



Safeguarding children Policy

Shantona Women's Centre was established in 1998 to help build the confidence and independence of the Bangladeshi women, young people and children living in Harehills and Chapeltown. Shantona is committed to safeguard children and young people and their families. Shantona recognizes the importance of listening to children and responding appropriately.

What is child abuse?

There are many different forms of abuse and many ways in which abuse can happen.

In law young people are children up to their eighteenth birthdays, although in practice sixteen and seventeen year olds are generally treated as adults.

Children are abused by direct actions of an adult, such as a physical beating. Alternatively children are abused because an adult fails to provide a child's basic needs for example, nutritious food and warmth etc. or because of inappropriate behaviour against a child e.g. sexual or because a child is threatened, taunted or constantly shouted at.

Abuse can take place within the family environment, people they know or even complete strangers. Victims are usually abused by people whom they know/trust.

The main forms of child abuse are:

Physical abuse

When an adult physically hurts or injures a child by hitting, shaking, squeezing, burning and biting. Giving children alcohol, inappropriate drugs or poison and attempting suffocation or drowning are forms of abuse.

Another form of Physical abuse is Female Genital Mutilation (FGM) this refers to procedures that intentionally alter, mutilate or cause injury to the female genital organs for non-medical reasons. FGM is medically unnecessary and can have serious health consequences, both at the time it is carried out and in later life.

In the event of a concern being identified regarding FGM you should immediately call west Yorkshire police 101 and complete the form in appendix 4.

Sexual abuse

When people use children to meet their own sexual satisfaction. This might be full sexual intercourse, oral sex, masturbation, and intercourse or fondling, showing children pornographic videos or magazines.

Emotional abuse

Persistent lack of love and affection, being constantly shouted at, threatened or taunted, putting children down constantly. In some families one child may be singled out for this treatment and even siblings may be encouraged to scapegoat their brother or sister.

Neglect

When an adult fails to meet a child's basic needs for sufficient nutritious food, love, warmth, care and concern, praise, encouragement and stimulation. When children are constantly left on their own unsupervised.

These definitions are taken from **Working Together to Safeguard Children 2010**.

Definition of CSE

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

What to do if you are concerned about a child at risk of CSE

In the event of a concern being identified regarding sexual exploitation an immediate referral should be made to Children's Social Work Service, with an accompanied Risk Matrix. **Please see appendix 1**

Whilst legislation clearly exists to protect children and young people from sexual exploitation, prosecution of abusing adults can be difficult. It is unlikely that a complaint will be made by a child or young person when they feel threatened by the abusing adult(s), or when their families are being threatened or where they are dependent on the reward from that adult(s) or where they perceive themselves to be at risk of prosecution.

Therefore utilising legislation and police intelligence gathering of third party information is key in taking matters forward. **Please see appendix 2**

Leeds LSCBs Protocol for Child Sexual Exploitation outlines actions to take at each of the three levels of sexual exploitation that will support a stronger likelihood of conviction.

All members of staff working with children have a responsibility to inform the Director or Designated child protection officer of any concerns they may have about the children in their care whether by direct observation of the child, information received, or, a combination of the two.

**Nahid Rasool (Chief Executive) Senior designated Child protection officer
Shantona 01132497120
Mobile: 07950447603**

**Ashia Akhtar- (Designated child protection officer)
Shantona:01132497120**

**Sanam Imran (Early Years - Designated Child Protection officer)
Shantona: 01132497120**

Safeguarding children stage 1

If you are worried and you think a child in your care has been or is being abused, what should you do?

Talk to your leader if you are an assistant. Leaders should contact the Director or the Designated Child Protection Officer.

Your leader or Director will be able to offer you the support and advice you will need, if you have to report the abuse.

The Director or Designated Child Protection Officer should follow the point's below:

If you suspect that a child or young person is being harmed or is at risk of being harmed then you have a duty to report it **immediately**.

If you are concerned about a child, these are the numbers to call:

Practitioners Safeguarding Children	
01133760336 (office Hours)	
(Out of hours 01133760469)	
Emergency Duty Team 07712106378	
For Urgent action	999
To report a crime	101

from the allocated social worker. Alternatively advice may be sought from a Designated Senior Person or Named Professional from within the referrer's own agency. **Nahid Rasool Shantona 01132497120 Mobile: 07950447603**

- Where consultation is sought and Children's Social Care Services then conclude that a referral is required; the information provided so far must be regarded and responded to as a referral, and the referrer must be advised accordingly and must confirm their referral in writing.

WHEN IN DOUBT, CONCERNS MUST BE SHARED with LCC Local Authority Designated Officers (they can be contacted on 01132478652)

- Explain briefly why you are telephoning and that you are acting in loco parentis at that time. You will need to give details of the child so ensure you have all this information on the child's file
- You will need to give details of the child, his/her name, address, telephone number and date of birth. The name of his/her health visitor and GP will also be helpful. Is there a Early Intervention Assessment in place
- Explain what you have observed. Put in context. Describe the child's behaviour etc. What are the current concerns
- Explain what the child has said, what explanations have been given. Be specific.
- Explain what you know of the family structure, brothers, sisters and others living in the house etc.
- Give details of when the child will be collected and where the parents can be contacted if necessary.
- Ask if further information is required. Ask to be kept informed.
- Record information – what document would you use. Respect confidentiality
- If a referral is made direct to Children's Social Work Service this must be followed up in writing

Safeguarding children Disclosure

When a child is telling me about the abuse they have suffered what must I remember?

- 1 Stay calm
- 2 Do not transmit shock, anger or embarrassment
- 3 Reassure the child. Tell them that you are glad that they are speaking to you
- 4 Believe the child and tell them that you believe them. Children very rarely lie about abuse, but they may have tried to tell others and not been heard or believed.
- 5 Tell them that you know that it is not their fault.
- 6 Never enter into a pact of secrecy with the child. Assure them that you will try to help them, but let them know that you may have to tell other people in order to do this.
- 7 Encourage the child to talk, but do not ask “leading questions” or press for information. Listen and remember.
- 8 Check that you have understood correctly what the child is trying to tell you.
- 9 Praise the child for telling you.
- 10 Do not tell the child that what has happened to them is dirty.
- 11 Do not comment on the offender or their morality, it may be someone they love.
- 12 Be aware that the child may try to retract all they have told you.
- 13 As soon as you can afterwards, make a detailed record of the conversation, using the child’s own language. Include any questions you may have asked, but do not add comments or opinions.

Afterwards

You cannot deal with it yourself; seek advice from your Director/designated child protection officer and through safeguarding supervision. Clear indications or disclosures of abuse must be reported Children’s Social Work Services or the Police immediately, using the procedures, which have been explained to you. (See Child Protection Stage One on page 4 of this policy). If a referral is made to Children’s Social Work Services Ofsted will be informed immediately.

Training

- During the first week of commencing employment all new staff are given a full induction and an employee handbook which covers all of the necessary safeguarding policies in detail.
- LSCB Training delivers Safeguarding training. It is compulsory for all staff that work with children to attend Level 1 safeguarding children training.

<https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=3&cad=rja&uact=8&ved=0ahUKEwj8-DFj8nOAhULBcAKHUC-ADMQFggoMAI&url=http%3A%2F%2Fwww.leedslscb.org.uk%2FPractitioners%2Ftraining%2FWorking-together&usg=AFQjCNG8454QnzA07G0kX0WOO8H43MVA0w>

- Shantona provides in house training in line with LSCB and Ofsted requirements.
- All staff must attend the refresher training every three years

Safer Recruitment

- The chair of the panel needs to be safer recruitment trained
- All applicants for employment with Shantona Women's Centre will undergo a disclosure check with the DBS and that satisfactory references are received from previous employers. In addition gaps in employment history are investigated during the recruitment process and proof of relevant qualification is sought
- No worker/ staff should be or will not be left alone for periods of time with individual children or with small groups.

Confidentiality

- All suspicions and investigations will be kept confidential, shared only with those whom need to know.
- Any records relating to child protection issues will be stored securely for five years.

- All employees of the centre have a duty to ensure the confidentiality of information relating to both students and employees. In the case of young children, the parent will be consulted or involved unless to do so would put a child at further risk.

Allegations about a member of Staff

- Any suspicion, allegation or actual abuse of a child/ young person by a member of staff must be reported to the Local Authority Designated Officer Director, or the designated child protection officer as soon as possible **immediately** of the initial concern arising.
- The Local Authority Designated Officers in Leeds can be contacted on 01132478652
Between them they operate a duty system for LADO Notifications.
Carolyn Hargreaves carolyn.hargreaves@leeds.gcsx.gov.uk
Ted O'Sullivan ted.osullivan@leeds.gcsx.gov.uk

On being notified of any such matter the Director or Designated child protection officer shall:

- Prevent the member of staff from working with children until a thorough investigation has been taken place if there is a sufficient ground to do so
- Take steps as s/he considers necessary to ensure the safety of the child/young person in question and any other child who might be at risk
- Report the matter to the police, children social work services in accordance with the process outlined in stage 1
- Ensure that a report of the matter is completed by the person who reported the original concern and that confidentiality of information or communications is ensured at all times.
- If the Director or Designated child protection officers are not available the member of staff must go directly to the most senior member of staff.
- Where the complaint is made against the director then the matter will be reported to the management committee who will inform the LSCB.

Section on useful contact numbers

Useful services & helplines

Services in Leeds

The Market Place provides services include a drop in, counselling and other one-to-one support. All services are free and confidential, and available to 13–25 year olds in Leeds.

Address: 8–18 New Market Street, Leeds, LS1 6DG

Tel: 0113 2461659.

Website: www.themarketplaceleeds.org.uk

Leeds Survivor Led Crisis Service

(SLCS) works with people aged 16 and over and have specialist knowledge and experience of working with suicide and self-harm. Dial House is a place for sanctuary open 6pm–2am Friday–Monday. Visitors can access when they are in crisis. Please call from 6pm on the night you would like to request a visit.

Address: Dial House, 12 Chapel Street, Halton, Leeds, LS15 7RW

Tel: 0113 2609328

Website: www.slcs.org.uk

Public Health Resource Centre provides health promotion resources available free to professionals.

Address: Technorth, 9 Harrogate Road, Chapel Allerton, Leeds LS7 3NB

Tel: 0113 224 3174

Website: www.phrc.leeds.gov.uk

Archway provides support to young people aged 16–25. Services include a drop in, counselling, and a variety of support work and activities.

Address: 95 Roundhay Road, Leeds, LS8 5AQ

Tel: 0113 383 3900

Website: archwayleeds.blogspot.co.uk

TESS & www.selfinjurysupport.org.uk - This is a website for women in emotional distress and who self-harm.

The website has ideas for support and coping with difficult feelings, and also has an e-mail and text support service for young women aged up to 25 (called TESS) They also offer the RAINBOW Journal, which is free to under 18's.

Help lines

ChildLine – free and confidential helpline for children and young people

Tel: 0800 11 11

Samaritans – confidential helpline

Tel: 08457 90 90 90 (24 hours)

Connect is a helpline open 6–10:30pm every night of the year for people over 16 living in Leeds. The service provides emotional support and information for people in distress. Run by Leeds Survivor Led Crisis Service.

Tel: 0808 800 1212

HOPELineUK – a specialist helpline staffed by trained professionals who give non-judgemental support, practical advice and information to:

- children, teenagers and young people up to the age of 35 who are worried about themselves
- anyone who is concerned about a young person

Tel: 0800 068 41 41

Young Minds Parents Helpline – a free and confidential national helpline for parents.

Tel: 0808 802 5544 (9:30am – 4pm) Monday to Friday

Learning Disability Helpline

provides information and advice.

Tel: 0808 808 1111

Appendix 1. CSE Risk Assessment Matrix

Children’s Social Work Service

Child Sexual Exploitation Information Report and Risk Identification Tool

This report and tool should be developed alongside with and complimenting any other plan for the young person’s welfare

The following information is required when there are concerns regarding a child being at risk/or experiencing Child Sexual Exploitation.

Please send this form electronically to:

specialist.safeguarding@leeds.gov.uk, via secure email

specialist.safeguarding@leeds.gcsx.gov.uk

or by fax to 0113 3950361

Please ensure all the fields below are complete.

Date this tool was completed		Date sent to ISU :	
Named worker leading on this Report and tool :		Contact Details ;	
Line manager of named worker :		Line Manager Details	

• Information Report – child or young person’s details

Please ensure all fields are completed accurately and in full.

FULL name (+ aliases) :	D.O.B. :	Age :	Home Address and contact number :	Participated :
				Y N
Emergency contact :	Gender :	Ethnicity :	Placement Address and contact number :	Legal Status :
	M F			
Details of Primary Carer:	Foster Care?	Adopted? :	ESCR Number : (CSWS only)	CPP Status :
	Y N	Y N		Previous / Current
GP Details and contact number :	Disability?	Religion :	First language :	Sexual orientation :
	Y N			Y N
Is the Child or Young Person missing? :	Known to Police :	Known to YOS? :	Date of Referral to ISIS / Blast :	Known to CAMHS or TSWT?
Y N	Y N	Y N		Y N

• Please provide any other relevant details and complete the Risk Identification Tool

Child Sexual Exploitation Risk Identification Form

In order to identify children at risk of sexual exploitation and follow a clear plan of effective inter-agency action, consider ALL of the following indicators, then score and proceed according to the LSCB policy risk assessment.

Note: where a child under the age of 13 years old, and /or has learning disability and there are concerns regarding sexual exploitation, a referral to Children’s Social Work Services is required.

The table below is only a guide to inform professional judgement; one tick in a high risk box, or several in low risk, may indicate a serious risk of sexual exploitation, alternatively this might be an indication of other concerns that require addressing. Please note the list provided within this toolkit is not exhaustive and that the indicators are simply those mostly commonly recognized to indicate a risk of sexual exploitation.

Please place a tick against ALL risk indicators, and after each heading please provide analysis of your professional judgement.

	Risk Indicators		
Engagement with services	No risk identified	No concerns identified in this area which relate to sexual exploitation. Concerns relate to behavior’s which relate to normal child /young person behavior’s.	
	Low	Lack of engagement, some difficulty in contacting the child /young person which raises concern.	
	Medium	Some engagement but sporadic contact, often misses appointments, limited explanation.	
	High	Brief engagement, frequently fails to attend appointments, or no contact/ engagement with services.	
Analysis			

	Risk Indicators		
Education	No risk Identified	No concerns identified in this area which relate to sexual exploitation	
	Low	Mainly engaged in employment / school /training Some truanting	
	Medium	Full time education /training or employment but irregular /poor attendance. Attendance at PRU Regular breakdown of school /training placements due to behavioral problems.	
	High	Regular breakdown of school /training placements due to behavioral problems Not engaged in education/employment or motivated to be.	

		Excluded	
Analysis			

		Risk Indicators	
Running away / going missing	No risk identified	No concerns identified in this area which relate to sexual exploitation. Concerns relate to behavior's which fall within normal child /young person behavior.	
	Low	Often comes home late. Incidents of absence without permission and returning late.	
	Medium	Often staying out late or overnight without permission /explanation. Whereabouts at times unknown Episodes of running away / going missing / unauthorised /temporary absences. Regular breakdown of placements due to behavioral problems.	
	High	Frequently reported missing due to /extensive and /or frequent periods of missing /running away /missing from placement. Whereabouts often unknown. Looking well cared for /not hungry, despite having no known base. Regular breakdown of placements due to behavioral problems. Pattern of street homelessness.	
Analysis			

		Risk Indicators	
Sexualised Risk Taking	No risk identified	No concerns identified in this area which relate to sexual exploitation.	
	Low	Some concerns about sexualised dress / attire. Limited reports about getting into cars with unknown (to parent /carers) adults Contacting /meeting unknown adults /older peers through the internet	
	Medium	Overt sexualised dress / attire. Reports of getting into cars with unknown adults Having access to premises unknown to parents/carers Concerns about the level of contact with adults /older peers through the internet Clipping (offering to have sex and then running upon payment) Using of internet to share /send inappropriate images Older boyfriend (5 + years)	

	High	<p>Overt sexualised dress / attire.</p> <p>Reported to be getting into cars with unknown adults</p> <p>Having access to premises unknown to parents /carers</p> <p>Clipping (offering to have sex and then running upon payment)</p> <p>Use of internet to regularly meet unknown adults /older peers.</p> <p>Use of internet to share /send inappropriate images</p> <p>The child /young person is associating with other children /young people/adults known to be involved with sexual exploitation.</p> <p>Evidence of sexualised bullying via the internet /social media sites.</p> <p>Older boyfriend (s) (5+ years)</p>	
Analysis			

	Risk Indicators		
Rewards	No risk identified	No concerns identified in this area which relate to sexual exploitation	
	Low	Some unaccounted for monies and / or goods (new clothes, make –up, CD’s, etc)	
	Medium	Concerns about unaccounted for monies and / or goods, (new clothes, make –up, CD’s, etc), especially jewellery and mobile phones.	
	High	Significant concerns regarding unaccounted for monies and / or goods, especially jewellery and mobile phones, which the child / young person is unable to provide explanation for. Has use of more than one mobile phone	
Analysis			

	Risk Indicators		
Contact with abusive adults and / or risky environments	No risk identified	No concerns identified in this area which relate to sexual exploitation	
	Low	Associating with unknown adults and/or other sexually exploited children /young people	
	Medium	<p>Associating with unknown adults and/or other sexually exploited children /young people</p> <p>Extensive use of phone, particularly late at night, & secret use. May have use of more than one mobile phone.</p> <p>Has access to premises not know to parent / carer</p> <p>Reports from reliable sources, suggesting involvement in sexual exploitation.</p>	

		Reported to have been in red light districts	
	High	And Evidence of association /relationships with adults /older peers believed /known to be involved in grooming /exploitation. Seen /or picked up, in known 'red light 'district.	
Analysis			

	Risk Indicators		
Coercion / control	No risk identified	No concerns identified in this area which relate to sexual exploitation	
	Low	Reduced contact with family / friends, which raises concern. Some concerns about significant relationships	
	Medium	Limited contact with family / friends. Concerns about significant relationships Disclosure of physical / sexual assault followed by withdrawal of allegation. Physical injuries – external / internal	
	High	No contact with family / friends Disclosure of physical / sexual assault followed by withdrawal of allegation. Physical injuries – external / internal Abduction / forced imprisonment (described by young people as 'locked in') Disappears from system (no contact with support systems)	
Analysis			

	Risk Indicators		
Sexual health	No risk identified	No concerns identified in this area which relate to sexual exploitation	
	Low	Evidence of having /had a sexually transmitted disease	
	Medium	Recurring or more than one sexually transmitted disease Miscarriage(s) Termination(s)	
	High	Recurring or multiple STI's. Miscarriage(s), Termination(s) Physical symptoms suggestive of sexual assault.	
Analysis			

	Risk Indicators		
Substance misuse	No risk	No concerns identified in this area which relate to sexual	

	identified	exploitation.	
	Low	Mild use of substances (including alcohol) Experimenting with drugs /alcohol	
	Medium	Evidence of regular substance (including alcohol) use. Concerns for use / dependency	
	High	Evidence of heavy /dependant /worrying substance misuse (including alcohol). Chronic dependency of highly addictive substances	
Analysis			

	Risk Indicators		
Emotional Health	No risk identified	No concerns identified in this area which may relate to sexual exploitation	
	Low	Concerns regarding fatigue, poor self-image ,expression of despair Self-harm • Cutting • Overdosing • Eating disorder Sexualised risk taking	
	Medium	Chronic low self-esteem / self-confidence, expression of despair Internal (Self-harm): • Cutting • Overdosing • Eating disorder Sexualised risk taking External (intensive acting out):• Bullying / threatening behaviour• Violent outbursts • Offending behaviour	
	High	Chronic low self-esteem / self confidence Mental health problems, expression of despair Internal (Self-harm): • Cutting • Overdosing • Eating disorder Previous suicide attempts, sexualised risk taking External (intensive acting out):• Bullying / threatening behaviour • Violent outbursts • Offending behaviour	
Analysis			

	Risk Indicators		
Accommodation	No risk identified	No concerns identified in this area which relate to sexual exploitation	
	Low	Some accommodation issues / concerns, but overall accommodation meets the child /young person’s needs.	
	Medium	Unsuitable, unstable / temporary/overcrowded. The child /young person is unhappy with their accommodation,	
	High	Unsuitable /unstable / temporary/ overcrowded. Concerns about location, the child /young person is unhappy with their accommodation and often stays elsewhere. Homeless or Sofa surfing Care leaver or Looked After Child	

Analysis	
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Family relationships	Risk Indicators		
	No risk identified	No concerns identified in this area which relate to sexual exploitation.	
	Low	Carer(s) show warmth, support the child and have good /positive communication with the child. The child has positive friendships But reported reduced contact with family /friends which is of concern.	
	Medium	Carer(s) lack understanding, tolerance and warmth towards the child. Family relationships are strained. Friends /carers report a change in behaviour /reduced contact with the child. Friends /peers are known offenders.	
	High	There is little or no communication between the carer(s). There is a lack of warmth/understanding, / attachment and /or trust. Breakdown in family relationships / no contact. Friends /peers are known offenders.	
Analysis			

Risk to others	Risk Indicators		
	No risk identified	No concerns identified in this area which relate to sexual exploitation	
	Low	No identified risk to others, but mild concerns about influence on other children & young people.	
	Medium	Concerns regarding negative influence on others. Concerns that the child might expose other children to risky situations. Bullying and threatening behaviour Offending behaviour	
	High	Places other children at risk of child sexual exploitation. Displays violence towards others, angry outbursts (including family members and carers) Bullying and threatening behaviour.Offending behaviour	
Analysis			

	Risk Indicators		
	No risk	No concerns identified in this area which relate to	

Experience of Violence	identified	sexual exploitation.	
	Low	No known reported incidents of the child /young person being a victim of violence or witnessing domestic abuse, although some professional concerns.	
	Medium	Concerns that the child /young person has been /is being exposed to violence in the home and /or from others. Disclosure of physical / sexual assault followed by withdrawal of allegation. Physical symptoms suggestive of physical /sexual assault.	
	High	Known abuse towards the child /young person from family members. Peers /older friends/partners are violent towards the child. Physical injuries – external / internal / disclosure of physical / sexual assault.	
Analysis			

Other child & family factors to consider. Please highlight if any are relevant.	<p>Family: Abuse and/ or neglect in family, Parental Substance misuse. Adult prostitution</p> <p>Child: Learning disabilities, Financially unsupported, Migrant /refugee /asylum seeker. Death, loss or illness of a significant person in the child's life</p>
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Other information, such as the name of adults about who there are concerns, and / or peers

What Next

On completion of this risk identification tool, please make an initial judgement about the level of risk of Child Sexual Exploitation for the child / young person. Please **tick** against your assessed level of risk. Discuss this with your Team Manager and take appropriate action to manage the risks, in accordance with the Child Sexual Exploitation Managing a Concern Process guidance.

No risk	Whilst there may be concerns for the welfare of the child /young person, which may involve the requirement of service provision, for other assessed risks, there is no current evidence that there is a risk of the child /young person being at risk of, or is experiencing sexual exploitation.	
Low Risk	Some evidence that the child /young person is at risk of sexual exploitation, and /or places	

	him /herself at risk. Some concerns that the child /young person is at risk of being targeted or groomed, but there are positive protective factors in the child /young person life. The child /young person may require a referral to specialist services or Integrated Processes Team for early intervention /education /prevention. If the decision is no further action for CSW's, this must be recorded	
Medium Risk	Child is vulnerable to being sexually exploited / but there are not immediate /urgent safeguarding concerns. There is evidence the child /young person may be a risk of opportunistic abuse, or being targeted /groomed. The child /young person may experience protective factors, but circumstances and /or behaviours place him / her at risk of sexual exploitation. The child should at a minimum be identified as a Child in Need	
Highest Risk	Evidence /disclosure suggest that the child is at immediate and /or continuing risk of sexual exploitation. The child /young person is engaged in high risk situations/ relationships /risk taking behaviour. Evidence /assessment, suggests that the child is experiencing exploitation, (they may not recognise this) A strategy discussion & a CSE vulnerability management plan are required.	

Review timescales

For those children and young people who are judged to be at low, medium or high risk of Child Sexual Exploitation, the level of risk must be reviewed at the following frequency:

- **Low risk – every 6 months**
- **Medium risk – every 3 months**
- **High risk - monthly**

Send this report and tool to the CSE and Missing Coordinator electronically at:
specialist.safeguarding@leeds.gov.uk, via secure to:
specialist.safeguarding@leeds.gcsx.gov.uk, or fax 0113 3950362

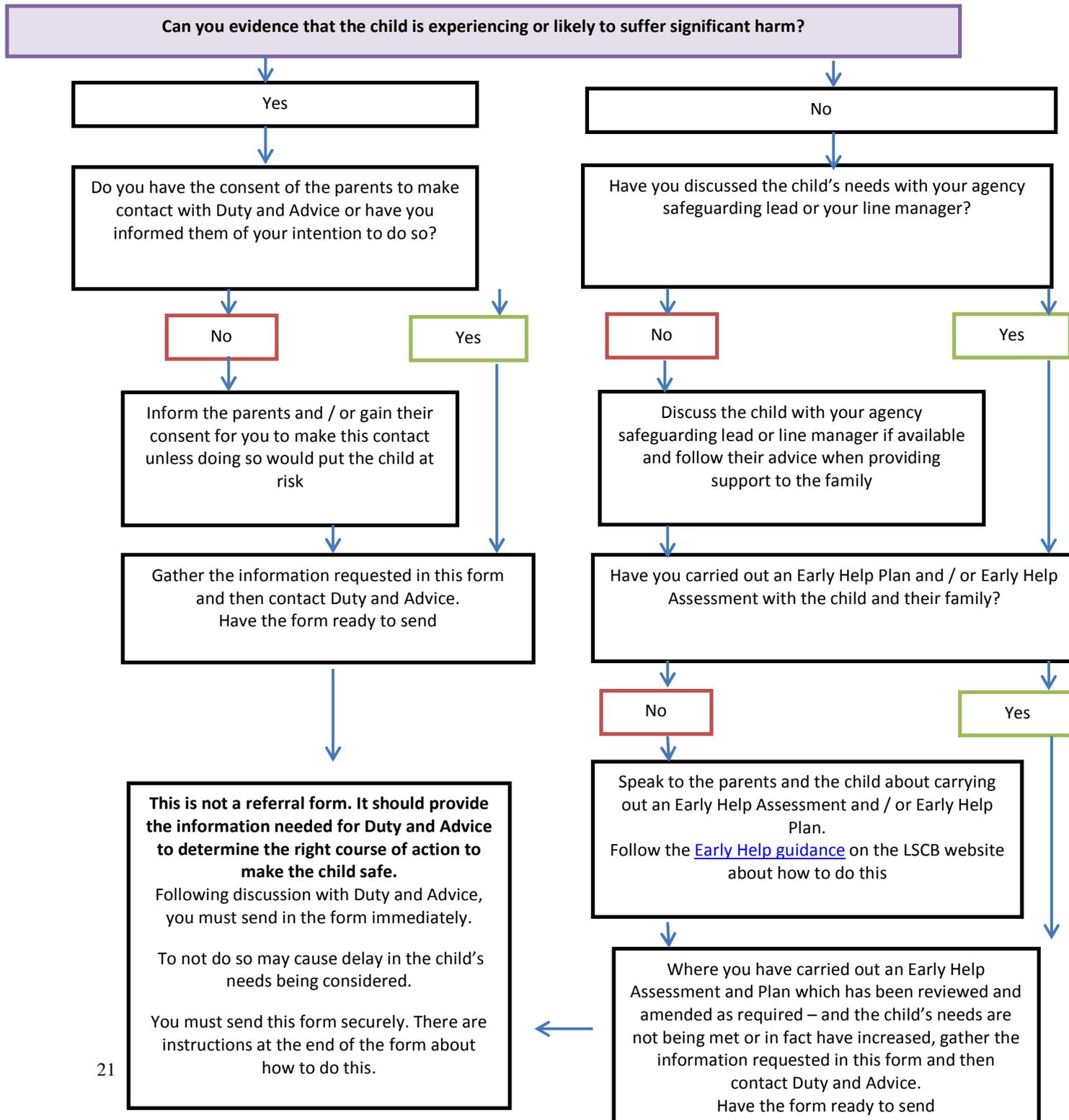
Front Door Safeguarding Hub

Contact Form – 2017

Duty and Advice Team

(This form replaces the previous Record of Contact Form)

Before contacting Duty and Advice Team and completing this form, please answer the following questions and follow the advice provided:



1. Child information		
Last name:	First name:	Any other names used:
DOB or EDD (DD/MM/YY):	Gender:	Ethnicity:
Does the child have a disability? Yes No If yes, please provide details		
Is English their first language? Child Yes No Parent Yes No		If no, please specify preferred language:
Refer to equality monitoring guidance available here		
Present School:	Preschool:	Children's Centre:
Unique Pupil Number (UPN):	NHS Number:	

Present Address:	Previous address (if from outside Leeds or at present address less than one year):
Home telephone:	Mobile telephone:

Is the child being looked after by someone other than their birth parents? Yes No If yes, give details of who they are being looked after by, the relationship to the child, when this arrangement commenced and how long it is intended to go on for
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2. What are you worried about?
What are the key risks and concerns – be specific about these – what, when, how, to what extent etc.
What evidence do you have to support this? Being specific about your concerns will save time later. Include information about: <ul style="list-style-type: none"> • The child's developmental needs • The capacity of their parents to meet these needs • Details of the child's environment relevant to this contact • Details of any injury or disclosure that you have become aware of or details of chronically neglectful circumstances and what actions if any have already been taken
Do you suspect that the child may be in need of support? Yes No Give details:

What is going well despite these risks and concerns?
What are the strengths or the protective factors in the family
What needs to change for the child so that the risk to them is reduced?
What have you or someone else done already to reduce the risks? (Give details of Early Help Assessments and Plans in Section 3 below)

3. Have you sought advice from your agency safeguarding lead or line manager?

Yes:	No:
If yes, what advice did they give you?	
Give details of the name, role and contact details of who gave this advice (safeguarding lead or line manager)	
Give details of what happened when you followed this advice	

4. Have you initiated or completed an Early Help Assessment and / or Plan

Yes:	No:	
If yes, attach the relevant documents with this form		
Ref. number:	If no, state reasons why not undertaken:	
Name of Lead Practitioner:		
Contact details:		
Have you discussed this contact with the Lead Practitioner?		
Yes	No	Details

5. Consent or Informing the parent and others

Have you informed the parent or carer and child or young person that you are making this contact?			
Parent or Carer - Yes	No		
Child or young person - Yes	No		
Has consent been given for this contact?			
Yes	No		
Verbal consent?	Yes	No	
Written consent?	Yes	No	
If no, please tell us why not.			
Information on this can be found in the Children's Online Procedures			
Who gave consent?			

6. Additional information about the child or young person

Household members	Relationship to child	DOB DD/MM/Y	School/ preschool	Does this person hold parental responsibility?
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		Y		
Other significant adults	Relationship to child	DOB DD/MM/Y Y	Address	Does this person hold parental responsibility?

Are you aware of any previous social work involvement? Yes No
 If yes, provide details:
 Was this in Leeds? Yes No If no, where was it?

7. Details of person making the contact – This section must be completed in full

Name:	Agency / Name of Organisation:
Role / position in agency / job title:	
Address:	
Email address:	Contact no:
Signature:	Date of contact made:

8. Other practitioners involved with the family

Please note details of any workers currently involved with the family:

Practitioner name	Job Title / Role	Agency	Phone no/ contact details
	GP		
	Health visitor if child under 5		

For example: school or early years setting, Police, particular Health agency, third sector organisation, probation service, or youth service.

9. Are you concerned that the child/young person is at risk of Child Sexual Exploitation?

Yes:	No:
Have you completed the Child Sexual Exploitation Checklist Tool for Partner Agencies?	
Yes	No
If yes, attach the completed tool with this form	
If no, state reason why this has not been undertaken:	

10. Additional information

If you have additional information to further support the contact, please provide this below or on an additional sheet.

11. What to do next

Following your verbal contact with Duty and Advice you need to send this completed form to them immediately and securely.

To do this you should email it to: ChildScreening@leeds.gcsx.gov.uk

Anyone contacting Duty and Advice who has a leeds.gov.uk email account does not need a secure email account to do so. Other agencies have secure email accounts and should use these when sending the form in. These include: health (nhs.net); Police (.pnn); and Probation (.gsi).

Practitioners from the third sector and schools may not have secure email accounts. In order to ensure that the information is sent securely, Duty and Advice Team will advise on how to do this.

Practitioners should send a copy of the completed form to their own agency Safeguarding lead (as available) and / or line manager and ensure a copy is saved in the relevant adult / child records in that agency.

Where practitioners have contacted the Duty and Advice Team for advice/information they should action the advice that has been offered.

12. What to expect next

Following the contact and the receipt of this form by email, Duty and Advice Team will decide on a course of action.

An automatic reply email will be sent to confirm that an email has been received by Duty and Advice at the Front Door.

Practitioners involved with a child or family can phone the Duty and Advice Team on: 0113 376 0336 between 8.00am to 6.00pm.

If your enquiry needs a response from Children’s Social Work Service outside normal office hours, please phone the out of hours Children’s Emergency Duty Team on 0113 3760469.

If you feel that a child is immediately at risk please contact the Police on 999.

family (name/ Dob/ addresses if different to above)		
Parent/ carer preferred means of contact.		
Please tell us if the child or the parent/ carers need an interpreter or other support when we contact them (and if so what language/ type of assistance)		
Section 3 – FGM Report		
Where did it occur?		
When did it occur?		
Please provide circumstances regarding the discovery		
Please provide details of any action already taken and which other services or agencies are currently engaged with the child (e.g. social services). Please include names/ contact details of any key workers if known.		

Please submit your completed form to cib@westyorkshire.pnn.police.uk