

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

Contents:

1. Purpose	3
2. General Principles	3
3. Scope	3
4. Definitions	3
5. Relevant Legislation and Policies	4
6. Roles and Responsibilities	5
7. BRR's approach to Safeguarding Children and Adults	6
7.1. Creating a culture of trust and openness	6
7.2. A person centred approach	6
7.2.1. Adults	6
7.2.2. Children and young people:	7
7.2.3. Families	8
7.3. Challenging unfairness	8
8. Procedures	8
8.1. Five R's - Recognise, Respond, Report, Record, Refer	8
8.2. BRR Safeguarding Flow Chart	15
8.3. Separated children and age disputed new arrivals	16
8.4. Children in families, with parents or guardians	
8.4.1. Female Genital Mutilation	18
8.4.2. Injuries in non-mobile babies	18
8.5. Risk Assessment and Risk Management	18
8.5.1. Suspected abuse	18
8.5.2. Suicidal ideation and mental health crises	18
8.5.3. Think Family	18
8.6. Escalation	19
8.7. Concerns relating to staff or volunteers	19
9. Confidentiality and Appropriate Disclosure of Information	20
9.1. Adults	20
9.2. Children	21
9.3. Photography and use of images	21
10. Implementation and Monitoring	22
10.1. Training	22
10.2. Development and Oversight	22

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

Useful links

1. General

- a. [Care Act 2014 Definitions of abuse](#)
- b. [BRR Safeguarding poster](#)
- c. [BRR Safeguarding casework documents](#)
 - i. [Safeguarding Risk Assessment](#)
 - ii. [Member Safety Plan - Suicidal Ideation](#)
- d. [Local Authority Contacts:](#)
 - i. [Bristol City Council](#)
 - 1. [Adult Social Care](#)
 - 2. [Children's Services](#)
 - ii. [South Gloucestershire](#)
 - 1. [Adult Social Care](#)
 - 2. [Children's Services](#)
 - iii. [North Somerset](#)
 - 1. [Adult Social Care](#)
 - 2. [Children's Services](#)
- e. [BRR Responding to Disclosures](#)
- f. [BCC Think Family Approach](#)

2. Children and young people

- a. [BRR Children and Young People eligibility for services](#)
- b. [BRR Separated Children and Young People - New Arrivals Flow Chart](#)
- c. [BRR Separated Children and Young People - New Arrivals Pro Forma](#)
- d. [BRR Non-mobile babies injuries procedure](#)
- e. [BRR Low level concerns procedure](#)

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

1. Purpose

This Policy and Procedures outline BRR's approach to safeguarding children and adults. The Policy should be followed by all staff and volunteers at BRR to ensure best practice in relation to safeguarding children and adults, in line with legislation and statutory guidance.

2. General Principles

BRR takes seriously its responsibility to safeguard children and adults. We seek to create and foster a culture of openness and accountability, so that possible instances of harm and abuse can be identified and action taken to safeguard those at risk.

Everyone at BRR has a role to play in safeguarding children and adults. Safeguarding is everyone's responsibility. As an organisation BRR must ensure that all staff and volunteers understand their role and are supported to fulfil it.

BRR is committed to tackling discrimination and abuse. As an organisation we are anti-racist and anti-discrimination. We are working with a very diverse membership, many of whom are particularly impacted by discrimination. We will work in a way that recognises how the experiences of our members may intersect to increase the levels of risk, harm and abuse they face.

3. Scope

This Policy and Procedure forms part of our safeguarding arrangements, setting out:

- Expectations that should be followed by all staff and volunteers to create a culture of trust and openness that supports the well-being of everyone at BRR
- Procedures that should be followed by any staff member or volunteer who suspects that anyone connected to BRR is at risk of abuse
- Requirements for safeguarding children, age disputed young people and adults at risk to be followed by staff and volunteers, with guidance from the Designated Safeguarding Leads

4. Definitions

- **Safeguarding** is taking action to keep children and adults safe, this includes:
 - Identifying and challenging abusive behaviour
 - Creating a culture of trust and openness
 - Working in an empowering way with children, families and adults at risk of abuse
 - Working together with colleagues and partner organisations to keep people safe
 - Making appropriate referrals to statutory and other agencies
 - Holding those responsible for the safety of adults and children to account when needed

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

- **Child protection** is action taken to protect children from significant harm and abuse. There is a legal requirement to take such action under the Children's Act 1989
- **Separated Children** are children who have arrived in the UK without their parents or carers, often referred to as Unaccompanied Asylum Seeking Children (UASCs)
- **Age Disputed Young People** are people who state that they are children and are disputing the age assigned to them by the Home Office
- **Adults at Risk** are defined as adults who have care and support needs under the Care Act. There is a legal requirement to take action to protect such adults from harm and abuse
- **Abuse** is the misuse of power over another person in a harmful way. This can be one single act or many actions over time. A full list of the categories of abuse as defined by the Care Act 2014 is [here](#)

5. Relevant Legislation and Policies

This policy sits alongside other BRR Policies including:

- Boundaries and Code of Conduct
- Whistleblowing Policy
- Recruitment Policy
- References Policy
- Disclosure Policy
- Volunteer Policy
- Disciplinary and Grievance Policies
- Equity, Diversity and Inclusion Policy
- Confidentiality, Information Sharing and Disclosure Policy
- Data Protection Policy
- Creche specific policies

This policy is informed by the following legislation and statutory guidance:

- Children's Act 1989
- Equality Act 2010
- Charity Commission Safeguarding Guidance 2019
- 'Working Together to Safeguard Children' 2023
- Care Act 2014
- Mental Capacity Act 2005
- General Data Protection Regulation (GDPR) and Data Protection Act 2018

Collectively and separately these laws place a strong legal duty on BRR to safeguard those visiting our premises from harm and abuse, especially adults with care and support needs and children. They provide a legal framework by which to understand the risks and responsibilities relating to safeguarding adults and children.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

6. Roles and Responsibilities

All staff and volunteers have a role to play in safeguarding children and adults and are responsible for:

- Following the procedures outlined in this policy relevant to their role
- Attending training on safeguarding children and adults
- Helping create a culture of trust and openness
- Working in an empowering way with children, families and adults at risk of abuse
- Working together with colleagues and partner organisations to keep people safe
- Sharing any concerns about harm and abuse with the relevant safeguarding lead
- Whistleblowing if there are any concerns about abuse within BRR (see 8.7 below)

Designated Safeguarding Leads (DSLs) and Deputy DSLs are responsible for:

- Receiving any concerns about harm and abuse raised by staff, volunteers or members
- Taking appropriate action to respond to concerns, working together with colleagues and partner organisations to keep people safe
- Making referrals to statutory agencies
- Escalating referrals which do not receive a satisfactory response
- Keeping confidential records of all actions taken to safeguard children and adults at risk
- Ensuring appropriate cover and handover is in place in cases of absence of one or more DSLs

BRR has two DSLs and two deputies ([see poster](#) with names and contact details):

- The **DSL for Adults** is responsible for overseeing all work to safeguard adults at risk, with support from the **Deputy DSL for Adults** as required.
- The **DSL for Children** is responsible for overseeing all work to safeguard children, with support from the **Deputy DSL for Children** as required.
- The **DSL for Children** has a specific responsibility to lead on safeguarding children in families, living with their parents or carers. The **Deputy DSL for Children** will provide cover in their absence.
- The **Deputy DSL for Children** has a specific responsibility to lead on safeguarding separated children and age disputed young people. The **DSL for Children** will provide cover in their absence.

The **Specialist Services Manager** is responsible for:

- Updating and implementing BRR Safeguarding Policies and Procedures
- Ensuring that staff and volunteers receive appropriate training
- Communicate with the Local Authority Designated Officer (LADO) in any cases of suspected abuse of children by BRR staff or volunteers
- Ensuring the **Board of Trustees** have sufficient information to be confident that BRR is meeting its duties to safeguard children and adults

The **Board of Trustees** are ultimately responsible for ensuring that BRR is meeting its duties to safeguard children and adults by:

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

- Ensuring policies comply with legislation and are reviewed and updated regularly
- Receiving an annual safeguarding report outlining work carried out to safeguard children and adults. This should include an overview of the types of cases, referrals made and outcomes
- Taking action if there are concerns that safeguarding practice at BRR is not satisfactory
- A **Safeguarding Trustee** should be elected to lead on this work and be a point of contact for questions of compliance and development relating to safeguarding

The key **Safeguarding Partners** for BRR are:

- Local Authority Children's Services and Adult Social Care
- Safeguarding Boards (Keeping Bristol Safe Partnership, South Gloucester Safeguarding, North Somerset Safeguarding)
- Charity Commission, regulating safeguarding across the organisation

7. BRR's approach to Safeguarding Children and Adults

7.1. Creating a culture of trust and openness

It is vital to our work that our members trust BRR. We will build this trust in the way we work, including by:

- Being consistent and fair
- Being open and transparent in our practices
- Respecting confidentiality
- Communicating respectfully
- Challenging unfairness and discrimination
- Giving practical and emotional support

We recognise the fact that our members may have had many experiences which lead them to distrust authority. This will inform our approach and makes building a culture of trust even more important.

7.2. A person centred approach

In line with guidance around best practice, BRR will always put the person or people at risk at the centre of our approach. The following, taken from the relevant legislation and guidance, underpins BRR's approach to safeguarding:

7.2.1. Adults

The 'Care Act 2014' guidance contains six principles for a person-centred approach to safeguarding adults:

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

Empowerment: People being supported and encouraged to make their own decisions and informed consent.

"I am asked what I want as the outcomes from the safeguarding process and these directly inform what happens."

Prevention: It is better to take action before harm occurs.

"I receive clear and simple information about what abuse is, how to recognise the signs and what I can do to seek help."

Proportionality: The least intrusive response appropriate to the risk presented.

"I am sure that the professionals will work in my interest, as I see them and they will only get involved as much as needed."

Protection: Support and representation for those in greatest need.

"I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want."

Partnership: Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

"I know that staff treat any personal and sensitive information in confidence, only sharing what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me."

Accountability: Accountability and transparency in delivering safeguarding.

"I understand the role of everyone involved in my life and so do they."

7.2.2. Children and young people:

'Working Together to Safeguard Children 2023' states that:

Children have said that they need:

Vigilance: to have adults notice when things are troubling them

Understanding and action: to understand what is happening; to be heard and understood; and to have that understanding acted upon

Stability: to be able to develop an ongoing stable relationship of trust with those helping them

Respect: to be treated with the expectation that they are competent rather than not

Information and engagement: to be informed about, and involved in procedures, decisions, concerns and plans

Explanation: to be informed of the outcome of assessments, and decisions and reasons when their views have not met with a positive response

Support: to be provided with support in their own right as well as a member of their family

Advocacy: to be provided with advocacy to assist them in putting forward their views

Protection: to be protected against all forms of abuse, exploitation, and discrimination, and the right to special protection and help if a refugee

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

7.2.3. Families

'Working Together to Safeguard Children 2023' states that a family-centred approach to safeguarding children means:

Effective partnership working with parents and carers happens when practitioners build strong, positive, **trusting, and co-operative relationships**

Verbal and non-verbal **communication should be respectful**, non-blaming, clear, inclusive, and adapted to parents and carers needs

Practitioners **empower parents and carers** to participate in decision-making to help, support and protect children

Practitioners **involve parents, carers, families, and local communities** in designing processes that affect them, including those focused on safeguarding children

The 'Keeping Bristol Safe Partnership' encourages a "Think Family Approach" when working with adults with support needs who have caring responsibilities for children. This means that whenever we have safeguarding concerns about an adult we should consider the needs of any children involved as well as the adult at risk and the wider family.

7.3. Challenging unfairness

BRR members experience injustice and unfairness throughout the asylum process. The asylum system increases the risk of harm and abuse for children and adults. The systems set up to safeguard and protect children and adults at risk often fail asylum seekers and refugees for systemic reasons. We must challenge this, both by holding individual decision makers to account and by seeking systemic change.

8. Procedures

8.1. Five R's - Recognise, Respond, Report, Record, Refer

8.1.1. Recognise

Recognising abuse is one of the first steps in safeguarding adults at risk. All staff and volunteers should be alert to the following types of behaviour, while keeping in mind that these indicators are not an exhaustive list and that signs will be unique to each individual and some people may not even show any indication of abuse.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

Possible indicators of abuse

Adults and children

- Significant changes in their behaviour
- Deterioration in their well-being
- Unexplained bruising, marks or signs of possible abuse or neglect
- Seeming to be keeping a secret
- Unreasonable fear of certain people or places.
- Self-harm
- Comments indicating experiences of abuse and/or explicit disclosure of abuse

Children and young people

- Becoming excessively aggressive, withdrawn or clingy;
- Any bruising or marks on a non-mobile baby;
- Acting out in an inappropriate way perhaps with adults, other children or young people, toys or objects;
- Children and young people's comments which give cause for concern, e.g. inconsistent explanations of bruising, injuries or burns;
- Sexually explicit language or actions;
- Negative behaviour after using the internet or texting;
- Symptoms demonstrating that their mental health is suffering;
- Repeat non-attendance when expected at BRR

This list is not exhaustive and risks can change. Furthermore the indicators of possible abuse and harm may present differently for different people at different times.

While some of the signs listed above may have causes other than abuse, it is important for all staff and volunteers to report if they witness any of the above: they may form part of a wider picture.

Staff should be vigilant regarding signs relating to people with disabilities and not automatically assume that any of the above relates to their impairment. There may be particular barriers preventing them from disclosing abuse. There may also be increased risks and reduced access to ways to make themselves safe.

Many people at BRR, including children and young people, will have experienced significant trauma relating to their or their parents' experience of fleeing persecution and subsequent experiences seeking asylum. These traumatic experiences may manifest as possible indicators of abuse listed above. It should not be assumed that these either are or are not indicators of abuse. Vigilance, care and an open mind should be maintained. The impact of trauma may put people at a higher risk of harm and abuse.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

Good safeguarding practice takes into account how protected characteristics including disability, sex, sexual orientation, gender and race may impact the risks people experience. These often impact in an intersectional way, for example being trans as well as being disabled may increase the risk of abuse.

Staff working closely with adults at risk and/or children or families experiencing increased risk will need to work closely with the appropriate DSL to ensure the right support is in place. If needed, a written support plan will be put in place.

8.1.2. Respond

BRR members and children at BRR may disclose that they are experiencing abuse. This may be a clear and explicit statement or comments which indicate that they are being abused. Disclosures should be handled with sensitivity and care. Ensuring the following:

- Asses the level of immediate risk
- Offer reassurance that sharing this information is ok
- Listen actively and check understanding
- Gather information but do not ask leading questions
- Do not promise to keep the information secret
- If at all possible without increasing risk, inform the person that you need to share this information with the safeguarding lead

Gathering information, without asking leading questions

It is useful to have as much information as possible before going to the DSL. However, asking leading questions can risk compromising a possible police investigation, especially relating to abuse of a child or adult with care and support needs.

Instead of asking 'Did they hit you?' ask 'Can you tell me what happened', instead of asking 'Are you being abused at home?' ask 'Do you feel safe at home?'

If you do not feel comfortable or confident to ask for more information, don't. Just pass what you know and why you are concerned to the relevant DSLs or Deputies.

[See here](#) for Detailed Guidance for Individuals Receiving Disclosures.

Any disclosures or any signs leading you to feel concerned about possible abuse, must be reported to the DSL and/or Deputy as soon as possible, as outlined below.

There may be times, such as an emergency when immediate danger is present, or a disclosure where an immediate response is required, before reporting to a DSL. In these cases, the situation should be reported immediately following the initial response.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

All other instances of abuse or suspected abuse should be reported immediately and the response should be agreed in conjunction with the DSL or Deputy DSL.

8.1.3. Report

When to report:

All concerns about abuse must be reported to the relevant DSL and/or Deputy as soon as possible and as directly as possible. Ideally the person who is concerned about possible abuse should go straight to the DSL with their concerns.

However, in some circumstances it may be best to go to another member of staff, for example:

- Volunteers may have more direct contact with a member of staff related to their project
- The DSL may be unavailable
- Another member of staff may have strong knowledge of the case

In these circumstances a DSL must be informed as soon as possible. The DSL may be aware of other useful information and will be able to advise on next steps.

If a safeguarding concern arises at a time when no appropriate staff member is available - for example if an incident is witnessed out of hours, or a memory concerns someone out of hours - the concerns should be written down and dated, then passed on to the DSL at the earliest opportunity.

How to report:

Concerns should be reported as directly as possible to the most appropriate DSL or Deputy:

- Usually a conversation with a DSL in person or on the phone is the best first step
- If this is not possible an email with all key details should be sent to the relevant DSL and Deputy, including:
 - Names and up to date contact details of all those involved
 - Lamplight numbers if possible
 - Description of concerns and how they came to your attention
 - What the person wants to happen (if they have told you)
 - Anything else you think relevant

Any safeguarding concerns relating to an adult who has children should be flagged with the DSL for children, as dependents may be at risk from the challenges faced by their parents. In line with the 'Think Family Approach' concerns about children should also consider the views, needs and circumstances of the family, for example if a child is struggling, what support might their parents need.

The DSL will decide on next steps. This may involve asking the person reporting to take some follow up actions such as:

- Asking some follow up questions or clarifications

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

- Suggesting possible referrals, e.g. to health or voluntary sector support organisations
- Carrying out a [Risk Assessment](#) for possible abuse and/or a [Safety Plan](#) for suicidal ideation

Normally the DSLs or Deputies are responsible for referrals to Local Authority social services, this is to avoid unnecessary, inappropriate or contradictory referrals. They may delegate this to experienced caseworkers. However, if a DSL or Deputy is not available, any and all necessary actions may be taken, including referrals to social services and contacting the emergency services.

8.1.4. Record

It is very important that accurate records are kept of all actions taken to safeguard children and adults from harm and abuse.

Lamplight Database

Safeguarding work must be recorded on Lamplight. However, all staff and many volunteers have access to lamplight. Therefore, there is a need to balance confidentiality with the necessity for staff to be aware of risks. There are differing levels of confidentiality on Lamplight. In some cases a concern or an allegation may be such that the benefits of recording the information in an easily accessible place are outweighed by the need to respect the confidentiality of those involved - for example incidents relating to sexual abuse. In this case confidential details should be recorded in a restricted area of Lamplight. A work record should be added to lamplight noting that a concern has been raised and that staff and volunteers should seek information from a DSL if needed. DSLs will guide those making safeguarding reports as to how best to record information.

Documents

Documents relating to safeguarding cases, such as downloads of webform referrals to the Local Authority must be stored confidentially and securely. The DSLs will maintain a shared drive with access limited to members of the safeguarding team for this purpose.

Active Case list

The DSLs will maintain a caselist of current or recent safeguarding cases. This will not contain confidential/sensitive information relating to those cases, but will record key actions and next steps, including referrals made, outcomes and whether Risk Assessments and Well-Being Plans have been completed.

This list will be used to produce reports to the Board of Trustees on safeguarding work at BRR

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

8.1.5. Refer

BRR has a duty to refer all and any concerns about possible abuse of children or adults at risk to the Local Authority. We must not be the last people to know about abuse. Only by sharing information can serious incidents be prevented.

Referrals to the local authority should, wherever possible, be made inline with BRR's approach to safeguarding:

- Fostering a culture of openness and trust, through consistency and clear communication
- A person-centred approach which takes into account the views and needs of those involved
- Challenging unfairness by escalating cases and advocating for change

However, there may be times when the need to keep someone safe means acting against the wishes of those at risk or acting without express consent. This should be the exception not the norm. In all cases every effort should be made to ensure that those at risk have the opportunity to say what they want to happen and to understand what action is being taken and why.

Safeguarding referrals to the Local Authority will usually be completed by a DSL or Deputy DSL, but in certain circumstances may be completed by someone else:

- If the matter is urgent and the DSL/Deputy and Head of Services are not available, reporting should not be delayed until they become available
- Where a worker has more detailed knowledge of a case they may complete the referral with the agreement and support of the DSL/Deputy DSL.

The DSL/Deputy must be kept informed of the progress of the matter and should be involved in any decision-making or action planning.

At BRR the most common Local Authorities referred to are Bristol, South Gloucestershire and North Somerset. Details of how to make referrals can be found by clicking the links on page 2, above. Other Local Authorities may need to be contacted if someone has a local connection elsewhere.

Local Authorities usually have an urgent and a non-urgent route for referrals. The safeguarding lead may decide which option is appropriate. Always seek advice from the Local Authority by phone if unsure.

Following a referral, the DSL or Deputy should agree next steps with any other staff or volunteer involved. Wherever possible the person at risk and their family members should be involved in these decisions. There may be statutory and/or non-statutory steps which should be taken.

Statutory next steps could include:

- A Care Assessment undertaken by the Local Authority to determine whether an adult has care and support needs

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

- Multi-agency meetings such as Team Around the Family (TAF) or a Multi-Agency Safeguarding Hub (MASH)

DSLs and Deputies should have a clear understanding of these statutory processes so as to be able to advocate for them to happen and so as to be able to attend and advocate effectively for the person at risk. DSLs should follow up on all referrals made to see what actions have been taken. Where actions are not taken by the Local Authority and BRR perceives a need, we should escalate the matter - see 8.5 below.

Referrals for people in Home Office accommodation

Many BRR members live in accommodation provided by the Home Office as part of asylum support. Migrant Help manage access to Home Office accommodation and are responsible for managing issues in the accommodation. The accommodation is managed by a local contractor, primarily Clearsprings Ready Homes in the South West for Dispersal Accommodation, subcontracted further for Initial Accommodation to SBHL and SOS, among others.

It is important to inform the Home Office, Migrant Help, Clearsprings Ready Homes and any other relevant subcontractor of safeguarding concerns in their accommodation. These organisations have a duty of care to those in their accommodation. We must enable them to fulfil this duty by sharing information. Furthermore we must take action where this duty of care is not met and conditions are unsafe in Home Office accommodation.

Home Office: AsylumSafeguarding@homeoffice.gov.uk

Migrant Help: Escalations@migranthelpuk.org

Ready Homes (use both): safeguarding.referrals@ready-homes.com,
ws.w.safeguarding@ready-homes.com

Ready Homes direct contacts for regional safeguarding managers:

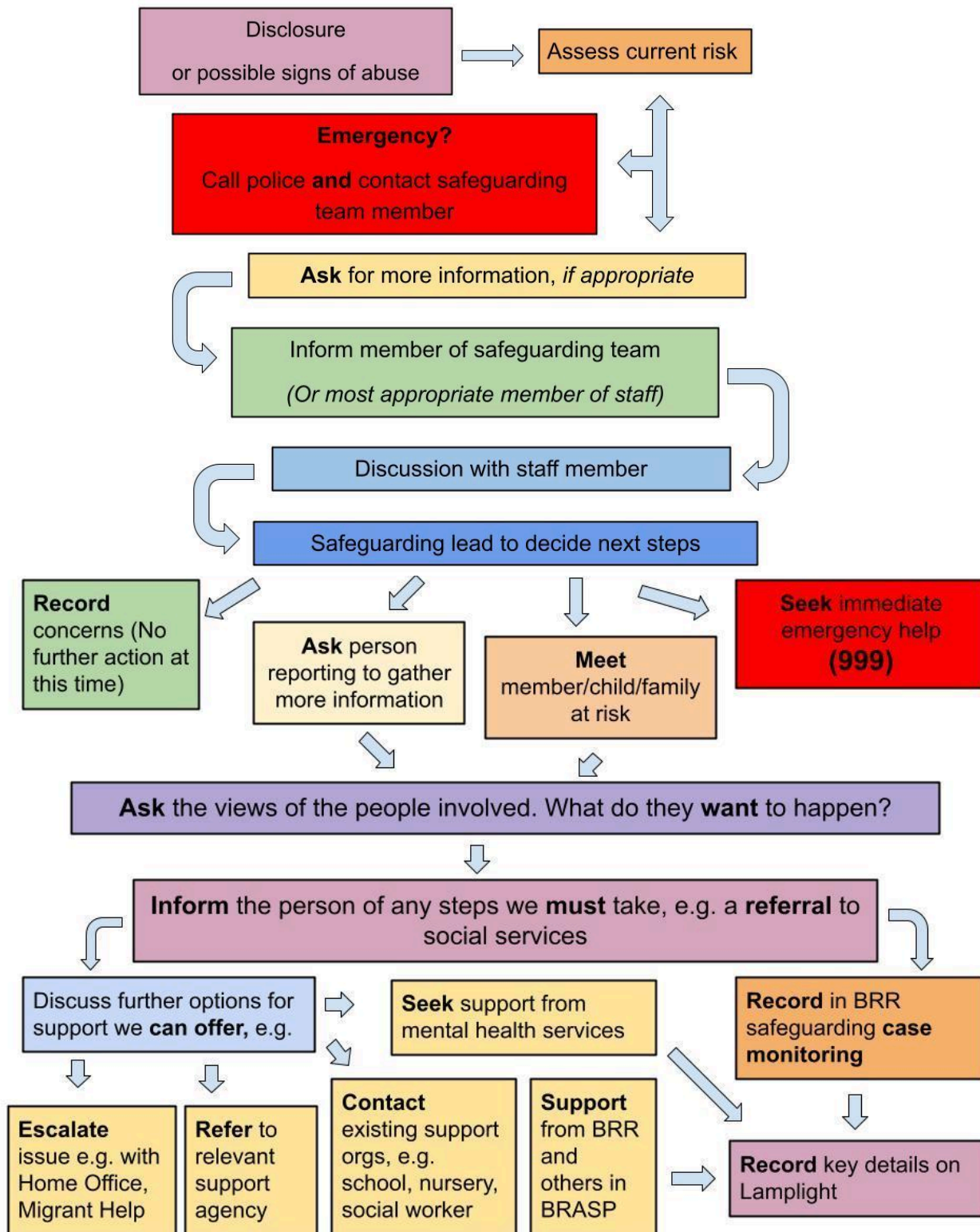
niahoulding@ready-homes.com (07825581614) and Stephenmiller@ready-homes.com

Hotel Management contacts can be found here

Frustratingly the Home Office and Migrant Help regularly change the contact details used for safeguarding, so it is important to check for auto-replies and chase/escalated if no response is received.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

8.2. BRR Safeguarding Flow Chart



SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

8.3. Separated children and age disputed new arrivals

Due to the nature of BRR's work, the organisation regularly comes into contact with separated children and young people who are disputing the age allocated to them by the Home Office and/or Social Services.

Child protection law applies to all those under the age of 18, making BRR's legal duty - and that of statutory bodies - to safeguard children clear. However, cases where a young person disputes the age assigned to them by the Home Office or Local Authority can pose significant challenges for safeguarding and child protection.

Advocating for age disputed young people

Where a young person states that they are a child, BRR will accept this until or unless an age assessment exists which we have been advised by a solicitor:

- a) is Merton Compliant and
- b) no practical grounds for a challenge exist

This may cause a situation where BRR makes child protection referrals for people for whom the Local Authority will not accept statutory responsibility.

In such cases it will not always be possible to put the safeguarding measures appropriate for a child in place, however BRR will advocate for these to be implemented and seek to mitigate risk in other ways, for example:

- Supporting an application for asylum support and requesting local accommodation
- Seeking to challenge age assessments where possible

Ultimately, if the Local Authority will not accept a duty of care, despite our advocacy and input from a solicitor, BRR cannot continue to treat such cases as child protection matters.

Separated Children and Young People seeking asylum are particularly vulnerable to risks of harm and abuse. Young People disputing their age are often housed by the Home Office with adults. BRR often meets young people who have left adult accommodation in order to find community members or relatives in Bristol. When such young people tell us they are children we will always make a referral to the Local Authority, advocate for proper age assessment and for suitable accommodation.

[Click here](#) for a flow chart for separated children and young people disputing their age visiting BRR for the first time and [click here](#) for a pro forma to complete.

See [here](#) for details of eligibility for young people and children to use different services at BRR.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

8.4. Children in families, with parents or guardians

School age children are not permitted to visit BRR, unless doing so is necessary in order for their parents to access urgent support, e.g. access advice when a deadline is approaching.

BRR may become aware of children of members through advice work or through other support offered to parents. We have a duty to remain vigilant to possible instances of harm and abuse affecting children of BRR members, even if they do not attend our services themselves.

When BRR is closed, particular care will be taken to support families where there are known vulnerabilities.

8.4.1. Female Genital Mutilation

FGM can be a risk among some groups using BRR. However, BRR will seek to avoid unnecessarily exposing already marginalised families to undue scrutiny. Our response must be proportionate, following best practice around taking the views of those involved into consideration and following the Think Family Approach.

8.4.2. Injuries in non-mobile babies

Injuries in non-mobile babies (that is a baby who cannot yet crawl, pull to stand, “cruise” around furniture or toddle) are rare. Non-mobile babies cannot cause injuries to themselves and must be considered at significant risk of abuse.

Any instance of an injury to a non-mobile baby must:

- Be reported to the DSL or Deputy DSL
- Be reported to First Response the same day, whether the injury is minor or major
 - The parent/carer should be reassured at this point that this is official protocol and does not necessarily mean any further involvement with Social Care

8.5. Risk Assessment and Risk Management

In order to make appropriate referrals, offer the right support at the right time, it is important to make assessments of the level of risk based on the information available. Any concern about harm and abuse should be raised with a DSL or Deputy. It is then their role to make an assessment of the risks and how to manage these risks. Guidance should be sought whenever it is needed.

The steps taken to assess risk and how it is managed will depend on the type of concern and the circumstances of the person at risk.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

8.5.1. Suspected abuse

Where abuse is suspected, a Safeguarding [Risk Assessment](#) should be completed. All instances of possible abuse of children and adults with care and support should be referred to the Local Authority. In the case of adults who do not have care and support needs the Local Authority does not have a duty of care, but other referrals may be appropriate with the consent of the person: the police, a housing provider, the Home Office.

8.5.2. Suicidal ideation and mental health crises

Many people in the asylum system experience severe mental health issues and getting the right support can be very difficult. Where an adult is experiencing thoughts of suicide and self harm a [Member Safety Plan](#) should be completed, along with any referrals that may be appropriate, with the persons consent. The list of possible referrals includes (but not limited to) the following: GP, Vitamins, Trauma Foundation South West, Early Intervention in Psychosis, VCS befriending and well-being projects. Adults with a high risk of self harm or suicide will be kept on the safeguarding Active Case list until the DSLs are satisfied that the risk has reduced, appropriate support is in place and/or all reasonable steps have been taken to support.

8.5.3. Think Family

It is vital to think about family members of those who may be at risk of harm and abuse or experiencing mental distress.

- Where adults are at risk, if they have children these children will be at risk too. Therefore appropriate child protection actions should be taken, including referrals to the Local Authority
- Where children are at risk, it is important to think about the adults in their life, their needs as well as their role in keeping the child safe

8.6. Escalation

Escalation is the process by which professional disputes about safeguarding issues should be dealt with. For example if a referrer from BRR does not agree with the action taken by the Local Authority professional receiving the referral.

Keeping Bristol Safe Partnership has a multi-agency escalation procedure for adults [here](#) and children [here](#) (other Local Authorities will have their own). This should be used to resolve professional disputes with other agencies. If a disagreement cannot be resolved informally, the following stages should be followed:

- **Stage 1** - DSL/Deputy to discuss it with the manager in the agency concerned
- **Stage 2** - DSL/Deputy to raise the issue with a senior manager in the other agency and should be resolved within 48 hours of escalation

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

- **Stage 3** - Refer concern to the KBSP Keeping Adults Safe (KAS) Delivery Group Member and KBSP Business Manager informed of escalation. Head of Services must also inform the CEO and the Trustee Responsible for Safeguarding
- **Stage 5** - Refer concern to the Chair of KBSP Keeping Adults Safe (KAS) Delivery Group and KBSP Executive

A clear record should be kept of all discussions and from Stage 3 the multi-agency monitoring form should be used.

It is essential that BRR challenges decisions which we feel do not meet the needs of our members and their families. Asylum seekers are often denied services and support to which they are entitled and their marginalised position in society exacerbates the risks they face. Social Services and other welfare institutions are stretched, this increases the likelihood of BRR members not getting the support they need. It is vital that we use escalation to advocate for the needs of those at risk of harm and abuse.

BRR will always seek to have good working relationships with other professionals working to safeguard adults and children. However, preserving these relationships is not a good enough reason not to challenge poor decisions and practice.

8.7. Concerns relating to staff or volunteers

There is no guaranteed way to identify a person who will harm children or adults at risk. However, possible warning signs may include:

- Encouraging relationships of dependency
- Discouraging individuals from accessing support from other people
- Paying an excessive amount of attention to an individual or group, providing presents, money or having favourites
- Seeking out vulnerable children or adults, e.g. those with disabilities
- Trying to spend time alone with a particular individual on a regular basis
- Making inappropriate sexual comments
- Sharing inappropriate images
- Being vague about where they have worked or when they have been employed
- Encouraging secretiveness
- People other than the parent/carer carrying children out of the building they are in

There may be other sources of concern; this is not a conclusive list. If you are concerned about another staff member, volunteer, member or visitor's behaviour you must pass this on to the Head of Services or direct to social services via First Response as appropriate.

All allegations of harmful behaviour or possible abuse against children by a staff member or volunteer must be shared with the Local Authority Designated Officer (LADO). This is to stop abusers from moving from organisation to organisation whenever an allegation is raised. The Head of Services is responsible for this at BRR, though others may raise concerns if they doubt this is happening. BRR has a [Low Level Concerns Policy](#) for dealing with allegations or

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

concerns about staff that do not meet the 'harm threshold' and may not be serious enough to warrant a referral to the LADO.

BRR Whistleblowing Policy sets out rights and responsibilities for anyone concerned about poor practice at BRR. BRR Disciplinary and Grievance Procedure sets out how to investigate allegations against staff and volunteers. Any concerns about staff or volunteer conduct must be reported, initially this may be to a line manager or to a more senior member of staff if necessary.

8.8. Recruitment of staff and volunteers

Safer Recruitment of staff and volunteers is vital to safeguarding. The Office Manager and Volunteer Manager are responsible for ensuring that BRR always recruits in line with its policies, including around safer recruitment, DBS checks and references.

9. Confidentiality and Appropriate Disclosure of Information

BRR expects all staff, volunteers, trustees to maintain confidentiality at all times. This means not sharing personal information unnecessarily, both within BRR and with other organisations.

However, it is vital that information is shared in order to prevent possible abuse and serious harm. Sharing the right information, at the right time, with the right people, can make all the difference to preventing harm. This should be on a 'need to know' basis only.

9.1. Adults

The following is adapted from the [Social Care Institute for Excellence Advice on Sharing Information](#):

- Adults have a general right to independence, choice and self-determination including control over information about themselves. In the context of adult safeguarding these rights can be overridden in certain circumstances
- Emergency or life-threatening situations may warrant the sharing of relevant information with the relevant emergency services without consent
- The law does not prevent the sharing of sensitive, personal information within organisations
- The law does not prevent the sharing of sensitive, personal information between organisations where the public interest served outweighs the public interest served by protecting confidentiality – for example, where a serious crime may be prevented
- Information can be shared lawfully within the parameters of the Data Protection Act 2018 and the General Data Protection Regulation (GDPR)
- An individual employee cannot give a personal assurance of confidentiality
- Frontline staff and volunteers should always report safeguarding concerns in line with their organisation's policy
- It is good practice to try to gain the person's consent to share information

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

- As long as it does not increase risk, practitioners should inform the person if they need to share their information without consent

9.2. Children

The following is taken from [Department for Education Information Sharing Advice](#):

- All children have a right to be protected from abuse and neglect. Protecting a child from such harm takes priority over protecting their privacy, or the privacy rights of the person(s) failing to protect them
- When you have a safeguarding concern, wherever it is practicable and safe to do so, engage with the child and/or their carer(s), and explain who you intend to share information with, what information you will be sharing and why
- You do not need consent to share personal information about a child and/or members of their family if a child is at risk or there is a perceived risk of harm
- Seek advice promptly whenever you are uncertain or do not fully understand how the legal framework supports information sharing in a particular case
- When sharing information, ensure you and the person or agency/organisation that receives the information take steps to protect the identities of any individuals (e.g., the child, a carer, a neighbour, or a colleague) who might suffer harm if their details became known to an abuser or one of their associates
- Only share relevant and accurate information with individuals or agencies/organisations that have a role in safeguarding the child and/or providing their family with support, and only share the information they need to support the provision of their services
- Record the reasons for your information sharing decision, irrespective of whether or not you decide to share information

9.3. Photography and use of images

BRR discourages the use of cameras of any kind by anyone using any of its spaces. Volunteers and staff should never take photos or video of members without express consent, from the individual and from the organisation. The purpose of any photo or video should be explained clearly and written consent obtained.

No volunteers should take any photos or videos of children. Where staff take photos or videos of children, for example for demonstrating the impact of work, no faces will be visible and written consent will be obtained from the parents/guardians.

BRR has a policy specifically addressing the use of mobile phones in the EYP creche setting.

SAFEGUARDING CHILDREN AND ADULTS - POLICY & PROCEDURES

10. Implementation and Monitoring

10.1. Training

- All staff and volunteers will receive training on Safeguarding Children and Adults as part of their induction
- All staff and volunteers will receive a training update on Safeguarding Children and Adults at least once every 2 years
- DSLs and Deputies will attend the following as a minimum when they take on their role:
 - Adult leads: KBSP Safeguarding Adults (Level 3)
 - Child leads: KBSP Advanced Child Protection Training For Safeguarding Leads and Specialist Practitioners (Level 3)
- DSLs and Deputies will attend safeguarding CPD at an appropriate level every year
- The Safeguarding Trustee should attend a Trustee-specific safeguarding training such as the NSPCC Charity Trustee Safeguarding Training upon taking on their role

10.2. Development and Oversight

BRR will seek to continue to improve and develop systems and processes for Safeguarding Adults and Children. We will work with partners to improve our own practice and that of the wider asylum and refugee sector, as well as advocating for improvements in practice at statutory organisations.

The Head of Services will work with DSLs to improve on systems for assessing and managing risk, recording work and outcomes. The Safeguarding Trustee will meet with the Head of Services and DSLs 6 monthly to input on developments, including review of policies and review of an annual report on safeguarding work. The Safeguarding Trustee will produce a report for the full board based on this.

This policy will be reviewed on an annual basis.

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