



SAFEGUARDING POLICY

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SECTION 1

Details of the organisation

Name of Organisation: The Princess Project

Address: Maidstone Community Support Centre, 39-48 Marsham Street, Maidstone ME14 1HH

Tel No: 01622 230713

Charity Number: 1155021 Company Number: N/A

Insurance Company: Markel Insurance

Contact list

| | | |
|----------------------------------------------------|---------------------|-------------------------------|
| Safeguarding Co-ordinator | Angela Trigg | 07711 657813 |
| Deputy | Emma Tanner | 07851 196770 |
| Thirtyone:eight Safeguarding Helpline | | 0303 003 1111 Option 2 |
| Kent Children’s Services | | 03000 41 11 11 |
| Kent Adult Services | | 03000 41 61 61 |
| Kent / Medway Social Services out of hours | | 03000 41 91 91 |
| Medway social services (working hours) | | 01634 334466 |
| Chair of Trustees | Jane Negus | 07800 536616 |
| Childline | | 0800 1111 |
| NSPCC | | 0808 800 5000 |
| Ann Craft Trust (vulnerable adults) | | 0115 951 5400 |
| Police | | 111 (24 hours) |
| Pastoral support for workers and volunteers | Mary Sangwan | 07312 095538 |

The following is a brief description of our organisation and the type of work / activities we undertake with children / vulnerable adults:

- 1) We operate a 1-1 befriending service for mums aged 16-30, matching trained volunteer befrienders with mums in need of support
- 2) We provide drop-in support for parents (with their babies/young children), from a variety of locations
- 3) We run parenting groups/courses, which may include childcare for the parents
- 4) We provide gift boxes for new mums
- 5) We run Totcycle, a baby goods exchange
- 6) We run Hope Café, our faith community, an all-age space for mums to explore the Christian faith.

The work of the charity is a practical expression of the Christian faith of the charity's trustees and volunteers.

Our commitment

As a Leadership we recognise the need to provide a safe and caring environment for children, young people and vulnerable adults. We acknowledge that children, young people and vulnerable adults can be the victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Covenant of Human Rights, which states that everyone is entitled to “all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status”. We also concur with the Convention on the Rights of the Child which states that children should be able to develop their full potential, free from hunger and want, neglect and abuse. They have a right to be protected from “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s), or any other person who has care of the child.” As a Leadership we have therefore adopted the procedures set out in this safeguarding policy in accordance with statutory guidance. We are committed to build constructive links with statutory and voluntary agencies involved in safeguarding.

The Leadership undertakes to:

- endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above.
- provide on-going safeguarding training for all its workers and will regularly review the operational guidelines attached.
- ensure that the premises meet the requirements of the Disability Discrimination Act 1995 and all other relevant legislation, and that it is welcoming and inclusive.
- support the Safeguarding Coordinator(s) in their work and in any action they may need to take in order to protect children and vulnerable adults.
- file a copy of the policy and practice guidelines with the local authority (Social Services) and any amendments subsequently published. The Leadership agrees not to allow the document to be copied by other organisations.

The policy is consistent with the following legislation and guidance

The Children Act 1989 explicitly states that the welfare of the child is paramount when there is any child protection concern.

In accordance with the **Children Act 2004** Leadership recognises they must:

- Take responsibility to safeguard and promote the welfare of children (Section 11, Children Act 2004)
- Listen to and act upon disclosures of abuse made by children.
- Report anyone alleged to be abusive to children to the local authority children services.

In line with the **UN Convention on the Rights of the Child** Leadership will ensure the rights and needs of the child will be considered of very high importance by all staff and volunteers in their day-to-day work; this includes a child's right to dignity and respect, and the right to protection from harm.

Working Together to Safeguard Children: 2019:

The safety of the children we work with is our highest priority and we will take every reasonable step to ensure a level of care is reached comparable to the requirements of the processes above.

Leadership is committed to the shared responsibility of all relevant agencies to put the needs of vulnerable children first and to co-operate in protecting them.

What to do if you think a child is being abused: March 2015:

Which gives non-statutory advice to help practitioners identify child abuse and neglect and take appropriate action in response.

Recognising and responding appropriately to an allegation or suspicion of abuse

Understanding abuse and neglect

Defining child abuse or abuse against a vulnerable adult is a difficult and complex issue. A person may abuse by inflicting harm, or failing to prevent harm. Children and adults in need of protection may be abused within a family, an institution or a community setting. Very often the abuser is known or in a trusted relationship with the child or vulnerable adult.

In order to safeguard those in our organisation we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19 which states:

1. States Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.

Also for adults the UN Universal Declaration of Human Rights with particular reference to Article 5 which states: *No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.*

Detailed definitions, and signs and symptoms of abuse, as well as how to respond to a disclosure of abuse, are included here in our policy.

- Definitions of abuse: Appendix 2.
- Signs and symptoms of abuse: Appendix 3.
- How to respond to an abuse disclosure: Appendix 5.

Leadership need to be vigilant to the following issues affecting children and vulnerable adults

- Female Genital Mutilation (FGM)
- Child Sexual Exploitation (CSE)

- Child Criminal Exploitation
- Radicalisation
- Honour Based Violence (HBV) and forced marriage
- Homelessness

A description of these issues can be found in Appendix 4.

Safeguarding awareness

The Leadership is committed to on-going safeguarding training and development opportunities for all workers, developing a culture of awareness of safeguarding issues to help protect everyone. All our workers ('workers' refers to both paid staff and volunteers of the Princess Project) will receive induction training and undertake safeguarding training on a regular basis (at least every 2 years). All workers will receive an electronic copy of the full safeguarding policy and an electronic and paper copy of the summary safeguarding leaflet when they join the organisation (copies of which are kept at all our sessions and venues- see appendix 7).

The Leadership will also ensure that children and vulnerable adults are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

Responding to allegations of abuse

Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse. Following procedures as below:

- The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to Angela Trigg (thereafter the "Safeguarding Co-ordinator") tel no: 07711 657813 who is nominated by the Leadership to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities. Where possible the "Recording Form for Safeguarding Concerns" should be used. This is available in paper form, as an online word document, or an online Microsoft Forms form (see appendix 8).
- In the absence of the Safeguarding Co-ordinator or, if the suspicions in any way involve the Safeguarding Co-ordinator, then the report should be made to Emma Tnner (hereafter the "Deputy ") tel no: 07851 196770. If the suspicions implicate both the Safeguarding Co-

ordinator and the Deputy, then the report should be made in the first instance to thirtyone:eight, 0303 003 1111. Alternatively contact Social Services or the police.

Where the concern is about a child the Safeguarding Co-ordinator should contact Children's Social Services. Where the concern is regarding an adult in need of protection contact Adult Social Services or take advice from the thirtyone:eight helpline (number below).

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|-------------------------------------------|--------------------------|
| Kent Children's Services | 03000 41 11 11 |
| Kent Adult Services | 03000 41 61 61 |
| Kent/Medway Social Services- out of hours | 03000 41 91 91 |
| Medway social services (working hours) | 01634 334466 |
| Police | 101 (24 hours) |
| Thirtyone:eight safeguarding helpline | 0303 003 1111 (option 2) |

- Suspicions must not be discussed with anyone other than those nominated above. A written record of the concerns (using the Princess Project recording form for safeguarding concerns) should be made in accordance with these procedures and kept in a secure place.
- Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Co-ordinator, the absence of the Safeguarding Co-ordinator or Deputy should not delay referral to Social Services, the Police or taking advice from thirtyone:eight.
- The Leadership will support the Safeguarding Co-ordinator/Deputy in their role, and accept that any information they may have in their possession will be shared in a strictly limited way on a need to know basis.
- It is, of course, the right of any individual as a citizen to make a direct referral to the safeguarding agencies or seek advice thirtyone:eight, although the Leadership hope that members of the organisation will use this procedure. If, however, the individual with the concern feels that the Safeguarding Co-ordinator/Deputy has not responded appropriately, or where they have a disagreement with the Safeguarding Co-ordinator(s) as to the appropriateness of a referral they are free to contact an outside agency direct. We hope by making this statement that the Leadership demonstrate its commitment to effective safeguarding and the protection of all those who are vulnerable.

The role of the safeguarding co-ordinator/ deputy is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies as needed, who have a legal duty to investigate.

Detailed procedures where there is a concern about a child:

Allegations of physical injury, neglect or emotional abuse

If a child has a physical injury, a symptom of neglect or where there are concerns about emotional abuse, the Safeguarding Co-ordinator/Deputy will:

- Contact Children's Social Services (or thirtyone:eight) for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
- Not tell the parents or carers unless advised to do so, having contacted Children's Social Services.
- Seek medical help if needed urgently, informing the doctor of any suspicions.
- For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek help, but not if this places the child at risk of significant harm.
- Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Children's Social Services or Early Help team direct for advice.
- Seek and follow advice given by thirtyone:eight if unsure whether or not to refer a case to Children's Social Services.

Allegations of sexual abuse

In the event of allegations or suspicions of sexual abuse, the Safeguarding Co-ordinator/Deputy will:

- Contact the Children's Social Services Department Duty Social Worker for children and families or Police Child Protection Team direct. They will NOT speak to the parent/carer or anyone else.
- Seek and follow the advice given by thirtyone:eight or other professional colleagues such as the Early Help team if, for any reason they are unsure whether or not to contact Children's Social Services/Police.

The following procedure will be followed where there is a concern that an adult is in need of protection:

Suspicious or allegations of physical or sexual abuse

If a vulnerable adult has a physical injury or symptom of sexual abuse the Safeguarding Co-ordinator/Deputy will:

- Discuss any concerns with the individual themselves giving due regard to their autonomy, privacy and rights to lead an independent life.
- If the vulnerable adult is in immediate danger or has sustained a serious injury contact the Emergency Services, informing them of any suspicions.
- For advice contact the Adult Social Care Vulnerable Adults Team who have responsibility under Section 47 of the NHS and Community Care Act 1990 and government guidance, 'No Secrets', to investigate allegations of abuse. Alternatively thirtyone:eight can be contacted for advice.

Allegations of abuse against a person who works with children

If an accusation is made against a worker (whether a volunteer or paid member of staff) whilst following the procedure outlined above, the Safeguarding Co-ordinator, in accordance with Local Safeguarding Children Board (LSCB) procedures will need to liaise with Children's Social Services in regards to the suspension of the worker, also making a referral to a Safeguarding Adviser (SA) / Local Authority Designated Officer (LADO).

Prevention

Safe recruitment

The Leadership will ensure all workers will be appointed, trained, supported and supervised in accordance with government guidance on safe recruitment. This includes ensuring that:

- There is a written job description / person specification for the post
- Those applying have completed an application form and a self-declaration form
- Those short listed have been interviewed
- Safeguarding has been discussed at interview
- Written references have been obtained, and followed up where appropriate
- A criminal records disclosure has been completed if required (we will comply with Code of Practice requirements concerning the fair treatment of applicants and the handling of information)
- Qualifications where relevant have been verified
- A suitable training programme is provided for the successful applicant
- The applicant has completed a probationary period
- The applicant has been given a copy of the organisation's safeguarding policy and knows how to report concerns.
- Regular updated training will be sought for the Safeguarding Co-ordinator and the Deputy
- Further training will be given to all workers including the Safeguarding Co-ordinator and the Deputy as guidance and legislation change.

Management of Workers

As a Leadership we are committed to supporting all workers and ensuring they receive support and supervision. The Leadership undertakes to follow the principles found within the 'Abuse Of Trust' guidance issued by the Home Office and it is therefore unacceptable for those in a position of trust to engage in any behaviour which might allow a sexual relationship to develop for as long as the relationship of trust continues.

Pastoral Care

Supporting those affected by abuse

The Leadership is committed to offering pastoral care, working with statutory agencies as appropriate, and support to all those who have been affected by abuse who have contact with or are part of the organisation. In the first instance please contact Mary Sangwan.

Working with offenders

When someone attending the organisation is known to have abused children, or is known to be a risk to vulnerable adults the Leadership will supervise the individual concerned and offer pastoral care, but in its safeguarding commitment to the protection of children and vulnerable adults, set boundaries for that person which they will be expected to keep.

A copy of the Safeguarding Policy will be given as part of the training to all workers.

Signed by: _____

Date: _____

Leadership Safeguarding Statement

The Leadership (board of trustees and CEO) recognises the importance of its ministry /work with children and young people and adults in need of protection and its responsibility to protect everyone entrusted to our care.

The following statement was agreed by the leadership/organisation on: __10/7/23_____

This organisation is committed to the safeguarding of children and vulnerable adults and ensuring their well-being.

Specifically:

- We recognise that we all have a responsibility to help prevent the physical, sexual, emotional abuse and neglect of children and young people (those under 18 years of age) and to report any such abuse that we discover or suspect.
- We believe every child should be valued, safe and happy. We want to make sure that children we have contact with know this and are empowered to tell us if they are suffering harm.
- All children and young people have the right to be treated with respect, to be listened to and to be protected from all forms of abuse.
- We recognise that we all have a responsibility to help prevent the physical, sexual, psychological, financial and discriminatory abuse and neglect of vulnerable adults and to report any such abuse that we discover or suspect.
- We recognise the personal dignity and rights of vulnerable adults and will ensure all our policies and procedures reflect this.
- We believe all adults should enjoy and have access to every aspect of the life of the organisation unless they pose a risk to the safety of those we serve.
- We undertake to exercise proper care in the appointment and selection of all those who will work with children and vulnerable adults.

We are committed to:

- Following the requirements for UK legislation in relation to safeguarding children and vulnerable adults and good practice recommendations.
- Respecting the rights of children as described in the UN Convention on the Rights of the Child.
- Implementing the requirements of legislation in regard to people with disabilities.
- Ensuring that workers adhere to the agreed procedures of our safeguarding policy.

- Keeping up to date with national and local developments relating to safeguarding.
- Following any organisational guidelines in relation to safeguarding children and adults in need of protection.
- Supporting the safeguarding co-ordinator/s in their work and in any action they may need to take in order to protect children/vulnerable adults.
- Ensuring that everyone agrees to abide by these recommendations and the guidelines established by this organisation.
- Supporting parents and families
- Nurturing, protecting and safeguarding of children and young people
- Supporting, resourcing, training, monitoring and providing supervision to all those who undertake this work.
- Supporting all in the organisation affected by abuse.

We recognise:

- Children’s Social Services (or equivalent) has lead responsibility for investigating all allegations or suspicions of abuse where there are concerns about a child. Adult Social Care (or equivalent) has lead responsibility for investigating all allegations or suspicions of abuse where there are concerns about a vulnerable adult.
- Where an allegation suggests that a criminal offence may have been committed then the police should be contacted as a matter of urgency.
- Where working outside of the UK, concerns will be reported to the appropriate agencies in the country in which we operate, and their procedures followed, and in addition we will report concerns to our agency’s headquarters.
- Safeguarding is everyone’s responsibility.

We will review this statement and our policy and procedures annually.

If you have any concerns for a child or vulnerable adult then speak to one of the following who have been approved as safeguarding co-ordinators for this organisation.

Angela Trigg, Safeguarding Coordinator

Emma Tanner, Deputy Safeguarding Coordinator

A copy of the full policy and procedures is available from the Princess Project office.

Signed by leadership/organisation

Signed _____Jane Negus (Chair)_____

Date _____10/7/23_____

Statutory Definitions of Abuse (Children)

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.

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. They may be abused by an adult or adults or another child or children.

Child protection legislation throughout the UK is based on the United Nations Convention on the Rights of the Child. Each nation within the UK has incorporated the convention within its legislation and guidance.

England

The four definitions of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children (2018)'.

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. 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 adult or adults, or another child or children.

Physical abuse

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

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond 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 frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual abuse

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

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

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

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Signs of Possible Abuse (children & young people)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

Physical

- Injuries not consistent with the explanation given for them
- Injuries that occur in places not normally exposed to falls, rough games, etc
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises on babies, bites, burns, fractures cuts, scratches etc which do not have an accidental explanation

Sexual

- Any allegations made concerning sexual abuse
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour
- Age-inappropriate sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders - anorexia, bulimia

Emotional

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food
- Untreated illnesses
- Inadequate care
- Children who are living in a home that is indisputably dirty or unsafe
- Children who are left hungry or dirty
- Children who are left without adequate clothing e.g. not having a winter coat

- Children who are living in dangerous conditions i.e. around drugs, alcohol or violence
- Children who are often angry, aggressive or self-harm
- Children who fail to receive basic healthcare/dental care
- Parents who fail to seek medical treatment when their children are ill or are injured

Issues Affecting Children and Young People

Female Genital Mutilation (FGM)

Female genital mutilation refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK.

FGM typically takes place between birth and around 15 years old; however, it is believed that the majority of cases happen between the ages of 5 and 8.

- over 20,000 girls under the age of 15 could be at high risk of FGM each year in England & Wales
- nearly 66,000 women in England & Wales are living with the consequences of FGM
- due to the hidden nature of the crime, and the population increase in the past 10-15 years the prevalence of FGM is likely to be significantly higher
- girls are most 'at risk' of FGM if the family originates from any of the following countries:

Burkina Faso, Chad, Djibouti, Egypt, Eritrea, Ethiopia, Guinea, Guinea-Bissau, Liberia, Mali, Mauritania, Sierra Leone, Somalia, Sudan, The Gambia.

This is by no means to be seen as a complete list, but countries where FGM is widely prevalent.

Mandatory Reporting Duty

The Serious Crime Act 2015 sets out a duty on professionals to notify police when they discover that FGM appears to have been carried out on a girl under 18. If FGM is suspected workers and volunteers must report their concern to the Safeguarding Co-ordinator or the Deputy.

Child Sexual Exploitation (CSE)

What is CSE?

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 through the use of technology.

What are the indicators of CSE?

- Acquisition of money, clothes, mobile phones, etc. without plausible explanation;
- Gang-association and/or isolation from peers/social networks;
- Exclusion or unexplained absences from school;
- Leaving home/care without explanation and persistently going missing or returning late;
- Excessive receipt of texts/phone calls;
- Returning home under the influence of drugs/alcohol;
- Inappropriate sexualised behaviour for age/sexually transmitted infections;
- Evidence of/suspicious of physical or sexual assault;
- Relationships with controlling or significantly older individuals or groups;
- Multiple callers (unknown adults or peers);
- Frequenting areas known for sex work;
- Concerning use of internet or other social media;
- Increasing secretiveness around behaviours; and
- Self-harm or significant changes in emotional well-being.

Although the following vulnerabilities increase the risk of child sexual exploitation, it must be remembered that not all children with these indicators will be exploited. Child sexual exploitation can occur without any of these issues.

- Having a prior experience of neglect, physical and/or sexual abuse;
- Lack of a safe/stable home environment, now or in the past (domestic violence or parental substance misuse, mental health issues or criminality, for example);
- Recent bereavement or loss;
- Social isolation or social difficulties;
- Absence of a safe environment to explore sexuality;
- Economic vulnerability;
- Homelessness or insecure accommodation status;
- Connections with other children and young people who are being sexually exploited;
- Family members or other connections involved in adult sex work;
- Having a physical or learning disability;
- Being in care (particularly those in residential care and those with interrupted care histories); and
- Sexual identity.

Child criminal exploitation: county lines and serious violent crime

Criminal exploitation of children is a geographically widespread form of harm that is a typical feature of county lines criminal activity: drug networks or gangs groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. Key to identifying potential involvement in county lines are missing episodes, when the victim may have been trafficked for the purpose of transporting drugs and a referral to the National Referral Mechanism should be considered.

Like other forms of abuse and exploitation, county lines exploitation:

- can affect any child or young person (male or female) under the age of 18 years;
- can affect any vulnerable adult over the age of 18 years;
- can still be exploitation even if the activity appears consensual;
- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence;
- can be perpetrated by individuals or groups, males or females, and young people or adults; and
- is typified by some form of power imbalance in favour of those perpetrating the exploitation. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources.

Radicalisation

The process of radicalisation may involve:

- being groomed online or in person
- exploitation, including sexual exploitation
- psychological manipulation
- exposure to violent material and other inappropriate information
- the risk of physical harm or death through extremist acts.

It happens gradually so children and young people who are affected may not realise what it is that they are being drawn into.

Anyone can be radicalised but there are some factors which may make a young person more vulnerable. These include:

- being easily influenced or impressionable

- having low self-esteem or being isolated
- feeling that rejection, discrimination or injustice is taking place in society
- experiencing community tension amongst different groups
- being disrespectful or angry towards family and peers
- having a strong need for acceptance or belonging
- experiencing grief such as loss of a loved one.

These factors will not always lead to radicalisation.

Honour Based Violence and Forced Marriage

‘Honour’ based violence ‘Honour’ based violence (HBV) occurs when perpetrators believe a relative or other individual has shamed or damaged a family’s or community’s ‘honour’ or reputation and that the only way to redeem the damaged ‘honour’ is to punish and/or kill the individual. ‘Honour’ based violence is a term that is widely used to describe this sort of abuse however it is often referred to as so called ‘honour’ based violence because the concept of ‘honour’ is used by perpetrators to make excuses for their abuse. There is a very strong link between ‘honour’ based violence, forced marriage.

Forms of ‘honour’ based violence can include:

- Being disowned or ostracised by the community
- Physical abuse of the victim by family members
- Restriction of freedom or loss of independence – being “policed” by family members
- Isolation from wider family or community, e.g. stopped from seeing friends
- Forced marriage
- Internalisation of guilt or shame by the victim can cause internal conflict for them, and not wanting to cause further shame can result in self harm and suicide attempts.

Effective Listening

Ensure the physical environment is welcoming, giving opportunity for the child or vulnerable adult to talk in private but making sure others are aware the conversation is taking place.

- It is especially important to allow time and space for the person to talk
- Above everything else listen without interrupting
- Be attentive and look at them whilst they are speaking
- Show acceptance of what they say (however unlikely the story may sound) by reflecting back words or short phrases they have used
- Try to remain calm, even if on the inside you are feeling something different
- Be honest and don't make promises you can't keep regarding confidentiality
- If they decide not to tell you after all, accept their decision but let them know that you are always ready to listen.
- Use language that is age appropriate and, for those with disabilities, ensure there is someone available who understands sign language, Braille etc.

Helpful responses

- You have done the right thing in telling
- I am glad you have told me
- I will try to help you

Don't say

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where?
- I am shocked, don't tell anyone else

Definition of a Vulnerable Adult

(taken from Diocese of Canterbury Adult Protection Guidelines)

Human beings are, by their very nature, subject to the chances and changes of this world. At some time everyone will be vulnerable to a wide range of pressures, concerns and dangers. Some people by reason of their physical or social circumstances have higher levels of vulnerability than others. It is the Christian duty of everyone to recognise and support those who are identified as being more vulnerable.

A working definition (but not exhaustive) may be, any adult aged 18 or over who, by reason of mental or other disability, age, illness or due to circumstance is permanently or, for the time being, unable to take care of him or herself, or appears to be unable to protect him or herself against significant harm or exploitation. Some factors which increase vulnerability are listed below:

- a sensory or physical disability or impairment
- a learning disability
- a physical illness
- mental ill health, chronic or acute
- dementia
- an addiction to alcohol or drugs
- the failing faculties of old age
- a permanent or temporary reduction in physical, mental or emotional capacity brought about by life events, for example bereavement or abuse or trauma

For example:

- is elderly and frail
- has a severe physical illness
- is a substance misuse
- is an unpaid carer
- is homeless
- is exposed to domestic violence
- immigrant families

REFER

You are not expected to be an expert in these areas so refer on.

ALL ALLEGATIONS AND DISCLOSURES MUST BE REFERRED TO THE PRINCESS PROJECT SAFEGUARDING CO-ORDINATOR OR DEPUTY

If you believe a person is at immediate risk of harm when they leave you, and you cannot get hold of Emma or Alison, make a referral directly to the appropriate agency- Police or Social Services

All disclosures, allegations and concerns should be referred initially to the Princess Project Safeguarding Co-ordinator who will inform other appropriate people.

No concern is too small- all disclosures, issues or concerns seen or that you are made aware of must be acted on as soon as possible. Do not investigate yourself.

Never make assumptions.

RECOGNISE

The main forms of abuse are:

- **Physical:** bruises, cuts, bites, fractures etc which do not have an explanation
- **Emotional:** changes in mood or behaviour, withdrawn or clingy. Depression, aggression or extreme anxiety, nervous, low self-esteem
- **Neglect:** under-nourishment, failure to grow, constant hunger, inadequate care, dirty, inappropriate clothing, unkempt
- **Sexual:** knowledge of adult sexual behaviour- words/drawings. Sexually provocative, sexual infections
- **Discriminatory:** racist, sexist, based on a person's disability
- **Spiritual:** using faith, spirituality, trust to manipulate and control people
- **Financial:** money or possessions disappearing, no money for essentials, jewellery or valuables missing
- **Institutional:** care homes etc
- **Grooming:** of individuals, family, church

We may become aware of abuse or concerns about someone's behaviour in a number of ways:

- A disclosure from a person who is experiencing or has experienced abuse
- An allegation about someone's conduct
- A concern about someone's behaviour.

All must be taken seriously and acted upon.

CONTACTS

Safeguarding Co-ordinator

Name: Angela Trigg

Tel: 07711 657813

Email: safeguarding@princessproject.co.uk; angela.trigg@princessproject.co.uk

Deputy Safeguarding Co-ordinator

Name: Emma Tanner

Tel: 07851 196770 (PP mobile); 07870 175906 (personal mobile), 01622 230713 (PP office)

Email: emma.tanner@princessproject.co.uk

Other contact telephone numbers

| | |
|--------------------------------------------|----------------|
| Police | 101 (24 hrs) |
| Kent Children's Services | 03000 41 11 11 |
| Kent Adult Services | 03000 41 61 61 |
| Kent Social Services-out of hours | 03000 41 91 91 |
| 31:8 Safeguarding helpline | 0303 003 1111 |
| NSPCC (24/7 helpline) | 0808 800 5000 |
| National Domestic Violence Helpline | 0800 2000 247 |



SAFEGUARDING GUIDELINES FOR VOLUNTEERS

Based on The Diocese of Canterbury's 'Safeguarding Aide Memoire'

RESPOND

DON'T:

- Promise to keep a secret, or promise confidentiality
- Attempt to investigate yourself
- Discuss the case with anyone else
- Speak to the accused
- Ignore it

With a person making a disclosure,

DO:

- Assure them they are not to blame for what happened
- Reassure the person that they have done the right thing by telling you
- React calmly, being aware of non-verbal messages and body language
- Listen, but do not ask leading questions, interrogate or investigate. Avoid making comments or judgments
- Tell them what you are going to do and that they will be told what is happening at each stage
- Refer as soon as possible to the Princess Project Safeguarding Co-ordinator or deputy
- Find support for yourself

RECORD

- Make full notes of what you are told- including names, the person making the disclosure/referral, and date/time. Date and sign your notes
- Use the words the child/adult used- do not 'translate' into proper names etc. As far as possible use the exact words used in the disclosure
- If someone else is making an allegation or raising a concern you will need to include their contact details
- The original document should be kept safely and a copy forwarded to the Princess Project Safeguarding Officer. If you type up the account, keep your handwritten notes.

What to record

- **Who** was involved- names of key people
- **What** happened and **how**- facts not opinions
- **Where** it happened
- **When** it happened- date and time
- **Whom** it was referred to

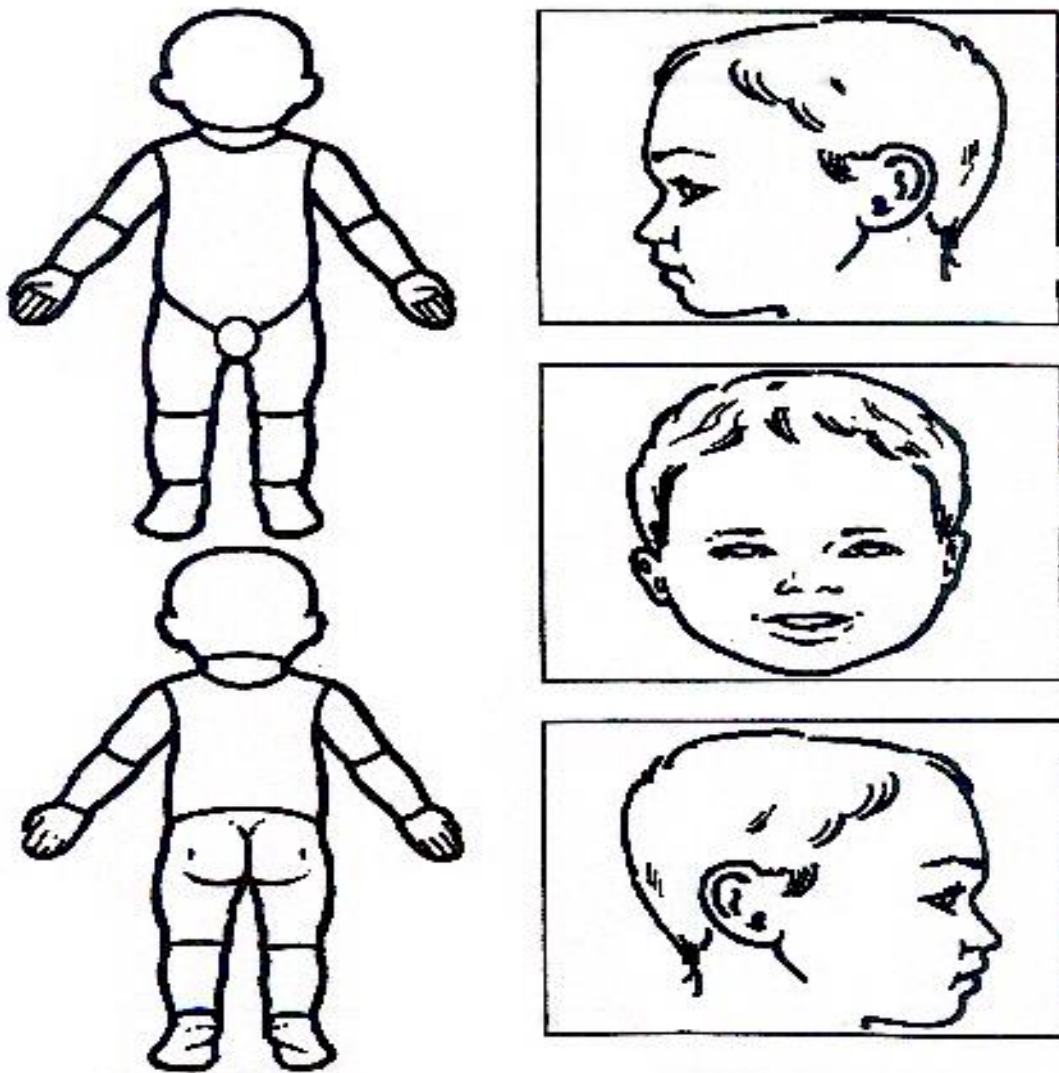
Recording Form for Safeguarding Concerns

Staff or volunteers with a safeguarding concern are required to complete this form and pass it to the Safeguarding Co-ordinator/deputy at safeguarding@princessproject.co.uk (SC- Angela Trigg 07711 657813 DSC- Emma Tanner 07851 196770)

| Information Required | Enter Information Here |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Full name of child or adult | |
| Date of birth | |
| Setting/place where incident/disclosure occurred | |
| Your name and position | |
| <p>Nature of concern/disclosure</p> <p><i>Please include where you were when the person made a disclosure/you became aware of a concern; what you saw; who else was there; what was said by both you and the person making the disclosure.</i></p> <p><i>[Ensure that if there is an injury this is recorded (size and shape) and a body map is completed if appropriate]</i></p> <p><i>[Make it clear if you have raised a concern about a similar issue previously]</i></p> | |
| Time and date of incident: | |

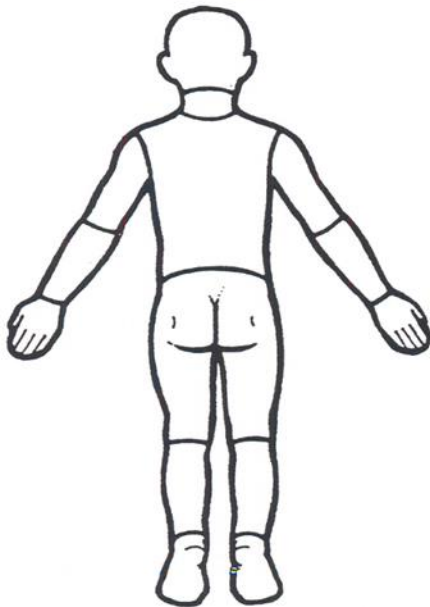
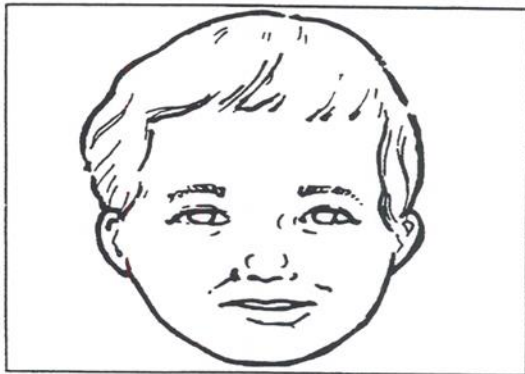
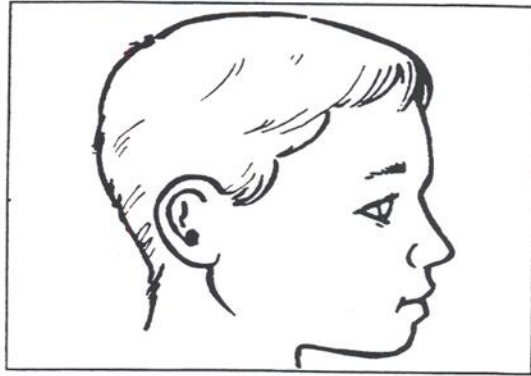
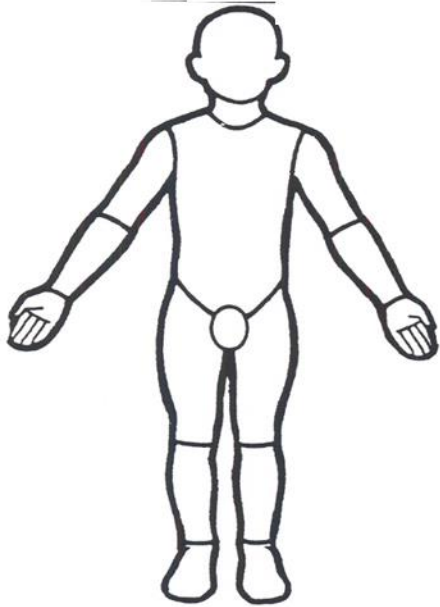
| Information Required | Enter Information Here |
|-----------------------------------------------------------------------------|------------------------|
| Name and position of the person you are passing this information to: | |
| Your Signature | |
| Time and date form completed | |
| Time form received by SC/DSC | |
| Action Taken by SC/DSC | |
| Referral made to social care [yes/no, date and time] | |
| Referral made to police [yes/no, date and time] | |
| Referral made to other agency [yes/no, date and time, name of organisation] | |
| Parents informed [yes/no, date and time] | |
| Feedback given to child/adult making the disclosure [yes/no, date and time] | |
| Feedback given to person who recorded disclosure [yes/no, date and time] | |
| Further action agreed | |
| Full Name of SC/DSC | |
| Signature of SC/DSC and date of signing | |

Body Map- Young Child



Indicate clearly where the injury was seen and attach this to the referral form

Body Map- older child



Indicate clearly where the injury was seen and attach this to the referral form

Adapted from the form used by Arbury Baptist Church, Cambridge, with thanks