



# Safeguarding Policy

## November 2025

# Hogarth Youth & Community Centre – Safeguarding Policy

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## Foreword

Hogarth Charitable Trust has a responsibility to protect and safeguard the welfare of children and young people they encounter.

The Designated Safeguarding Officer for Hogarth Youth & Community Centre:  
**Denny Anthony**

In his absence, the Duty Safeguarding Officer is:

- **Naomi Alleyne**
- **Rochelle Manswell- Sterling**

All staff and volunteers are made aware of this policy and the process for reporting concerns.

## Looking Ahead

Hogarth Youth & Community Centre policy is updated every twelve-months or as required and is aligned with the Safeguarding Policy of the London Borough of Hounslow and Keeping Children Safe in Education (2025).

## Safeguarding and promoting the welfare of children

- Safeguarding is defined for the purposes of this guidance as:
- Providing help and support to meet the needs of children as soon as problems emerge
- Protecting children from maltreatment, whether that is within or outside the home, including online
- Preventing the impairment of children's mental and physical health or development
- Making sure that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

## **Child Protection**

Is a part of safeguarding and promoting the welfare of children. Where a child is suffering significant harm, or is likely to do so, action should be taken to protect that child. Such action may be taken under Section 47 and Section 44 of the Children Act 1989. All agencies and individuals should aim to proactively safeguard and promote the welfare of children so that the need for action to protect children is reduced.

The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children and gives local authorities a duty to make enquiries to decide whether they should act to safeguard or promote the welfare of a child who is suffering or is likely to suffer significant harm.

Staff have a responsibility to identify children who may need extra help or who are suffering, or are likely to suffer, significant harm. All staff have a responsibility to take appropriate action, working with other services as needed.

## **Children**

Anyone who has not yet reached their 18th birthday, whether or not they attend activities at Hogarth Youth & Community Centre. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.

## **Contextual Safeguarding**

Contextual Safeguarding is an approach to understanding and responding to young people's experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships. Therefore, children's social-care practitioners and child-protection systems need to engage with individuals and sectors that do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces (and the systems and services that can cause harm in these spaces) are a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child-protection systems in recognition of the fact that young people are vulnerable to abuse beyond their front doors. At Hogarth Youth & Community Centre, we understand that young people are particularly vulnerable to

extra-familial harm and seek to understand the risks and threats in our local area, including criminal and sexual exploitation.

## **Definitions of Harm**

### **Abuse**

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g., via the internet). They may be abused by an adult or adults, or another child or children.

### **Physical Abuse**

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

In addition, the London Borough of Hounslow Children's Services Procedures Manual defines Physical abuse as any form of injury, where there is definite knowledge or reasonable suspicion the injury was inflicted, or knowingly not prevented, by any person having custody of the 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. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including 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.

### **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 the child is aware of what is

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

### **Mandatory Reporting:**

On 25 February 2025 the Crime and Policing bill was introduced into Parliament. It includes provisions to introduce a new statutory duty for individuals undertaking key roles with responsibility for children and young people in England to report sexual abuse when they are made aware of it. It also includes a new criminal offence of attempting to prevent someone reporting child sexual abuse.

The duty will apply to anyone taking part in regulated activity with children in England, such as teachers, social workers, healthcare professionals and those working in voluntary roles with children.

The duty will require those taking part in regulated activity to make a report if they:

- are told about child sexual abuse, either by a child or an adult involved
- witness child sexual abuse in person
- see or hear it in the form of images, videos or audio recordings.

The bill sets out specific conditions where exemptions will apply, including in relation to certain consensual activities between children and specified services where confidentiality is necessary for the safety and wellbeing of children.

If an individual does not carry out the duty, they may be referred to the Disclosure and Barring Service, who will assess their suitability to work or volunteer with children in the future. Anyone who prevents or attempts to deter someone else from reporting will face criminal charges.

Once the Crime and Policing bill has passed through Parliament, the government will develop and publish guidance on the mandatory reporting duty.



## Neglect

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carers failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

This is not an exhaustive list and it must be recognised that it is not the role of staff / volunteers to assess whether children or young people have suffered harm. Staff / volunteers / child protection co-ordinator has a duty to report any concerns about harm in accordance with the Local Safeguarding Children Board, Guidelines and Procedures.

Hounslow has developed a 'Neglect Strategy: A Partnership Approach to Tackling Neglect in Hounslow 2017 – 2019'. The following table taken from the document identifies the risk factors, which increase when in multiple.

Child risk factors	Parental risk factors	Wider determinants of health
<ul style="list-style-type: none"><li>• Disability</li><li>• Chronic ill-health</li><li>• Pre-term or low birth weight baby</li><li>• Emotional and behavioural problems</li></ul>	<ul style="list-style-type: none"><li>• Poor mental health</li><li>• Domestic violence and abuse</li><li>• Alcohol and substance abuse</li><li>• Maternal low self-esteem and self-confidence</li><li>• Poor parental level of education and cognitive ability</li><li>• Poor experience of caring behaviour in parents own childhood</li><li>• Depriving physical and emotional environment in parents own childhood</li></ul>	<ul style="list-style-type: none"><li>• Poverty</li><li>• Unemployment</li><li>• Poor living conditions</li><li>• Social isolation and lack of community support</li></ul>

	<ul style="list-style-type: none"> <li>Experience of physical, sexual, emotional abuse in parents own childhood</li> <li>Health problems during pregnancy</li> </ul>	
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The following should not be viewed as finite. Indicators of abuse may include some of the following and abuse may cut across a number of the categories of abuse. Any of these signs in children should be recorded and the DSL informed. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse.

<u>Physical Abuse:</u>	<u>Emotional Abuse:</u>
<ul style="list-style-type: none"> <li>unexplained injuries / bruises - finger tip bruises e.g. on face</li> <li>torn frenulum - under tongue</li> <li>bites</li> <li>burns</li> <li>bald patches</li> <li>haemorrhages behind eye lashes</li> <li>untreated injuries</li> <li>fear of medical help</li> <li>fear of returning home</li> <li>withdrawal from physical contact</li> <li>arms and legs covered in hot weather</li> <li>aggression</li> <li>improbable excuses</li> </ul>	<ul style="list-style-type: none"> <li>physical, emotional, developmental delays</li> <li>over-reaction to mistakes</li> <li>inappropriate emotional responses</li> <li>thumb-sucking, rocking, hair twisting</li> <li>fear of new situations</li> <li>low self-esteem</li> <li>running away</li> <li>self-mutilation</li> <li>fear of parents being contacted</li> <li>drug/solvent abuse</li> <li>scavenging and stealing</li> <li>anxiety</li> <li>hypervigilance</li> <li>withdrawal / apathy</li> </ul>

<p><b><u>Sexual Abuse:</u></b></p> <ul style="list-style-type: none"> <li>• sudden changes in behaviour/performance</li> <li>• displays of affection in sexual way</li> <li>• acting “like a baby”</li> <li>• distrusts of familiar adults</li> <li>• wetting and soiling</li> <li>• sleep disturbance and nightmares</li> <li>• throat infections, STIs</li> <li>• fear of undressing</li> <li>• tendency to cling</li> <li>• tendency to cry</li> <li>• genital itching</li> <li>• unexplained money</li> <li>• apparent secrecy</li> <li>• depression, withdrawal</li> <li>• anorexia, bulimia</li> <li>• phobias/panic attacks</li> </ul>	<p><b><u>Neglect:</u></b></p> <ul style="list-style-type: none"> <li>• constant hunger</li> <li>• constant tiredness</li> <li>• poor state of clothing</li> <li>• frequent lateness, non-attendance</li> <li>• untreated medical problems</li> <li>• poor personal hygiene</li> <li>• emaciation</li> <li>• low self-esteem</li> <li>• scavenging/stealing</li> <li>• running away</li> </ul>
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## Recognition of Harm

The harm or possible harm of a child may come to your attention in several possible ways;

- Information given by the child, his/her friends, a family member or close associate.
- The child's behaviour may become different from the usual, be significantly different from the behaviour of their peers, bizarre or unusual or may involve 'acting out' a harmful situation in play.
- An injury which arouses suspicion because;
- It does not make sense when compared with the explanation given.
- The explanations differ depending on who is giving them (e.g., differing explanations from the parent / carers and child).
- The child appears anxious and evasive when asked about the injury.
- Suspicion being raised when several factors occur over time, for example, the child fails to progress and thrive in contrast to his/her peers.
- Contact with individuals who pose a 'risk to children' ('Guidance on Offences Against Children', Home Office Circular 16/2005). This replaces the term 'Schedule One Offender' and relates to an individual that has been identified as presenting a risk or potential risk of harm to children. This can be someone who has been convicted of an offence listed in Schedule One of the Children and Young Person's Act 1933 (Sexual Offences Act 2003), or someone who has been identified as continuing to present a risk to children.

The parent's behaviour before the birth of a child may indicate the likelihood of significant harm to an unborn child, for example substance misuse, or, previous children removed from their parents/carers.

## Young carers

Children and young people under 18 who provide or intend to provide care assistance or support to another family member are called young carers. They carry out on a regular basis, significant or substantial caring tasks and assume a level of responsibility, which would usually be associated with an adult. The person receiving care is often a parent but can be a sibling, grandparent or other relative who is disabled, has some chronic illness, mental health problem or other condition connected with a need for care support or supervision. Young carers can be particularly vulnerable.

## Extremism and Radicalisation

### The Prevent Duty: what it means for the Centre

In order for schools and childcare providers to fulfil the Prevent duty, it is essential that staff are able to identify children who may be susceptible to radicalisation, and know what to do when they are identified. Protecting children from the risk of radicalisation should be seen as part of our wider safeguarding duties, and is similar in nature to protecting children from other harms (e.g. drugs, gangs, neglect, sexual exploitation), whether these come from within their family or are the product of outside influences.

It is important to emphasise that the Prevent duty is not intended to stop young people debating controversial issues. On the contrary, Hogarth Youth & Community Centre should provide a safe space in which children, young people and staff can understand the risks associated with terrorism and develop the knowledge and skills to be able to challenge these.

There is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may need help or protection. Children at risk of radicalisation may display different signs or seek to hide their views. Centre staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately. Even very young children may be susceptible to radicalisation by others, whether in the family or outside, and display concerning behaviour. The Prevent duty does not require youth workers to carry out unnecessary intrusion into family life but as with any other safeguarding risk, they must act when they observe behaviour of concern

Hogarth Youth & Community Centre staff need to know when it is appropriate to make a referral to the Prevent team which may result in a referral to the Channel programme. Staff training on the Prevent duty should be undertaken for all members of staff. Channel is a programme which focuses on providing support at an early stage to people who are identified as being susceptible to being drawn into terrorism.

As part of the Counter Terrorism and Security Act 2015, public bodies have a duty to 'prevent people being drawn into terrorism'. This has become known as the 'Prevent Duty'. Where staff are concerned that children and young people are developing extremist views or show signs of becoming radicalised, they should discuss this with the Designated Safeguarding Lead. The Designated Safeguarding Lead has received

training about the Prevent Duty and tackling extremism and is able to support staff with any concerns they may have.

## **Child on Child Abuse**

Staff should be aware that safeguarding issues can manifest themselves via child-on-child abuse. This is most likely to include, but not limited to:

- Bullying (including cyberbullying);
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- Sexual violence and sexual harassment;
- Gender-based violence
- Sexting (also known as youth produced sexual imagery); and
- Initiation-type violence and rituals.

Abuse is abuse and should never be tolerated or passed off as “banter” or “part of growing up”. Different gender issues can be prevalent when dealing with child-on-child abuse. This could for example include girls being sexually touched/assaulted or boys being subject to initiation-type violence.

At Hogarth Youth & Community Centre, we believe that all children have a right to attend our centre in a safe environment. Children should be free from harm by adults in the Centre and other Young People.

We recognise that some young people will sometimes negatively affect the learning and wellbeing of others and their behaviour will be dealt with under our Behaviour Policy.

Occasionally, allegations may be made against young people against others in the Centre, which are of a safeguarding nature. Safeguarding issues raised in this way may include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is likely that to be considered a safeguarding allegation against a child, some of the following features will be found.

### The allegation:

- Is made against an older child and refers to their behaviour towards a younger child or a more vulnerable child
- Is of a serious nature, possibly including a criminal offence
- Raises risk factors for other children in the Centre
- Indicates that other children may have been affected by this student
- Indicates that young people outside the Centre may be affected by this young person

Keeping Children Safe in Education (2025) notes that reports that this type of abuse are likely to be complex and require difficult professional decisions to be made. Each decision must be made on a case-by-case basis in liaison with the DSL or Deputy. The safety of the victim and the support given to them is essential, and they should never be made to feel ashamed for making a disclosure. Should you have concerns about any child who may be harmed or at risk of harm around this area, you should discuss with the DSL and follow the Centre's process.

## **Acting on Concerns**

No professional should assume that someone else will pass on information which they think may be critical to keeping a child safe. If a professional has concerns about a child's welfare and believes they are suffering or likely to suffer harm, then they should share the information with local authority children's social care. All staff, volunteers and trustees working on behalf of Hogarth Youth & Community Centre have a responsibility for the welfare of the children and vulnerable adults that they work with. All staff; volunteers and trustees have a duty to ensure that any suspected incident or allegation relating to a child or young person is reported using the reporting procedures.

## **Seeking Medical Attention**

If a child has a physical injury and there are concerns about abuse.

If medical attention is required then this should be sought immediately by phoning for an ambulance, attending the Emergency Department or Minor Injury Unit depending on the severity of the injury. You should then follow the procedures for referring a child protection concern to Local Authority Children's Social Care.

Any safeguarding concerns should be shared with the Ambulance staff/ Medical and Nursing staff in order that they can appropriately assess and treat the child and share relevant information.

## **Female Genital Mutilation**

FGM is a violation of basic human rights; it is illegal to practise FGM in the UK or to take girls out of the UK for FGM. FGM has been a criminal offence in the U.K. since the Prohibition of Female Circumcision Act 1985 was passed. The Female Genital Mutilation Act 2003 replaced the 1985 Act and makes it an offence for UK nationals or permanent UK residents to carry out FGM abroad, or to aid, abet, counsel or procure the carrying out of FGM abroad, even in countries where the practice is legal.

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

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

Risk factors for FGM include:

- low level of integration into UK society
- mother or a sister who has undergone FGM
- girls who are withdrawn from PSHE
- visiting female elder from the country of origin
- being taken on a long holiday to the country of origin
- talk about a 'special' procedure to become a woman

## **Symptoms of FGM**

FGM may be likely if there is a visiting female elder, there is talk of a special procedure or celebration to become a woman, or parents wish to take their daughter out-of-school to visit an 'at-risk' country (especially before the summer holidays), or parents who wish to withdraw their children from learning about FGM.

Indications that FGM may have already taken place may include:

- difficulty walking, sitting or standing and may even look uncomfortable
- spending longer than normal in the bathroom or toilet due to difficulties urinating
- spending long periods of time away from a classroom during the day with bladder or menstrual problems



- frequent urinary, menstrual or stomach problem
- prolonged or repeated absences from school or college, especially with noticeable behaviour changes (e.g., withdrawal or depression) on the girl's return
- reluctance to undergo normal medical examinations
- confiding in a professional without being explicit about the problem due to embarrassment or fear; talking about pain or discomfort between her legs

### **Managing a disclosure**

- Listen to what the child has to say with an open mind
- Do not ask probing or leading questions designed to get the child to reveal more.
- Never stop a child who is freely recalling significant events
- Make note of the discussion, taking care to record the timing, setting and people present, as well as what was said
- Do not ask children to write a statement
- Never promise the child that what they have told you can be kept secret. Explain that you have responsibility to report what the child has said to someone else
- The designated lead for child protection within Hogarth Youth & Community Centre must be informed immediately

### **Referring concerns about a child**

The Designated Safeguarding Lead will act on behalf of the Hogarth Youth & Community Centre in referring concerns or allegations of harm to the Local Authority Access and Assessment Team or the Police Public Protection Unit. In the case of it being out of hours the Immediate Help Team should be contacted on: 0208 583 2222 or the Duty Social Worker 0208 583 6600.

If the designated safeguarding lead is in any doubt about making a referral it is important to note that advice can be sought from the Local Authority Front Door Team. The name of the child and family should be kept confidential at this stage and will be requested if the enquiry proceeds to a referral.

It is not the role of the Designated Safeguarding Lead, to undertake an investigation into the concerns or allegation of harm. It is the role of the Designated Safeguarding Lead, to collate and clarify details of the concern or allegation and to provide this

information to the Local Authority Access and Assessment Team, or Locality Team if Children's Social Care is already involved, whose duty it is to make enquiries in accordance with Section 47 of the Children Act 1989.

## **Consent**

Professionals should seek to discuss any concerns with the family (including the child where appropriate) and where possible seek their agreement to make referrals to the Local Authority Access and Assessment Team. This should only be done where such discussion and agreement seeking will not place the child at an increased risk of significant harm.

It should be noted that parents, carers or children may not agree to information being shared, but this should not prevent referrals where child protection concerns persist. The reasons for dispensing with consent from the parents / carers or child should be clearly recorded and communicated with the Local Authority Access and Assessment Team.

In cases where an allegation has been made against a family member living in the same household as the child and it is your view that discussing the matter with the parent would place the child at risk of harm, or where discussing it may place a member of staff / volunteer at risk, consent does not have to be sought prior to the referral being made.

## **Preparing to Discuss Concerns about a Child with Children's Social Care**

Be clear on the reasons you have concerns, is it based on:

- What you have seen
- What you have heard from others
- What has been said to you directly

Be clear on what action you have taken and consider the following:

- This is what I have done
- What more do I need to do?
- Are there any other children in the family?
- Is the child in immediate danger?

In the conversation that takes place, the Duty Social Worker will seek to clarify:

- The nature of the concerns

- How and why, they have arisen
- What appear to be the needs of the child and family; and
- What involvement they are having or have had with the child and / or family

Questions Children's Social Care may ask at Initial Contact:

- Agency (i.e., school, etc) address and contact details of referrer;
- Has consent to make the referral been gained? Information regarding parents' knowledge and views on the referral;
- Where consent has not been sought to make a referral, you will be asked to explain what informed your decision making;
- Full names, dates of birth and gender of children;
- Family address and, where relevant, school/nursery attended;
- Previous addresses;
- Identity of those with Parental Responsibility;
- Names and dates of birth of all members of the household;
- Ethnicity, first language and religion of children and parents;
- Any special needs of the children or of the parents and carers
- Any significant recent or past events;
- Cause for concern including details of allegations, their sources, timing and location;
- The child's' current location and emotional and physical condition;
- Whether the child needs immediate protection;
- Details of any alleged perpetrator (name, date of birth, address, contact with other children);
- Referrer's relationship with and knowledge of the child and his or her family;
- Known involvement of other agencies;
- Details of any significant others;
- Gain consent for further information sharing / seeking;
- The referrer should be asked specifically if they hold any information about difficulties being experienced by the family/household due to domestic violence, mental illness, substance misuse and/or learning difficulties.

## **Allegations against staff members / volunteers**

If any member of staff or volunteer has concerns about the behaviour or conduct of another individual working within the group or organisation including:

- Behaving in a way that has harmed or may have harmed a child.
- In terms of committing a criminal offence against a child or children in a way that indicates that they are unsuitable to work with children.

The nature of the allegation or concern should be reported to the Designated Safeguarding Lead: Denny Anthony, for dealing with allegations within the organisation immediately, or to the Deputies Naomi Alleyne or Rochelle Manswell – Sterling.

In the case where an allegation is made against Denny Anthony, this should be reported to the Chair of Trustees Fred Lucas or in his absence please contact: Jeannetta Orton, Jonathan Walker or Tony Bowden. Please visit the website for the contact details for Youth Work staff & Trustees: <https://www.hogarthtrust.org.uk>.

The member of staff who has a concern or to whom an allegation or concern is reported should not question the child or investigate the matter further.

The Designated Officer for Hogarth Youth & Community Centre will report the matter to the Local Authority Designated Officer (LADO) on 0208 583 – 5730 or the Duty Social Worker on 0208 583 6600.

## **Whistleblowing**

Staff, trustees and volunteers should report anyone working within Hogarth Youth & Community Centre who is acting in a way which is unlawful or falls below proper standards or is not in line with this policy. Anyone involved in whistleblowing will be supported and your supervisor or Line Manager will ensure that proper procedures are followed.

Anyone looking at whistleblowing should firstly discuss their concerns with their supervisor or Line Manager and then use the grievance procedure to report their concerns.

## Safe recruitment and selection

It is important when recruiting paid staff and volunteers to adhere to the organisation's recruitment policy. This will ensure potential staff and volunteers are screened for their suitability to work with children and young people.

The Disclosure and Barring Service (DBS) can help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA).

<https://www.gov.uk/government/organisations/disclosure-and-barring-service/about>

A person who is barred from working with children or vulnerable adults will be breaking the law if they work or volunteer or try to work or volunteer with those groups. If Hogarth Youth & Community Centre knowingly employs someone who is barred to work with those groups, they will also be breaking the law. If there is an incident where a member of staff or volunteer must be dismissed because they have harmed a child or vulnerable adult, or would have been if they had not left, Hogarth Youth & Community Centre will notify the DBS.

## Rehabilitation of Offenders Act 1974

[www.Legislation.gov.uk](http://www.Legislation.gov.uk)

What is the Rehabilitation of Offenders Act? The Rehabilitation of Offenders Act (1974) is a piece of legislation introduced to help ex-offenders re-enter the workforce. It enables some minor offences to become 'spent', or disregarded, after a set rehabilitation period has been completed.

## Vetting Process

To ensure that both paid and unpaid staff are suitable to work with children and young people we complete the following:

- Disclosure and Barring Service check
- 2 references, one of which should be from a previous employer
- Check identity and 'right to work' status
- Evidence of qualification required for the role.

## **Staff Ratio**

The ratio of staff/volunteers to children will be one to eight for those aged 8 years and under and one to ten for those aged 9 years or over as laid down by guidance issued under the Children Act (1989). The ratio of staff/volunteers will be reviewed and risk assessed when working with children and young people with disabilities. Outdoor adventure activities will always have a minimum of 2 appropriately trained staff, one of which must hold a First Aid at Work qualification.

## **Risk Assessment**

The premises and all activities are thoroughly risk assessed to ensure the safety of all involved. And more recently we have added a COVID-19 Risk Assessment in terms of safeguarding young people while attending the youth centre.

## **Transporting children and young people**

When transporting children and young people, two staff will be present when transporting in a minibus or other forms of public and private transport. In exceptional circumstances and with the approval of the supervisor, leader in charge or Line Manager, staff can transport children and young people in their personal vehicles, providing they have business insurance and another member of staff or volunteer in the vehicle with them.

## **Media Coverage**

Hogarth Youth & Community Centre occasionally takes photographs of children and young people taking part in activities and events for evidencing our work and for publicity. At all times written permission from parents/guardians/carers will be obtained before photographs are used for publishing.

## **Registers for members and visitors**

All children and young people using the centre will be signed in on the project registers. All visitors will be required to sign in and out of the visitor's books in the staff office.

## **Personal Information**

When handling personal records or sensitive information, all staff, volunteers and trustees must follow the Data Protection Policy and keep records locked away securely and destroy any information which is no longer needed by shredding it.

## **Emergency Contact Details**

We retain emergency contact details for all the children and young people who attend our off-site trips and events. This information is kept for a maximum of three years; in the event a claim is made against Hogarth Youth & Community Centre.

## **External Organisations**

All external agencies, consultants and organisations who will be working with children and young people at the centre will be required to either adopt this Safeguarding Policy or show proof that they have their own policy. All external staff who will be undertaking work at the centre, with the children and young people, must provide details of their DBS.

# Appendix 1

## Seven Golden rules of information sharing

KCSIE (2025) notes the importance of information sharing between practitioners and local agencies. The Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purpose of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare and protect the safety of children. This includes allowing practitioners to share information without consent where there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner but it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk.

'Information Sharing: Guidance for practitioners and managers' (2008) is aimed at supporting good practice in information sharing by offering clarity on when and how information can be shared legally and professionally to achieve improved outcomes. It can be especially useful in supporting early intervention and preventative work where decisions about information sharing may be less clear than in safeguarding or child protection situations.

Below are the 7 golden rules of information sharing that this guidance recommends:

1. Remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
2. From the outset, be open and honest with the person (and/or their family where appropriate) about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. Seek advice if you are in any doubt, without disclosing the identity of the person where 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 in the public interest. You will need to base your judgments 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 decision and the reason for it – 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.

## Appendix 2

### Considerations when Contacting another Agency/Service

#### Effective Communication between Agencies

Effective communication requires a culture of listening to and engaging in, dialogue within and across agencies. It is essential that all communication is as accurate and complete as possible and clearly recorded.

Accuracy is key, without its effective decisions cannot be made and equally, inaccurate accounts can lead to children remaining unsafe, or to the possibility of wrongful actions being taken that affect children and adults

Before contacting another agency, think about why you are doing it, is it to:

#### Share Information

To share information is the term used to describe the situation where practitioners use their professional judgement and experience on a case-by-case basis to decide whether and what personal information to share with other practitioners to meet the needs of a child or young person (CWDC 2009)

#### Signpost to another Service

The definition to signpost is to indicate direction towards. It is an informal process whereby a professional or a family is shown in the direction of a service.

If someone is signposted to a service it is because accessing the service may enhance the family's quality of life, but there would be no increased risk to the child or young person should the service not be accessed.

No agency is responsible for the monitoring or recording of signposting.

#### Get Advice and Guidance

Seeking advice and guidance at any time, making a general query or perhaps consulting with a specialist colleague within your own organisation (or from another agency) may enhance the work that you are doing with a child, young person or family at any stage. It could be that you want further information about services available or that you want some specialist advice or perhaps need to consult about an issue or query for instance to ask if making a referral is appropriate.

The name of the child and family should be anonymised at this stage unless agreement to share the information has already been obtained.

It is vital that you record that you have sought information and advice in your own records. The agency you are contacting may not record this information, particularly if the case is not open or active with them. It should be agreed between agencies in this situation as to who records what information.

### Facilitate Access to a Service

If you think that a family may benefit from a service then directing, signposting or facilitating is appropriate. For example, a family approaches your service and asks for some advice about leisure activities in the local area. You give them the information and directions to the nearest open access leisure centre.

### Refer a Child or Family

If you think that by not accessing a service, a child's situation could deteriorate then a referral is appropriate. However, a referral is only the start of the process. You as the referrer have a responsibility to monitor that the service has been taken up and the child's situation has improved.

Sometimes you may need to draw on other support services, for example when an intervention has not achieved the desired outcomes and the child/young person requires more specialist or sustained support.

A specific gap in services to meet a need or any level of concern warrants follow up and monitoring to ensure there is no risk to children.

At the end of the conversation both parties must be clear about the outcome and the next course of action.

### Professional Differences

Where there are any professional differences about a decision, course of action or lack of action you should consult with a Senior Manager within your own organisation about next steps.

### Recording

Well-kept records about work with a child and his or her family provide an essential underpinning to good professional practice. Safeguarding and promoting the welfare of children requires information to be brought together from several sources and

careful professional judgements to be made based on this information. These records should be clear, accessible and comprehensive, with judgements made and decisions and interventions carefully recorded. Where decisions have been taken jointly across agencies, or endorsed by a manager, this should be made clear. (Working Together 2010)

You should record your decision and the reasons for it, whether you decide to share information. If the decision is to share, you should record what information was shared and with whom.

You should work within your agency's arrangements for recording information and within any local information sharing procedures in place. These arrangements and procedures must be in accordance with the Data Protection Act 1998 (Information Sharing Guidance for Practitioners and Managers 2008)

## Appendix 3

### Legislation and local area documents relating to this policy

#### Legislation:

- Children Act 1989, 2004
- Education Act 1996, 2002 (Section 175)
- Keeping Children Safe in Education, DfES, 2025 (Part One and Annex A must be read for those working directly with children)
- Working Together to Safeguard Children, DfE, 2018
- Supervision of Activity with Children, DfE, 2013
- Promoting the Education of Looked After Children, and previously looked after children (2108)
- Children Missing in Education, DfE 2016
- The Prevent Duty: Departmental Advice for Schools and Childcare Providers, DfE 2015
- Mandatory Reporting of FGM – Home Office / DfE 2016 (Duty in force from Oct 2015)
- 'What to do if you think a child is being abused' (DfE 2015)
- 'Information Sharing' Advice for practitioners providing safeguarding services to children, young people, parents and carers (DfE 2018)
- Regulated activity in relation to children: scope (DfE 2012)
- Sexual violence and sexual harassment between children in schools and colleges (DfE 2018)
- Child Sexual Exploitation (DfE 2017)

#### Local area procedures:

- Children's Social Care Thresholds Guidance & Assessment Protocols Statutory & Common Assessment Frameworks (HCSB, 2016)
- Hounslow Children's Safeguarding Partnership: <http://www.hscb.org.uk>

## Appendix 4

### Model Reporting Form

#### Concern Form

Please complete this form if you have any concerns about a young person

Young person's Name			
Day/Date/Time		DoB	
Member(s) of staff noting concern			

Concern	
Signature:	Date:

Actions Taken			
Date	Person taking action	Action	Signature

Please pass this form to the Designated Safeguarding Lead when completed

## Appendix 5

### Staff Code of Conduct

#### Staff Code of Conduct

##### Purpose, Scope and Principles

A Code of Conduct is designed to give clear guidance on the standards of behaviour all staff are expected to observe, and the Designated Safeguarding Lead should notify staff of this code and the expectations therein.

##### Setting an example

- All staff who work in Hogarth Youth & Community Centre set examples of behaviour and conduct which can be copied by young people. Staff must therefore avoid using inappropriate or offensive language at all times.
- All staff must, therefore, demonstrate the highest standards of conduct in order to encourage our young people to do the same.
- All staff must also avoid putting themselves at risk of allegations of abusive or unprofessional conduct.
- This Code helps all staff to understand what behaviour is and is not acceptable.

##### Safeguarding Children and Young People

- Staff have a duty to safeguard children and young people from:
  - physical abuse
  - sexual abuse
  - emotional abuse
  - neglect
- The duty to safeguard young people includes the duty to report concerns about a young person to the Designated Safeguarding Lead (DSL) for Child Protection.
- The youth centre's DSL is the Youth Officer, supported by the Senior Youth Worker who is the Deputy DSL.
- Staff must not demean or undermine young people, their parents or carers, or colleagues.
- Staff must take the upmost care of young people under their supervision with the aim of ensuring their safety and welfare.

##### Confidentiality

- Where staff have access to confidential information about young people or their parents or carers, staff must not reveal such information except to those colleagues who have a professional role in relation to the young person.
- All staff are likely at some point to witness actions which need to be confidential. For example, where a young person is bullied by another young person (or by a member of staff), this needs to be reported and dealt with in accordance with the appropriate procedure. It must not be discussed outside of work, including with the young person's parent or carer, nor with colleagues except with a senior member of staff with the appropriate role and authority to deal with the matter.
- However, staff have an obligation to share with the Designated Safeguarding Lead (or Deputies) any information which gives rise to concern about the safety or welfare of a young person. Staff must never promise a child that they will not act on information that they are told by the young person.



## Appendix 6

### Training Schedule

The Designated Safeguarding Lead and Deputy should hold a minimum of a Level 4 qualification in Safeguarding and should regularly take part in training in a variety of safeguarding matters via the Local Safeguarding Board. Their training records should be shared with the Trustees on a regular basis.

All members of staff working with children and young people should undertake Child Protection and Safeguarding training on induction and complete annual refresher training. The Designated Safeguarding Lead is responsible for arranging this.

Hogarth Youth & Community Centre recognises that charity trustees have safeguarding responsibilities. The Designated Safeguarding Lead is responsible for arranging appropriate training for new trustees on appointment and for reporting to trustees on the training of staff and volunteers.

## Appendix 7

### Camera and Image Use Policy

Hogarth Youth and Community Centre work with children and families as part of its activities.

The purpose of this policy statement is to:

- Protect children and young people who take part our services, events and activities, specifically those where photographs and videos may be taken
- Set out the overarching principles that guide our approach to photographs/videos being taken of children and young people during our events and activities
- To ensure that we operate in line with our values and within the law when creating, using and sharing images of children and young people.
- This policy statement applies to all staff, volunteers and other adults associated with our Centre.

#### Legal framework

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England.

#### We believe that:

- Children and young people should never experience abuse of any kind
- We have a responsibility to promote the welfare of all children and young people and to take, share and use images of children safely.

#### We recognise that:

- Sharing photographs and films of our activities can help us celebrate the successes and achievements of our children and young people, provide a record of our activities and raise awareness of our organisation
- The welfare of the children and young people taking part in our activities is paramount
- Children, their parents and carers have a right to decide whether their images are taken and how these may be used, regardless of age, disability, gender reassignment, race, religion or belief, sex or sexual orientation

- Consent to take images of children is only meaningful when children, their parents and carers understand how the images will be used and stored, and are fully aware of the potential risks associated with the use and distribution of these images
- There are potential risks associated with sharing images of children online.

We will seek to keep children and young people safe by:

- Always asking for written consent from a child and their parents or carers before taking and using a child's image
- Always explaining what images will be used for, how they will be stored and what potential risks are associated with sharing images of children
- Making it clear that if a child or their family withdraw consent for an image to be shared, it may not be possible to delete images that have already been shared or published
- Changing the names of children whose images are being used in our published material whenever possible (and only using first names if we do need to identify them)
- Never publishing personal information about individual children and disguising any identifying information (for example the name of their school or a school uniform with a logo)
- Making sure children, their parents and carers understand how images of children will be securely stored and for how long (including how we will control access to the images and their associated information)
- Reducing the risk of images being copied and used inappropriately by:
- Only using images of children in appropriate clothing (including safety wear if necessary)
- Avoiding full face and body shots of children taking part in activities such as swimming where there may be a heightened risk of images being misused
- Using images that positively reflect young people's involvement in the activity.

We will also develop a procedure for reporting the abuse or misuse of images of children as part of our child protection procedures. We will ensure everyone involved in our organisation knows the procedures to follow to keep children safe.

### **Photography and/or filming for personal use**

When children themselves, parents, carers or spectators are taking photographs or filming at our events and the images are for personal use, we will publish guidance

about image sharing in the event programmes and/or announce details of our photography policy before the start of the event.

This includes:

- Reminding parents, carers and children that they need to give consent for Hogarth Youth & Community Centre to take and use their images
- Asking for photos taken during the event not to be shared on social media or asking people to gain permission from children, their parents and carers before sharing photographs and videos that include them
- Recommending that people check the privacy settings of their social media account to understand who else will be able to view any images they share
- Reminding children, parents and carers who they can talk to if they have any concerns about images being shared.

### **Photography and/or filming for the Centre's use**

We recognise that our group leaders may use photography and filming as an aid in activities such as music or drama. However, this should only be done with our permission and using our equipment.

Children, young people, parents and carers must also be made aware that photography and filming is part of the programme and give written consent.

If we hire a photographer for one of our events, we will seek to keep children and young people safe by:

- Providing the photographer with a clear brief about appropriate content and behaviour
- Ensuring the photographer wears identification at all times
- Informing children, their parents and carers that a photographer will be at the event and ensuring they give written consent to images which feature their child being taken and shared
- Not allowing the photographer to have unsupervised access to children
- Not allowing the photographer to carry out sessions outside the event or at a child's home
- Reporting concerns regarding inappropriate or intrusive photography following our child protection procedures.

## **Photography and/or filming for wider use:**

If people such as local journalists, professional photographers (not hired by Hogarth Youth & Community Centre) or students wish to record one of our events and share the images professionally or in the wider world, they should seek permission in advance.

They should provide:

- The name and address of the person using the camera
- The names of children they wish to take images of (if possible)
- The reason for taking the images and/or what the images will be used for
- A signed declaration that the information provided is valid and that the images will only be used for the reasons given.

Hogarth Youth & Community Centre will verify these details and decide whether to grant permission for photographs/films to be taken. We will seek consent from the children who are the intended subjects of the images and their parents and inform the photographer of anyone who does not give consent.

At the event we will inform children, parents and carers that an external photographer is present and ensure the photographer is easily identifiable, for example by issuing them with a coloured identification badge.

If Hogarth Youth & Community Centre is concerned that someone unknown to us is using their sessions for photography or filming purposes, we will ask them to leave and (depending on the nature of the concerns) follow our child protection procedures.

## **If consent to take photographs is not given:**

If children, parents and/or carers do not consent to photographs being taken, we will respect their wishes. We will agree in advance how they would like to be identified so the photographer knows not to take pictures of them, and ensure this is done in a way that does not single out the child or make them feel isolated.

We will never exclude a child from an activity because we do not have consent to take their photograph

## **Storing images:**

We will store photographs and videos of children securely, in accordance with our safeguarding policy and data protection law.

We will keep hard copies of images in a locked drawer and electronic images in a protected folder with restricted access. Images will be stored for a period of no more than one year.

We will never store images of children on unencrypted portable equipment such as laptops, memory sticks and mobile phones.

Hogarth Youth & Community Centre does not permit staff and volunteers to use any personal equipment to take photos and recordings of the children. Only cameras or devices belonging to the Centre should be used.