

Kensington  
Square  
Therapy

**Kensington Square Therapy Ltd**

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# **Safeguarding Policy**

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**Version:** 2.0

**Policy Owner:** Sam McManus (Designated Safeguarding Lead)

**Approved by:** Sam McManus, Director

**Date Approved:** February 2026

**Next Review Date:** February 2027

**Review Cycle:** Annual, or immediately following a significant safeguarding incident or statutory guidance change

## **Controlled Document**

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## 1. Purpose and Policy Statement

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Kensington Square Therapy Ltd (“KST”) is committed to safeguarding and promoting the welfare of all children, young people, and adults at risk who come into contact with its services. KST recognises that safeguarding is everyone’s responsibility and that it has a duty of care to identify, respond to, and where necessary report concerns about the welfare of any individual.

This policy sets out KST’s safeguarding framework across all settings: private practice, school-based provision, group programmes, and online delivery. It defines roles, responsibilities, procedures, and standards expected of all KST personnel.

Child safety is the paramount consideration in all aspects of KST’s work. Where there is a conflict between safeguarding duties and any other obligation (including client confidentiality), safeguarding takes precedence.

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## 2. Scope

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This policy applies to:

- All services delivered by KST, including individual therapy, counselling, group programmes, facilitator-led services, parent consultations, and online provision.
- All settings: the Dyslexia Teaching Centre (DTC), independent schools, and remote/online sessions.
- All KST personnel: the Director, Designated Safeguarding Lead, subcontracted therapists, facilitators, and any other person working on behalf of KST.
- All children and young people (under 18) and adults at risk with whom KST has contact.

Where KST operates within a school, KST personnel must comply with both this policy and the host school’s safeguarding policy. Where the two differ, the stricter standard applies.

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## 3. Definitions

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**Child:** Any person under the age of 18 (Children Act 1989).

**Adult at risk:** A person aged 18 or over who needs care and support, is experiencing or at risk of abuse or neglect, and is unable to protect themselves because of their care and support needs (Care Act 2014).

**Safeguarding:** Protecting from maltreatment; preventing impairment of health or development; ensuring safe and effective care; enabling the best outcomes (Working Together 2023).

**Significant harm:** The threshold for statutory intervention under Section 47 of the Children Act 1989. There is no absolute definition; it may result from a single event or an accumulation of concerns.

**Early help:** Support provided as soon as a problem emerges, before it reaches the threshold for statutory intervention.

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**Designated Safeguarding Lead (DSL):** The named individual with lead responsibility for safeguarding within KST.

**LADO:** Local Authority Designated Officer, responsible for managing allegations against adults who work with children.

**Contextual safeguarding:** An approach recognising that harm may occur outside the family, including in schools, peer groups, online environments, and neighbourhoods.

**Peer-on-peer abuse:** Abuse between children, including bullying, physical abuse, sexual violence, sexual harassment, sexting, and initiation/hazing.

**Gillick competence:** The legal principle that children under 16 who demonstrate sufficient understanding may consent to or refuse treatment independently.

## 4. Legal and Regulatory Framework

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This policy is informed by and operates within the following legal and statutory framework (reviewed February 2026):

- Working Together to Safeguard Children 2023 (HM Government).
- Keeping Children Safe in Education 2024 (DfE) — all parts, with particular regard to Part 1 (all staff), Part 4 (allegations), and Part 5 (safeguarding in schools).
- Children Act 1989 and Children Act 2004.
- Education Act 2002 (Sections 175/157).
- Care Act 2014 (adults at risk).
- Counter-Terrorism and Security Act 2015 (Prevent Duty).
- Online Safety Act 2023.
- Data Protection Act 2018 and UK GDPR.
- Information Sharing: Advice for Practitioners Providing Safeguarding Services (HM Government, 2024).
- Sexual Offences Act 2003 (positions of trust).
- Female Genital Mutilation Act 2003 (mandatory reporting duty).
- Serious Crime Act 2015 (FGM mandatory reporting).
- Modern Slavery Act 2015.
- Domestic Abuse Act 2021.
- Mental Health Act 1983 (as amended).
- Local Safeguarding Partner procedures: Royal Borough of Kensington and Chelsea (RBKC), Hammersmith and Fulham (LBHF), and Westminster (WCC).
- BACP Ethical Framework for the Counselling Professions.
- NCPS Code of Ethics.

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## 5. Roles and Responsibilities

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### 5.1 KST Director

- Ultimate accountability for safeguarding arrangements across all KST settings.
- Ensures adequate resources, training, supervision, and oversight are in place.
- Ensures this policy is reviewed annually and following any significant incident.
- Ensures safer recruitment procedures are applied to all personnel.

### 5.2 Designated Safeguarding Lead (DSL)

|                 |   |
|-----------------|---|
| <b>Name</b>     | Sam McManus   |
| <b>Role</b>     | Director and DSL  |
| <b>Email</b>    | sam@kst.ltd   |
| <b>Phone</b>    | Available to all KST personnel during working hours   |
| <b>Training</b> | DSL training to intercollegiate standards; refreshed every two years; supplemented by regular updates |

The DSL is responsible for:

- Receiving and recording safeguarding concerns from all KST personnel.
- Assessing risk and determining the appropriate response (early help, referral to children's services, police, or LADO).
- Making referrals to local authority children's services and liaising with statutory agencies.
- Liaising with the school DSL where concerns arise in a school setting.
- Maintaining KST's safeguarding records securely and separately from therapy notes.
- Ensuring all KST personnel receive induction and annual safeguarding training.
- Conducting termly reviews of safeguarding records and an annual safeguarding audit.
- Being contactable during working hours. Where unavailable, the Deputy DSL will act.

### 5.3 Deputy DSL

A Deputy DSL will be appointed as KST expands. Until that appointment, in the event that the DSL is unavailable, KST personnel must contact the host school DSL (for school-based concerns) or local authority children's services directly. Personnel must not delay a referral because the DSL is unavailable.

### 5.4 Subcontracted Therapists and Facilitators

- Must read and sign this policy at induction and following each revision.

- Must comply with both KST and host school safeguarding policies (whichever is stricter).
- Must hold a current Enhanced DBS certificate (including barred list check where applicable).
- Must report any safeguarding concern to the DSL immediately and within the same working day at the latest.
- Must not investigate concerns independently or promise confidentiality to a child.
- Must attend induction and annual safeguarding training, Prevent training, and online safety training.
- Must maintain current professional registration, insurance, and CPD evidence.

### **5.5 Host/Partner Schools**

- Therapists must complete the host school's safeguarding induction before commencing work.
- Concerns arising in a school setting are reported to the school's DSL and to KST's DSL, with dual logging.
- Where the school and KST DSLs disagree on the appropriate response, the higher threshold of intervention applies and the concern is escalated to local authority children's services for advice.

## **6. Safer Recruitment and Vetting**

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KST applies safer recruitment practices to all personnel who have contact with children, young people, or adults at risk.

### **6.1 Pre-Engagement Checks**

- Enhanced DBS certificate, including barred list check where the individual is in regulated activity.
- DBS Update Service check (where registered) at each engagement and at least annually thereafter.
- Two professional references, at least one from a recent employer or contracting organisation.
- Identity verification (photographic ID and proof of address).
- Right-to-work in the UK.
- Verification of qualifications and professional body registration (BACP, NCPS, or equivalent).
- Current professional indemnity and public liability insurance.
- Self-declaration of any criminal convictions, cautions, or pending investigations.

### **6.2 Central Register**

KST maintains a secure Central Register (within Google Workspace) recording the DBS certificate number, issue date, barred list check status, Update Service registration, insurance expiry, professional registration, training dates, and next renewal dates for all personnel. The Director reviews the register at least termly.

### **6.3 DBS Renewal**

Where a therapist is not registered with the DBS Update Service, a new Enhanced DBS check is obtained at least every three years. KST strongly encourages all personnel to register with the Update Service.

### **6.4 Induction**

All personnel receive safeguarding induction before any client contact. Induction covers: this Safeguarding Policy, reporting procedures, online safety, lone working, confidentiality boundaries, whistleblowing, Prevent duty, and host-site protocols.

## **7. Recognising Abuse and Harm**

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All KST personnel must be able to recognise the indicators of abuse, neglect, and exploitation and must act upon any concern without delay.

### **7.1 Categories of Abuse**

- Physical abuse: Injuries, bruising, burns, fractures, or other physical harm.
- Emotional abuse: Persistent emotional maltreatment, rejection, humiliation, fear, isolation, or unrealistic expectations.
- Sexual abuse: Involvement in sexual activities the child does not fully comprehend or consent to, including online sexual abuse.
- Neglect: Persistent failure to meet a child's basic physical, emotional, or developmental needs.

### **7.2 Specific Safeguarding Concerns**

KST personnel must also be alert to the following (KCSIE 2024):

- Child sexual exploitation (CSE) and child criminal exploitation (CCE).
- Serious violence and county lines.
- Peer-on-peer abuse, including sexual violence, sexual harassment, bullying, and initiation/hazing.
- Online harms: grooming, sexting (youth-produced sexual imagery), radicalisation, and cyberbullying.
- Domestic abuse and the impact on children living in households where it occurs.
- Female genital mutilation (FGM) — mandatory reporting duty under the Serious Crime Act 2015.
- Forced marriage — a criminal offence under the Anti-social Behaviour, Crime and Policing Act 2014.
- Honour-based abuse.
- Radicalisation and extremism (Prevent duty).
- Private fostering.
- Children missing from education.
- Modern slavery and trafficking.
- Fabricated or induced illness.

### **7.3 Mental Health, Self-Harm, and Suicidal Ideation**

KST recognises that mental health difficulties may be an indicator of underlying abuse or neglect. KST therapists are trained to recognise and respond to disclosures of self-harm and suicidal ideation. Where a child discloses self-harm or suicidal ideation:

1. Assess immediate risk. If there is imminent danger to life, call 999.
2. Inform the DSL immediately.
3. The DSL will assess whether a referral to CAMHS, local authority children's services, or other specialist services is required.
4. Parents will be informed unless doing so would increase risk to the child.
5. A safety plan will be put in place and documented.

KST does not operate as a crisis service. Where a child presents with acute mental health needs beyond the scope of KST's provision, the DSL will ensure appropriate onward referral and will not discharge the child until a safe handover is confirmed.

### **7.4 Contextual Safeguarding**

KST recognises that children may be at risk of harm outside the family, including within schools, peer groups, online environments, and public spaces. KST therapists are alert to contextual indicators and will share relevant information with the DSL and, where appropriate, with the school and local authority.

## **8. Reporting and Escalation**

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### **8.1 Immediate Response**

Any KST person who has a safeguarding concern must:

6. Listen carefully. Do not ask leading questions. Record the child's own words.
7. Do not promise confidentiality. Explain that information may need to be shared to keep them safe.
8. Complete a KST Safeguarding Concern Record (KST-SafeguardingRecord-v1.0-2026) as soon as possible.
9. Report to the DSL immediately and within the same working day.
10. If the DSL is unavailable and the concern is urgent, contact local authority children's services directly or call 999.

### **8.2 In-Centre (DTC) Procedure**

11. Record the concern.
12. Notify the DSL immediately.
13. DSL assesses risk. If there is immediate danger to life, call 999.
14. DSL determines the response: early help, referral to children's services, police, or LADO.
15. DSL records the concern, the decision, and the rationale.

### 8.3 School-Based Procedure

16. Report to the host school's DSL first (unless doing so would cause delay where there is immediate danger).
17. Inform KST's DSL within the same working day.
18. Both school and KST DSLs are involved in determining the response.
19. Where the school DSL and KST DSL disagree, the concern is escalated to local authority children's services for advice. The safety of the child takes precedence over any dispute between professionals.
20. KST maintains its own safeguarding record. KST records are not stored on school systems.

### 8.4 Online/Remote Sessions

21. Assess immediate risk. If urgent, call 999.
22. Record the concern using the KST Safeguarding Concern Record.
23. Report to the DSL immediately. If the child is in a school setting, also inform the school DSL.
24. DSL assesses and refers as required.
25. If the child's location is unknown, take all reasonable steps to establish it. Record all attempts.

### 8.5 Local Authority Referral Contacts

| Local Authority                                 | Children's Services           | LADO                                    |
|---|-------------------------------|---|
| Royal Borough of Kensington and Chelsea (RBKC)  | 020 7361 3013 (referral line) | 020 7361 3013 (ask for LADO)            |
| London Borough of Hammersmith and Fulham (LBHF) | 020 8753 6600                 | LADO@lbhf.gov.uk   020 8753 5125        |
| City of Westminster                             | 020 7641 4000                 | lado@westminster.gov.uk   020 7641 7668 |

Emergency services: 999. NSPCC Helpline: 0808 800 5000. Childline: 0800 1111.

## 9. Allegations Against Staff or Subcontractors

Allegations or concerns about any KST personnel (including the DSL) are handled in accordance with KCSIE 2024 Part 4.

### 9.1 Procedure

26. Report immediately to the KST Director and DSL.
27. The DSL (or Director, if the allegation involves the DSL) contacts the LADO within one working day.
28. If the allegation involves the Director/DSL, any KST person may contact the LADO directly using the contact details in Section 8.5.
29. The individual who is the subject of the allegation will not be informed until the LADO has been consulted and has advised on next steps.
30. Written records are maintained throughout, stored securely and separately.

31. KST will cooperate fully with any LADO, police, or local authority investigation.

Suspension or restriction of duties may be necessary as a neutral act to protect the child. This decision is taken in consultation with the LADO.

## 10. Peer-on-Peer Abuse

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KST recognises that children can abuse other children (KCSIE 2024). This includes sexual violence, sexual harassment, bullying, physical abuse, sexting, and initiation/hazing.

Peer-on-peer abuse is not tolerated and is never dismissed as “banter” or “just part of growing up”. All incidents are reported to the DSL and recorded. The DSL assesses the concern and determines the appropriate response, which may include referral to local authority children’s services, the police, or the school’s pastoral team.

KST therapists working in schools must be alert to group dynamics and peer interactions and must report concerns about peer-on-peer harm to both the school DSL and KST DSL.

## 11. Online Safeguarding

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- Only KST-approved, encrypted video platforms are used for online sessions.
- Sessions are not recorded without explicit written consent.
- Both parties must be in a private, appropriate environment.
- For children under 16, a parent or appropriate adult must be present in the household (though not in the room) unless a documented risk assessment supports a different arrangement.
- Professional email accounts only. No social media contact with clients.
- KST personnel must not share personal contact details with clients.
- KST personnel follow the Prevent duty and Online Safety Act 2023 guidance.

## 12. Safeguarding in Group Programmes

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Group programmes (including the 11+ Wellbeing Support Groups and other facilitator-led sessions) require additional safeguarding measures:

- Attendance register maintained for every session.
- Group risk assessment completed before the programme commences and reviewed at each session.
- Facilitators briefed on group boundaries, confidentiality limitations, and safeguarding procedures.
- DSL contact details available to facilitators during all sessions.
- Peer-on-peer behaviour monitored throughout. Any concern reported immediately.

- Parent information provided before the programme, including confidentiality limitations within a group setting.
- Medical emergency protocol in place (Section 14).

### **13. Information Sharing and Confidentiality**

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Safeguarding overrides confidentiality where the safety of a child or adult at risk is at stake. This principle is communicated to all clients, parents, and schools at the point of engagement through the Consent Form.

- Share only what is necessary, proportionate, and relevant.
- Record what was shared, with whom, when, why, and under what lawful basis (UK GDPR: legal obligation, vital interests, or legitimate interests).
- Use secure systems (Google Workspace, Kiku) for all safeguarding records.
- Inform parents of safeguarding referrals unless doing so would increase risk to the child or compromise a criminal investigation.
- KST's safeguarding records are stored separately from therapy notes and are not shared with schools except where necessary for the child's safety.

### **14. Medical Emergencies**

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If a child or young person requires urgent medical attention during a KST session:

32. Call 999 immediately.
33. Administer first aid if trained and safe to do so.
34. Contact the parent or emergency contact.
35. In a school setting, inform the school office and school DSL.
36. Inform the KST DSL.
37. Complete a safeguarding record. Record the incident, actions taken, and outcome.

### **15. Lone Working and Off-Site Safety**

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- Risk assessment conducted for each location before work commences.
- Check-in/check-out system with KST base or DSL for all off-site work.
- Charged mobile phone carried at all times. Emergency exits identified.
- If a therapist feels unsafe, the session is terminated immediately. 999 called if necessary. DSL informed.
- Lone working arrangements reviewed annually and following any incident.

### **16. Equality, Diversity, and Vulnerability**

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KST upholds the Equality Act 2010 and recognises that certain children face additional barriers to disclosure and may be at heightened risk of abuse or neglect. These include (but are not limited to): children with SEND, children with English as an additional language (EAL), LGBTQ+ children and young people,

young carers, looked-after children, children experiencing domestic abuse, and children from marginalised communities.

KST therapists must consider these factors when assessing risk and must adapt their practice to ensure inclusive, non-discriminatory, and culturally sensitive service delivery.

## 17. Whistleblowing

KST personnel can raise concerns about malpractice, safeguarding failures, or poor practice without fear of reprisal. Concerns may be raised with:

- The DSL (Sam McManus) at sam@kst.ltd.
- If the concern involves the DSL: the LADO directly (see Section 8.5).
- External routes: NSPCC Whistleblowing Helpline (0800 028 0285), Ofsted, or the relevant professional body (BACP, NCPS).

KST will not tolerate retaliation against any person who raises a safeguarding concern in good faith.

## 18. Data Protection Considerations

Safeguarding records contain special category personal data (health, ethnicity, and data relating to children). Processing is carried out under:

- Article 6(1)(c) UK GDPR (legal obligation) and Article 6(1)(d) (vital interests).
- Article 9(2)(b) (social protection) and Schedule 1, Part 1, Paragraph 18 DPA 2018 (safeguarding of children and individuals at risk).

Safeguarding records are stored securely in Google Workspace with access restricted to the DSL. They are retained for a minimum of 25 years from the child's date of birth, or until the child reaches age 25, whichever is longer. A record of destruction (date, method, authorised person) is maintained.

For full details, see the KST Privacy Policy and Data Protection Policy.

## 19. Risk Management

| Risk  | Mitigation   | Likelihood | Impact |
|---|--|------------|--------|
| Safeguarding concern not reported by therapist        | Mandatory reporting duty in policy; induction; annual training; supervision                      | Low        | High   |
| DSL unavailable when concern arises                   | Deputy DSL appointment planned; therapists trained to contact LA directly; school DSL as interim | Medium     | High   |
| Allegation against DSL with no independent escalation | LADO contact details provided to all personnel; direct reporting route documented                | Low        | High   |
| Peer-on-peer abuse not identified in group setting    | Group risk assessment; facilitator training; behaviour monitoring; attendance register           | Low        | High   |

| Risk  | Mitigation   | Likelihood | Impact |
|---|--|------------|--------|
| DBS or insurance lapse not detected                   | Central Register reviewed termly; automated renewal alerts; Update Service encouraged        | Low        | High   |
| Online session disclosure with unknown child location | Location verification at session start; protocol for unknown location documented             | Low        | High   |
| School DSL and KST DSL disagree on response           | Escalation to LA for advice documented in Section 8.3  | Low        | Medium |
| Safeguarding records stored insecurely                | Google Workspace access controls; records stored separately from therapy notes; annual audit | Low        | High   |

## 20. Record Keeping

- **Safeguarding Concern Records:** Completed using KST-SafeguardingRecord-v1.0-2026 for every concern, disclosure, or incident. Stored securely in Google Workspace, separately from therapy notes.
- **Central Register:** DBS, insurance, training, and renewal dates for all personnel.
- **Training Log:** Induction, annual refresher, Prevent, and online safety training for all personnel.
- **Referral Log:** Record of all referrals to local authority children's services, LADO, and police.
- **Body Maps:** Used to record visible injuries. Stored with the relevant safeguarding record.

Retention: Safeguarding records are retained for a minimum of 25 years from the child's date of birth, or until the individual reaches age 25, whichever is longer.

## 21. Training Requirements

| Personnel                       | Training Required  | Frequency   |
|---------------------------------|--|---|
| DSL (Sam McManus)               | DSL training to intercollegiate standards; Prevent; online safety; KCSIE updates           | Every two years (DSL training); annual (updates)  |
| Subcontracted Therapists        | Safeguarding induction; annual refresher; Prevent; online safety; KST reporting procedures | Induction before client contact; annual refresher |
| Facilitators (Group Programmes) | Safeguarding induction; group-specific risk; behaviour management; reporting procedures    | Before each programme cycle                       |

All training completion is recorded in the KST Training Log.

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## 22. Monitoring and Audit

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- **Termly safeguarding review:** DSL reviews all safeguarding records, referral outcomes, and training compliance.
- **Annual safeguarding audit:** Comprehensive audit of policy compliance, record quality, training, Central Register, and referral outcomes. Findings reported in the KST Governance Report.
- **Supervision:** Safeguarding is a standing agenda item in clinical supervision for all therapists.
- **School reporting:** Where required by the school service agreement, anonymised safeguarding summaries are included in termly governance reports.
- **Policy review:** This policy is reviewed annually and immediately following any significant incident, LADO referral, or statutory guidance change.

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## 23. Review Cycle

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This policy will be reviewed annually or sooner if:

- Statutory guidance changes (KCSIE, Working Together, or local procedures).
- A significant safeguarding incident occurs.
- A LADO referral identifies procedural weaknesses.
- The annual safeguarding audit identifies areas for improvement.
- KST introduces new service settings, client groups, or personnel.
- A school partner or insurer requires amendment.

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## 24. Insurance and Liability

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KST holds organisational professional indemnity (£5,000,000) and public liability (£10,000,000) insurance through Hiscox Underwriting Ltd (Policy OXY8749916). All subcontracted therapists must hold their own valid professional indemnity and public liability insurance. Non-compliance may result in immediate suspension or termination of the subcontractor agreement.

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## 25. Related Policies

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- KST Privacy Policy (v2.0-2026)
- KST Data Protection Policy (v1.0-2025)
- KST Cookie Policy (v1.0-2026)
- KST Complaints Procedure (v1.0-2026)
- KST Consent Form (v1.0-2026)
- KST Confidentiality Policy
- KST Data Breach Response Plan (v1.0-2026)
- KST Safeguarding Concern Record (v1.0-2026)
- KST Terms of Use (v1.0-2026)

## 26. Governance Maturity Assessment

|                                      |   |
|--------------------------------------|---|
| <b>Current Maturity Level</b>        | Level 3 – Robust and Defensible   |
| <b>Target Maturity Level</b>         | Level 4 – Audit Ready   |
| <b>Actions to Reach Target</b>       | Appoint Deputy DSL; implement termly safeguarding audit with documented findings; conduct tabletop safeguarding exercise; integrate Central Register automated alerts; formalise school DSL disagreement escalation log |
| <b>12-Month Strengthening Target</b> | Achieve Level 4 through Deputy DSL appointment, documented termly audits, tabletop exercise, and automated Central Register alerts  |

## 27. Version Control

| Version | Author      | Approved By | Date Issued   | Review Date   | Summary of Changes  |
|---------|-------------|-------------|---------------|---------------|---|
| 1.0     | Sam McManus | Sam McManus | October 2025  | October 2026  | Initial release   |
| 2.0     | Sam McManus | Sam McManus | February 2026 | February 2027 | Major revision: restructured to numbered governance format; RBKC referral contacts added; peer-on-peer abuse section added; contextual safeguarding defined; mental health and self-harm protocol added; FGM mandatory reporting duty added; forced marriage addressed; medical emergency protocol added; school DSL disagreement escalation procedure added; risk register added; training table added; governance maturity assessment added |

### End of Policy

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