

Kentish Town Community Centre

Safeguarding Procedure for Children and Vulnerable Adults

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1. Safeguarding at Kentish Town Community Centre (KTCC)

The protection and welfare of children and vulnerable adults is of paramount importance to Kentish Town Community Centre. All visitors, guests and employees have a right safe and secure environment. Kentish Town Community Centre offers several services to our community. These services include: a pre school, and under 5s service, a youth service and an older peoples service. We also hire out spaces to groups who offer services to children and vulnerable adults.

1a. This document contains best practise guidelines for working with children and vulnerable adults. These groups are defined as:

- Children: Any ages 0- 18 including disabled adults up to the age of 24

Vulnerable Adults: This may include adults with a physical or mental difficulty. Older Adults with age related conditions. Adults with no obvious disability who may because of personal situations (debt, housing, relationship- breakdown) may be considered vulnerable. Vulnerable adults:

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- are unable to take care of themselves or protect themselves from harm
- depend on others for their care
- lack the mental capacity to take a particular decision

1b. We believe that every child and vulnerable adult has the:

- right to be safe
- right to personal privacy
- right to be valued as an individual
- right to be treated with dignity and respect
- right to be involved and consulted in their own intimate care to the best of their abilities and where practicable
- right to express their views on their own intimate care and to have such views considered, where practicable
- right to have levels of intimate care that consistent.

The team at Kentish Town Community Centre will work with children, parents, external agencies and the community to ensure the welfare and safety of children and all vulnerable adults. We believe everyone has the right to be treated with respect and to be safe from any abuse in whatever form.

KTCC is committed to providing training on safeguarding and relevant linked policy areas for all staff and volunteers. KTCC is committed to ensure all members of staff and active volunteers under go DBS Checks.

1c. Key principles for Safeguarding

Recognise, Respond, Report, Record, Refer.

2. Responsibilities

- a) All members of KTCC, including all paid and voluntary members of staff, have a responsibility to ensure that concerns regarding children and vulnerable adults who attend our centre are addressed.

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- b) All members of KTCC staff have the responsibility to listen, record and pass on information given to the member of staff or any behaviour in our centre that gives us cause for concern.
 - c) Any concerns should be addressed to any member of the management team or emailed in confidence to safeguarding@ktcc.org.uk
 - d) All members of KTCC, including all paid and voluntary members of staff are required to attend any training or updates regarding Safeguarding where necessary.
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3) Safeguarding team at Kentish Town Community Centre

3a. KTCC Management Team

Deputy Manager (and Youth Services Lead): Luis Sanchez

- Pre School Manager: Sasha Bailey
- Centre Manager: Sarah Hoyle

3b. KTCC Nominated Safeguarding Trustees

- Designated Safeguarding Trustee: Margaret Harvey
- Nominated OFSTED Person: Tim Shand (Chair of Trustees)

(Accurate as of December 2018)

4) Legal Requirements

In law Safeguarding is protected in law under the Safeguarding Vulnerable Groups Act (2006). In addition, there are comprehensive government guidelines laid down in the 'Working Together to Safeguard Children' (Department of Education, 2018), DFE Guidance 'Safeguarding Children and Safer Recruitment in Education' (Jan 2007), and 'What to do if you are worried a child is being abused – a Guide for Practitioners' (DFE 2015). For adults the Care Act 2014 provides comprehensive advice regarding working with vulnerable adults.

There is also comprehensive local guidance provided by the Camden Children's Safeguarding Board. The area has a Local Authority Designated Officer (LADO) to whom

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child protection issues can be referred. For vulnerable adults, there is a Multiagency Safeguarding Hub.

The Children Act 2004 provides a framework for safeguarding children and includes an emphasis on integrated working and cooperation between agencies. The Act includes a duty (or requirement) to cooperate to improve the wellbeing of children, defined by reference to the five Every Child Matters (ECM) outcomes and a duty to put in place arrangements to safeguard and promote the welfare of children.

The Counter Terrorism and Security Act 2015 includes a duty to prevent young people and vulnerable adults from being radicalised. This sits alongside the Prevent Duty 2015

The Care Act Guidance on safeguarding vulnerable adults, which in England had taken the form of the 2000 *No Secrets* guidance; providing guidance on developing and implementing multi-agency policies and procedures to protect adults deemed "at risk" from harm and/or abuse.

The Mental Capacity Act (MCA) is designed to protect and empower individuals who may lack the mental capacity to make their own decisions about their care and treatment. It is a law that applies to individuals aged 16 and over. Examples of people who may lack capacity include those with:

- dementia a learning disability
- a brain injury
- a mental health condition
- a stroke
- Substance or alcohol misuse
- Confusion, drowsiness or unconsciousness because of an illness or the treatment for it

However, just because a person has one of these conditions does not necessarily mean they lack the capacity to make a specific decision. Someone can lack capacity to make some decisions (for example, to decide on complex financial issues) but still have the capacity to make other decisions (for example, to decide what items to buy at the local shop).

As a duty of care all employees and volunteers who work at Kentish Town Community Centre should be aware of this legislation and people who may be impacted by it.

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4a. Useful websites

Camden Children's Safeguarding Board: <https://cscb-new.co.uk/>

Advice on Safeguarding for adults from the Camden GP website:
<https://gps.camdenccg.nhs.uk/service/adult-safeguarding>

5) Definitions of terms commonly used in this document

LADO – Local Area Designated Offices

FGM – Female Genital Mutilation

MASH – Multi Agency Safeguarding Hub

PEO – Prevent Education Officer

CAF- Common Assessment Framework

Disclosure – a person in a vulnerable position reporting an adult or other person about abuse or something uncomfortable happening to them.

6) Recognising Abuse

It is never our role to investigate safeguarding issues only to make sure our concerns are accurately recorded then passed onto the relevant agency. The starting point for any safeguarding issue is that wellbeing and their safety must always come first and anyone reporting abuse must always be believed.

Types of abuse for children and vulnerable adults can vary. They are broadly defined under the following categories

- Physical – bruising, scars, broken bones damage that is unexplained or unreasonable
- Neglect¹ – poor appearance and hygiene, health and development issues, housing and family issues

¹ <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/neglect/signs-symptoms-effects-neglect/>
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- **Sexual²** – Unexpected or unexplained change in behaviour, Soreness around the genital, Sexually transmitted diseases, A preoccupation with anything sexual
- **Emotional** – unattributed anger,
- **Contextual Abuse** - Radicalisation, Cyber Bullying, Domestic Violence, Child Exploitation

Abuse occurs in all groups within society. It occurs within all cultural, ethnic and religious communities and across all classes. Staff must be sensitive to these differences, but clear that abuse must not be tolerated.

7) KTCC Safeguarding Checklist

Recognising abuse can be difficult. This check list provides a list which provides an indication of things to be aware of out for but is not exclusive.

7a. Concerning behaviour for children under 3

Children under 3 are often non verbal. This means this child they are unable to articulate if they are uncomfortable or in pain. Children under three are not required to engage in any statutory education so identifying signs of abuse can be difficult. Signs to be aware of include

- Touching themselves or others in inappropriate places of the body
- Sudden changes in behaviour – going from being an outgoing child to being shy and reserved
- Acting out a traumatic/concerning event from real life using dolls/teddies/small world
- Not wanting to go near/home with certain parents/family members/caregivers
- Marks on the body that do not match up with parent's explanation

² <https://www.tameside.gov.uk/AdultServices/Safeguarding-Adults-Signs-and-Symptoms-of-Abuse#Sexual>

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7b. Abuse affecting children Under 5

Physical Abuse can involve hitting, shaking, squeezing, burning and biting. It also includes the excessive use of force when carrying out tasks like feeding or nappy changing. Many children will have cuts and grazes from normal childhood injuries – these should also be logged and discussed with KTCC Preschool's manager. Children and babies may be abused physically through shaking or throwing. Other injuries may include burns or scalds. These are not usual childhood injuries and should always be logged and discussed with the Deputy Manager (Youth Service Lead) and Pre School Manager

Recognising physical abuse

The following are often regarded as indicators of concern:

- an explanation which is inconsistent with an injury;
- several different explanations provided for an injury;
- unexplained delay in seeking treatment;
- the parent/s are uninterested or undisturbed by an accident or injury;
- parents are absent without good reason when their child is presented for treatment;
- repeated presentation of minor injuries (which may represent a 'cry for help' and if ignored could lead to a more serious injury);
- frequent use of different doctors and accident and emergency departments;
- reluctance to give information or mention previous injuries;
- physical indication or suspicious travel abroad consistent with warning signs for female genital mutilation.

Examples which may indicate physical abuse include: (this is not designed to be used as a checklist)

- Patterns of bruising, including inconsistencies of stories as to how bruising or injuries occurred
- Finger, hand or nail marks, black eyes
- Round burn marks, burns and scalds

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- Bite marks
 - Lacerations, wealds
 - Fractures
 - Fear of going home or parents
 - Fear of medical help being contacted
 - Inexplicable fear of adults or over compliance
 - Bald patches
 - Symptoms of poisoning
 - Isolates him/herself from peers
 - Violence or aggression towards others including bullying
-

7c. Abuse affecting children over 5s

When a child begins to understand key concepts or ideas they are able to disclose information in a coherent manner. This section covers children and young people aged 5- 18 or at any point when a child or young person can fully understand and explain an element of abuse or discomfort to an adult.

7c.1 Internet Safety, as the name suggests covers the safe use of the internet. The internet can be an enlightening platform for sharing and learning. Young people should not be stopped from using the internet, but they must know how to report issues when they arrive.

Kentish Town Community Centre provides free wifi for all users. Although we make it clear that we have the right to eject anyone who uses the internet in an inappropriate manner, we must also understand that individuals may access information withing our centre on their own networks

We must also be aware that children and vulnerable adults who use our centre may be affected by internet use outside our centre. Issues relating to internet safety that take place outside of Kentish Town Community Centre may be reported to members of staff at our centre

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It is therefore our duty of care to be aware of internet safety issues, so we can support people who disclose to us and address inappropriate internet use within our centre

For more information visit the CEOP website which provides guidance for young people from the age of 5 – 14+ <https://www.thinkuknow.co.uk/professionals/>

7c.2 Types of cyberbullying³

There are many ways of bullying someone online and for some it can take shape in more ways than one. Some of the types of cyber bullying are:

Harassment - This is the act of sending offensive, rude, and insulting messages and being abusive. Nasty or humiliating comments on posts, photos and in chat rooms. Being explicitly offensive on gaming sites.

Denigration – This is when someone may send information about another person that is fake, damaging and untrue. Sharing photos of someone for the purpose to ridicule, spreading fake rumours and gossip. This can be on any site online or on apps. We even hear about people altering photos of others and posting in online for the purpose of bullying.

Flaming – This is when someone is purposely using really extreme and offensive language and getting into online arguments and fights. They do this to cause reactions and enjoy the fact it causes someone to get distressed.

Impersonation – This is when someone will hack into someone's email or social networking account and use the person's online identity to send or post vicious or embarrassing material to/about others. The making up of fake profiles on social network sites, apps and online are common place and it can be really difficult to get them closed down.

Outing and Trickery – This is when someone may share personal information about another or trick someone into revealing secrets and forward it to others. They may also do this with private images and videos too.

Cyber Stalking – This is the act of repeatedly sending messages that include threats of harm, harassment, intimidating messages, or engaging in other online

³ <https://www.bullying.co.uk/cyberbullying/what-is-cyberbullying/>

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activities that make a person afraid for his or her safety. The actions may be illegal too depending on what they are doing.

Exclusion – This is when others intentionally leave someone out of a group such as group messages, online apps, gaming sites and other online engagement. This is also a form of social bullying and a very common.

7c.3 Radicalisation , Honour Killings, FGM and Modern Slavery

A distinction should be made between abuse that takes place on the internet (on line) and abuse that takes place in a physical environment. Children and vulnerable adults can be susceptible to the influences of adults who take control and push children and young people into unsafe situations. This section covers some of these issues, but is by no means an exclusive list.

Radicalisation⁴ – also see Prevent section

Children and vulnerable adults 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, latter brainwashing them into cutting themselves off from their friends and families.

- Signs that a child or vulnerable adult is being radicalised may include:
- Isolating themselves from families and friends
- Talking as if it's from a scripted speech
- Unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others
- Increase levels of anger
- Increased secretiveness, especially around internet use

Honour Killings⁵

⁴ <https://www.nspcc.org.uk/what-you-can-do/report-abuse/dedicated-helplines/protecting-children-from-radicalisation/>

⁵ http://www.bbc.co.uk/ethics/honourcrimes/crimesofhonour_1.shtml

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Honour killing is the murder of a person accused of "bringing shame" upon their family. Victims have been killed for refusing to enter a marriage, committing adultery or being in relationship that displeased their relatives. In many instances, the crimes are committed by family members against a female relative. More cases have reached the UK courts in recent years but a number of crimes still remain unresolved or undetected. In some parts of the world, women who have been raped have also been murdered for the 'dishonour' of being a victim and the 'disgrace' it brings to their family. Honour killing is believed to have originated from tribal customs where an allegation against a woman can be enough to defile a family's reputation - 'a life without honour is not worth living.'

FGM (Female genital mutilation) ⁶

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed, but where there is no medical reason for this to be done. Professional responsibilities to act in relation to FGM were strengthened, when the FGM Mandatory Reporting Duty was in October 2015. Since this new legislation, if a girl under 18 tells or a professional sees that she has FGM, the professional has to report this to the police, using the 101 non-emergency police number.

Modern Slavery ⁷

Modern slavery is the recruitment, movement, harbouring or receiving of children, women or men through the use of force, coercion, abuse of vulnerability, deception or other means for the purpose of exploitation. Individuals may be trafficked into, out of or within the UK, and they may be trafficked for a number of reasons including sexual exploitation, forced labour, domestic servitude and organ harvesting.

7d. Abuse affecting vulnerable adults

- Physical Hitting, smacking, pushing, shaking, spitting, or other physical harm.
- Domestic abuse Controlling, coercive or threatening behaviour or violence between people who are, or have been, intimate partners or family members. It can

⁶ <https://www.england.nhs.uk/ourwork/safeguarding/our-work/fgm/>

⁷ <https://www.england.nhs.uk/ourwork/safeguarding/our-work/modern-slavery/>

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include psychological, physical, sexual or financial abuse, so called 'honour' based violence or forced marriage. Sexual Any sexual activity relating at a child under 16 ro a vulnerable adult cannot or does not consent.

- Financial or material Fraud, theft or using or property without their permission.
- Psychological Shouting or swearing at or ignoring an adult, or using insulting language about their age, ethnicity, culture, sexuality, gender or disability.
- Modern Slavery human trafficking, forced labour and domestic servitude, where people are forced into a life of abuse, servitude and inhumane treatment.
- Discriminatory Suffering insulting language, harassment or ill-treatment because of your age, ethnicity, culture, religion, language, sexuality, gender or disability.
- Neglect Where a person allows a vulnerable adult to suffer by failing to care for them or by ignoring their needs, for example with regard to food, visual or hearing needs.
- Self-neglect Not looking after yourself, for example, not taking care of your personal hygiene, health or surroundings, or collecting large numbers of items with little value to others (e.g. newspapers) that make it difficult to live in your home – this is known as "hoarding".
- Organisational Repeated poor care of an adult at risk through neglect or poor professional practice in a paid or regulated care setting such as a hospital, a care home or an organisation paid to support you in your own home

7e. Abuse affecting Disabled Children

The same procedures must be followed if there is any suspicion that a disabled child is being abused. However evidence from research strongly suggests that disabled children are more likely to be abused than those who are not disabled because:

- the number of adults involved in their personal and intimate care provides more opportunities for abuse;

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- the nature of their disability may add to their vulnerability (i.e.: lack of speech, lack of mobility);
- concerns of a child protection nature are often overlooked.

Disabled children who communicate through non-verbal means may disclose abuse to staff or volunteers. They must be listened to and the disclosure treated in the same way as those made by children using verbal language.

7e.1 Safeguarding checklist for disabled children and vulnerable adults:

Prevention (of harm), Proportionality (of adjustment) , Protection (of the individual), Partnership (with other people involved in the safeguarding of the individual), Improvement (developing approaches to safeguarding) and Accountability (documenting decisions and being open to adjustment)

8) Reporting a concern/ disclosures

If a child or vulnerable adult reports abuse this is called a disclosure. Disclosures should be handled in a sensitive way, mindful that telling someone about a disturbing or difficult experience can be hard.

Key principles:

- This is a duty of care and all disclosures no matter how small must be taken seriously
- Staff or volunteers who are worried that someone using their service is being abused or is at risk of harm, must inform a member of the KTCC Management team – see above. The KTCC Management team will notify the KTCC Nominated Safeguarding Trustees and may also pass this information onto relevant professionals

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- If a child or vulnerable adult wishes to disclose information take the individual to a quiet space so you can hear everything they say and you less likely to have interruptions. Tell a colleague if you are doing so.
- All information regarding issues to do with any forms of abuse must remain confidential and will only be passed onto relevant professionals. Data should be handled sensitively and carefully at all times.
- Individuals can report a concern directly to the KTCC Centre Manager and Trustees via the safeguarding@ktcc.org.uk email address.
- If an individual wishes to disclose an allegation against a member of staff, in the first instance the KTCC Centre Manager should speak to the member of staff. If the disclosure concerns the KTCC Centre Manager the KTCC Nominated Trustees should be contacted in the first instance.
- When reporting a concern, it is important to gather as much information as possible. Below is a template which is useful to follow.

Date and place of incident _____

Name of Child _____

Age of child _____ Gender of child _____

School attended (if applicable) _____

Names and ages of siblings _____

Name of parents/carers _____

Address _____

_____ Telephone number _____

Name of member of staff involved _____

Child's level of contact with provision _____

What took place

Source of information (E.g indirect or direct disclosure) _____

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Observed behavioural concerns

Action taken

Have parents/carers been contacted? Yes ☐ No ☐

If yes, date and time of contact

When was a Senior Manager or Lead Member of the Board for Safeguarding Children contacted?

Was anyone else contacted (e.g.: Police, Doctor, etc)? Yes ☐ No ☐

If yes, dates, times and names of contacts

Summing up (remember it is important to separate fact from opinion)

NAME OF staff member MAKING REPORT

SIGNED Dated _____

SIGNED Dated _____

Children's and Young People's Services Managers

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9) What to do if an allegation abuse is made about a member of staff

The KTCC Safer Recruitment Policy and Procedure identifies ways in which the organisation

ensures only suitable staff are appointed to work with children and young people. Allegations or concerns about bad practice by staff, such as shouting or inappropriate punishment of children, may be dealt with under Disciplinary Procedures or with recommendations for further training.

KTCC has a duty to ensure that any allegations that a member of staff or a volunteer has:

- behaved in a way that has harmed or may have harmed a child the nature of their disability may add to their vulnerability (i.e.: lack of speech, lack of mobility);
- possibly committed a criminal offence against or related to a child;
- behaved towards a child or children in a way that indicates they are unsuitable to work with children; are dealt with in accordance with Camden Safeguarding Children Board procedures.

Action to take:

The following actions apply whether the allegation has been made against a member of staff in their work capacity or in their personal life away from work. These actions apply to all members of KTCC. This includes members of the Board, the staff and volunteers. Allegations may arise from a variety of sources, for example, parents, children or other members of staff.

10) Other types of abuse to note:

10a Child sexual abuse

In cases where a child makes a disclosure of sexual abuse or where there is strong suspicion of sexual abuse, the procedure is slightly different.

Additional Action to take:

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1. The KTCC Management team must immediately report the concerns/incident to the MASH Team who will decide what action to take. In this case, to protect the child, **MUST NOT** discuss the concerns with the parents before reporting it, because one or the other parent may be involved.
2. If a decision is made to investigate, a social worker may come and visit the KTCC Management team and relevant staff. The social worker will then want to talk through the matter in detail and explain the process of investigation. The KTCC Management team and relevant staff should be prepared to attend strategy meetings and a case conference if required. If it is likely that a crime has been committed, the Police Child Abuse Investigation Team will be called in to undertake a joint investigation.
3. There is specific Guidance for Children Abused through Prostitution contained within the London Child Protection Procedures. Its main principle is that all children and young people under the age of 18 involved in prostitution are being sexually exploited and are at risk, both in the short and long term. Copies are available from *Safeguarding Children Abused Through Sexual Exploitation (London Board 2006)*, accessible at: www.londonscb.gov.uk.

10b. Children who harm other children

Abusive behaviour that is directed at other children and likely to place them at risk of significant harm must be referred to FSSW following the procedures detailed in paragraph 6 – What to do if you suspect child abuse is taking place/How to report a concern. The following factors should be taken into consideration when deciding on whether the behaviour is harmful:

- there is a significant difference between the age or developmental stage of the victim and perpetrator, suggesting that the behaviour is more likely to be defined as abusive;
- the alleged perpetrator is supported or joined by other children;
- the perpetrator appears to have more power or authority over the victim, for example related to age, race, gender or physical, emotional or intellectual development; for sexual abuse, this could allow them to force the victim to consent;

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- the behaviour, both physical and verbal, involves a degree of physical aggression, intimidation or bribery;
- the behaviour is not age appropriate;
- the perpetrator has attempted to prevent the victim from reporting the incident or tried to ensure secrecy;
- the behaviour has taken place on a number of occasions where there is a single victim or there is a developing pattern of behaviour in relation to multiple harmful behaviours;
- the perpetrator shows a pattern that seems to focus on a particular type of victim based on common features such as age, gender or vulnerability;
- there are concerns about the perpetrator's health, emotional development or attachments or historical neglect and abuse;
- the victim and the perpetrator live in the same household or have regular contact, for example at school;
- the victim's experience of the behaviour and the impact it is having on their routines and lifestyle (e.g.: not attending school);
- the perpetrator and their parents do not take the concerns seriously.

For sexually harmful behaviour, the following should also be considered:

- the victim clearly states that they had not consented and had not wanted to take part in the activity;
 - the behaviour involves a high level of adult sexual knowledge or motivation;
 - there are concerns about other aspects of the perpetrator's sexuality or lifestyle, for example use of pornography or inappropriate sexual comments;
 - the behaviour was discovered in a manner or location that suggests it was inappropriate.
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10.b Medical emergency

Additional Action to take

- Find a first aider
- Assess the situation
- Make note of the medical emergency

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- Follow first aid procedures

Staff must call an ambulance if a child requires emergency medical treatment and inform the MASH Team immediately if there is any suspicion that the injury is non-accidental. Staff must not transport children in their own cars. If it is after 5pm or at the weekend, staff must ring the MASH Team on the out of office hours number (020 7974 4444).

Parents/carers must be contacted immediately if possible. A written consent form for emergency medical treatment should have been completed when the child started using the provision. Parents/carers should be informed of the specific symptoms or injuries which make it urgent that

11) Prevent⁸

'Prevent' – 'anti-terrorism/intervention of radicalisations and extremism'

Recognising the vulnerabilities of those who may be drawn in to radicalisation.

Prevent Duty 2015 placed a legal duty on educational providers to recognise those who may be vulnerable and to seek intervention.

Counter-terrorism Act 2015 places statutory duty on providers.

Four parts to Prevent Duty

- Prevent – To stop people becoming drawn in to terrorism
- Prepare – To mitigate the impact of a terrorist attack (for example; bollards and barriers around vulnerable places)
- Pursue – To stop attacks happening
- Protect – To strengthen protection against a terrorist attack and repercussions such as hate crimes following an attack

Camden is at high risk due to:

- Transport links to Europe (St Pancras) and the rest of the country (Euston and Kings Cross).

⁸ <https://educateagainsthate.com/>

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- Neighbouring boroughs such as Islington, Westminster, Brent etc.
- High number of students, both home grown and internationally – there are 10 universities in Camden alone
- Particular research and other centres, such as the Frances Crick Institute – Animal Testing and research in NW1

Radicalisation, extremism and grooming can be promoted in several ways

- Through social media
- Direct – people preying on those vulnerable in person and building a 'relationship' with them

Spaces which may facilitate extremism/radicalisation, extremism and grooming:

- Social media – online platforms, messaging, chat rooms etc
- Direct – people preying on those vulnerable in person and building a 'relationship' with them, for example, at
- football matches,
- pubs
- unlicensed/unregulated music venues
- Schools
- Youth clubs
- Religious institutions (they don't condone but space may be misused)
- The home

Funding Terrorism

Those who pose as charity collectors, for example, National Action are a far-right organisation who promote that they collect funds for the Armed Forces. The AF are not affiliated with NA and will not accept donations from them, but this may not be known by Joe Public. This money is then used by NA to fund promotion of their ideology.

Radicalisation and recruitment- Process is similar to 'grooming'

Vulnerable people may feel that their new friend/group meets and fills a need or void they may have. They can then be influenced and drawn in to being radicalised, as the threat of losing this new 'support network' can seem like a negative impact on their 'new life'/they fear exclusion. This can lead to being vulnerable to new ideas and taking them to the extreme.

Vulnerabilities include

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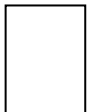
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- Being isolated or feeling alone
- Regulation – no one regulating access to social media/lifestyle/activities
- Not having interest from others
- Feelings of not belonging and the need for belonging
- Idea of self-worth
- Learning difficulties
- Bullying – being bullied
- Lack of positive role models – in some cases, lack of a positive male role model
- Video games
- Social media and online content which is not objective
- Alcohol and substance abuse – either venerable person or someone close – which may take family attention away from then, which in turn may amplify feelings of isolation

APPENDIX



Appendix A: Safeguarding poster

(Safeguarding Checklist/Info – Children and Young People Poster – November 2018)

If a child discloses abuse of any sort:

- 1) Take child/young person to a quiet place and collect a pen and paper
- 2) Ask child/young person to repeat what they said
- 3) Write down what was said as it was said to you, (do not write what you think was said), with date/time/location
- 4) Do not ask leading questions – for example – “Did mummy hit/hurt you?” use conversation - for example - “Oh, that’s a nasty bump, what happened?”
- 5) Never promise a child/young person that you can keep a secret, but you will pass it on to someone who can help
- 6) To report your concern, speak to a member of management as soon as possible

Kentish Town Community Centre : Safeguarding and Child Protection Procedure for Children and Vulnerable Adults
Compiles by Sarah Hoyle, Centre Manager, December 2018

Kentish Town Community Centre

Safeguarding Procedure for Children and Vulnerable Adults

Sasha Bailey

Sarah Hoyle

Luis Sanchez

They will pass on concerns to safeguarding trustee and chair Margret and Tim)

Appendix B - Child Protection and family group conferences

Definition and function of child protection conferences and reviews

The child protection conference is central to the child protection procedures and the need for calling such a conference will be identified at an early stage by Family Services and Social Work.

It symbolises the inter-agency nature of assessment, treatment and management of child protection and is the prime forum to share information and concerns, analysing and weighing up the level of risk to the child and making recommendations for responsibility for action.

The conference brings together the family and the professionals concerned with child protection and provides them with the opportunity to exchange information and plan together.

A 'core group' of workers is nominated at initial child protection conferences, following a child's name being provided with a Child Protection Plan. The purpose of core groups is for the people most involved with the child and family to work closely together to develop the 'child protection plan' and participate in overseeing it. Members of core groups always include the parents.

Aims of initial child protection conferences

- To establish the facts of the situation.
- To share and evaluate the information gathered during the investigation.
- To consider what immediate intervention and support may be necessary and the role of respective parties and agencies in this.
- To make a decision about whether to register a child and under which category.

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Review conferences

The initial conference will fix a date for a review of the plan made. This should take place preferably within 3 months if sexual abuse, and certainly within 6 months.

Any concerned professional may ask Family Services and Social Work to convene an earlier review if they believe that the child is not adequately protected or there is a need to change the protection plan.

For further information about case conferences, please refer to 'Working Together to Safeguard Children'.

Family group conferences

The Family Group Conference Service (FGC) was established in Camden in 1999. FGCs are a means of enabling families to find solutions to their own difficulties within a professionally supportive framework. The process aims to make use of family strengths and resources and seeks to respect each family's own values and culture. The model is based on the belief that family members themselves are the experts on their own family. A Family Group Conference offers family members and others close to the family a chance to get together, talk about what is happening in their family, ask for information and make a plan to help their children.

FGCs are arranged by Independent Coordinators, working with the whole family. During a FGC the family make their own plans about what should happen. Family Services and Social Work will only disagree if they think it puts a child or children at risk in some way.

Involvement of children

Decisions about children should, wherever possible, take into account information given by those children themselves. Children of sufficient age and understanding should be consulted at all stages of the child protection process. The extent to which children should be involved in the process will vary according to the circumstances of each child.

The London Child Protection Procedures state that in general, a child of less than twelve years of age is unlikely to be able to be a direct and/or full participant in a forum such as a Child Protection Conference. They also state that in general, from the age of twelve, a child should be offered such an opportunity (London Child Protection Procedures, 7.5.26, page 115).

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Appendix C additional information about potential signs of abuse for children under 5

Bruising

Children can have accidental bruising, but the following must be considered as indicators of harm unless there is evidence or an adequate explanation provided. Only a paediatric view around such explanations will be sufficient to dispel concerns listed below:

- any bruising to a pre-crawling or pre-walking baby;
- bruising in or around the mouth, particularly in small babies which may indicate force feeding;
- two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive);
- repeated or multiple bruising on the head or on sites unlikely to be injured accidentally;
- variation in colour possibly indicating injuries caused at different times;
- the outline of an object used (e.g.: belt marks, hand prints or a hair brush);
- bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting;
- bruising around the face;
- grasp marks on small children;
- bruising on the arms, buttocks and thighs may be an indicator of sexual abuse.

KTCC acknowledges that bruising will present differently according to an individual's skin

pigmentation and that this can mask abuse. Staff must keep in mind that bruising on darker skin pigmentation may not be as obvious as bruising on lighter skin.

Bite marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

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Burns and scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious, for example:

- circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine);
- linear burns from hot metal rods or electrical fire elements;
- burns of uniform depth over a large area;
- scalds that have a line indicating immersion or poured liquid (a child getting into hot water of its own accord will struggle to get out and cause splash marks);
- old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation.

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures may cause pain, swelling and discolouration over a bone or joint, and loss of function in the limb or joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- the history provided is vague, non-existent or inconsistent with the fracture type;
- there are associated old fractures;
- medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement;
- there is an unexplained fracture in the first year of life.

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.