

## Safeguarding Children Policy

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**Name of organisation:**

not/nowhere

**Address:**

Studio 2, Warton House, 152 High Street London E152NE

**Telephone number:**

02082212244

**Name of Nominated Safeguarding Children Advisor:**

**Contact telephone number:**

**Agreed by Directors on:**

**Review date:**

8 Dec 2020

## 1. Aim of this policy

The aim of this policy is to outline the practice and procedures for workers, associates, and volunteers in Not/Nowhere in order to safeguard and promote the welfare of children and young people. It is aimed at protecting the child and the worker, recognising the risks involved in working along side children and young people.

The policy covers all workers and areas of work with specific guidance for projects regularly in contact with children and young people

The child protection policy overrides issues of confidentiality as stated in the Children Act 1989. The welfare of the children is of primary importance. We will endeavour to protect the children attending Not/Nowhere projects by following the procedures in "Working Together to Safeguard Children 2010".

The Safeguarding Children Officer/Deputy for Not/Nowhere is responsible for implementing the Safeguarding Policy.

The Not/Nowhere Directors will ensure that all workers and volunteers working with children have checked whether they need DBS check and where possible, have completed Safeguarding Children Training. It will ensure that all staff and volunteers understand and follow its Safeguarding Children Policy.

**It is not the responsibility of Not/Nowhere to investigate incidences of suspected child abuse but to gather information and refer only.**

## 2. Good practice

All workers and volunteers working along side children and young people will follow this recruitment process:

- Satisfactory checking of references
- A DBS check may be needed for:
  - certain jobs or voluntary work - like working with children, or in healthcare
  - applying to foster or adopt a child"

*(Information provided by the DBS website)*

Click <https://www.gov.uk/disclosure-barring-service-check/overview> for an overview of the new system.

DBS customer services [customerservices@dbsgsi.gov.uk](mailto:customerservices@dbsgsi.gov.uk)

Telephone: 0300 0200 190

Welsh: 0300 0200 191

Minicom: 0300 0200 192

International: +44 151 676 9390

Monday to Friday, 8am to 6pm (9am to 5pm for appeals and disputes)

Saturday, 10am to 5pm

DBS customer services

PO Box 3961

Royal Wootton Bassett

SN4 4HF

## Transgender applications

Contact the DBS sensitive applications team if you're a transgender applicant and you don't want to reveal details of your previous identity to a potential employer.

DBS sensitive applications team [sensitive@dbsgsi.gov.uk](mailto:sensitive@dbsgsi.gov.uk)

Sensitive applications team

Customer services

PO Box 165

Liverpool

L69 3JD

Web: <https://www.gov.uk/government/organisations/disclosure-and-barring-service>  
and <https://www.gov.uk/disclosure-barring-service-check/overview>

- All workers or volunteers have a duty to declare any existing or subsequent convictions, adverse child protection or care proceedings.

## Management

- It's the safeguarding Advisor's responsibility to clarify with the worker or volunteer their role and responsibilities regarding child protection.

## Training

- It is the responsibility of the Not/Nowhere to ensure up to date and adequate training on child protection issues is available to all volunteers, **where relevant** (as described in "Working Together 2010")

## Planning

- Wherever possible all workers and volunteers should avoid working alone with a child.

## Incident forms

- An incident form should be completed recording any concerns. Any comments made by parents/carers should also be recorded. This confidential information will be kept by the appropriate person and will be kept for the duration of the project.

## 3. Responsibilities

Workers or volunteers should make a note of any discussions with a child. Taking care to record when and where it happened and who was present, as well as what the child said (in their words). Observation of their behaviour and any actions taken. This must be dated and kept confidentially in a safe place.

If a worker or volunteer believes a child may be suffering or may be at risk of suffering significant harm then he/she should always refer his or her concerns to the local authority social services department.

## What to do if you have concerns regarding abuse

- These could be physical or behavioural signs or any other indicator that raises concerns.
- These concerns should be logged immediately.
- You should log exactly what was witnessed and not include your own opinions e.g. a small circular burn, rather than a cigarette burn.
- You should use one form per child.

- You should continue to monitor the situation recording any further concerns.
- ***Remember that anything you have been told is confidential***

### **What to do if a child discloses information:**

#### ***During***

- Stay calm.
- Do not stop a child who is recalling significant events.
- Find a quiet place to talk if possible.
- Listen, but DO NOT press for information.
- Do not appear shocked at anything you might see or hear.
- Listen and sympathise with anything a child might disclose.
- Believe what you are being told.
- Say you are glad the child told you and reassure them that they are not to blame.
- Ask if they have told anyone else.
- If they decide not to tell you, ask them who they would be able to tell.
- **Tell the child you will need to share the information with someone else who will help them and not keep it a secret.**

#### ***As soon as possible after and not during the disclosure:***

Record the following:

- Name, address and date of birth of child.
- Parent/Carer's name and contact number.
- When and where it happened.
- Who was present?
- What happened up to the time when the child disclosed?
- What the child said. This MUST be recorded in the child's words.
- What you said. This MUST be recorded in your words.
- **Remember that this form and anything you have been told is confidential.**

**You should only discuss details of any Safeguarding issues with people who have a legitimate need to know.**

#### 4. Conclusion

Remember:

- The volunteers primary responsibility is to protect the child
- Each volunteer has a duty to take action
- Volunteers will not have to cope alone

#### 5. Contacts

Police: 0845 045 45 45

Child-line: 0800 1111

NSPCC Child Protection Helpline: 0808 800 5000

NHS Direct: 0845 4647

#### ***Important Note:***

**If you think the child is about to suffer, or has suffered significant physical or mental harm, then immediately contact an appropriate agency.**

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*Appendix 1 – Categories of abuse*

*Appendix 2 – Diagrams of physical signs of abuse*

*Child Protection Concern Record Form*

## **Appendix 1 – Categories of abuse**

### **Categories of abuse**

What is meant by abuse or neglect?

Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely by a stranger.

There are four categories of abuse and neglect, as follows:

#### **Physical Abuse**

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 is commonly described using the term Fabricated and Induced illness (previously known as Munchausen's syndrome by proxy).

#### **Sexual Abuse**

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 (e.g. rape or buggery) 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 watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

#### **Neglect**

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. 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.

#### **Emotional Abuse**

Emotional abuse is 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 children that they are worthless or unloved, inadequate, or valued only insofar 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, though it may occur alone.

#### **Vulnerable Children**

Children with special needs have the potential to be more vulnerable than other children and young people. Some children may have difficulty with communication or physical mobility. These children may be unaware that they do have power over their own bodies and that they have the right to say no. By having an understanding of the different factors that make children and young people with special needs more vulnerable this can help staff and volunteers to put safeguards in place to protect these children and young people.

## **CHILD SAFEGUARDING NOTES**

***Safeguarding entails policies and procedures that work proactively to keep children safe and promote their welfare.***

***Child protection is a central part of safeguarding and involves protecting individual children identified as either suffering or at risk of suffering significant harm.***

***There are four main categories of abuse each with signs and indicators: physical, sexual, neglect, and emotional abuse.***

***Continuum of Need Levels are broken down on the basis of the child or young person's need:***

- ***Level 1 – no identified needs***
- ***Level 2 – additional needs, low risk to vulnerable – needs are not clear, not known or not being met. Threshold for Early Help Assessment.***
- ***Level 3 – multiple/complex needs, can also be children who are disabled. May require longer term intervention.***
- ***Level 4 – acute/specialist needs. Intensive help and specialist support.***

***What is your responsibility?***

- ***Talk to safeguarding professionals, share concerns, discuss differences of opinion.***
- ***Record full information about the child at first point of contact – all concerns, discussions about the child, decisions made and reason for decisions.***
- ***Don't ask a child 'leading questions'; listen to what is said and report back to a supervisor.***
- ***Always follow up discussions in writing.***

***When a child discloses to you –***

- ***Stay calm; listen and be aware of non-verbal messages***
- ***Allow the child to talk freely in their narrative***
- ***Take it seriously***
- ***Reassure them they have done the right thing***
- ***Explain what will happen next***

- **Record verbatim – sign and date**
- **Don't ask leading questions**
- **Don't make promises you can't keep**
- **Don't jump to conclusions**
- **Don't speculate or accuse**

**Once you've discussed your concerns about a child with a Safeguarding Lead if you still have concerns, contact the Multi-agency Safeguarding Hub (Lewisham-specific). If not, record your discussions and reasons/review.**

**If you have a concern about a child, contact where the child usually lives the designated safeguarding lead OR the Multi-Agency Safeguarding Hub (MASH) (Lewisham-specific).**

**If you have a concern about the behaviour of a professional or volunteer, speak to your safeguarding lead. Safeguarding Leads may then consult or refer to LADO (Local Authority Designated Officer).**

**Referrals to LADO are for when a professional or volunteer has behaved in a way that may have harmed a child; possibly committed a criminal offence against or related to a child; or behaved in a way that indicates a risk to harm a child.**

#### **Guidelines for Safer Practice**

- **Be careful about forming personal relationships with parent/carers**
- **Exercise caution about being alone with a child or young person**
- **Set an example using appropriate language, showing respect to others**
- **DO NOT use physical punishment or chastisement**
- **DO NOT kiss or cuddle children, allow children in your lap, give presents**
- **DO NOT invite a young person home or meet outside activity times**
- **DO NOT engage in any sexual activity with a young person met through duties**
- **DO NOT add children/young people onto social networking**
- **NEVER let allegations go unacknowledged, unresolved**

**Appendix 2 – Diagrams of physical signs of abuse**





## Child Protection Concern Record Form

<ul style="list-style-type: none"><li>● Name and address of child</li><li>● Age (Include date of birth if known)</li></ul>
Parent/Carer's Name and contact number
Name and address of community group
Contact telephone number of the group
Concern please remember to indicate clearly whether what is being written is fact, observation, allegation or opinion: include what happen and where, who was present
What was said by a child and what was said to the child

Action Taken
Name of person reporting this concern
Position
Date:
Signature
Date Record sheet given to the Designated Officer
Name of Designated Officer (please print)
Signature of Designated Officer to confirm receipt
Date:

**Remember to maintain confidentiality on a need to know basis – only if it will protect the child. Do not discuss this incident with anyone other than those who need to know.**

**NB: A copy of this form should be sent to social care.**