



Safeguarding Children Policy and Procedure

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Policy Lead	Registered Manager
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Signed:	Samantha Norgate

Introduction

The aim of this policy is to ensure that all employees of Banquo Limited understand their responsibilities in relation to safeguarding. To achieve this, it is essential that all employees are fully aware of what constitutes abuse, as well as the potential indicators that abuse may be occurring.

Employees must also be fully aware of how to report concerns, recognise the importance of doing so immediately and understand the procedures through which to do this. This policy provides the information employees will require to fulfil their duties and obligations in respect to safeguarding service users.

All employees are expected to raise any concerns regarding the possibility of abuse at the earliest opportunity. Banquo Limited encourages and fosters a culture of open and honest enquiry regarding any of your concerns and employees should feel supported in being able to share their concerns.

Children may be vulnerable to neglect and abuse or exploitation from within their family and from individuals they come across in their day-to-day lives. A child centred approach is fundamental to safeguarding and promoting the welfare of every child. A child centred approach means keeping in focus when making decisions about their lives and working in partnership with them and their families. All practitioners should follow the principles of the Children Acts 1989 and 2004 that state the welfare of children is paramount and that they are best looked after within their families, with their parents playing a full part in their lives, unless compulsory intervention in family life is necessary.

Policy Statement

Banquo Limited is committed to ensuring individual rights are protected and promoted through eliminating all forms of abuse without discrimination. This includes:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

Scope

This policy and the procedures apply to all employees, including workers and independent sub-contractors.

Banquo Limited are required to have a Safeguarding Lead responsible for guiding and supporting all employees when dealing with safeguarding children. The Safeguarding Lead for Banquo Limited is Samantha Norgate.

Procedures

As a part of our commitment Banquo Limited will:

- Prevent and stop abuse or neglect wherever possible.
- Protect, maintain, and uphold the human rights of children and young persons at risk.
- Eliminate discrimination.
- Take steps to deal with suspected abuse, bullying or exploitation of any kind whenever or wherever it may be found.
- Provide support, training, and protection for everyone.

To meet our commitment, Banquo Limited will:

- Ensure that everyone that works with us, for us or on our behalf is familiar with this policy and procedures and has access to the documents.
- Monitor the implementation of this policy and procedures and take any steps that are required to improve our practices.
- Ensure that effective procedures are in place for responding to complaints, concerns, and allegations of suspected or actual abuse.
- Ensure that there are appropriate risk assessments in place.
- Ensure safe recruitment procedures including id checks, references and DBS checks are followed for every position we recruit.
- All employees that work for Banquo Limited now or in the future, in any capacity, will be trained to level 1 in safeguarding, with care staff employees being trained to level 2 and the Safeguarding Lead being trained to level 3.

Roles And Responsibilities

At Banquo Limited, the person designated to take responsibility for safeguarding children is the Registered Manager, Samantha Norgate, who is available to all staff for advice and guidance. The Safeguarding Lead will also take lead on reporting to the local authority of where the vulnerable child lives.

Everyone in the organisation has responsibilities in relation to safeguarding, as set out in this policy.

Who To Contact

Banquo Limited operates within Islington local authority and surrounding area jurisdictions. If an employee suspects a potential safeguarding issue has been committed against a child, it is their responsibility to liaise with the local authority safeguarding team/safeguarding lead immediately.

The Safeguarding Lead for Banquo Limited is the Registered Manager – Samantha Norgate

Contact details for the safeguarding team can be found below:

Web link - [Safeguarding | Islington Council](#)

Telephone Number: 0207 527 7400.

Emergency Duty Team: 0207 527 7400

A referral MUST be made immediately to the local authority safeguarding team based on where the child at risk is located. The NHS Safeguarding app will be used to achieve this, details for downloading the app can be found here [NHS England » NHS England Safeguarding app](#)

Emergency services support is to be sought if risk is imminent to a child or if an individual assessing is unsure of the risk to a child.

Children With Disabilities

Any child with a disability is, by definition, a 'child in need' under Section 17 of the Children Act 1989. The Disability Discrimination Act 2005 (DDA) and the Equality Act 2010 define a disabled person as someone who has "a physical or mental impairment which has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities".

The Equality Act 2010 makes it unlawful to discriminate against a disabled person in relation to the provision of services. This includes making a service more difficult for a disabled person to access or providing them with a different standard of service.

Research suggests that children with a disability may be more vulnerable to significant harm through physical, sexual, emotional abuse and/or neglect than children who do not have a disability. Disabled children may be especially vulnerable to abuse for several reasons (e.g., they may be at increased likelihood of being socially isolated with fewer outside contacts than non-disabled children). Where there are concerns about the welfare of a disabled child, they should be acted upon in the same way as with any other child.

Overview Of Decision-Making Tool

The below sets out action to take depending on the abuse concerned:

Report: If the child/s have been seriously harmed or at risk of serious harm because of actions, or omissions, deliberate or unintentional of others, then report as a safeguarding concern to the local authority named within this policy. If there is indication that a criminal act has occurred, and the matter is urgent, contact the Police.

Consult: Moderate risk and or moderate care and support needs. Concerns at this point may be reportable and must be considered on a case by case basis. The child's or parent/s views must be considered. Advice should be sought from the Safeguarding Lead or the Local Authority Children Safeguarding Team.

Resolve: Low risk or care and support needs where all actions to prevent abuse or protect a child from abuse are recorded. The child's needs are met through local support services accessed via appropriate referral routes. A level of concern that can be resolved through care management, complaints, staff training, case reviews, quality processes or contract management.

Types Of Abuse

Abuse is the violation of an individual's human and civil rights. Abuse can be self-inflicted or inflicted by another person or persons. In the context of safeguarding, it is used to refer to any knowing, intentional or negligent act by another that causes harm or a serious risk of harm to another. Types of abuse include:

Physical Abuse

Physical abuse that includes the deliberate hurting hitting, shaking, throwing, poisoning, drowning of a child who may present with:

- Frequent injuries.
- Unexplained or unusual fractures or broken bones.
- Unexplained:
 - Bruises or cuts.
 - Burns or scalds.
 - Bite marks.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional Abuse

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 a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- Age or developmentally inappropriate expectations being imposed on children.
- Interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- Children who are excessively withdrawn, fearful or anxious about doing something wrong
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder'.
- Parents or carers blaming their problems on their child.
- Parents or carers who humiliate their child (e.g., name-calling or making negative comparisons).
- Seeing or hearing the ill-treatment of another.
- Serious bullying (including cyber bullying), 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 (Working Together, 2018).

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. Sexual abuse, including physical and non-contact activities. Indicators may include:

- Displays of knowledge or interest in sexual acts inappropriate to age.
- Use of sexual language or have sexual knowledge unexpected in their age.
- Asking others to behave sexually or play sexual games.
- Physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections, or underage pregnancy.

Sexual exploitation for money, power, or status. Indicators may include:

- Unexplained gifts or new possessions.
- Children who associate with other young people known to be involved in exploitation.

- Older boyfriends or girlfriends.
- Sexually transmitted infections or pregnancy.
- Changes in emotional wellbeing.
- Misuse of drugs and/or alcohol.
- Go missing for periods of time and/or regularly return home late.
- Regularly miss school or education, or do not take part in education.

Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children (Working Together, 2018) It's worth highlighting that some children may be more vulnerable to abuse because of their characteristics or their history, e.g. care experience children, children from minority communities, disabled children, young carers and children who have previously been abused or subject to a child protection plan / on the child protection register.

Neglect

Neglect is a pattern of failing to provide for a child's basic needs and may include the following indicators:

- Homes that are dirty or unsafe.
- Left hungry and dirty.
- Inadequate clothing.
- Living in dangerous conditions (i.e., in the presence of drugs, alcohol or violence).
- Angry, aggressive, or self-harming behaviours.
- Failure to receive basic healthcare.
- Parents who fail to seek medical treatment when their children are ill or injured.

Domestic Abuse

Domestic Abuse is generally treated as falling under emotional abuse. The cross-government definition (2014) of domestic violence and abuse is as follows:

- Any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional.

Child Criminal Exploitation (CCE)

As set out in the Serious Violence Strategy, published by the Home Office, where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or the threat of

violence. The victim may have been criminally exploited even if the activity appears consensual. Child criminal exploitation does not always involve physical contact; it can also occur through the use of technology.

An example of CCE is County Lines: As set out in the Serious Violence Strategy, county lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more areas within the UK, using dedicated mobile phone lines or other form of 'deal line'. They are likely to exploit children and vulnerable younger person to move and store the drugs and money, and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

Child Sexual Exploitation (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.

Contextual safeguarding - Contextual safeguarding recognises that as young people grow and develop, they are influenced by a whole range of environments and people outside of their family. For example, in school or college, in the local community, in their peer groups or online. Children and young people may encounter risk in any of these environments. Sometimes the different contexts are inter-related and can mean that children and young people may encounter multiple risks. Contextual safeguarding looks at how we can best understand these risks, engage with children and young people and help to keep them safe.

Extremism And Prevent Duty

Any concerns about radicalisation and extremist views or behaviours in children and young people must be reported as a safeguarding concern. "Extremism goes beyond terrorism and includes people who target the vulnerable, including the young by seeking to sow division between communities on the basis of race, faith or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society. Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. We also regard calls for the death of members of our armed forces as extremist" (Working Together 2018).

Female Genital Mutilation (FGM)

Concerns that a child has been, or may be about to be, subjected to FGM, fall under this policy and must also be reported as a safeguarding concern. FGM is a collective term for a range of procedures which involve partial or total removal of the external female genitalia, or other injury to the female genitals for non-medical reasons. It is sometimes referred to as female circumcision, or female genital cutting. The practice is medically unnecessary, is extremely painful and has serious health consequences, both at the time when the mutilation is carried out, and in later life.

Forced Marriage

A forced marriage is where one or both people do not, or cannot, consent to the marriage and pressure or abuse is used to force them into the marriage. In England and Wales, it is also when anything is done to make someone marry before they turn 18, even if there is no pressure or abuse (Marriage and Civil Partnership (Minimum Age) Act 2022). The pressure put on people to marry against their will may include threats or physical/sexual violence and/or emotional or psychological abuse for example making someone feel they are bringing shame on their family. Forced Marriage disproportionately affects females, but people of all genders can be victims. In the England and Wales in 2023, 78% of cases that came to the awareness of the Forced marriage Unit involved female victims, 14% involved children aged 15 and under, and 16% aged 16 or 17. These procedures are aimed at dealing with forced marriage for a child / young person under 18 years of age.

Grooming

Grooming is when someone builds a relationship, trust and emotional connection with a child or young person so they can manipulate, exploit and abuse them. Children and young people who are groomed can be sexually abused, exploited or trafficked. Anybody can be a groomer, no matter their age, gender or race. Grooming can take place over a short or long period of time, from weeks to years. Groomers may also build a relationship with the young person's family or friends to make them seem trustworthy or authoritative.

Online Safety

The breadth of issues classified within online safety is considerable, but can be categorised into four areas of risk:

- **Content:** Being exposed to illegal, inappropriate or harmful content, for example: pornography, fake news, racism, misogyny, self-harm, suicide, anti-Semitism, radicalisation and extremism.
- **Contact:** Being subjected to harmful online interaction with other users; for example: peer to peer pressure, commercial advertising and adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes.

- **Conduct:** Personal online behaviour that increases the likelihood of, or causes, harm; for example, making, sending and receiving explicit images e.g. consensual and non-consensual sharing of nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying.
- **Commerce:** Risks such as online gambling, inappropriate advertising, phishing and or financial scams.

Child-On-Child Abuse

Child-on-child abuse is most likely to include, but may not be limited to:

- Bullying (including cyberbullying, prejudice-based and discriminatory bullying).
- Abuse in intimate personal relationships between children; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse).
- Sexual violence, such as rape, assault by penetration and sexual assault; (this may include an online element which facilitates, threatens and/or encourages sexual violence).
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.
- Consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery).
- Upskirting, which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.
- Initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

Self-Harm

Self-harm is a broad term that can be used to describe a variety of behaviours that lead to physical harm. These include self-cutting or scratching the skin, burning/branding with cigarettes/lighters, scalding, overdose of tablets or other toxins, tying ligatures around the neck, punching oneself or other surfaces, banging limbs/head and hair pulling (Mental Health Foundation, 2006). It may also include risk taking behaviours where the child / young person is careless for their own safety and there is a risk of physical harm. It also includes neglect of physical health for example young people with insulin dependent diabetes who intentionally miss insulin doses. Self-harm usually occurs in response to emotional distress.

Suicide / Suicide Ideation

The term 'suicide' means an act that is intended to end one's life. Suicidal ideations, often called suicidal thoughts or ideas, is a broad term used to describe a range of contemplations, wishes, and preoccupations with death and suicide (PubMed, 2021). These issues can be caused by many factors, including depression and mental illness, stress, financial problems, relationship breakdown, bereavement and abuse.

So-Called 'Honour'-Based Abuse

The term 'honour' crime or 'honour'-based abuse refers to an incident or crime involving violence, threats of violence, intimidation, coercion or abuse (including psychological, physical, sexual, financial or emotional abuse) which has or may have been committed to protect or defend the 'honour' of an individual, family and/or community for alleged or perceived breaches of the family and/or community's code of behaviour. It is estimated that around 76% of victims of 'honour' based abuse are female, but people of all genders are at risk.

Young Carers

A young carer is defined as a young person under the age of 18 who helps to look after a relative with a disability, illness, mental health condition, or drug or alcohol problem. This may involve young people doing extra jobs around the house, such as cooking, cleaning or helping someone get dressed and move around. It may also involve a young person providing a lot of physical help to a parent, brother or sister who is disabled or ill. Without appropriate support, young carers are a risk of having lower self-esteem and heightened anxiety, feeling isolated, being bullied, and being stressed by the responsibility.

Children Exposed To Extreme Ideology

Extremism is defined in the Counter Extremism Strategy 2015 as the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs.

Extremism goes beyond terrorism and includes people who target the vulnerable, including the young by seeking to sow division between communities on the basis of race, faith, or denomination; justify discrimination towards women and girls; persuade others that minorities are inferior; or argue against the primacy of democracy and the rule of law in our society.

Children and young people can be radicalised in different ways:

- They can be groomed either online or in person by people seeking to draw them into extremist activity. Older children or young people might be radicalised over the internet

or through the influence of their peer network – in this instance their parents might not know about this or feel powerless to stop their child's radicalisation.

- They can be groomed by family members who hold harmful, extreme beliefs, including parents/carers and siblings who live with the child and/or person(s) who live outside the family home but have an influence over the child's life.
- They can be exposed to violent, anti-social, extremist imagery, rhetoric and writings which can lead to the development of a distorted world view in which extremist ideology seems reasonable. In this way they are not being individually targeted but are the victims of propaganda which seeks to radicalise.

A common feature of radicalisation is that the child or young person does not recognise the exploitative nature of what is happening and does not see themselves as a victim of grooming or exploitation. The harm children and young people can experience ranges from a child adopting or complying with extreme views which limits their social interaction and full engagement with their education, to young children being taken to war zones and older children being groomed for involvement in violence.

Radicalisation And The Prevent Strategy

- Under Section 26 of the Counter-Terrorism Security Act 2015, healthcare professionals have a duty to have 'due regard to the need to prevent people from being drawn into terrorism'. The Prevent strategy aims to reduce the threat of terrorism by preventing people from becoming terrorists or supporting terrorism and has three strategic objectives:
- Respond to the ideological challenge of terrorism and the threat we face from those who promote it.
- Prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support.
- Work with sectors and institutions where there are risks of radicalisation that we need to address.

Banquo Limited will ensure that all employees understand and can comply with this duty through the implementation of mandatory prevention of radicalisation training. Employees will be expected to demonstrate:

- That they know what measures are available to prevent people from becoming drawn into terrorism.
- How to challenge the extremist ideology associated with terrorism.
- How to understand obtain support for individuals who may be being exploited by radicalising influences.

As a part of this strategy employees are also responsible for being:

- Aware of their professional responsibilities in relation to the safeguarding of children.
- Familiar with Banquo Limited protocols, policies, and procedures.
- Aware of who to contact to discuss any safeguarding concerns.

- Aware of the processes and support available following raising a concern.
- Aware of the current patient practice for confidentiality (***See the confidentiality Policy and Procedure for further information***).

Changes to an individual's behaviour indicative of potential radicalisation should be assessed for their reliability and significance by considering any:

- Parental/family reports of unusual changes in behaviour, friendships or actions and requests for assistance.
- Service users/ employees accessing extremist material online.
- Use of extremist or hate terms to exclude others or incite violence.

If employees are concerned that an at-risk individual is being exploited, they should raise their concern with the Registered Manager and/or the Safeguarding Lead who will then consider referral to the relevant Local Authority or Regional Prevent Coordinator. Factors that can contribute toward an individual's vulnerability and subsequent risk of radicalisation include:

- Identity crisis: radicalisers can exploit adolescents/at-risk children who may feel uncomfortable with their place in society and disconnected from their family and/or heritage by providing a sense of purpose or feelings of belonging.
- Personal crisis: can result in a sense of isolation, making an individual vulnerable to radicalisation.
- Personal circumstances: individuals who feel their aspirations are likely to be undermined may translate into a generalised rejection of civic life and an adoption of violence as a symbolic act.
- Criminality: where an at-risk individual becomes involved in a group that engages in criminal activity are more likely to be drawn into terrorist related activity.
- Grievances: the following may play an important part in the early indoctrination of at-risk individuals:
 - A misconception and/or rejection of UK foreign policy and Procedures.
 - Distrust of western media reporting.
 - Perceptions that UK government policy is discriminatory (e.g., counter-terrorist legislation).

Other factors:

- Ideology and politics.
- Provocation and anger (grievance).
- Need for protection.
- Seeking excitement and action.
- Fascination with violence, weapons, and uniforms.
- Youth rebellion.
- Seeking family and father substitutes.
- Seeking friends and community.
- Seeking status and identity.

If You Suspect A Child Is At Risk Of Abuse

Where a child believed to be at risk of abuse is encountered or if they disclose or discuss potential abuse with you, it should be recognised that they may be describing abuse, albeit not explicitly. As a part of the initial assessment, you should try to establish the basic facts and question any unusual behaviours, speaking to the child alone if appropriate. If there is concern that a child is being abused or if they report abuse and/or neglect you should:

- Listen.
- Take their allegation seriously.
- Reassure them that action will be taken to keep them safe.

The Safeguarding Lead must be informed immediately of any safeguarding concerns and further action will depend upon the circumstances of the case, the seriousness of the child's allegation and the local multi-agency safeguarding arrangements in place. If the child is in immediate danger or is at risk of harm a referral should be made to children's social care and/or the police.

The child should be kept informed of any action being taken, but, although it is important to maintain confidentiality, no promises should be made to keep the information a secret as this may need to be shared for their protection. It is then the role of social workers and/or the police to investigate cases and make a judgement on whether there should be a statutory intervention and/or a criminal investigation. If following this, there are then further signs of abuse and neglect, this should be reported and referred again. Following referral to a social worker a response should be received within one working day to confirm what further action may be needed.

Any safeguarding decisions should form a child centred approach, with the aim of keeping the child in focus and, where possible, working in partnership with them and their families.

Advice and assistance can also be sought from the **NSPCC helpline: 0808 800 5000**.

When responding to safeguarding disclosures made by children, young people, or adults, Banquo Limited's staff should ensure they adhere to the following do's and don'ts.

Do:

- Stay calm.
- Let the individual know that you will need to share what they have told you and refer back to the contract.
- Stay with what the individual is saying or doing and only intervene if the individual is putting themselves, or others, at risk.
- Report the incident immediately ensuring you follow local authorities safeguarding procedures.

Do not:

- Promise confidentiality.
- Ask any leading questions, however, it is appropriate to ask open/clarifying questions or ask the child if there is anything else they would like to share.
- Accept any retraction or backtracking from an individual. If it has been said, it needs to be reported.

Banquo Limited Children's Safeguarding Procedures.

Where safeguarding come to light about a child, or there are observed safeguarding concerns, the following actions must be taken:

1. Refer the child to the contract and the fact that you will have to inform Banquo Limited's Safeguarding Lead. It is good practice to explain your concerns to the child's family and carers, informing them of your intention to refer and seek their consent, being open and honest from the start, results in better outcomes. Do not however, discuss your concerns with the carer where:
 - The discussion might put the child at greater risk;
 - The discussion would impede police investigation or social work enquiry;
 - Sexual abuse by family members, or organised or multiple abuse is suspected;
 - Fabricated or induced illness is suspected;
 - family or carers are being violent or abusive and discussion would place you or others at risk;
 - It is not possible to contact the service user or carers without causing undue delay in making the referral.
2. Before making a safeguarding referral, the staff member should ensure the child fits the statutory criteria for a child at risk.
3. Immediately after the service provided, the member of staff must make a note of the disclosure or concerns, using the exact words of the child where possible (if this needs to be paraphrased, this must be made clear on the form).
4. Immediately after this, the member of staff should notify their Safeguarding Lead. If the Safeguarding Lead is not available, they must go directly to a Senior Manager or in his/her absence the Director.
5. The member of staff or Safeguarding Lead must then input the information onto Banquo Limited safeguarding form which could be found under the safeguarding file on the SharePoint. A The safeguarding form must be completed and discussed with the Safeguarding Lead as soon as possible on the same day as the disclosure or concern coming to Banquo Limited's attention. Staff should ensure that they speak to Safeguarding Lead that day by phone. A copy of this form should then be saved on the electronic record which Banquo Limited uses. It will also be logged on SharePoint.
6. In some circumstances, some local authorities may require us to input this onto their own database instead of our system or, where this is not possible, the member of staff must send the downloaded copy via encrypted email requesting a mark read receipt. In the absence of the Safeguarding Lead the staff must inform the Senior Manager or in

his/her absence the Director and input the concern onto the system for them to see. You must then contact the Registered Manager or the Director by telephone or email to inform them of the concern.

7. The Safeguarding Lead should contact the appropriate Children Safeguarding Team for where the child lives and in accordance with their local safeguarding guidance. The Safeguarding Lead should ask to make a child safeguarding alert. The safeguarding Lead will then inform CQC by sending a notification to inform them a safeguarding alert has been raised.
8. The member of staff must update the system and the Safeguarding Lead of progress and maintain an oversight of the case. They should also report on the progress of the case via supervision.

When the staff member, and Safeguarding Lead are satisfied that sufficient actions to safeguard the child have been completed, either by Banquo Limited or external agencies, the concern on the system can be changed from being an 'Open' case to an 'closed' case.

Safeguarding Recorded On System

Accurate record keeping is essential part of the accountability process of safeguarding children. All safeguarding concerns are put onto Banquo Limited system, cases will be monitored on a regular basis by Banquo Limited Safeguarding Lead, who also provide regular reports to the director. All safeguarding cases will be classified as either 'Agreed Action Taken' or 'Open'. Banquo Limited's Safeguarding Lead will be required to monitor open safeguarding cases on the system, and report on actions taken and the progress of each case. This monitoring and overview is important to ensure that cases do not drift, and that risks to children are managed effectively.

Information Sharing And Confidentiality

Information sharing between organisations is essential to safeguard child at risk of abuse, neglect and exploitation. In this context 'organisations' mean not only statutory organisations but also voluntary and independent sector organisations, housing authorities, the police and Crown Prosecution Service, and organisations which provide advocacy and support.

Decisions about what information is shared and with whom will be taken on a case-by-case basis by the Safeguarding Lead in consultation with the Data Protection Officer in line with Banquo Limited's Confidentiality and Information Governance Policy and Procedure.

Banquo Limited will follow government guidelines on service users confidentiality.

A record must be kept of all decisions made in relation to information sharing, whether the information is shared or not. If a decision has been made to share information, a record must be kept of what was shared, with whom and for what purpose. Any information disclosed should be:

- Clear regarding the nature of the problem and purpose of sharing information
- Based on fact, not assumption

- Restricted to those with a legitimate need to know
- Relevant to specific incidents
- Strictly limited to the needs of the situation at that time and
- Recorded in writing with reasons stated.

The 'Seven Golden Rules' of information sharing are set out in the government guidance, *Information*. This guidance is applicable to all professionals charged with the responsibility of sharing information, including in safeguarding child scenarios.

1. **The Data Protection Act is not a barrier to sharing information** but provides a framework to ensure personal information about living persons is shared appropriately.
2. **Be open and honest** with the person/family from the outset about why, what, how and with whom information will be shared and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice** if you have any doubt, without disclosing the identity of the person if possible.
4. **Share with consent where appropriate** and where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent, if, in your judgment, that lack of consent can be overridden by the public interest. You will need to base your judgment on the facts of the case.
5. **Consider safety and well-being**, base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.
6. **Necessary, proportionate, relevant, accurate, timely and secure**, ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up to date, is shared in a timely fashion and is shared securely.
7. **Keep a record of your concerns, the reasons for them and decisions** whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose

Please also refer to the "Confidentiality and Information Sharing" Policy and Procedure which gives further details about these requirements.

Notifications

The Safeguarding Lead is responsible for notifying the CQC, as soon as reasonably possible, of abuse or allegations of abuse concerning a person using the service if any of the following applies:

- The person is affected by abuse.
- They are affected by alleged abuse
- The person is an abuser

- They are an alleged abuser.

Not all referrals made to the local authority need to be notified to CQC. Banquo Limited is only required to notify CQC of safeguarding incidents where the allegation of abuse is linked to Banquo Limited's provision of care.

Safer Recruitment Practices

The safeguarding policy must also safeguard children from harm from those placed in positions of trust. At Banquo Limited, the following steps are taken:

- No direct work with children can begin without receipt of two satisfactory references.
- An enhanced DBS check is carried out for all Banquo Limited staff who work directly with children and will be updated on a three yearly basis or on a 'live' basis for those registered with the DBS update service. Overseas checks will also be undertaken for any person who has lived abroad in the last 7 years, which will include police checks / letters of good conduct.
- Safeguarding Induction Training is delivered to all staff who work directly with children. Staff who do not work directly with children must also complete safeguarding training within their first 3 months of employment with Prospero Health and Social in house trainer.
- Banquo Limited provides supervision for care staff, fortnightly dependant on their role. ***(Please see Banquo Limited Supervision Policy and Procedure).***
- If a member of Banquo Limited has concerns regarding the conduct of any member of staff, they have a duty to follow this procedure and report to the registered manager.

Care Worker Conduct

Banquo Limited will not tolerate any employee, worker or other person engaged to support or provide services to, or on our behalf to have:

- Behaved in a way that has harmed, or may harm, an at-risk child
- Possibly committed a criminal offence against, or related to, an at-risk child
- Behaved towards an at-risk child in a manner that may indicate they are unsuitable to work in a position of trust.

Any employee identified to behave in such a way as to indicate one or more of the above statements, either within their work or because of actions within their personal life, may be subject to disciplinary action. Identification of such incidents can come from various different sources. Banquo Limited will take prompt action to investigate any allegations made and will take any actions necessary to protect individuals and those that work with us, for us, and on our behalf.

Resultant actions can/may include an employee being suspended and possibly dismissed. All allegations will be reported to the CQC without delay, as is required. Where the allegation is made against a member of care staff we will liaise with and report to the relevant professional body.

Additionally, Banquo Limited has a duty to refer employee(s) to the Disclosure and Barring Service (DBS) if they have:

- a) Satisfied the harm test, i.e., that the Company believes that the employee(s) may:
 - Harm a child or vulnerable adult
 - Cause a child or vulnerable adult to be harmed
 - Put a child or vulnerable adult at risk of harm
 - Attempt to harm a child or vulnerable adult or incite another to harm a child or vulnerable adult.
- b) Received a caution or conviction for a relevant offence.

A relevant offence for the purposes of referrals to DBS is an automatic inclusion offence as set out in the Safeguarding Vulnerable Groups Act 2006 (Prescribed Criteria and Miscellaneous Provisions) Regulations 2009 and the Safeguarding Vulnerable Groups.

If the above conditions have been met and the Safeguarding Lead will conclude that the investigation conducted shows that the employee(s) concerned has a case to answer, a referral must be referred to DBS.

Whistleblowing

If staff are concerned of a wrongdoing or that appropriate action has not been taken to deal with a safeguarding concern, then this is when whistleblowing should take place. This is sometimes referred to as 'making a disclosure' or 'blowing the whistle'. The wrongdoing will typically (although not necessarily) be something you have witnessed at work.

Please see Banquo Limited's Whistleblowing Policy and Procedure for further information.

Managing Allegations Against Staff

As an organisation caring and treating children, Banquo Limited has a duty to ensure that where an allegation against a member of staff been substantiated, steps are taken to investigate the allegation and prevent other children being harmed. Banquo Limited equally has a wider duty to ensure that the necessary authorities are informed of concerns about situations where a member of staff has harmed a child, placed a child at risk of harm, or is unsuitable to work with children. Banquo Limited therefore takes responsibility for making the required referrals, to external regulatory bodies such as but not limited to the Disclosure and Barring Service (DBS) and Care Quality Commission (CQC). Banquo Limited will contact the Local Child Safeguarding Team immediately to establish whether the children safeguarding team, or Banquo Limited will carry out the investigation. If it is decided that Banquo Limited will carry out an investigation, we will liaise closely with the children Safeguarding Team.

Lessons Learnt

Banquo Limited's Director will have briefing with staff to help improve the communication of lessons being learned from safeguarding reviews, which ensures the learning is being shared widely and more rapidly so that it can impact positively on future case management.

The lessons learned briefings have been structured to provide a summary overview of the story of the child, what we learned and advice for staff. It should be noted, all briefings are totally anonymised to protect the identity of the individuals. These briefings will be held every time a safeguarding case has been dealt with and closed on the system. Keeping this commitment means continually learning and improving the process in order to meet new challenges as they arise. Our commitment to continuous improvement will be reflected in our Adult and Child Safeguarding audit report.

Training

All employees associated with and third parties working or volunteering with Banquo Limited will be required to undertake an induction that includes mandatory training on the safeguarding of children (level 1 for all staff, level 2 for all care staff and level 3 for the Safeguarding Lead) as per the Intercollegiate guidance as well as the Prevent Strategy for Radicalisation.

Safeguarding Training

Level 1 Safeguarding Children (All staff at Banquo Limited):

Units Covered

- **Unit 1 - Introduction to Safeguarding Children:** The first unit of the safeguarding children level 1 course will provide the fundamental knowledge needed to understand what safeguarding is and why it is important.
- **Unit 2 - The Risk Factors for Abuse:** In this unit definitions of the different types of harm will be clarified and the factors that increase the risk of them being inflicted upon an individual will be discussed.
- **Unit 3 - Types and Signs of Abuse:** This unit will explore the ten types of abuse you may encounter and the indicators they are taking place. Including physical abuse, domestic abuse, sexual abuse, psychological abuse, financial abuse, etc.
- **Unit 4 - Responding, Reporting and Recording:** In the final unit of the safeguarding children level 1 course you will explore your responsibilities to an individual when you may suspect harm or if they disclose harm.

Level 2 Safeguarding Children (All staff at Banquo Limited):

Units Covered:

- **Unit 1 - Introduction to Safeguarding:** In the first unit it will look at what 'safeguarding means'. Explore who is responsible for protecting children from abuse, as well as statistics about the different types of child abuse.
- **Unit 2 - Safeguarding Structure:** In the second unit it will look at what the single assessment is. It looks at the possible outcomes of the assessment and what happens if there is a risk of serious imminent harm.
- **Unit 3 - Types of Abuse:** In this unit it will look at the different forms of abuse that a child may be exposed to and who may be an abuser.
- **Unit 4 - Recognising Risks:** In this unit it will look at how individuals can recognise the risks of child abuse. It will also look at how to judge if a report needs to be made or not. It will also cover what makes children more vulnerable to child abuse.
- **Unit 5 - Reporting Concerns:** In this unit it will look at when and how to make a report. Looking at whether or not it is appropriate to inform the child's parents about the suspected abuse. This unit also covers who reports should be reported to.
- **Unit 6 - Post Referral:** In the final unit it will be looking at what happens after a referral has been made and the potential outcomes of it. This unit will also explain what a child protection conference is.

Level 3 Safeguarding Children (Clinical Staff and Safeguarding Lead at Banquo Limited):

Units Covered:

- **Unit 1 - Introduction to Safeguarding:** In the first unit it will explain what safeguarding is and who the responsible person is. It will finish off by looking at the statistics relating to child abuse.
- **Unit 2 - Role of the Safeguarding Lead:** This unit explains the role of the safeguarding lead and ways of preventing abuse, including the six principles of safeguarding, empowering children/parents and creating and implementing Safeguarding Policy and Procedure.
- **Unit 3 - Safer Recruitment:** This unit covers the importance of safer recruitment practices, including staff responsibilities and creating safer recruitment policy statements. It also outlines the different kinds of regulated activity with children and the appropriate level of DBS check required for those who carry out such duties.
- **Unit 4 - Safeguarding and the Law:** This unit will look at the law surrounding safeguarding and what the key principles of the acts are. It will explain each law in detail and give background information on why they came into place.
- **Unit 5 - Safeguarding Structure:** In this unit it will look at what is involved for a child in the single assessment. It will explain how safeguarding is applied to children who live with different disabilities.
- **Unit 6 - Types of Abuse:** This unit will look at all possible types of abuse that a child may be exposed to. It will explore what the signs and symptoms are that a child may be being abused. This unit will also look at who may be an abuser.
- **Unit 7 - Recognising Risks:** In this unit it will look at how you can recognise the risks of a child being abused. It will explore what risk factors can make a child more susceptible to being abused or neglected.

- **Unit 8 - Reporting and Responding to Concerns:** This unit will look at how a person can report and respond to concerns that a child is being abused. It will look at the different types of disclosure and how to record concerns and disclosures.
- **Unit 9 - Recording Concerns:** This unit will be looking in detail at how to report and record concerns that a child is being abused. It will look at the methods that are most useful.
- **Unit 10 - Post Referral:** In this unit it will look at what happens after a referral has been made. As well as the timescale of a single assessment. It will also explain in detail the thresholds of need guidance and the four levels.

This will then need to be updated at least every 2 years.

Monitoring

The Safeguarding Lead will monitor and undertake, where applicable:

- Training undertaken and renewal dates.
- Numbers of safeguarding referrals made to local authority and CQC.
- Lessons learned and changes effected because of safeguarding issues.
- Regular reviews, supervisions and audits around safeguarding incidents.

This information gathered will support Banquo Limited to facilitate continuous improvement by providing Banquo Limited with feedback and insight into our safeguarding practices.

We are committed to regularly reviewing our policy. This policy is reviewed by Banquo Limited's Safeguarding Lead on an annual basis or sooner if there is a change in legislation or there is applicable learning from a critical incident.

Legislation and Guidance

Children Act 1989

Children Act 2004

Counter Extremism Strategy

Disability Discrimination Act 2005

Equality Act 2010

Mental Capacity Act 2005

Public Interest Disclosure Act 1998

Modern Slavery Act 2015

United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons

Home Office: [Revised Prevent duty guidance: for England and Wales 2019](#):

<https://www.gov.uk/government/publications/prevent-duty-guidance/revised-prevent-duty-guidance-for-england-and-wales>

Home Office Serious Violence Strategy (2018) published by the Home Office,

NICE Guidance: <https://www.nice.org.uk/guidance/health-and-social-care-delivery/safeguarding>

Care Quality Commission:

https://www.cqc.org.uk/sites/default/files/20150710_CQC_New_Safeguarding_Statement.pdf

HM Government: What to do if you're worried a child is being abused; advice for practitioners, 2015

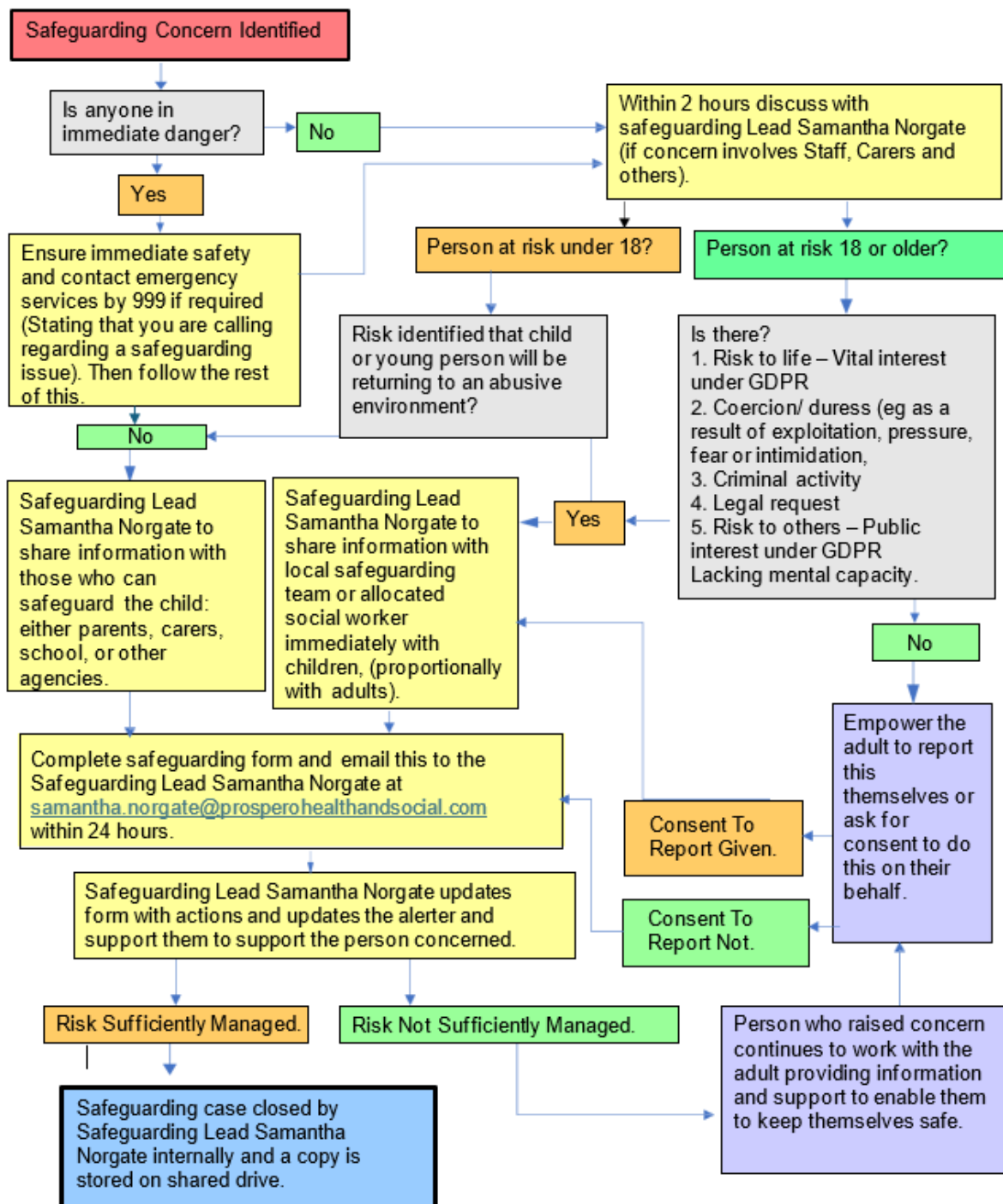
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf

Working Together to Safeguard Children, 2018

RCN: [Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff](#) | Royal College of Nursing (rcn.org.uk)

CQC - GP mythbuster 33: Safeguarding children - Care Quality Commission (cqc.org.uk)

Appendix 1 – Safeguarding Children Flow Chart



Appendix 2- Raising a Safeguarding Child Concern Checklist:

This checklist is to assist you to have the right information when you are raising a safeguarding child concern. We know that it is often a stressful conversation, and you may forget vital information when you make the call. Do not worry if you do not have all the information below. Concerns will always be considered when some of this information is not available.

Name of Alerter (You can remain anonymous)	
Contact details of Alerter	
Relationship to Victim	
Organisation of Alerter	
Name (of child at risk)	
Address of child	
Address, if different, of place of alleged abuse	
Contact details of the child at risk	
Details of Category of Vulnerability (Older, frail, Mental Health, Learning Difficulties etc.)	
Date of Birth or Age	
Gender	
Ethnicity	
Religion	
Capacity and understanding	
Communication needs (sensory loss, language, other)	
Name of Alleged Perpetrator	
Address of Alleged Perpetrator	
Date of Birth of Alleged Perpetrator	
Details of Referral - You need to consider the following so that the person taking the referral decision can gain adequate information	
Nature of abuse/incident	

When did it happen?	
Where did it happen?	
Was anyone else involved?	
Was the incident witnessed?	
Have you had previous concerns regarding this person? If so, what?	
Does the child at risk of abuse or neglect know you are making this referral?	
What does the person want to happen?	
Have you done anything to assist the child at risk at this time? (What actions have been taken?)	

Appendix 3- Body Map

