Holy Rood House

Centre for Health and Pastoral Care

Safeguarding Children Policy and Procedure V1.2

Audience/Scope This policy and procedure apply to all staff, volunteers and Trustees		
Summary/Purpose The aim of the policy is to provide guidance to community members on the process to take if they suspect a child is being abused		
Date of first issue Unknown	**Date of this version** October 2024	**Date of next review** October 2025
Date of review	**Date of review**	

Introduction

Holy Rood House, Centre for Health and Pastoral Care (the charity) is committed to protecting the welfare of all children as they participate in the charity's services and activities. The charity 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, the charity recognises that the best protection for children and young people participating in our activities is vigilance and forethought of staff and volunteers in preventing circumstances where abuse of trust could occur. To that end the charity will strive to create a safe and secure environment where those using the service, community members can work together confidently in mutual respect. The charity also recognises its responsibility to take appropriate action when a child or young person discloses that they are experiencing abuse or neglect, or if a community member has a concern about the welfare of a child or young person, and ensure community members have an understanding of what might indicate this and what action to take.

Definitions

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 this policy and procedure the reference to children therefore means 'children and young people' throughout.

Types of Abuse:

- Physical abuse – including hitting, slapping, shaking, throwing, poisoning, burning or scalding, drowning, suffocation or otherwise causing physical harm to a child. Physical harm

many also be caused when a parent or carer fabricates symptoms of, or deliberately induces illness in a child.

- 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 values 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 interactions. 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.
- Sexual abuse – involves forcing or enticing a child to take part in sexual activities, not necessarily involving high levels of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape 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 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.
- Neglect – is the persistent failure to meet a child's basic physical and or psychological needs, likely to result in 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, clothing and 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

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 community members should be alert to signs that a child may be at risk of significant harm, which includes consideration of:

- identification of child abuse may be difficult; it normally requires both medical and social assessment.
- avoid making assumptions about a situation and ensure that a thorough assessment informs their judgement

- gather information in relation to an incident, including the explanation provided by parents/carers; any injuries sustained; medical advice or assessment sought by the family and whether there was any delay in this; inconsistency in information provided; and responses to the child be the parents/carers
- 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 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.

Safeguarding children

The charity takes seriously its safeguarding obligations and responsibilities and is committed to:

- Equipping community members to be alert to the abuse of adults and aware of their duty report any suspected abuse or neglect.
- Promoting safe practice by those in positions of trust.
- Recruiting safely all community members involved in designated roles within the charity by using the Disclosure and Barring Service when legal or appropriate, in accordance with the DBS guidelines.
- Supporting, resourcing, training and regularly reviewing those who undertake work with children.
- Adhering to the guidance and principles of the Children Act 1989 and 2004
- Recognising its duty to work together with the local authority, police and local Safeguarding Children Board and to seek their advice when necessary

Community members are required to notify the charity of any police record or other factors which may make that person unsuitable to work with children.

The Charity will ensure that the charity's safeguarding children's procedures are continually monitored, developed and maintained and are appropriately communicated throughout the community members network. Community members throughout the charity are responsible for ensuring that they are familiar with the codes, guidelines and procedures of the charity and that new community members are appropriately inducted and go through the DBS process.

The Charity 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.

Designated Safeguarding Person is: This is a shared role with Elaine Hill Clinical Manager and Sibylle Batten Chaplaincy Coordinator

The Charity will maintain policies and procedures geared towards abuse prevention that include, but are not limited to the following topics:

- selection and vetting of community members including DBS checks
- disciplinary procedure
- induction and training
- whistleblowing policy / confidential reporting procedure.

All community members will receive induction training, which will give an overview of the charity 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.

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.

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

If a child who uses the service user approaches you about an issue of abuse, you must proceed with great caution.

The community members should not place themselves in a situation where they alone with a child. However, it is possible that a child who uses the service will be unwilling to make disclosures of this nature in anything but a one-to-one situation. *The needs of the child using the service must take priority in this situation.* Ask if the child if they would like someone else to be present – an adult or a friend - but if they decline; proceed with the interview, taking extra care with your behaviour and body language.

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, above, and Social Services.

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.

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.

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 judgement as to the appropriate timing of your follow-up actions to ensure that the child remains safe.)

If the complaint concerns a situation not related to the charity (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.

If the complaint concerns a community member or an adult where the contact between that individual is a direct result of charity activity, immediately inform the Senior person on duty and/or the Designated Safeguarding Person, who will then initiate the procedure.

Concerns about the welfare of a child, including the possibility of abuse or neglect, may also be raised by behaviour or other indicators noticed by a community member, 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.

Procedures for dealing with suspected abuse by community members:

When dealing with issues concerning abuse by an adult in a position of trust, the Board of Trustees and Executive Director will be aware that the welfare of the children participating in the charity is paramount, but that we also have a responsibility to ensure that our community members are treated fairly and with respect. This procedure is designed to meet both those objectives. The Executive Director is responsible in ensuring that everyone involved in working for the charity is fully aware of these procedures. This will be done through induction processes and occasional community members meetings and/or updates. (New counsellors will be alerted to the policy by the Clinical Manager)

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 they may not be suitable to work with children

The Designated Safeguarding Person will contact the LADO (Local Authority Designated Officer) or the York Diocesan Safeguarding Officer who will consider in collaboration, the most appropriate way forward. **It is essential that nothing is done to investigate the concern before contacting the LADO as this can contaminate evidence if a police investigation is deemed appropriate.**

If the concern does not meet the criteria for harm caused by abuse as identified above, but involves other inappropriate behaviour by the community member then this will be dealt with through the Charity's Disciplinary Procedure.

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 / volunteer should be encouraged to get support from a union representative, friend, or another identified member of staff / volunteer.

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

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

Immediately inform your line manager and the designated safeguarding person. The quicker that action is taken to investigate the allegations, the sooner the situation will be resolved.

Record the facts as you understand them.

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.

Confidentiality

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.

If the allegation is found to be true, then follow the process as identified in the policy for reporting

Contacts :
Designated Safeguarding Person – Elaine Hill Clinical Manager and Sibylle Batten Chaplaincy Coordinator enquiries@holyroodhouse.org.uk 01845 522580

- Local Authority Safeguarding North Yorkshire: 01609 780780
- Local Police: 999
- York Diocesan Safeguarding Advisor 01904 699524 or safeguarding@yorkdiocese.org
- **Please note if the person lives out of the North Yorkshire area, the local safeguarding authority in their area should be used as the contact**

Dissemination

This policy is available in the policy file, stored in the office at Holy Rood House

Version History V1.1 new format, types of abuse moved from an appendix updated by Clinical Manager 2022 **V1.2 –** change in ownership of policy, flow chart added			
Author	Elaine Hill	Clinical Manager	
Approved and ratified	Trustees		
Policy owner	Sue Hammersley	Executive Director	
Signed		**Date**	

Equality statement

In applying this policy, Centre for Health and Pastoral Care will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity and provide good relations between people of diverse groups. In particular on grounds of the following characteristics protected by the equality act (2010); age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation, in addition to offending background, trade union membership or any other personal characteristics