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## DEVELOPING THE POTENTIAL OF YOUNG PEOPLE, FAMILIES AND THE COMMUNITY

## CHILD PROTECTION AND SAFEGUARDING POLICY

#### Introduction

This policy outlines our approach to safeguarding children, young people and adults at risk. For the purposes of this policy, children are under the age of 14, young people are 14-17 years old and adults at risk are 18-25 years old. This policy is written in accordance with the Children Act 1989 & 2004, the Safeguarding Vulnerable Groups Act (SVGA) 2006, Protection of Children Act 1999 and the Children's and Family Act 2014. To gain holistic context, this policy should be read in conjunction with the Hackney Quest Safe Recruitment Policy.

It will be reviewed, added to, or modified from time to time and may be supplemented in appropriate cases by further statements related to the work of Hackney Quest. If this is the case, subsequent amendments will be made available to all employees.

Hackney Quest recognises the need for a well-defined policy, setting out the standards it aims to achieve for safeguarding children and young people within our care. This Safeguarding Policy sets out the organisation and arrangements for achieving this aim including the detailed responsibilities for key staff.

All Trustees, Managers, and support staff (paid or voluntary) should be included in the implementation, dissemination and training of this policy and should be DBS checked at an enhanced level as a matter of course.

A clear structure is needed, with training and supervision in place, to allow all staff to feel protected and supported in their work with families and children and maintain the duty of care that Hackney Quest has in place for its young people.

The definition of an adult at risk is a person who is or may need community care services because of mental or other disability, age, or illness, and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.

## 1. Policy Statement

Hackney Quest believes that every child or young person, regardless of age, gender, sexuality, ethnicity, or impairment has a right to feel safe and protected from any situation or practice that results in a child/young person being physically, emotionally, or psychologically harmed.

## We recognise that:

- All children, young people, and adults at risk up to the age of 25, regardless of any disability, gender, ethnicity, religious belief, sexual orientation, gender identity have a right to equal protection from all types of harm/abuse/discrimination
- It is important to work with statutory, voluntary and independent sectors to promote and minimise the risk of harm, abuse and neglect of Hackney Quest members.

- Staff, volunteers and peer mentors are carefully selected and trained and accept responsibility for protecting and safeguarding children, young people and adults at risk who access our services
- If children and young people are to learn respect for themselves and others, they must be respected by the adults caring for them
- The care and wellbeing of children is paramount always. This aligns with principles within the Children Act 1989 and The United Nations Convention on the Rights of the Child (UNCRC) 1989 and Working Together to Safeguard Children, 2018.

#### 2. Policy

The purpose of the policy is to

- Provide protection for children, young people and adults at risk who attend Hackney Quest
- Provide staff and volunteers with guidance on procedures they should adopt if they suspect a child, young person or adult at risk is being abused or at risk of harm.

This policy is mandatory for all staff and volunteers (including those on short-term contracts), trustees and advisors. The policy must be applied whenever there is a concern about a child, young person, or adult at risk. This policy also applies to the behaviour of adults.

The protection of children requires a close working relationship between stakeholders such as parents, social services departments, the police service, medical practitioners, community health workers, schools, and voluntary agencies (including Hackney Quest) to: 
Be vigilant and protect children first and foremost

- Work and comply with current legal framework of child safeguarding standards and good practice
- Recognise the rights of staff and their need for support

We will endeavour to safeguard children, young people, and adults at risk by: -

- Valuing them, listening, and respecting them
- Instigating effective intervention, using the Local Authority/London Guidelines
- Adopt London child protection guidelines through procedures and implement Hackney
   Quest code of conduct for staff, volunteers, and committee trustees
- Conducting robust recruitment and selection processes including the necessary safety checks in respect of references, declarations, and DBS checks
- Reporting to Social Services any suspicion that a child, young person, or adult at risk has suffered, is suffering, or is at risk of suffering abuse and/or harm
- Providing effective management of staff and volunteers through supervision, support and training including guidance on what to do if an individual is worried about a child or young person

The abuse of children may take place in any environment and be 'inclusive' or 'exclusive', i.e. something that is done to a child, or withdrawn from him / her. Any child may be abused, and the perpetrator may be known or unknown to them.

All staff and volunteers working with children have a direct responsibility to bring any concerns they may have about a child, to the Designated Safeguarding Officer (DSO All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately.

The appropriate actions to protect a child can then be planned and executed, where necessary.

All Hackney Quest staff and volunteers must accept their responsibility to demonstrate working cooperatively with each other, as well as with other professionals, children and their families. Staff

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and volunteers must also understand the importance of reporting concerns as part of their responsibility.

All Staff, trustees and volunteers need to be trained to be aware of safeguarding risks and needs of the children with whom they have contact.

#### **Action Checklist**

YOU MUST: -

- Observe Local Authority Safeguarding Procedures and work to them These can be found on the Local Authority Safeguarding Children Board website: http://www.chscb.org.uk
- Carry out correct recruitment and employment checks when employing staff paid or unpaid (DBS enhanced checks)
- Arrange appropriate supervision and training as stated in the policy for all staff paid or unpaid working with children
- Ensure a comprehensive, holistic care and risk assessments are carried out to safeguard all Hackney Quest members
- Ensure all staff are fully aware of procedures and what to do should they have a concern

## This policy will be reviewed annually in line with any changes to legislation

## 3. Organisation and Responsibilities

## 3.1 Chair of Trustees

The Chair of Trustees is responsible for

- The implementation, maintenance, monitoring and review of this Policy, across Hackney
   Ouest
- Leading by example and actively ensuring that safeguarding policies are adhered to

## 3.2 Trustees

All Trustees and committee members are responsible for

- Working with the Chair of Trustees to maintain this policy through planning, implementing, measuring, and reviewing performance on a corporate level
- Ensuring that Hackney Quest managers have implemented the safeguarding policy and have received the appropriate safeguarding training and development
- To ensure a budget for training and development is available

#### 3.3 Managers

Managers are the key to the success of this policy. They are accountable for the safeguarding standards within their area of responsibility. Specifically, they are responsible for:

- Ensuring the Safeguarding policy is communicated and implemented within their area of responsibility
- Making sure their staff and volunteers understand the safeguarding arrangements\*
- Informing, instructing, training and supervising employees and volunteers
- Ensuring all incidents relating to safeguarding are reported and as the Designated Safeguarding Officer (DSO) act according to Hackney London protocols
- Reporting and informing safeguarding issues to committee members in accordance with guidance
- To carry out, or delegate to appropriate trained staff and to complete risk assessment forms that include references to keeping Hackney Quest members safe from harm

\*two members of staff must have designated safeguarding lead training which needs updating each year. All staff members need to complete child protection and safeguarding training. Other training such as contextual, digital safeguarding and Prevent is available to all staff. At induction, volunteers are asked to complete the Safer Schools online level 1 safeguarding course.

## 3.4 All Employees and Volunteers

All employees are responsible for

- Making sure they understand the part they play regarding safeguarding children, young people, and adults at risk
- Co-operating with managers in following the safeguarding arrangements set out in this
  policy
- Reporting any suspicions of abuse or neglect to the Designated Safeguarding Officer (DSO).
- Reporting any concerns about the behaviour of any members of staff, volunteers or contractors towards children, young people, or adults at risk to the DSP

## 3.5 Designated Safeguarding Officer

## The current Designated Safeguarding Officer (DSO) is Colette Allen

The Designated Officer is responsible for

- Responding in a timely manner to any suspected abuse allegations
- Referring a case on to social services where necessary
- Keeping written confidential records comply with data protection policy
- Ensuring staff are aware of the Designated Officer role and how they can be contacted in an emergency.
- The Designated Safeguarding Officer (DSO) can be contacted on 020 8533 5480 or <u>colette@hackneyquest.org.uk</u>. The Deputy Designated Safeguarding Officer (DSO) is Leverne Sinclair who can be contacted via leverne.sinclair@icloud.com.

## 4. General Arrangements for Implementing the Safeguarding Policy

#### 4.1 Safer Recruitment

To ensure safeguarding protocols are implemented in all recruitment and employment procedures. All staff, volunteers and trustees are required to attend interviews and provide appropriate references.

An enhanced Disclosure and Barring Service (DBS) check will also be obtained for staff, volunteers and trustees recruited to certain positions. A repeat DBS check will be obtained every three years for all eligible employees, volunteers, and trustees.

During interviews all candidates will be questioned regarding their understanding of safeguarding and how that might be a consideration in the role they are applying for.

#### **Staff and Volunteer Code of Conduct**

- Do treat everyone with respect
- Do ensure that your own behaviour is appropriate always

## Good Practice Guidelines for Working with children, young people, and adults at risk

- Plan activities so that they involve more than one member of staff, volunteer, or other relevant accompanying (e.g. youth leader) adult being present, or are at least in sight or hearing of others
- Don't exaggerate or trivialise safeguarding issues
- Don't let allegations made by a child, young person or adult at risk go without being addressed and recorded
- Don't deter anyone from making allegations through fear of not being believed

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- Don't engage in or permit abusive behaviour between young people e.g. ridiculing, bullying
- Don't engage in sexually provocative or rough physical games with a child, young person, or adult at risk
- Don't show favouritism to any individual
- Don't give a child, young person or adult at risk your personal contact details and do not communicate with them outside of the work you are doing with them
- Do respect a person's right to privacy

## **4.2 Physical Contact**

Staff and volunteers should not have unnecessary physical contact with a child, young person, or adult at risk. There may be occasions when physical contact is unavoidable or positively desirable or necessary for safety reasons, for example

- Providing reassurance for a distressed person
- When working with a person with a disability who requests such assistance
- Giving direct assistance when fitting outdoor activity equipment, e.g. harness
- Administering first aid
- Lifeguarding

Wherever possible there should be an attempt to ask the person to agree to such contact. Where appropriate, staff should explain their actions. This should be conducted openly and ideally with another member of staff or volunteer present. Staff should be aware of their positioning so that, where possible, others can clearly see the assistance being given.

Staff and volunteers should avoid doing things of a personal nature that the person can do themselves. However, when working with people with disabilities, personal care and help is sometimes required.

In very rare circumstances, there may be a need to physically restrain a young person for their own or other's safety.

Where contact is required for personal care there should be an agreed plan in place, signed by the young person's parents (and the young person if over 16).

Where physical restraint is used this MUST be recorded in the incident book, reported to managers, and to parents/carers.

## 4.3 Social Media

As technology develops, the internet and its range of services can be accessed through various devices including mobile phones, computers, and game consoles. Although the internet has many positive uses, it provides the key method for the distribution of indecent images of children.

Furthermore, social networking sites, chat rooms and instant messaging systems are increasingly being used by online predators to "sexually groom" a child, young person, or adult at risk. In addition, electronic communication is being used more by young people as a means of bullying their peers and distributing inappropriate images.

If staff have any concerns regarding a young person's safety when using social media this should be reported to the Designated Officer. Staff and volunteers are not permitted to accept any friend/follow requests on any social media site (i.e. Facebook, twitter etc.) from members or peer volunteer members. Nor should staff attempt to add/follow any members on social media sites. This is to safeguard staff and the young people as communication may be misinterpreted and professional working relationships and boundaries blurred.

## 4.4 Photography

Photos of young people taking part in Hackney Quest programmes and activities are an excellent

way of communicating and promoting Hackney Quest but when personal information is added to photographs, these images can be used to identify children, and put their safety and privacy at risk. Photographs can also be adapted for inappropriate use. To manage the risks associated with photographing children and young people, all employees must comply with the Hackney Quest Photography Policy. This includes giving young people the option to come away from a group if a photograph is being taken and only taking photos of individuals or small groups with their consent. Individuals should be notified about where the image will be used (eg. HQ social media channels, HQ website or printed media)

## 4.5 Residential Trips away

By following basic safeguarding best practices, we can protect children, young people and adults at risk participating in our programmes.

- Adults should ideally not share a bedroom with a child or young person; however, this may be necessary where the young adult or young people requires additional support. This must be as part of an agreed care plan, signed by parents.
- Bedrooms must not be mixed male and female
- Provision should always be considered for transgender or questioning young people without them being made to feel excluded.
- Adults and young people must use private shower facilities.
- Consideration should always be given to the fact that young people on the residential may be transgender and suitable changing, sleeping and bathroom facilities should always be considered.

#### 4.6 Responding to Safeguarding Concerns

Staff and volunteers may become concerned about a person in several ways

- A child, young person or adult at risk may tell (disclose) that s/he or someone else has been or is being abused
- There may be concerns due to the person's behaviour or presentation
- Concerns may be raised about the behaviour of an adult, who may be a member of staff, volunteer, another professional or a member of the public
- A parent, carer, relative or member of the public might share their concerns about a child, young person, or adult at risk

In all cases the following procedures must be followed. When a child, young person or adult at risk wants to confide in you

- Do not promise to keep the information secret. Explain that you must pass the information on to those who can help. Tell the child, young person, or adult at risk what you are going to do next. Stay calm and listen carefully to them
- Show them that you take what they are saying seriously
- Encourage the child, young person, or adult at risk to talk, but do not interrupt whilst they
  are recalling events
- Ask questions only to clarify your understanding of what you are being told. Do not investigate. Do not ask them to repeat his/her account
- Do not confront any alleged abuser
- As soon as you can, write down what the young person has said, using the child's own words
- Report to your Designated Safeguarding Officer as soon as you can, and before the end of the session

Reporting a young person's disclosure of abuse is not a betrayal of the young person's confidence. It is your duty and is also necessary to allow protective action to be taken in relation to the young person and any other children.

If you feel a young person may be going to tell you about abuse, but then stops or tells you

something else, let them know that you are always ready to listen to them and/or remind them of the Childline number 0800 1111

If the child, young person, or adult at risk has communication difficulties or English is not their first language, pass this information on so that an appropriate interpreter can be identified.

If you become concerned about a child, young person, or adult at risk (due to the young person's behaviour, presentation, or other reason)

- Do not trivialise or dismiss your concerns
- If the behaviour may be sexually harmful to other young people do not explain it away as 'normal'
- Report your concerns to your Designated Safeguarding Officer as soon as you can, and before the end of the session

If you become concerned about the behaviour of an adult

- Do not dismiss your concerns
- Do not confront the person about whom you have concerns
- Report your concerns to your Designated Safeguarding Officer as soon as you can, and before the end of the session

It is <u>VERY IMPORTANT</u> you do not ignore or dismiss suspicions about another professional or colleague, however well or little you know them, or whatever position they may occupy in their organisation.

If your concerns are about your Designated Safeguarding Officer speak to Chair of Hackney Quest Trustees.

Your concerns will be taken in confidence and even if they are subsequently seen to be mistaken, you will not suffer any adverse consequences for raising the concern. The only exception to this would be where it could be conclusively shown that the concerns were raised maliciously. If a parent, carer, or other member of the public tells you of their concerns about a young person or the behaviour of an adult

- Do not leave it to them to make their own referral to social care services. You should make your own report.
- Take adequate details about their concern and the identity of the young person.
- Report your concerns to the Designated Safeguarding Officer as soon as you can, and before the end of the session.

Concerns raised by members of the public should always be taken seriously and where necessary Hackney Quest should take responsibility to make the referral to social services.

If you are dissatisfied with the response to any of your concerns above, raise these again with your Designated Safeguarding Officer. If you are unable or unwilling to do this, you can approach another Designated Safeguarding Officer or Chair of Trustees

Sometimes children, young people or adults at risk display harmful or inappropriate behaviours. If you witness this during a session ensure that it is reported to you manager, this can be a sign that they are experiencing abuse and they may need to have an assessment of their needs, including possible needs for protection.

If young people express extreme views this can also be a sign of radicalisation, and you should report this to the Designated Safeguarding Officer, as part of staff PREVENT https://www.gov.uk/government/publications/prevent-duty-guidance

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## 4.7 Designated Safeguarding Officer

Hackney Quest have appointed a Designated Safeguarding Officer (Colette Allen) who is trained (to Level 3) and a deputy DSO (Leverne Sinclair) to respond to safeguarding concerns. All safeguarding concerns must be raised, and individual staff should not make a direct referral to any outside agency.

#### 4.8 Training

It is compulsory that all Hackney Quest staff, volunteers, and committee members be given and attend regular safeguarding training. Staff and volunteers will also be given safeguarding training relevant to their position in which they are volunteering; this could be their line manager coaching them through Hackney Quest's Safeguarding policy.

All appointment panels should have one member who has undertaken safer recruitment training.

#### 4.9 Concerns about the behaviour of a member of staff or a volunteer

These procedures should be used in respect of all cases where it is alleged that a person who works with children, young people or adults at risk has:

- behaved in a way that has or may have harmed a child, young person, or adult at risk
- possibly committed a criminal offence against or related to a child, young person, or adult at risk
- behaved towards a child, young person or adult at risk in a way that indicates he or she may pose a risk of harm

If the concern is not connected to the person's employment or work activity, these procedures may also apply. It is in everyone's interest to resolve cases as quickly as possible, consistent with a fair and thorough investigation. All allegations must be investigated as a priority to avoid any delay.

The Designated Safeguarding Officer should report any concerns to the Local Authority Designated Officer (for non-education settings FOR Hackney)

Phone: 0208 708 5350 who will advise on the process to be followed.

LADO advice must always be followed.

The time taken to investigate and resolve individual cases depends on a variety of factors including the nature, seriousness, and complexity of the allegation.

There may be up to three strands in the consideration of an allegation

- a police investigation of a possible criminal offence
- enquiries and assessment by social services about whether a child, young person, or adult at risk needs protection or in need of services
- consideration by an employer or regulatory body of action in respect of the individual

If there is an immediate risk, appropriate actions may need to be taken by the member of staff e.g. urgent involvement of police; suspension of member of staff and removal from Hackney Quest premises; securing evidence; urgent medical attention.

Any allegation or concern which arises should be reported immediately to the Designated Safeguarding Officer.

## 4.10 Contextual Safeguarding

Contextual Safeguarding is an approach to understanding, and responding to, young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships.

Hackney Quest recognises the need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding expands the objectives of child protection systems in recognition that young people are vulnerable to abuse beyond their front doors.

Any contextual safeguarding concerns should be reported to the Designated Safeguarding Officer (DSO).

#### 5. Confidential Information and Retaining Records

All children, young people and adults at risk, and their families, are entitled to their privacy. However, where there are concerns about the safety or welfare of a child, young person or adult at risk, those concerns, and the necessary personal information will need to be shared with those who can make decisions about action to safeguard the child, young person, or adult at risk.

There is nothing in any legislation that prohibits the sharing of confidential and personal information where there are concerns about the safety or welfare of a child, young person, or adult at risk, or where a criminal act may be, or may have been committed. However, wherever possible we seek to obtain parental consent, unless this would place a child or young person at increased risk.

Employees should make written notes at the earliest opportunity and these should be passed to the Designated Officer. The Designated Officer must keep all written documents relating to a safeguarding issue in a secure place.

The Designated Officer should be trained in Early Intervention referrals and LA processes for completing CAFs where there are early intervention concerns (guidance can be found at <a href="https://www.family-action.org.uk/content/uploads/2014/07/Early-Intervention-Grasping-the-Nettle-Full-Report.pdf">https://www.family-action.org.uk/content/uploads/2014/07/Early-Intervention-Grasping-the-Nettle-Full-Report.pdf</a> or a MARF social care referral form if they believe a child is in immediate danger.

A full range of guidance, support and advice available for different areas of children and family safeguarding is available on this website: <a href="https://www3.hackney.gov.uk/children-and-families">https://www3.hackney.gov.uk/children-and-families</a>

Additionally, a Children and Young People's Services Resource Guide is available here: <a href="https://drive.google.com/file/d/1-HNS7PLa0RY2QRVmldeUWHpfkd0rB6jp/view">https://drive.google.com/file/d/1-HNS7PLa0RY2QRVmldeUWHpfkd0rB6jp/view</a>

Detailed records should be kept until Hackney Quest is confident that the information is held accurately with the agency responsible for taking further action to safeguard the child, young person or adult at risk i.e. partner agencies, social services, or the police. A chronology of decisions made, and actions taken can then be kept on file, once the detailed records are deleted or destroyed. This record should be held for 50 years.

More information can be found in the government document Working Together to Safeguard Children https://www.gov.uk/government/publications/working-together-to-safeguard-children--2

The Trustees who have responsibility for Safety and Safeguarding are responsible for notifying the Charity Commission of any serious incidents relating to safeguarding in line with the Charity Commission's Reporting Serious Incidents Policy.

The Designated Officer MUST report any allegations against members of staff to the Chair of Trustees as well as the Local Authority Designated Officer (LADO).

Reviewed: June 2022 Review: June 2023

Approved by: Colette Allen [Colette Allen, CEO and Safeguarding lead].

## **APPENDIX**

## Appendix A Recognising Signs and Symptoms of Abuse

The signs of child abuse are not always obvious, and a child might not tell anyone what is happening to them. Children might be scared that the abuser will find out, and worried that the abuse will get worse. Or they might think that there's no-one they can tell or that they won't be believed. Sometimes, children do not even realise that what is happening is abuse. The effects of abuse may be short term or may last a long time - sometimes into adulthood. Adults who were abused as children may need advice and support.

The London Child Protection Procedures give guidance that has been adopted in Hackney and across the London Region http://www.londoncp.co.uk/chapters/responding concerns.html

The NSPCC website gives helpful guidance on a wide range of forms of abuse, including sexual exploitation and radicalization (PREVENT) <a href="https://www.nspcc.org.uk/preventing-abuse/signs-symptoms-effects/">https://www.nspcc.org.uk/preventing-abuse/signs-symptoms-effects/</a>

All Hackney Quest staff are expected to be familiar with these websites and the Local Authority Safeguarding Board Website.

Definitions of Abuse (taken from London Child Protection Procedures 2017 - As defined in 'Working Together to Safeguard Children' 2015 and 'Keeping Children Safe in Education' September 2016: Abuse - A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children

## **Categories of Abuse**

## **Physical abuse**

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

Physical abuse can lead directly to neurological damage, physical injuries, disability or, at the extreme, death. Harm may be caused to children both by the abuse itself and by the abuse taking place in a wider family or institutional context of conflict and aggression, including inappropriate or inexpert use of physical restraint.

Physical abuse has been linked to aggressive behaviour in young people and children, emotional and behavioral problems and educational difficulties. Violence is pervasive and the physical abuse of children frequently coexists with domestic violence.

#### **Emotional abuse**

Emotional abuse is the persistent maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the need of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or "making fun" of what they say or how they communicate. It may feature age or

developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children to frequently feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

#### Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Disturbed behaviour- including self-harm, inappropriate sexualised behaviour, sexually abusive behaviour, depression and a loss of self- esteem - has been linked to sexual abuse. Its adverse effects may endure into adulthood. The severity of impact on a child is believed to increase the longer the abuse continues, the more extensive the abuse, and the older the child.

In addition; Sexual abuse includes abuse of children through sexual exploitation. Penetrative sex where one of the partners is under the age of 16 is illegal, although prosecution of similar age, consenting partners is not usual. However, where a child is under the age of 13 it is classified as rape under s5 **Sexual Offences Act 2003**. See **Part B1**, **Practice Guidance** 

### **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/ or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

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

### **Domestic Abuse**

The Home Office definition of Domestic violence and abuse was updated in March 2013 as:

"Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality.

This can encompass, but is not limited to, the following types of abuse: Psychological; Physical; Sexual; Financial; Emotional.

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

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

#### **Signs and Indicators of Abuse**

The following are a few of the physical and behavioural signs of child abuse and neglect. Please note that the listed signs of child abuse in each category may pertain to more than one type of abuse or neglect. For example, "lack of concentration" could be a sign of sexual abuse, as well as emotional abuse.

## **Physical Abuse**

- 1. Unexplained burns, cuts, bruises, or welts in the shape of an object
- 2. Bite marks
- 3. Anti-social behaviour
- 4. Problems in school
- 5. Fear of adults

#### **Emotional Abuse**

- 1. Apathy
- 2. Depression
- 3. Hostility or stress
- 4. Lack of concentration
- 5. Eating disorders

#### **Sexual Abuse**

- 1. Inappropriate interest or knowledge of sexual acts
- 2. Nightmares and bed wetting
- 3. Drastic changes in appetite
- 4. Over-compliance or excessive aggression
- 5. Fear of a particular person or family member

## **Neglect**

- 1. Unsuitable clothing for weather
  - 2. Dirty or un-bathed
  - 3. Extreme hunger
  - 4. Apparent lack of supervision

## Female Genital Mutilation (FGM)

Female genital mutilation (FGM), sometimes known as 'female circumcision' or 'female genital cutting', is illegal in the UK.

It's also illegal to take abroad a British national or permanent resident for FGM, or to help someone trying to do this. You can get 14 years in prison for carrying out FGM or helping it to take place.

## Appendix B Specific Vulnerable Groups of young people/children within Hackney Quest

#### **Children with Disabilities**

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Safeguards for children with disabilities are essentially the same, however children with disabilities may have an increased risk of abuse and neglect because of e.g. their greater dependence, the high levels of care needed and the fact that they may have less control over their bodies and their lives and be less likely to be heard.

A child with a disability may not be able to communicate what has happened or may not appear to understand the abuse.

## **Young People in Caring Roles**

It is important to note that young people in caring roles and siblings can be subject to specific forms of abuse, be it by family members or others.

A child may have caring responsibilities for others, e.g. a child taking on the main caring role within the family because of parents / carers having a mental or physical illness or disability, parents misusing drugs and / or alcohol, domestic violence in the household or parental neglect.

#### Concerns may arise where: -

the child's health and development are being impaired through the nature and extent of their caring responsibilities, e.g. regularly missing school, or no / limited social opportunities;

- The child is carrying out potentially hazardous tasks as a carer;
- The child is carrying out inappropriate tasks because of age/gender e.g. intimate care

## **People with Disabilities**

Hackney Quest is wholly committed to upholding the rights of children, young people and adults at risk with disabilities who use our services and particularly their right to be free from violence, abuse or neglect by their parents or anyone else who looks after them. Research suggests that children and young people with disabilities are more vulnerable to physical, emotional, or sexual abuse or neglect than a non-disabled child. The level of risk may be raised by:

- A need for practical assistance in daily living, including intimate care from what may be several cares.
- Carers and staff lacking the ability to communicate adequately with the child
- A lack of continuity in care leading to an increased risk that behavioural changes may go unnoticed
- Physical dependency with consequent reduction in ability to be able to resist abuse
- An increased likelihood that the child is socially isolated
- Lack of access to "keep safe" strategies available to others
- Communication or learning difficulties preventing disclosure
- Parents' or carers own needs and ways of coping conflicting with the needs of the child

In addition to the indicators of abuse and neglect listed above, the following indicators must also be considered in relation to disabled children:

- Force feeding, or impatience in feeding leading to under feeding/under nourishment
- Unjustified or excessive physical restraint
- Rough handling
- Extreme behaviour modification, including the deprivation of liquid, medication, food or clothing or social contact
- Misuse of medication, sedation, heavy tranquillisers
- Invasive procedures against a child's will
- Deliberate failure to follow medically recommended regimes
- Misapplication of care programmes or regimes
- Ill-fitting equipment (e.g. callipers, sleep board causing injury or pain, inappropriate splinting)
- Undignified or culturally inappropriate intimate care practices.

Some sex offenders may target children and young people with disabilities in the belief they are less
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likely to be detected.

## **Institutional Abuse**

Children and young people with disabilities are particularly vulnerable to this kind of abuse where practices and behaviours by staff in organisations have become institutionalised or commonly accepted practice. However, those behaviours may cause significant harm (as above) and/or may be an abuse of the child's rights. Examples of the latter could be

- Where a child's communication board does not accompany the child everywhere
- Staff who assume a child's wishes or communication and speak for them
- Staff who do not facilitate a child's own communication because of the difficulty or time it takes
- Attributing difficult or challenging behaviour to the child's condition rather than identifying it as communication

All staff and volunteers within Hackney Quest must be alert to signs of institutional abuse or unprofessional practices or behaviour and raise their concerns as per the procedures outlined above.

Appendix C Complaint Investigation Form

# **Hackney Quest - COMPLAINT INVESTIGATION FORM**

| Complaint regarding  |  |             |                 |  |
|--|--|-------------|-----------------|--|
| Name   |  |             | Date of birth   |  |
| Address  |  |             |                 |  |
|  |  |             |                 |  |
| Date of complaint  |  | Date respor | nse required by |  |
| Complainant  |  |             |                 |  |
| If the complainant is not the reporting incident, what evidence was provided of their consent to complain on their behalf? |  |             |                 |  |
| Overview of complaint (append complaint letter or notes of verbal complaint to this form)                                  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
| Investigation plan (outline the planned activities to investigate the complaint)   |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
| Findings of investigation (append interview notes to this form)  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |
|  |  |             |                 |  |

| Proposed response    |  |
|----------------------|--|
|                      |  |
|                      |  |
| Approved by          |  |
| Response provided by |  |
| Name                 |  |
| Method               | (append any written communications to this form) |
| Date                 |  |