



SAFEGUARDING CHILDREN POLICY

1.0 Definitions

- 1.1. In accordance with the Children Act 1989 and 2004, a child is any person who has not yet reached their 18th birthday. For the purpose of these procedures the reference to children therefore means 'children and young people' throughout.

2.0 Policy Statement

- 2.1 TalkFIRST is committed to protecting the welfare of all children as they participate in TalkFIRST services and/or activities. TalkFIRST understands its responsibility to comply with legislation, particularly to ensure that the welfare of children and young people is paramount, and will constantly monitor developments in this field. However, TalkFIRST recognises that the best protection for children participating in our programmes is the vigilance and forethought of staff and volunteers in preventing circumstances where abuse of trust could occur. To that end, TalkFIRST will strive to create a safe and secure environment where service users, volunteers and staff can work together confidently in mutual respect.

TalkFIRST also recognise its responsibility to take appropriate action when a child discloses that they are experiencing abuse or neglect, or if staff / volunteers have a concern about the welfare of a child, and to ensure staff / volunteers have an understanding of what might indicate this and what action to take.

- 2.2 These procedures reflect and are compliant with Working Together to Safeguard Children 2010 and the following: the Education Act 2002, Every Child Matters: Change for Children Agenda, the Children Act 2004 and the National Service Framework (NSF) Children and Young People and Maternity Services.
- 2.3 TalkFIRST staff, trustees and volunteers are required to abide by the Family Mediation Council Code of Practice and Staff Member/Volunteer Code of Conduct. As part of that Code of Conduct, are required to notify TalkFIRST of any police record or other factor which may make that person unsuitable to work with children.
- 2.4 TalkFIRST will ensure that the Code of Conduct and the organisation's safeguarding children procedures are continually monitored, developed and maintained and are appropriately communicated throughout the staff and volunteer network. Volunteers and staff throughout the organisation are responsible for ensuring that they are familiar with the Codes, Guidelines and procedures of the organisation, and that new staff and volunteers are appropriately inducted.

- 2.5 TalkFIRST have appointed a Designated Safeguarding Person who will be responsible for the above and will also be the person to whom any safeguarding children concerns will, in the first instance, be reported to and who will then discuss and agree the appropriate action to take.

**TalkFIRST Designated Safeguarding Person is:
Tracy Sheppard, Project Manager**

- 2.5 TalkFIRST will maintain several policies and procedures geared towards abuse prevention that include, but are not limited to the following:
- Disclosure and Barring Scheme checks
 - Careful selection, training and supervision of staff and volunteers
 - Employee and Volunteer Disciplinary Process
 - Continuing education for staff
 - Procedure for reporting suspected abuse
 - Staff Member and Volunteer Code of Conduct
- 2.6 All staff and volunteers will receive induction training, which will give an overview of the organisation and ensure they know its purpose, values, services and structure. Relevant training and support will be provided on an ongoing basis, and will cover information about their role, and opportunities for practising skills needed for the work.
- 2.7 Training on specific areas such as safeguarding children, identifying and reporting abuse, and confidentiality of personal information will be given as a priority to new staff and volunteers, and will be regularly reviewed.

3 What is Abuse and Neglect?

Working together to safeguard children (2010) provides the following definitions:

- 3.1 **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 fabricates the symptoms of, or deliberately induces illness in a child.
- 3.2 **Emotional Abuse** is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's development capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying, including cyber-bullying, 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 to a child, though it may occur alone.

- 3.3 **Sexual Abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact,

including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual online images or watching sexual activities, or encouraging children to behave in sexually inappropriate ways, or grooming of a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

3.4 **Neglect** is 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. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food and clothing
- shelter including exclusion from home or abandonment
- protect a child from physical and emotional harm or danger
- ensure adequate supervision (including the use of inadequate care-givers)
- ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

3.5 **Exploitation** refers to the use of children for someone else's advantage, gratification or profit often resulting in unjust, cruel and harmful treatment of the child. These activities are to the detriment of the child's physical or mental health, education, moral or social-emotional development.

It covers situations of manipulation, misuse, abuse, victimization, oppression or ill-treatment. There are two main forms of child exploitation that are recognised:

Sexual exploitation: the abuse of a position of vulnerability, differential power, or trust for sexual purposes; this includes profiting monetarily, socially or politically from the exploitation of another as well as personal sexual gratification.

Examples: Child prostitution, trafficking of children for sexual abuse and exploitation, child pornography, sexual slavery.

Economic exploitation of a child: the use of the child in work or other activities for the benefit of others. This includes, but is not limited to, child labour. Economic exploitation implies the idea of a certain gain or profit through the production, distribution and consumption of goods and services. This material interest has an impact on the economy of a certain unit, be it the State, the community or the family.

Examples:

Child domestic work, child soldiers and the recruitment and involvement of children in armed conflict, child bondage, the use of children from criminal activities including the sale and distribution of narcotics, the involvement of children in any harmful or hazardous work.

3.6 **Recognising Abuse:** Child abuse occurs to children of both sexes and all ages, in all cultures, religions, and social classes and to children with and without disabilities. All staff and volunteers should be alert to signs that a child may be at risk of significant harm.

Some general considerations are as follows:

- Identification of child abuse may be difficult; it normally requires both medical and social assessment.
- Different types of child abuse may be present at the same time, e.g. a child who is being sexually abused may also be being physically abused. When enquiring

into one type of abuse members of staff need to be alert to potential signs of other abuse.

- Always listen carefully to the child – pay particular attention to any spontaneous statement. In the case of children without speech or with limited language, pay attention to their signing or other means of expression, including behaviour and play.
- Any delay in seeking medical assistance or indeed none being sought at all, could be an indicator of abuse.
- Beware if explanation of an accident is vague, lacking detail, is inconsistent with the injury, or varies with each telling.
- Take note of inappropriate responses from parents or carers.
- Observe the child's interaction with the parents – particularly wariness, fear or watchfulness.
- Any history or patterns of unexplained injury/illness requires the most careful scrutiny. The fact that the parent/carer appears to be highly attentive and concerned should not divert attention from the assessment of risk.
- Beware if the child's injury is inconsistent with the child's development and mobility.
- Beware if there are indications of or a history of domestic violence. Violence towards adults may also indicate violence towards children and may be emotional abuse, if not physical.
- Children who are being abused often do not say and tend to perceive themselves as deserving of ill treatment. This is particularly so for children who are being emotionally abused.

4.0 Staff Member/Trustee/Volunteer Code of Conduct

It is important that both service users and staff members/trustees/volunteers can participate in TalkFIRST activities in a safe and secure environment.

This Code of Conduct has been developed for the protection of both service users and staff members/trustees/volunteers. To this end, TalkFIRST expects all its staff members/trustees/volunteers to abide by this Code of Conduct.

4.1 Each Staff member/Trustee/Volunteer:-

- 4.1.1 Will abide by the Guiding Principles and Programme rules of TalkFIRST in all activities as a TalkFIRST staff member/volunteer
- 4.1.2 Will inform TalkFIRST of any relevant police record or other factor, or any change in his/her circumstances, which may make him/her unsuitable either as a TalkFIRST volunteer or for any particular TalkFIRST activity.
- 4.1.3 Recognises that the role of a TalkFIRST staff member/trustee/volunteer places him/her in a position of trust with regard to all children who are service users participating in TalkFIRST programmes, the TalkFIRST organisation, and to colleagues in the staff member/trustee/volunteer and staff network, and undertakes to uphold that trust at all times.
- 4.1.4 Undertakes to maintain, within the organisation's procedures, the confidentiality of any information relating to other staff members/trustees/volunteers, supporters, students or staff members made available to him/her in the course of the role as a TalkFIRST staff member/trustee/volunteer.

- 4.1.5 Will not knowingly place him/herself in a situation where the Staff member/trustee/volunteer is alone with a child or young person and will endeavour to ensure, as far as possible, that there is another adult in attendance at any meetings.
- 4.1.6 Will ensure that any TalkFIRST activities involving children outside the normal activities are agreed and approved by her/his line manager in advance.
- 4.1.7 Will not behave in any way, physically or verbally, that could be offensive.
- 4.1.8 Remembers at all times that interactions between him/herself and service users must be such that no reasonable person observing that interaction could construe its nature as abusive.

If you follow these simple guidelines, TalkFIRST staff, volunteers and service users will work confidently together in mutual respect.

5.0 Action to be taken if a child or young person discloses to you abuse by someone else.

- 5.1 If a child who is a service user approaches you about an issue of abuse of trust, you must proceed with great caution.
- 5.2 The Staff/Trustee/Volunteer's Code of Conduct specifies that a Staff member/trustee/volunteer should not place him/herself in a situation where he/she is alone with a service user who is a child. However, it is possible that a service user will be unwilling to make disclosures of this nature in anything but a one-to-one situation. *The Service user's needs must take priority in this situation.* Ask if the service user would like someone else to be present – an adult or a friend - but if he/she declines; proceed with the interview, taking extra care with your behaviour and body language.
- 5.3 Without stopping the child from disclosing, but if possible before the child goes into detail, explain the consequences of you knowing and the action you will take. Assure them that you will offer support but must pass any information to another professional who may take appropriate action. Explain that this may be the Designated Safeguarding Person, as identified in section 6, and Social Care.
- 5.4 Keep calm and listen to the child - do not have physical contact at any time. Allow the child to speak without interruption, accepting what is said.
- 5.5 Do not make judgements or offer opinion, and as soon as is practically possible make an accurate written record of what the child has said, being careful to use their own words as accurately as possible
- 5.6 Explain again what will happen next. Find out when the child is next due to see the individual who is the subject of the complaint. (You will then be able to make a judgment as to the appropriate timing of your follow-up actions to ensure that the child remains safe.)
- 5.7 If the complaint concerns a situation not related to TalkFIRST (e.g. at home or at school), refer the complaint directly to the Designated Safeguarding Person. Pass on all information disclosed to you by the child.
- 5.8 If the complaint concerns a TalkFIRST staff member/trustee/volunteer, staff member or adult where the contact between that individual is a direct result of TalkFIRST

activity, immediately inform the Named Designated Person as identified in section 6 who will then initiate the procedure.

5.9 Concerns about the welfare of a child, including the possibility of abuse or neglect, may also be raised by behaviour or others indicators noticed by a member of staff/trustee/volunteer, but not disclosed by the child. In these instances, it is equally important to take action, and these concerns should be raised and discussed with the Designated Safeguarding Person.

6.0 TalkFIRST procedures for dealing with suspected abuse of trust by staff members/volunteers:

6.1 When dealing with issues concerning abuse of trust, Trustees/Committee Members must remember that the welfare of the children participating in TalkFIRST is paramount, but that we also have a responsibility to ensure that our staff & volunteers are treated fairly and with respect. This procedure is designed to meet both those objectives. The management committee or Board of Trustees should ensure that every member is fully aware of these procedures.

Wigan Safeguarding Children Board has a clear procedure for managing concerns in relation to adults, (Chapter 7) and TalkFIRST will adopt these procedures in the event of an appropriate concern.

The first requirement of these procedures is for each organisation to identify a Named Designated Person to whom such concerns should be, in the first instance, reported. (Wherever possible, this should be a different person to the Designated Safeguarding Person)

**TalkFIRST's Named Designated Person is
Tracy Sheppard, Project Manager**

If this person is unavailable or is the subject of the allegation, then the alternative person to contact is:

David Coghlin, Safeguarding Advisor

On receipt of a concern when an individual may have:

- Behaved in a way that has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child
- Behaved in a way that indicates s/he may not be suitable to work with children

The Named Designated Person will contact the Wigan Children's Duty Team who will consider, with the Named Designated Person, the most appropriate way forward. **It is essential that nothing is done to investigate the concern before contacting the Children's Duty Team as this can contaminate evidence if a police investigation is deemed appropriate.**

If the concern meets the above criteria, then the procedure outlined in Chapter 7 - managing concerns in relation to adults of the Safeguarding Children Procedures will be followed with guidance from the Children's Duty team.

Wigan Children's Duty Team: 01942 828300
Outside office hours contact: 0161 834 2436.

If the concern does not meet the above criteria but involves other inappropriate behaviour by the staff member / volunteer then this will be dealt with through the TalkFIRST Disciplinary Procedure.

6.2 It is also important to ensure that both the child and the alleged perpetrator receive appropriate support through this procedure. For the child this should in the first instance be provided by their parents/carers who may need some support to do this. The staff member/trustee/volunteer should be encouraged to get support from a union representative, friend, or another identified member of staff / volunteer.

7.0 Action to be taken if you receive an allegation about yourself.

7.1 Keep calm. Do not get involved in an argument which is likely to make the situation worse.

7.2 Immediately inform your line manager and the Named Designated Person. The quicker that action is taken to investigate the allegations, the sooner the situation will be resolved.

7.3 Record the facts as you understand them.

7.4 Ensure that no-one is placed in a position which could cause further compromise. Do not contact another agency involved with the child or young person concerned.

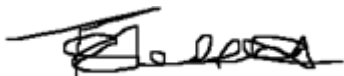
8.0 Action to be taken if you suspect an abuse of trust has occurred

8.1 After making an accurate written record of your concerns and your reasons for them, your first action should be to contact the Named Designated Person for allegations as indicated in Section 6 above.

8.2 The allegations management procedure will then be followed as outlined in Section 5 above.

8.3 **Whatever the nature of the complaint, it must be kept confidential. You must not discuss the disclosure with any individual or party other than those identified in the above procedure.**

Signed



Name: Tracy Sheppard

Dated: November 2018

Next review date: November 2019