

relate ni

the relationship people

| | |
|-----------------------------|--|
| Policy Title | Keeping Children Safe |
| Author | Lorraine Robinson |
| Approved By | Relate NI Board |
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| To be implemented by | All Relate NI trustees, staff, volunteers, trainees, supervisors and associate counsellors and anyone else undertaking work on behalf of Relate NI |

Keeping Children Safe Policy

Overview

Relate NI takes its responsibilities to children and young people very seriously. During the course of delivering Relate NI services, staff may become aware of concerns about a child or young person up to the age of 18 years. Consultation about these concerns with a senior member of staff is mandatory and disclosure to the appropriate authorities may be required in order to safeguard these clients. This policy sets out Relate NI's response and is in accordance with relevant legal frameworks.

Equality Statement

In our approach to keeping children and young people safe, we will make sure that all children and young people have the same protection regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity. We understand that for any of these considerations, we may need to tailor our approach accordingly.

This policy applies to all staff, associate counsellors, trainees, volunteers, and anyone undertaking work on behalf of Relate NI.

1.0 PURPOSE

- To protect children and young people whether or not they either directly or indirectly use Relate NI services.
- To lay out Relate NI's commitment to child protection and safeguarding children and young people and the overarching principles which guide it.
- To give confidence to clients, everyone involved in delivering services for Relate NI, and other stakeholders, in what to do if they feel there may be something which could affect the safety and welfare of a child or children

Relate NI understand

- As a provider of relationship support, we will come across things which affect the welfare and safety of children and young people;
- We also understand that we may often be the first agency to become aware of these issues. As such we take our duty to act on these concerns extremely seriously;
- We recognise that the welfare of the child is paramount
- Keeping Children safe is everyone's responsibility: for services to be effective, every person involved in Relate NI should play their full part;
- We will take a child-centred approach: for services to be effective they should be based on a clear understanding of the needs and views of children;
- We will ensure that our approach is child centred in terms of language and style;
- For our approach to be truly effective, working together with children, young people, their parents, carers and other agencies, is essential;
- All concerns are shared as soon as practicably possible with an appropriate senior member of staff, and recorded and dealt with appropriately;
- For our approach to be truly effective, we must always seek to support an open, transparent and supportive culture.

2.0 KEEPING CHILDREN SAFE POLICY STATEMENT

Trustees, staff and workers in both clinical and non-clinical roles, trainees and volunteers in Relate NI are committed to practice which promotes the welfare of children and young people and protects them from harm.

We wish to ensure that all children and young people feel valued and they can participate in services which are safe

Staff, associate counsellors and volunteers in this organisation accept and recognise responsibilities to develop awareness of the issues which cause harm to children and young people, and to establish and maintain a safe environment for them. We are committed to reviewing our policy, procedures and practice annually.

We will endeavour to keep children safe by:

- Following carefully the procedures laid down for recruitment and selection of staff and volunteers;
- Providing effective management for staff and volunteers through supervision, support and training;
- Reporting concerns to statutory agencies who need to know and involving parents and children appropriately;
- Adopting safeguarding children guidelines through a code of behaviour for staff and volunteers;
- Sharing information about safeguarding children and good practice with children, parents, staff and volunteers;
- Ensuring safety procedures are adhered to.

3.0 UNDERLYING PRINCIPLES

This policy has been developed with due regard to the Five P's as contained in the Children (NI) Order 1995. These principles have guided Relate NI's safeguarding policy.

3.1 FIVE P's:

Paramountcy

means that in all decisions made about a child's upbringing, the welfare of the child must be the court's paramount consideration.

Partnership –

The basis of this principle is that the most effective method of ensuring a child's needs are met is by working in partnership with children, young people and their parents. All agencies should consult with children and parents in any decision making about services provided.

Prevention –

focuses on preventing the abuse of children and young people. It is about the state's obligation to provide support services to keep children safely within their families and

to promote their health and welfare.

Protection –

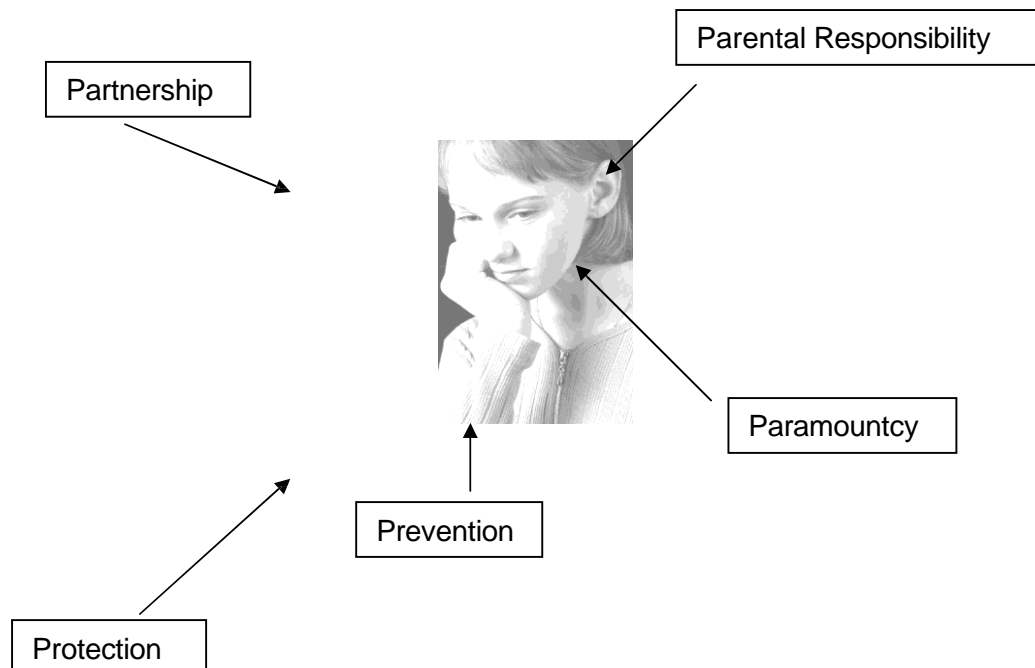
places a duty on Health and Social Care Trusts to investigate where a child is at risk of significant harm because of lack of care or actual abuse.

Parental Responsibility –

means that parents have responsibilities to their children rather than rights over them. Issues of parental responsibility include, for example, decisions about education, health and religious upbringing. The natural mother always has parental responsibility (unless an adoption order has been made).

The natural father has parental responsibility in the following circumstances:

- If married to the mother at the time of the birth;
- Has gained it through an agreement witnessed by a solicitor;
- Through a Parental Responsibility Order;
- Post 15 April 2002, if the birth is jointly registered with the natural mother;
- Through re-registering the child's birth.



4.0 OVERVIEW OF RESPONSIBILITIES

Relate NI has a duty to ensure that its staff fulfil their responsibilities to prevent abuse of children and young people and to report any abuse discovered or suspected.

Relate NI recognises that any child or young person can be subject to abuse and all allegations of abuse, no matter how small or trivial, will always be taken seriously and responded to swiftly and in accordance with Relate NI's procedures.

Relate NI staff shall make the safety and protection from harm of all children and young people under the age of 18 involved in activities which come under Relate NI's responsibility their highest priority. It is the responsibility of all staff, associate counsellors, trainees and volunteers within Relate NI to report concerns about abuse or significant harm to a child or young person to the Designated Officer.

- **Board of Trustees (Incl sub-committees)**

To ensure that the organisation's policies, procedures and measures are fit for purpose and up to date; to appoint a lead trustee for Safeguarding who will work with the CEO and Head of Clinical Services to ensure the robust and effective implementation of safeguarding policies; and to request and consider reports on the operation of Keeping Children Safe within the organisation.

- **CEO**

The CEO has overall responsibility for ensuring the effective and robust implementation of the organisation's Keeping Children Safe framework and for providing strategic leadership and promoting a culture of supporting good practice with regard to keeping Children Safe within Relate NI and promoting collaborative working with other agencies

- **Head of Clinical Services**

Keep CEO informed of all keeping children safe escalations; responsible for liaising with and reporting to external agencies as required; ensuring that policies and procedures and safeguarding responsibilities are up to date and implemented robustly; and take reports from Designated Officers as required.

In partnership with the CEO, liaising regularly with the Trustee Safeguarding Lead; Reporting to Board and Sub Committees an up to date account on activities undertaken in relation to the Keeping Children Safe Policy; Ensuring appropriate linkages are made with Clinical Supervisors strategically and operationally in a timely manner.

If concern is in relation to allegations of abuse against Relate NI personnel, is

responsible for liaising with external agencies and, where appropriate, ensuring a robust internal investigation is undertaken;

- **Designated Officers**

Request and accept Keeping Children Safe (KCS) reports from staff and counsellors; progress where appropriate the Keeping Children Safe referral to the HSC Trust Gateway Team; contact the PSNI if and when required; maintain key elements of the safeguarding framework as approved; ensure that Clinical Supervisors are updated as required.

- **Clinical practitioners and trainees**

Listen, identify, record and report to a Designated Officer (DO) and participate in keeping Children Safe discussions with a DO. Where it is not possible to speak to a DO in a timely manner, clinical practitioners are required to use their professional judgement to ensure that timely and appropriate action is taken in line with the policy statement and follow up with a DO as soon as possible. Support from peer practitioners and use of Gateway contacts for guidance and support may all be used to support practitioners in the exercise of their professional judgement.

As well as consulting, reporting and recording responsibilities, clinical practitioners are also responsible for ensuring that all safeguarding concerns in their caseload are discussed in clinical supervision in a timely manner.

- **Supervisors**

Support Supervisees, check understanding, understand the organisation's policies and procedures. and participate in Keeping Children Safe discussions as required by the Head of Clinical Services or a DO.

- **Staff (non-counselling)**

Will be familiar with Keeping Children Safe policy and procedures and escalate any concerns to a member of the Senior Team or a DO in a timely manner

5.0 LEGAL AND POLICY CONTEXT

There is a range of legislation and policy in force in Northern Ireland which is directly applicable to the protection of vulnerable adults, and as such provides a context for Relate NI's responsibilities in this area. This includes:

This policy is based on law and guidance which aims to protect children, in particular:

- The UN Convention on the Rights of the Child

- The Children (NI) Order 1995
- The Family Homes and Domestic Violence (NI) Order 1998
- Section 75 of the Northern Ireland Act 1998
- The Safeguarding Vulnerable Groups (NI) Order 2007) as amended by the Protection of Freedoms Act 2012)
- The Safeguarding Board Act (NI) 2011
- The Justice Act (NI) 2015
- Co-operating to Safeguard Children and Young People in Northern Ireland (DoH) 2015

6.0 KEY DEFINITIONS

6.1 *What is abuse?*

Abuse causes harm. Abuse is anything that goes against a child or young person's human rights. A child or young person may be abused by a wide range of people including relatives and family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends and associates. It can take place anywhere, for example, in a person's own home, a residential facility, a youth club, church or a hospital etc.

Abuse may be deliberate or unintentional. It may consist of a single act or repeated acts either in a continuing relationship or in a service context and it may be directed to more than one person at a time. This makes it important to look beyond the single incident or breach in standards to underlying dynamics and patterns of harm. Some instances of abuse will constitute a criminal offence. In this respect children and young people are entitled to the protection of the law in the same way as all other member of the public. In addition, statutory offences have been created which specifically protect those who may be incapacitated in various ways.

What constitutes abuse of children and young people?

Physical abuse is deliberately physically hurting a child. It may take a variety of different forms, including hitting, biting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child. Sexual abuse occurs when others use and exploit children sexually for their own gratification or gain or the gratification of others.

Sexual abuse 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 clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via e-technology). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development. It may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them, or 'making fun' of what they say or how they communicate. Emotional abuse may involve bullying – including online bullying through social networks, online games or mobile phones – by a child's peers.

Neglect is the failure to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter that is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse.

Exploitation is the intentional ill-treatment, manipulation or abuse of power and control over a child or young person; to take selfish or unfair advantage of a child or young person or situation, for personal gain. It may manifest itself in many forms such as child labour, slavery, servitude, and engagement in criminal activity, begging, benefit or other financial fraud or child trafficking. It extends to the recruitment, transportation, transfer, harbouring or receipt of children for the purpose of exploitation. Exploitation can be sexual in nature.

Bullying – Bullying is the repeated use of power by one or more persons to intentionally harm, or adversely affect the rights and needs of another or others (NI Anti Bullying Forum). Although bullying is not defined as abuse, in its more extreme forms it could be regarded as abuse. It can take many forms but the main types are:

Emotional – excluding, being unfriendly;

Physical – hitting, kicking, theft;

Racist – racial taunts, graffiti, gestures;

Sexual – unwanted physical contact or sexually abusive comment

Homophobic – because of or focusing on the issue of sexuality;

Verbal – name calling, sarcasm, spreading rumours, teasing;
Cyberbullying - text message, picture/video-clip and phone call bullying via mobile phones; email, website.

Bullying can leave children with feelings of worthlessness and self-hatred, they can feel lonely and isolated. At its worst, bullying can result in a child or young person self-harming and even attempting suicide.

The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children to the extent that it affects their health and development or, at the extreme, causes them significant harm. In these circumstances bullying should be considered as child abuse and treated as such.

6.2 Safeguarding in Specific Circumstances

“Co-operating to Safeguard Children and Young People in Northern Ireland” (2017) addresses safeguarding in specific circumstances, where the abuse of children and young people can manifest in a number of ways and can involve a combination of the forms of abuse. Some of the specific forms of abuse which are identified in the policy include:

- female genital mutilation
- forced marriage
- honour based violence; and
- child sexual exploitation.

Female genital mutilation (FGM) involves procedures that include the partial or total removal of the external female genital organs for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. FGM is a criminal offence in Northern Ireland. Where any individual or organisation has a concern that a child or young person may be at immediate risk of FGM they should report this to the PSNI without delay. Where any individual or organisation has a concern that a child or young person may be at risk of FGM, they should make a referral to the relevant HSCT Gateway Service. Consideration should always be given to any female child of the family or female child resident in the same household.

Forced marriage is marriage conducted without the valid consent of one or both parties and where duress is a factor. Forced marriage is a criminal offence in Northern Ireland, and where any individual or organisation has knowledge or suspicion of a forced marriage in relation to a child or young person, they should

contact the PSNI immediately.

Honour based violence (HBV) is the term used to refer to a range of violent practices used to control behaviour within families or other social groups to sustain or promote perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative or another has shamed, or may shame, the family and/or community by breaking their 'honour code'. The punishment can include assault, abduction, and restrictions of liberty, confinement, threats and murder.

Children, young people and adults can be victims of HBV. Where any individual or organisation suspects or believes that a child or young person is at immediate risk of HBV, an immediate report should be made to the PSNI. If the risk is not perceived to be immediate, the information should be passed to the local HSCT.

Where it is known to have taken place with children or adults, this information should be passed to the HSCT and/or the PSNI to ensure that other children within the community affected are appropriately safeguarded.

Child sexual exploitation (CSE) 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.

If any individual or organisation has any concerns that a child or young person is being sexually exploited, or at risk of sexual exploitation, this must be reported to the relevant HSCT and/or the PSNI.

6.3 Vulnerability

It is also important that staff and volunteers are aware that some children and young people are more vulnerable to abuse because of their life circumstances. The following children and young people may be at greater risk of harm:

- Looked After Children;
- Children and young people who go missing;
- Young people in supported accommodation;
- Young people who are homeless;
- Children and young people living in a violent or abusive domestic environment;
- Children of parents with additional support needs;
- Separated, unaccompanied and trafficked children and young people

- Children and young people with disabilities;
- Lesbian, Gay, Bi-sexual or Transgender Young People;
- Unborn babies (pre-birth risk).

6.4 Who can abuse?

- abusers come from all sections of society, all professions and all races and can be male or female;
- abuse of children and young people can occur anywhere, at home or within organisations;
- abuse of children and young people may sometimes be carried out by strangers, but it is much more common that the abuser is known to the child or young person and is in a position of trust and/or authority;
- it is not only adults who abuse children and young people. Children may suffer abuse from other children and young people.

Although most individuals who work with children and young people are well motivated, there may be those in an organisation who are unable to provide consistent care. There are also some adults, including professionals, who manipulate themselves into positions of trust where they could exploit children and young people, physically, emotionally or sexually. There may also be those, who by consistently behaving inappropriately towards children and young people, cause them to suffer physical or emotional harm. Through exploring these issues in the organisation's safeguarding children and young people policy, staff and volunteers are more alert to the possibility of abuse and able to recognise indicators that cause concern.

6.5 How might you become aware of abuse?

- There are a number of ways that you could be alerted that a child or young person is suffering harm:
- The child may disclose to you;
- Someone else may tell you that the child has disclosed abuse, or they strongly believe the child has been abused;
- The child may show some signs of physical injury or a behavioural change for which there appears to be no satisfactory explanation;
- Awareness of, or suspicion about, abuse may come about as a result of something disclosed to you as a third party (parent, friend, co-worker) who suspects or has been told of abuse;
- Something in the behaviour of one of the workers or in the way a worker relates to the child alerts you or makes you feel uncomfortable.

- The difficult issue of confidentiality is one which arises particularly when abuse is disclosed. However, the procedures which the organisation develops to deal with all allegations, concerns or disclosures about abuse must be based on the fundamental principle that the welfare of the child is paramount.
- staff and volunteers should be aware of the importance of: Listening... accepting... reassuring... explaining... acting immediately... recording... getting support.

When responding to information about the abuse or suspected abuse of a child or young person please follow these key points:

| DO | DON'T |
|---|---|
| Stay calm. | Don't panic. |
| Listen and hear - Give time to the child/young person to say what they want. Accept what they are saying. | Don't ask leading questions. |
| Reassure that they have done the right thing in telling. | Don't promise to keep secrets. |
| Record in writing what was said as soon as possible in the child's own words. | Don't enquire into details of the abuse. |
| Report to someone else in the organisation. | Don't make the child/young person repeat the story unnecessarily. |
| Record your report. | Don't delay in reporting. |

Being alert to "abuse" plays a major role in ensuring that children and young people are safeguarded and it is important that all concerns about possible abuse are taken seriously and appropriate action is taken.

7.0 RELATE NI PROCEDURES

All concerns, disclosures and allegations should be recorded on the Safeguarding form. An accurate note should be made of the date, time and nature of the concern, disclosure or allegation and the parties who were involved.

The record should be clear and factual, since any information may be valuable to professionals investigating the incident and may at some time

in the future be used as evidence in court.

This kind of information should always be kept in a secure place (including electronic filing) and shared only with those who need to know about the concerns, disclosures, allegations or suspicions of abuse.

7.1 Respond:

- a)** When a disclosure is made to you by a child or young person:
 - Advise them that you have heard their disclosure
 - Inform them that you will need to share this information
 - Share concerns with the parent or guardian if appropriate
 - Contact a DO as soon as possible by telephone or email

- b)** When you are suspicious about a potential issue of abuse in relation to a child or young person
 - Contact a DO as soon as possible by telephone or email for discussion

- c)** When you have concerns or suspicion about practice in relation to a Relate NI staff member:
 - Contact a DO as soon as possible by telephone or email
 - Do not discuss this information with anyone else

7.2 Recording:

- a) When a disclosure of abuse is made to you by a child or young person record the information on a KCS form and forward immediately to the DO
- b) When you are suspicious about a potential issue of abuse in relation to a child or young person after discussion with the DO, it is still appropriate to complete a record of the discussion and concerns on the relevant form.
- c) When you have concerns or suspicions about practice in relation to a Relate NI staff member record information on a KCS and forward immediately to a DO

7.3 Report:

- a) Counsellor to escalate concerns in a timely manner to a DO for consideration and discussion.
- b) DO will contact appropriate safeguarding authority e.g. HSC Gateway Team

or PSNI, for advice as soon as possible and if required will complete a UNOCINI form.

- c) Designated Officer will advise Head of Clinical Services.
- d) Head of Clinical Services will, as soon as possible advise Relate NI's CEO
- e) If the practitioner believes that a child accessing Relate NI services is in imminent or immediate and significant danger, and you are unable to consult a DO, practitioners should use their professional judgement to decide whether to report to relevant authorities.

Dealing with allegations made against Relate Staff

Any disclosure from a service user or another member of staff about a Relate staff member must be recorded on a Safeguarding form immediately and by the person to whom the disclosure is made.

The record should be factual and should not include opinions or personal interpretations of the facts presented. It should contain all relevant detail and be as accurate as possible.

If you are the Staff member reporting concerns about a member of Relate NI staff please ensure this information is not be shared with any other person. You will not receive any further information about any investigation.

If a service user reports concerns about a member of Relate NI staff they will be contacted to advise of progress of the procedure.

Sharing relevant information appropriately with children, young people and parents:

When children and young people attend services provided by an Relate NI, it is crucial that relevant information is gathered to ensure their health, safety and welfare. Some basic personal details which an organisation will seek to gather will include:

- the individuals with parental responsibility (as defined by the Children (NI) Order 1995) for the child;
- the name, address and contact number of parents as well as an emergency contact number;
- Information about any additional needs, health issues or medication that the child or young person is using, contact with other professionals/agencies if relevant.

- Information about the counselling process will be shared with children, young people and parents.
- Information about the limits to confidentiality and Keeping Children Safe guidance will be shared with children, young people and adults

8.0 ESTABLISHING A CULTURE WHICH PROMOTES SAFEGUARDING THROUGHOUT THE ORGANISATION.

This policy sets out the organisation's responsibilities in relation to keeping children safe. Best practice indicates that safeguarding should be a theme which permeates all organisational policies which sets a clear organisational culture where safeguarding is taken seriously. Integral to Relate NI's safeguarding culture, there are a suite of policies and procedures that ensure best practice and service delivery in terms of safety, equity and quality.

8.1 Recruitment and Selection of Staff:

Relate NI has a robust process of recruitment which includes a comprehensive application form, agreed job descriptions, Access NI procedure, and reference collection. This ensures that the make-up of the Relate NI staff team is responsive to the needs of those with whom the organisation works and indicates to both clients and potential employees the robustness of the organisation's safeguarding framework.

8.2 Management, Support, supervision and training of Staff:

Relate NI has a robust support system to meet the needs of a dynamic and professional workforce. This includes individual and group supervision, CPD training, daily access to clinical and business support services.

8.3 Receiving comments and suggestions and management of concerns and complaints.

At Relate NI we want to provide the best possible service. However, there may be times when we could do better and other times when we receive compliments about what we have done well.

- A commitment to a listening environment within the organisation;
- A suggestion box to give everyone an opportunity to make suggestions about how things could be improved;
- Service User Surveys
- Maintaining a record of matters and suggestions made by service users and actions taken;

- Developments in the organisation recorded in the Relate NI Annual Report

8.4 Management of records, confidentiality and sharing of information

Relate NI has robust procedures for the management of records and information. All records are stored in a secure location and accessed by authorised personnel only. There is a clear procedure for accessing records, record retention/ archiving, record destruction/disposal. The organisation is currently progressing to digital recording.

Relate NI has a robust strategy to ensure compliance with Data Protection requirements.

8.5 Management of risk:

Relate NI is committed to an organisational culture in which the rights of children and young people are fully respected. The safeguarding procedures support that culture to reduce the likelihood and impact of abuse by:

- Preventing unsuitable people from joining the organisation through good recruitment and selection practice;
- Making staff aware of risk of harm to children and young people, the possible signs of abuse and equipping them to respond quickly to concerns about actual, alleged or suspected abuse;
- Ensuring that staff are properly inducted, trained, supported and supervised in their work with children and young people;
- Ensuring that staff know what constitutes acceptable behaviours and good practice and that they are supported when they challenge poor practice;
- Promoting a culture of inclusion, transparency and openness throughout the organisation and its services and activities;
- Making staff aware of how information about children and young people should be handled; and
- Having in place good overall organisational management and practice supported by a range of

organisational policies and procedures.

9 Safeguarding Form

- 10 This form should be used to escalate clinical and safeguarding concerns about adults, children and young people. The form will be updated with any new information in an effort to document everything in one place.
- 11 Please ensure that the data captured is accurate and limited to only what is necessary. Any information added should be based on fact.

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|---|----|
| Client Number: (or if no number, identifying information) | CL |
|---|----|

12

- Self-Referral
- Funded Contract
- Adult
- CYP

13

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|--|--|
| Person raising the concern (Relate NI Person) | |
| Name: | |
| Role: | |

14

| | | | |
|--|--|-----------------------------------|--|
| Date (of session) when concern was first raised/became apparent | | Date concern was escalated | |
| Service Type | | Delivery Method | |

15

| |
|---|
| How was initial concern escalated: (e.g. phone, email, face to face) |
| |
| Who was it escalated to? (Provide name and job role) |
| |

16

| | | | |
|------------------------------------|--------------------------|--------------------------|---------------------------------|
| | Yes | No | Log Number (if relevant) |
| Safeguarding/PHL consulted? | <input type="checkbox"/> | <input type="checkbox"/> | |

17

| | |
|--|--|
| Who is the subject(s) of the concern? | |
| If abuse has been disclosed is there ongoing risk – to the client/to others? (If yes, give details) | |

18

| | Yes | No | Give Details (verbal/written/no consent) |
|---|--------------------------|--------------------------|--|
| Has client given consent for information to be shared? | <input type="checkbox"/> | <input type="checkbox"/> | |
| For CYP, are parent/carer(s) aware? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Have they given consent? | <input type="checkbox"/> | <input type="checkbox"/> | |

19

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| What risk factors are present? (E.g. alcohol, pregnancy, mental health issues...) |
| |

20

| |
|----------------------------------|
| Brief factual description |
| |

21

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|--|
| Details of any immediate action taken |
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22

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|--|
| Outcome (What is the outcome? Ensure you note who has responsibility to do what. Are they aware of this and is it time sensitive? If so, give details.) |
| |

23

Update Section (Has anything else happened? Use this section to add updates (ensure you add a date))

| | |
|------|--|
| Date | |
|------|--|

24

| Yes | No | Give Details (verbal/written/no consent) |
|-----|----|--|
|-----|----|--|

Will further appointments be offered?

| | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | |
|--------------------------|--------------------------|--|

25

26 Other Services

27 Does anyone else need to be informed? If so who? (E.g. police, Social Services, GP...)

| | |
|---|--|
| Name of person contacted, position and contact details (phone / email) | |
| What action will they take? | |
| Will they update us? If so, when? | |
| Is the client aware of this? | |

28

29 Signatures

30 Person reporting concern

| | |
|------------------|--|
| Name | |
| Role | |
| Signature | |
| Date | |

31

32 Designated safeguarding officer

| | |
|------------------|--|
| Name | |
| Role | |
| Signature | |
| Date | |

33 Updates Log

| Date | Person | Role | Signature |
|------|--------|------|-----------|
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Appendix 2 Code of Behaviour:

Therapeutic staff all have a responsibility to uphold the ethical framework / code of conduct of the relevant accrediting body (BACP; IACP; COSTR etc.). As well as these frameworks, Relate NI has developed the following Code of Behaviour for all personnel within Relate NI.

Acceptable behaviour;

All actions taken under these procedures must be carried out sensitively, taking account of the adult at risk's individual, wishes, abilities need, including race, culture and ethnicity, age, gender, religion, disability or sexuality.

Positive behaviours are encouraged and may include:

- being supportive, approachable and reassuring;
- showing respect, patience and treating children and young people as individuals;
- being respectful of a young person's right to privacy;
- treating and valuing children and young people as individuals;
- being consistent, fair and equitable with all children and young people;
- being supportive in a manner appropriate to age and stage of development.

Unacceptable Behaviour;

There are examples of behaviour which are unacceptable and will never be permitted. These unacceptable behaviours may include:

- engaging in sexually provocative or inappropriate games;
- letting allegations a child or young person makes go unrecorded
- allowing or engaging in inappropriate touching of any form;
- making sexually suggestive comments about or to a child or young person even in fun;
- doing things of a personal nature for children that they can do themselves;
- promising to keep secrets.

APPENDIX 3 – CONTACT NUMBERS

HSC TRUSTS

| | Normal Working Hours | Website |
|----------------------|-----------------------------|---------------------------------|
| Belfast | (028) 90507000 | http://belfasttrust.hscni.net/ |
| Northern | 03001234333 | http://northerntrust.hscni.net/ |
| South Eastern | 030001000300 | http://setrust.hscni.net/ |
| Southern | 08007837745/028 37415285 | http://southerntrust.hscni.net/ |
| Western | (028) 71314090 | http://westerntrust.hscni.net/ |

Regional Out of Hours (after 5pm each evening, at weekends and public/bank holidays)
028 9504 9999

PSNI

| | |
|--|-----|
| Emergency | 999 |
| Non-Emergency/Central Referral Unit | 101 |

TUSLA CONTACT DETAILS (BORDER COUNTIES)

[\(https://www.tusla.ie/get-in-touch/duty-social-work-teams/\)](https://www.tusla.ie/get-in-touch/duty-social-work-teams/)

| County | Address | Telephone Number |
|---------------|--|-------------------------|
| Donegal | Child & Family Agency Ground level, Scally Place, Justice Walsh Road, Letterkenny | 00 353 74 912 3672 |
| Cavan | Child & Family Agency Support Services Building Rooskey Monaghan | 00 353 49 4369801 |
| Sligo | Child & Family Agency Markievicz Street Barrack Street Sligo | 00 353 71 9155 133 |
| Louth | Child & Family Agency Meath Enterprise Centre Trim Road Navan Co Meath | 00 353 46 909 8560 |

Appendix 4 – Relate NI Designated Officers

Relate NI Designated Officers are:

- Head of Clinical Services
- Clinical Coordinators

Relate NI also operate a Clinical Consult rota which includes access to a Practice Helpline operated through Relate England. Details of the Clinical Rota can be found in the Relate NI policies folder.

Appendix 5 – Role of Trustee Safeguarding Lead

Responsibilities

The lead trustee for safeguarding has three main sets of duties related to safeguarding in addition to their wider responsibilities as a trustee.

Strategic

- Consider the organisation's strategic plans and make sure they reflect safeguarding legislation, regulations specific to your activities, statutory guidance, and the safeguarding expectations of the Charity Commission for NI.
- Work with the CEO and Head of Clinical Services regularly to review whether the things the organisation has put in place are creating a safer culture and keeping people safe.
- Check the organisation's risk register reflects safeguarding risks properly and plans sensible measures to take, including relevant insurance for trustees liability.
- Make sure there is space on the agenda of the relevant meeting for safeguarding reports and help trustees understand and challenge those reports.

Effective policy and practice

- Make sure there is an annual review of safeguarding policies and procedures and that this is reported to trustees.
- Understand the monitoring your charity does to see whether policies and procedures are effective.
- Call for audits of qualitative and quantitative data (either internal or external) when they're needed.
- Learn from case reviews locally and nationally, to improve your organisation's policies, procedures and practices.
- Oversee safeguarding allegations against staff or volunteers, together with CEO and designated safeguarding lead.
- Be a point of contact for staff or volunteers if someone wishes to complain about a lack of action in relation to safeguarding concerns.

Creating the right culture

- Champion safeguarding throughout the organisation.
- Attend relevant safeguarding training events and conferences.
- Support the trustees in developing their individual and collective understanding of safeguarding.
- Attend meetings, activities, projects to engage with staff, volunteers and beneficiaries to understand safeguarding on the ground.
- Work with the chair, CEO, designated safeguarding lead and communications team in order to manage all serious safeguarding cases.
- Support regular safeguarding updates for staff, volunteers and beneficiaries.
- Make sure you have ways of gathering the views of staff and volunteers in relation to safeguarding and sharing these with the board.