LOGS – SOCIAL INITIATIVE GROUP

SAFEGUARDING CHILDREN AND YOUNG PEOPLE

1. Policy Statement

1.1 LOGS is committed to protecting all the children, young people and vulnerable adults that use our services. We believe that everyone working and volunteering for LOGS has a responsibility to promote the welfare of all children and young people, to keep them safe and to practice in a way that prioritizes their protection.

1.2 We will make sure that all children and young people, and vulnerable adults have the same protection regardless of refugee status, age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation.

1.3 We recognize the additional needs of children and vulnerable adults with refugee or asylum status, minority ethnic groups and disabilities and the barriers they may face, especially around communication.

2. The Implementation of this Policy

2.1 The Board of Trustees of LOGS are ultimately accountable for ensuring that LOGS abides in full with its legal and regulatory safeguarding obligations.

2.2 It discharges that responsibility by:

- ensuring this policy is legally compliant and consonant with best safeguarding practice at all times,
- regarding safeguarding as a governance and risk management priority for the organization,
- delegating operational responsibility for the implementation and periodic, external, review of this policy to the Senior Management Team and Designated Safeguarding Officer of the charity,
- requiring regular reports from the DSO to the Board on all key safeguarding risks.

3. The Aims of this Policy

3.1 This policy is relevant both for staff and volunteers in a work context and for us all as we go about our daily lives as members of the community. It is the responsibility of all of us to act if we have concerns about the safety of any child.

3.2 This policy has been written to provide easily accessible and practical advice for LOGS staff and volunteers who have concerns about children they come across in their direct work, both within the family context and in situations where children have become separated from their families or usual care-givers.

3.3 LOGS is not a statutory childcare agency and it is not appropriate for staff to carry out investigations into suspicions of child abuse themselves. However there is a duty placed on organizations to take appropriate action and to make referrals to the police and social services. This 'Duty of Care' to take appropriate action and to make referrals to those agencies specializing in this area applies to all staff carrying out any activity on behalf of LOGS and this includes the Board of Trustees, paid staff, locums, volunteers and students. LOGS role is to identify, refer and follow up child protection concerns are being responded to.

3.4 This policy should be read in conjunction with Internal Rules and Regulation of LOGS.

4. Context: LOGS work with children

4.1. The contexts and situations in which LOGS staff and volunteers work may mean that you come across children at work. The law defines a child as being under 18. This will mostly involve staff working in direct service provision but not always, for example, we undertake research with young people and they may disclose something during interviews or when we are doing media work and preparing a young person to be a 'case study' or during a fundraising event where young people attend.

4.2. All our work with children is informed by the UN Convention on the Rights of the Child and by the Romanian Legislation on Children Care. Copies of these documents are easily accessible online.

Scope 5.1. All our projects' staff and volunteers may come across children in their work, however, the two main arenas that LOGS staff and volunteers work in are:

5.2. Children in families

5.3. Every day we work with children and families or households who are accessing asylum support, receiving advice or supported within the work of other teams. Staff and volunteers also work with families outside the office when they visit families in outreach locations where clients receive advice and support. Many families have experienced trauma or loss.

5.4. You may come across children who are living as part of a household which does not include their birth parents. There may be many reasons for this, for example, the child's parents may be deceased and the child has been brought to Romania by members of the extended family as an adopted member of their household. The child's parents may still be living in their home country, having decided to send the child to the Romania with relatives or friends in order to protect the child from danger. Alternatively a child may have entered Romania with an adult who is posing as their parent as a way of helping the child to enter illegally. There may be many reasons behind this kind of deception, some of which may be harmful for the child and others which may be intended to be in their best interests.

5.5. Unaccompanied or Separated Children

5.6. The work of the LOGS's Children's Section currently centers on the provision of specialist advice and support for separated children and young people who are under the age of 18 when they enter ROMANIA. Much of the work of the Children's Section involves giving asylum advice, liaising with the statutory child care services to ensure that children in this situation receive the care, accommodation and support they need. There are some ways in which the Children's Section's work with separated children may overlap with questions of child protection. For example we may have concerns that a separated child or young person has been trafficked to the ROMANIA by adults posing as carers for the purposes of exploitation, or we might be working with a young person who is being ill-treated by the family (perhaps a foster family), who are supposed to be looking after them. There is also group work, activities and trips arranged for young people.

6. How we will keep children safe.

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

6.2. Appointing a nominated child protection/safeguarding lead.

6.3. Develop child protection and safeguarding policies and procedures, which reflect best practice.

6.4. Use our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and careers appropriately .

6.5. Ensure we have a culture of Speaking Out effective in creating a safe environment.

6.6. Recruiting staff and volunteers safely, ensuring all necessary checks are made and following Safer Recruitment practices.

6.7. Provide effective management for staff and volunteers through supervision, support, training and quality assurance measures.

6.8. Implement the code of conduct for staff and volunteers.

6.9. Manage any allegations against staff and volunteers appropriately.

6.10. Ensure that we have effective complaints procedure.

6.11. Ensuring that we provide a safe physical environment for our young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance.

6.12. Record and store information professionally and securely.

6.13. Publicise our Safeguarding Policy on the web site.

7. Understanding safeguarding terms

7.1. What is safeguarding?

7.2. 'Safeguarding' is the term used to describe the responsibilities and activities undertaken, by statutory bodies and organizations working with children, to prevent or stop children being abused or ill-treated. The agencies with a statutory duty to protect children in this way are the local authority children's social care departments of local authorities (referred to in this document as social services), and the police. Social services departments have a legal duty to investigate any situation where there are concerns about the welfare of a child or young person up to the age of 18 years. Social services may choose to do this with the help of specialist police officers.

7.3. An investigation focuses on the safety of the child and will usually involve the following:

• talking to the person who has expressed concern, i.e. the referrer;

• talking to the child;

• talking to the parents/carers of the child;

• liaising with other agencies who have knowledge of the child and his/her family and circumstances

7.4. Safeguarding is about protecting children from harm, abuse or ill-treatment by those who are supposed to be caring for them or who are in a position of trust and authority towards them. Some

children may be harmed by older children who are, usually on a temporary basis, caring for them. This would still be treated as a safeguarding issue for both children. Assaults or violence by adults (or other children) unknown to the child are dealt with by ordinary criminal law.

7.5. What is child abuse?

7.6. Child abuse is a term used in situations where a child or young person under the age of 18 experiences ill-treatment or impairment of development through a failure on the part of the parent or carer to ensure a reasonable standard of care and protection.

7.7. This may include things that a parent or carer does (such as hitting the child) or things that the parent or carer fails to do (such as starving or neglecting the child). Sometimes children are abused by adults who are trusted by the child or placed in a supervisory position in relation to the child, eg a teacher, foster carer, staff member at a children's home, detention or other residential setting. A 'carer' could be any of these or a member of the extended family, or the child's refugee community or a neighbor with whom the child is living in an informal arrangement.

7.8. The policy acknowledges that it is not only adults who abuse children and that children may abuse children through bullying, physical and sexual abuse, exploitation and humiliation.

7.9. The following are brief descriptions of the four main categories as used by social services:

7.10. Physical injury: The actual or likely physical injury to a child, or a failure to prevent physical injury or suffering to a child.

7.12. Neglect: Persistent or severe neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold or starvation. It can also mean an extreme failure to carry out important aspects of care, resulting in a significant impairment of the child's health or development, including 'non-organic failure to thrive' (the failure to develop physically, emotionally or mentally for reasons other than disability).

7.13. Sexual abuse: Is the actual or likely sexual exploitation of a child or young person under 18. This means involving them in sexual activities they do not truly comprehend and to which they are unable to give informed consent. Sexual abuse includes incest, and all forms of sexual activity involving children under 16, including pornography.

7.14. Emotional abuse: Is the actual or likely severe adverse effect on the emotional and behavioral development of a child caused by persistent or severe emotional ill-treatment or rejection.

7.18. The task of the child protection social worker or police officer is to try to make an assessment of whether a child has been or is likely to be abused or not. This is often a very difficult task. The term 'significant harm' is used when considering how seriously to take concerns about the safety

or welfare of a child. 'Significant harm' usually refers to a series of acute and long standing harmful events that can interrupt, alter or impair the physical and emotional development of a child. However, one serious but isolated incident could also result in significant harm.

7.19. A child who has suffered or is likely to suffer 'significant harm' is considered to be a child in need of protection.

7.20. This is a wide-ranging piece of legislation covering many aspects of the state's duties towards children. In our work with separated children we make frequent reference to Sections 17 and 20 which concern the duties of Local Authorities to assist and accommodate children in need.

8. The context of harm in our work with refugee clients

8.1. It is very important that LOGS staff and volunteers understand that if a child has been harmed or is at risk of being harmed by a parent/carer, the law regarding child protection applies equally to people of all cultural and linguistic backgrounds and however difficult the individual circumstances of the carer may be.

8.2. However, as a specialist refugee agency, we do have a duty to consider and, where appropriate, draw the attention of other service providers to the particular circumstances facing our clients in their daily lives. This includes the particular ways in which the cultural background and customs of our clients may differ from that of the host community. It also includes a heightened awareness of the extreme difficulties and hardships faced by many of the refugees, adults and children, arriving in the Romania.

8.3. Some of these contextual considerations might include:

8.4. The family context of the child when a child has been harmed. Many additional factors may be adding stress to family life for refugee families.

8.5. Parents and/or children may have been exposed to terrible violence in their home countries and on their way to the Romania.

8.6. The impact of environmental factors. The difficulty of living without basic needs such as shelter and food being met, and of the stigma and social disadvantage associated with being a refugee in the Romania, should not be underestimated.

8.7. The child's developmental stage within their own culture. There may be differing expectations regarding child development from one culture to another and the refugee child may be struggling to come to terms with their role and identity in a new culture.

8.8. Whether the parent has particular problems or difficulties. Parents and carers may be less able to cope with the demands of their children at certain times.

8.9. Once again, it is very important to realize that while these issues are taken into account, child protection procedures must be followed. However, when a referral is made to social services, any pertinent issues should be mentioned.

9. The Designated Safeguarding Officer

9.1. The Designated Officer (DO) in the LOGS will be the Executive Director of Services and in that person's absence, should an issue arise it will be the Chief Executive. Note that concerns about the safety of children must be raised immediately and you should not wait to consult with the DO if they are not available.

The role of the Designated Officer is to:

• Offer, when required, consultation and advice to staff should a child protection issue arise.

• Assess the information promptly and carefully, clarifying or obtaining more information about the matter as appropriate.

• Ensure the statutory child protection agencies have been contacted should they need to be contacted and a written record kept.

• Keep the written policy and procedures up to date.

• Record incidents and review policy and procedures.

• Report on safeguarding risks to the board.

10.What to do when you have concerns about the welfare of a child

10.1. Safeguarding concerns

10.2. Circumstances giving rise to safeguarding concerns may include the following:

• A young person may disclose that he/she is being abused in the project or elsewhere by a member of staff, another young person or another adult.

• A young person may disclose a past history of abuse in the project or elsewhere.

• A member of staff may become suspicious that a young person is being abused due to their behavior, conduct or physical signs.

• A member of staff may receive information that makes them suspicious that a young person is being abused in the project or elsewhere.

• A member of staff may become concerned about the conduct, behavior or actions of another young person or member of staff.

• A parent or other adult may disclose a past history of abuse and there is a likelihood that children and young people could continue to be at risk of abuse.

10.3. How to contact Social Services and the Police

10.4. At various points throughout these guidelines, you will be advised to make a referral to social services when you have concerns about a child.

a) Discuss your concerns with your manager immediately and if that is not possible then as soon after as possible. If your manager is unavailable, find another manager to discuss the issue with. If your concerns require immediate attention and a manager is not available to you, then contact social services or the police.

b) Contact the local network of minor abuse within the National Agency Against Human Trafficking Agency in Timisoara.

c) A referral should be made to the social services' department for the area where the child is living, if this is known. If this is not known or if, for example, the child is homeless, then the referral should be made to the authority where the particular need of the child comes to light.

d) Outside working hours, there is a Phone line for Emergency Duty Team to contact . The normal procedure is for staff on emergency duty to call back the referrer. Unless it is an emergency, this may take some time, depending on how busy the team is on that evening or weekend.

e) Sometimes confusion arises when a referral of an asylum-seeking child or family is made to social services for child protection purposes. Some social services' staff may try to refer the matter on to other teams within their local authority or elsewhere. It is important that you insist that your referral is a child protection concern which needs to be dealt with by the DGASPC team.

f) When you are making your referral, if you are referring a child you know through your work or volunteering within the LOGS, you must give your name and role, and full contact details. You cannot remain anonymous within your professional role. Outline your concerns fully and completely and take the details of the person you are giving your information to.

g) You should ask whether and when you will hear back from social services, and statutory guidance advises referrers to chase up a referral after three days if they have not heard back. It may be the case that you do not receive any further information as details of future actions may be confidential. However, it may be the case that you are involved in future plans to protect the child, for example you may be invited to a child protection conference.

h) It is essential that you confirm your telephone conversation in writing and store on In-Form.

i) If you have any concerns that your referral will not be followed up or about the person taking the referral, speak immediately with your manager, who should raise the issue immediately with the appropriate manager within social services.

j). In cases of extreme concern, and when you believe that the child is in imminent danger, call the police. 1

k) Ensure that any client files are updated swiftly and accurately. Liaise with your manager regarding how the information is stored on the client's file and who has access to it; it will be appropriate in some cases to keep information of this nature accessible to a very limited number of staff. 1

0.5. The importance of recording

10.6. As in all our work with clients, the keeping of prompt and accurate notes about safeguarding concerns is vital. If staff and volunteers are dealing with a critical incident that involves child protection concerns, then a Safeguarding Report must be completed and passed to the Service Manager for action.

Records need to cover the following areas:

- Everything and everyone that was seen and observed at the time of any incident that has raised concerns – including injuries and notes on the behavior of children, parents and carers. Records must be factual information only. If a personal opinion is added, then it should be made very clear that this is the case.
- Any allegations or disclosures made by children, parents, carers or others. If possible, it is best practice to write down the actual words used in disclosures or allegations. 10.10. Any explanations given for injuries to the child.
- All action taken by staff including discussions with their line manager, contact with social services or the police, including the names and contact details of those spoken to.
- Social services have strict deadlines about when they should take action following a referral. If LOGS staff are careful about recording exact times, it may help to follow up on the referral later on.
- Safeguarding is one of the few areas of work with clients when our usual strict guidelines regarding confidentiality can be broken in the interests of protecting a child. It is always best to discuss this with your line manager first.

11. Guidance on particular situations that might arise

11.1. You witness an adult carer being violent towards a child on LOGS premises or at an outreach location

11.2. There will inevitably be differences of opinion about what constitutes violence towards a child. Try and consider the term 'significant harm' as described above. Ask yourself if the child has been injured or physically harmed in this incident.

• The first priority of the staff member witnessing the incident and the manager they call to support them, is to ensure the physical safety of the child concerned. This may involve calling the emergency services in order to obtain medical treatment for the child (e.g. a doctor or an ambulance), or possibly to prevent the adult from leaving the premises with the child (the police). This will be particularly important if you do not know where the family will be going after their visit to the office.

• If you cannot ascertain that the child has been harmed, this does not mean that you should ignore the situation. The child may not have been injured on this occasion but the behavior you witnessed may have given you cause for concern. Perhaps the child flinched as if used to being hit, or perhaps the adult was verbally abusive towards the child, making you believe that the relationship between them was harmful for the child. Record your concerns and discuss the issues with your manager.
• This is a difficult situation. It may seem right to spend some time with the parent/carer explaining to them that their behavior towards their child is not acceptable and may lead to intervention by statutory services now they are in the ROMANIA. However, if you have real concerns about the child's safety, your role is to alert social services before you speak to the parent/carer, and to allow the professionals to make the assessment about the child's safety.

11.3. A child specifically tells you that they have been hurt by someone

• This is known as 'disclosure'. The child should be reassured that it was right to talk about the abuse. You should explain that you cannot keep the matter a secret and that you will have to tell some other people so that something can be done to protect the child in the future. You should immediately inform your line manager so that a decision can be made about whether to discuss the matter with social services and who should do this.

• You need to find out just enough about the alleged abuse in order to refer the matter to social services or the police; they are trained in investigative interviewing. It is not your role to interview the child in depth.

• If you need to ask the child questions or clarify what they are saying, make sure that you use open-ended/non-leading questions, e.g. 'Please tell me what happened'. 'Please explain that a bit further.' It has been known for the prosecution of cases of child abuse to collapse because the accused has been able to argue that ideas have been put into children's heads by those interviewing them.

• If you are speaking to the child through an interpreter, check that the interpreter is also aware of the importance of the exact words used to discuss the disclosure with the child.

11.4. You see bruising or other signs of possible physical abuse

• Ask the child and the parent/carer how the injuries happened. If the explanations given do not seem reasonable, or if there is inconsistency about explanations given by different people (or by the child and the parent/carer), you must discuss your concerns with your line manager immediately. Social services may need to be contacted and all relevant information passed on.

• If you are not able to speak to the child or parent/carer about bruises you have seen, you should still discuss with your manager, as it may be that you refer the matter to social services.

11.5. There are concerns about the appearance or behavior of a child which suggest the child may be neglected

• Discuss the concerns and the most appropriate course of action with your line manager as soon as possible. There should be consultation with social services to raise these issues if you have any doubt about the care being offered to the child by his/her parent or carer. Examples of this may be no food, poor clothing, denial of warmth, not attending to medical issues or not attending essential and, in some cases, non-essential health appointments.

• In cases of domestic violence it is important to involve Social Services. Living in a home where domestic abuse happens can have a serious impact on a child or young person's mental and physical wellbeing, as well as their behavior. And this can last into adulthood.

• Domestic abuse can have a very serious impact on a child's behavior and wellbeing, even if they're not directly harmed themselves. Children witnessing domestic abuse is recognized as 'significant harm' in law

11.6. An allegation of abuse is made to you by another person

• This must be taken seriously and referred to social services. The person making the allegation should be encouraged to talk directly to social services but you also have a responsibility to act in accordance with these procedures.

11.7. You have suspicions that an adult is posing as the parent of a child when they are not 14

• You must contact social services. As explained above, there could be good reasons why the adult believes it to be in the child's best interests to act as their parent but is afraid to explain the truth. Equally, adults involved in the trafficking of children for various kinds of exploitation often pose as their parents in order to get them into the country (see below).

• It may be that social services will assess that the adult is a suitable caregiver for the child and the situation can be regularized for immigration and support purposes so that the child becomes a legitimate part of the household. It is also possible that the assessment by social services may conclude that this is not a suitable place for the child to live.

11.8. You suspect that a client is significantly younger than their stated age

• Whilst the opposite scenario is more common, it is not unknown for children to claim to be older than they really are because they have been told to do so by traffickers or other adults who have influence over their lives. This scenario could alert you to the possibility that the child is at risk of harm as their needs as children are not being met. If possible, try and talk to the young client on their own and ask them if they feel safe with the adults they are with. If you have any cause for concern, make a referral to social services. In this scenario, social services may need some persuasion to become involved for child protection reasons. Make your concerns clear. Sometimes children are aged assessed as an adult.

11.9. You come across a household which includes a young woman under the age of consent who is in a sexual relationship or married

• It is illegal for any young person under the age of 16 to enter a sexual relationship, whether heterosexual or homosexual.

• Marriage is permitted by law with parental consent at the age of 16 and without parental consent at the age of 18. Being married does not affect the fact that someone under 18 is still legally a child. In some cultures it may be the norm for young couples to marry when they are both below the age of 16, or for a young girl to be married to an older man, but young people below the age of 16 who were married outside this country are not recognized as married under Romania law.

• If the young woman is under 16, it is illegal for a child under the age of 16 to be considered as married in the Romania. You must make an immediate child protection referral as outlined above.

• If the young woman is 16 or over, and with a husband or boyfriend, social services have very little power to become involved from a child protection point of view. If there are concerns that the relationship may be abusive, social services or the police may intervene under domestic abuse legislation, to protect victims of coercive or controlling behavior.

• If you have concerns that a young person is in a harmful relationship, try and talk to them on their own at first. It may be that your relationship with a young person in this situation is of more use in empowering the young person to escape the abusive relationship than is the limited power of intervention of social services. If your concerns continue after talking to the young person, or if you cannot speak to them and are still worried, contact the police.

• The young woman may be pregnant or may have a young child. If she is under 16, then make an automatic referral to social services. If the young mother is over 16, try to obtain a sense of the vulnerability of the young woman and the resources available to her through the strength of her relationship with her partner. She may be struggling with the demands of caring for a young child or with the stresses and strains of pregnancy. If you have any doubts about her ability to cope make

a referral to social services who should do all they can to enable the young mother and child to be cared for and supported together.

11.10. Boys and young men

11.11. You should remain alert to the possibility that you may come across boys and young men who are victims of child abuse in different forms. Almost all children find it incredibly difficult to talk about abuse, and in our experience boys often find it especially difficult. Approach the situation with sensitivity but remember that boys need protecting as much as girls, and procedures apply equally to them.

11.12. Abuse by children and young people

11.13. Children and young people, particularly those living away from home, are also vulnerable to physical, sexual, emotional and financial abuse and bullying from their peers. Such abuse should be taken seriously and subjected to the same safeguarding procedures as apply to other circumstances. This abuse may come to the attention of staff:

• As a result of a young person disclosing that they have in the past abused another person.

• As a result of a young person stating that they are currently abusing another young person.

• As a result of an allegation made by a young person.

• As a result of staff observing inappropriate behavior.

11.14. Any concerns should be reported to the line manager. Where the young people are involved in a LOGS project a risk assessment will be undertaken in relation to the continuing involvement of alleged perpetrator/s and victim/s in the project in question. Where it is suspected that a young person may have been involved in an incident of sexual abuse or physical assault, social services will be informed. Incidents of bullying will also be investigated under this policy and reported.

16 11.15. Self-Harm and Suicide Ideation

11.16. Young people who self-harm must be considered under the Safeguarding Policy and concerns should be reported to social services. For self-harming young people we should try to get input and advice from Social Services. When a child is experiencing suicide ideation, this must be reported to social services immediately or referred to the emergency services.

12. Other child protection concerns

12.1. Female Genital Mutilation (FGM)

12.2. Female genital mutilation (FGM) is practised predominantly amongst communities from sub-Saharan Africa, the Horn of Africa, the Arab World, Malaysia and Indonesia.

12.3. The practice has its roots in cultural, moral and religious traditions (although there is, in fact, no direct link to any religious teachings) and failure to undergo the procedure can result in isolation for girls and women in their communities.

12.4. Nevertheless, as female genital mutilation involves extreme pain and trauma for the child and is a potentially life-threatening procedure, and is illegal in the Romania.

12.5. If it comes to your attention that a young woman is about to undergo FGM here or in another country, a child protection referral must be made to social services as quickly as possible. They have a duty to investigate the risk to the girl as they would with any other allegation of abuse. It is essential that you do this.

12.6. If you learn that a young woman has already undergone the procedure, particularly if this is quite recently, a referral should still be made to social services so that they can assess the need of the child for follow-up medical services or perhaps appropriate counselling.

12.7. Trafficked children

12.8. This area of international crime is coming under increasing scrutiny by law enforcement and child welfare agencies in the Romania and worldwide. Most of the asylum seekers the LOGS works with, adults and children, have been smuggled into the ROMANIA. Trafficking differs from smuggling in that it involves an intent to exploit the victim after arrival in the Romania.

12.9. Trafficked children or their parents may have been told lies about what kind of life awaits the child in the Romania, or parents may have been frightened or threatened into giving up their children to traffickers. Sometimes children have been abducted or kidnapped. Some child victims of trafficking are orphans. Children may be trafficked into the Romania for a range of purposes including sexual exploitation; domestic servitude; sweatshop, restaurant or other catering work; begging or pickpocketing or other criminal activity; and work in cannabis houses.

12.10. Few of these children come to the attention of organisations such as LOGS. Their traffickers are careful to keep them out of the reach of welfare or advice agencies such as ours and many never enter the asylum system. However, LOGS staff need to remain alert to the possibility that any of the children we see may be caught up in the world of trafficking and act accordingly. These are abused children who need protection.

12.11. Apart from a child ‘disclosing’ to you that they have been trafficked and need help, signs that might make you suspicious include:

• A child attending our offices with an adult who is clearly not their parent or a close relative, for example the child may be unsure about the correct name of the adult.

• A child saying that they are older than they look and/or are dressed in a more ‘grown-up’ way than seems appropriate.

• Confusion about nationality which might come to light, for example if a child cannot speak fluently the first language of their stated nationality.

• A child who is visibly frightened by the adult he/she is with or by the prospect of returning to where they live.

12.12. If you have concerns that a child or young person may be the victim of trafficking, you must alert social services or the police. Try and talk to the young person on their own and ascertain if they are willing to wait in the offices until they can be taken to a place of safety. As in any of the above scenarios, they are likely to be extremely frightened. If your concerns are regarding an unaccompanied child, you should also refer to one of the specialist child trafficking Advisers within the the local network against human trafficking coordinated by ANITP.

12.13. Sexual Offences

12.14. The age of consent in the ROMANIA is 16. However, it is an offence for adults ‘in a position of trust’ to have any sexual relations with a 16 or 17 year old over whom they may have power or authority. The Act prohibits any sexual activity with a child, causing or inciting a child to engage in sexual activity, engaging in sexual activity in the presence of a child, or causing a child to watch a sexual act or being forced into a sexual relationship including forced marriages.

12.15. If you have any concerns that an adult working in a position of trust with a child is abusing this position of trust, discuss your concerns with a manager with a view to reporting your concerns to social services and/or to the police.

12.16. If you hear allegations against a member of staff or a volunteer

12.17. In the event of an allegation against a current member of staff relating to child protection concerns, or that this policy has been breached, this will be dealt with according to the LOGS’s disciplinary policy and procedure. Where the allegation relates to a current volunteer, an investigation will be carried out by the relevant manager/volunteer coordinator. The volunteer may also be disallowed from volunteering during the external investigation. A referral will also be made to the local authority via LOGS designated officer.

12.18. Online and social media abuse

12.19. Many young people will use the internet and social networking sites as a matter of routine, but may not realize the risks and dangers associated with them. These can include:

• chat-room grooming

• the sharing of personal and identifying information with strangers through social media

• gambling

• being a victim of online bullying (cyber bullying)

• seeing disturbing images or information online

• radicalization

12.20. Staff should not share social media platforms with clients.

12.21. Storage and usage of client photos and videos should be done securely and sensitively and only with client consent. They should only be shared if permission is received by both the young person and the manager. Any pictures taken should be with the permission of the line manager or Senior manager and only for specific purposes.

12.22. Radicalization

12.23. All the terrorist groups which pose a threat to us seek to radicalize and recruit people to their cause. The percentage of people who are prepared to support violent extremism in Romania is very small, but it is significantly greater amongst young people.

12.24. There is no single way of identifying who is likely to be vulnerable to being drawn into terrorism. Factors that may have a bearing on someone becoming vulnerable may include: peer pressure, influence from other 19 people directly or via the internet, bullying, crime against them or their involvement in crime, anti-social behavior, family tensions, race/hate crime, lack of self-esteem or identity and personal or political grievances.

12.25. If staff or volunteers have concerns they should raise them with their manager and if necessary report them to the local authority or the police via the local partnership board.

12.26. Staff Recruitment, Training and Development

12.27. The LOGS's Recruitment and Selection policy will be used when employing new staff or volunteers. This includes measures around safeguarding, such as seeking references and obtaining legal documents about any criminal record.

12.28. Safeguarding and protection from abuse training will be available to all new members of staff and volunteers, along with regular updates for existing staff.

12.29. Staff and volunteers will be trained to identify the different types of abuse, the procedure to be taken when an allegation of abuse is made or detected, and the potential impact on themselves and clients of being involved in abuse cases.

12.30. Staff and volunteers may also attend other relevant training.

13. Conclusion

13.1. The area safeguarding is a complicated and emotive one. It is very difficult at times to deal with these issues, but we have a responsibility to follow through any concerns. There are often no right and wrong answers. What is important is that you keep the safety and welfare of the child paramount at all times, regardless of other factors you are faced with in the situation.

13.2. Each local authority has a Safeguarding Children Board, and a named person, with clear policies and practices available online; you should familiarize yourself with the website and contact details of your local Safeguarding Board.

13.3. If you are ever in doubt about the safety of a child, you must discuss your concerns as soon as practically possible.

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Board of Directors:

Flavius Ilioni Loga, president

Simona Ilioni Loga, vicepresident

Simona Popan, secretary

Designated Safeguarding Officer

David Lungu, social worker