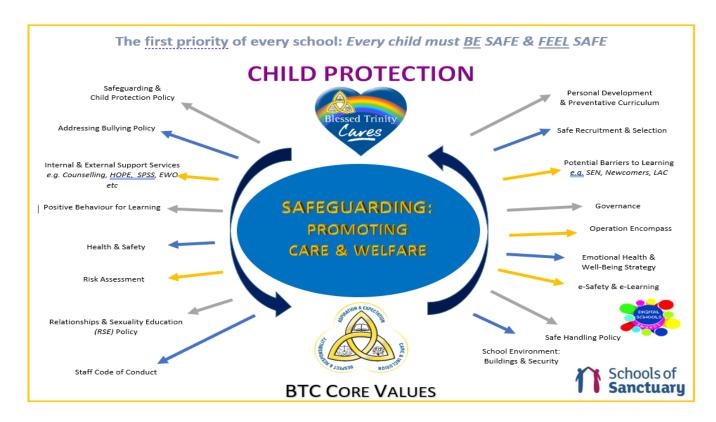


# **BLESSED TRINITY COLLEGE**

CHILD PROTECTION & ADULT SAFEGUARDING POLICY

**SEPTEMBER 2024** 



#### **Key Personnel**

Strategic Safeguarding Team: Principal – Ms B Lyttle

Vice Principal – Miss Murray

Vice Principal – Miss McCarthy (Strategic Leadership Area)
Site Referral Manager AVPs – Ms C Boylan & Mr C McAllister
(Safeguarding Leader)

#### **Designated Teachers:**

AVP for specific year groups: Year 8 & 9: Ms Boylan

Year 10: Mr McGuigan Year 11: Miss Mallon Year 12: Ms Moss

Year 13 & 14: Mrs McCartan

AVP Assessment & Reporting: Mrs Mulholland Post-16 Care & Welfare: Mrs Mc Dermott

Board of Governors: Chair of BoG: Miss Anne McGrath

Designated BoG Representative: Mrs Dervla Maitland

#### 1. Aims

The aims of this policy are:

- a) to protect young or vulnerable children by ensuring that all staff in Blessed Trinity College (BTC) have guidance on the detection of situations where abuse or neglect is evident or suspected;
- b) to define child abuse and outline action to be taken when it is known or suspected that a student has been ill-treated in some way and requires protection;
- c) to give information on the prevention of, recognition of and response to child abuse;
- d) to stress the need for confidentiality and record keeping;
- e) to give guidance on how complaints against staff should be handled;
- f) to provide a code of conduct for all staff.

#### 2. Introduction

#### The United Nations Convention on the Rights of the Child

The United Kingdom agreed to be bound by the Convention in 1991. It lists a number of statements, setting out the rights which all children and young people up to the age of 18 should have, no matter where they live or whatever their circumstances are.

In the context of this guidance, the most important of these are in 3 Articles outlined overleaf:

#### Article 19 provides that children have:

"the right to be protected from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation including sexual abuse by those looking after them.

#### • Article 12 further provides that:

"a child who is capable of forming his/her own views should be assured the right to express those views freely in all matters affecting the child",

these views being given due weight in accordance with the age and maturity of the child.

• Finally, and most fundamentally, Article 3 provides that:

"when organisations make decisions which affect children, the best interests of the child must be a primary consideration".

#### The Children Order

The central thrust of the Children (Northern Ireland) Order 1995, which came into effect on 4 November 1996, is that the welfare of the child must be the paramount consideration at all times.

#### **Adult Safeguarding**

As we have a number of students who are over 18 years of age, it is important to note our policy extends to these students also. Clear signage is displayed in the post 16 centre and post 16 baserooms with age-appropriate support signposted.

For further information see: <a href="https://www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protection-partnership-key-document">https://www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protection-partnership-key-document</a>

Adult safeguarding is based on fundamental human rights and on respecting the rights of adults as individuals, treating all adults with dignity and respecting their right to choose. It involves empowering and enabling all adults, including those at risk of harm, to manage their own health an wellbeing and to keep themselves safe. It extends to intervening to protect where harm has occurred or is likely to occur and promoting access to justice. All adults at risk should be central to any actions and decisions affecting their lives.

#### We are committed to:

- Ensuring that the welfare of vulnerable adults is paramount at all times.
- Maximising the student's choice, control and inclusion, and protecting their human rights.
- Working in partnership with others in order to safeguard vulnerable students.

We will follow the procedure outlined in this policy when responding to concerns or disclosures of abuse relating to our students who are over 18 years or over.

For further information see: <a href="https://www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protection-partnership-key-document">https://www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protection-partnership-key-document</a>

The decision as to whether the definition of an 'adult in need of protection' is met will demand the careful exercise of professional judgement applied on a case-by-case basis. This will take into account all the available evidence, concerns, the impact of harm, degree of risk and other matters relating to the individual and his or her circumstances. The seriousness and the degree of risk of harm are key to determining the most appropriate response and establishing whether the threshold for protective intervention has been met. (See Appendix 1)

#### 3. Definition of Child Abuse

We use the following areas of definition:

**Neglect** - the persistent or significant neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold or starvation, or persistent failure to carry out important aspects of care, resulting in the significant impairment of the child's health or development, including nonorganic failure to thrive.

The new domestic abuse legislation in NI means that 'impairment of health' in the definition of harm includes impairment to a child as a result of ill treatment of another person or abusive behaviour directed at another person, regardless of whether the child has seen, heard or been present during the ill-treatment or behaviour. (Domestic Abuse and Civil Proceedings Act (Northern Ireland) 2021).

**Physical** - physical injury to a child, whether deliberately inflicted or knowingly not prevented.

**Sexual\*** - the sexual exploitation of a child or young person for an adult's or another young person's own sexual gratification; the involvement of children or young people in sexual activities of any kind (including exposure to pornography) which they do not understand, to which they are unable to give informed consent or that violate normal family roles.

\*Harmful sexualised behaviour is an umbrella term for sexual behaviours which are of concern and have or are likely to cause harm to the individual themselves or to others.

Circular: 2022/02 Children who display Harmful Sexual Behaviour

**Exploitation** - Child sexual exploitation is a form of child sex abuse; it occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, &/ (b) for the financial advantage or increased status of the perpetrator or facilitator.

**Emotional** - persistent or significant emotional ill-treatment or rejection, resulting in severe adverse effects on the emotional, physical and/or behavioural development of a child.

**Domestic** - Domestic Abuse is any type of controlling, bullying or threatening behaviour between people in a relationship. Both men and women can be abused or abusers. Witnessing domestic abuse is child abuse, and can seriously harm young people.

**Bullying** - is a highly distressing and damaging form of abuse, and is not tolerated in our school (reference our Addressing Bullying Policy).

*Cyber Bullying* - involves the use of ICT such as e-mail, mobile phones, Internet social sites, chat rooms etc, to support deliberate, repeated and hostile behaviour by an individual or group that is intended to harm others. Under no circumstances will cyber bullying be tolerated, in line with our ICT Acceptable Usage & Addressing Bullying policies. The school filters student access to the Internet, and takes precautions to restrict access to inappropriate materials.

#### 4. IN-SCHOOL PROCEDURES

#### 4.1 Prevention

BTC works proactively to create an ethos which contributes to the care, safety and well-being of all its students. BTC promotes the values of high self-esteem, openness, honesty and tolerance – these key values permeate through our Core Values and are reflected in our Anti-Bullying & Relationships & Sexuality Education (RSE) policies.

BTC's Emotional Health & Well-Being Strategy addresses key themes such as recognising and dealing with our emotions and resilience for our students, in an age and stage appropriate way. Knowledge and understanding of the impact of Adverse Childhood Experiences (ACEs) help us to identify and support students who have been affected by trauma in their lives.

Our Personal Development (PD) Programme includes lessons relating to self-protection, & relevant aspects of the Preventative Curriculum, to help our students recognise and deal with potentially dangerous/risk taking situations/behaviours.

#### 4.2 Vetting Procedures & Work Experience/Placements

All staff and volunteer workers are vetted before undertaking duties.

When students are provided with the opportunity to participate in work experience or placement, the school will seek to ensure that students are not placed in a position of risk in the work environment, or that they do not pose a risk to others.

Regarding work experience &/ placements, it is the responsibility of Post Holders who organise external work experience &/ placements to ensure that all necessary procedures are in place, and to ensure that any relevant non-confidential information is shared with links, as appropriate, particularly in relation to longer-term placements.

#### 4.3 Recognition - Signs & Symptoms

Child abuse is a very complex phenomenon. In all cases, there needs to be a full multi-disciplinary assessment of either the injury or the allegation made. Signs and symptoms of abuse should only be considered as a guide, and should **not** be used as a checklist, though suspicions should be raised when the following occur:

- delay in seeking treatment
- inadequate or discrepant/inconsistent explanations
- a lack of any explanation for injuries
- injuries of different ages
- a history of previous injury
- failure to thrive

- the parent/carer showing little or no anxiety about the child or young person's condition
- the parent/carer coldly blames the child or young person
- evidence of marital violence
- evidence of factors associated with child abuse e.g. alcohol or drug abuse

If a member of staff notices injuries to children or young people, it is within their role and responsibility to ask the child or young person in an open non-threatening way how they received the injury.

#### 4.4 Dealing with Disclosures

#### **RECEIVE**

- Listen actively to what is being said, without displaying shock or disbelief, open body language.
- Accept what is said, non-judgemental TED (Tell-Explain-Describe).
- Take notes elaborate retain notes.

#### **REASSURE**

- Reassure the child or young person, but only so far as is honest and reliable. For example, don't
  make promises you may not be able to keep, like "I'll stay with you", "Everything will be all right
  now".
- Don't promise confidentiality/what can't be delivered; you have a duty to refer. Explain to the child or young person that you will need some help to deal with what (s)he has told you.
- Do reassure the child that you have listened & hear what they are saying, and alleviate guilt, if the child or young person refers to it. For example, you could say "You've done the right thing by coming to me", "You're not to blame", "You did the right thing talking about this".

#### **RESPOND / REACT**

- React to the child or young person only as far as is necessary for you to establish whether or not you need to refer this matter, but don't 'interrogate' for full details.
- Do **not** ask 'leading' questions, for example "What did (s)he do next?" [this assumes (s)he did] or, "Did (s)he touch your private parts?". Such questions may invalidate your evidence and the child or young persons in any later prosecution in court.
- Do ask open questions, like, "Anything else to tell me?", "Yes?", "And?".
- Do not criticise the perpetrator; the child or young person may love him/her and reconciliation may be possible.

- Do explain what you have to do next, to whom you have to talk, & ensure the child/young person
  is ok before leaving.
- Do try to see the matter through yourself and keep in contact with the child or young person.
- Do ensure that if a Social Services interview is to follow, the child or young person has a 'support person' present if the child or young person wishes it, (possibly yourself).

#### **REPORT / REFER**

• Report as soon as possible to the designated member of staff, ideally the respective AVP DT for the particular year group, another AVP DT, site VP, or Principal.

#### **RECORD**

- Make notes at the time and write them up as soon as possible complete a Note of Concern
  (Appendix 2) & pass on to relevant DT.
- Do not destroy these original notes.
- Vital: FACTS, NO OPINIONS When? Where? Who? What?
  Record the date, time, place, any noticeable non-verbal behaviour, and the words used by the child or young person. If the child or young person uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words. Any injuries or bruises noticed may be recorded on a diagram showing position and extent.
- Record statements and observable things, rather than your interpretations or assumptions.
- Note down when the suspicions were reported and to whom.
- These records should be placed in the student's CP file.
- In the event of a complaint made against a member of staff, the notes should be placed in the Complaints Against a Member of Staff notebook, & this should be examined & signed by the Chair of the Board of Governors on an annual basis.

#### **REMEMBER**

- To follow EA guidelines & guidance given during in-house CP&SG training sessions.
- Consult as appropriate.
- Follow the Code of Conduct.

The Child Protection Team will assume responsibility for Child Protection matters.

If a child makes a disclosure to a teacher, or other member of staff, which gives rise to concerns about possible abuse, or if a member of staff has concerns about a child, **the member of staff must act promptly**.

**(S)he should** <u>NOT</u> **investigate** - this is a matter for the Social Services - but should report these concerns immediately to the Designated Teacher, discuss the matter, and make full notes.

The Designated Teacher will decide whether, in the best interests of the child, the matter needs to be referred to Social Services. If there are concerns that the child may be at risk, the school is obliged to make a referral. Unless there are concerns that a parent/carer may be the possible abuser, the parent(s)/carer(s) will be informed immediately.

The Designated Teacher may seek clarification or advice and consult with the EA's /CCMS' Designated Officer or the Senior Social Worker before a referral is made. No decision to refer a case to Social Services will be made without the fullest consideration and based on appropriate advice. The safety of the child is our first priority.

Where there are concerns about possible abuse, the Designated Teacher will inform:

- a) the Social Services
- b) the EA's/CCMS' Designated Officer for Child Protection.

If referred to Social Services, this may be done in an envelope marked 'CONFIDENTIAL - CHILD PROTECTION' – containing the completed UNOCINI Form.

If a complaint about possible child abuse is made against a member of staff, the Principal (or the designated teacher, if he/she is not available) must be informed immediately. The above procedures will apply (unless the complaint is about the designated teacher or the Principal). Where the matter is referred to Social Services, the member of staff will be removed from duties involving direct contact with students and may be suspended from duty as a precautionary measure pending investigation by Social Services. The Chairperson of the Board of Governors will be informed immediately.

If a complaint is made against the Principal, a member of the Child Protection Team must be informed immediately. The Chairperson of the Board of Governors will be informed and, together, they will ensure that the necessary action is taken.

If any member of staff feels unsure about what to do if (s)he has concerns about a child or is unsure about being able to recognise the signs or symptoms of possible abuse, (s)he should speak to a member of the Child Protection Team.

It should be noted that information given to members of staff about possible child abuse cannot be held 'in confidence'. In the interests of the child, staff may need to share this information with other professionals. However, only those who need to know will be told.

#### 5. Responsibility of All Staff

5.1 Issues which give rise to concern should be reported promptly to a member of the Child Protection Team. A brief note of a factual, objective nature should be made of what has been seen, observed and/or heard and given to one of the CP CT Team – using the *Note of Concern* document.

#### 5.2 Awareness of Code of Conduct

"A Code of Conduct for Employees within the Education Sector whose work brings them into contact with children/young people".

#### 1. Private Meetings with Students

- a. Staff should be aware of the dangers which may arise from private interviews with individual students. It is recognised that there will be occasions when confidential interviews must take place. As far as possible, staff should conduct such interviews in a room with visual access, or with the door open.
- b. Where such conditions cannot apply, staff are advised to ensure that another adult knows that the interview is taking place. It may be necessary to use a sign indicating that the room is in use, but it is not advisable to use signs prohibiting entry to the room.
- c. Where possible another student, or (preferably) another adult, should be present or nearby during the interview, and the school should take active measures to facilitate this.

#### 2. Physical Contact with Students

- a. As a general principle, staff are advised not to make unnecessary physical contact with students.
- b. It is unrealistic and unnecessary, however, to suggest that staff should touch students only in emergencies. In particular, a distressed child, especially a younger child, may need reassurance involving physical comforting, as a caring parent/carer would provide. Staff should not feel inhibited from providing this.
- c. Staff should never touch a child who has clearly indicated that (s)he is, or would be, uncomfortable with such contact, unless it is necessary to protect the child, others or property from harm. (DENI Circular 1999/9, on the use of safe handling &/ reasonable force, gives guidance on Article 4 of the Education [Northern Ireland] Order 1998 [Power of member of staff to restrain pupils]).
- d. Physical punishment is illegal, as is any form of physical response to misbehaviour, unless it is by way of necessary restraint.
- e. Staff who have to administer first aid to a student should ensure, wherever possible, that this is done in the presence of other children or another adult. *However, no member of staff should hesitate to provide first aid in an emergency simply because another person is not present.*
- f. Any physical contact which would be likely to be misinterpreted by the student, parent or other casual observer should be avoided.

- g. Following any incident where a member of staff feels that his/her actions have been, or may be, misconstrued, a written report of the incident should be submitted immediately to the Principal.
- h. Staff should be particularly careful when supervising students in a residential setting, or in approved out of school activities, where more informal relationships tend to be usual and where staff may be in proximity to students in circumstances/an environment very different from the normal school/work environment.

#### 3. Choice & Use of Learning & Teaching Materials

- a. Teachers should avoid teaching materials where the choice of which might be misinterpreted and may reflect upon the motives for the choice.
- b. When using learning & teaching materials of a sensitive nature, a teacher should be aware of the danger that their application, either by students or by the teacher, might after the event be criticised.
- c. If in doubt about the appropriateness of a particular teaching material, the teacher should consult the relevant member of SLT before using it.

#### 4. Relationships & Attitudes

Staff should ensure that their relationships with students are appropriate to the age, maturity and sex of the students, taking care that their conduct does not give rise to comment or speculation. Attitudes, demeanour and language all require care and thought, particularly when staff are dealing with adolescent boys and girls.



#### **Operation Encompass**

We are an Operation Encompass school. Operation Encompass is an early intervention partnership between the PSNI and our school, aimed at supporting children who are victims of domestic violence and abuse. As a school, we recognise that children's exposure to domestic violence is a traumatic event for them.

Children experiencing domestic abuse are negatively impacted by this exposure. Domestic abuse has been identified as an Adverse Childhood Experience and can lead to emotional, physical and psychological harm. Operation Encompass aims to mitigate this harm by enabling the provision of immediate support. This rapid provision of support within the school environment means children are better safeguarded against the short, medium and long-term effects of domestic abuse.

As an Operation Encompass school, when the police have attended a domestic incident and one of our students is present, they will make contact with the school at the start of the next working day, to share this information with a member of the school safeguarding team. This will allow the school safeguarding team to provide immediate emotional support to this child, as well as giving the designated teacher greater insight into any wider safeguarding concerns.

This information will be treated in strict confidence, like any other category of child protection information. It will be processed as per DE Circular 2020/07 'Child Protection Record Keeping in Schools' and a note will be made in the child's child protection file. The information received on an Operation Encompass call from the Police will only be shared outside of the safeguarding team on a proportionate and need to know basis. Members of the safeguarding team have completed online Operation Encompass training, so they are able to take these calls. Any staff responsible for answering the phone at school will be made aware of Operation Encompass and the need to pass these calls on with urgency to a member of the Safeguarding team.

Further information see: <u>The Domestic Abuse Information Sharing with Schools etc. Regulations</u> (Northern Ireland) 2022.

#### Conclusion

It would be impossible and inappropriate to lay down hard and fast rules to cover all the circumstances in which staff interrelate with children and young people, or where opportunities for their conduct to be misconstrued might occur.

In all circumstances, employees' professional judgement will be exercised, and for the vast majority of employees, this Code of Conduct will serve only to confirm what has already been their practice.

From time to time, however, it is prudent for all staff to reappraise their teaching styles, relationships with children/young people, and their manner and approach to individual children/young people, to ensure that they give no grounds for doubt about their intentions, in the minds of colleagues, of children/young people or of their parents/carers.

6. Child Protection: Record Keeping in Schools (see DENI Circular 2016/20)
Please note: UNOCINI forms must only be completed by Designated Teachers.

#### 7. Confidentiality

For reasons of confidentiality, only those people who need to know should be told, and conversations about the child or young person should always be held in private.

#### **APPENDIX 1**

#### Adult Safeguarding. Additional Guidance:

For further information see: <a href="https://www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protection-partnership-key-document">https://www.health-ni.gov.uk/publications/adult-safeguarding-prevention-and-protection-partnership-key-document</a>

The decision as to whether the definition of an 'adult in need of protection' is met will demand the careful exercise of professional judgement applied on a case-by-case basis. This will take into account all the available evidence, concerns, the impact of harm, degree of risk and other matters relating to the individual and his or her circumstances. The seriousness and the degree of risk of harm are key to determining the most appropriate response and establishing whether the threshold for protective intervention has been met.

#### The main forms of abuse are:

#### Physical abuse

Physical abuse is the use of physical force or mistreatment of one person by another which may or may not result in actual physical injury. This may include hitting, pushing, rough handling, exposure to heat or cold, force feeding, improper administration of medication, denial of treatment, misuse or illegal use of restraint and deprivation of liberty.

#### **Sexual Violence and Abuse**

Sexual abuse is any behaviour perceived to be of a sexual nature which is unwanted or takes place without consent or understanding6. Sexual violence and abuse can take many forms and may include non-contact sexual activities, such as indecent exposure, stalking, grooming, being made to look at or be involved in the production of sexually abusive material, or being made to watch sexual activities. It may involve physical contact, including but not limited to non-consensual penetrative sexual activities or non-penetrative sexual activities, such as intentional touching (known as groping). Sexual violence can be found across all sections of society, irrelevant of gender, age, ability, religion, race, ethnicity, personal circumstances, financial background or sexual orientation.

#### **Psychological/Emotional Abuse**

Psychological/emotional abuse is behaviour that is psychologically harmful or inflicts mental distress by threat, humiliation or other verbal/non-verbal conduct. This may include threats, humiliation or ridicule, provoking fear of violence, shouting, yelling and swearing, blaming, Controlling, Intimidation and Coercion.

#### **Financial Abuse**

Financial abuse is actual or attempted theft, fraud or burglary. It is the misappropriation or misuse of money, property, benefits, material goods or other asset transactions which the person did not or could not consent to, or which were invalidated by intimidation, coercion or deception. This may include exploitation, embezzlement, withholding pension or benefits or pressure exerted around wills, property or inheritance.

#### **Institutional Abuse**

Institutional abuse is the mistreatment or neglect of an adult by a regime or individuals in settings which adults who may be at risk reside in or use. This can occur in any organisation, within and outside the HSC sector. Institutional abuse may occur when the routines, systems and regimes result in poor standards of care, poor practice and behaviours, inflexible regimes and rigid routines which violate the dignity and human rights of the adults and place them at risk of harm. Institutional abuse may occur within a culture that denies, restricts, or curtails privacy, dignity, choice and independence. It involves the collective failure of a service provider or an organisation to provide safe and appropriate services and includes a failure to ensure that the necessary preventative and/or protective measures are in place.

**Neglect** occurs when a person deliberately withholds, or fails to provide, appropriate and adequate care and support which is required by another adult. It may be through a lack of knowledge or awareness, or through a failure to take reasonable action given the information and facts available to them at the time. It may include physical neglect to the extent that health or well-being is impaired, administering too much or too little medication, failure to provide access to appropriate health or social care, withholding the necessities of life, such as adequate nutrition, heating or clothing, or failure to intervene in situations that are dangerous to the person concerned or to others particularly when the person lacks the capacity to assess risk.

#### **APPENDIX 2:**

#### CONFIDENTIAL



## **Blessed Trinity College - NOTE OF CONCERN**



### **Safeguarding & Child Protection Record**

Please hand deliver in an envelope marked **Confidential** to the respective AVP Designated Teacher for Child Protection

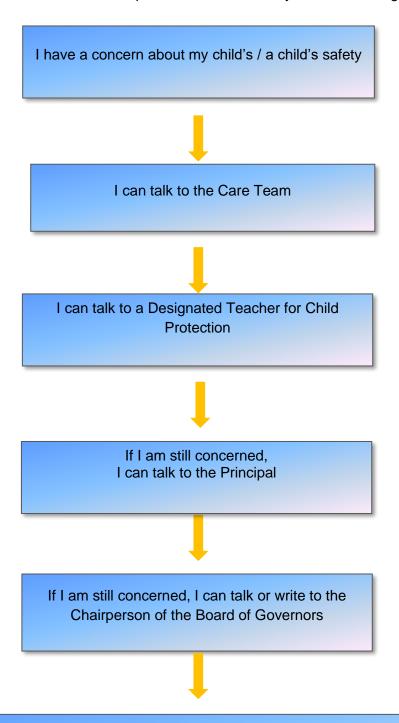
Name of Student:	Registration Group:
Date, time of incident / disclosure:	
Circumstances of incident / disclosure:	
Nature & description of concern:	
Parties involved, including any witnesses to an event & what was said or done & by whom:	

T	
Details of any advice sought, from whom & when:	
Any further action taken:	
Any further action taken.	
Name of staff member making the report:	
Signature of Staff Member:	Date:
Signature of Staff Member:	Date:
	Date:
Section below to be completed by AVP DT:	
Section below to be completed by AVP DT:	
Section below to be completed by AVP DT:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote If 'No' state reason:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote If 'No' state reason:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote If 'No' state reason:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote If 'No' state reason:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote If 'No' state reason:	
Section below to be completed by AVP DT:  Date & time report was passed to the AVP DT:  Written note from staff member placed on Student's Child Prote If 'No' state reason:	

#### **APPENDIX 3:**

# HOW A PARENT/CARER CAN MAKE OR RAISE A CHILD PROTECTION CONCERN

If a parent/carer has a child protection concern, they can follow the guide below:



At any time, I can write or talk to the local Children's Services Gateway Team (02890 507000) or the PSNI Central Referral Team (02890 259299 or 101 ext. 30299)

Out of hours duty social worker: 02895 049999