

Child Protection and Safeguarding Policy



GENERAL SAFEGUARDING POLICY

Rye Youth Zone CIC (RYZ) abides by the duty of care to safeguard and promote the welfare of children and young people and is committed to safeguarding practice that reflects statutory responsibilities, government guidance and complies with best practice requirements.

We recognise that:

- **The welfare of children is paramount** in all the work we do and in all the decisions we take;
- All children, regardless of age, disability, gender identity, race, religion or belief, sex, or sexual orientation have an equal right to protection from all types of harm or abuse;
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues;
- Working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare.

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England. A summary of the key legislation is available from <https://learning.nspcc.org.uk/>

We will:

- Protect children and young people who receive RYZ services from harm.
- Provide staff and volunteers, as well as children and young people and their families, with the overarching principles that guide our approach to child protection.

Safeguarding is everyone's responsibility, for this to work each member of staff and volunteers should play their full part, for services to be effective a clear understanding of the needs and views of children and young people is essential.

This policy applies to anyone working on behalf of us, including staff, volunteers, sessional workers, and community partners. Failure to comply with the policy and related procedures will be addressed without delay and may ultimately result in dismissal/exclusion. It is everyone's responsibility to:

- know how to recognise concerns about young people and refer them to the DSL
- keep up to date with safeguarding knowledge and training as directed by the DSL.

ROLES AND RESPONSIBILITIES

1. Rye Youth Zone CIC Directors

Directors have primary responsibility for safeguarding. In fulfilling their duty of care to Rye Youth Zone, directors need to take steps to safeguard and take responsibility for the children with whom RYZ works. This means:

- a. acting in their best interests;
- b. taking all reasonable steps to prevent any harm to them;
- c. assessing and managing risk;
- d. putting safeguarding policies and procedures in place;

- e. undertaking ongoing monitoring and reviewing to ensure that safeguards are being implemented and are effective;
- f. responding appropriately to allegations of abuse.

2. Designated Safeguarding Lead (DSL) and Deputy Designated Safeguarding Lead (DDSL)

The DSL and DDSL are accountable for the implementation of the Child Protection and Safeguarding Policy, and other associated policies and procedures, at Rye Youth Zone on a daily basis. Specifically, they are responsible for:

- a. ensuring the Child Protection and Safeguarding Policy is communicated and implemented;
- b. informing, instructing, training and supervising staff and volunteers;
- c. making sure they and their staff understand the safeguarding arrangements;
- d. providing advice and support to other staff on child welfare and child protection matters
- e. contributing to the assessment of children;
- f. referring suspected cases, as appropriate, to the relevant body (local authority children's social care, Disclosure and Barring Service, and/or police);
- g. reporting safeguarding issues that are serious or complex to RYZ Directors immediately;
- h. taking part in strategy discussions;
- i. collaborating with the ESCC children's social care, the police, and other external agencies.

3. All staff and volunteers

All staff and volunteers are key to ensure the Child Protection and Safeguarding Policy is applied on the ground. Specifically, they are responsible for:

- a. making sure they understand the part they play regarding safeguarding young people;
- b. following the safeguarding arrangements set out in this policy;
- c. reporting any suspicions of abuse or neglect to the DSL immediately / or DDSL in the absence of the DSL;
- d. reporting any concerns about the behaviour of any members of staff or volunteers towards children and young people to the DSL immediately / DDSL in the absence of the DSL or should the concern be on the behaviour of the DSL.

IMPLEMENTATION OF SAFEGUARDING

In order to ensure we promote the best possible safeguarding practices, safeguarding needs to be embedded across all aspects of our work, including:

Safer Recruitment

We are committed to follow the principles and practices of safer recruitment, that reduce the risk of harm to children from people unsuitable to work with them or have contact with them. Directors and staff with a key role in recruitment complete training in Safer Recruitment.

Enhanced DBS-check and two references

All staff and volunteers complete Enhanced-DBS checks for the Child Workforce. These are repeated every two years, or earlier if there is a gap in service.

All staff and volunteers are asked to provide two references, including their current employer (when currently employed) or their last employer.

Training and Awareness

We ensure an appropriate level of safeguarding training is available to all staff and volunteers and any relevant persons linked to the organisation who requires it (e.g. sessional workers). For staff or volunteers working with children and young people, this requires them as a minimum to have awareness training that enables them to:

- Understand what safeguarding is and their role in safeguarding children.
- Recognise a child potentially in need of safeguarding and take action.
- Understand how to report a safeguarding alert.
- Show dignity and respect when working with children.
- Read and sign to acknowledge that they will adhere to the RYZ's Child Protection and Safeguarding Policy.

All staff and volunteers are given safeguarding training. Staff are required to attend the arranged training course and attend regular updates. Volunteers are given safeguarding training relevant to the position in which they are volunteering: this includes their manager talking through the Child Protection and Safeguarding Policy with them and them attending a safeguarding training during their induction.

Safer working

All staff and volunteers working for the Club have a responsibility to safeguard the welfare of the children and young people that they are working with to ensure their physical, sexual and emotional safety. All staff and volunteers should follow ***RYZ Code of Conduct***.

Responding to Safeguarding Concerns

Staff and volunteers may become concerned about a person in a number of ways:

- a. a young person may tell (disclose) that they or someone else has been or is being abused;
- b. there may be concerns due to the person's behaviour or presentation;
- c. concerns may be raised about the behaviour of an adult, who may be a member of staff, volunteer, another professional or a member of the public; and/or
- d. a parent/carer, relative or member of the public might share concerns about a young person.

Definitions and indicators for neglect and abuse can be found in the ***Appendix B***.

When faced with a safeguarding incident or concern, staff and volunteers will follow the procedures as detailed in ***Appendix C***. If the young person has communication difficulties or English is not their first language, pass this information on so that an appropriate interpreter can be identified.

Confidentiality and Information Sharing

We expect all staff and volunteers to maintain confidentiality. Information will only be shared in line with the General Data Protection Regulations (GDPR) and Data Protection. However, information should be shared with the Local Authority if a child is deemed to be at risk of harm or contact the police if they are in immediate danger, or a crime has been committed.

Recording and Record Keeping

A written record must be kept about any concern regarding a child with safeguarding needs. This must include details of the person involved, the nature of the concern and the actions taken, decision made and why they were made. All records must be signed and dated. All records must be securely and confidentially stored in line with General Data Protection Regulations (GDPR).

Social media, mobile phones, photographs

All staff and volunteers should follow our **Social Media and Communication Policy**.

Whistleblowing

It is important that people have the confidence to come forward to speak or act if they are unhappy with anything. Whistle blowing occurs when a person raises a concern about dangerous or illegal activity, or any wrong-doing within their organisation. This includes concerns about another member of staff or a volunteer. Please refer to **RYZ Whistleblowing Policy**.

Review This policy will be reviewed annually or in response to changes in legislation or guidelines.

Approved by Sophie Thorpe and Jen Sinclair (RYZ Directors)
and by Niki Stuart (Designated Safeguarding Lead)

Date 11th of February 2025 **Signed: S. L. Thorpe**
Last review: 11th of February 2025
Next review: 11th of February 2026

Date 11th of February 2026 **Signed: S. L. Thorpe**
Last review: 11th of February 2026
Next review: 11th of February 2027

Contacts details

Designated Safeguarding Lead (DSL)

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Deputy Designated Safeguarding Lead (DDSL)

Name: Martin Bruce
Email address: martinthebruce@gmail.com
Telephone number: 07864 927495

Rye Youth Zone CIC

Directors: Sophie Thorpe, Jenny Sinclair, Mike Boyd
Email: info@theyyz.com / **Mobile:** 07565 326363



Department
for Education

Helping to keep children safe



We believe extra-curricular clubs, youth organisations and study groups for children should be safe spaces.

Ask us about our:

- Health and Safety Policy
- Fire Safety and Evacuation Plan
- Staff and Volunteer Employment Checks
- Parental Consent Form
- Child Protection Policy
- Complaints Policy

We follow current government advice on **'Keeping Children Safe during Community Activities, After-School Clubs and Tuition'**. Find the latest guidance on [GOV.UK](https://www.gov.uk)



For questions or concerns about safeguarding

Safeguarding lead:

Last updated:

APPENDIX B – Definitions and signs of abuse

Definitions

Child: A child is anyone who is under 18 year old.

Abuse: Children and adults may be vulnerable to neglect and abuse or exploitation from within their family and from individuals they come across in their daily lives. There are 4 main categories of abuse, which are: sexual, physical, emotional abuse, and neglect. It is important to be aware of more specific types of abuse that fall within these categories, they are:

- *Bullying and cyberbullying*
- *Child trafficking*
- *Grooming*
- *Child sexual exploitation*
- *Domestic abuse*
- *Historical abuse*
- *Child Criminal exploitation*
- *Female genital mutilation*
- *Online abuse*

Safeguarding children: Safeguarding and promoting the welfare of children is defined in [Working Together to Safeguard Children 2023](#) 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 impairment of children’s mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe effective care
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, where possible and in the best interests of the children
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children’s Social Care National Framework

The Prevent Duty: Some organisations in England, Scotland and Wales have a duty, as a specified authority under section 26 of the Counterterrorism and Security Act 2015, to identify vulnerable children and young people and prevent them from being drawn into **terrorism**. This is known as the Prevent duty. Children can be exposed to different views and receive information from various sources. Some of these views may be considered radical or extreme.

Radicalisation is the process through which a person comes to support or be involved in extremist ideologies. It can result in a person becoming drawn into terrorism and is in itself a form of harm.

Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

Illegal practices: Some members of our communities hold beliefs that may be common within particular cultures but which are against the law in England. Examples of particular practices are:

- **Forced Marriages:** No faith supports the idea of forcing someone to marry without their consent. This should not be confused with arranged marriages between consenting adults.
- **Under-age Marriages:** In England, a young person cannot legally marry or have a sexual relationship until they are 16 years old or more.
- **Female Circumcision/Female Genital Mutilation (FGM):** This is against the law yet we know in some communities it is considered a religious act and a cultural requirement. It is also illegal for someone to arrange for a child to go abroad with the intention of having her circumcised.
- **Ritualistic Abuse:** Some faiths believe that spirits and demons can possess people. Using any physical violence to get rid of the possessing spirit is physical abuse. People can be prosecuted.

Signs of abuse

[The NSPCC presents the common signs of child / young person abuse](#) as the common signs that there may be something concerning happening in a child or young persons's life:

- unexplained changes in behaviour or personality
- becoming withdrawn
- seeming anxious
- becoming uncharacteristically aggressive
- lacks social skills and has few friends, if any
- poor bond or relationship with a parent
- knowledge of adult issues inappropriate for their age
- running away or going missing
- always choosing to wear clothes which cover their body.

These signs don't necessarily mean that a child is being abused, there could be other things happening in their life which are affecting their behaviour – but we can help you to assess the situation.

Categories of abuse and possible indicators

Looking more in detail, the Social Care Institutes for Excellence ([SCIE](#)) [looks at the different categories of abuse](#). The signs of abuse and neglect can be difficult to detect. Children may be seen as easy targets for abuse. Their developing communication and understanding of what constitutes mistreatment means that they may have difficulty alerting others to it. A child's reliance on their parents and family may also mean that it is easier to conceal harm or coerce a child into not disclosing it to others.

1. Physical abuse

Types of physical abuse

- Hitting, slapping, punching, kicking, hair-pulling, biting, pushing
- Rough handling
- Scalding and burning
- Physical punishments
- Inappropriate or unlawful use of restraint
- Physical harm caused by a parent or carer fabricating the symptoms of, or inducing, illness

Possible indicators of physical abuse: Injuries caused by accidents are not uncommon in children, becoming less common as the child develops and grows. This means that recognising the signs of physical abuse in children can be especially difficult and leave practitioners unsure of what may be abusive.

The following is a guide to injuries that are more likely to be accidental or abusive. However, it is not absolute and it is important that those working with children consider the child's stage of development, any pattern of injuries and the account given by the child, parents, carers or others of how the injury was sustained.

Typically accidental injuries

Accidental injuries typically involve bony prominences – the bones that are close to the surface and so more likely to become injured through falls, slips and trips. This can include:

- forehead
- knees
- elbows
- palms of hands
- nose

The injuries will match the account given by the child and parent/carer and be in-keeping with the child's level of development and activity.

Typically abusive injuries

Abusive injuries, however, tend to involve softer tissue and be in areas that are harder to damage through slips, trips, falls and other accidents. This may include:

- upper arm
- forearm (defensive injuries)
- chest and abdomen
- thighs or genitals
- facial injuries (cheeks, black eyes, mouth)
- ears, side of face or neck and top of shoulders ('triangle of safety')
- back and side of trunk.

Abusive injuries may be seen on both sides of the body and match other patterns of activity. They may not match the explanation given by the child or parent/carer and there may also be signs that injuries are being untreated, or at least a delay in seeking treatment.

2. Sexual abuse

Types of sexual abuse

Sexual abuse may take place either in person or online or offline. It may be perpetrated by family or non-family members, males or females, older adults or by other young people.

- Forcing or enticing a child or young person to take part in sexual activities, which may or may not involve violence
- Penetrative acts
- Non-penetrative acts (kissing, masturbation, rubbing or inappropriate touching)
- Sexual photography or forced use of pornography or witnessing of sexual acts
- Non-contact (looking at or producing pornography or sexual images, watching sexual activities, grooming in preparation for abuse)

Possible indicators of sexual abuse

- Bruising, particularly to the thighs, buttocks and upper arms and marks on the neck
- Bleeding, pain or itching in the genital area
- Difficulty in walking or sitting
- Sudden change in behaviour or school performance
- Displays of affection that are sexual or not age-appropriate
- Use of sexually explicit language that is not age-appropriate
- Alluding to having a secret that cannot be revealed
- Bedwetting or incontinence
- Reluctance to undress around others (e.g. for PE lessons)

- Infections, unexplained genital discharge, or sexually transmitted diseases
- Unexplained gifts or money
- Self-harming
- Poor concentration, withdrawal, sleep disturbance
- Reluctance to be alone with a particular person

3. Psychological or emotional abuse

Types of emotional abuse

Some level of emotional abuse is present in all types of abuse or neglect, though it may also appear alone. It is the persistent mistreatment of a child that has a severe and negative impact on their emotional development. Emotional abuse may also be perpetrated by other young people through serious bullying and cyber-bullying.

- Overprotection – preventing someone accessing educational and social opportunities and seeing friends
- Intimidation, coercion, harassment, use of threats, humiliation, bullying, swearing or verbal abuse
- Conveying feeling of worthlessness, inadequacy or that a child is unloved
- Threats of harm or abandonment
- Placing inappropriate expectations on children
- Witnessing or hearing the abuse or ill-treatment of others (including domestic violence)

Possible indicators of emotional abuse

- Concerning interactions between parents or carers and the child (e.g. overly critical or lack of affection)
- Lack of self-confidence or self-esteem
- Sudden speech disorders
- Self-harm or eating disorders
- Lack of empathy shown to others (including cruelty to animals)
- Drug, alcohol or other substance misuse
- Change of appetite, weight loss/gain
- Signs of distress: tearfulness, anger

4. Neglect

Types of neglect

Neglect is found to be a factor in 60 per cent of child deaths that are investigated through Serious Case Reviews. However, even though it is often suspected by those who work with children, it is under-reported. Neglect is a persistent failure to meet basic needs (physical or emotional) and it leads to serious harm to the health or development of a child.

- Failing to provide adequate shelter, clothing or food
- Failing to protect a child from harm or danger
- Failing to ensure that a child is supervised appropriately
- Failing to access medical care or treatment for a child when it is needed.

Possible indicators of neglect

- Excessive hunger
- Inadequate or insufficient clothing
- Poor personal or dental hygiene
- Untreated medical issues
- Changes in weight or being excessively under or overweight
- Low self-esteem, attachment issues, depression or self-harm
- Poor relationships with peers
- Self-soothing behaviours that may not be age-appropriate (e.g. rocking, hair-twisting, thumb-sucking)
- Changes to school performance or attendance

APPENDIX C – Procedures when faced with a safeguarding incident or concern

Follow this procedure for any incident or concerns about the safety of a young person or the behaviour of an adult towards a young person. This does not cover accidents.

Responding to a child disclosing abuse.

If a young person tells you directly, or you are told via another person, that they have suffered some form of abuse or harm, this is known as disclosure.

You should:

- React calmly and take what they say seriously.
- Speak gently giving them time to tell their story and taking any communication needs into account.
- Ask only enough questions to gain essential information. Always use open-ended questions.
- Make it clear to the young person you may need to share this information and tell them who you will be sharing it with.

Do not:

- React in a shocked or negative way.
- Make any assumptions.
- Ask leading questions or push the young person into explaining or saying things beyond what they want to say.
- Talk of your own experiences or those of others.
- Talk to or approach any person named or make any comments about them.
- Promise any actions other than to discuss with the DSL/DDSL.
- Promise to keep secrets.

Responding to a concern or incident.

If a child is in immediate danger, call the Police/other emergency services immediately

Concerns, which may include inappropriate behaviour by an adult, may be expressed by a young person, another adult club member, or a non-member parent, spectator or visitor.

If it is appropriate and safe to do so, speak to the young person as above. Be aware however that in many cases a young person may be frightened of the consequences of saying anything, in which case they should not be approached. Never approach an alleged perpetrator.

Recording and reporting concerns or incidents

- Write down the details of all conversation/s and concerns raised as soon as possible.
- Record the date, time and location of any conversations and if anyone else was present.
- If a young person has disclosed, try and use the young person's own language where possible.
- Record the names of any witnesses and any people named.
- Complete the Young Person Safeguarding Report Form and share it with the Designated Safeguarding Lead (DSL), or Deputy Designated Safeguarding Lead (DDSL).

Incidents / concerns must be **reported confidentially to the DSL/DDSL as soon as possible**. The DSL and DDSL will discuss together and agree on a course of action. This might involve seeking advice from the NSPCC/local statutory agencies. They will not usually try and manage the situation themselves.

Incidents / concerns about a young person that do not involve RYZ activities may be discussed with the NSPCC helpline, available for confidential advice on 0808 800 5000.

Young Person Safeguarding Report Form

When completed, this form must be treated as highly confidential and may only be shared in line with RYZ Child Protection and Safeguarding Policy.

| | |
|--|--------------|
| Name of person reporting incident / concern | |
| Contact details | Tel Email |
| Role | |
| Organisation | |
| Please briefly state details of the incident / your concerns | |
| Names of those involved | |
| Date of incident | |
| Place of incident | |
| Details of situation giving rise to concerns (including date, time, location, nature of concern, who, what, where, when, why): | |
| Details of any injuries: location of injury and action taken (if applicable) | |

| | |
|--|---|
| Young person's views on situation (if expressed). Where possible, please use their own words | |
| Details of any witnesses/other people involved (including names, addresses and telephone contacts): | |
| Details of action taken: | |
| Do you need further support? | |
| Checklist that proper reporting has taken place duly documented and confirmed by those involved | Being discussed with parents/responsible adult Is RYZ DSL/DDSL aware External agency? Etc. |
| Any specific requirements (disability, English as a second language etc.): | |
| Signed | |
| Date | |
| <p>Further action taken: This must be completed by those subsequently involved in responding to the incident or concern.</p> <p>Date reported to DSL/DDSL Name of DSL/DDSL Date reported to RYZ Director/s Name of RYZ Director/s</p> <p>Closing summary</p> | |

APPENDIX D – Procedures for contacting East Sussex Local Authority

The contact is likely to be made by the DSL/DDSL after having received a Young Person Safeguarding Report and judged it necessary to inform East Sussex County Council.

What type of referral are you making?

Referrals to the Single Point of Advice (SPOA)

Refer to SPOA any level 4 concerns about:

- contact or online sexual abuse
- suspected grooming
- physical abuse, or
- inappropriate restraint leading to injury

Identify the need for LADO involvement in the report.

Referrals to the LADO (Local Authority Designated Officer)

Refer concerns or allegations about conduct directly to the LADO. You can also refer via the police or social care. Concerns can be about:

- contact with children and young people through social media, personal email, or phone
- emotional abuse, bullying, threats, intimidation or derogatory comments
- non-sexual contact, which breaches a code of conduct or positive handling policy
- breaches in safeguarding policies and procedures around professional conduct
- providing rewards and incentives that are not sanctioned within a code of conduct. And when this singles out particular children or young people to the detriment of others
- being under the influence of drugs or alcohol in the workplace
- inappropriate use of work IT equipment at work or home e.g. viewing adult pornography
- failure to protect or report a safeguarding concern
- involvement with Children's Services for own children. For example, care proceedings or Child Protection Plans
- domestic abuse
- private life matters. This could involve:
 - arrest or prosecution for a criminal offence outside of work. This includes sexual offences, violence, drugs, drink driving, and fraud. It could be about adults or children.
 - personal involvement with Children's Services. For example, an employee who has children in care or on child protection plans

Make a referral

Child on child abuse

You must report concerns about abuse and sexually harmful behaviour between children to:

- [the SPOA allocated social worker](#)

If staff in a setting have failed to report a concern to their safeguarding lead or this was done late, you should also:

- [make a referral to the LADO](#)

Advice and guidance on managing this in schools is found at:

- page 24 in the Department for Education's [Keeping Children Safe in Education guidance](#)

Mental health and self-harm

You must report cases where there is a risk of significant harm to a young person to:

- [SPOA or the allocated social worker](#)

You can also:

- [make a referral to CAMHS \(via Children's Portal\)](#)

If there are concerns about staff conduct and suitability, you should:

- [make a referral to the LADO](#)

More advice on:

- [Young Minds](#)
- [NSPCC](#)

Criminal exploitation

You must refer specific concerns about young people to

- [SPOA or the allocated social worker](#)

More guidance in:

- [Keeping Children Safe in Education](#) (gov.uk)

Accidents and injuries involving children in settings

Report serious injuries with concerns about:

- the explanation of the injury or potential injury
- medication errors where there was a potential risk of significant harm

to the relevant agency, e.g., SPOA, Ofsted, and also the Care Quality Commission.

You should refer concerns about staff neglect or conduct to:

- [the LADO](#) (Allegations about adults who work with children)

Nurseries should refer to guidance from Ofsted in:

- [Report a serious childcare incident - GOV.UK \(www.gov.uk\) \(Ofsted\)](#)

Contact arrangements

If you get requests from parents about disputes linked to contact or residence of children, you should:

- advise them that you are not able to make decisions about unresolved issues.

Decisions made by social work teams

Send concerns about:

- a referral not being actioned
- delays in decision-making
- case closures

to the practice manager of the social work team involved.

Contacting the Single Point of Advice (SPoA)

Before you contact the SPoA

Discuss your concerns about a young person with your safeguarding lead. Assess the level of need by reading and using the [Continuum of Need](#)

Do not contact SPoA

- when families already have a social worker. Contact the social worker directly. (The exception is if you are making a CAMHS referral.) If you are unsure who their worker is, you can get this from SingleView.
- about Level 1 and 2 needs. Contact the Family Hubs [family advice line](#) or see [Organisations that help families](#)

Call SPoA on 01323 464222

- if the child does not have a social worker and you have immediate safeguarding concerns. Or if the child is at risk of harm, or has sustained an injury.
- if the practitioner has Level 3 or 4 concerns (targeted and child protection services.)
- when a practitioner and safeguarding lead manager have assessed a child as being at immediate risk of significant harm. Phone SPoA straight away and say your concern is about immediate risk.
- when the safeguarding lead is not available.
- when practitioners have a concern about a child with emotional, wellbeing, or mental health issues. (SPoA is now the contact point for referrals to Child and Adolescent Mental Health Services (CAMHS))

What SPoA will ask you

- have you checked SingleView? Are any Council services already supporting the child?
- have you spoken to any of these services?
- who else you have spoken to?
- details of child and family
- a summary of your concerns

- have you referred to the Continuum of Need?
- do you need to report a child protection concern? (Forms below.)

Reporting a child protection concern using a form

You can report child protection on the Children's Portal to report your concerns to SPOA.

- [Register for the Children's Portal and submit the form online](#)
- [Download a paper form](#) and email it to the [Single Point of Advice team](#)

If a child is at risk of immediate harm or has sustained an injury, please call SPOA directly on **01323 464 222** before completing your referral.

Contacting the SPoA: Telephone: **01323 464 222**

Monday to Thursday 8.30am to 5pm and Friday 8.30am to 4.30pm.

Email: [Single Point of Advice team](#)

Out of hours: Telephone: **01273 335 906** or **01273 335 905**

Contact our Emergency Duty Service (EDS) with serious concerns that cannot wait until the next working day. EDS operates

Monday to Thursday 5pm to 8.30am and Fridays, weekends, and bank holidays, 4.30pm to 8.30am.

SingleView access: SingleView gives partners an overview of Children's Services involvements, case status, and relationships. For SingleView information and applications see [SingleView](#).