- Record free of jargon
- Written in a professional manner without stereotyping or discrimination
- What did the member of employees say or do in response to the concern?
- Record of concern completed in a timely manner
- Record of concern passed to DSL in a timely manner
- The record includes a completed body map (if relevant) to show any visible injuries
- Handwritten notes of conversation with parents attached securely to this record
- Has DSL completed their sections in full- including action taken and outcome, feedback to employees and information sharing
- If the concerns have not been referred to Children's Services/Police, are the reasons clearly recorded by the DSL

## APPENDIX 7: BODY MAP

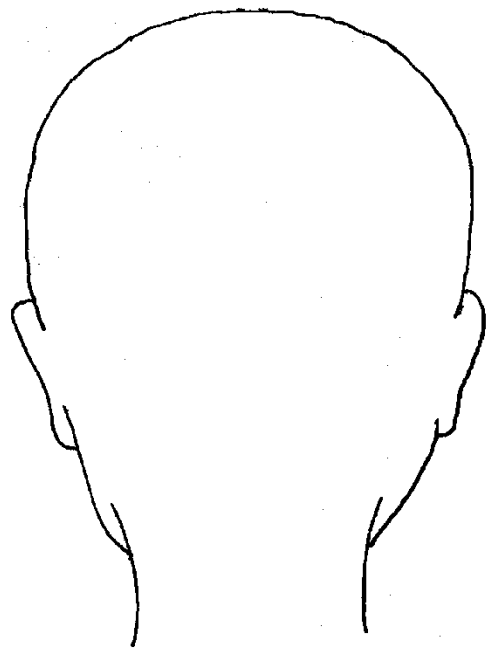
Name of Child:		Date of Birth:	
Name of Employees:		Job title:	
Date and time of observation:			
Description of injury in brief:			



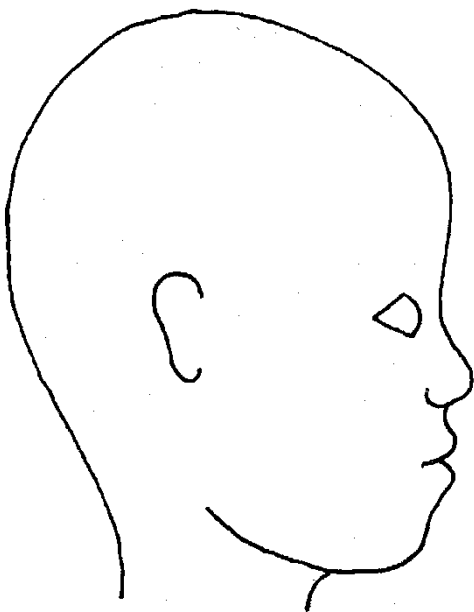
Name of Child:		Date of Birth:	
Date and time of observation:			
Description of injury in brief:			



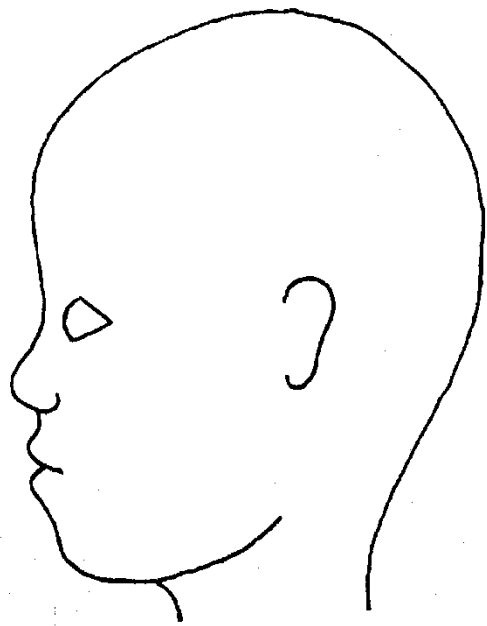
**FRONT**



**BACK**

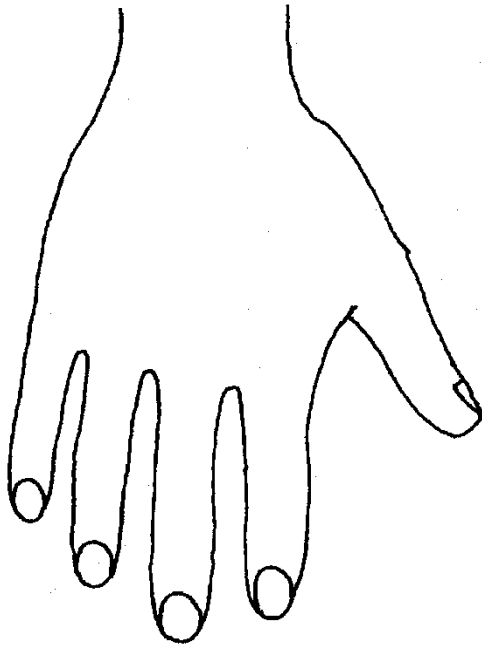


**RIGHT**

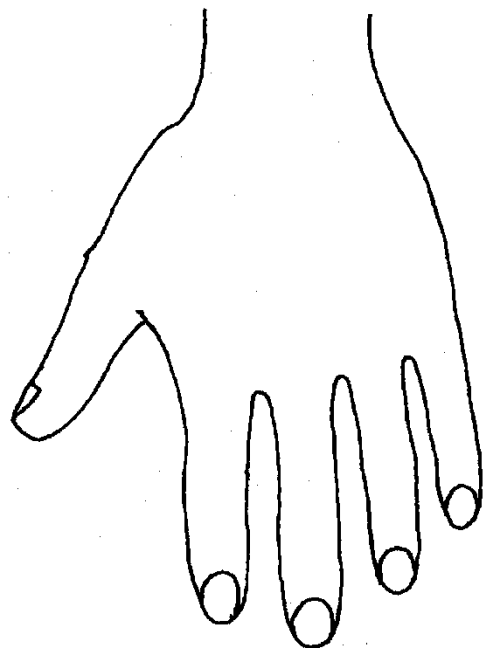


**LEFT**

Name of Child:		Date of Birth:	
Date and time of observation:			
Description of injury in brief:			

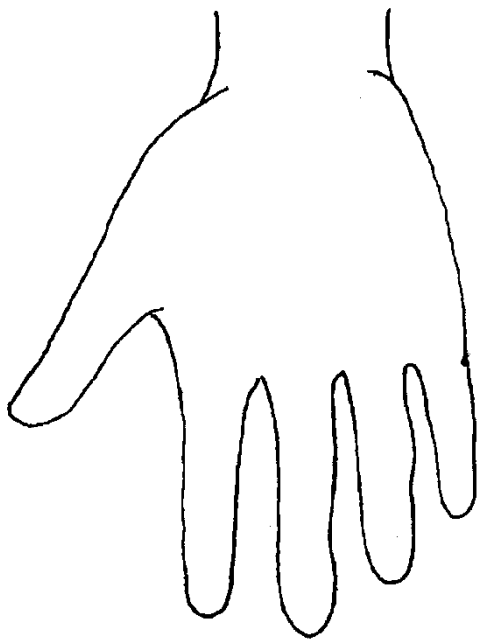


R

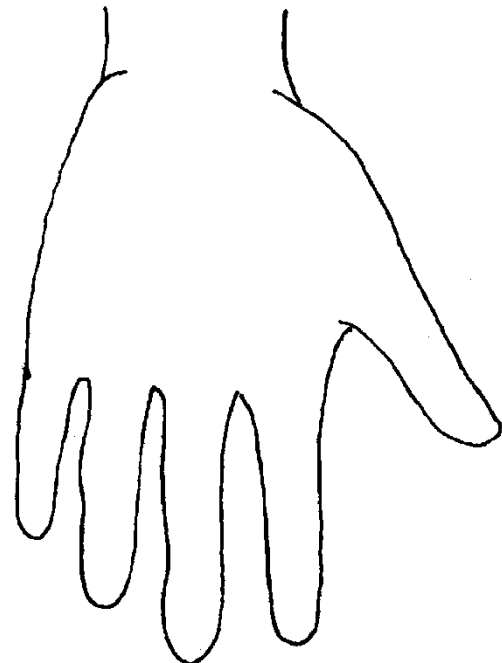


L

BACK



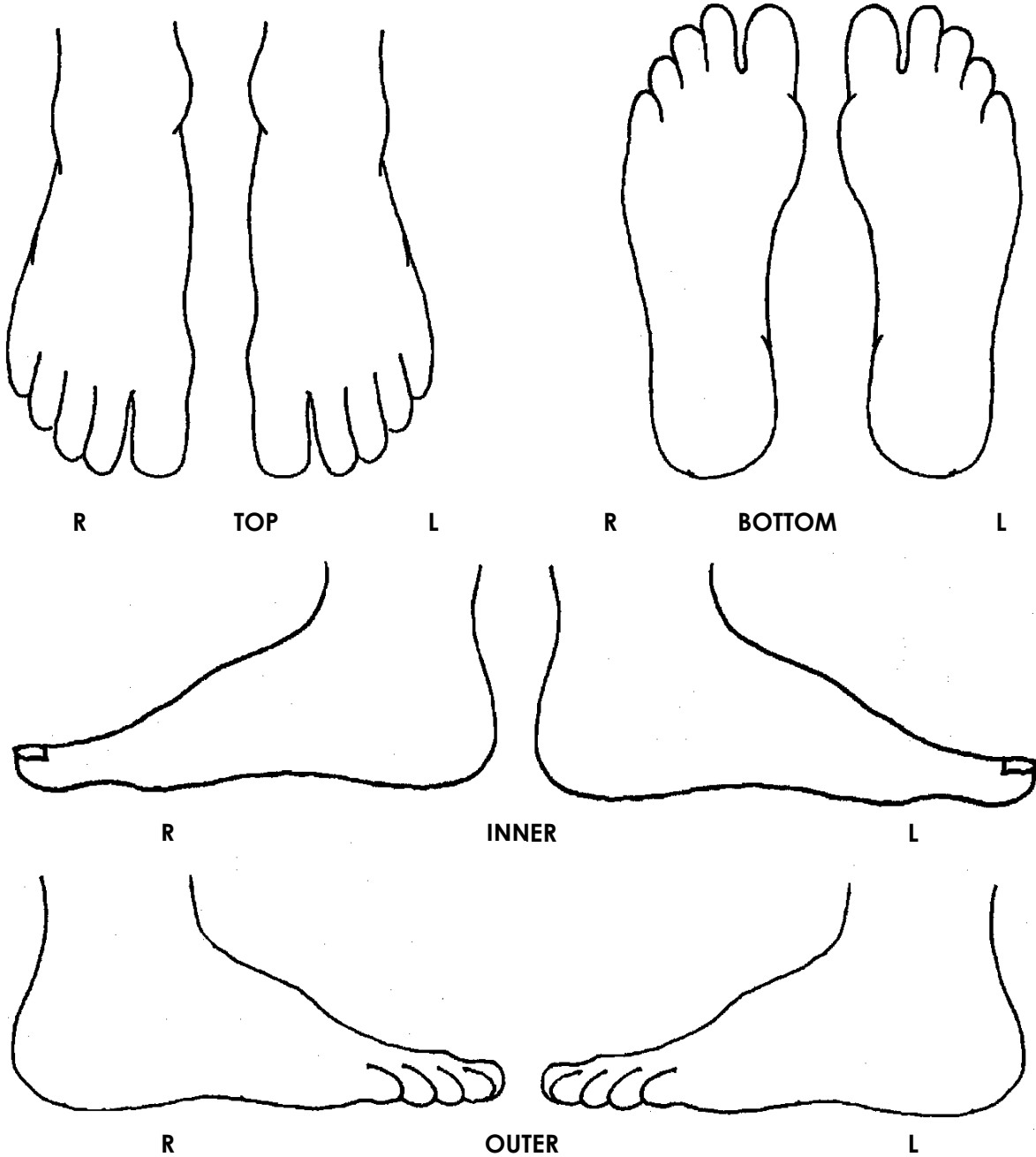
R



L

PALMS

Name of Child:		Date of Birth:	
Date and time of observation:			
Description of injury in brief:			



Name of Employee:		Job title:	
Signature:		Date:	...../...../.....

## APPENDIX 8: LADO Contacts

<https://www.gov.uk/report-child-abuse-to-local-council>

Bedfordshire	lado@bedford.gov.uk 01234 276693 / 0300 3005026 / 0300 300814
Berkshire	Bracknell LADO (Contacted via MASH team) - 01344 352005 Reading LADO lado@brighterfuturesforchildren.org Slough LADO - 01753 474053 West Berkshire LADO – 01635 503090 email: BWSCP@westberks.gov.uk Windsor and Maidenhead LADO - 01628 683202 Wokingham LADO - 0118 9088002
Bristol	nicola.laird@bristol.gov.uk 0117 9037795, 07795 091020
Buckinghamshire	secure-LADO@buckinghamshire.gov.uk 01296 382070
Cambridgeshire	LADO@cambridgeshire.gov.uk 01223 727967 / 0345 0455203
Cheshire East + West	LADO@cheshireeast.gcsx.gov.uk (East) 01270 685904 safeguardinglado@cheshirewestandchester.gov.uk (West)
City of London	LADO@cityoflondon.gov.uk 020 7332 1215.
Cornwall	lado@cornwall.gov.uk 01872 326536
Cumbria	lado@cumbria.gov.uk 03003 033892
Derbyshire	CYPsafeguarding@derby.gcsx.gov.uk 01332 642376
Devon	ladosecure-mailbox@devon.gcsx.gov.uk 01392 384964
Dorset	pan-dorsetscp@dorsetcouncil.gov.uk 01305 221122 01962 876364.
County Durham	CYPSLADOSecure@durham.gov.uk 03000 268 835
East Riding of Yorkshire	tony.marsh@eastriding.gov.uk 01482 392139
East Sussex	Brighton & Hove BHSCP.admin@brighton-hove.gov.uk 01273 295643 duty.0-19datwest@eastsussex.gov.uk 01323 747373 DatEast@eastsussex.gov.uk 01424 724144
Essex	escb@essex.gov.uk 03330 139797 / 0333 013 8936
Gloucestershire	amadmin@gloucestershire.gov.uk; gsep@gloucestershire.gov.uk 01452 426221
Greater London	Barking & Dagenham childrensservices2@lbbd.gov.uk 020 8227 3811 Barnet mash@barnet.gcsx.gov.uk 020 8359 4066 Bexley Childrensocialcare.admin@bexley.gov.uk 020 3045 5440 Brent Family.FrontDoor@brent.gov.uk 020 8937 4300 Bromley mash@bromley.gov.uk 020 8461 7373 / 7379 / 7026 City of London Children.Duty@cityoflondon.cjsm.net 020 7332 3621 Camden LBCMASHadmin@camden.gov.uk 020 7974 3317 Croydon childreferrals@croydon.gov.uk 020 8726 6400

	<p>Ealing ECIRS@ealing.gov.uk 020 8825 8000  Enfield spo@enfield.gcsx.gov.uk 020 8379 5555  Greenwich MASH-referrals@royalgreenwich.gov.uk 020 8921 3172  Hackney fast@hackney.gov.uk 020 8356 5500  Hammersmith and Fulham familyservices@lbhf.gov.uk 020 8753 6600  Haringey lscb@haringey.gov.uk 020 8489 4470  Harrow duty&amp;assess@harrow.gov.uk.cjsm.net 020 8901 2690  Havering tmash@havering.gcsx.gov.uk 01708 433 222  Hillingdon lbhmash@hillingdon.gov.uk 01895 556633  Hounslow childrensocialcare@hounslow.gov.uk 0208 583 6600  Islington CSCReferrals@islington.gov.uk 020 7527 7400  Kensington and Chelsea socialservices@rbkc.gov.uk 020 7361 3013  Kingston Upon-Thames spa@kingston.gov.uk.cjsm.net 020 8547 5008  Lambeth helpprotection@lambeth.cjsm.net 020 7926 5555  Lewisham mashagency@lewisham.gov.uk 020 8314 6660  Merton MertonLSCB@merton.gov.uk.cjsm.net 020 8545 4866/3736  Newham ChildrensTriage@newham.gcsx.gov.uk 020 8430 2000  Redbridge cpat.referrals@redbridge.gov.uk 020 8708 3885  Richmond spa@richmond.gcsx.gov.uk 020 8547 5008  Southwark MASH@southwark.gov.uk 020 7525 1921  Sutton mash@sutton.gov.uk.cjsm.net 020 8770 6001  Tower Hamlets MASH @towerhamlets.gcsx.gov.uk 020 7364 5606 / 5601  Waltham Forest MASH requests@walthamforest.gov.uk 020 8496 2310  Wandsworth ipoc@wandsworth.cjsm.net 020 8871 6622  Westminster accesstochildrensservices@westminster.gov.uk 020 7641 4000</p>
Greater Manchester	<p>Bolton boltonsafeguardingchildren@bolton.gov.uk 01204 337474  Bury m.gay@bury.gov.uk 0161 253 5342  Manchester quality.assurance@manchester.gov.uk 0161 234 1214  Oldham colette.morris@oldham.gov.uk 0161 770 8870  Rochdale lado@rochdale.gov.uk 0300 3030 350  Salford stephen.westhead@salford.gov.uk / elizabeth.peppiatt@ 0161 603 4350  Stockport gill.moore@stockport.gov.uk 0161 474 5657 / 07866 999683  Tameside tania.brown@tameside.gov.uk 0161 342 4398  Trafford anita.hopkins@trafford.gov.uk 0161 912 5024  Wigan lado@wigan.gov.uk 01942 486 034</p>
Hampshire	LADO@southampton.gov.uk; child.protection@hants.gov.uk 01962 876364
Herefordshire	cypd@herefordshire.gcsx.gov.uk 01432 260554
Hertfordshire	LADO.Referral@hertfordshire.gov.uk 0300 123 4043
Isle of Wight	lado@iow.gov.uk 01983 823723
Kent	kentchildrenslado@kent.gov.uk 03000 410 888
Lancashire	lado@blackpool.gov.uk 01253 477541
Leicestershire + Rutland	CFS-LADO@leics.gov.uk; Lado-allegations-referrals@leicester.gov.uk 0116 305 4141
Lincolnshire	lscp@lincolnshire.gov.uk 01522 554674
Merseyside	<p>Knowsley knowsley.mash@knowsley.gcsx.gov.uk 0151 443 3928  Liverpool Jacquelyn.taylor@liverpool.gov.uk 0151 233 0493/0510  Sefton safeguardingunitadmin@sefton.gcsx.gov.uk 0151 934 3783  St Helens EDT@halton.gov.uk 01744 671265  Wirral safeguardianunit@wirral.gov.uk 0151 666442 / 07780 508918</p>

Norfolk	LADO@norfolk.gov.uk 01603 223473
North Yorkshire	safeguardingunit@northyorks.gov.uk 01609 532477 York lado@york.gov.uk 01904 551783
Northamptonshire	LADOReferral@northamptonshire.gov.uk 01604 364 031
Northumberland	LADO@northumberland.gcsx.gov 01670 620327 lado@sunderland.gov.uk
Nottinghamshire	info.nscp@nottsc.gov.uk 0115 977 3921.
Oxfordshire	LADO.SafeguardingChildren@oxfordshire.gov.uk 01865 810603
Peterborough	LADO@peterborough.gov.uk 01733 864038
Shropshire	lado@shropshire.gov.uk 0345 678 9021
Somerset	sdinputters@somerset.gov.uk 0300 123 2224
South Yorkshire	Barnsley georgegillmore@barnsley.gov.uk 01226 772400 Doncaster LADO@dcstrust.co.uk 01302 737748 Rotherham 01709 336080 Sheffield Steven.hill@sheffield.gov.uk 07814 382424.
Staffordshire	firstr@staffordshire.gov.uk 01785 278640 / 01785 278997
Suffolk	LADO@suffolk.gov.uk 0300 123 2044
Surrey	LADO@surreycc.gov.uk 0300 123 1650
Tyne and Wear	hilary.bagley@southtyneside.gov.uk 0191 424 6302
Warwickshire	lado@warwickshire.gov.uk 01926 412523
West Midlands	enquiries@wbhelpline.org.uk Birmingham Ladoteam@birminghamchildrenstrust.co.uk 0121 675 1669 Coventry lado@coventry.gov.uk 024 7697 5483 Dudley allegations@dudley.gov.uk 01384 813061 Sandwell lscb_sandwell@sandwell.gov.uk 0121 569 4800 Solihull cpru@solihull.gov.uk 0121 788 4310 Walsall seona.baker@walsall.gov.uk 07951 819648 Wolverhampton paulcooper@secure.wolverhampton.gov.uk 01902 550661
West Sussex	LADO@WestSussex.gov.uk / MASH@westsussex.gov.uk 0330 2226450 / 0330 2226664
West Yorkshire	Bradford BSCB@bradford.gov.uk 01274 437 915 Calderdale ladoadmin@calderdale.gov.uk 01422 394 086 Kirklees KSCP.admin@kirklees.gov.uk 01484 226 748 Leeds lado@leeds.gov.uk / lscp.info@leeds.gov.uk 0113 3786018 Wakefield lado.referrals@wakefield.gov.uk 01977 727 032
Wiltshire	mash@wiltshire.gov.uk 0300 456 0100 / 0845 607 0888
Worcestershire	LADO@Worcestershire.gov.uk 01905 768020



## APPENDIX 9: Useful Mental Health Contacts

Action for Children - Parent Talk  
<https://parents.actionforchildren.org.uk/>  
 Activity Alliance  
[www.activityalliance.org.uk/about-us](http://www.activityalliance.org.uk/about-us)  
 ADHD and You  
[www.ADHDandyou.co.uk](http://www.ADHDandyou.co.uk)  
 Tel: 01256 894003  
 ADHD Foundation  
[www.adhdfoundation.org.uk](http://www.adhdfoundation.org.uk)  
 Age UK  
 Tel: 0800 298 0579  
 Amaze  
[www.amaze.org](http://www.amaze.org)  
 Anna Freud  
[www.annafreud.org](http://www.annafreud.org)  
 Anxiety UK  
[www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)  
 Aston Project  
[www.astonproject.co.uk](http://www.astonproject.co.uk)  
 Autism – The National Autistic Society  
[www.autism.org.uk](http://www.autism.org.uk)  
 Barnardo's  
[www.barnardos.org.uk](http://www.barnardos.org.uk)  
 Beat  
[www.beateatingdisorders.org.uk](http://www.beateatingdisorders.org.uk)  
 Blue Cross for Pets  
<https://www.bluecross.org.uk/pet-bereavement-and-pet-loss>  
 Blurt it out  
<https://www.blurtitout.org/resources>  
 British Dyslexia Association (BDA)  
[www.bdadyslexia.org.uk](http://www.bdadyslexia.org.uk)  
 Brook  
[www.brook.org.uk](http://www.brook.org.uk)  
 Bullying UK  
[www.bullying.co.uk](http://www.bullying.co.uk)  
 Cafcass  
[www.cafcass.gov.uk](http://www.cafcass.gov.uk)  
 CAMHS  
[www.CAMHS-resources.co.uk/websites](http://www.CAMHS-resources.co.uk/websites)  
 Calm  
[www.thecalmzone.net/](http://www.thecalmzone.net/)  
 Christians against poverty  
[www.capuk.org](http://www.capuk.org)  
 CareConfidential  
[www.careconfidential.com](http://www.careconfidential.com)  
 Carers Trust  
[www.carers.org/about-us/about-young-carers](http://www.carers.org/about-us/about-young-carers)  
 Centrepoint  
[www.centrepoint.org.uk](http://www.centrepoint.org.uk)  
 Child Bereavement UK  
[www.childbereavementuk.org](http://www.childbereavementuk.org)  
 Child Death Helpline  
<http://childdeathhelpline.org.uk/>  
 Child Mind  
<https://childmind.org>  
 ChildLine  
[www.childline.org.uk](http://www.childline.org.uk)  
 Childnet  
[www.childnet.com/](http://www.childnet.com/)  
 CHUMS  
[www.chums.uk.tics-and-tourettes](http://www.chums.uk.tics-and-tourettes)  
 Citizen's Advice Bureau  
[www.citizensadvice.org.uk](http://www.citizensadvice.org.uk)  
 Crime stoppers  
 Tel: 0800 555 111  
 Cruse Bereavement Care  
[www.cruse.org.uk](http://www.cruse.org.uk)  
 Ditch the Label

ManKind Tel: 01823 334 244  
[www.mensadvice.org.uk](http://www.mensadvice.org.uk)  
 Mermaids  
[www.mermaidsuk.org.uk](http://www.mermaidsuk.org.uk)  
 Mind  
[www.mind.org.uk](http://www.mind.org.uk)  
 Mindful  
[www.mindful.org](http://www.mindful.org)  
 Muslim Youth Helpline  
[www.ncdv.org.uk](http://www.ncdv.org.uk)  
 National Citizen Service (NCS)  
<https://www.gov.uk/government/get-involved/take-part/nationalcitizen-service>  
 National Self Harm website  
[www.nshn.co.uk](http://www.nshn.co.uk)  
 NHS 111  
[www.nhs.uk](http://www.nhs.uk)  
 NHS Choices  
[www.nhs.uk/livewell/depression/pages/depressionhome.aspx](http://www.nhs.uk/livewell/depression/pages/depressionhome.aspx)  
[www.nhs.uk/conditions/suicide](http://www.nhs.uk/conditions/suicide)  
[www.nhs.uk/conditions/stress-anxiety-depression](http://www.nhs.uk/conditions/stress-anxiety-depression)  
 Nip in the bud  
[www.nipinthebud.org](http://www.nipinthebud.org)  
 No Panic  
[www.nopanic.org.uk](http://www.nopanic.org.uk)  
 NSPCC  
 0800 136 663  
 Relate  
[www.relate.org.uk](http://www.relate.org.uk)  
 Relax Kids  
[www.relaxkids.com](http://www.relaxkids.com)  
 Refuge  
<https://www.refuge.org.uk/get-help-now/phone-the-helpline/>  
 Riprap  
[www.riprap.org.uk](http://www.riprap.org.uk)  
 Royal College of Psychiatrists  
[www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/parents/carers/worriesand anxieties.aspx](http://www.rcpsych.ac.uk/healthadvice/parentsandyouthinfo/parents/carers/worriesand anxieties.aspx)  
 Samaritans  
[www.samaritans.org.uk](http://www.samaritans.org.uk)  
 SAMM  
[www.samm.org.uk](http://www.samm.org.uk)  
 Sane  
[www.sane.org.uk](http://www.sane.org.uk)  
 Self-Injury Support  
[www.selfinjurysupport.org.uk](http://www.selfinjurysupport.org.uk)  
 Sexting Advice  
[www.swgfl.org.uk/magazine/Managing-Sexting-Incidents/Sexting-Advice.aspx](http://www.swgfl.org.uk/magazine/Managing-Sexting-Incidents/Sexting-Advice.aspx)  
 Parent Zone  
<https://parentzone.org.uk/>  
 Shelter  
<https://england.shelter.org.uk/>  
 Shout  
 Text SHOUT to 85258  
 Sibs  
[www.sibs.org.uk](http://www.sibs.org.uk)  
 SmiRA (Selective Mutism)  
[www.selectivemutism.org.uk/](http://www.selectivemutism.org.uk/)  
 Stem4  
[www.stem4.org.uk](http://www.stem4.org.uk)  
 Stress and Anxiety in Teenagers  
[www.stressand anxietyinteenagers.com](http://www.stressand anxietyinteenagers.com)  
 Students against depression  
[www.studentsagainstdepression.org](http://www.studentsagainstdepression.org)

<https://www.ditchthelabel.org/>  
 ERIC  
[www.eric.org.uk](http://www.eric.org.uk)  
 Facts4life  
[www.facts4life.org](http://www.facts4life.org)  
 Family Links  
[www.familylinks.org.uk/](http://www.familylinks.org.uk/)  
 For advice & guidance, email:  
[ecounselling@griefencounter.org.uk](mailto:ecounselling@griefencounter.org.uk)  
 HappyMaps  
[www.happymaps.co.uk](http://www.happymaps.co.uk)  
 harmLESS  
[www.harmless.org.uk](http://www.harmless.org.uk)  
 Headway  
[www.headway.org.uk](http://www.headway.org.uk)  
 Hollie Guard  
[www.hollieguard.com](http://www.hollieguard.com)  
 Intercom Trust  
[www.intercomtrust.org.uk](http://www.intercomtrust.org.uk)  
 Kidscape  
[www.kidscape.org.uk](http://www.kidscape.org.uk)  
 Kooth  
[www.kooth.com/](http://www.kooth.com/)  
 Live, Life, Well  
[www.live-lifewell.net](http://www.live-lifewell.net)

Suicide Crisis  
[contact@suicidecrisis.co.uk](mailto:contact@suicidecrisis.co.uk)  
 Sunflower Suicide Support  
[www.sunflowersuicidesupport.org.uk](http://www.sunflowersuicidesupport.org.uk)  
 SurvivorsUK  
[www.survivorsuk.org](http://www.survivorsuk.org)  
 Talk to Frank  
[www.talktofrank.com](http://www.talktofrank.com)  
 The Calm Zone  
[www.thecalmzone.net](http://www.thecalmzone.net)  
 The Children's Sleep Charity  
[www.thechildrensleepcharity.org.uk](http://www.thechildrensleepcharity.org.uk)  
 Tourette Syndrome  
<https://www.nhs.uk/conditions/tourettes-syndrome/>  
 Voice Collective  
[www.voicecollective.co.uk](http://www.voicecollective.co.uk)  
 Winston's Wish  
[www.winstonswish.org.uk](http://www.winstonswish.org.uk)  
 Women's Aid  
<https://www.womensaid.org.uk/>  
 Young Minds  
[www.youngminds.org.uk](http://www.youngminds.org.uk)  
 Youth Access  
[www.youthaccess.org.uk](http://www.youthaccess.org.uk)  
 ZERO TO THREE  
<https://www.zerotothree.org/parenting>

## APPENDIX 10: Whistleblowing for employees

### 1. What is a whistle-blower

A whistle-blower is an employee who reports certain types of wrongdoing, usually something you have seen at work - though not always.

The wrongdoing must be in the public interests and must affect others, for example the general public.

As a whistle-blower you are protected by law – you should not be treated unfairly or lose your job (<https://www.gov.uk/whistleblowing/treated-unfairly-after-whistleblowing>) because you 'blow the whistle'.

You can raise your concern at any time about an incident that happened in the past, is happening now, or you believe will happen in the future.

#### Who is protected by law?

You are protected if you are a worker (<https://www.gov.uk/employment-status/worker>), for example:

- an employee, such as a police officer, NHS employee, office worker, factory worker
- a trainee, such as a student nurse
- an agency worker
- a member of a Limited Liability Partnership  
(<https://www.gov.uk/business-legal-structures/limited-partnershipand-limited-liability-partnership>)

If you are not sure if you are protected, get independent advice: Citizens' Advice. (<http://www.adviceguide.org.uk/>)

A confidentiality or 'gagging clause' in a settlement agreement is not valid if you are a whistle-blower

#### Complaints that count as whistleblowing

You are protected by law if you report any of the following:

- a criminal offence, for example fraud
- someone's health and safety is in danger
- risk or actual damage to the environment
- a miscarriage of justice
- the company is breaking the law, for example does not have the right insurance you believe someone is covering up wrongdoing

#### Complaints that do not count as whistleblowing

Personal grievances (for example bullying, harassment, discrimination) are not covered by whistleblowing law, unless it is in the public interest.

Report these using the GNet grievance policy (<https://www.gov.uk/solve-workplace-dispute/>).

Contact the Advisory, Conciliation and Arbitration Service (ACAS) (<https://www.gov.uk/acas/>) for further help and advice on resolving a workplace dispute.

## 2. Who to tell and what to expect?

If you want to raise a concern contact your line manager or the Director.

Designated Safeguarding Lead & Prevent Lead – Siobhan Skaife – Director

01865 893213 / 07961 490673 | [siobhan@guardianfamily.co.uk](mailto:siobhan@guardianfamily.co.uk)

Deputy Designated Safeguarding Lead – Emily Cavender-Dengel – Guardianship Services Manager

01865 893213 / 07539 021684 | [emily@guardianfamily.co.uk](mailto:emily@guardianfamily.co.uk)

There are other options if you do not want to report your concern to your employer, for example you can get legal advice (<https://www.gov.uk/find-a-legal-adviser>) from a lawyer, or tell a prescribed person or body (<https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies-2>). If you believe there is an issue which may impact on the provision of guardianship services, you should contact the regulatory body, the Association of Educational Guardians in Independent Schools (AEGIS) The Wheelhouse, Bond's Mill Estate, Bristol Road, Stonehouse, Gloucestershire GL10 3RF | +44 (0) 1453 821293 | [info@aegisuk.net](mailto:info@aegisuk.net)

Alternatively, you can contact the NSPCC Whistleblowing helpline on 0800 028 0285 | [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

### Making your claim anonymously or confidentially

You are entitled to make an anonymous claim, but this will make it incredibly difficult to take the claim further if you have not provided all the information they need.

You can give your name but request confidentiality - the person or body you tell should make every effort to protect your identity.

If you report your concern to the media, in most cases you will lose your whistleblowing law rights.

### What your employer or a prescribed person will do

Your concerns will be listened to a decision taken on whether any action is needed. You may be asked for further information. You will not have a say in how your concern is dealt with. You may well be kept informed about the action taken, but you may not receive much detail confidences of other people are being kept.

You must say straight away if you do not want anyone else to know it was you who raised the concern.

A prescribed person cannot help you with your relationship with your employer.

### If you are not satisfied with how your concern has been dealt with

Tell someone else (for example a more senior employee) or a prescribed person or body (<https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies-2>) if you believe your concern was not taken seriously or the wrongdoing is still going on.

Contact the Advisory, Conciliation and Arbitration Service (ACAS) (<https://www.gov.uk/acas>), the whistleblowing charity Protect (<https://protect-advice.org.uk>) or your trade union for more guidance.

## 3. If you are treated unfairly after whistleblowing

You can take a case to an employment tribunal (<https://www.gov.uk/employment-tribunals>) if you have been treated unfairly because you've blown the whistle.

You can get further information from the Advisory, Conciliation and Arbitration Service (ACAS) (<https://www.gov.uk/acas>), Citizens' Advice (<http://www.adviceguide.org.uk/>), the whistleblowing charity Protect (<https://protect-advice.org.uk/>) or your trade union.

If you reported your concern anonymously, you may find it harder to argue that your unfair treatment was as a result of your whistleblowing.

You must raise any claim of unfair dismissal within 3 months of your employment ending.

You must notify ACAS if you want to take your case to an employment tribunal.