



Bittern Meadow CIC



Safeguarding Children Policy Working with Children and Young People under Eighteen

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Introduction

This policy aims to ensure that all staff members and volunteers of Bittern Meadow CIC are aware of their responsibilities in relation to child protection in order to help protect children from harm and to protect members of staff from any allegations made by a child, young person or another adult.

Throughout this document the terms children and young people are used to refer to anyone under 18 years old, the term parent is used as a generic term to represent parents, guardians and carers, and the terms staff and volunteers are used to refer to members of staff, volunteers or anyone else who is representing Bittern Meadow CIC.

Bittern Meadow CIC is committed to the protection of children and young people from maltreatment including the 4 types of abuse; Physical abuse, Emotional abuse, Sexual abuse and Neglect, as well as protection from violence, bullying, and discrimination. All Bittern Meadow CIC staff will, through appropriate training, have an awareness and understanding of what makes a stable and caring environment for children and young people and be equipped with knowledge of procedure should risks to a child or young person be recognised.

The guidance and procedures in this policy relate to all staff and volunteers working for The Bittern Meadow CIC.

Anybody who believes that a child or young person is **suffering or at risk of suffering significant harm** should always refer their concerns to the local authority social services department, police or NSPCC¹.

¹ Sect.47 of The Children Act 1989 (www.opsi.gov.uk/acts)

Bittern Meadow CIC has both a legal and moral obligation to ensure a duty of care. Every young person who comes into contact with Bittern Meadow CIC should be able to participate in an enjoyable and safe environment and be protected from any forms of abuse.

Guidance

Defining Child Abuse

A term to describe a range of ways in which people, usually adults, harm children. Often the adult is a person who is known and trusted by the child. Child abuse is neglect, physical injury, sexual abuse or emotional abuse inflicted or knowingly not prevented, which causes significant harm or death².

Child Physical Injury: Actual or likely physical injury to a child, or failure to prevent physical injury (or suffering) to a child, including deliberate poisoning, suffocation and Munchausen's syndrome by proxy.

This includes hitting, shaking, kicking, punching, scalding, suffocating and other ways of inflicting pain or injury to a child. It also includes giving a child harmful substances, such as drugs, alcohol or poison. If a parent or carer reports non-existent symptoms of illness in a child, or deliberately causes illness in a child, this is also a form of physical abuse.

Child Emotional Abuse: Actual or likely severe adverse effect on the emotional and behavioural development of a child caused by a persistent or severe emotional maltreatment, or rejection.

This includes a large component of verbal abuse, as well as almost always accompanying any other form of abuse. Emotional abuse is when a parent or carer behaves in a way that is likely to seriously affect their child's emotional development. It can range from constant rejection and denial of affection, through to continual severe criticism, deliberate humiliation and other ways of verbally "terrorising" a child.

Child Sexual Abuse: Actual or likely sexual exploitation of a child or adolescent. The child may be dependent and/or developmentally immature.

This is when a child or young person is pressurised, forced or tricked into taking part in any kind of sexual activity with an adult or young person. This can include kissing, touching the young person's genitals or breasts, intercourse or oral sex. Encouraging a child to look at pornographic magazines, videos or sexual acts is also sexual abuse.

Child Neglect: Persistent or severe neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold and starvation, or extreme failure to carry out important aspects of care, resulting in the significant impairment of the child's health or development, including non-organic failure to thrive.

This is the persistent lack of appropriate care of children, including love, stimulation, safety, nourishment, warmth, education and medical attention. It can have a serious effect on a child's physical, mental and emotional development. For babies and very young children, it can be life-threatening³.

² NSPCC (www.nspcc.org.uk)

³ NSPCC (www.nspcc.org.uk)

Signs and Indications

Children who are being abused may show a number of physical and emotional changes. But remember that these signs do not always mean that a child is being abused - there may be other explanations.

<p>Indications that Neglect might be occurring.</p>	<p>Indications that Emotional abuse might be occurring.</p>
<ul style="list-style-type: none"> • Constant hunger, sometimes stealing food from others • Constantly dirty or 'smelly' • Loss of weight or being consistently underweight • Inappropriate dress for the conditions • Tired all of the time • Not requesting medical assistance • Having few friends • Mentioning their being left alone or unsupervised. 	<ul style="list-style-type: none"> • Failure to thrive or grow • Sudden speech disorders • Developmental delay • Neurotic behaviour e.g. Rocking • Being unable to play • Fear of making mistakes • Self harm • Fear of parent being approached regarding their behaviour
<p>Indications that Sexual Abuse might be occurring.</p>	<p>Indications that Physical Abuse might be occurring.</p>
<ul style="list-style-type: none"> • Pain/itching/bruising/bleeding in the genital/anal areas • Genital discharge/urinary tract infections • Stomach pains/discomfort walking or sitting • Sexually transmitted infections. • A marked change in the child's general behaviour. For example, they may become unusually quiet and withdrawn, or unusually aggressive. • They may start suffering from what may seem to be physical ailments, but which can't be explained medically. • The child may refuse to attend school or start to have difficulty concentrating so that their schoolwork is affected. • They may show unexpected fear/distrust of a particular adult or refuse to continue with their usual social activities. • They may start using sexually explicit behaviour/language, particularly if the behaviour/language is not appropriate for their age. • The child may describe receiving special attention from a particular adult, or refer to a new, "secret" friendship with an adult or young person. 	<ul style="list-style-type: none"> • Unexplainable Injuries • Untreated or inadequately treated injuries • Injuries to parts of the body where accidents are unlikely, such as thighs, back, abdomen • Bruising which looks like hand or finger marks • Cigarette burns • human bites • Scalds and burns • Becoming sad, withdrawn or depressed • Having trouble sleeping • Behaving aggressively or being disruptive • Showing fear of certain adults • Having a lack of confidence and low self-esteem • Using drugs or alcohol

Recognising Child Abuse

Recognising the signs of child abuse is not straightforward and it is **not** the responsibility of Bittern Meadow CIC staff to identify whether abuse has or has not taken place. However, it **is** the responsibility of all Bittern Meadow CIC staff to act if they have a concern.

There are a number of ways in which abuse becomes apparent:

1. A child discloses abuse
2. Someone else discloses that a child has told him/her or that he/she strongly believes a child has been or is being abused
3. A child may show signs of physical injury for which there appears to be no satisfactory explanation
4. A child's behaviour may indicate that it is likely that he/she is being abused
5. A member of staff's behaviour or the way in which he/ she relates to a child causes concern

Standard Procedure

Members of Staff are advised that even if they are in doubt that it is better to mention their concern than to keep silent.

The following procedure should be followed when a concern regarding child abuse is recognised.

1. **Recognise**
2. **Consult**
3. **Record**
4. **Refer**

1. **Recognise** a concern

It is important that all concerns are recognised including suspicions regarding a situation involving a child or young person. In these situations it may be necessary to break confidentiality. This should be done with reference to Bittern Meadow CIC Confidentiality Policy.

2. **Consult** with another worker/line manager. All concerns should be reported to the designated Child Protection Officer and if a referral is believed to be necessary the concern should be reported to the Directors prior to the referral taking place where reasonably possible.

3. **Record** the details and proposed actions

Record the information given or the event in as much detail as possible, making sure to use the child's own words and keep this paperwork confidential.

4. **Refer** to Children's Services

If a referral is required the Designated Child Protection Officer must be consulted. If the Designated Child Protection Officer is unavailable, the worker should consult with their Line Manager or other co-worker before making the referral and inform the Designated Child Protection Officer as soon as possible.

In an emergency dial 999.

7-Step Procedure for Dealing with Disclosure

If a child or young person is the victim of a form of abuse they may feel that they need to talk to a member of staff thus 'disclosing' personal information to them. The following specific procedure is outlined below.

1. CONFIDENTIALITY

Make sure that you have explained Bittern Meadow CIC's Confidentiality Policy. Any disclosure should take place after Bittern Meadow CIC's Child Protection policy and particularly the limits of confidentiality have been appropriately explained to them.

2. LISTEN

Listen to and believe what the child or young person tells you. Show respect for them and do not underestimate the significance of their feelings or words. Remain calm and avoid expressions of shock or surprise. Avoid asking leading questions. **It is important you do not investigate, but simply listen and allow them to tell you as much as they want;** give open responses such as 'what happened?' and 'how did you feel?' Reflect back and paraphrase what they tell you, allowing them to set the pace of the conversation. End the conversation when the young person wishes.

3. EXPLAIN

Explain that whatever the circumstances **they are not to blame** and that what they have told you **cannot be kept a secret** but that you will have to tell someone else. Explain to the child or young person what you are going to do next and who you will share their information with.

4. REASSURE

Reassure the child or young person that they were right to tell someone.

5. RECORD

As much information as possible should be written down either during or after the disclosure in a factual manner. This may form part of a report so should be kept in a safe and confidential place until further reference.

These recordings should include:

- The date and time of disclosure
- Name and age of the child or young person disclosing
- Content of conversation (using the exact words as much as possible)
- Next course of action
- Your signature and date of recording

6. DISCUSS

Talk to your the Designated Child Protection Officer or the Directors as soon as possible. If you are concerned that it is an urgent situation, then call the Designated Child Protection Officer.

7. REFER

After discussing with the Designated Child Protection Officer, or the Directors it may be necessary for you to contact Children's Services for a consultation and to make a referral if advised to do so.

In an emergency always call the police on 999 (it may be necessary to do this without prior consultation with the Designated Child Protection Officer or Directors. If this is the case, you should make them aware as soon as possible).

Safe Staff

All adults who come into contact with our children have a duty of care to safeguard and promote their welfare. There is a legal duty placed upon us to ensure that all adults who work with or on behalf of our children are competent, confident and safe to do so.

Bittern Meadow CIC aims to provide a safe and supportive environment which secures the well being and very best outcomes for our children. We do recognise that sometimes the behaviour of adults may lead to an allegation of abuse being made.

Allegations sometimes arise from a differing understanding of the same event, but when they occur they are distressing and difficult for all concerned. We also recognise that many allegations are genuine and there are some adults who deliberately seek to harm or abuse children.

Bittern Meadow CIC will take all possible steps to safeguard our children and to ensure that the adults in our organisation are safe to work with our children. We will always ensure that the Norfolk Safeguarding Children's Board protocol Allegations Against Staff, Carers and Volunteers is adhered to.

All adults who come into contact with children will be made aware of the steps that will be taken if an allegation is made. We will seek appropriate advice from the Local Authority Designated Officer (LADO). The LADO can be contacted on 01603 223473.

Staff will not investigate these matters. We will seek and work with the advice that is provided. Should an allegation be made against the Designated Child Protection Officer or Deputy, this will be reported by the staff member or volunteer raising the concern who will liaise with the LADO.

There are sensible steps that every adult should take in their daily professional conduct with children. This can be found in the Safer Programme Safer Working Practice – this guidance is on the NSCB website and also in this pack.

Good Practice

Because of the concerns of the problem of child abuse it is important that staff members develop guidelines and boundaries in accordance with all Bittern Meadow CIC policies for self protection and to avoid false allegations being made against them. This can be discussed in line management supervision sessions.

The following is a list of recommended guidelines:

1. Be Proactive – if at all possible try to ensure that no staff member or volunteer is alone with individual children or young people, unless specifically required to work in a one to one situation.
2. In the event of any injury to a child or young person, accidental or otherwise, ensure that it is recorded properly and appropriately, whether this is in an accident book, notes or session evaluation sheet.
3. Keep written records of any allegations a child or young person makes against you. Including every accusation from 'you hit me' to 'you are always picking on me'. Inform another member of the team that you are working with if you feel a child or young person has a particular dislike of you.
4. Get another member or staff or volunteer to witness the allegation; failing this, another adult.

5. If a child or young person touches you inappropriately record what happened immediately, inform another member of the team you are working with and inform your line manager as soon as possible.
6. Never do something of a personal nature for children or young people that they are capable of doing themselves.
7. Do not go into a toilet alone with a child or young person. Always tell another member of staff where you are going and why.
8. Be careful about how and where you touch a child or young person.
9. Be aware of age appropriate behaviour and reinforce it with young people.
10. Staff members and volunteers should be aware of each other's approaches to children and young people and point out any behaviour or activity that could be misunderstood.

Six Key Points on Information Sharing

- You should explain to children, young people and families at the outset, openly and honestly, what and how information will, or could be shared and why, and seek their agreement. The exception to this is where to do so would put that child, young person or others at increased risk of significant harm or an adult at risk of serious harm, or if it would undermine the prevention, detection or prosecution of a serious crime including where seeking consent might lead to interference with any potential investigation.
- You must always consider the safety and welfare of a child or young person when making decisions on whether to share information about them. Where there is concern that the child may be suffering or is at risk of suffering significant harm, the child's safety and welfare must be the overriding consideration.
- You should, where possible, respect the wishes of children, young people or families who do not consent to share confidential information. You may still share information if in your judgment, on the facts of the case, there is sufficient need in the public interest to override that lack of consent.
- You should seek advice where you are in doubt, especially where your doubt relates to a concern about possible significant harm to a child or serious harm to others.
- You should ensure that the information you share is accurate and up-to-date, necessary for the purpose for which you are sharing it, shared only with those people who need to see it, and shared securely.
- You should always record the reasons for your decision – whether it is to share information or not.

Training and Supervision

Every new member of staff or volunteer will have an induction period that will include essential safeguarding procedures, they will be told who the Designated Child Protection Officer is and what the recording and reporting system is.

All Bittern Meadow CIC staff and volunteers are required to attend safeguarding training relevant to their role as soon as possible after their induction. In addition, members of staff and volunteers are to attend safeguarding training at least every three years.

Safeguarding is to be included as a permanent item in supervision for all client facing members of staff. Managers should ensure that any safeguarding issues identified in supervision are recorded appropriately and followed up as soon as possible.

Norfolk Contacts for Child Protection Issues

For Concerns:

Norfolk County Council Children's Services

Customer Service Centre – 24 Hours:

0344 800 8014

IN AN EMERGENCY DIAL 999

Norfolk Safeguarding Children Board (NSCB) and Training:

NSCB Policies and Procedures

www.lscb.norfolk.gov.uk

If you have specific concerns about the safety of a child or young person, please follow the link on the Home Page of the NSCB website or call Norfolk County Council Children's Services on 0344 800 8014

Named Designated Child Protection Officer

For year August 2014-August 2015_ the following designated staff are in post;

DESIGNATED OFFICER - Melanie Wheeler

DEPUTY DESIGNATED OFFICER - Paul Wheeler

Policy Review

This policy will be reviewed on __30th August 2015__.

Safeguarding Children Procedural Flow Chart

