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| **KPC Youth & Community Logo 2014** |
| **SAFEGUARDING CHILDREN** |
| **POLICY & PROCEDURES** |
| **INDEX** |
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| |  |  | | --- | --- | | **1** | **Introduction** | | **2** | **What is Child Abuse** | | **3** | **Child Protection** | | **4** | **Recognising Child Abuse** | | **5** | **How KPC helps to prevent Child Abuse** | | **6** | **Abuse of Trust – Code of Conduct** | | **7** | **The New Framework for Assessment** | | **8** | **Useful Contacts** | |

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| |  |  |  | | --- | --- | --- | | Author: A. Mawby |  | Date: Nov 2018  Review: Nov 2019 | | Title: Safeguarding Children | | Version: 0.5 |   Registered Office: Off Pyle Inn Way, Pyle, Bridgend, Mid Glamorgan CF33 6AB  Tel: 01656 745399 or Tel/Fax: 01656 749219  Charity Company No: 1123339 Company No: 6247822  Email: kpcyouth@hotmail.com |

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| **SAFEGUARDING CHILDREN**  **POLICY AND PROCEDURES** |

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| 1 | All Trustees, staff and volunteers at KPC will aim to ensure a warm, secure and safe environment. KPC acknowledges that children are amongst the most vulnerable group in society. They have no rights to vote or formal avenues to exercise power. Therefore, adults in positions of responsibility and authority have a duty to ensure that the rights of children and young people are represented and protected. Staff and volunteers therefore have a duty to recognise and report any suspected abuse or neglect to the appropriate bodies.  This policy reflects:   * The UN Convention of the rights of the Child 1989 (ratified 1991) * The Children Act 1989 & 2004 * Safeguarding Vulnerable Groups Act 2006 * Safeguarding Children: Working Together under the Children Act 2004 * All Wales Child Protection Procedures 2008 * Social Services & Wellbeing Act 2014 |  |
| 2 | **What is Child Abuse?**  An abused child is a person under the age of 18 years who is suffering significant harm or ill treatment which results in the significant impairment of physical or mental health or of physical, intellectual, emotional, social or behavioural development.  The Children Act 1989 refers to **significant harm**, as:  “… The threshold that justifies compulsory intervention in family life in order to protect children. It is defined in the legislation as ill treatment or the impairment of health & development”  A child in need of protection is a child who is suffering from or is likely to suffer significant harm. Case law defineslikely as meaning:  “A real possibility of abuse, this being supported by factual evidence.  This could include a child not yet born who may be at risk of future harm.  A child at risk is:   * Experiencing or is at risk of abuse, neglect or other kinds of harm and * Has needs for care & support (whether or not the local authority is meeting any of those needs) – Social Services & Wellbeing Act 2014 |  |
| 3 | **Child Protection**  Child protection is a part of safeguarding and promoting welfare. It refers to what activity is done to protect specific children who are suffering or are at risk of suffering significant harm as a result of abuse or neglect.  **Main Categories of Child Abuse:**  Significant key words in the types of child abuse are ‘persistent’ and ‘severe’. It is these two words that are essential when identifying child abuse.   * **Neglect –** The persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs. * **Physical Abuse –** May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation may be described as fabricated or induced illness by carer. * **Sexual Abuse –** Involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or in watching sexual activities, or encouraging children to behave in sexually inappropriate ways. * **Emotional Abuse –** The persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to a child that they are worthless, or unloved, inadequate or valued in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of ill treatment of a child, although it may occur alone.   **Sexual Offences Act 2003**   * States that a child under 13 does not, under any circumstances, have the legal capacity to consent to any form of sexual activity (Legal Guidance) |  |
| 4 | **Recognising Child Abuse:**  It is very important that any member of staff, member or volunteer with the organization should be alert to the possible indicators of abuse. Anyone who knows or is concerned about or suspects that a child is being harmed or at risk from being harmed **must** pass on those concerns.  **What Signs to Look for:**   * Frequent or repeated injuries * Repeated attendance at clinic or hospital, or frequent hospital admissions * Delay in seeking medical advice and treatment even when obviously necessary * Conflicting accounts and explanations of how an injury has occurred given by the child and carers * Very low self-esteem * Fearful or withdrawn behaviour * An adult who has unrealistic expectations of a child * Failure to thrive and meet developmental milestones * Inappropriate sexual knowledge in relation to age   If you have any concerns about the health or welfare of any child you come into contact with you must pass on the information to either the Project Development Manager, Senior or Dep Senior Youth Worker. Karen has been nominated as our Child Protection Specialist – so if you have any concerns, please discuss with Karen in the first instance or Alison if Karen is not available.  **What to do if a Disclosure is made:**  If someone tells you that they or another young person is being abused, KPC staff and volunteers will:   * Listen and let them know you are taking them seriously; * Use the T.E.D.s. framework – **T**ell me ….. **E**xplain to me … **D**escribe to me … * Encourage the child to talk but don’t prompt them or ask too many questions; and don’t put words into their mouths * Explain what you have to do next; * Don’t promise confidentiality – you have a legal responsibility to disclose information to those who need to know in order to safeguard a child or children in the public interest; * Children are entitled to the same duty of confidence as adults, provided that for under 16s, they can understand their choices and the possible consequences relating to any treatment; * Confidentiality may be over-ridden in cases where it is considered that a child may be in danger or that a crime is being or has been committed; * Remember that any information you share may be used for evidence in a court of law; * Write down what has been said using the exact words if possible; * Make a note of the date, time and place and who was present; * Report your concerns to either the Senior Youth Worker or Project Manager immediately; * Don’t dismiss your concerns; * Do not confront the alleged abuser;   **If The Behaviour of a Colleague Towards Children or Young People Causes You Concern:**   * Do not dismiss your concerns; * Do not confront the person about who you have concerns; * If you are concerned about the conduct of a colleague in your workplace, you should firstly discuss your concerns with the project manager, senior or deputy senior youth worker and agree what action is to be taken next. If you feel uncomfortable about doing this, or are not satisfied with the response that you get, contact the Social Services Child Protection Coordinator or police. Do not delay in passing on your concerns to someone in a position to take them forward and ensure a proper investigation takes place; * Do not worry that you may be mistaken, it is better to have discussed it with somebody with the experience and responsibility to make an assessment; * Remember to document all information and any action taken accurately.   If you want to discuss any concerns with an experienced person in Child Protection issues, contact: Safeguarding and Family Support Team – 01656 642333 (Email: [mashcentra@bridgend.gov.uk](mailto:mashcentra@bridgend.gov.uk) or The Children Commissioner for Wales Office on: 01792 765600  or e-mail: advice@childcomwales.org.uk    **Action to be taken by the senior/deputy senior youth worker or project manager (or youth worker in emergency cases, when none of these are available):**   * Complete a copy of the Request for Help Referral Assessment Form (Annex C * ) with as much detail as you have * Do you need to take any further action on this? Are the issues resolved or not? If resolved, keep a copy of the notes on a file for the individual(s) concerned * If you are still unable to resolve the issue in partnership/or consultation with other agencies and you consider the matter to be a child protection issue, then you will need to obtain the child’s:   signed consent (annex B); or  verbal consent before contacting the Duty Officer of Social Services with your concerns   * This phone call must be backed up by sending them a copy of a completed Pre Referral Assessment Form Proforma (Annex A) , signed Consent Form (Annex B) and the Inter-Agency Referral Form (Annexes C) – complete with as much detail as you can – if you don’t know the answers to some of the questions, leave them blank   ***However, if you feel at any stage that the young person is in imminent danger phone 999 – responsibility lies with the person who has the info!***  **What Happens Next ….?**  A referral doesn’t end with filling in the form and posting it. If you have not had a reply phone or write and ask for one. You are just as responsible if anything goes wrong.  You should be notified of the progress of the referral within 10 working days of its receipt, but which time social services should have completed an initial assessment. |  |
| 5 | **How KPC helps to prevent Child Abuse:**  In order to avoid the occurrence of child abuse KPC Youth will:   * Arrange police disclosure checks (DBS) for all staff, trustees and volunteers who will have direct access to young people – Enhanced if working on a one-to-one basis * All staff & volunteer positions subject to satisfactory references * Ensure probationary period for all workers * Each member of staff and volunteers will have a copy of this policy * Supervision will be carried out for staff and volunteers six-weekly * Provide, where possible, child protection procedures training * Parental consent for video/photographic materials * Parental consent for trips/some activities * Has policies on Internet Usage, Equality & Diversity, Lone Working, Confidentiality * Ensures staff undertake Child Protection Training on a regular basis (at least every 3 years) * Follow our policy on Sexual Health & Condom Distribution (taken from BCBC’s guidance) to ensure we meet legislation |  |
| 6 | **Abuse of Trust – Code of Conduct**  All staff and volunteers working with young people must be aware that they are in a position of trust and be aware of the responsibilities that this brings with it. KPC Youth’s Code of Conduct is two-fold:   * We wish to protect young people who attend our Centre from sexual activity from those looking after them within a relationship of trust * We wish to protect those staff and volunteers who are in a position of trust by preventing them from entering into such a relationship either deliberately or accidentally   Abuse of trust may arise where someone has responsibility for the care of a young person and where this may give them power or influence over the young person. Any sexual relationship within a relationship of trust is unacceptable and classed as abuse of trust– this could be considered as any act which a reasonable observer may consider unacceptable.  If any member of staff or volunteer has any concerns about the behaviour of other staff/volunteers, they must raise their concerns to their Line Manager or the Trustees, without prejudice to their own position. In addition, if an individual staff member or volunteer is concerned that they are developing a relationship, which could represent an abuse of trust, they must bring this to the attention of either their  Line Manager or the Trustees.  Staff/volunteers should not give their personal mobile numbers to young people.  **Abuse of position of trust is an offence, and should always be taken very seriously, with dismissal as a possible sanction.** KPC wishes to ensure a culture of openness within our organisation and we aim to ensure that our members know they have the right to say ‘no’, and know that sexual relationships with staff or volunteers are not allowed, and neither should they be subjected to inappropriate behaviour. Notices are displayed in both male & female toilets, advising members who they can contact if they wish to discuss any concerns, or receive any advice in confidence. |  |
| 7 | **The New Framework for Assessment** The Framework for Assessment for Children in Need was developed to ensure a consistent, systematic way and multi-agency way of assessing children and their families. The Assessment Triangle which focusses on:   * The Development needs of children * The capacities of parents of guardians to respond appropriately to those needs * The impact of wider family and environmental factors on parenting capacity and children   It may be that it is not you that is reporting the concerns, but under the new inter-agency framework, KPC may be contacted by Social Services  to help complete information on how often a child attends the Centre, their personality, social skills etc. This may assist in the overall assessment and may or may not be positive information. Before disclosing any information, you should obtain the child’s written Consent (Annex B).  Annexes:   1. Pre-Referral Assessment Form 2. Consent Form 3. Inter-Agency Referral Form |  |
| 8 | **Useful Contacts**: (as at Nov 18)   |  |  |  | | --- | --- | --- | | **CONTACT** | **NAME** | **TEL NO** | | **Social Services:** |  |  | | Child Protection Coordinator | Elizabeth Walton James | 01656 642073 | | Duty Social Worker |  | 01656 642320 | | Emergency Duty Team (correct 21.3.18) |  | 01443 743665 | | After Hours |  | 01443 204010 | | **Police:** |  |  | | CPPU |  | 01792 450658  01656 651660 | | Family Support Unit |  | 01443 743743 | | Divisional Police |  | 01656 655555 | | **NSPCC:** |  |  | | National Helpline |  | 0800 800500 | | **Health:** |  |  | | Pediatrician | Dr M Obaid | 01656 754107 | | Clinical Nurse Specialist Child Prot. | Jo Jones | 01656 753873 | | **Education:** |  |  | | Child ProtectionCo-ordinator | Samantha Jones/Natalie Tanner | 01656 815270/  01656 815272 | |  |