

# Annex A: Template for Safeguarding Children Policy Statement –

## Facilities holding children and/or families with children [Tinsley House/PDA/STHFs/Escort supplier]

1. [‘Working Together to Safeguard Children’](#) (2015) sets out how organisations and individuals should work together to safeguard and promote the welfare of children.
2. Effective safeguarding arrangements in every local area should, according to ‘Working Together’, be underpinned by two key principles:
  - Safeguarding is everyone’s responsibility: for services to be effective each professional and organisation should play their full part; and
  - A child-centred approach: for services to be effective they should be based on a clear understanding of the needs and views of children.
3. A child is defined by ‘Working Together’ as anyone who has not yet reached their 18th birthday. “Children” therefore means children and young people throughout. The fact that a child has reached 16 years of age, is living independently or is in further education, is in hospital or in custody in the secure estate for children and young people, does not change his or her status or entitlement to services or protection under relevant child welfare legislation.

## Status of the policy statement

4. Detention Services Order 19/2012 requires each detention facility, including the escort supplier, to implement a safeguarding children policy statement consistent with the template provided for that purpose.
5. The safeguarding children policy statement will help staff to fulfil the duty, under section 55 of the Borders, Citizenship and Immigration Act 2009, to have regard to the need to safeguard and promote the welfare of children in the UK.

\*(PDA/Tinsley House): This policy statement is consistent with the template at Annex A of DSO 19/2012 and has been agreed with the Local Safeguarding Children Board (LSCB). It will be reviewed annually in consultation with the LSCB and the Home Office.

[Or]

\*(STHFs/Escorting process): This policy is consistent with the template at Annex A of DSO 19/2012 and will be reviewed annually in consultation with the Home Office. We will work through LSCB/ Child Protection Committee links already established by Border Force, Immigration Enforcement or UK Visas and Immigration as required.

(\*Delete as appropriate)

## Strategic policy

6. The management of **[Name of supplier]** recognises and accepts the requirements placed on us by section 55 of the Borders, Citizenship and Immigration Act 2009.
7. **[Name of supplier]** understands our contribution to safeguarding and promoting the welfare of children held in our care to be primarily, in practice, the development and implementation of policies and arrangements designed to:
  - minimise the impact of stay on parenting ability;
  - normalise the environment;
  - clarify and help children prepare for onward arrangements;
  - protect the children resident here from harm, including self-harm or suicide, harm from other residents (bullying and other potential forms of abuse which may occur), and harm from staff and other adults, for example, visitors;
  - safeguard the children who are not held in our care but with whom staff have routine contact, when in contact with those children, for example, visiting children; and
  - minimise the risks of harm to children living in the community from detainees who have been identified as presenting such a risk, which could occur during any form of contact with a child, including via telephone, the internet and visits.
8. All staff have a duty to contribute to the implementation of the above policies and arrangements. The role of all staff will be made clear in job specifications, through day to day unit supervision and management, through bilateral discussions with staff and through performance management reviews.

## Core component policies/arrangements

9. The core component policies arrangements are as set out below:

## Child protection

**[Name of supplier]** understands that effective child protection is an essential part of the wider work to safeguard and promote the welfare of children. Child protection refers to the activity which is undertaken to protect children who are suffering, or are likely to suffer, harm. All staff in the centre will therefore aim to proactively safeguard and promote the welfare of the children so that the need for action to protect them from harm is reduced.

**[Name of supplier]** understands that detained children are inherently vulnerable by virtue of having lost the support networks that may have sustained them in the community, and that staff must be able to recognise, and know how to act upon, evidence that a child's health or development is or may be being impaired, and especially when they are suffering, or at risk of suffering, harm.

Where staff become aware that a child has suffered or may be at risk of suffering harm at **[centre name]**, or information about/allegations of previous harm come to light from other sources, they will follow the procedure at Appendix 1. Staff in England and Wales should be aware of the statutory guidance titled "[Working together to safeguard children](#)" on inter-agency working. Staff in Scotland should be aware of the [national guidance for child protection in Scotland](#), while staff in Northern Ireland should be aware of guidance provided by the [Safeguarding Board for Northern Ireland](#).

## Minimising impact of stay on parenting ability

**[Name of supplier]** recognises the importance of supporting potentially distressed parents in our care to enable them to continue effective parenting of their children.

The primary safeguarding responsibility rightly remains with parents during their stay.

**[Name of supplier]** will provide appropriate support to parents who are distressed while held in our care, aimed at encouraging and enabling them to focus on their children, and will plan jointly with parents to meet identified needs. Where concerns about a parent's ability to meet a child's needs continue after advice has been given and support offered, then a family support plan will be drawn up by key personnel, including on-site social workers, if any.

Arrangements will be made to endeavour to ensure continuation of the existing pattern of care between parents and their children. The role of the parents as the main providers of communication, care and reassurance to their children will be recognised.

## Normalising stay in the centre

**[Name of supplier]** will aim to normalise children's stay in **[Name of centre]** as far as is possible. The aim will be to create a positive, family-friendly environment. Families will be accommodated in dedicated family rooms/apartments to ensure that family members are

not separated and, so far as is possible within the constraints of detention, are able to maintain family life. Families will be accommodated separately from single adults.

Children will be able to maintain voluntary personal links with their former school if they wish and to maintain contact with friends they have made. There will be opportunities to participate in a range of activities and play.

Children should, where practicable/appropriate, have access to discussion forums and counselling services to help them to articulate and address concerns.

Arrangements to protect children from potentially distressing situations will be offered to parents - for example, crèche or play/leisure facilities.

Staff should avoid any unnecessary intrusion into families' daily routines which might reinforce the fact that they are in a custodial environment.

### Clarifying onward arrangements (PDA only)

**[Name of supplier]** recognises that families may be anxious about what the future holds or require practical assistance with preparations for returning home.

**[Name of supplier]** will ensure that families who are anxious about their future, or require practical assistance with preparations for returning home, are directed to an appropriate person for help. Depending on the particular circumstances, this may be the centre's welfare officer(s) or staff of a partner organisation providing welfare support at the centre who, for instance, could help with advice on: closing bank accounts; gathering personal belongings; arranging for transportation of excess baggage; helping a child research the intended country of destination, or contacting the child's former school to have exam results forwarded.

In cases in which there are welfare concerns for a child, these will be relayed to the Local Authority's Children's Social Care if the child is being returned to the community. If such a child is being returned to his/her country of origin, staff can support the Home Office case holder in contacting International Social Services.

### Information sharing protocol

A written protocol has been published and is at annex [...]. The protocol is consistent with the Department for Education's guidance '[Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers](#)', including the seven golden rules for sharing information effectively. **[Name of supplier]** recognises that professional and lawful sharing of information is essential to enable early intervention and to safeguard children at risk of significant harm.

## Staff training strategy

Staff working with children will receive suitable training, which must be at least equivalent to Tier 1 of Home Office “Keeping Children Safe”. A staff training strategy will set priorities for training in safeguarding and will provide access to the internal training programmes, e.g. ACDT **[centre/PDA suppliers to add additional local programmes]**, and to relevant LSCB and multi-agency training. Training will be monitored, and reviewed regularly.

## Escorted travel (escorting supplier only)

**[Name of supplier]** acknowledges that the safety and comfort of everyone involved in an escorted journey is paramount and that extra care must be taken to ensure that children’s needs are looked after. Caged vehicles will **not** be used for the transportation of families with children or unaccompanied children.

Food and drink will be provided during travel when the child needs it, as well as comfort breaks and any other necessary breaks. Refreshments provided will be culturally appropriate.

Suitable and correctly positioned child seats and or restraints will be available for all babies and children in line with the relevant legislation.

## Other component policies/arrangements

The other component policies/arrangements are:

### Effective inter-agency working

**[Name of supplier]** recognises that safeguarding and promoting the welfare of children detained in our care – and in particular protecting them from harm - depends on effective joint working between agencies and professionals that have different roles and expertise; and that individual children, especially some of the most at risk children, may need co-ordinated help from a number of different sectors (e.g. health, education, children’s services). The centre will contribute to these shared responsibilities by:

- being alert to potential indicators of abuse or neglect;
- being alert to the risks which individual abusers, or potential abusers, may pose to children;
- sharing and helping other agencies to analyse information so that a shared assessment can be made of the child’s needs and circumstances;
- contributing to whatever actions are needed to safeguard and promote the child’s welfare;

- taking part in child protection and other relevant external planning meetings as required; and
- working cooperatively with parents, unless this is inconsistent with ensuring the child's safety.

### Work with individual children (PDA only)

**[Name of supplier]** will work with each of the children held in our care to help safeguard and promote their welfare. In particular:

- a health-led initial assessment, informed by advance information, on admission will be made to identify their needs, and a plan will be formulated to address these;
- there will be ongoing assessment of the welfare needs of all children and in the event of any concerns, appropriate referrals will be made;
- children will have access to other members of staff (including managers of religious affairs team, counsellors and social workers) and to the Independent Monitoring Board;
- children will be valued and respected, they will be listened to and their views and concerns responded to; they will be encouraged to take part in activities that can influence and help shape decisions affecting their stay in the centre.

### Consultation (PDA only)

The children held in **[name of centre]** will, as far as is practicable, be involved collectively in decisions about regime provision and facilities and about the physical environment by means of [describe whatever consultative arrangements/forums have been established locally].

### Involvement of the family/carers

Every effort should be made to ensure that parents' rights and wishes in relation to their children are respected and to maintain the family routines and the interaction to which they are accustomed. Parents still retain full parental responsibility for their children.

Staff should be vigilant for any deterioration in the capacity or willingness of parents to care for their children. If a parent is unwell, physically or mentally, then staff must be extra vigilant in looking out for any health and/or welfare problems in a child, both physical and mental.

In dealing with children and their parents, staff must see the family as a unit but, at the same time, as individuals potentially affected in different ways by the issues of concern. In

particular, it is important not to lose sight of the child as an individual, as well as part of a family, and to be vigilant and responsive to the child's needs.

Where a child held at the centre unexpectedly becomes unaccompanied as a result of the lone parent/carer being admitted to hospital the Local Authority Children's Social Care/Social Work Department should be contacted immediately about arrangements for the care of the child. Where a lone parent's/carer's admittance to hospital is known in advance, contact should be made with the Local Authority's Children's Social Care/Social Work Department in good time to plan appropriate care arrangements for the child.

### **Diversity**

**[Name of supplier]** will respect and celebrate diversity and show sensitivity to the race, culture, religion, sexuality and disability of every child held in our care. We will do so in the following ways: communicate with each child, ensure that they are listened to and ensure that responses are provided to their views and concerns. **[insert details of local initiatives]**

### **Complaints procedures**

A complaints procedure that is age appropriate and ensures that each child feels safe from repercussions when making a complaint is a critical part of safeguarding and promoting the welfare of detained children. Arrangements for dealing with complaints, formal requests and incidents requiring investigation will ensure that they are dealt with proactively, rigorously, fairly and promptly. Staff will seek to ensure that the procedures are clearly understood by every child and that they are given any necessary help to avail themselves of the procedures.

### **Whistle-blowing**

**[Name of supplier]** will ensure that staff are aware of their contractual duties and of their professional obligation to raise legitimate concerns about the conduct of colleagues or managers; and will have in place clear procedures and support systems for dealing with expressions of concern by staff and carers about other staff or carers in ways which do not prejudice the "whistle-blower's" own position and prospects.

### **Record keeping and use of IT**

Private and secure records on each individual child will be maintained, containing all relevant personal information, contact numbers and details of relevant occurrences. The effectiveness of the centre's IT systems in enhancing the effectiveness of its work with children will be kept under review.

### **Children who are visitors (Tinsley and PDA only)**

Visitors under the age of 18 are allowed to visit detainees if they have a close relationship with the detainee, for example if the detainee is their parent, sibling, step-parent, parent's partner, other close family relationship or a family friend. A record must be kept of the



child's name and date of birth. No visitor under the age of 18 years old is allowed to visit a detainee unless they are accompanied by an adult. No detainee with a known history of being a risk to children will normally be allowed a visit by anyone under the age of 18 years old. However, in exceptional circumstances, where the visit will be supervised by a social worker, the Safeguarding Children Manager/Safeguarding Lead must be consulted ahead of the planned visit to ensure that appropriate safeguards are in place. If centre staff have any concerns regarding the welfare of any visitor under 18 years encountered trying to visit a detainee, they should always refer the information to their local social services for advice and information.

### Minimising the risk by detainees to children not resident in the centre

**[Name of supplier]** will have procedures in place for minimising the risk by detainees at **[Name of centre]** to children in the community.

## Taking an integrated approach

### At the integrated level

#### Safeguarding Children Manager

A Safeguarding Children Manager will be appointed as part of the IRC supplier/welfare provider's Senior Management Team to:

- ensure that all strategic matters concerning the welfare and safety of children living at the centre are addressed properly and appropriately;
- manage safeguarding meetings, which must take place [insert appropriate minimum frequency] and include, in addition to the Safeguarding Children Manager, Supplier Centre Manager or nominated deputy, the Compliance Team Manager or nominated deputy, any social worker(s) based in the centre, **[Add any other staff (for example, from the staff training/HR team or from the religious affairs team) who will attend under local arrangements];**
- ensure that the development of policy and practice guidelines and other planned changes at the centre are appropriately informed by the view of children using the services;
- promote effective information sharing about risk and vulnerability within the centre and with external agencies;
- develop links with external statutory and voluntary agencies to help ensure that every child's safeguarding and welfare needs are well supported while the child



is held and that plans are made for this support to be continued in the community, where relevant; and

- represent the centre, where appropriate, at Home Office/Detention and external forums.

### **Safeguarding Lead**

The IRC supplier/welfare provider/escort supplier may identify a Safeguarding Lead to respond to all safeguarding concerns and liaise with any investigating agencies as and when required.

The Safeguarding Lead will ensure that the Safeguarding Children Manager, the Home Office and the IRC supplier (if different organisation) are kept informed about concerns raised, decisions taken and any proposed actions.

### **Local Safeguarding Children Boards**

The **[centre]** will develop appropriate links with the Local Safeguarding Children Board (LSCB)/Child Protection Committee.

The **[Supplier Centre Manager/Safeguarding Children Manager]** will engage with the LSCB in line with the memorandum of understanding between the LSCB and the Home Office.

### **At the operational level**

[Explain how links will be made at the local operational level between the core component safeguarding children policies, in particular the links across minimising the impact of detention on parental ability and child protection protocols. Refer to any integrated referral systems and screening processes or arrangements for multi-disciplinary joint team working].

# Annex A – Appendix 1: Safeguarding Children Procedure

## Facilities holding Children/Families with Children [Tinsley House/PDA/STHFs/Escort supplier]

**[Name of supplier]** has put in place a procedure for managing concerns about the safety or welfare of a child, either current or historical.

Where a member of staff becomes aware that a child is believed to have suffered or is believed to be at risk of suffering harm physically, emotionally, sexually or through neglect while in **(Name of centre/escort supplier)**; or that a child is believed to have suffered or was at risk of suffering harm before they arrived, a safeguarding referral must be made immediately to the **local authority /Safeguarding Lead/Duty Manager\*** **(delete as appropriate to reflect local arrangements)**. [Add additional specific local reporting requirements, if any].

### **Indirect referrals (Delete heading and paragraphs below if all referrals are to be made directly to the local authority)**

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The procedure set out below and summarised in the flow chart at Appendix 1(A) is consistent with established procedures as set out in 'What to do if you're worried a child is being abused' and 'Working together to safeguard children'. Key definitions and concepts are contained in Appendix A of [Working Together \(2015\)](#).

In deciding on the appropriate course of action at this and every subsequent stage, the Safeguarding Children Manager or nominated Safeguarding Lead will consult any on-site social worker wherever possible. **[Delete if not applicable]**.

The nominated Safeguarding Lead/Duty Manager will first clarify with the referrer the nature of their concerns; how, when and why they have arisen; what appear to be the immediate needs of the child; and whether urgent action (e.g. police, hospitalisation) is required to protect them from further harm.

The Safeguarding Lead/Duty Manager will then refer the matter to the Safeguarding Children Manager, if different. The latter, having discussed the concerns with the Safeguarding Lead/Duty Manager and/or other staff as appropriate, will make an assessment on behalf of the centre/escort supplier. This preliminary assessment – which should clearly identify the foundations of the concerns, drawing from available evidence –

will take place as soon as possible and, without exception, within 12 hours (one hour for escort supplier). All information will be appropriately recorded at this and every subsequent stage.

Allegations of serious sexual assault should immediately be referred to the police. No further investigation of the allegation should be undertaken by the centre at this stage.

If, on the basis of the available information, there is reasonable cause to suspect that the child may have suffered or is likely to suffer significant harm, or if one or more of the other referral criteria agreed [with the LSCB, delete if not applicable] are met, the follow action should be taken:

### **Escort supplier**

Refer the concerns to the Home Office, using protocols agreed locally, for action to be taken in line with [safeguarding referral guidance for Home Office staff](#) (add local arrangements for doing so); or

### **PDA/Tinsley**

Refer concerns to Local Authority Children's Social Care (LACSC) via the arrangements agreed with the LSCB. Any allegation referred to the police must, in addition, be immediately notified to the Child Abuse referrals inbox and the on-site Compliance Team.

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### **Referral Criteria (PDA/Tinsley)**

These should be as published in the LSCB threshold document (see paragraph 18 of [Working Together](#)) and must be agreed with the LSCB.

### **Arrangements for Referral to Local Authority Children's Social Care (PDA/Tinsley)**

[These arrangements should specify, for example, the normal LACSC contact point, alternative contact(s) in the contact's absence, the detail of the information LACSC will require and within what timescales; and the form in which the information should be presented].

On receipt of the referral, LACSC will, within one working day, acknowledge receipt of the referral and decide on the type of response required. Requirements and possible outcomes are set out in '[Working Together](#)'.

The Independent Monitoring Board will be informed at this stage by the Safeguarding Lead (or Duty Manager). All information given to the Board is bound by the general terms and conditions of confidentiality.

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Staff who have concerns about a child must not let uncertainty about the type of case being dealt with delay referral. Staff must always err on the side of caution and refer without delay. Their role is to identify concerns, not to investigate or to assess risk/ need.

Where police investigation of an allegation of abuse against a member of **[Name of supplier]** staff at **[Name of centre]** results in a decision not to prosecute, the Supplier Centre Manager will decide whether internal investigation, internal disciplinary action or other action should be taken. He/she will follow **[supplier's]** disciplinary procedures and will also have regard to the guidance given in Chapter 2 of ['Working Together' \(2015\)](#).

It will need to be established whether the alleged perpetrator of the harm can immediately be identified and what action, without prejudice to any later internal or external assessment, should be taken. There may be child protection considerations in respect of the alleged perpetrator and in respect of other children within the centre who may be at risk of harm. Where the alleged perpetrator is a member of staff, **[supplier]** will act in accordance with approved internal investigation and disciplinary procedures.

Any allegation referred to the police must, in addition, be immediately notified to the Child Abuse Referrals inbox in the Home Office. The email to referrals inbox should contain the following information:

- The title of the file and the file reference number so that the knowledge and information management unit (KIMU) can access the referral in future, if required;
- A clear statement that the police have been informed, so that the Home Office safeguarding unit and KIMU are aware
- The police reference for the referral, if available.

Whether it is to local authority children's social care or the police, staff must **always** immediately refer the case where they consider:

- There are signs the child may be a victim of physical, emotional or sexual abuse, or neglect – see appendix A of Working Together for definitions.
- The child is a potential victim of modern slavery or human trafficking.
- The child has been, or is at risk of being, subjected to female genital mutilation.
- The child is missing –a safeguarding referral must always be made when children are identified as having run away from their parent(s) or carer(s), or where they are looked after by a local authority and have gone missing from their care placement.

- The child is unaccompanied – this means:
  - there is no person with parental responsibility;
  - the child is lost or abandoned; or
  - the person who has been caring for the child is prevented from providing the child with suitable accommodation and/or care.
- The child is being cared for as part of a private fostering agreement.
- There are signs the child may be a victim of child sexual exploitation (see what to do if you suspect a child is being sexually exploited for a list of key indicators).

If staff are dissatisfied with, or do not receive, the local authority response, they must escalate the matter in line with local protocol and/or to the local authority manager, if needed.

### **Managing allegations against people who work with children**

There are additional actions required when an allegation is made against a person who works with children. This may include staff working in the centre, either directly employed or not, and other staff such as escorts. Details are in Chapter 2 of [‘Working Together’ \(2015\)](#).

Records should be kept of the investigation of the individual, including all discussions, meetings, panel hearings and decisions relating to the case. A record should also be made of any disciplinary sanction that has been imposed. These records should be kept, with appropriate security, until the person retires, or for ten years if that is longer.

Records should be kept and maintained at every stage of the process to ensure that sound decisions are made on full, accurate and up to date information and that the rationale for those decisions can be traced, scrutinised and justified where necessary. Records relating to allegations that have been found to be without substance must also be retained. These must be handled sensitively, with appropriate security.

A chronology of key events, decisions and actions taken should also be maintained to provide a quick overview of progress.

# Annex A – Appendix 1(A): Safeguarding Children Procedure Flow Chart (Indirect referrals)

