The School & Family Works
Safeguarding and Child Protection Policy

Safeguarding and promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all professionals should make sure their approach is child-centred. This means that they should consider, at all times, what is in the best interests of the child. (Keeping Children Safe in Education (2020), paragraph 2)

Introduction

Family Group (FG) is a systemic, therapeutic intervention designed to enable positive change for families with multiple disadvantages. The Family Group, and 'Families Together', interventions take place in school in a weekly three-hour session and involve a therapist from SFW and a member of school staff working with up to eight families simultaneously. The intervention runs throughout the school year.

The Parent Graduate Group (PGG) is run with a group of parents/carers who have already attended a Family Group with their child. This on-going support is offered to parents/carers who may still be facing complex challenges. If possible, PGG is managed by a FG graduate parent leader and supported by a SFW therapist. PGG meets weekly in a local community centre and provides a safe environment for community members to share experiences, help each other and carry out other activities, decided upon by the group. Despite working in a community space, the responsibility of safeguarding lies with SFW.

The Food Project (FP) has been set up to promote SFW and to support FG parents/carers. It also helps address the food waste problem and distributes good quality food to disadvantaged families within the communities we work in. The stalls are usually run in the playgrounds of our Family Group schools and hosted by Family Group parents, carers and other volunteers.

Within all three services, SFW staff are working with parents as well as children, so this policy covers the safeguarding of adults and children. This policy applies to all staff, including therapists, managers or anyone working on behalf of The School & Family Works.

Purpose

The purpose of this policy is:

- To outline systems to protect all children and adults who attend or are discussed/ represented at all services provided by SFW and to ensure that everyone is safe and free from harm.
- To outline the roles and responsibilities of SFW staff with regard to safeguarding and child protection in these settings.

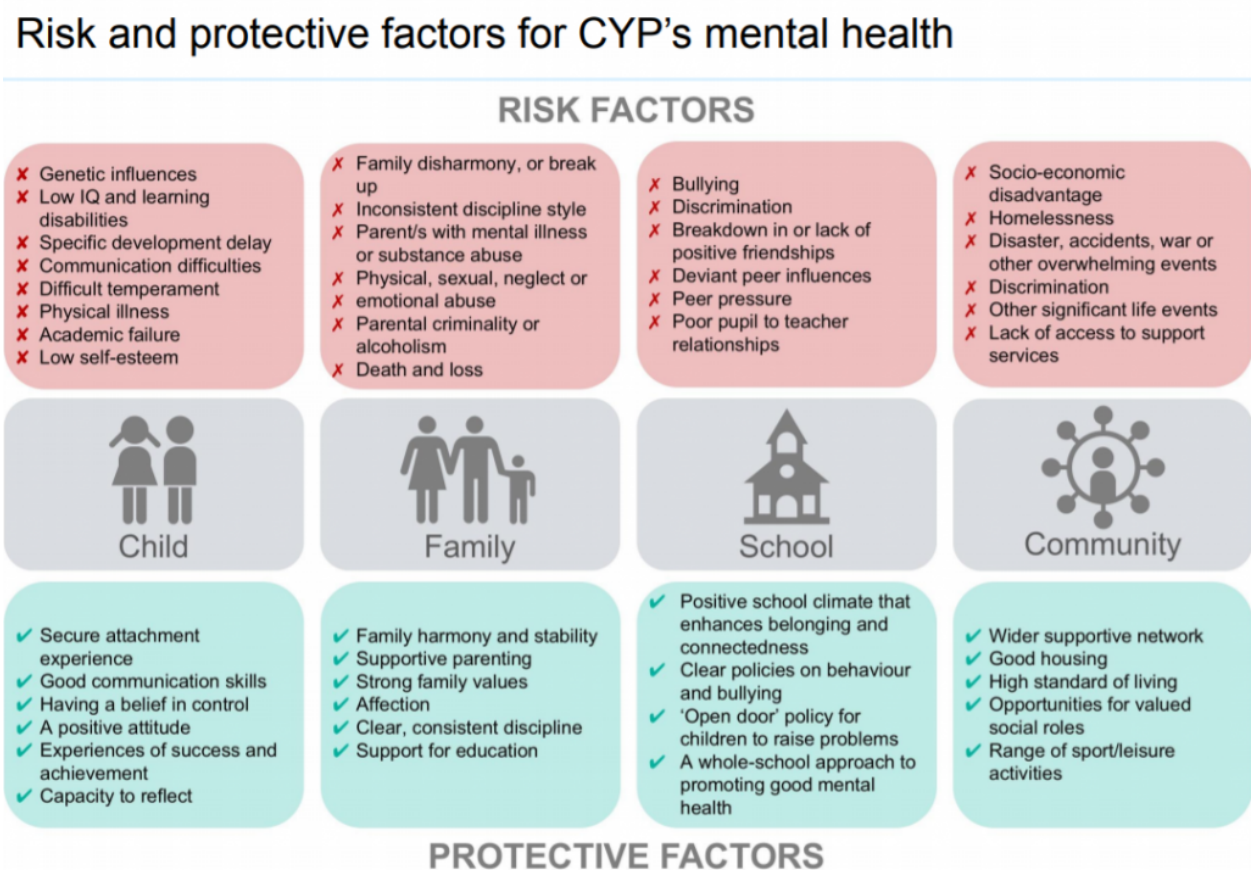
- To identify the Designated Safeguarding Leads (DSLs) and explain their roles.
- To describe what should be done if anyone has a concern about the safety or welfare of a parent or child in any of the services.
- To set out the expectations regarding record keeping
- To outline how complaints about SFW staff will be handled
- To consider safeguarding proactively in all the work we carry out.

This policy should be read in conjunction with the SFW Risk Assessments and alongside national guidance and legislation as laid out in Annex 3.

Ethos

Our mission is to create safe, nurturing and dynamic group environments where children and their parents, supported by professionals, gain the skills and confidence they need to change their behaviours and face up to their challenges in a way that achieves real, lasting change.

Our ethos is driven by our belief that relationships are vital in providing positive support for individuals, groups and families. By understanding and recognising the risks that families face and promoting protective factors which can support them, we are proactively creating a safer, more sustainable network in which they can thrive.



Mental Health of children in England, PHE 2016

Definitions

Safeguarding applies to all children, young people and adults at risk.

For the purposes of this document, **safeguarding children** is defined as:

- providing help and support to meet the needs of children as soon as problems emerge
- protecting children from maltreatment, whether that is within or outside the home, including online
- preventing the impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes

(Keeping Children Safe in Education (2025) page 7)

Child Protection refers to the procedures and support given to those children and young people who have experienced abuse in their lives.

Significant harm is the threshold which justifies compulsory intervention in the best interests of the child or adult. This may refer to a single traumatic event or, more often, the cumulative effect of incidents and/or behaviours over time which significantly impair an individual's physical and psychological development.

'**Adults at risk**' has replaced the term 'vulnerable adult' in most guidance. For our purposes, an adult at risk of abuse can be anyone over the age of eighteen, including parents/carers, staff or volunteers. Whilst personal characteristics may make an individual more vulnerable i.e. disability and communication difficulties, it is the situation around an individual which may increase risk or place them at potential risk of harm. It is therefore vital to be open to the possibility that any adult may be at risk and that this can be temporary or on-going depending on the support and protective factors around them.

Safeguarding adults involves people and organisations working together to:

- prevent and stop risks and experience of abuse or neglect
- promote adults' wellbeing

Role of Board of Trustees

The School & Family Works, as a registered charity, has an important role to play in safeguarding and promoting the welfare of children and adults. The Board of Trustees will ensure that the policies, procedures and training in the organisation are effective and comply with current safeguarding guidance.

The Board will nominate one Trustee to be named as the Board Safeguarding Lead. This person will have suitable experience and training and will meet the SFW Designated Safeguarding

Leads regularly to retain an overview of safeguarding issues arising and how protocols are carried out.

The Board members will receive appropriate safeguarding training and notifications at the discretion of the Board Safeguarding Lead. In addition, there will be a standing item on the quarterly Board meeting agenda to update Board members of key safeguarding information.

The Board of Trustees will formally adopt this policy and will review its contents annually or sooner if any legislative or regulatory changes are notified to it by the CEO.

Role and responsibilities of Staff and Designated Safeguarding Leads (DSLs)

Safeguarding and promoting the welfare of children and adults in or associated with our services is the responsibility of the whole SFW staff. All adults working in these groups (including visiting staff, volunteers and students on placement) are required to report instances of actual or suspected abuse or neglect to the appropriate personnel.

All executive staff:

- will be alert to known and potential vulnerabilities in children and adults
- will undertake all reasonable steps to safeguard children and adults
- will take any necessary and reasonable steps to avert preventable harm
- will read Part One of **Keeping Children Safe in Education** and its updates at the beginning of every academic year
- will work in partnership with other specialist agencies and ensure regular communication is maintained at all times
- will work within the procedures set out by the host school or other organisations within whose location SFW is contracted to deliver services
- will be aware of this policy and its procedures and attend appropriate training as required

The Safeguarding Group is made up of two DSLs, two members of the Clinical Governance Group and the Chair of the Board of Trustees. This team takes lead responsibility for the safeguarding and child protection for children and adults across SFW. They provide advice and support to any staff regarding any safeguarding issues that arise in groups or in activities related to groups.

Role	Name/contact details
DSL for whole of SFW Member of Safeguarding Group	Mark Griffiths 07540 806 248 mark@theschoolandfamilyworks.co.uk
DSL for Transforming Lives schools, Parent Graduate Group, Food Project Member of Safeguarding Group	Joanna Watson 07967 352 909 joanna.watson@theschoolandfamilyworks.co.uk
Board Safeguarding Lead Clinical Governance member Member of Safeguarding Group	Nancy Graham nhalegraham@aol.com
Clinical Governance member Member of Safeguarding Group	Carol Halliwell carolh95@icloud.com
Chair of Board of Trustees Member of Safeguarding Group	Andrea Hartley andrea@skatingpanda.com

When an individual concern/incident is brought to the notice of the DSLs, they will be responsible for deciding whether or not this should be reported to other agencies as a safeguarding issue. Where there is any doubt as to the seriousness of this concern, or disagreement between the DSLs and the member of staff reporting the concern, advice will be sought from the Clinical Governance (CG) members or the LA's Lead Officer for safeguarding in education services. If a child is in immediate danger or is at risk of harm, a referral will be made to Hounslow's Early Help Team or Kingston and Richmond's Single Point of Access (or the equivalent in another LA if the child resides in a different LA) and/or the police immediately.

Although all staff should be aware of the process for making referrals to children's social care and for statutory assessments that may follow a referral, along with the role they might be expected to play in such assessments, the DSLs (and any deputies) are likely to be the most appropriate people to advise on the response to safeguarding concerns. The DSLs or the CG members should always be available to discuss safeguarding concerns. If in exceptional circumstances, the DSLs or the CG members are not available, this should not delay appropriate action being taken. Staff should consider speaking to a member of the Local Authority Safeguarding Team. In these circumstances, any action taken should be shared with the DSLs (or CG members) as soon as is practically possible.Relevant external contacts are as follows:

For Children

Role	Name	Situation
Hounslow Early Help Team (Front Door)	020 8583 6600 (option 2, then 3) Online form **Email:** earlyhelp@hounslow.gov.uk childrensocialcare@hounslow.gov.uk	If you are worried about a **child** but they are not in immediate danger
Hounslow Duty Social Worker	020 8583 2222	If you are worried about a **child** and it is out of hours - after 5pm weekdays or weekends
Kingston and Richmond Single Point of Access (SPA)	020 8547 5008 (020 8770 5000 for out of hours) Online form spa.referrals@achievingforchildren.org.uk	If you are worried about a **child** but they are not in immediate danger
Hammersmith and Fulham Initial Consultation and Advice Team (ICAT)	020 8753 6600 Online form familyservices@lbhf.gov.uk Out of hours service: 020 8748 8588	If you are worried about a **child** but they are not in immediate danger
Kensington and Chelsea	Duty Line Tel: 020 7361 3013 socialservices@rbkc.gov.uk	If you are worried about a **child** but they are not in immediate danger
Lambeth	020 7926 3100 020 7926 5555 (out of hours) Online report helpandprotection@lambeth.gov.uk	If you are worried about a **child** but they are not in immediate danger

Brent	**Brent Family Front Door (Multi-Agency Safeguarding Hub - MASH)** at **020 8937 4300** (Mon–Fri, 9am–5pm) or email Family.FrontDoor@brent.gov.uk. Outside office hours, contact the Emergency Duty Team on 020 8863 5250.	If you are worried about a **child** but they are not in immediate danger
Enfield	Multi-Agency Safeguarding Hub (MASH) at 020 8379 5555 (Mon-Thu 9am-5pm, Fri 9am-4:45pm) or email childrensmash@enfield.gov.uk. For out-of-hours emergencies, call 020 8379 1000.	If you are worried about a **child** but they are not in immediate danger

For other boroughs, please see:
https://www.londonscb.gov.uk/contacts/safeguarding-contacts/

For adults

Role	**Name**	**Situation**
Hounslow Adult Safeguarding Board	adultsocialcare@hounslow.gov.uk 020 8583 3100 - Monday to Friday from 9am to 5pm. Out of hours telephone: 020 8583 2222. Or use report form	If you are concerned about an **adult** being at risk

Kingston Council (adult safeguarding)	Report your concern using the safeguarding concern form Call the Access Team during office hours on 020 8547 5005 and after 5pm call 020 8770 5000. For mental health concerns, call 0800 028 8000 to speak to Kingston's mental health crisis line.	If you are concerned about an **adult** being at risk
Richmond Adult Safeguarding	Online report system	If you are concerned about an **adult** being at risk
Hammersmith and Fulham Adult Safeguarding	Freephone 0800 145 6095, 8am to 6pm, Monday to Friday 020 8748 8588 (out of hours) safeguardingadults@lbhf.gov.uk safeguarding adults alert referral form	If you are concerned about an **adult** being at risk
Kensington and Chelsea	Safeguarding helpline 020 7361 3013 (office hours)/out-of-hours) Email: socialservices@rbkc.gov.uk	If you are concerned about an **adult** being at risk
Lambeth	During office hours Tel: 020 7926 5555 Outside office hours Tel: 020 7926 5555 Online form here	If you are concerned about an **adult** being at risk
Brent	**Brent Adult Safeguarding Team** on **020 8937 4300** (Monday–Friday, 9 AM–5 PM) or email **safeguardingadults@brent.gov.uk**. For out-of-hours emergencies, call the Emergency Duty Team on **020 8863 5250**.	If you are concerned about an **adult** being at risk

Enfield	Adults Multi-Agency Safeguarding Hub (MASH) by phone at 020 8379 3196 (Mon-Fri, 9am-5pm) or email TheMashTeam@enfield.gov.uk. For urgent, 24-hour concerns, call the Adult Abuse line at 020 8379 5212.	If you are concerned about an **adult** being at risk

Safeguarding and Child Protection in action

This section outlines the approach and active steps that SFW staff must take in promoting safeguarding in its services and responding to child protection issues. The recommended 5 Rs (Recognise, Respond, Report, Record, Refer) are used here as an operational framework. An additional 'Reflect' stage, has also been added, in order to support SFW staff, learn lessons and inform future practice.

1. Recognise

Safeguarding is not just about protecting children and adults from deliberate harm. The therapist is also responsible for recognising, identifying and assessing risk and should be alert to any safeguarding or child protection issues arising. The therapist is also trained and experienced in being aware of metaphorical speech and listening out for concerns.

Knowing what to look for is vital to the early identification of abuse and neglect. All staff should be aware of indicators of abuse and neglect (see below) so that they are able to identify cases of children or adults who may be in need of help or protection. If staff are unsure, they should always speak to the DSLs, their PDC, or the Clinical Supervisor.

Types of child abuse and neglect

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse: Emotional abuse: the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning or preventing the child from participating in normal social interaction. It may involve seeing or hearing the illtreatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in

danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education and all staff should be aware of it and of their school or college's policy and procedures for dealing with it.

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate caregivers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs

All staff should be considering whether children are at risk of abuse or exploitation in situations outside their families. Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation, and serious youth violence. This is known as Contextual Safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

In addition to these types of abuse and neglect, members of staff should also be alert to the following specific safeguarding issues (Additional information on these safeguarding issues and information on other safeguarding issues can be found in in Annex A and KCSIE p.149):

Child on Child abuse

All staff should be aware that children can abuse other children (often referred to as child-on-child abuse), and that it can happen both inside and outside of school or college and online. All staff should be clear as to the school or college's policy and procedures with regard to child-on-child abuse and the important role they have to play in preventing it and responding where they believe a child may be at risk from it.

All staff should understand that even if there are no reports in their schools or colleges it does not mean it is not happening. It may be the case that abuse is not being reported. As such it is

important that when staff have any concerns regarding child-on-child abuse they should speak to their designated safeguarding lead (or a deputy). It is essential that all staff understand the importance of challenging inappropriate behaviours between children that are abusive in nature. Examples of which are listed below. Downplaying certain behaviours, for example dismissing sexual harassment as “just banter”, “just having a laugh”, “part of growing up” or “boys being boys” can lead to a culture of unacceptable behaviours, an unsafe environment for children and in worst case scenarios a culture that normalises abuse leading to children accepting it as normal and not coming forward to report it. (See Annex A for more information).

Child Criminal Exploitation (CCE)

Some specific forms of CCE can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting or pickpocketing. They can also be forced or manipulated into committing vehicle crime or threatening/committing serious violence to others.

Children can become trapped by this type of exploitation, as perpetrators can threaten victims (and their families) with violence or entrap and coerce them into debt. They may be coerced into carrying weapons such as knives or begin to carry a knife for a sense of protection from harm from others. As children involved in criminal exploitation often commit crimes themselves, their vulnerability as victims is not always recognised by adults and professionals, (particularly older children), and they are not treated as victims despite the harm they have experienced. They may still have been criminally exploited even if the activity appears to be something they have agreed or consented to.

It is important to note that the experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however professionals should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

Any possible CCE case will be shared with the SBP/school DSL with a view to referring to appropriate agencies following the referral procedures.

Child Sexual Exploitation (CCE)

CSE is a form of child sexual abuse. Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative acts such as masturbation, kissing, rubbing, and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse including via the internet.

CSE can occur over time or be a one-off occurrence and may happen without the child’s immediate knowledge for example through others sharing videos or images of them on social media.

CSE can affect any child who has been coerced into engaging in sexual activities. This includes 16- and 17-year-olds who can legally consent to have sex. Some children do not realise they are being exploited and may believe they are in a genuine romantic relationship.

Where it comes to our notice that a child under the age of 13 is, or may be, sexually active, whether or not they are a member of a SFW group, this will result in an immediate referral to the relevant school or Children’s Services. In the case of a young person between the ages of 13 and

16, an individual risk assessment will be conducted in accordance with the London Child Protection Procedures. This will determine how and when information will be shared with parents and the investigating agencies.

Domestic abuse

Domestic violence and abuse is any incident or pattern of incidents of controlling, coercive, 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 abuse can encompass, but is not limited to psychological, physical, sexual, financial and emotional. All children can witness and be adversely affected by domestic abuse in the context of their home life where domestic abuse occurs between family members. Exposure to domestic abuse and/or violence can have a serious, long lasting emotional and psychological impact on children. In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result. If members of staff have a concern about or knowledge of any domestic abuse incidents, they will share it immediately with the school DSL with a view to referring to appropriate agencies.

Female Genital Mutilation (FGM)

FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/or death.

FGM is a deeply embedded social norm, practised by families for a variety of complex reasons. It is often thought to be essential for a girl to become a proper woman, and to be marriageable. The practice is not required by any religion.

FGM is an unacceptable practice for which there is no justification. It is child abuse and a form of violence against women and girls.

FGM is prevalent in many countries and is a deeply rooted practice, widely carried out mainly among specific ethnic populations in Africa and parts of the Middle East and Asia. While FGM is concentrated in countries around the Atlantic coast to the Horn of Africa, in areas of the Middle East like Iraq and Yemen, it has also been documented in communities in Colombia, Iran, Israel, Oman, The United Arab Emirates, The Occupied Palestinian Territories, India, Indonesia, Malaysia, Pakistan and Saudi Arabia. It has also been identified in parts of Europe, North America and Australia.

FGM is illegal in the UK. It is estimated that approximately 60,000 girls aged 0-14 were born in England and Wales to mothers who had undergone FGM and approximately 103,000 women aged 15-49 and approximately 24,000 women aged 50 and over who have migrated to England and Wales are living with the consequences of FGM. In addition, approximately 10,000 girls aged under 15 who have migrated to England and Wales are likely to have undergone FGM.

Some professional (including teachers) have a mandatory duty to report cases of FGM. Although, SFW staff do not fall into such a category of regulated practitioners, we still have a general responsibility to report cases of FGM, in line with wider safeguarding frameworks. If a staff member becomes aware that FGM has been carried out on a girl under 18, they should still share this information with the school and SFW DSLs immediately.

Mental Health

We are aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Our staff members, however, are well placed to observe children regularly and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that our staff members are aware of how these children's experiences can impact on their mental health, behaviour and education. If staff have a mental health concern about a child that is also a safeguarding concern, this will be shared with the SBP with a view to referring to appropriate agencies following the referral procedures.

Serious Violence

All staff should be aware of indicators, which may signal that children are at risk from, or are involved with serious crime. These may include increased absence from school, a change in friendships or relationships with older individuals or groups, a significant decline in performance, signs of self-harm or significant change in wellbeing, or signs of assault or unexplained injuries. Unexplained gifts or new possessions could also indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs. We are also aware that fear and a need for self-protection is a key motivation for children to carry a weapon – it affords a child a feeling of power. Neighbourhoods with high levels of deprivation and social exclusion generally have the highest rates of gun and knife crime. Children are more likely to carry knives and other weapons than guns. All staff will be aware of the associated risks and will share any concerns about or knowledge of such children immediately with the school DSL.

In addition, staff should be particularly alert to the potential need for early help for a child who:

- is disabled and has specific additional needs;
- has special educational needs (whether or not they have a statutory EHCP)
- is a young carer;
- is bereaved;
- is showing signs of being drawn in to anti-social or criminal behaviour, including being affected by gangs and county lines and organised crime groups and/or serious violence, including knife crime

- is frequently missing/goes missing from care or from home;
- is at risk of modern slavery, trafficking or exploitation;
- is at risk of being radicalised or exploited;
- is viewing problematic and/or inappropriate online content (for example, linked to violence), or developing inappropriate relationships online
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;
- is misusing drugs or alcohol themselves;
- is suffering from mental ill health
- has returned home to their family from care;
- is a privately fostered child.
- has a parent/carer in custody
- is missing education, or persistently absent from school, or not in receipt of fulltime education
- has experienced multiple suspensions and is at risk of, or has been permanently excluded

(Working Together to Safeguard Children 2023)

Safeguarding adults

This section is based on The Care Act 2014 statutory guidance. Although many of the issues mentioned above may also affect parents/carers, we have listed 10 specific types of abuse on adults as outlined in The Social Care Institute of Excellence. These are expanded upon in Annex 2.

1. Physical abuse
2. Domestic violence or abuse
3. Sexual abuse
4. Psychological or emotional abuse
5. Financial or material abuse
6. Modern slavery
7. Discriminatory abuse
8. Organisational or institutional abuse
9. Neglect or acts of omission
10. Self neglect

Key principles when working with Adults at Risk

- **Empowerment** People being supported and encouraged to make their own decisions and informed consent.
- **Prevention** It is better to take action before harm occurs.
- **Proportionality** The least intrusive response appropriate to the risk presented.
- **Protection** Support and representation for those in greatest need.
- **Partnership** Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- **Accountability** Accountability and transparency in delivering safeguarding

Creating a safe space for families

A key tool for creating a safe space for the parents/carers is the setting of groundrules. Within FG, the therapist will co-produce these with the parents/carers in the first week. As well as setting the expectations for the group, these rules also help to position safeguarding of children at the heart of the group. The rules will include:

- Confidentiality - the conversations shared in this space will not be discussed with anyone outside of this group, unless the therapist is concerned by something they have heard and then they will discuss the issue with the parent who raised the concern to talk about possible next steps and other people who may need to be involved.
- Sharing only what they feel comfortable sharing.
- What happens in this group stays in the group - asking participants to respect the privacy of other members of the group and not talk about their issues outside.
- Respectful and non-abusive behaviour towards all members of the group.
- A discussion/an agreement about how SFW can support parents/carers by informing other professionals (e.g. school staff) of their attendance at the group (this applies to PGG).

2. Respond

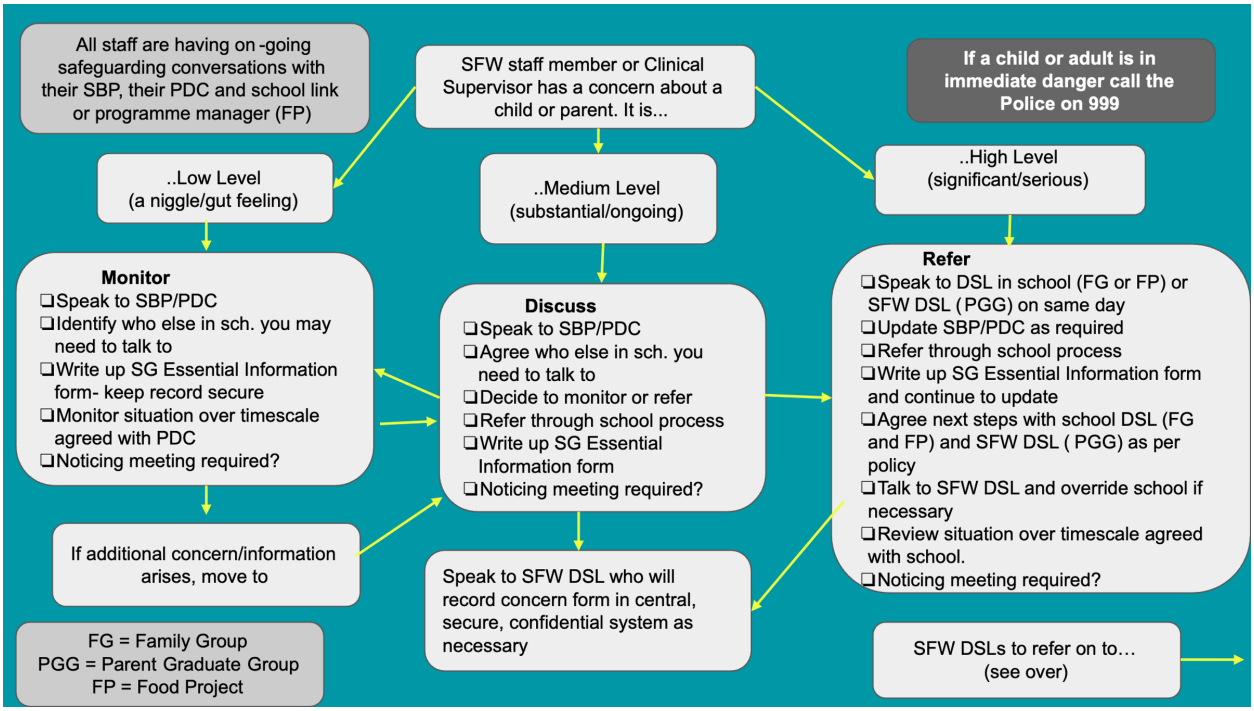
If a child or adult is in immediate danger, call the Police on 999

In the event of a disclosure in the group, the therapist will follow the steps below:

1. Let the person know that you heard them and the point they made is important. Explain that you need to think about it together.
2. If disclosed in group, remind everyone that this is a confidential space and this is a confidential piece of information.
3. Explain to the individual that they have shared something which you find concerning and you feel the need to talk about this further. Explain that you want to help them with the issue and, if necessary, you want them to be able to tell the appropriate person and access the right help, but that you will support them doing this.

3. Refer/report

Safeguarding Flowchart (blue form)
This is used by all SFW staff providing services to children and adults as a checklist of action points when a concern is raised.



In Family Group
If a therapist is concerned about any of the children or parents attending FG, they should follow the steps on the Safeguarding Flowchart above.

Any relevant issues that arise in FG fall under the procedural responsibility of the school and, as such, should be discussed with the SBP and the school's DSL. Where a matter requires action, the school's DSL is expected to initiate a referral to Social Care.

In the event of a disagreement or undue delay, where the therapist remains concerned, then the therapist must contact Social Care directly, keeping the school informed. In this instance, the therapist must liaise closely with their Practice Development Consultant ('PDC') and one of SFW's DSLs.

In Parent Graduate Group
If the therapist running PGG is concerned about any of the parents/carers attending the group or any of the children or young people represented by parents/carers at the group, they should speak to a SFW DSL as soon as possible after the group session finishes and follow the steps on the Safeguarding Flowchart above.

In Food Project
If the Food Project Co-ordinator (or any staff related to the Project) is concerned about a child or parent, they should speak to the school link or directly to the school's DSL and follow the steps on the Safeguarding Flowchart above.

Any relevant issues that arise when FP takes place at a school fall under the procedural responsibility of the school, and as such, should be discussed with the school link worker and the school's DSL. Where a matter requires action, the school's DSL is expected to initiate a referral to Social Care.

In the event of a disagreement or undue delay, where the FP co-ordinator remains concerned, then they must contact Social Care directly, keeping the school informed. In this instance, the co-ordinator must liaise closely with the Programme Manager and/or one of SFW's DSLs.

4. Record

In Family Group
The therapist with the concern should fill in the Safeguarding Essential Information form (below) as soon as possible after the event and keep this record secure. Any other records required by the school should be filled in by therapist. Schools may have different platforms on which to record concerns (e.g. CPOMS, Scholarpack). Therapists are responsible for finding out how schools record this information and agreeing with their SBP what information from FG can be recorded. All safeguarding issues need to be recorded but the recording of additional information gathered confidentially in FG needs to be discussed.

Safeguarding - Essential Information Form
Use one of these forms for each family

This form will be kept until the child/young person attains their 21st birthday or, if the child/young person has an Education & Health Care Plan, until they attain their 25th birthday. This is in line with our Data Protection and Confidentiality Policy. Though held by therapists, this form is company property. No information recorded here will be disclosed to any person or agency unless required by a court of law, local authority or where the therapist/company has reason to believe the child or another person is at risk.

We work on the cusp of child protection all the time. All safeguarding issues should be dealt with through the school and recorded here. Use your professional judgement.

Therapist's Name: …….. Month/Year of joining FG: ……..…

Child's Initials: ……..…… Parent Initials: ……..……

Date	**Concern**	**Action/reported to**	**Follow up**
EXAMPLE	*V.H appeared in FG with large bruise under eye.*	*Discussed with child and mum, separately, during the session. SBP reported class teacher aware. Same reason given: fighting with brother over Playstation.*	No further action
EXAMPLE	*Parent C.H had a black eye.*	*C denied bruise and was embarrassed. Child clingy in session.* *Second chat with parent: 'I'm worried about you'. Admitted fight with ex-partner.*	*Current CP plan, so with parent informed social worker.* *Devised a safety plan with parent.*

(from **'Family Group In A Box' (FGIAB)** saved on our central filing system 'Box')

In Parent Graduate Group

The PDC for PGG has a weekly check-in with the therapist running the session to talk about any individual issues that may have arisen and to think through and record the risks of attendees. This allows the therapist to talk through any concerns and provides an on-going record of members over time. These check-in records are saved on Box.

In Food Project

The FP co-ordinator with the concern should fill in the Safeguarding Essential Information form as soon as possible after the event and keep this record secure.

The Food Project co-ordinator has regular check-ins with the Operations Co-ordinator/ Programme Manager to discuss any issues raised.

5. **Reflect**

In FG

Therapists have regular 1-to-1s with their PDCs. Safeguarding is a standing item on these agendas as well as at PDC meetings and Ops meetings. Therapists also have monthly group and individual supervision. These discussions will help identify themes or emerging contextual safeguarding issues which can be addressed for the whole team.

In PGG

As well as the weekly check-ins and the monthly supervision for the therapist delivering PG, we have half-termly reviews of the issues arising at PG and the level of support we can provide for the members. In time, we expect this analysis will reveal that certain support, specialist services and/or local organisations should be identified and connected with, so they can be discussed and recommended at sessions. This review will also give the therapist a chance to consider whatever other support/training they might want to further complement this work.

In FP

Safeguarding is a regular item in check-ins with the programme manager.

An on-going task of the DSLs is to foster strong working relationships with as many agencies as possible who can support this work, especially in relation to safeguarding, referrals and support services.

Staffing and Training

All staff working for SFW with children or adults at risks either as direct employees, consultants or sub-contractors are required to have a current criminal record check (DBS enhanced status). For further details, please refer to Disclosure and Barring Service policy in Annex 4.

Our safer recruitment, induction, supervision and appraisal procedures must ensure that staff and volunteers are suitable and supported to implement safeguarding best practice.

All staff are required to attend appropriate safeguarding training to ensure that they are aware of all relevant legislation, regulations and good practice guidance, including documents in Annex 3.

An annual safeguarding update will take place at the September team meeting. This will include ensuring appropriate safeguarding refresher training has been accessed by all staff, reminding staff of the requirement to read KCSIE annual updates, checking DBS records are up-to-date and identifying any training needs required by the team.

Allegations against The School & Family Works staff
Where an allegation is made against a staff member of SFW, the CEO will decide what internal action is required. If the allegation is against the CEO, then the Chair of the Board will take any necessary action.

The advice and support of the Local Authority Designated Officers (LADOs) may be enlisted.

In **Hounslow**, LADOs are:
Natasha Hofmans Tel: 0208 583 4933 **Email:** natasha.hofmans@hounslow.gov.uk

Sarah Paltenghi Tel: 0208 583 3423 **Email:** sarah.paltenghi@hounslow.gov.uk

Tel: 0208 583 5730 Email: lado@hounslow.gov.uk

In **Kingston and Richmond**, the LADOs can be contacted at:
Tel: 020 8891 7370

Telephone: 07774 332675

Online: Submit LADO referral form

Email: LADO@achievingforchildren.org.uk

In **Hammersmith and Fulham**, the LADO is:
Megan Brown
Tel: 020 8753 5125 and ask to speak to the Duty Child Protection Adviser
Email: lado@lbhf.gov.uk

In **Kensington and Chelsea**, the LADO is:
Aqualma Daniel
Tel: 020 7361 2120**Tel : 07870 481 712**
Email: KCLADO.Enquiries@rbkc.gov.uk
Email: Aqualma.Daniel@rbkc.gov.uk

In **Lambeth**, the LADO can be contacted on:
Tel: 020 7926 4679 or **07720 828 700**
E-mail: LADO@lambeth.gov.uk

Possible actions include:
- immediate suspension of the member of staff

- removal of the member of staff to other duties
- continuing as is but with a written risk assessment of the situation in conjunction with the host school or other organisation
- immediate invoking of disciplinary procedures

Members of staff who are suspended, or otherwise implicated in a child protection investigation, will be supported as appropriate, including independent counselling where requested. It is possible that a situation might arise where there is insufficient evidence to support criminal proceedings, but there is sufficient evidence to establish that abuse has occurred.
In that event, depending on the nature of the abuse, the member of staff may be:

- dismissed
- made subject of disciplinary proceedings
- issued with a written warning.

Depending on circumstances, disciplinary procedures may or may not run concurrently with a child protection investigation

Annex 1

Other Safeguarding issues in children that staff should be looking out for (for more details refer to KCSIE p.149):

Child-on-child abuse

Child-on-child abuse is most likely to include, but may not be limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying)
- abuse in intimate personal relationships between children (sometimes known as 'teenage relationship abuse')
- 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; (this may include an online element which facilitates, threatens and/or encourages sexual violence)
- sexual harassment such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse
- 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
- consensual and non-consensual sharing of nude and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)
- upskirting which typically involves taking a picture under a person's clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress, or alarm, and
- 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).

SFW has a strong commitment to anti-bullying and will consider all coercive acts and peer on peer abuse within a Child Protection context. We recognise that some children will sometimes negatively affect the learning and wellbeing of other children and their behaviour will be dealt with under each school's behaviour policy. Any possible child-on-child abuse case will be shared with the school DSL with a view to referring to appropriate agencies following the referral procedures.

Sexual violence and sexual harassment between children

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. It can occur online and offline (both physically and verbally). It is more likely that girls will be the victims of sexual violence and sexual harassment and more likely it will be perpetrated by boys. Children who are victims of sexual violence and sexual harassment will find the experience stressful and distressing. This will affect their educational attainment. Staff will share any concerns about or knowledge of such incidents immediately with the DSLs with a view to ensuring that support systems are in place for victims (and alleged perpetrators). We take these incidents seriously and ensure that victims are protected, offered appropriate support and every effort is made to ensure their education is not disrupted. Where necessary, we will work with schools and any relevant external agencies to address the issue, which may include a referral to the Local Authority and reporting to the Police.

Violence Against Women and Girls (VAWG)

VAWG is defined as any act of gender–based violence that results in, or is likely to result in physical, sexual or psychological harm or suffering to women including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. VAWG is the umbrella term which brings together multiple forms of serious violence such as crimes committed in the name of “honour”; domestic abuse; female genital mutilation (FGM); forced marriage; sexual violence, abuse, exploitation and rape; stalking; harassment; trafficking for sexual exploitation; prostitution. If members of staff have a concern about or knowledge of any VAWG incidents, they will share it immediately with the school DSL with a view to referring to appropriate agencies.

So-called 'honour-based' abuse (HBA)

HBA includes incidents or 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. All forms of HBV are abuse (regardless of the motivation) and will be handled and escalated as such. If members of staff have a concern about or knowledge of a child that might be at risk of HBA or who has suffered from HBA, they will share it immediately with the school DSL with a view to referring to appropriate agencies.

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 perpetrators use perceived cultural practices as a way to coerce a person into marriage. We note The Forced Marriage guidance Any possible forced marriage case will be shared with the school DSL with a view to referring to appropriate agencies following the referral procedures.

Preventing Radicalisation

The Counter-Terrorism and Security Act 2015 places a duty on specified authorities, including local authorities and childcare, education and other children's services providers, in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism ("the Prevent duty"). Young people can be exposed to extremist influences or prejudiced views, in particular those via the internet and other social media. Organisations can help to protect children from extremist and violent views in the same ways that they help to safeguard children from drugs, gang violence or alcohol.

Examples of the ways in which people can be vulnerable to radicalisation and the indicators that might suggest that an individual might be vulnerable:

- spending increasing time in the company of other suspected extremists;
- changing their style of dress or personal appearance to accord with the group;
- their day-to-day behaviour becoming increasingly centred around an extremist ideology, group or cause;
- loss of interest in other friends and activities not associated with the extremist ideology, group or cause;
- possession of material or symbols associated with an extremist cause (e.g. the swastika for far right groups);
- attempts to recruit others to the group/cause/ideology;
- or communications with others that suggest identification with a group/cause/ideology.

Example indicators that an individual has an intention to use violence or other illegal means include:

- clearly identifying another group as threatening what they stand for and blaming that group for all social or political ills;
- using insulting or derogatory names or labels for another group;
- speaking about the imminence of harm from the other group and the importance of action now;
- expressing attitudes that justify offending on behalf of the group, cause or ideology;
- condoning or supporting violence or harm towards others; or plotting or conspiring with others.

Example indicators that an individual is capable of contributing directly or indirectly to an act of terrorism include:

- having a history of violence;
- being criminally versatile and using criminal networks to support extremist goals;
- having occupational skills that can enable acts of terrorism (such as civil engineering, pharmacology or construction);
- or having technical expertise that can be deployed (e.g. IT skills, knowledge of chemicals, military training or survival skills).

The examples above are not exhaustive and vulnerability may manifest itself in other ways. There is no single route to terrorism nor is there a simple profile of those who become involved. For this reason, any attempt to derive a ‘profile’ can be misleading. It must not be assumed that these characteristics and experiences will necessarily lead to individuals becoming terrorists, or that these indicators are the only source of information required to make an appropriate assessment about vulnerability.

It is important to note that children or adults experiencing these situations or displaying these behaviours are not necessarily showing signs of being radicalised. There could be many other reasons for the behaviour. However, any SFW therapist who suspects radicalisation must first discuss this with the SBP, their PDC and school DSL.

Private Fostering

Private fostering is when a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or a 'close relative'. This is a private arrangement made between a parent and a carer, for 28 days or more. Close relatives are defined as step-parents, grandparents, brothers, sisters, uncles or aunts (whether of full blood, half blood or by marriage). Great grandparents, great aunts, great uncles and cousins are not regarded as close relatives.

The law requires that councils should be notified if anyone is looking after someone else's child for 28 days or more. The purpose of the council's involvement is to support the child and private foster family (and wherever possible the biological parent/s) with any issues arising. These may be practical issues such as benefits, housing, immigration or emotional issues such as keeping contact with biological family, maintaining cultural identity.

If we become aware of a child in a private fostering arrangement, the DSLs will notify the relevant local authority immediately.

Annex 2

Safeguarding issues in <u>adults</u> that staff should be looking out for:

Types of physical abuse

- Assault, hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- Rough handling
- Scalding and burning
- Physical punishments
- Inappropriate or unlawful use of restraint
- Making someone purposefully uncomfortable (e.g. opening a window and removing blankets)
- Involuntary isolation or confinement
- Misuse of medication (e.g. over-sedation)
- Forcible feeding or withholding food
- Unauthorised restraint, restricting movement (e.g. tying someone to a chair)

Types of domestic violence or abuse

Domestic violence and abuse includes 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. It also includes so called 'honour' -based violence, female genital mutilation and forced marriage.

Domestic violence or abuse can be:

- psychological
- physical
- sexual
- financial
- emotional

Types of sexual abuse

- Rape, attempted rape or sexual assault
- Inappropriate touch anywhere
- Non- consensual masturbation of either or both persons
- Non- consensual sexual penetration or attempted penetration of the vagina, anus or mouth
- Any sexual activity that the person lacks the capacity to consent to
- Inappropriate looking, sexual teasing or innuendo or sexual harassment

- Sexual photography or forced use of pornography or witnessing of sexual acts
- Indecent exposure

Types of psychological or emotional abuse

- Enforced social isolation – preventing someone accessing services, educational and social opportunities and seeing friends
- Removing mobility or communication aids or intentionally leaving someone unattended when they need assistance
- Preventing someone from meeting their religious and cultural needs
- Preventing the expression of choice and opinion
- Failure to respect privacy
- Preventing stimulation, meaningful occupation or activities
- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Addressing a person in a patronising or infantilising way
- Threats of harm or abandonment
- Cyber bullying

Types of financial or material abuse

- Theft of money or possessions
- Fraud, scamming
- Preventing a person from accessing their own money, benefits or assets
- Employees taking a loan from a person using the service
- Undue pressure, duress, threat or undue influence put on the person in connection with loans, wills, property, inheritance or financial transactions
- Arranging less care than is needed to save money to maximise inheritance
- Denying assistance to manage/monitor financial affairs
- Denying assistance to access benefits
- Misuse of personal allowance in a care home
- Misuse of benefits or direct payments in a family home
- Someone moving into a person’s home and living rent free without agreement or under duress
- False representation, using another person's bank account, cards or documents
- Exploitation of a person’s money or assets, e.g. unauthorised use of a car
- Misuse of a power of attorney, deputy, appointeeship or other legal authority
- Rogue trading – e.g. unnecessary or overpriced property repairs and failure to carry out agreed repairs or poor workmanship

Types of modern slavery

- Human trafficking
- Forced labour
- Domestic servitude

- Sexual exploitation, such as escort work, prostitution and pornography
- Debt bondage – being forced to work to pay off debts that realistically they never will be able to

Types of organisational or institutional abuse

- Discouraging visits or the involvement of relatives or friends
- Run-down or overcrowded establishment
- Authoritarian management or rigid regimes
- Lack of leadership and supervision
- Insufficient staff or high turnover resulting in poor quality care
- Abusive and disrespectful attitudes towards people using the service
- Inappropriate use of restraints
- Lack of respect for dignity and privacy
- Failure to manage residents with abusive behaviour
- Not providing adequate food and drink, or assistance with eating
- Not offering choice or promoting independence
- Misuse of medication
- Failure to provide care with dentures, spectacles or hearing aids
- Not taking account of individuals' cultural, religious or ethnic needs
- Failure to respond to abuse appropriately
- Interference with personal correspondence or communication
- Failure to respond to complaints

Types of neglect and acts of omission

- Failure to provide or allow access to food, shelter, clothing, heating, stimulation and activity, personal or medical care
- Providing care in a way that the person dislikes
- Failure to administer medication as prescribed
- Refusal of access to visitors
- Not taking account of individuals' cultural, religious or ethnic needs
- Not taking account of educational, social and recreational needs
- Ignoring or isolating the person
- Preventing the person from making their own decisions
- Preventing access to glasses, hearing aids, dentures, etc.
- Failure to ensure privacy and dignity

Types of discriminatory abuse

- unequal treatment based on age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation (known as 'protected characteristics' under the Equality Act 2010)
- Verbal abuse, derogatory remarks or inappropriate use of language related to a protected characteristic
- Denying access to communication aids, not allowing access to an interpreter, signer or lip-reader
- Harassment or deliberate exclusion on the grounds of a protected characteristic
- Denying basic rights to healthcare, education, employment and criminal justice relating to a protected characteristic
- Substandard service provision relating to a protected characteristic

Types of self-neglect

- Lack of self-care to an extent that it threatens personal health and safety
- Neglecting to care for one's personal hygiene, health or surroundings
- Inability to avoid self-harm
- Failure to seek help or access services to meet health and social care needs
- Inability or unwillingness to manage one's personal affairs

For guidance on indicators of these types of abuse visit:

https://www.scie.org.uk/safeguarding/adults/introduction/types-and-indicators-of-abuse

Annex 3

Publications and legislation to be read and referred to in conjunction with this policy.
For children:

Publications

- Working Together to Safeguard Children (2023)
- Keeping Children Safe in Education (September 2025)
- Sexual Violence and Sexual Harassment between children in Schools and Colleges 2021

Key Legislation

- The Children Act 1989

Section 17 Duty to safeguard and promote the welfare of children who are "in need"
Section 47 Duty to investigate whether a child is at risk of serious harm

- Local Government Act 2000

Effective joint working across local authority sectors

- Education Act 2002

Duty on Local Education Authorities to exercise safeguarding functions for children and young people up to the age of 18 who are in full-time education

- Children Act 2004

Established a range of safeguarding and child protection provisions and duties on local authorities and partner agencies

- Children and Social Work Act 2017

Set up local safeguarding partnerships and further provision about the regulation of social workers

For adults:

- The Care Act 2014, which came into effect in 2015, is the primary legislation in England for the support and protection of adults. It represents the most significant reform of care and support in more than 60 years, putting people and their carers in control of their care and support.
  The legislation sets out how people's care and support needs should be met and introduces the right to an assessment for anyone, including carers and self-funders, in need of support. The act's "wellbeing principle" spells out a local authority's duty to ensure people's wellbeing is at the centre of all it does with greater emphasis on outcomes and helping people to connect with their local community. It seeks to ensure that people's eligibility for services will be the same across England.

- For more information about the key legislation and government initiatives in relation to the protection of adults at risk go to: https://www.anncrafttrust.org/resources/safeguarding-adults-legislation/

Annex 4

Disclosure and Barring Service Policy

The School & Family Works (SFW) is committed to carrying out appropriate employment checks on its employees and other workers to ensure service users are protected.
SFW adheres to the Disclosure and Barring Service (DBS) Code of Practice which requires organisations to use the Disclosure information fairly and:

- not to discriminate against candidates on the basis of unrelated criminal offences
- to ensure data security
- to comply with the recommendations for the retention of records.

A copy of the Code of Practice is available from the DBS website via this link: code of practice
SFW adheres to the Rehabilitation of Offenders Act 1974 and a copy of SFW's Policy on the Recruitment of Ex-Offenders is made available to all applicants and staff.
SFW conducts work within schools which is classified as a Regulated Activity. DBS checks will, where appropriate to the position of work, be Enhanced Checks with a Children's Barred Checklist. In other areas of work, SFW reserves the right to request workers to provide a Basic DBS check.
Where appropriate, SFW will carry out a DBS check prior to confirming employment, the cost of which will be met by SFW.
Thereafter, employees will be required to register with the on-line DBS service for an annual fee, currently £13. This will enable DBS checks to be maintained on an on-going basis. Registration must take place by employees within 19 days of the DBS certificate being issued. Details of this service can be found on-line at DBS Update Service – Gov.UK: https://www.gov.uk/dbs-update-service

SFW will seek permission from employees to check their DBS status at the start of each school term, via the DBS Update Service. If Registration to this service has not been completed, employees will be required to meet the costs of an annual DBS check.

Further information on this Policy can be obtained from the CEO, SFW.