CHILD PROTECTION AND SAFEGUARDING POLICY AND PROCEDURE

Background

KidsAid believes that it is always unacceptable for a child or vulnerable person to experience abuse of any kind and recognises its responsibility to safeguard and promote the welfare of all children and young people at risk through a commitment to practices that protect them. This policy must be read in conjunction with the Safeguarding Adults Policy.

Principles

- KidsAid understands that safeguarding children and young people is everyone's responsibility and the welfare of children and young people at risk is of paramount importance.
- All children and young people at risk (whatever their background and culture, maternity or pregnancy status i.e. think family, age, disability, gender, racial origin, religious belief, sexual orientation and/or gender identity) have the right to participate in society in an environment which is safe and free from violence, fear, abuse, bullying and discrimination.
- All children and young people at risk have the right to be protected from harm, exploitation, and abuse and to be provided with safe environments to live and play.
- Working in partnership with children, young people at risk and their parents, carers and other agencies is essential in promoting children and young people's welfare.
- KidsAid has a duty to promote the well-being of all people who use the service and to cooperate with other relevant agencies and partners in delivering its safeguarding duties.
- KidsAid is responsible for establishing appropriate policies and procedures to ensure that its activities promote the safety and wellbeing of children and young people at risk, e.g., safer recruitment policies, safeguarding adult policy, safer recruitment and safer working practices.

Purpose

This policy demonstrates KidsAid's commitment to meet its legal obligations and reassure people who use the service, members of the public, staff, and partners that:

- KidsAid has appropriate policies and procedures to protect and safeguard children and young people at risk and respond to child protection concerns.
- Make it clear to the staff, volunteers, and trustees by providing guidance on the procedures that they should adopt if they suspect a child or young person is at risk and may be experiencing harm or be at risk of harm to keep them safe
- Concerns can be raised through an established procedure to enable the best outcome for the child or young person.
- There is a high-quality recording and effective monitoring system in place.
- Trustees, staff, volunteers, and partners have received the appropriate training in line with the intercollegiate safeguarding competency guidance.

Policy Statement

KidsAid is committed to safeguarding and promoting the welfare of children and young people who engage with its services.

KidsAid recognises its responsibility to take all reasonable steps to protect children and young people from harm, abuse, neglect, and exploitation, and to create a safe and supportive environment for all service users.

All concerns relating to safeguarding or child protection will be taken seriously and responded to promptly, sensitively, and in accordance with statutory guidance and local safeguarding procedures.

KidsAid is committed to safer recruitment practices, maintaining a strong safeguarding culture, and ensuring that all personnel understand and fulfil their safeguarding responsibilities.

KidsAid will not tolerate harassment, victimisation, or retaliation against any individual who raises a safeguarding concern in good faith.

KidsAid will comply with local Safeguarding Children Partnership inter-agency procedures and will respond positively to recommendations aimed at improving safeguarding policies and practices. This policy is informed by relevant legislation, statutory guidance, and best practice in safeguarding children in England.

Aims of the Policy

- Respecting the rights, wishes, feelings and privacy of children and adults at risk by listening to them and minimising risks that may affect them.
- Preventing abuse and harm by good practice, creating a safe and healthy environment to avoid situations where abuse or allegations of abuse occur.
- Ensuring that Trustees, staff, therapists, and volunteers understand KidsAid's relevant Codes of Conduct and Safeguarding Policy.
- Raising awareness among Trustees and staff of the safeguarding duty KidsAid and its staff has in relation to Children and Safeguarding Vulnerable Group Acts for example: The Children's Act (1989), The Children's Act (2004), Children and Social Work Act (2017) The Care Act (2014) Female Genital Mutilation Act 2003 as amended by the Serious Crime Act (2015), the Domestic Abuse Act (2021) United Nations Convention on the Rights of the Child (1989) and Government guidance such as Working Together to Safeguard Children (2023) and Keeping Children Safe in Education (2023).
- Ensuring that partner agencies and freelancers have safeguarding policies and procedures commensurate with the level of involvement they have with children and adults at risk.
- Responding to any allegations appropriately and implementing appropriate disciplinary and appeals procedures.
- To ensure clear procedures are in place, promoted and implemented in line with the relevant local authority Multi-Agency Safeguarding Hub procedures for safeguarding children and adults at risk.
- To share information about concerns with agencies that need to know, and involving parents/carers, children, and adults at risk appropriately.

<u>To achieve these aims, KidsAid will:</u>

- Ensure that safeguarding and child protection training appropriate to the level of involvement with children at risk is completed by all therapists and members of staff at least annually, updating staff and therapists as soon as possible regarding changes in legislation or KidsAid's internal policies.
- Respond in an appropriate and timely manner to concerns reported.
- Develop and implement effective procedures for recording and responding to incidents and accidents.
- Develop and implement effective procedures for recording and reporting to the relevant local authority Multi-Agency Safeguarding Hub (MASH) any allegations or suspicions of harm or abuse.
- Promote the welfare and wellbeing of children at risk during and within KidsAid's services, including in the planning of those services.
- Always maintain a proficient level of safer working practices to minimise the risk to children that encounter Trustees, staff, volunteers, and partner agencies.

Scope and Definitions

This Safeguarding and Child Protection Policy applies to all individuals involved in the delivery, governance, or support of KidsAid services for children and young people at risk. This includes members of the Board of Trustees, employees, therapists, volunteers, contractors, and partner agencies. All

personnel are required to maintain safe working practices and actively promote a safeguarding culture at all times when working with, supporting, or coming into contact with children and young people at risk.

For the purposes of this policy, the term “personnel” is used to provide clarity and consistency across all roles within KidsAid.

“Personnel” refers to any individual acting on behalf of KidsAid in any capacity, whether paid or unpaid, including trustees, the CEO, members of the Senior Leadership Team, managers, employees, therapists, volunteers, contractors, agency workers, students, and any other person engaged by or representing KidsAid.

For the purposes of this policy, the term “children” also includes “young people” and “young persons.” The phrase “children and young people at risk” refers to:

A) Any person under the age of 18.
B) Any person who may be unable to care for or protect themselves from harm, abuse, exploitation, or neglect due to their circumstances or vulnerabilities, including, but not limited to:

- Mental health difficulties or illness.
- Physical, learning, or sensory disabilities.
- Frailty, illness, or temporary incapacity.
- Substance misuse or alcohol dependency.
- Any other circumstance that may increase vulnerability to harm or exploitation.

The term “parents” is used in the broadest sense and includes parents, carers, guardians, and any adult with parental responsibility for a child or young person.

Within the context of this policy, “Child Protection” refers to action taken to protect a child or young person who is suffering, or is likely to suffer, significant harm. This includes situations where a child or young person may be at immediate risk of abuse, neglect, exploitation, or harm, including circumstances in which returning home following a disclosure may place them at further risk.

“Safeguarding” refers to the broader responsibility to promote and protect the safety, welfare, health, and wellbeing of children and young people at risk, and to take appropriate action to prevent harm, abuse, neglect, or exploitation.

1. Safer Recruitment and DBS Checks

Criminal record disclosures (Disclosure and Barring Service – DBS checks) are undertaken for all KidsAid personnel as part of the safer recruitment process.

A DBS check provides a snapshot of an individual’s criminal record status at the time the certificate is issued. It does not guarantee that an individual has no relevant convictions or concerns beyond that date.

Risk assessments are undertaken for all KidsAid roles and job descriptions to determine the level of contact with children and young people, including whether the role involves regular and/or substantial unsupervised contact. The appropriate level of DBS check is required in line with the identified level of risk and applicable legislation and guidance.

All applicants are required to complete a standard application form as part of the recruitment process. This enables KidsAid to obtain relevant information about an applicant's qualifications, employment history, skills, and experience, and to assess their suitability for the role applied for.

Where applicants are shortlisted for interview, structured value-based or behaviourally focused interview questions ("Warner-style" questions) are used to explore applicants' attitudes, values, and motivations in relation to working with children, young people, and families. Following the findings of the Lord Warner report *Choosing with Care* (1992) on safeguarding in residential care settings, Warner-style interviewing has become recognised as part of safer recruitment practice. These approaches support the identification of individuals who are suitable to work in roles involving contact with vulnerable children and young people.

When roles are advertised, applicants are informed where an enhanced DBS check is required. Where appropriate, successful applicants are required to subscribe to the DBS Update Service to enable ongoing status checks. This helps ensure that any relevant changes to an individual's criminal record status can be monitored in line with safeguarding requirements.

Further information about the Disclosure and Barring Service can be found on the official DBS website.

2. Recognising Abuse and Safeguarding Concerns

Child abuse and safeguarding concerns can be complex and are not always easy to identify, even for experienced practitioners. All personnel must remain alert to potential indicators of harm and understand their responsibility to act on any concern; however small it may seem.

Personnel working for KidsAid (whether in a paid or voluntary capacity) are not expected to be experts in identifying abuse. However, they do have a responsibility to act if they have concerns about the behaviour of any adult or child towards a child or young person.

Any concerns must be reported without delay to the Designated Safeguarding Lead (DSL) or Designated Safeguarding Officer(s) (DSO(s)).

2.1 Definitions of Abuse and Safeguarding Risks

In this policy, abuse covers physical, emotional, sexual and mental abuse, including bullying or grooming. This includes any abuse that occurs online, on social media, by email, or text messaging.

This policy also covers:

- Child-on-child abuse.
- Honour-based Abuse (HBA), including Female Genital Mutilation (FGM) and Forced Marriage.
- Child Sexual Exploitation (CSE).
- County Lines.
- Child Trafficking.
- Radicalisation.

These forms of abuse may occur in both physical and online environments and may overlap or co-exist.

2.2 Social Media and Online Safeguarding

Children and young people do not usually use personal devices whilst in KidsAid care. However, there are some cases where the use of technology can support engagement and therapeutic interaction, for example where a child has a learning disability. In such circumstances, appropriate consent is obtained from the child (where appropriate) and their parent or "appropriate adult."

KidsAid actively seeks to identify and respond to any concerns relating to online harm, including online abuse, grooming, exploitation, or bullying, in the same way as any other safeguarding concern.

2.3 Child-on-Child Abuse

"Child-on-child abuse is any form of physical, sexual, emotional and financial abuse, and coercive control, exercised between children, and within children's relationships (both intimate and non-intimate), friendships and wider peer associations." (Firmin, C., 2017, *Abuse between Young People: A Contextual Account*).

Child-on-child abuse can occur in a range of settings and is often hidden. It may take place online or away from therapy or care environments. As such, training and awareness are essential to support early identification and appropriate response.

All children and young people may be capable of harmful behaviour towards others. This may include, but is not limited to:

- Bullying (including cyberbullying).
- Physical abuse (e.g. hitting, kicking, shaking, biting, hair pulling).
- Youth and serious youth violence.
- Sexual violence and sexual assault.
- Sexual harassment, including online sexual harassment.
- Upskirting.
- Coercion into sexual activity without consent.
- Sharing of nudes or semi-nudes (consensual or non-consensual).
- Sexting (youth-produced sexual imagery).
- Initiation/hazing rituals.

- Harmful sexual behaviour.
- Relationship abuse / teenage domestic abuse.
- Child Sexual Exploitation.
- Prejudice-based violence.

2.4 Honour-Based Abuse (HBA)

HBA encompasses criminal acts undertaken to protect or defend perceived family or community "honour." This includes Female Genital Mutilation (FGM), Forced Marriage, and other harmful practices such as breast ironing. All are illegal in the United Kingdom and must be reported to the police where there is concern or suspicion.

Female Genital Mutilation (FGM)

FGM refers to the practice of partially or totally removing the external female genitalia for non-medical reasons. It is illegal in the UK.

If FGM is suspected or disclosed, it must be reported immediately to the police and a Record of Concern completed.

FGM may also be referred to by other names, including:

- Female circumcision.
- Cutting.
- Sunna.
- Gudniin.
- Halalays.
- Tahur.
- Megrez.
- Khitan.

Possible indicators of FGM include:

- Difficulty walking, sitting, or standing.
- Spending longer in the bathroom or toilet.
- Emotional withdrawal, anxiety, or depression.
- Behaviour changes following absence from school or care.
- Reluctance to undergo medical examinations.
- Seeking help but being unable to disclose clearly.

Forced Marriage

Forced marriage is where one or both parties are coerced into marriage without free and full consent. This may involve physical, emotional, or psychological pressure or threats, and includes situations where an individual lacks capacity to provide informed consent.

2.5 Child Sexual Exploitation (CSE) and Child Trafficking

CSE involves children and young people being manipulated or groomed into sexual activity in exchange for gifts, money, drugs, or affection. Children may believe they are in a consensual relationship and may not recognise the exploitation.

Child trafficking involves children being recruited, transported, or moved and then exploited. This may include sexual exploitation, forced labour, criminal exploitation, domestic servitude, or other forms of abuse.

Children may be trafficked for:

- Sexual exploitation.
- Benefit fraud.
- Forced marriage.
- Domestic servitude.
- Forced labour.
- Criminal exploitation (e.g. drug supply, theft, cannabis cultivation).

Possible indicators may include:

- Limited freedom of movement.
- Poor or inappropriate accommodation.
- Unexplained gifts, money, or possessions.
- Reluctance or inability to provide personal information.
- Missing from education or care.
- Injuries or signs of neglect.
- Appearing under control or fearful of adults.
- Inconsistent or rehearsed stories.

If trafficking or exploitation is suspected, this must be reported immediately to the police and safeguarding procedures followed.

2.6 Radicalisation and Extremism (Prevent Duty)

Radicalisation is the process by which a child or young person is drawn into extremist ideologies. Extremism is defined as vocal or active opposition to fundamental British Values, including democracy,

the rule of law, individual liberty, and mutual respect for different faiths and beliefs (HM Government, 2011).

KidsAid has a duty under Section 26 of the Counter-Terrorism and Security Act (2015) to have due regard to the need to prevent people from being drawn into terrorism (Prevent Duty).

Possible indicators include:

- Social withdrawal or isolation.
- Sudden changes in behaviour or ideology.
- Increased secrecy, especially online.
- Expressing extremist or intolerant views.
- Increased anger or aggression.
- Refusal to engage in discussion about beliefs.

These signs do not necessarily indicate radicalisation and may reflect normal adolescent behaviour or other underlying issues. However, concerns must always be reported and considered appropriately.

2.7 County Lines

County Lines refers to the exploitation of children and young people by gangs to transport, store, or sell drugs, typically from urban areas to smaller towns or rural locations using dedicated mobile phone lines.

Children may be recruited due to vulnerability, coercion, or perceived status and may be exploited through violence, threats, debt bondage, or manipulation.

Exploitation may involve:

- Short-term rental properties or hotels.
- "Cuckooing" (taking over vulnerable people's homes).
- Movement across geographic areas for drug supply.

Children may become involved due to peer pressure, financial incentive, perceived protection, or exclusion from education.

3. Managing Safeguarding Concerns, Allegations and Information Sharing

Safeguarding concerns may arise in a variety of ways, including disclosures from children and young people, observations by staff, or information shared by third parties. All concerns must be treated seriously and responded to in line with this policy to ensure the safety and wellbeing of children and young people at risk.

This section sets out the procedures for responding to disclosures, managing allegations, escalating concerns, and sharing information appropriately. It is essential that all personnel follow these procedures

consistently and without delay and always seek guidance from the DSL or DSO(s) where there is any uncertainty.

3.1 Managing Disclosures from Children and Young People

If a child or young person discloses that they have been, or are being, abused (by another child or an adult), it is essential that they are supported appropriately and sensitively throughout the disclosure process.

All personnel must:

- Listen carefully and remain calm.
- Avoid asking leading questions or investigating the concern.
- Reassure the child that they have done the right thing in speaking up.
- Explain that confidentiality cannot be guaranteed and that the information must be shared with appropriate safeguarding professionals in order to keep them and others safe.
- Inform the child that the concern will be reported to the DSL or DSO(s).

All information must be recorded immediately and accurately using the safeguarding recording system (e.g. MyConcern) and must reflect the child's exact words wherever possible.

Where there is an immediate risk of harm or an emergency situation, the police must be contacted via 999 without delay.

3.2 Managing Allegations Against Children, Young People or Adults

Where a safeguarding concern or allegation is raised by a third party (including KidsAid personnel, parents, carers, or partner agencies) regarding a child or young person in KidsAid's care, this must be treated seriously and acted upon promptly.

The DSL or DSO(s) will:

- Ensure the child or young person who may have been harmed is offered appropriate support.
- Ensure that appropriate internal communication is made via safeguarding systems.
- Where appropriate, facilitate referrals to external agencies including Children's Social Care, the Police, MARAC, MAPPA, or other relevant safeguarding bodies.
- Ensure that the child or young person who is alleged to have caused harm is also supported appropriately within their therapeutic or care setting.
- Undertake a proportionate, fair, and consistent risk assessment to manage ongoing safety for all children involved.

All actions and decisions will be fully recorded in a contemporaneous safeguarding record.

3.3 Safeguarding Decision-Making and Escalation

All safeguarding concerns must be reported to the DSL or DSO(s) without delay. The DSL/DSO(s) are responsible for:

- Assessing the level of risk and urgency.
- Determining whether a referral to external safeguarding agencies is required.
- Initiating referrals to MASH or equivalent local safeguarding structures.
- Escalating concerns to the police or emergency services where appropriate.
- Ensuring that appropriate safeguarding actions are taken in a timely and coordinated manner.

Where concerns meet the threshold of significant harm or immediate risk, action will be taken urgently and without delay.

3.4 Involving Children, Parents and Carers

KidsAid is committed to working in partnership with parents and carers wherever it is safe and appropriate to do so.

In most circumstances, concerns will be discussed with parents or carers to support clarity and collaborative safeguarding responses. Wherever possible, decisions will be made in agreement with the child or young person and their parent or carer.

However, there are situations where it may not be appropriate to inform parents or carers, particularly where:

- Doing so may place the child or young person at increased risk of harm.
- A parent or carer is suspected of being involved in the abuse or neglect.
- It may compromise a safeguarding investigation or criminal enquiry.
- The child is at immediate risk of significant harm.

In cases of suspected abuse within the home, concerns must be reported immediately to the DSL/DSO(s), who will determine the appropriate next steps and referral pathway.
Where there is a risk of significant harm, safeguarding concerns must be treated as urgent and escalated the same day.

Failure to obtain parental agreement must never delay a safeguarding referral where a child or young person may be at risk.

All decisions regarding parental involvement or non-involvement must be clearly recorded, including the rationale for the decision.

3.5 Confidentiality and Information Sharing

Confidentiality is an important principle in safeguarding; however, the safety and welfare of children and young people takes precedence over confidentiality where there are concerns about harm.

Effective safeguarding requires timely and appropriate information sharing between professionals and agencies. Poor information sharing has repeatedly been identified in safeguarding reviews as a factor contributing to missed opportunities to protect children.

Information sharing is governed by the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. These do not prevent the sharing of information where there is a lawful basis to do so for safeguarding purposes.

The Caldicott Principles (updated 2017) support this approach. Principle Seven states that the duty to share information can be as important as the duty to protect confidentiality.

All personnel must consider:

- Whether there is a lawful basis to share information.
- Whether sharing is necessary to protect a child or young person.
- Whether failure to share may place someone at risk of harm.

A useful principle is: “Is it safe for me NOT to share this information?”

Information must be shared only with those who need to know, and all decisions to share information must be recorded, including:

- What information was shared.
- Who it was shared with.
- The rationale for sharing.

3.6 Data Protection and Record Keeping

All safeguarding records, including referrals, case notes, emails, telephone records, and MyConcern entries, must be:

- Recorded accurately and promptly.
- Stored securely in line with data protection requirements.
- Accessed only by authorised personnel (typically DSL/DSO(s) or delegated safeguarding leads).

Safeguarding records will be retained in accordance with relevant retention schedules and legal requirements.

Where safeguarding concerns relate to staff members, information will be securely held within personnel files and managed appropriately.

KidsAid complies with UK GDPR requirements and applies appropriate technical and organisational measures to protect personal data against unauthorised access, alteration, disclosure, or destruction.

Safeguarding records are subject to audit and supervision processes to ensure quality, consistency, and compliance.

4. Police Requests and Court Orders

KidsAid may receive requests for access to therapy notes, safeguarding records, or other personal data from the police, legal representatives, or through court orders. These requests must be managed in accordance with the UK GDPR, the Data Protection Act 2018, and any other relevant legal frameworks, ensuring an appropriate balance between confidentiality, data protection, and lawful disclosure.

All such requests must be directed to and managed by the DSL and must not be responded to informally or directly by KidsAid personnel, unless expressly authorised to do so by the DSL.

4.1 Lawful Basis for Disclosure

Personal data, including therapy notes, may only be shared where there is a valid lawful basis under UK GDPR. This may include:

- Legal obligation: where disclosure is required by law, including compliance with a valid court order or statutory request from law enforcement.
- Vital interests: where disclosure is necessary to protect the life or safety of a child or another individual.
- Public interest / safeguarding purposes: where disclosure is necessary for the prevention or detection of crime or safeguarding of children and young people.

Where a legally binding court order is in place, KidsAid is required to comply with the scope of that order.

4.2 Consent and Parental Responsibility

Under UK GDPR, consent is not always required where a lawful basis for disclosure exists.
Where consent is relevant:

- Consent is normally sought from a parent or legal guardian for children.
- A child may provide consent where they are considered competent to understand the nature and consequences of disclosure (depending on age and capacity).
- However, consent may be overridden where disclosure is required by law or is necessary for safeguarding or legal proceedings.

4.3 Assessing and Verifying Requests

All requests for information must be:

- Verified for authenticity and legal validity.
- Reviewed to confirm scope and proportionality.
- Assessed by the DSL.

Where appropriate, legal advice may be sought before disclosure is made, particularly in complex or unclear cases.

4.4 Data Minimisation and Relevance

Only information that is strictly necessary to meet the purpose of the request will be disclosed. KidsAid will:

- Limit disclosure to relevant and proportionate information.
- Avoid sharing unnecessary or unrelated clinical detail.
- Redact third-party information or sensitive content where appropriate and lawful to do so.

4.5 Confidentiality and Secure Transfer

All disclosures must be handled securely to maintain confidentiality and data protection standards. KidsAid will ensure:

- Secure transfer methods are used (e.g. encrypted systems such as Egress or equivalent secure platforms)
- Information is not sent via unsecured email or informal channels
- Access is restricted to authorised recipients only

4.6 Rights of the Child or Young Person

Where appropriate and depending on age and understanding, children and young people should be informed about:

- The nature of the request.
- How their information will be used.
- What information may be shared.

However, information may be withheld where informing the individual would risk:

- Compromising an investigation.
- Placing a child or others at risk of harm.
- Interfering with legal or safeguarding processes.

4.7 Notification of Parents or Carers

Parents or carers will normally be informed of disclosure requests unless:

- Doing so may place the child at risk of harm.
- The request forms part of an active investigation where notification would be inappropriate.
- Legal or safeguarding guidance advises against disclosure.

All decisions not to inform parents or carers must be recorded with clear rationale.

4.8 Role of the DSL and Decision-Making Process

The DSL is responsible for:

- Verifying the legitimacy of all requests.
- Ensuring a lawful basis for disclosure is established.
- Overseeing data minimisation and proportionality.
- Authorising release of information.
- Ensuring secure transmission of data.
- Seeking legal advice where necessary.

If there is any uncertainty regarding disclosure, legal advice must be obtained before any information is shared.

4.9 Data Retention and Record Keeping

A record must be maintained of:

- The request received.
- The legal basis for disclosure.
- What information was shared.
- Who authorised the disclosure.
- How and when information was transmitted.

All records must be stored securely in line with KidsAid's data protection and retention policies.

5. Implementation and Monitoring

KidsAid is committed to ensuring that safeguarding is embedded across all areas of its work and is actively implemented, monitored, and reviewed.

5.1 Governance and Key Roles

DSL and Clinical Lead – Carla Mangan.
DSO(s) – Natasha Williams and Lynne Pritchard.
CEO – Rebecca Caswell-Fox.
Safeguarding Trustee – Tina Welford.

The DSL holds delegated responsibility from the CEO and Board of Trustees for safeguarding leadership and operational safeguarding oversight within KidsAid.

The DSL is responsible for:

- Providing organisational leadership for safeguarding practice and ensuring effective implementation of safeguarding policies and procedures.
- Acting as the organisation's designated safeguarding lead for the coordination and oversight of all safeguarding concerns.
- Ensuring safeguarding concerns are appropriately managed, escalated, and recorded in line with statutory guidance and internal procedures.
- Providing assurance to the CEO and Board of Trustees on safeguarding effectiveness, risks, and compliance.
- Coordinating safeguarding activity across the organisation and ensuring appropriate systems, processes, and governance arrangements are in place.
- Acting as the lead safeguarding advisor to staff and senior leaders on safeguarding matters.
- Liaising with external safeguarding partners, including Local Authority Safeguarding Children Partnerships, Local Authority Designated Officer (LADO) services, Children's Social Care, and the Police, as required.
- Ensuring safeguarding policies, procedures, and systems are reviewed and updated in line with statutory guidance and organisational requirements.
- Providing safeguarding reports to the Board of Trustees, including annual safeguarding assurance reporting.
- Ensuring safeguarding training requirements, safer recruitment standards, and DBS compliance are implemented and monitored across the organisation.

The DSO(s) are responsible for:

- Acting as the first point of contact in the absence of the DSL.
- Supporting the receipt, recording, and escalation of safeguarding concerns.
- Assisting in the coordination and management of safeguarding responses where required.

The CEO is responsible for:

- Ensuring safeguarding training is appropriately resourced and delivered in line with role requirements.
- Promoting and embedding a culture of safeguarding across the organisation.
- Ensuring organisational compliance with safeguarding policies and procedures.

The Safeguarding Trustee is responsible for:

- Providing strategic oversight of safeguarding practice.
- Ensuring safeguarding concerns that meet the threshold for external reporting are escalated appropriately, including to the Charity Commission where required.
- Presenting and reviewing the annual safeguarding report at Trustee Board level.
- Supporting the Board of Trustees in fulfilling its collective safeguarding responsibilities.

5.2 Safeguarding Responsibilities of KidsAid Personnel

All KidsAid personnel are responsible for identifying and escalating safeguarding concerns to the DSL or DSO(s) without delay, and for:

- Acting in accordance with this Child Protection and Safeguarding Policy.
- Promoting the welfare and safety of children and young people at all times.
- Reporting concerns promptly to the DSL or DSO(s).
- Acting in a way that minimises the risk of harm and reduces the likelihood of allegations.
- Sharing relevant safeguarding expectations with partner organisations where appropriate.
- Cooperating fully with safeguarding procedures and investigations.

5.3 Monitoring, Audit and Compliance

Safeguarding practice and compliance are monitored through:

- Safeguarding audits.
- Case reviews and supervision.
- One-to-one meetings and annual appraisals.
- Staff and therapist feedback.
- Spot checks and ad-hoc monitoring.

An annual safeguarding report is presented to the Board of Trustees, including:

- Safeguarding activity and concerns.
- Outcomes of any serious case reviews or learning reviews.

- Training compliance data.
- Audit findings.
- Progress against safeguarding action plans.

5.4 Communication and Implementation

Effective communication is essential to ensure this policy is fully implemented across KidsAid.

Responsibility for communication lies with:

- The Board of Trustees
- The CEO
- The DSL.

Internal Communication

Safeguarding policy awareness is ensured through:

- Induction training.
- Mandatory safeguarding training.
- Supervision and line management discussions.
- Ongoing professional development.

External Communication

KidsAid personnel must ensure that safeguarding expectations are communicated appropriately to partner organisations, where relevant.

5.5 External Safeguarding Advice and Emergency Procedures

If KidsAid personnel are unable to contact the DSL or DSO(s) and are concerned about a child's immediate safety or welfare, they must seek external safeguarding advice without delay.

Advice or referrals may be made to:

- The LADO or equivalent safeguarding lead for the relevant local authority.
- MASH for the area in which the child resides.

Contact details for local safeguarding teams are available via NHS safeguarding resources: https://safeguarding-guide.nhs.uk/contacts/

Where internal safeguarding escalation is not possible, a Record of Concern may be referred directly to MASH in line with local safeguarding procedures. Referrals may be made by telephone or secure email where appropriate.

The DSL or DSO(s) must be informed as soon as reasonably practicable afterwards.

If a child is believed to be at immediate risk of harm or in immediate danger, the emergency services must be contacted directly by calling 999.

6. Misuse of the Procedure

Malicious complaints and/or serious and/or persistent abuse of these safeguarding policies and procedures will not be tolerated and will be dealt with through KidsAid's disciplinary process.

7. Equality and Inclusivity

KidsAid safeguarding practice is inclusive and non-discriminatory and is delivered in line with the Equality Act 2010. All children, young people, adults at risk, and their families have equal right to protection from harm, abuse, neglect, and exploitation, regardless of background or protected characteristics.

8. Raising Concerns and Complaints

8.1 Whistleblowing

Whistleblowing concerns relating to safeguarding should be raised with the DSL, or where appropriate, escalated to the CEO.

Concerns will be considered and managed in line with KidsAid's internal whistleblowing procedures where appropriate.

Where concerns have not been resolved internally, and where there is serious risk, they may be escalated to:

- Protect (independent whistleblowing advice service).
- The Charity Commission.
- Relevant professional regulators.
- The Information Commissioner's Office (ICO).

Where a whistleblowing concern includes a safeguarding concern or an allegation against personnel, it will be immediately referred to the DSL and managed under safeguarding procedures and the Managing Safeguarding Allegations Against Personnel Procedure.

8.2 Complaints

Complaints relating our safeguarding may be raised with the DSL, DSO(s) or, if more appropriate, the CEO, by any individual connected with KidsAid, including children, young people, families, carers, KidsAid personnel and external agencies.

In line with the KidsAid Complaints Policy and Procedure, all complaints will be:

- Recorded in accordance with complaints procedures.
- Reviewed and responded to within policy timescales.
- Handled fairly, consistently, and confidentially.
- Used to support service improvement and learning.

Where a complaint includes a safeguarding concern or an allegation against personnel, it will be immediately escalated to the DSL and managed under safeguarding procedures and the Managing Safeguarding Allegations Against Personnel Procedure.

9. Policy Review

This Child Protection and Safeguarding Policy will be reviewed annually, or sooner where required due to changes in legislation, guidance, or operational practice arising from incidents or concerns.

The leadership team will monitor the effectiveness of this policy and report to the Board of Trustees in line with the Charity's governance framework.

10. Contacts

Role	Name	Email
DSL / Clinical Lead	Carla Mangan	carla@kidsaid.org.uk
DSO / Placement Manager	Natasha Williams	natasha@kidsaid.org.uk
DSO / Clinical Administrator	Lynne Pritchard	lynnep@kidsaid.org.uk
CEO	Rebecca Caswell-Fox	rebecca@kidsaid.org.uk

Contact details for local safeguarding teams are available via NHS safeguarding resources: https://safeguarding-guide.nhs.uk/contacts/

Appendix A.

SAFEGUARDING PROCESS FLOWCHART

1. • Child identified as 'at risk' or makes a disclosure. **If it is an emergency and you think that a child may be in immediate danger, you must contact the emergency services directly by calling 999.**

2. • Record the safeguarding concern on My Concern on the child's profile and complete body map where appropriate and as soon as possible after the concern/disclosure arose.

3. • Record the concern 'verbatim' (in the persons own words), the time, date and where the disclosure was made and to who.

4. • If the Designated Safeguarding Lead is unavailable, contact the Designated Safeguarding Officers. If the Designated Safeguarding Officers are unavailabe, contact the Designated Officer (formerly LADO) for Northamptonshire, or the appropriate local authority for the area in which the child resides. Contact details for all local authority safeguarding teams can be found on the NHS Safeguarding Guide App or under the 'Contacts' section of the NHS Safeguarding website: https://safeguarding-guide.nhs.uk/contacts/

5. • The Designated Safeguarding Lead or Designated Safeguarding Officers will action appropriate measures regarding the safeguarding concern where necessary via My Concern. This may include 'tasking' the therapist with contacting the school Designated Safeguarding Lead/family/carer/social worker.

6. • Safeguarding concerns are on a need to know basis. You will be informed if necessary of the actions carried out by the Designed Safeguarding Lead or Designated Safeguarding Officers.

Only to be used if My Concern is unavailable.

RECORDING FORM FOR SAFEGUARDING CONCERNS

Staff, therapists, volunteers, and regular visitors are required to complete this form and pass it to Designated Safeguarding Lead or Designated Safeguarding Officers if they have a safeguarding concern.

KidsAid case No:	Your name and position in KidsAid:

NATURE OF CONCERN/DISCLOSURE
Please include where you were when the child made a disclosure, what you saw, who else was there, what did the child say or do and what you said. Time & date of incident:
To whom are you passing this information? Name: Position:
Have education been informed?
Your signature: **Time form completed:** **Date:**

Time form received by Designated Safeguarding Lead or Designated Safeguarding Officers:

Action taken by Designated Safeguarding Lead or Designated Safeguarding Officers:

Is a referral required to:

MASH	Police	CAMHS	Other Services
☐	☐	☐	☐

If no, state reason:

Date and time referral to external agencies was made:

Parents informed? Yes / No (If no, state reason)

Any further action agreed:

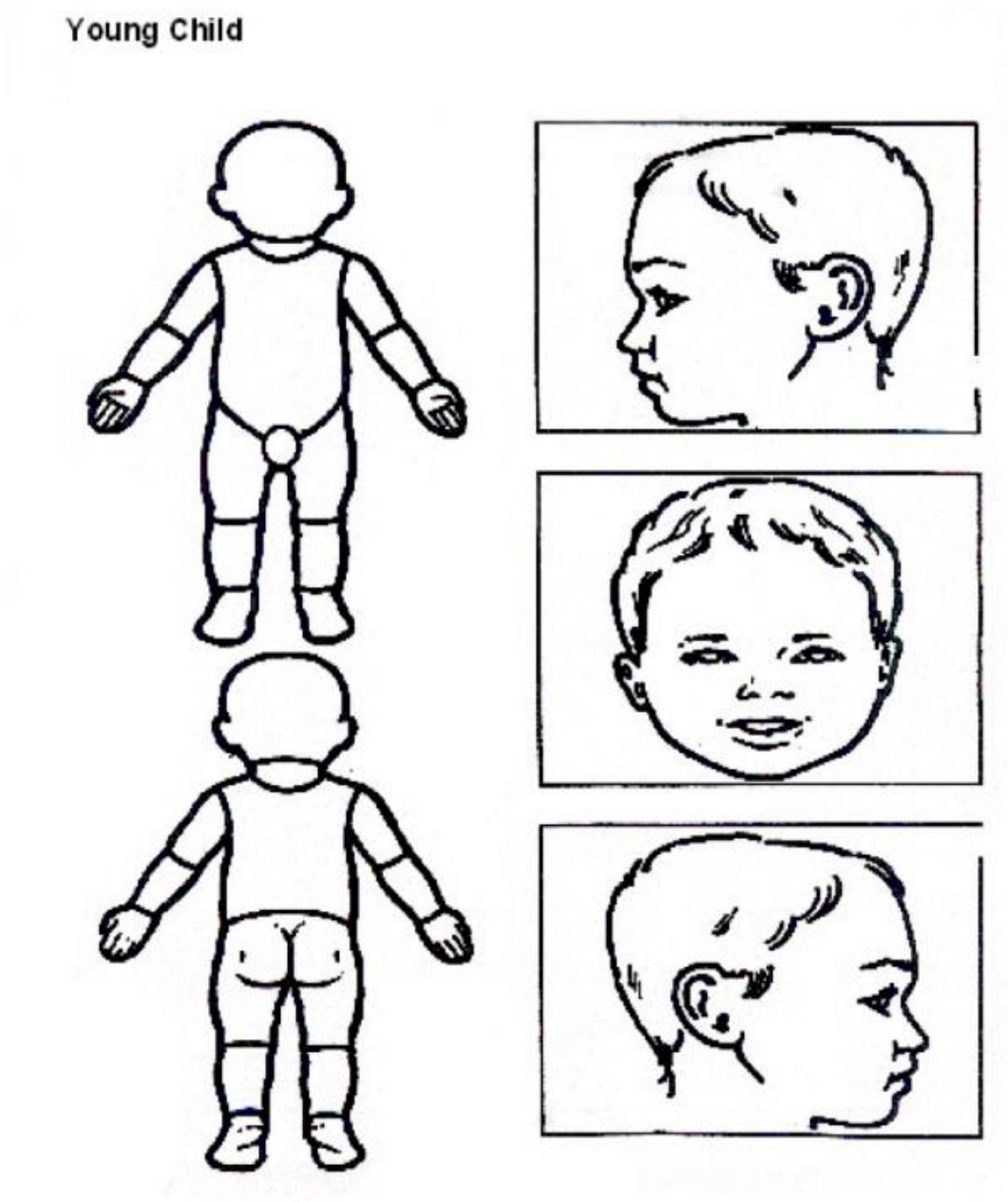
Full name:

Designated Safeguarding Lead/Officer Signature:

Date:

Was there an injury? Yes / No Did you see it? Yes / No
Describe the injury:
Have you filled in a body plan to show where the injury is and its approximate size? Yes / No
Was anyone else with you? If yes, who?
Has this happened before? Did you report the previous incident?

SAFEGUARDING CONCERN: BODY INJURY



Older Child