



SMILE Project

Process Map

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SMILE Project- Process Map

Introduction

The aim of this document is to describe in detail the activities of the SMILE Project, and outline all processes involved in the day to day running of our operation.

It is aimed at everyone interested in the project, and particularly at education practitioners, children's services, prospective volunteers and internal and external stakeholders.

The SMILE process map is a live document and will be reviewed at regular intervals as the project and our practice develop.

1. Description of the Project

1.1 Project Aims & Objectives

SMILE (Supporting and Mentoring in Learning and Education) is part of the Children's Section of the Refugee Council.

SMILE is based in London, the West Midlands, and Yorkshire & Humberside and is funded by the Department for Children, Families and Schools (DCSF) until March 2011.

SMILE aims to reduce the isolation experienced by so many child refugees, by supporting them to access education and after school activities. It also works to promote inclusive education by challenging prejudices related to asylum and raise awareness of the needs of refugee children.

Through its action research embedded in our operation, and the subsequent reports and dissemination events, SMILE intends to influence policy and practice to mainstream the support required for refugee children, hence making a difference to the future of this very vulnerable group.

1.2 Policy Context

The aims, work, processes and activities of the SMILE Project are underpinned by all relevant children's legislation, particularly Every Child Matters. More specifically the objectives of the project fit within ECM's key outcome 'Enjoy and Achieve'

1.3 Project Components

- Mentoring - to enable children and young people to identify and access educational placements and support them during the settling period
- Befriending - to support and encourage children and young people in their education and leisure activities

- School Talks - to deliver talks and interactive workshops in schools in order to raise awareness of the needs of refugee children
 - Action research - to identify barriers and solutions to enable refugee children to enjoy and achieve in their education
 - Information – to support all practitioners working with, or supporting, asylum seeking and refugee children.
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2. Mentoring

2.1. Eligibility Criteria

We will accept and assess referrals of child refugees (*by this we mean children who are seeking asylum or are refugees, whether they are separated or in families*) living in Greater London, Yorkshire & Humberside and the West Midlands. (*See Appendix 1 for referral form*)

Children and young people referred to the mentoring service must be between 5 and 18 years old.

Children and young people referred to the mentoring service must be out of education. Due to high demand and our limited capacity we will prioritise referrals by assessing the child's needs and vulnerability.

2.2. Assessments

The regional volunteer coordinator will meet the child or young person once it has been decided that SMILE can support her/him, or in order to gather more information.

This meeting will take place on Refugee Council premises, at the home of the child/young person, or on the premises of the referring organisation (education organisation, children's services offices, youth club, etc)

The volunteer coordinator will fill out an initial assessment form (*see Appendix 2*) with the child or young person. The aim of the initial assessment process is to gather as much information as possible in order to devise an adequate support plan for the young person and identify any specific issues such as the ones related to health & safety and child protection.

We expect referring officers to assist us in the assessment process by providing us as much information as possible and by helping us to fill out the initial assessment form as there is some information difficult to gather by just meeting the child or young person. Some of the information may have to be collected by the mentor once they have been matched to their mentee and have met her/him.

The mentee will be given the 'Induction for mentees and befriendeds' document (*Appendix 3*) which will be read out and explained by the regional coordinator.

2.3. Matching

Following the initial assessment the regional coordinator will decide what the best match possible is. The criteria for selecting a mentor may be based on language requirement, on geographical areas or on the specific requests from the child or young person. These may include being matched to a volunteer of the same gender, from their community, from a community different to theirs, etc. We cannot, however, guarantee that the client's requests will be met.

The SMILE team will endeavour to ensure the match is most conducive to a fulfilling and satisfying mentoring relationship.

2.4. Initial Meeting

Once a match has been decided upon the regional coordinator will arrange a meeting between the child/young person and their mentor. The aim of the meeting is for the mentor and mentee to be introduced to each other, clarify expectations from each other, agree on subsequent meeting arrangements and agree on an action plan.

During the meeting the mentor and mentee will fill out and agree a Client Information Sharing Consent Form (*Appendix 4*), a Client and Volunteer Agreement (*Appendix 5*) and a Mentoring Relationship Action Plan (*Appendix 6*)

2.5 The Mentoring Relationship

Mentors are expected to meet their mentee at least once a week for a minimum of 2 hours for a minimum of 3 months. The length of the relationship can be extended in consultation with the regional coordinator.

Mentors will help their mentee to identify a suitable education placement and assist them in the process of accessing it. If necessary the mentor will contact all relevant services, such as education services, Children's services or the Ethnic Minority Achievement Team.

Mentors will also assist their mentee in settling into their new education placement and accessing services they are entitled to, such as free school meals.

Mentors will also be expected to identify activities that may be beneficial to their mentee, and refer them to suitable groups and organisations.

Above all a mentor will be expected to become a consistent, reliable and empowering source of advice and support to their mentee.

When necessary, SMILE volunteers will have access to interpreters. They will assist in the support of a child or young person who does not speak English or struggles in expressing themselves and their needs.

2.6 Hours of Volunteering

The hours of volunteering are as follows:

- Monday – Thursday:
10:00 – 18.30 for support of children aged 5 to 16
10:00 – 20:00 for support of young people aged 16 to 18

- Saturday:
10:00 – 18.30 for support of children aged 5 to 16
10:00 – 20:00 for support of young people aged 16 to 18

Full telephone advice and support will be provided during these hours.

For operational reasons volunteers cannot meet their mentee outside of these hours unless authorised in advance by the regional coordinator or the project manager.

2.7 Feedback and Support

Mentors will be supervised by the regional coordinator and will be able to access telephone advice during and outside office hours when meeting their mentee.

They will be expected to record all activities and support provided on the SMILE Volunteer Activity Record form (*see appendix 7*). Volunteers will be responsible for forwarding all forms to the regional coordinator.

They will be expected to report to the regional coordinator any issues and concerns arising from their relationship with the child/young person.

They will particularly be expected to report immediately any child protection or health & safety concerns. These concerns will then be communicated in writing to the relevant children's services by SMILE staff.

The SMILE team will get feedback from the child / young person once the mentoring relationship is over (*see Appendix 8*). They will also be able to contact the regional coordinator at any time if they are not satisfied with the arrangements, are experiencing difficulties with the volunteering relationship or have any other issues they cannot resolve with the volunteer matched with them.

2.8 Expenses

As per Refugee Council policy no volunteer should be out of pocket as a result of his/her work with the SMILE Project.

SMILE will refund the cost of standard class public transport fares paid in getting to and from voluntary work, up to agreed limits. Public transport is the preferred method of travel unless there are no other options. Mentors will be expected to keep receipts and transports tickets and attach them to the relevant expenses form. Volunteer coordinators or the Project Manager will authorise the payment of expenses.

Any costs incurred during the course of a meeting (e.g. soft drinks, cost of an activity) will be refunded for a maximum of £5 per meeting. Expenses of over £5 may also be authorised but must be approved beforehand by the volunteer coordinator. All expenses must be substantiated by receipts.

Mentors will have access to funds prior their weekly meetings or will get reimbursed after the meeting, whichever way is easier for them.

The maximum amount that can be claimed for subsistence is £4.00 per day. This is only payable for actual out-of-pocket expenses and for volunteers working at least half a day (a morning or afternoon) or 4 hours in one day.

When a mentor has identified an activity, group or outing that necessitates funding from the project, she/he should contact the volunteer coordinator to seek approval prior to agreeing to the payment.

3. Befriending

3.1. Eligibility Criteria

We will accept and assess referrals of child refugees (*by this we mean children who are seeking asylum or are refugees, whether they are separated or in families*) living in Greater London, Yorkshire & Humberside and the West Midlands. (*See Appendix 1 for referral form*)

Children and young people referred to the befriending service must be between 5 and 18 years old and in need of after-school activities.

Children and young people referred to the befriending service may be former SMILE mentees in need of further support or may be children and young people previously unknown to the project.

Due to high demand and our limited capacity we will prioritise referrals by assessing the child's needs and vulnerability. In particular we will prioritise children and young people who have no activities outside formal education, those who are experiencing isolation and/or bullying because of their experiences as a refugee child, those who find it difficult to integrate within a school or find it difficult to form relationships with their peers, and those who have issues accessing education due to age dispute issues.

3.2. Assessments

The regional volunteer coordinator will meet the child or young person once it has been decided that SMILE can support her/him, or in order to gather more information.

This meeting will take place on Refugee Council premises, at the home of the child/young person, or on the premises of the referring organisation (education organisation, children's services offices, youth club, etc)

The volunteer coordinator will fill out an initial assessment form (*see Appendix 2*) with the child or young person. The aim of the initial assessment process is to gather as much information as possible in order to devise an adequate support plan for the young person and identify any specific issues such as the ones related to health & safety and child protection.

We expect referring officers to assist us in the assessment process by providing us as much information as possible and by helping us to fill out the initial assessment form as there is some information difficult to gather by just meeting the child or young

person. Some of the information may have to be collected by the mentor once they have been matched to their befriender and have met her/him.

The mentee will be given the 'Induction for mentees and benders' document (*Appendix 3*) which will be read out and explained by the regional coordinator.

3.3. Matching

Following the initial assessment the regional coordinator will decide what the best match possible is. The criteria for selecting a befriender may be based on language requirement, on geographical areas or on the specific requests from the child or young person. These may include being matched to a volunteer of the same gender, from their community, from a community different to theirs, etc. We cannot, however, guarantee that the client's requests will be met.

The SMILE team will endeavour to ensure the match is most conducive to a fulfilling and satisfying befriending relationship.

3.4. Initial Meeting

Once a match has been decided upon the regional coordinator will arrange a meeting between the child/young person and their befriender. The aim of the meeting is for the befriender and befriender to be introduced to each other, clarify expectations from each other, agree on subsequent meeting arrangements and agree on an action plan.

During the meeting the befriender and befriender will fill out and agree a Client Information Sharing Consent Form (*Appendix 4*), a Client and Volunteer Agreement (*Appendix 5*) and a Befriending Relationship Action Plan (*Appendix 9*)

3.5 The Befriending Relationship

Befrienders are expected to meet their client at least once a week for a minimum of 2 hours for a period of 12 months.

The length of the befriending relationship can be shorter in exceptional circumstances. This needs to be approved beforehand by the regional coordinator.

The length of the relationship can be extended in consultation with the regional coordinator.

Befrienders will help their client to identify suitable activities and assist them in the process of accessing them. This may mean accessing in-house activities and groups but also activities provided by external providers (e.g. sports group, outings, homework groups, arts projects)

Befrienders will also be expected to provide ad hoc help with schooling issues and with homework when necessary.

Above all a befriender will be expected to become a consistent, reliable and empowering source of advice and support to their befriender.

When necessary, SMILE volunteers will have access to interpreters. They will assist in the support of a child or young person who does not speak English or struggle in expressing themselves and their needs.

3.6 Hours of Volunteering

The hours of volunteering are as follows:

- Monday – Thursday:
10:00 – 18.30 for support of children aged 5 to 16
10:00 – 20:00 for support of young people aged 16 to 18
- Saturday:
10:00 – 18.30 for support of children aged 5 to 16
10:00 – 20:00 for support of young people aged 16 to 18

Full telephone advice and support will be provided during these hours.

For operational reasons volunteers cannot meet their befriender outside of these hours unless authorised in advance by the regional coordinator or the project manager.

3.7 Feedback and Support

Befrienders will be supervised by the regional coordinator and will be able to access telephone advice during and outside office hours when meeting their client.

They will be expected to record all activities and support provided on the SMILE Volunteer Activity Record form (*see appendix 7*). Volunteers will be responsible for forwarding all forms to the regional coordinator.

They will be expected to report to the regional coordinator any issues arising from their relationship with the child/young person.

They will particularly be expected to report immediately any child protection or health & safety concerns. These concerns will then be communicated in writing to the relevant children's services by SMILE staff.

The SMILE team will get feedback from the child / young person half way through the befriending relationship (6 months) and once the relationship is over (*See Appendix 8*). They will also be able to contact the regional coordinator at any time if they are not satisfied with the arrangements, are experiencing difficulties with the volunteering relationship or have any other issues they cannot resolve with the volunteer matched with them.

3.8 Expenses

As per Refugee Council policy no volunteer should be out of pocket as a result of his/her work with the SMILE Project.

SMILE will refund the cost of standard class public transport fares paid in getting to and from voluntary work, up to agreed limits. Public transport is the preferred method of travel unless there are no other options. Befrienders will be expected to keep receipts and transport tickets and attach them to the relevant expenses form. Volunteer coordinators or the Project Manager will authorise the payment of expenses.

Any costs incurred during the course of a meeting (e.g. soft drinks, cost of an activity) will be refunded for a maximum of £5 per meeting. Expenses of over £5 may also be

authorised but must be approved beforehand by the volunteer coordinator. All expenses must be substantiated by receipts.

Befrienders will have access to funds prior their weekly meetings or will get reimbursed after the meeting, whichever way is easier for them.

The maximum amount that can be claimed for subsistence is £4.00 per day. This is only payable for actual out-of-pocket expenses and for volunteers working at least half a day (a morning or afternoon) or 4 hours in one day.

When a befriender has identified an activity, group or outing that necessitates funding from the project, she/he should contact the volunteer coordinator to seek approval prior to agreeing to the payment.

4. School Talks

4.1 Eligibility Criteria

SMILE will assess requests for school talks and staff training from any schools, colleges, education organisations and events.

The catchment areas for schools talks are:

1. Greater London
2. Yorkshire & Humberside
3. West Midlands.

SMILE will prioritise requests from primary and secondary schools and those made at least one month in advance.

SMILE will consider requests from education organisations outside the project's catchment areas but our capacity and funding make it unlikely that we will satisfy them. Moreover any talk outside our catchment areas may necessitate funding of expenses from the organisation commissioning the talk.

4.2 School Talks Content

The SMILE Project can deliver sessions about issues affecting refugee and asylum seekers. The team can deliver talks and presentations to both students and staff.

Talks will cover areas of the PHSE&C curriculum on citizenship issues.

SMILE will tailor the information to the needs of the individual schools and colleges and will cover some or all of the following topics.

- What are an asylum seeker and a refugee? An examination of the terminology around this issue.

- Why should we help? Britain's legal responsibilities towards people seeking refuge
- Current trends in number of asylum seekers in the UK
- The contribution of refugees to UK society
- The start – why do people leave their country?
- The journey – what happens when people leave and how do they choose the country they go to.
- Arriving in Britain – what should people expect?
- Children and the asylum process
- Case studies – looking at experiences of separated children living in Britain
- Going to school – experiences of refugee children attending school in Britain
- A right to an education - education systems from countries where people are fleeing persecution.

SMILE is seeking to set up partnerships with local schools and colleges in the three regions in order to set up scheduled of talks and workshops over a longer period.

4.3 Delivery of School Talks and Workshops

The school talks and workshops will be delivered by both volunteers and staff.

4.4 Feedback Process

As our aim is to change attitudes towards asylum seekers and refugees, particularly children, we will seek feedback from both pupils/students and education staff. This will help to capture how we have had an impact in terms of awareness and attitudinal change.

4.5 Expenses

The travel expenses of school talk volunteers will be refunded as per Refugee Council policy.

5. Volunteer Recruitment

5.1 Sources of Recruitment

The SMILE Project uses several sources to recruit their volunteers:

- Volunteer Bureaux
- Volunteer Centres
- Centralised Refugee Council recruitment system
- Website and blog
- External volunteer recruitment websites
- Refugee Community Organisations (RCO's)
- SMILE Newsletter

5.2 The Recruitment Process

Prospective volunteers are invited to fill out an application form (*Appendix 10*).

Prospective volunteers are then invited for an interview with the regional coordinator.

During the interview the motivations for volunteering are assessed, as are the level of understanding and awareness of the issues affecting asylum seekers, refugees and children. The project's services are outlined and explained, as are the minimum requirements (e.g. time commitment, consistency with the children we support)

If a prospective volunteer is assessed as suitable for mentoring, befriending or delivering school talks they will be offered the SMILE training (*see part 6*), will be asked to complete an enhanced disclosure form from the CRB, and 2 references they have provided are being checked.

Only on receipt of 2 satisfactory references and of a satisfactory CRB disclosure, will a volunteer be allowed to have unsupervised contact with a SMILE referee.

SMILE will allow supervised contact between a volunteer waiting for her/his CRB to come through and a SMILE referee but this will take place on Refugee Council premises under the supervision of SMILE staff, and will usually be limited to a first meeting with the child or young person.

6. Volunteer Training

Prior to starting their activities with SMILE volunteers undergo a comprehensive training programme specially tailored to the role and the issues encountered during the course of the role and involvement.

6.1 SMILE Induction Training

This two day training contains addresses the following issues:

- Introduction to the SMILE Project
- Introduction to the Client Group (journey of a child)
- Hopes and Fears
- Boundaries and Confidentiality
- Communication Skills
- Mentoring and Befriending (theory & practice)
- The UK Education System
- The Asylum System
- Asylum Support and Young People
- Roles and Responsibilities

- Establishing Personal Boundaries
- Preparing for a Mentoring Meeting
- Identifying Goals
- Understanding what the Client needs

6.2 Child Protection

In addition a volunteer will undergo training on child protection, run by the Head of the Refugee Council's Children's Section, with the help of a caseworker on some occasions. The child protection training covers the following areas:

- What is Child Abuse and Child Protection
- Child Protection vs. Personal Values
- How to Recognise Potential Cases of Child Abuse
- Child Protection Processes and Procedures

6.3 Other Training

The Refugee Council runs a full programme of training courses for volunteers and paid staff. SMILE volunteers will be able to access any training relevant to their role and their professional development.

7. Volunteer Support

The SMILE Project will fully support its volunteers across the 3 regions, and will ensure that all queries and concerns are fully addressed by the regional coordinators or the project manager.

The means of support are as follows:

- Regular Supervision - Each volunteer will have supervision with their regional coordinator every 4 to 6 weeks (*see Appendix 11 for supervision form*)
- Group Supervision – Regional coordinators will organise regular meetings during which volunteers will be able to raise issue in a group and share with their peers issues, problems and good practice.
- Office Hours Telephone Support – Volunteers will have access to telephone advice and support from regional coordinators. In their absence they will be have access to telephone and advice from other regional coordinators or the project coordinator
- Out of Hours Telephone Support - Volunteers will have access to telephone advice and support from the Project team during evenings and on Saturdays (agreed volunteering hours). Members of the project team will be on-call on a rota system.

- SMILE volunteers will have access to an information bank and toolkits on the SMILE website: www.smileproject.org.uk
 - SMILE volunteers have access to a yahoo group email forum. This email forum is open only to SMILE volunteers and staff and the membership and contents of the messages is moderated by the SMILE Project manager or another team member during his absence. The aim of the email forum is to allow volunteers to benefit from peer support, feel part of a team, and be able to seek advice, discuss challenges and share good practice.
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8. Safeguarding

The SMILE Project and the Children's Section of the Refugee Council take safeguarding of children and volunteers very seriously.

In light of the above the following processes are applied:

1. We will seek written authorisation from the parent or legal guardian before we start supporting a child or young person.
2. The initial assessment process will identify any child protection or health and safety concerns arising from the circumstances of the child or young person or from their outlines of their needs.
3. Any child protection or health & safety concerns must be addressed immediately. The volunteer must inform the regional volunteer coordinator or project manager as soon as these concerns arise. The regional volunteer coordinator or project manager will immediately pass on –in writing- all the concerns fed back to the relevant children's services. Volunteers will subsequently be debriefed and thoroughly supported.
4. Volunteers recruited by SMILE are not able to start their involvement before satisfactory references are received.
5. Volunteers recruited by SMILE are not able to start unsupervised contact with children and young people before a satisfactory enhanced disclosure from the CRB is received.
6. Volunteers undergo training on child protection.
7. Volunteers are made aware of the Refugee Council's Child Protection policy (*see appendix 12*).
8. A risk assessment is undertaken with each relationship identifying potential hazards and areas of concern.
9. Hours of volunteering are restricted, taking in consideration the age of the child or young person (*see 2.6 and 3.6*).

10. Volunteers have access to telephone advice and support at all times during volunteering hours. This applies to office hours and out of hours.
 11. Volunteers are asked to contact the SMILE team before they meet their clients and after they have finished the meeting.
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9. Action Research

9.1 Aims

The research element of the SMILE project focuses on evaluating all the aspects of the project such as school talks, befriending and mentoring.

Specifically the research aims to investigate the educational and social contributions that mentors and befrienders make in the lives of refugee and asylum seeking children, and the impact of awareness-raising activities in schools.

The research team are undertaking action research which is a process where monitoring and evaluation run beside activities. This approach allows the project team to reflect on what is happening in the project and change practice if the research identifies problems or ways to improve activities. Overall the research will collect evidence about 'what works', to inform the development of policy and practice.

9.2 Methods

In order to achieve the goals the research will use a mixture of methods. These will be mainly qualitative research methods and will include:

- Conducting a literature review to locate the project in a broader context and highlight good practice that has been identified by others.
- Conducting qualitative interviews with a sample of mentors and mentees at the beginning and end of their relationship.
- Conducting qualitative interviews with a sample of befrienders and befriendees at the beginning, middle and end of their relationship.
- Conducting before and after questionnaires when running awareness-raising activities with young people and teachers.
- Using the project team's own record-keeping to collect information on successes and difficulties.
- Interviewing members of the project team to get opinions on how individuals feel the project is going.

9.3 What SMILE will do with the findings

The SMILE project team will be told the outcomes from the research throughout the duration of the project so the findings can inform their practice and improve the support given to refugee and asylum seeking young people.

At the end of the research process, a report will be produced highlighting the major findings of the research with specific emphasis on 'what works' when mentoring and befriending refugee and asylum seeking students, as well as methods of effective awareness-raising.

These findings will be shared with practitioners and policy makers such as schools, local authorities and our funder, the Department for Children, Schools and Families.

10. SMILE Website and Information

The SMILE Project provides information on its website. The information is related to the immigration situation, support and education needs of asylum seeking and refugee children. It also provides information on mentoring and befriending. The SMILE website will provide policy updates and any update on the project activity, research and developments.

The information can be accessed at: www.smileproject.org.uk

We encourage all stakeholders, practitioners, volunteers and young people to participate in the drafting and gathering of information related to the project and the education of refugee children.

11. Equality and Diversity

11.1 Children and Young People

SMILE will strive to seek referrals and address the needs of all children and young people within our eligibility criteria, regardless of their country of origin, ethnic origins, language, gender, religious beliefs, health status, HIV status, sexual orientation and personal circumstances.

Equality and diversity in the support of children and young people feature comprehensively in the training of SMILE mentors and befrienders.

11.2 Volunteer Recruitment

SMILE will strive to recruit and support volunteers from all backgrounds and walks of life.

We particularly encourage applications from volunteers from refugee background as we believe their knowledge and experience is invaluable in the support of children and young people referred to SMILE, in the delivery of school talks, and in the further planning and development of the project.

12. SMILE Activities

Aside from the activities organised and run by SMILE volunteers and staff we will commission ad hoc projects that will benefit children and young people supported by SMILE, and will encourage the expression of their creativity and the learning of new skills.

Currently SMILE is involved in the funding of film, drama and music projects.

13. Contacts

General email: smile@refugeecouncil.org.uk

Project Manager

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Regional Volunteer Coordinator (London)

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London SW9 8BB

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Email: matthew.court@refugeecouncil.org.uk

Regional Volunteer Coordinator (Yorkshire & Humberside)

Iona Lyons
SMILE Project
Children's Section
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1 Dewsbury Road
Leeds LS11 5DQ

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Regional Volunteer Coordinator (West Midlands)

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CLIENT REFERRAL FORM

Name		Date of Birth	Gender (Male/Female)
Current Address			
Telephone Contact			
Refugee Council Ref Number (if any)			
Nationality		Language(s) spoken	
Religion		Immigration status	
Client's status	Separated Child <input type="checkbox"/> Child in Family <input type="checkbox"/>		
Will there be a need for an interpreter?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Disabilities/ Special needs/ Health issues			
Client's Hobbies and Interests			
Referral for: Mentoring <input type="checkbox"/> Befriending <input type="checkbox"/>			
Reason for referral/other relevant information/specific requests (What would you like the mentor/befriender to help with?) – <i>Please be as comprehensive as possible</i>			
Name of referring person:		Agency:	
Contact details:		Signature & Date of referral:	

Appendix 2

SMILE Client Initial Assessment



This form should be completed by the volunteer co-ordinator during an initial meeting with a child or young person referred to the project, and prior to matching the child or young person with a mentor or befriender. It should contain as much information as possible about the young person, their circumstances and their educational and general needs. It should also contain information related to health and safety.

Child / Young Person's Details

Family Name:	Forenames:
Date of Birth:	Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>
Nationality:	Religion:
1 st Language:	
Level of English: None <input type="checkbox"/> Low <input type="checkbox"/> Basic <input type="checkbox"/> Adequate <input type="checkbox"/> Good <input type="checkbox"/> Fluent <input type="checkbox"/>	
Need for Interpreter: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Address:	Tel (if any):
Email (if any):	
Special Needs (if any):	
Legal Guardian(if any):	Relationship:
Address:	
Legal Guardian's Tel:	Email Address:

Referral Information

Name:	Designation:
Agency:	
Address (incl. postcode):	
Tel. Number:	Email Address:

Age Information

Age of client:
Is the client age disputed? yes <input type="checkbox"/> No <input type="checkbox"/>
Information on age dispute or age assessment:

Support Information

Who is the child / young person supported by?	
Parents <input type="checkbox"/> Relative <input type="checkbox"/> Local Authority (please specify below) <input type="checkbox"/> Other (please specify below) <input type="checkbox"/>	
Where is the child / young person accommodated?	
Parents <input type="checkbox"/> Relative <input type="checkbox"/> Foster Carer <input type="checkbox"/> Supported housing <input type="checkbox"/> Hostel <input type="checkbox"/> Please specify:	
Name of social worker/ Key worker (if any):	
Address:	
Tel. number:	Email address:

Education Information

Education Placement (if any):

Type of Placement: School College Sixth Form College Other
Please

specify:

Course:

Name of Education Provider:

Address:

Contact Name:

Job Title:

Tel. Number:

Email Address:

Previous education / Schooling history (if any): *Please provide details below*

Immigration Information

Immigration Status:

Date of arrival in the UK:

Date of asylum claim:

Additional information:

Relevant Health Information

*Please outline below any **relevant** information related to the child/young person's health or mental health.*

Additional Information

Please outline below any other information that you assess as relevant, e.g. special needs, general information relevant to a mentor/befriender etc.

Needs Assessment

Please outline the main needs to be met through the mentoring / befriending relationship, providing as much detail as possible, and assessing their level of urgency

Need	Level of Urgency

Assessment Date:

Name of Assessor:

Appendix 3



Induction for Mentees and Befriendeds

Aims of the Project:

Why it was set-up
What our aims are
How long it will last
How often meetings will take place

What is mentoring/ befriending:

Mentoring used in many situations, when people start a new job, when people are learning a new skill, when people arrive in a new country, when people start a new school.

It is 1 – 2- 1 support and guidance given from one person to another to help them achieve and succeed in certain areas of their life.

What is a mentor/ befriender?

Work with you to make a plan and set goals around your education.
Help you to help yourself and make your own choices.
Will encourage and support you to overcome problems you may be facing.

Fully trained, friendly, supervised by R.C., volunteers

Commitment

To meet once a week for at least 2 hours
For 3 months or 12 months
To keep me informed about any problems you may be having with the mentoring

Matching Process

We will find a mentor that is suitable for you based on their experience and interests
If you do not like you mentor, that's fine!

Boundaries

Just about education, activities and learning
Only at agreed times, volunteer is not 'on call'

Ground Rules

Treat mentor with respect
Meet when agreed, or let them know before hand

Appendix 4



Client Information Sharing Consent Form

The SMILE Project offers a confidential service to the people we work with. We believe that people are entitled to choose if information about them can be passed on to other agencies or individuals.

The SMILE Project will receive your personal information from different sources, both within the Refugee Council and from external agencies. Refugee Council staff and volunteers involved in the SMILE Project will treat this information as private and confidential.

However, there may be times in the course of their work on the SMILE Project when a volunteer/staff member may need to discuss your personal details with people such as:

- Your solicitor and CLS
- Doctors and other health professionals
- Education Providers (schools, colleges, etc)
- Social services
- Local youth services i.e. Connexions or youth clubs
- Your accommodation provider
- NASS
- Other local agencies/services
- Other support groups in your area of residence

PERSONAL INFORMATION WILL ONLY BE DISCUSSED WITH THE ABOVE ORGANISATIONS IF IT IS NECESSARY TO HELP YOU ACCESS OTHER ORGANISATION'S SERVICES, IF WE ARE APPROACHING THE ORGANISATION TO RESOLVE A PROBLEM THAT YOU MAY HAVE, OR IF WE BELIEVE YOUR SAFETY, OR THE SAFETY OF OTHERS, IS AT STAKE.

YOUR CONSENT

I consent to the SMILE Project volunteers and staff discussing my details with the people/agencies above only if it is necessary. I have deleted in the list above any people/agencies that I do not wish the SMILE Project to talk to. I also agree that the SMILE Project stores and processes data about me, in accordance with the Data Protection Act 1998.

Client Signature:

Date:

Volunteer Signature :

Date:

Appendix 5



Client/Volunteer Agreement Form

Volunteer name:

Client name:

We have agreed the following points to start the mentoring/befriending relationship.
This started on:

Date:

We will meet for months and so will finish on:

Date:

If we think it would be better to carry on with the mentoring/befriending after this time we will talk and agree on a new date. This will be decided with – the volunteer coordinator.

Aim of project:

To provide support and guidance with your school or college placement, in order to help you achieve.

We will:

- Meet when agreed
- Listen carefully to each other
- Be honest
- Ask questions to ensure we understand each other and to raise different view points
- Seek and provide information as and when relevant
- Maintain confidentiality – agreeing to seek additional information or help if necessary
- Review progress/continuation of the relationship

In addition

(mentor/befriender)

undertakes to support

(mentee/befriendee)

to achieve his/her aims and to give feedback, provide information and suggestions in order to help his/her aims and/or objectives

Signed (client):

Signed (volunteer):

Appendix 6



Mentoring Relationship Action Plan

Name:

Date:

My goals around education / support / activities for the next three months are:

Action	By Whom	Target date

How will I know when I have achieved my goal?

Review Date	Comments on progress

Mentee's signature:

Mentor's signature:

Volunteer Activity Record Form

Volunteer's name	
Client's name	

Date of meeting	
Activity Progress Goals achieved	

<i>Next time we meet...</i>	
Day and date:	
Time:	Place:



Client Feedback / Review Form

Name:

Volunteer's initials:

Date:

How are you getting on with your mentor / befriender?



Very Well



OK



Not Well

Comments:

What do you like about meeting your mentor/befriender?

Is there anything you don't like or find difficult?

What have you done with your mentor/ befriender?

What plan have you made with your mentor / befriender? – Please give details

Do you like where you meet your mentor / befriender?



I Like it



Its OK



I don't Like it

Comments:

Is there anything else you would like to do with your mentor / befriender?

Signature:

Appendix 9



Befriending Relationship Action Plan

Name:

Date:

My goals around education / support / activities for the next twelve months are:

Action	By Whom	Target date

How will I know when I have achieved my goal?

Review Date	Comments on progress

Befriender's signature:

Befriended's signature:



Volunteer Application Form

Personal Details

First name:

Surname:

Address:

Postcode:

Home Telephone

Work/Mobile Tel:

Email address:

Occupation:

Languages
Spoken:

Where did you hear
about volunteering
at the Refugee
Council?

For how long do you hope you will be volunteering with us? E.g. 3 months, 6 months.
For most volunteering we ask for a minimum commitment of 3 months.

How many days a week would you usually be able to volunteer?

Monday

Tuesday

Wednesday

Thursday

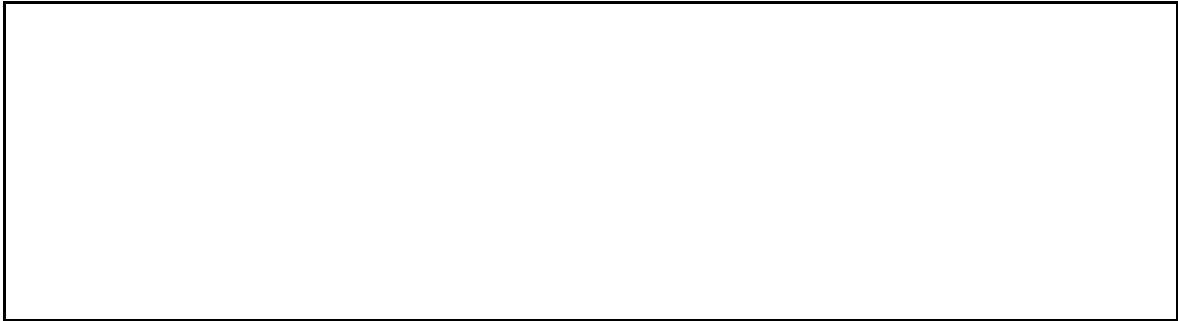
Friday

Why do you want to volunteer with the SMILE Project at the Refugee Council?

Which volunteer roles are you interested in?

We are keen to develop new volunteer opportunities. Please list any skills you think could be useful in our work.

Are you aware of the fact that you will support service users on your own most of time?
Do you have any special requirements that we would need to consider if you were to
become a volunteer? Please give details

A large, empty rectangular box with a black border, intended for the respondent to provide details regarding their awareness of the fact that they will support service users on their own most of the time, and any special requirements that would need to be considered if they were to become a volunteer.

References

Please give the contact details of two people who will be able to comment on your suitability to volunteer for the Refugee Council. They should have known you for at least a year, and cannot be a member of your family. One of these people should ideally be a previous employer, tutor or volunteer manager.

If this is difficult for you because you have been in this country for a short time, please let us know and we can discuss it further.

Name:	
Address:	
Telephone number:	
Email address:	

Name:	
Address:	
Telephone number:	
Email address:	

How does this person know you?

How does this person know you?

I declare that the information given in this form is correct and true, to the best of my knowledge.

Signed:

Name:

Date:

Please print, sign and return your completed form to:

Include address of relevant volunteer coordinator



Volunteer Supervision Form

Volunteer's Name	
Client's Name	
Volunteer Role	
Supervisor's Name	
Date	

How is your mentoring/befriending relationship going in general?

Are the objectives of mentoring/befriending being met?

Any problems or concerns you may have?

Any health and safety concerns?

Are you coping emotionally?

Is volunteering with us what you expected?

Have you identified any support or training needs?

Since our last meeting have there been any changes to your situation that may affect your volunteering involvement?

Any other issues identified?

Comments

Expenses and practical issues

Actions

Volunteer Signature:

Date:

Volunteer Coordinator

Signature:**Date:**

Date and Time of Next Meeting:

Appendix 12



Refugee Council Child Protection Policy and Procedures

Updated 2006

1. Introduction

The aims of this document

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

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

Whilst the Refugee Council is not a statutory childcare agency and it is not appropriate for staff to carry out investigations into suspicions of child abuse themselves, it is our duty to take appropriate action and to make referrals to those agencies specialising in this area.

The Refugee Council's work with children

The contexts and situations in which Refugee Council staff and volunteers work in, may mean that you come across children at work. The law defines a child as being under 18. This will almost exclusively involve staff working in direct service provision. All our work with children should be informed by the UN Convention on the Rights of the Child and by the 1989 Children Act. Copies of these documents are available from the Children's Section for consultation.

The two main arenas that Refugee Council staff and volunteers work in are:

Children in families

Every day many children pass through our premises throughout the country as part of families or households who are accessing NASS support, receiving advice and support, are within the Gateway programme or within the work of the Specialist Team. There are obviously other short-term projects which may mean that staff and volunteers work with children in families – for example, Sunrise. Staff and volunteers also work with families outside the office when they visit families in other outreach locations where clients receive advice and support. The majority of our contacts with children and their families are brief and do not allow for ongoing 'casework', though occasionally we may become involved in advocating for a family over a period of time in a particularly complicated situation, for example if they have special needs.

It can be the case that among different communities, it can be the case that a child lives as part of a household that does not include his/her birth parents. There may be many reasons for this, -for example, the child's parents may be dead and the child has been brought to the UK by members of the extended family as an adopted member of their household. The child's parents, still living in the home country, may have decided to send the child to the UK with relatives in order to protect the child from danger or from poverty. Alternatively a child may have entered the UK with an adult posing as his/her parent as a way of helping the child to enter illegally. There may be many reasons behind this kind of deception, some of which may be harmful for the child and others which may be intended in his/her best interests.

Unaccompanied or separated children

The work of the Refugee Council's Children's Section currently centres around the provision of specialist advice and support for unaccompanied asylum seeking children and young people who are under the age of 18 when they enter the UK. Much of the work of the Children's Section involves liaising with the statutory child care services to ensure that children in this situation receive the care, accommodation and support they need. This work does not fall under the remit of 'child protection' most of the time as it does not involve protecting children from those who would usually care for them. However, there are some ways in which the Children's Section's work with unaccompanied minors may overlap with questions of child protection. For example we may have concerns that an unaccompanied child or young person has been trafficked to the UK by adults posing as carers for the purposes of exploitation, or we might be working with a young person who is being ill-treated by the family (perhaps a foster family) who are supposed to be looking after him.

2. Understanding the terms

What is child protection?

'Child protection' is the term used to describe the responsibilities and activities undertaken, usually by statutory bodies, to prevent or stop children being abused or ill-treated by those adults who should be caring for them. The agencies with a statutory duty to protect children in this way are the social services departments of local authorities and the police. The key piece of legislation regarding child protection is The Children Act (1989). Section 47 of this Act states that social services departments have a legal duty to investigate any situation where there are concerns about the welfare of a child or young person up to the age of 18 years. Social services may choose to do this with the help of specialist police officers.

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

- talking to the person who has expressed concern, i.e. the referrer;
- talking to the child;
- talking to the parents/carers of the child;
- liaising with other agencies who have knowledge of the child and his/her family and circumstances

Remember that child protection is about abuse or ill-treatment by those who are supposed to be caring for children or who are in a position of trust and authority towards them. Some children may be harmed by older children who are, usually on a temporary basis, caring for them. This would still be treated as a child protection issue for both children. Assaults or violence by adults (or other children) unknown to the child are dealt with by ordinary criminal law.

What is child abuse?

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

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

Although four categories of abuse are used for the purposes of official registration (by which a child's name is placed on the child protection register), in reality, the experience of many children who have suffered from abuse will include more than one aspect of abuse.

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

- **Physical injury**
The actual or likely physical injury to a child, or a failure to prevent physical injury or suffering to a child.
- **Neglect**

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

- **Sexual abuse**

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

- **Emotional abuse**

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

The task of the child protection social worker or police officer is, therefore, to try and make an assessment of whether a child has been or is likely to be abused or not. This is often a very difficult task. Within the 1989 Children Act, the term 'significant harm' is used when considering how seriously to take concerns about the safety or welfare of a child. 'Significant harm' refers to a series of acute and long standing harmful events that can interrupt, alter or impair the physical and emotional development of a child. However, one serious but isolated incident could also result in significant harm.

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

The Children Act

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

However it is Section 47 of the Children Act, as which places a duty on social services to investigate if they 'have reasonable cause to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm....(T)he authority shall make, or cause to be made, such enquiries as they consider necessary to enable them to decide whether they should take any action to safeguard or promote the child's welfare'. This might involve close monitoring of the parent or carer's ability to care for their child or it might involve placing the child in emergency police protection and possibly 'in care' over a lengthy period.

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

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

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

Some of these latter contextual considerations might include:

- **The family context of the child when a child has been harmed.** Many additional factors may be adding stress to family life for refugee families. These could include major changes in family structure, involving bereavement, separation and disruption. Parents and carers, including young or first-time parents, may lack the positive role models and support systems which would normally help them care for their children. They may have difficulties gaining access to the usual ante and post-natal care systems. Parents may feel very isolated away from their usual community support systems.
- **Parents and/or children may have been exposed to terrible violence** in their home countries and on their way to the UK. Violence and hostility may continue as they face racial harassment in their new homes. Children may no longer know what appropriate adult behaviour is as they have been exposed and desensitised to violence over some time.
- **The impact of environmental factors.** The difficulty of living without basic needs such as shelter and food, and of the stigma and social disadvantage associated with being a refugee in the UK, should not be underestimated. What may be perceived as the neglect of the child **may** be a symptom of the family's need for basic resources which are not being met within the NASS or other support systems.
- **The child's developmental stage within their own culture.** There may be differing expectations regarding child development from one culture to another and the refugee child may be struggling to come to terms with his/her role and identity in a new culture. This may lead to the child being difficult to control by the parents or the parents feeling that they need to be particularly strict in order to protect the child.
- **Whether the parent has particular problems or difficulties.** Parents and carers may be less able to cope with the demands of their children at certain times. This is particularly the case when either parent or child have mental health problems or learning difficulties, for example. This may have an effect on the parent's capacity to provide a consistently reasonable level of care to their children. It is important that the needs of parents and children are considered together by all the agencies involved. Many parents or carers may need help with accessing appropriate support in caring for their children.

Once again, it is very important to realise that these issues are taken into account, but still means that child protection procedures must be followed. However, it may be that when a referral is made to the Social Services, any pertinent issues should be mentioned.

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

How to contact social services and the police

At various points throughout these guidelines, you will be advised to make a referral to social services. Let us first consider how you should do this.

- a) Discuss your concerns with your manager within an hour of you having concerns. If your manager is unavailable, ensure you find another manager to discuss the issue with, and in extreme cases, please don't hesitate to contact the Children's Section, where they can give you help and support
- b) Every Social Services department, will have a specialist 'Referral and Assessment' Team working with children and families that will take referrals concerning child protection concerns. They work between 9am and 5pm Monday to Friday. To access the telephone number of your local team, please access the web-site of the local authority and there will be a section referring to Social Services for Children and Families, or Children and Young Persons Services. The relevant telephone numbers will be available. It is important that you are clear with the social workers you speak to that you are making a child protection referral because you have concerns about the welfare of a child. They must then treat the referral as they would any other referral concerning suspected abuse.
- c) A referral should be made to the social services department for the area where the child is living, if this is known. If this is not known or if, for example, the child is homeless, then the referral should be made to the authority where the particular need of the child comes to light, for example where the Refugee Council's offices are located.
- d) Sometimes issues arise when a referral of an asylum-seeking child or family is made to social services for child protection purposes. Some social services staff may try to refer the matter on to 'unaccompanied minors teams' or 'asylum teams'. However, it is important that you insist that your referral is a child protection concern which needs to be dealt with by the children and families team. The exception to this is in relation to unaccompanied children, who may have an allocated social worker. Any concerns you have should be discussed with them first, but if you are not satisfied they are taking this seriously, ensure you also refer your concern to the children and families team.
- e) When you are giving your referral, if you are referring a child you know through your work or volunteering within the Refugee Council, you must give your name and role, and full contact details. You cannot remain anonymous within your professional role. Outline your concerns fully and completely and take the details of the person you are giving your information to.
- f) You should ask whether and when you will hear back from Social Services, but it may be the case that you do not hear, as details of future actions may be confidential. However, it may be the case that you are involved in future plans to protect the child – for example a child protection case conference.
- g) It then is essential that you confirm your telephone conversation in writing and keep a copy for yourself and fax this to Social Services, as well as send a hard copy in the post.
- h) If you have any concerns that your referral will not be followed up or about the person taking the referral, speak immediately with your manager, who should take up the issue immediately with the appropriate manager within Social Services.

Outside working hours, every social services department has to have an Out-of-Hours or Emergency Duty Team that you should be able to contact, often by calling the main social services switchboard number. The normal procedure is for staff on emergency duty to call back the referrer. They are often unwilling to call back a mobile phone number and will ask for a landline. Unless it is an emergency, this may take some time, depending on how busy the team is on that evening or weekend.

In cases of extreme concern - when you believe a child to be in significant danger, it is always possible to obtain assistance from the local police.

The importance of recording

As in all our work with clients, the keeping of prompt and accurate notes about child protection concerns is vital. If staff and volunteers are dealing with a *critical incident* that involves child protection concerns, then this will be recorded in the special forms for use in critical incidents.

If staff and volunteers from one of the services that records client records on the RIO database have concerns about a child, notes regarding the child protection concerns must be recorded in the 'Casenotes' section of the database. If possible include an organogram of the family tree. There is currently no particular advice topic for child protection that can be selected on RIO.

Neither the Children's Section nor TES currently use RIO. These projects should use their own casenote recording systems for recording matters regarding child protection.

Records need to cover the following areas:

- Everything and everyone that was seen and observed at the time of any incident that has raised concerns – including injuries and notes on the behaviour of children, parents and carers. Records must be factual information only. If a personal opinion is added, then it should be made very clear that this is the case.
- Any allegations or disclosures made by children, parents, carers or others. If possible, it is best practice to write down the actual words used in disclosures or allegations.
- Any explanations given for injuries to the child.

- All action taken by staff including discussions with their line manager, contact with social services or the police, including the names and contact details of those spoken to.
- Records should be dated and timed as well as signed (or the equivalent on RIO). Social services have strict deadlines about when they should take action following a referral. If Refugee Council staff are careful about recording exact times, it may help to follow up on the referral later on.

Child protection is one of the few areas of work with clients when our usual strict guidelines regarding confidentiality can be broken in the interests of protecting a child. It is always best to discuss this with your line manager **first**.

Guidance on particular situations that might arise.

You witness an adult carer being violent towards a child on Refugee Council premises or at an outreach location

There will inevitably be differences of opinion about what constitutes violence towards a child. Try and consider the term 'significant harm' as described above

Ask yourself: Has the child been injured or physically harmed in this incident?

- The first priority of the staff member witnessing the incident and the manager they call to support them is to ensure the physical safety of the child concerned. This may involve calling the emergency services in order to obtain medical treatment for the child (eg a doctor or an ambulance) or possibly to prevent the adult from leaving the premises with the child (the police). This will be particularly important if you do not know where the family will be going after their visit to the office.
- If you cannot ascertain that the child has been harmed, this does not mean that you should ignore the situation. The child may not have been injured on this occasion but the behaviour you witnessed may have given you cause for concern. Perhaps the child flinched as if used to being hit, or perhaps the adult was verbally abusive towards the child, making you believe that the relationship between them was harmful for the child.

This is a difficult situation. It may seem right to spend some time with the parent/carer explaining to them that their behaviour towards their child is not right and may lead to intervention by statutory services now they are in the UK. However, if you have real concerns about the child's safety, your role is to alert social services before you speak to the parent/carer and to allow the professionals to make the assessment about the child's safety.

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

- This is known as 'disclosure'. The child should be reassured that it was right to talk about the abuse. You should explain that you cannot keep the matter a secret and that you will have to tell some other people so that something can be done to protect the child in the future. You should immediately inform your line manager so a decision can be made about whether to discuss the matter with social services and who should do this.
- You need to find out just enough about the alleged abuse in order to refer the matter to social services or the police; they are trained in investigative interviewing. This is not your role.
- If you need to ask the child questions or clarify what they are saying, make sure that you use open-ended/non-leading questions, e.g. 'Please tell me what happened'. 'Please explain that a bit further.' It has been known for cases of child abuse to collapse because the accused has been able to argue that ideas have been put into children's heads by those interviewing them.
- If you are speaking to the child through an interpreter, check that the interpreter is also aware of the importance of the exact words used to discuss the disclosure with the child.

You see bruising or other signs of possible physical abuse

- Ask the child and the parent/carer how the injuries happened. If the explanations given do not seem reasonable, or if there is inconsistency about explanations given by different people (or by the child and the parent/carer), you must discuss your concerns with your line manager immediately. Social services may need to be contacted and all relevant information passed on.
- If you are not able to speak to the child or parent/carer about bruises you have seen, you should still discuss with your manager, as it may be that you refer the matter to Social Services

There are concerns about the appearance or behaviour of a child which suggest the child may be neglected

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

An allegation of abuse is made to you by another person

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

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

- You must contact social services. As explained above, there could be good reasons why the adult believes it to be in the child's best interests to act as their parent but is afraid to explain the truth. Equally, adults involved in the trafficking of children for various kinds of exploitation often pose as their parents in order to get them into the country (see below).
- It may be that social services will assess that the adult is a suitable care-giver for the child and the situation can be regularised for immigration and NASS/welfare benefits purposes so that the child becomes a legitimate part of the household. Equally the assessment by statutory services may conclude that this is not a suitable place for the child to live.

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

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

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

- It is illegal for any young person under the age of 16 to enter a sexual relationship, whether heterosexual or homosexual.
- Marriage is permitted by law with parental consent at the age of 16 and without parental consent at the age of 18. Being married does not affect the fact that someone under 18 is still legally a child. In some cultures it may be the norm for young couples to marry when they are both below the age of 16, or for a young girl to be married to an older man but young people below 16 who were married outside this country are not recognised as married under UK law.
- If the young woman is under 16, with a boyfriend or husband and unaccompanied by her parents or usual care-giver, then she clearly becomes the responsibility of social services. You must make an immediate child protection referral as outlined above. You should also refer the child to the panel of advisers within the children's section. The panel should also be able to give some advice on what action to take next.
- If the young woman is 16 or over, and with a husband or boyfriend, social services have very little power to become involved from a child protection point of view, even if there are concerns that the relationship may be abusive. They or (more likely) the police may only be able to intervene if another crime, such as wrongful imprisonment, or assault is suspected.
- If you have concerns that a young person is in a harmful relationship, try and talk to them on their own first of all. It may be that your relationship with a young person in this situation is of more use in empowering the young person

to escape the abusive relationship than is the limited power of intervention of social services. If your concerns continue after talking to the young person, or if you cannot speak to them and are still worried, contact the police.

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

5. Other child protection concerns

Female genital mutilation

Female genital mutilation is practised predominantly amongst communities from sub-Saharan Africa, the Horn of Africa, the Arab World, Malaysia and Indonesia. The most recent estimate from FORWARD (the Foundation for Women's Health, Research and Development) is that 20,000 girls are at risk in the UK, many in refugee communities.

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

Nevertheless, as female genital mutilation involves extreme pain and trauma for the child and is a potentially life threatening procedure, it should be seen as an act of physical abuse likely to result in significant harm to the child. Its practice in the UK has been illegal since 1985. No-one has yet been prosecuted under this Act. Some think that this is because professionals are not vigilant enough about spotting the practice. Others point to the fact that young women are being sent abroad to be mutilated or that people from home countries are being brought to the UK to perform the operation.

If it comes to your attention that a young woman is about to undergo FGM, a child protection referral must be made to social services as quickly as possible. They have a duty to investigate the risk to the girl as they would with any other allegation of abuse. It is essential that you do this; staff/volunteers are committing a crime if they are aware female genital mutilation is to take place and nothing is done to stop it.

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

Children involved in trafficking and prostitution

This rapidly growing area of international crime is coming under increasing scrutiny by law enforcement and child welfare agencies in the UK and worldwide. Many of the

asylum seekers the Refugee Council works with, adults and children, have been smuggled into the UK. 'Trafficking' differs from smuggling in that it involves an element of coercion or deception. However there is still no specific law against human trafficking in the UK.

Trafficked children or their parents may have been told lies about what kind of life awaits the child in the UK or parents may have been frightened or threatened into giving up their children to traffickers. Sometimes children are even abducted or kidnapped for a life of sexual exploitation in the West.

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

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

- A child attending our offices with an adult who is clearly not their parent or a close relative, (they may be unsure about the correct name of the adult, for example).
- A child saying that they are older than they look and/or dressed in a more 'grown-up' way than seems appropriate.
- Confusion about nationality which might come to light, for example if a child cannot speak fluently the first language of their stated nationality.
- A child who is visibly frightened by the adult he/she is with or by the prospect of returning to where they live.

If you have concerns that a child or young person may be the victim of trafficking, you must alert social services or the police. Try and talk to the young person on their own and ascertain if they are willing to wait in the offices until they can be taken to a place of safety. As in any of the above scenarios, they are likely to be extremely frightened.

In early 2006, the Refugee Council will publish their Human Trafficking Policy and Practice update which gives more information on human trafficking.

6. Conclusion

The area of child protection is a complicated and emotive one. It is very difficult at times to deal with these issues, but we have a responsibility to follow any concerns through. There are often no right and wrong answers. What is important is that you keep the safety and welfare of the child uppermost in your mind at all times, regardless of other factors in the situation you are faced with. If you need any further information on the subject, staff in the Children's Section or the Policy Adviser on unaccompanied refugee children within NDPT may be able to help.

An excellent and updated resource on all aspects of child protection, including definitions, is the Pan-London Child Protection Procedures, which can be accessed on the web-site of the London Child Protection Committee. Please do not print it off unless essential as it is over 296 pages long!

Finally, the contacts within the Refugee Council which may be useful for you are:

Head of Children's Section: 0207 346 1133

Duty for Children's Panel: 0207 346 1134