

the Albany



# Safeguarding Policy

Safeguarding children, young people and vulnerable adults



## DESIGNATED SAFEGUARDING OFFICER

Updated: 1 April 2025  
Updated by: Sophie Waddy  
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**Audience for this policy: Staff, Volunteers, Public,  
Parents/Carers, Trustees, Funders**

# THE ALBANY SAFEGUARDING POLICY

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# 1. STATEMENT, PURPOSE and PRINCIPLES

**1.1** The Albany agrees that it is always unacceptable for a child or any person to experience abuse, and recognises its responsibility to safeguard the welfare of all children and adults at risk, by a commitment to practice which protects them.

We recognise that:

- the welfare of the child/ adult at risk is paramount and that anyone, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, has the right to equal protection from all types of harm or abuse;
- working in partnership with children, their parents/ carers and vulnerable adults and their agencies is essential in promoting their welfare.

The purpose of the policy:

- to outline the behaviour expected of everyone working or volunteering on behalf of the Albany or within its venues.

## 1.2 Purpose

This policy has been created to provide guidance to safeguard children, young people and vulnerable adults we come into contact with as part of the Albany's work. Following this policy will also help to protect the employee from allegations and the Albany by reducing the possibility of anyone within the organisation using their role to gain inappropriate or abusive access to children and adults at risk.

Everyone working or volunteering on behalf of the Albany or within its venues are acting in a position of trust and are seen as role models to children, young people and vulnerable adults and must act appropriately at all times following the code of conduct as outlined below.

The policy has been produced in line with relevant legislation and statutory guidance including:

[Children's Act 1989 and 2021](#)

[Working Together to Safeguard Children 2023](#)

[Care Act 2014 \(legislation.gov.uk\)](#)



This work links with the London Child Protection and Lewisham Adult Safeguarding Policy and Procedures by creating guidance, forms and tools, whilst establishing a platform to receive ongoing feedback and to promote good practice:

[Lewisham Safeguarding Children Partnership](#)  
[Adult Safeguarding Pathway Lewisham](#)

### **1.3 Principles**

**Everyone shares responsibility for safeguarding and promoting the welfare of children irrespective of individual professional or volunteering roles.**

**You should adhere to the following code of conduct:**

- always follow the Albany Safeguarding Policy and put the welfare of the children and adults at risk first;
- listen and respect children and adults at risk at all times and treat them with dignity;
- always ensure that language is appropriate and not offensive or discriminatory;

- always give enthusiastic and constructive feedback rather than negative criticism and recognise the developmental needs and capacity of the children and adults at risk;
- always work in an open environment (e.g. avoiding private or unobserved locations or situations and encouraging open communication);
- maintain a safe and appropriate distance with children and adults at risk and avoid unnecessary physical contact;
- do not develop relationships, either physical or emotional, with children and adults at risk which could in any way be deemed exploitative or abusive.

**We will seek to safeguard children, young people and vulnerable adults by:**

- valuing them, listening to and respecting them;
- adopting child protection/ adult at risk guidelines through procedures and a code of conduct for staff and volunteers;

- recruiting staff and volunteers safely, ensuring all necessary checks are made;
- sharing information about child/ adult at risk protection and good practice with children and adults at risk, parents, staff and volunteers sharing information about concerns with agencies who need to know, and involving parents and children appropriately;
- providing effective management for staff and volunteers through supervision, support and training;
- reviewing our policy and good practice annually and/or in line with changes in legislation.

#### **Role of the Designated Safeguarding Officer includes:**

- providing the 'first port of call' and offering advice and support to all staff regarding safeguarding issues;
- making referrals as necessary;
- keeping up to date with changes and developments in safeguarding;

- Disseminating policy and good practice to all staff, in particular:
  - Ensuring that staff/ volunteers understand their responsibilities for being alert to the signs of abuse and for referring any concerns to the Designated Safeguarding Officer (or deputy);
  - Ensuring that all staff/ volunteers have read, and are aware of the specific Albany policies and procedures;
  - Ensuring that new staff receive induction about safeguarding procedures and existing staff receive training as required;
  - Organising information relating to safeguarding so that this is accessible to all staff/ volunteers.

In the absence of the Designated Safeguarding Lead, the Deputy Designated Safeguarding Officer will assume the responsibilities of this role. In the absence of all of these people, or in respect to a complaint about either of these persons, immediate referral must be made to the local safeguarding authority.

The Designated Safeguarding Lead, Deputy Designated Safeguarding Lead and the Trustee with responsibility for Safeguarding should attend Level 3 Safeguarding Training at least every two years.

## 2. PROCEDURES

### 2.1 A description of the different categories of abuse

Abuse and neglect are forms of maltreatment of a child or adult at risk. Somebody may abuse or neglect a child or either directly by inflicting harm, or indirectly, by failing to act to prevent harm. Children/ adults at risk may be abused in a family or in an institutional or community setting; by those known to them; or, more rarely, by a stranger. They may be abused by an adult or adults, or another child or children.

There are four types of abuse:

- Emotional abuse
- Neglect
- Physical abuse
- Sexual abuse

### 2.2 How to recognise the signs of abuse

#### 1. Emotional abuse

This is any form of mental cruelty with a harmful effect on someone's emotional health or development like denying love or affection, constant threats or humiliation, witnessing abuse of others, sarcasm, degrading punishments, isolating or ignoring a child/ adult at risk or other forms of emotional abuse designed to undermine a person's confidence and sense of self-worth.

#### 2. Neglect

This is the failure of any person who has the responsibility for the charge, care or custody of a child/ adult at risk to provide the amount and type of care that a reasonable person would be expected to provide i.e. withholding necessities like food/ drink, warmth, safety, medical attention, educational or social needs. Neglect can be intentional or unintentional.

### **3. Physical abuse**

This is the non-accidental infliction of physical force that results in bodily injury, pain or impairment. Physical abuse includes hitting, kicking, punching and other ways of inflicting pain or injury such as poisoning, drowning or smothering. It also includes inducing illness with intent; giving a person harmful drugs or alcohol; illegal use of restraint.

### **4. Sexual abuse**

This is the direct or indirect involvement of a child/ adult at risk by another child or adult in sexual activity they have been coerced into or have not or cannot consent to (statutory rape), cannot understand or lack the mental capacity to be able to give consent to, e.g. encouraging a child to look at pornographic material is also abuse. Sexual abuse can include kissing, touching genitals or breasts, vaginal or anal intercourse and oral sex.

### **Additional forms of abuse and safeguarding issues**

#### **Child-on-child abuse:**

Children are capable of abusing their peers (including online) and the Albany works to minimise the risk of child-on-child abuse and will deal with any allegations robustly. 'Child' refers to any child or young person up to the age of 18 years. Abuse is abuse and should never be tolerated or passed off as 'banter', 'just having a laugh' or 'part of growing up'.

Safeguarding issues can manifest themselves via child-on-child abuse. This is most likely to include, but may not be limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying);
- abuse in intimate personal relationships;
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse);



- sexual violence such as rape, assault by penetration and sexual assault (see 'Harmful sexual behaviour' below);
- sexual harassment such as sexual comments, remarks, jokes and online sexual harassment, which may be stand-alone or part of a broader pattern of abuse (see 'Harmful sexual behaviour' below);
- causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party;
- up skirting, which typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause victim humiliation, distress or alarm;
- consensual and non-consensual sharing of nudes and semi nudes images and or videos (also known as sexting or youth produced sexual imagery - see below);

- initiation/ hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).

### **Harmful sexual behaviour:**

This is an umbrella term that includes sexual violence and sexual harassment. Problematic, abusive and violent sexual behaviours are inappropriate and may cause developmental damage. Harmful sexual behaviour can occur online and offline (both physical and verbal) and it is important to recognise the gendered nature such behaviour can take. Harmful sexual behaviour, like all child-on-child abuse, is never acceptable and will be taken seriously. Sexual violence and sexual harassment can occur between two children of any age and sex. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

### **Youth produced sexual or indecent imagery:**

Indecent imagery is the legal term used to define nude or semi-nude images, videos or live streams of children and young people under the age of 18.

This could be via social media, gaming platforms, chat apps or forums. It could also involve sharing between devices via services like Apple's Airdrop which works offline. Consensual and non-consensual sharing of nude images and/or videos can be signs that children are at risk.

Consensual image sharing, especially between older children of the same age, may require a different response. It might not be abusive - but children still need to know it is illegal - whilst non-consensual is illegal and abusive.

**Members of staff/ volunteers should not view sexual imagery which is reported to them, or copy, print, share store or save the images under any circumstances.**

In referring any incident of this nature, staff should describe the content of the images as reported to them.

### **Domestic Abuse:**

Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality.

The Domestic Abuse Act 2022 (Part 1) defines domestic abuse as any of the following behaviours, either as a pattern of behaviour, or as a single incident, between two people over the age of 16, who are 'personally connected' to each other:

- a. physical or sexual abuse;
- b. violent or threatening behaviour;
- c. controlling or coercive behaviour;
- d. economic abuse (adverse effect of the victim to acquire, use or maintain money or other property; or obtain goods or services);
- e. psychological, emotional or other abuse.

The definition of Domestic Abuse applies to children if they see or hear, or experience the effects of, the abuse; and they are related to the abusive person. Types of domestic abuse include intimate partner violence, abuse by family members, teenage relationship abuse and child/ adolescent to parent violence and abuse. Anyone can be a victim of domestic abuse, regardless of sexual identity, age, ethnicity, socio-economic status, sexuality or background and domestic abuse can take place inside or outside of the home.

## **Child Sexual Exploitation (CSE)**

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, either:

- 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.

Indicators of Child Sexual Exploitation may include:

- acquisition of money, clothes, mobile phones, etc. without plausible explanation;
- gang-association and/or isolation from peers/ social networks;
- exclusion or unexplained absences from school, college or work;
- leaving home/ care without explanation and persistently going missing or returning late;
- excessive receipt of texts/ phone calls;
- returning home under the influence of drugs/ alcohol;
- inappropriate sexualised behaviour for age/ sexually transmitted infections;
- evidence of/ suspicions of physical or sexual assault;
- relationships with controlling or significantly older individuals or groups;
- multiple callers (unknown adults or peers);
- frequenting areas known for sex work;
- concerning use of internet or other social media;

- increasing secretiveness around behaviours;
- self-harm or significant changes in emotional well-being.

### **Child Criminal Exploitation (CCE):**

Where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child into any criminal activity, either:

- a. in exchange for something the victim needs or wants, and/or
- b. for the financial or other advantage of the perpetrator or facilitator and/or
- c. through violence or the threat of violence.

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

Some of the following can be indicators of CCE:

- children who appear with unexplained gifts or new possessions;
- children who associate with other young people involved in exploitation;
- children who suffer from changes in emotional well-being;
- children who misuse drugs and alcohol;
- children who go missing for periods of time or regularly come home late;
- children who regularly miss school or education or do not take part in education.

CCE and CSE can affect children, both male and female and can include children who have moved (commonly referred to as trafficking) for the purpose of exploitation.

**County lines:**

A term used to describe gangs and organised criminal networks involved in exporting illegal drugs (primarily crack cocaine and heroin) into one or more importing areas [within the UK], using dedicated mobile phone lines or other form of “deal line”.

Exploitation is an integral part of the county lines offending model with children and vulnerable adults exploited to move [and store] drugs and money. Offenders will often use coercion, intimidation, violence (including sexual violence) and weapons to ensure compliance of victims.

Children can easily become trapped by this type of exploitation as county lines gangs create drug debts and can threaten serious violence and kidnap towards victims (and their families) if they attempt to leave the county lines network.

**Honour-based Abuse (HBA):**

This encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving “honour” often involves a wider network of family or community pressure and can include multiple perpetrators.

**Female Genital Mutilation (FGM):**

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. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM and have a specific legal duty to act with regards to concerns about FGM.

There are a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk; but if there are two or more indicators present this could signal a risk to the child or young person.

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

Victims of FGM are likely to come from a community that is known to practise FGM.

### **FGM is illegal in the UK.**

There is a mandatory duty to report to the police where it is discovered (either through disclosure by the victim or evidence as above) that FGM appears to have been carried out on a girl under 18. This must be referred to the Designated Safeguarding Officer in accordance with this policy.

### **Forced marriage:**

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some communities use religion and culture as a way to coerce a person into marriage.

### **Preventing radicalisation:**

Children are vulnerable to extremist ideology and radicalisation. Similar to protecting children from other forms of harm and abuse, protecting children from this risk is part of the Albany's safeguarding approach.



Extremism is the vocal or active opposition to our fundamental values, including the rule of law, individual liberty and the mutual respect and tolerance of different faiths and beliefs. This also includes calling for the death of members of the armed forces.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Early indicators of radicalisation or extremism may include:

- showing sympathy for extremist causes;
- glorifying violence, especially to other faiths or cultures;
- making remarks or comments about being at extremist events or rallies;
- evidence of possessing illegal or extremist literature;
- advocating messages similar to illegal organisations or other extremist groups;
- secretive behaviour;

- out of character changes in dress, behaviour and peer relationships;
- online searches or sharing extremist messages or social profiles;
- intolerance of difference, including faith, culture, gender, race or sexuality;
- graffiti, art work or writing that displays extremist themes;
- attempts to impose extremist views or practices on others;
- advocating violence towards others.

If any concerns arise, or are disclosed by a child, they will be responded to following normal safeguarding processes and advice would be sought from the local authority (either Prevent coordinator or children's social services) if necessary.

## **2.3 Ways that abuse might be brought to your attention**

- a child/ adult at risk might make a direct disclosure about him or herself;
- a child/ adult at risk might make a direct disclosure about another person;
- a child/ adult at risk might offer information that is worrying but not a direct disclosure;
- a member of staff might be concerned about a child/ adult at risk's appearance or behaviour or about the behaviour of a parent or carer towards them;
- a parent or carer might make a disclosure about abuse that a child/ adult at risk is suffering or at risk of suffering;
- a parent/ carer might offer information about a child/ adult at risk that is worrying but not a direct disclosure.

## **2.4 How to respond to a child/ adult at risk telling you about abuse**

- Let the child/ adult at risk tell their whole story. Don't try to investigate or quiz them, but make sure that you are clear as to what they are saying;
- Ask them what they would like to happen as a result of what they have said, but don't make or infer promises you can't keep;
- Reassure them that telling someone about it was the right thing to do;
- Tell them that you now have to do what you can to keep them (or the person who is the subject of the disclosure) safe;
- Let them know what you are going to do next and who else needs to know about it;
- Speak to the Designated Safeguarding Officer;
- If appropriate, provide the child/adult at risk with details for the ChildLine or Victim Support phone number (see 2.11).

## **2.5 Helping a child/ adult at risk in immediate danger or in need of an emergency response**

- If the child/ adult at risk is in immediate danger and is with you, remain with them and call the police;
- If the child/ adult at risk is elsewhere, contact the police and explain the situation to them;
- If they need emergency medical attention, call an ambulance and, while you are waiting for it to arrive, get help from your first aider;
- Contact your supervisor/ manager or Designated Safeguarding Officer to let them know what is happening;
- A decision will need to be made about who should inform the child/ adult at risk's family or carer and the local authority social care or children's social care department, and when they should be informed. If you have involved the police and/or the health services, they should be part of this decision. Consider the welfare of the child/ adult at risk in your decision making as the highest priority.

## **Issues that will need to be taken into account are:**

- the child/ adult at risk's wishes and feelings;
- the parent/ carer's right to know (unless this would place the child/ adult or someone else in danger, or would interfere with a criminal investigation);
- the impact of telling or not telling the parent/ carer;
- the current assessment of the risk to the child/ adult and the source of that risk.

## **2.6 How to escalate and respond to signs or suspicions of abuse or neglect**

If you are concerned about a child or adult at risk you need to report this to the Designated Safeguarding Officer (or deputy) normally in the same working day. Concerns may arise through a variety of ways, but will most likely be a personal observation or a disclosure from the child or adult at risk themselves or a third party. The aim is to safeguard the child or adult at risk and get them the support needed from statutory health or social or voluntary services. There is also a duty to refer criminal cases to the police.

If a significant concern or harm has been reported, there will be a referral made to the multi-agency safeguarding hub (MASH) and/or initial communication with a duty social worker to advise on a referral. We might be asked to provide detailed information but are usually not involved or informed beyond that point. Next steps by social services/MASH might involve a child protection conference, child Safety Framework Assessment, Early Help Assessment (EHA); the outcome might be a Child-In-Need (CIN) or Child Protection (CP) plan.

For designated persons see 2.11. For process and action to be taken by designated person see 3.2.

## **2.7 It is not safeguarding but I am still concerned**

Sometimes concerns about a child/ adult at risk may not be about abuse or neglect. You may be concerned that they or their family need some help in making sure all the child/ adult at risk's needs are met to address a particular problem. Examples of this might be where a child/ adult at risk is suffering because of poverty, getting into trouble in the community, or has a disability and needs extra help. In these instances, we may be able to get them help by using the MASH referral, ask for an Early Help Assessment (EHA), refer to their GP. Talk to the Designated Safeguarding Officer.

## **2.8 How to respond to allegations of child abuse against staff**

If an allegation is made against a staff member it should be reported instantly to the Designated Safeguarding Officer or senior manager. They will follow internal investigation and disciplinary procedures as well as escalate, as appropriate, to the Local Authority Designated Officer (LADO) and police. If the allegation is about a senior member of staff, then the incident should be passed to the CEO or Chair of the Board.

LADO contact under 2.11.2 and for process and action to be taken by designated person see 3.2

## **2.9 What and how information will be recorded**

It is important that any records that are created in the course of managing child safeguarding situations are managed and protected appropriately.

UK Data Protection law requires that personal information generated from such records be:

- a. adequate, relevant and not excessive for the purposes(s) for which they are held;

- b. accurate and where necessary kept up to date;
- c. not kept for longer than is necessary for its purpose;
- d. in any given situation, an accurate record should be kept, and should be signed by the person or people making the statement.

The following details should be included - be specific:

- date and time of incident/ disclosure;
- name, age, contact details of child/ren involved;
- parties who were involved, including any witnesses to an event (names and addresses;
- what was observed, said or done and by whom – be specific, avoid vague or blanket statements;
- any investigation actions undertaken by you/ the organisation to look into the matter;
- any further action taken;
- where relevant, the reasons why a decision was taken not to refer those concerns to a statutory agency;

- any interpretation/ conclusion drawn from what was observed, said or alleged should be clearly recorded as such;
- names and contact details of person reporting the concern and of the person to whom the concern was reported, date and time when it was reported and recorded.

Refer to 3.6 for Safeguarding Concern / Incident Report.

## **2.10 Confidentiality**

The legal principle is that the “welfare of the child is paramount”. Privacy and confidentiality should be respected where possible but if doing this leaves a child at risk of harm then the child’s safety has to come first. Legally, it is fine to share information if someone is worried about the safety of a child or adult at risk. Not everyone needs to know when a concern or worry is raised. This respects the child/ adult at risk’s, family’s and/or staff’s rights to privacy. So only people who need to know should be told about it. Otherwise, there might be gossip and rumours or other people may be genuinely concerned. It is fine to say that a concern has been raised and it is being dealt with following the organisation’s procedures.

## 2.11 Useful contact details



### **Designated Safeguarding Officer:**

Annette Butler (Head of Buildings, Operations and Programming, Deptford Lounge)

Tel: 07538 324689

Email: [annette.butler@thealbany.org.uk](mailto:annette.butler@thealbany.org.uk)

### **Trustee with responsibility for safeguarding:**

Ahmet Ahmet

Email: [mrismet@icloud.com](mailto:mrismet@icloud.com)

### **The Albany:**

Front of House team

Tel: 020 8692 4446

Email: [reception@thealbany.org.uk](mailto:reception@thealbany.org.uk)

### **Deptford Lounge:**

Duty Management team

Tel: 020 8314 7288

Email: [deptfordlounge@thealbany.org.uk](mailto:deptfordlounge@thealbany.org.uk)

### **Childline**

**Freephone: 0800 1111**

[chat with a counsellor via their website](#)

### **NSPCC Helpline**

**0808 800 5000**

[help@nspcc.org.uk](mailto:help@nspcc.org.uk)

Worried about a child? Contact trained helpline counsellors for 24/7 help, advice and support

### **Police**

Non-emergency: 101 / textphone 18001 101

Emergency: 999 / textphone 18000



## 2.11.2 Lewisham contacts - referrals / escalations concerning a CHILD/ YOUNG PERSON

### Lewisham Health and Social Care for Children and Families

**If you think a child or young person may be in immediate danger, call 999.**

Otherwise contact Lewisham Health and Social Care for Children and Families.

**020 8314 6660**

**out of hours call 020 8314 6000**

and ask to speak to the out-of-hours duty social worker.

### Multi Agency Safeguarding Hub (MASH)

MASH provides a single point of access to the services that help keep children safe; it brings together a variety of agencies into an integrated team; where information is shared appropriately and securely on children, families and adults around the child or young person in order to make timely and appropriate decisions. Referrals can be made to Lewisham Health and Social Care for Children:

**020 8314 6660**

[MASHagency@lewisham.gov.uk](mailto:MASHagency@lewisham.gov.uk)

Lewisham Children Social Care, Laurence House, First Floor,  
1 Catford Road, SE6 4RU

[EHA Lewisham](#) (to ask for Early Help Assessment)

### Local Authority Designated Officer (LADO) Lewisham

The LADO takes the lead where allegations or concerns of harm caused are relating to an individual who works with children and young people (including volunteers, agency staff and foster carers) or who is in a position of authority and having regular contact with children (e.g. religious leaders or school governors).

#### **LADO Contact Details:**

Caroline Aitken

**020 8314 7280**

[LewishamLADO@Lewisham.gov.uk](mailto:LewishamLADO@Lewisham.gov.uk)

London Borough of Lewisham, 1st Floor Laurence House,  
1 Catford Road, SE6 4RU

**Quality Assurance Duty Desk: 020 8314 9177**

**Quality Assurance Team Manager: 020 8314 7280**

### 2.11.3 Lewisham contacts - referrals / escalations concerning a vulnerable ADULT

[Report an Adult Safeguarding concern in Lewisham via their webform](#)

**M-F 9-5pm 020 8314 7777**

(option 1 for social care, option 4 for mental health crisis)

**For out of hours referrals call 020 8314 7766 or the central desk 020 8314 6000**

[gateway@lewisham.gov.uk](mailto:gateway@lewisham.gov.uk)

[MARAC Multiagency Risk Assessment Conference](#)

**020 8314 6512**

Referrals can be made without consent or knowledge of the victim, though this would be preferred, but it may put them/ their children at higher risk. MARAC works alongside other agencies to ensure the safety of women at high risk of domestic violence and abuse. Key agencies in Lewisham meet once every four weeks to discuss the highest risk victims who live in Lewisham. Information about the risks faced by those victims is shared in detail and decisions are made to increase the safety, health and wellbeing of domestic violence and abuse victims, both adults and for their children. The conference also gives consideration to the perpetrator and looks at what intervention is available for them too.

[dvmarac@lewisham.gov.uk](mailto:dvmarac@lewisham.gov.uk)

### 2.11.4 Dealing with aftermath

[Victim Support Lewisham](#)

South London Victim and Witness Service

**Freephone 0808 168 9291 M-F, 8am-8pm**

Or nationally 24/7 via the [live chat](#)

**or Freephone 08 08 16 89 111**

If less urgent, [request support](#) via their [website](#).

### 2.11.5 Rape and Sexual Abuse support services

[Family Matters](#)

Provides counselling to survivors of rape and sexual abuse

**Helpline 01474 53 7392/6661**

[Rape Crisis Support](#) and **Sexual Abuse South London**

Offers support in cases of sexual abuse, assault and rape

**Freephone 0808 500 2222**

or online chat [247sexualabusesupport.org.uk](https://247sexualabusesupport.org.uk)

National website: [rapecrisis.org.uk](https://rapecrisis.org.uk)

[The Havens](#)

**020 3299 6900**

Specialist centres in London for people who have been raped or sexually assaulted. For counselling, urgent advice or medical support, call.

## 2.11.6 General information, advice and training

### NSPCC

Child safeguarding for the voluntary and community sector

### Safeguarding in Lewisham

**020 8314 3396**

[www.safeguardinglewisham.org.uk/lscp](http://www.safeguardinglewisham.org.uk/lscp)

[safeguardingpartnership@lewisham.gov.uk](mailto:safeguardingpartnership@lewisham.gov.uk)

### Female Genital Mutilation: FMG Lewisham information

### Domestic abuse: Domestic violence Lewisham advice

### Domestic abuse London information

### What to do if you're worried a child is being abused

### Information sharing advice for safeguarding

## 2.11.7 Information for adult safeguarding

### Safeguarding in Lewisham

[www.safeguardinglewisham.org.uk/lsab/lsab](http://www.safeguardinglewisham.org.uk/lsab/lsab)

[lsab@lewisham.gov.uk](mailto:lsab@lewisham.gov.uk)

### Adult Safeguarding Pathway Lewisham

### Social Care Institute for Excellence

Can carry out case assessment referral (preferably with discloser's consent and knowledge)

### Adult Social Care Lewisham

## 3. APPENDICES

### 3.1 Terminology and acronyms

#### **Child/ young person**

For the purpose of this policy and the definition of abuse, the term child or young person refers to any person up to the age of 18 and to adult at risk to any person of 18 years and above.

#### **Vulnerable adult**

An adult at risk is someone unable to safeguard her/ himself against significant harm or exploitation OR is/ may be unable to take care of themselves and in need of Community Care Services by reason of mental or other disability, age or illness.

It may therefore include people who are elderly or frail or suffer from a physical or learning disability, sensory impairment, poor mental health, dementia, alcohol/ substance misuse or any other long-term illness that impacts on their capacity or persons who lack capacity for any other reason.

#### **DSO**

Designated Safeguarding Officer (leads on safeguarding within the organisation and is the referral point for any incidents or disclosures, see 2.11 for contacts).

#### **DDSO**

Deputy Designated Safeguarding Officer (deputises in the event of the Designated Safeguarding Officer not being available).

#### **LADO**

Local Authority Designated Officer (see 2.11.2 for contact details)

#### **MASH**

Multi Agency Safeguarding Hub (see 2.11.2 for contact details)

#### **EHA Lewisham**

Early Help Assessment (multi-agency approach working with MASH)

### **3.2 Process and action to be taken by designated person**

For all incidents contact the Designated Safeguarding Officer (or Deputy Designated Safeguarding Officer). They will seek external guidance as appropriate and agree to act as follows:

- internal follow-up or whether to make an external referral for the child/ vulnerable adult;
- what action to take e.g. need more information, discuss with third party, refer to social care services, report to the police;
- degree of urgency and timeline for actions;
- individuals' roles – who does what;
- whether separate process is needed for dealing with suspected abuser – e.g. disciplinary procedure, referral to LADO, report to police;
- whether/how to inform parent/ carer;
- what to discuss with child/adult and how to support them;
- what communication is needed with partner organisation/ what action by partner;
- how to manage confidentiality;
- Implement action/ timetable as agreed above;
- ensure detailed written record is made has been passed to DSO – normally within 2 working days;
- consider support needs of staff member;
- record to be stored securely and confidentially;
- Follow up with any agencies (i.e. EHA/MASH) and child/ adult and parent/ carer as appropriate.

## THE ALBANY - FLOW CHART FOR REFERRALS

### Designated Safeguarding Officer (DSO):

Annette Butler (Head of Buildings, Operations and Programming, Deptford Lounge)

Tel: 07538 324689

Email: [annette.butler@thealbany.org.uk](mailto:annette.butler@thealbany.org.uk)

### Lewisham Multi-Agency Safeguarding Hub:

[MASHagency@lewisham.gov.uk](mailto:MASHagency@lewisham.gov.uk)

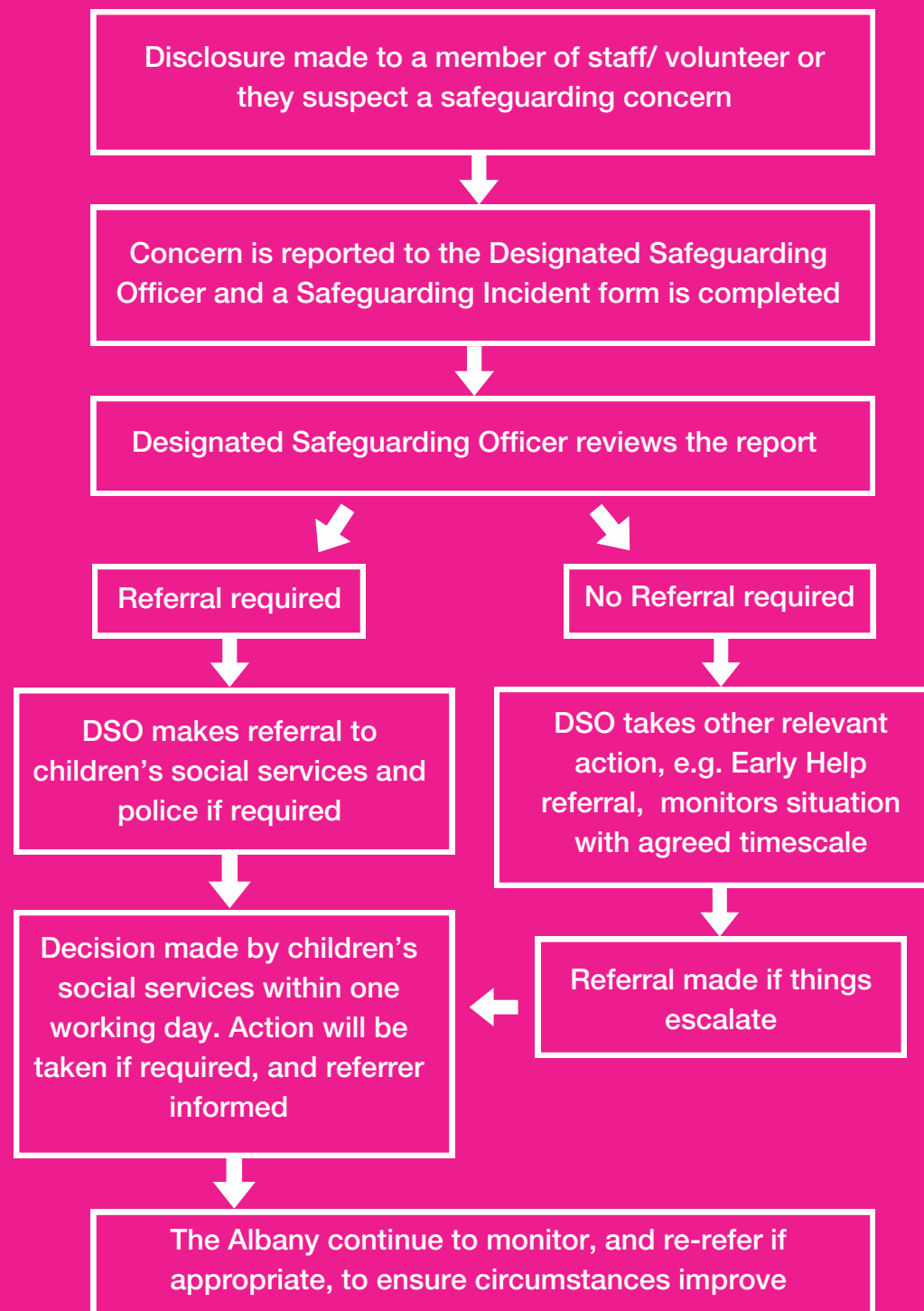
020 8314 6660

### LADO contact details:

Caroline Aitken

020 8314 7280

[LewishamLADO@lewisham.gov.uk](mailto:LewishamLADO@lewisham.gov.uk)





### 3.3 Local Authority Designated Officer (LADO) support and process

In Lewisham, we must report every case within 24 hours where it is alleged that a person working with children has:

- a. behaved in a way that has harmed or may have harmed a child; and/or
- b. possibly committed a criminal offence against or related to a child; and/or
- c. behaved towards a child/ren in a way that indicated s/he would pose a risk of harm if they work regularly or closely with children.

If unsure as to whether the incident or concern needs to be referred, ring the LADO to discuss (see 2.11.2).

#### **If the matter is serious or there are immediate concerns**

for the child's safety or wellbeing, or the LADO and deputy are not available a telephone referral must be made to the appropriate social care team.

The LADO should discuss the incident with the employer and confirm next steps. In most circumstances the options available to the employer are:

- no further action;
- investigation/ disciplinary/ dismissal;
- discontinuation of the use of the service (freelancers/ external companies).

Severity of the allegation, information and evidence available determine the next steps.

#### **Police or children's social care**

Allegations made to the police will be passed to the force's designated liaison officer, who will contact the LADO. This is also the case if an incident is reported to children's social care, who should then contact the LADO without delay.

#### **Considerations**

The LADO will pursue the allegation firstly with the employer to obtain further details of the incident and circumstances. The liaison with the employer should determine whether the allegation is unsubstantiated.

If the allegation is a definite and there is cause for concern that a child is suffering, at risk or likely to suffer significant harm, then the LADO should refer instantly to children's social care and initiate a strategy discussion. The LADO and employer should be involved in the loop of activity and outcomes.

If a criminal offence has occurred, then the LADO should immediately involve the police and decide whether an investigation is needed. The employer should be involved in any discussion.

In cases where the allegation doesn't involve a criminal investigation this should be dealt with by the employer. If the incident doesn't require further disciplinary action, other appropriate means could be taken, this must be done within three working days.

Where no further investigation is required, Disciplinary hearings should be undertaken within 15 working days.

Where further investigation is needed it is recommended that a person independent to the case undertakes the disciplinary investigation to ensure fairness of the process. The independent person should aim to compile a report of the investigation within 10 working days. On completion of the findings the employer will have 2 working days to decide whether a hearing is required.

The LADO is required to have a presence throughout the case; they should be available for the employer to offer support, help and advice but should also monitor the progress during the case.

Police Investigations should take no longer than four weeks after the incident occurred. The police should set a target date for review progress for the investigation.

The Police with consultation from the [Crown Prosecution Service \(CPS\)](#) will need to scrutinise evidence gathered in order to charge the person, if necessary, at a later stage of the case. If the CPS and police concluded that no charge is necessary, all information should be passed to the employer who will then decide whether a disciplinary hearing is required. If a disciplinary is actioned, then the employer should contact the LADO who should help the enquiry.

If the alleged individual is convicted of any offence the police should contact the employer immediately so they can undertake further action as they see appropriate.

Employers and providers must refer details to the [Disclosure and Barring Service](#) (formerly the Independent Safeguarding Authority (ISA)) when an alleged person has resigned, or they have been dismissed because they have harmed or could harm children or vulnerable adults. The information should be referred to the DBS as soon as it becomes known. Failing to refer the relevant information to the DBS will result in a fine for the employer.

### **3.4 Risk Assessment**

There may be occasions where a risk assessment is necessary to help protect a child, young person, vulnerable adult or a member of staff/ volunteer from risk of harm.

Once a Risk Assessment is completed it should be shared with all relevant parties.

### **3.5 Parental Consent Forms**

#### **Photography Consent Form**

### **3.6 Safeguarding Concern/Incident Report form**

All safeguarding concerns or any incidents that have caused harm (or may cause harm) to a child, young person or vulnerable adult must be recorded on the Safeguarding Concern/ Incident Report form.

#### **Safeguarding Concern/ Incident Report Form**

### **3.7 Safer recruitment**

Safeguarding the children, young people and vulnerable adults who a post holder might have contact with is considered at the advertising and recruitment stage. Appropriate details and requirements are included in the job description and person specification and communicated during the recruitment stage. All staff, volunteers and trustees are required to attend interviews and provide references, as detailed in Recruitment policy and procedures.

A Disclosure and Barring Service (DBS) check will also be obtained for staff, volunteers and trustees recruited to certain positions, the level of that check will depend on their access to children, young people and vulnerable adults. A repeat DBS check will be obtained every three years for all eligible employees, volunteers and trustees.

During interview all candidates will be questioned regarding their understanding of safeguarding and how that might be a consideration in the role they are applying for.

### **3.8 Trustees**

The Charity Commission is clear that Trustees have primary responsibility for safeguarding in their charity. In fulfilling their duty of care, trustees and delegated managers need to take steps to safeguard and take responsibility for the children and vulnerable adults with whom the Albany works.

This means:

- acting in their best interests;
- taking all reasonable steps to prevent any harm to them;
- assessing and managing risk;
- putting safeguarding policies and procedures in place;
- undertaking ongoing monitoring and reviewing to ensure that safeguards are being implemented and are effective;
- responding appropriately to allegations of abuse.

There is a named Trustee responsible for safeguarding who has received safeguarding training (see front page for name and contact details).

### **3.9 Review of Policy**

The Albany's Safeguarding Policy is reviewed and updated at least annually, by the designated safeguarding working group, who meet bi-monthly, and is comprised of the Designated Safeguarding Officers and leads, named in section 2.11. The last external review was conducted in March 2024.



The Albany, Douglas Way, SE8 4AG  
The Albany is a registered charity number 1112521

   @TheAlbanySE8 | [www.thealbany.org.uk](http://www.thealbany.org.uk)



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