### **Safeguarding Procedure**

#### **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 18<sup>th</sup> birthday. For the purpose of these procedures the reference to children therefore means 'children and young people' throughout.

#### 2.0 Policy Statement

2.1 Catalyst is committed to protecting the welfare of all children as they participate in Catalyst's services and/or activities. Catalyst 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, Catalyst 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, Catalyst will strive to create a safe and secure environment where service users, volunteers and staff can work together confidently in mutual respect.

2.2 Catalyst 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.

Refer to:

Appendix 1 for definitions of what is abuse or neglect

Appendix 2 for action to be taken if a child discloses abuse

Appendix 3 for action if Catalyst staff or volunteers are suspected of abuse 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.

2.3 Catalyst staff and volunteers are required to abide by the Code of Conduct and, as part of that Code of Conduct, are required to notify Catalyst of any police record or other factor which may make that person unsuitable to work with children.

2.4 Catalyst will ensure that the Codes of Conduct and the organisation's safeguarding children procedures are Guidelines and procedures of the organisation, and that new staff and volunteers are familiar with the Codes, appropriately inducted.

2.5 Catalyst 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.

#### **Catalyst Designated Safeguarding Person is:**

Kathy Palmer tel 01822 612100 email: <u>kathympalmer@outlook.com</u>

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

- Disclosure and Barring Service Checks
- Careful selection, training and supervision of staff and volunteers
- Employee and Volunteer Disciplinary Process
- Continuing education for staff
- Staff 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.

2.8 If advice is required about a particular course of action, Catalyst is a member of CCPAS and advice can be obtained around the clock on 0845 120 4550.

2.9 When working with a partner organisation, such as a school or church, Catalyst staff and volunteers will work to that partner organisation's safeguarding procedure.

#### Appendix 1: What is Abuse and Neglect?

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

• **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.

• 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 cyberbullying, 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.

• 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

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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.

• **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.

**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 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.

## Appendix 2: Action to be taken if a child or young person discloses to you abuse by someone else

If a child approaches you about an issue of abuse of trust, you must proceed with great caution.

The Code of Conduct specifies that a Staff member/ 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 child's needs must take priority in this situation*.

- Ask if the child 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.
- 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 above.
- 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 judgment 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 Catalyst (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 Catalyst staff member/volunteer, Trustee or adult where the contact between that individual is a direct result of Catalyst activity, immediately inform the Named Designated Person as identified in section 6 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 others indicators noticed by a member of staff / 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.

### Appendix 3: Catalyst's procedures for dealing with suspected abuse of trust by staff members/volunteers:

When dealing with issues concerning abuse of trust, Trustees must remember that the welfare of the children participating in Catalyst 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 Trustees should ensure that every member is fully aware of these procedures.

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 duty LADO (Local Authority Designated Officer) 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 LADO as this can contaminate evidence if a police investigation is deemed appropriate.

Devon County Council LADO contact number: (01392) 384964

# • 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 Catalyst 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 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 Named Designated 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