

Bodmin Road Church

Safeguarding Policy

2013 revision

The policy and attached practice guidelines are prepared with close reference to the policies and procedures of the *Hull Safeguarding Children's Board and the Hull Safeguarding Adults Board*.

Contents

- Section 1. Leadership Commitment**
- Section 2. The role of the Safeguarding Coordinator**
- Section 3. Recognising and reporting allegations or suspicions of abuse**
 - 3.1 Understanding abuse and neglect**
 - 3.2 Responding to allegations and suspicions of abuse (children and vulnerable adults)**
 - 3.3 Allegations of abuse made against a member of staff or volunteer**
 - 3.4 Seeking consent for a referral (children)**
 - 3.5 Seeking consent for referral (vulnerable adults)**
- Section 4. Prevention through Safer Recruitment**
 - 4.1 General**
 - 4.2 Staff recruitment & training**
 - 4.3 Volunteer selection and training**
- Section 5. Specific Practice Guidelines**
 - 5.1 Recording & Registration**
 - 5.2 Supervision**
 - 5.3 Whistle blowing**

- Appendix 1. Staff/volunteer Code of Good General Practice**
- Appendix 2. Definitions of abuse**
- Appendix 3. Sources of harm to children**
- Appendix 4. Signs and symptoms of abuse (children)**
- Appendix 5. Vulnerable adults**
- Appendix 6. *Self Declaration Form* for a position requiring a disclosure**
- Appendix 7. Responding to abuse - *Worker Reporting Form***
- Appendix 8. Resources and internet links**
- Appendix 9. National and local guidance**

Section 1 – Leadership Commitment

1.1 Preamble

As a Leadership we recognise the need to provide a safe and caring environment for children, young people and vulnerable adults. We acknowledge that children, young people and vulnerable adults can be the victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Covenant of Human Rights, which states that everyone is entitled to “all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status”. We also concur with the Convention on the Rights of the Child which states that children should be able to develop their full potential, free from hunger and want, neglect and abuse. They have a right to be protected from “all forms of physical or mental violence, injury or abuse, neglect or negligent treatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s), or any other person who has care of the child.” As a Leadership we have therefore adopted the procedures set out in this safeguarding policy in accordance with statutory guidance. We are committed to build constructive links with statutory and voluntary agencies involved in safeguarding.

1.2 We believe that:

- we all have a responsibility to help prevent the physical, sexual, emotional abuse and neglect of children and young people (those under 18 years of age) and to report any such abuse that we discover or suspect.
- every child should be valued, safe and happy. We want to make sure that children we have contact with know this and are empowered to tell us if they are suffering harm.
- all children and young people have the right to be treated with respect, to be listened to and to be protected from all forms of abuse.
- we all have a responsibility to help prevent the physical, sexual, psychological, financial and discriminatory abuse and neglect of vulnerable adults and to report any such abuse that we discover or suspect.
- the personal dignity and rights of vulnerable adults should be reflected in all our policies and procedures.
- all adults should enjoy and have access to every aspect of the life of the place of worship/organisation unless they pose a risk to the safety of those we serve.

1.3 We recognise that:

- The interests of the child or vulnerable adult are paramount, and his or her safety and welfare should always be given first priority.
- Concerns should be listened to carefully and should always be taken seriously.
- Care should be taken not to infringe privacy and confidentiality any more than is necessary to safeguard the welfare of the child or vulnerable adult.
- Staff and volunteers should use plain, jargon-free language appropriate to the age of each child or the ability of the vulnerable adult and will explain any unavoidable technical or professional terms.
- Children's Social Services (or equivalent) has lead responsibility for investigating all allegations or suspicions of abuse where there are concerns about a child. Adult Social Care (or equivalent) has lead responsibility for investigating all allegations or suspicions of abuse where there are concerns about a vulnerable adult.
- Where an allegation suggests that a criminal offence may have been committed then the police should be contacted as a matter of urgency.
- Safeguarding is everyone's responsibility.

1.4 We undertake to:

- Follow the requirements and good practice recommendations of national and local safeguarding legislation in relation to safeguarding children and vulnerable adults.
- Always have in place a fully up-to-date Safeguarding Policy which is regularly reviewed in line with national and local policy.
- Always ensure the organisation has an appointed Safeguarding Coordinator
- Respect the rights of children as described in the UN Convention on the Rights of the Child.
- Implement the requirements of legislation in regard to people with disabilities.
- Ensure that all staff and volunteers are familiar with and adhere to the agreed procedures of our safeguarding policy, through on-going safeguarding training and development opportunities for all workers and the development of a culture of awareness of safeguarding issues.
- Keep up to date with national and local developments relating to safeguarding.
- Support the safeguarding co-ordinator in their work and in any action they may need to take in order to protect children/vulnerable adults.
- Ensure that the premises meet the requirements of the Disability Discrimination Act 1995 and all other relevant legislation, and that it is welcoming and inclusive.
- Follow the agreed procedures for recruitment and selection of staff and volunteers, in order to ensure appropriate selection, training and supervision.

- Ensure that children and vulnerable adults are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.
- Ensure the provision of effective management for staff and volunteers through appropriate supervision, support and training.
- We undertake to exercise proper care in the appointment and selection of all those who will work with children and vulnerable adults.

Section 2 - The Role of the Safeguarding Co-ordinator

Where there are concerns about the welfare of any person, all staff / volunteers have a duty to share those concerns with the designated Safeguarding Co-ordinator.

2.1 The Safeguarding Co-ordinator is responsible for:

- Monitoring and recording concerns about the well being of a child, young person or vulnerable adult.
- Making referrals to the Local Authority Social Services.
- Liaising with other agencies.
- Arranging training for staff / volunteers. The Safeguarding Co-ordinator will ensure that all staff, including volunteers, understand the safeguarding procedures, and are given appropriate levels of training, both in-house and utilising relevant Local Council interagency training.
- The Safeguarding Co-ordinator will ensure that training programmes take account of the latest government and local guidance and requirements, and operate within an anti-discriminatory framework.

2.2 General Points of procedure

- After receiving a referral the Safeguarding Co-ordinator will act on behalf of the organisation in referring concerns or allegations of harm to Local Authority Central Duty Team or the Police Public Protection Unit.
- If the Safeguarding Co-ordinator is in any doubt about making a referral it is important to note that advice can be sought from Local Authority Central Duty Team. The name of the child and family should be kept confidential at this stage and will be requested if the enquiry proceeds to a referral.
- The Safeguarding Co-ordinator may share limited information on a need to know basis amongst the staff / management but respecting the need for confidentiality.

- It is not the role of the Safeguarding Co-ordinator to undertake an investigation into the concerns or allegation of harm. It is the role of the Safeguarding Co-ordinator to collate and clarify details of the concern or allegation and to provide this information to the Local Authority Central Duty Team.

Section 3 - Recognising and responding appropriately to an allegation or suspicion of abuse

3.1 Understanding Abuse and Neglect

Defining child abuse or abuse against a vulnerable adult is a difficult and complex issue. A person may abuse by inflicting harm, or failing to prevent harm. Children and adults in need of protection may be abused within a family, an institution or a community setting. Very often the abuser is known or in a trusted relationship with the child or vulnerable adult. We adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19 which states:

- 1. Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.*
- 2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.*

With regard to adults we also adhere to the UN Universal Declaration of Human Rights with particular reference to Article 5 which states:

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

Detailed definitions, and signs and symptoms of abuse are included in this policy as appendices.

3.2 Responding to Allegations and Suspicions of Abuse (Children and Vulnerable Adults)

Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse. Following procedures as below:

3.2.1 GENERAL POINTS OF PROCEDURE

- If any child or adult user asks a staff member or volunteer to keep information about potential or actual abuse secret, it must be explained immediately and straightforwardly that such information cannot be kept secret and will be discussed with the Safeguarding Co-ordinator.
- The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to Safeguarding Co-ordinator who is nominated by the Leadership to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities. The Safeguarding Co-ordinator should then contact Social Services.
- In the absence of the Safeguarding Co-ordinator or, if the suspicions in any way involve the Safeguarding Co-ordinator, then the report should be made to the Church Minister.
- In certain circumstances the Police Child Protection Team may also be notified. In the first instance it is for the Social Services Department to make a decision about involving the police.
- Where required and without compromising confidentiality the Safeguarding Co-ordinator should then immediately inform the insurance company and other strategic personnel such as the Trustees/Leadership.
- Suspicions must not be discussed with anyone other than those nominated above.
- A written record of the concerns should be made in accordance with these procedures and kept in a secure place. A form for recording any incidents of disclosure can be found in Appendix 7.
- Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Co-ordinator, the absence of the Safeguarding Co-ordinator should not delay referral to Social Services or the Police.
- The Leadership will support the Safeguarding Co-ordinator in their role, and accept that any information they may have in their possession will be shared in a strictly limited way on a need to know basis.
- The role of the Safeguarding Co-ordinator is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies which have a legal duty to investigate.
- It is, of course, the right of any individual as a citizen to make a direct referral to the safeguarding agencies, although the Leadership hope that members of the organisation will use the above procedure. If, however, the individual with the concern feels that the Safeguarding Co-ordinator has not responded appropriately, or where they have a

disagreement with the Safeguarding Co-ordinator as to the appropriateness of a referral they are free to contact an outside agency direct. We hope by making this statement that the Leadership demonstrates its commitment to effective safeguarding and the protection of all those who are vulnerable.

- The adult or young person may indicate that he or she is unwilling to make a statement to the police or talk to Social Services staff. A referral should nonetheless be made if it is decided that the allegation is of sufficient substance and concern to be likely to merit further investigation.

3.2.2 CHILDREN - SIGNS OR ALLEGATIONS OF PHYSICAL INJURY, NEGLECT OR EMOTIONAL ABUSE

If a child has a physical injury, a symptom of neglect or where there are concerns about emotional abuse, the Safeguarding Co-ordinator will:

- Contact Social Services for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
- Not tell the parents or carers unless advised to do so, having contacted Social Services.
- Seek medical help if needed urgently, informing the doctor of any suspicions.
- For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek help, but not if this places the child at risk of significant harm.
- Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Social Services direct for advice.

3.2.3 CHILDREN - ALLEGATIONS OR SUSPICIONS OF SEXUAL ABUSE

In the event of allegations or suspicions of sexual abuse in the case of a child, the Safeguarding Co-ordinator will:

- Contact the Social Services Department or Police Child Protection Team direct. They will NOT speak to the parent/carer or anyone else.

3.2.4 VULNERABLE ADULTS - SUSPICIONS OR ALLEGATIONS OF PHYSICAL OR SEXUAL ABUSE

If a vulnerable adult has a physical injury or symptom of sexual abuse the Safeguarding Co-ordinator will:

- Discuss any concerns with the individual themselves giving due regard to their autonomy, privacy and rights to lead an independent life.
- If the vulnerable adult is in immediate danger or has sustained a serious injury, contact the Emergency Services, informing them of any suspicions.

- For advice contact the Social Services Vulnerable Adults Team who have responsibility under Section 47 of the NHS and Community Care Act 1990 and government guidance, 'No Secrets', to investigate allegations of abuse.

3.3 Allegations of abuse made against a member of staff or volunteer

Sadly, children can be subject to any form of abuse by those who work with them in any setting. This may be by a professional, a staff member, a foster carer or a volunteer. In the church context it could be a minister, a leader, a counsellor, a youth worker or a crèche/children's worker. All allegations must therefore be taken seriously and the Safeguarding Coordinator should be informed of any situation that indicates that a person who works with children or vulnerable adults has:

- Behaved in a way that has harmed a child/vulnerable adult or may be likely to do so
- Possibly committed a criminal offence against or related to a child/vulnerable adult
- Behaved towards a child or vulnerable adult in a way that indicates she/he is unsuitable to work with children, in connections with the persons employment or voluntary activity

The member of staff who has a concern or to whom an allegation or concern is reported should not question the child or investigate the matter further.

The Safeguarding Co-ordinator will then make a referral to the Local Authority Designated Officer (LADO) and will need to liaise with Social Services in regards to the suspension of the worker.

Underlying principles:

- The welfare of the child/vulnerable adult is paramount
- Adults about whom there are concerns should be treated fairly and honestly and should be provided with support. A neutral approach will be maintained at all times whilst any investigation is being undertaken.

In the case that the concern or allegation relates to the Safeguarding Officer, their line management should be contacted (the church minister or a member of the Leadership Team). If the immediate line manager or other members of the Leadership are implicated in the concerns or allegations or the Safeguarding Coordinator is not available then the matter should be reported directly to the Local Authority Designated Officer.

If suspension of the alleged abuser is required the Safeguarding Co-ordinator should discuss this with the LADO to consider the timing.

In cases where there is an immediate risk to any child or young person, the information must be passed to Local Authority Social Services or the Police, as soon as possible.

3.4 Seeking consent for a referral (children)

Working Together to Safeguard Children (HM Government 2010) states that professionals should seek in general to discuss any concerns with the family (including the child where appropriate) and, where possible, seek their agreement to making referrals to the Local Authority Central Duty Team. This should only be done where such discussion and agreement seeking will not place the child at an increased risk of significant harm.

It should be noted that parents, carers or child may not agree to information being shared, but this should not prevent referrals where child protection concerns persist. The reasons for dispensing with consent from the parents, carer or child should be clearly recorded.

In cases where an allegation has been made against a family member living in the same household as the child and it is your view that discussing the matter with the parent would place the child at risk of harm, or where discussing it may place a member of staff / volunteer at risk, consent does not have to be sought prior to the referral being made.

If you are unsure about whether to seek parental consent prior to a referral being made then seek advice from the duty social worker at the Local Authority Central Duty Team.

3.5 Seeking consent for a referral (vulnerable adults)

Dependent on the circumstances there may be issues about the vulnerable adult consenting to a referral and what to do if the vulnerable adult does not consent. There is a section with more detail relating to this in Appendix 3 of the Safeguarding Vulnerable Adults Policy produced by the Hull Safeguarding Adults Board. If unsure, the Safeguarding Coordinator should consult with Social Services for advice. Advice may be sought without giving any details of the vulnerable adult that would breach confidentiality.

Section 4 - Prevention through Safer Recruitment

4.1 General

- The leadership will not knowingly appoint any individual to work with children or adults who have previously abused a child or adult or where it is known that the individual has a record of violent/deviant sexual behaviour.

- The Leadership undertakes to follow the principles found within the 'Abuse Of Trust' guidance issued by the Home Office and it is therefore unacceptable for those in a position of trust to engage in any behaviour which might allow a sexual relationship to develop for as long as the relationship of trust continues.
- As a Leadership we are committed to supporting all workers (paid staff and volunteers) and ensuring they receive support and supervision. On commencement of their role and through ongoing training all workers will be familiarised with this Policy and especially the Code of Practice (Appendix 1) which should inform their behaviour and approach towards children, young people and vulnerable adults at all times.
- The Safeguarding Coordinator will ensure a record is kept (in a secure and confidential manner) of all children's/young people/vulnerable adult workers (both paid staff and volunteers) that will include the returned copy of the application from the CRB or a record of the CRB return.
- If there is an incident where a member of staff or volunteer has to be dismissed because they have harmed a child or vulnerable adult, or would have done if they had not left, Bodmin Road Church will notify the Independent Safeguarding Authority. Information on how to do this can be found at: <http://www.isa-gov.org.uk/>

4.2 Staff recruitment and training

The Leadership will ensure all staff will be appointed, trained, supported and supervised in accordance with government and local guidance on safer recruitment. This includes ensuring that:

- There is a written job description/person specification/role profile for the post
- Those applying have completed an application form, including details of previous employment, details of any conviction for criminal offences (including spent convictions under the Rehabilitation of Offenders Act 1974), agreement for an enhanced CRB check, permission to contact two referees, including their current or most recent employer (which should be taken up).
- Those short listed have been interviewed.
- Safeguarding has been discussed at interview, and particular attention drawn to the good practice and reporting guidelines.
- Written references have been obtained, and followed up where appropriate
- An enhanced criminal records disclosure has been completed (complying with the CRB Code of Practice requirements concerning the fair treatment of applicants and the handling of information).
- All appointed staff have also completed the Self Declaration Form (Appendix 6)
- Where there have been unproved allegations in the past, such allegations would preclude the individual from participating in working with young people or vulnerable in any form.

- Qualifications where relevant have been verified.
- A suitable training programme is provided for the successful applicant.
- The applicant has completed a probationary period (3-6 months).
- The applicant has been given a copy of the organisation's safeguarding policy and knows how to report concerns.

4.3 Volunteer selection and training

If there is any question over the application of the policy points below, then the member of staff concerned with volunteer selection for their department must refer to the Safeguarding Coordinator. All regular volunteers with access to children or vulnerable adults will be required to:

- undertake an enhanced CRB check
- be appropriately interviewed for the volunteer role
- provide references
- have been given a copy of this safeguarding policy and know how to report concerns
- receive appropriate training in safeguarding

Section 5 - Specific Guidelines

5.1 Recording & Registration

- A logbook shall be kept within the Children's and Young people's work and lodged with the lead children's worker for that day. This shall be so that any incident or accident can be reported. This will enable any pattern to emerge, so that each child and worker can be protected. The log book shall also include reporting forms and body charts. Any significant incident shall record the names of children involved, names of all adults involved, description of the incident, any allegations made and actions taken, signatures of all workers present and witnessed the incident and the date of the incident.
- A record of attendance and activities will be kept, noting which leaders and volunteers were present.
- All activities (Sunday and midweek) where children under the age of 14 are not accompanied by their parents or guardians will require a signed consent form which will be considered to remain in effect unless a parent/guardian provides written indication to the contrary. The consent form must include details of the child's full name, address, date of birth, parent/carer, home telephone number and GP, along with details of any special needs, health issues or allergies.

5.2 Supervision

- All children's groups, midweek clubs and Sunday crèche shall have one recognised leader each week (though not necessarily the same person every week) who shall be responsible to ensure that the guidelines of this policy and any other health and safety guidelines are followed.
- When working with groups of children or young people, it is important that the level of supervision is appropriate to their age group and their needs, which may be very specific.
- When an activity which involves children is taking place we should ensure that there is more than one adult supervising the activity, ideally one of whom should be female.
- All children at Toddler Groups or in our Community Café and Softplay Centre remain under the supervision of their parent/carer for the duration of the session.
- The following are the adult-to-child ratios recommended for voluntary organisations, and are based on Ofsted and NSPCC guidelines. It may not always be possible to adhere to these recommended ratios, however, every effort should be made to achieve the best level of supervision of children at all times. Where these supervision ratios cannot be met, cancellation of the group or activity should be considered.

Age group.	Number of children per adult.
0 - 23months	3
2 - 4 years	4
4 – 8years	6
9 – 12 years	8
13- 18 years	10

- When deciding on the number of adults required, it is important to bear in mind that **these ratios are guidelines only**: in certain situations it will be necessary to have a higher number of adults than our recommendations suggest. If, for instance, the children or young people have specific support needs, or a risk assessment identifies behaviour as a potential issue for the group or event, the number of supervising adults will need to be higher.

5.3 Whistle Blowing Policy

- Each worker should take responsibility for monitoring other workers, and be prepared to speak to them about any concerns.
- Leaders should encourage mutual support and care which allows all workers to be comfortable enough to discuss inappropriate attitudes or behaviour with co-workers or senior leaders.
- Each worker, regardless of leadership level, shall have a supervisor. There will be regular opportunities for meeting and discussing the work and any concerns that may arise, and to review the guidelines.
- Staff and Group Leaders will meet with the safeguarding coordinator and the Leadership on a regular basis to plan, appoint workers and review areas for concern.

Appendix 1: Code of good practice for all staff and volunteers

Sensible practice will enable workers to run activities safely, develop good relationships and minimise the risk of false accusation.

1.1 In general workers should:

- Avoid situations where a staff member or volunteer is on their own with a child. As far as possible, a worker should not be alone with a child or where their activities cannot be seen. Instead, wherever possible, workers should work in pairs, ideally being male and female.
- In the event of an injury to a child, accidental or not, ensure that it is recorded and witnessed by another adult in the organisation's accident log book
- Keep written records of any allegations a child makes against staff and volunteers and report in line with the Safeguarding Policy. (See Appendix 7 for form.)
- If a child or young person touches a staff member or volunteer inappropriately record what happened immediately and inform the child protection coordinator.
- Take all allegations, suspicions or concerns about abuse that a young person makes seriously (including those made against staff) and report them through the procedures.
- Provide an opportunity and environment for children to talk to others about concerns they may have.
- Provide an environment that encourages children and adults to feel comfortable and confident in challenging attitudes and behaviours that may discriminate others.
- Risk assess situations and activities to ensure all potential dangers have been identified.
- Treat everyone with dignity and respect.
- Respect confidentiality and privacy, but be clear that other adults are in the vicinity, and should not make promises of confidentiality they may not be able to, nor should keep.
- If a young child needs help with toileting, ensure that another worker is aware and that you inform the parent/carer afterwards.
- Workers should feel able to challenge leadership decisions in a constructive way when issues of child safety and protection are at stake.
- Learn to control and discipline children without using physical punishment of any sort.

1.2 Workers should not:

- Permit or accept abusive or discriminatory behaviour.
- Engage in inappropriate behaviour or contact.
- Use inappropriate or insulting language.

- Invade the privacy of children/young people when they are attending to their own personal needs (i.e. toileting).
- Show favouritism to anyone.
- Undermine or criticise others.
- Give personal money.
- Use social networks for personal communication with children and young people for whom they are responsible.
- Engage in rough physical or sexually provocative games or games that could be construed as such.
- Make sexually suggestive comments about or to a young person even in 'fun'
- Ridicule, reject or use as a scapegoat a young person.
- Touch in an inappropriate or intrusive way. Touch should be age and setting appropriate and always initiated by the child. A hug in public is different from one in private.
- Give lifts to young people on their own. If a situation occurs where this is unavoidable, the young person should sit in the rear of the car, and should be taken to an occupied address. Also ensure that another responsible adult knows of your actions.
- Develop 'favourites' or be secretive about 'special' relationships with young people.

1.3 Handling allegations or suspicions of abuse (all staff & volunteers)

If a child makes an allegation use the following general guidelines:

General Points

- Above everything else listen, listen, listen.
- Show acceptance of what the child says (however unlikely the story may sound)
- Keep calm.
- Look at the child directly.
- Be honest.
- Never promise confidentiality. Tell the child you will need to let someone else know. Explain that you have responsibility to report what the child has said to someone else.
- Even when a child has broken a rule, they are not to blame for the abuse.
- Be aware that the child may have been threatened or bribed not to tell.
- Never push for information. If the child decides not to tell you after all, then accept that and let them know that you are always ready to listen.
- Do not ask probing or leading questions designed to get the child to reveal more.
- Never stop a child who is freely recalling significant events.
- As soon as possible make a written note of the discussion, taking care to record the timing, setting and people present, as well as what was said. Please use the form in Appendix 7.
- Do not ask children to write a statement.
- **THE CHILD PROTECTION CO-ORDINATOR MUST BE INFORMED IMMEDIATELY.**

Helpful Responses

- You have done the right thing in telling.
- That must have been really hard.
- I am glad you have told me.
- It's not your fault.
- I will help you.

Don't Say

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where?
- Never make false promises
- Never make statements such as "I am shocked, don't tell anyone else"

Concluding

- Again reassure the child that they were right to tell you and show acceptance.
- Let the child know what you are going to do next and that you will let them know what happens (you might have to consider referring to Social Services or the Police to prevent a child or young person returning home if you consider them to be seriously at risk of further abuse).
- Contact the Safeguarding Coordinator.
- Under no circumstances should you investigate further yourself.
- Consider your own feelings and seek pastoral support if needed.

Appendix 2 – Definitions of Abuse

The four definitions of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children (2010)'

What is abuse and neglect?

Abuse and neglect are forms of maltreatment of a child. 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 for example, via the internet. They may be abused by an adult or adults, or another child or children.

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 fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse

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 developmental 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 maltreatment of a child, though it may occur alone.

Sexual abuse

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 assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming 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

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, 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); or
- ensure access to appropriate medical care or treatment.
- it may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Appendix 3 - Sources of harm to children

The harm or possible harm of a child may come to your attention in a number of possible ways;

1. Information given by the child, his/ her friends, a family member or close associate.
2. The child's behaviour may become different from the usual, be significantly different from the behaviour of their peers, be bizarre or unusual or may involve 'acting out' a harmful situation in play.
3. An injury which arouses suspicion because;
 - It does not make sense when compared with the explanation given.
 - The explanations differ depending on who is giving them (*e.g.*, differing explanations from the parent / carer and child).
 - The child appears anxious and evasive when asked about the injury.
4. Suspicion being raised when a number of factors occur over time, for example, the child fails to progress and thrive in contrast to his/her peers.
5. Contact with individuals who pose a 'risk to children' ('Guidance on Offences Against Children', Home Office Circular 16/2005). This replaces the term 'Schedule One Offender' and relates to an individual that that has been identified as presenting a risk or potential risk of harm to children. This can be someone who has been convicted of an offence listed in Schedule One of the Children and Young Person's Act 1933 (Sexual Offences Act 2003), or someone who has been identified as continuing to present a risk to children.
6. The parent's behaviour before the birth of a child may indicate the likelihood of significant harm to an unborn child, for example substance misuse, or, previous children removed from their carers.
7. Substance misuse – the potential for a child to be harmed as a result of the excessive use of alcohol, illegal and controlled drugs, solvents or related substances may occur during a young person's life. The use of drugs or other substances by parents or carers does not in itself indicate child neglect or abuse, and there is no assumption that a child living in such circumstances will automatically be considered under the child protection procedures. It is important to assess how parental substance use impacts upon the children or young people in the family.
8. Mental Health – Mental illness in a parent or carer does not necessarily have an adverse affect on the child or young person but it is important to assess its implications for any children involved in the family. The adverse affects of parental mental illness on the child are less likely when parental problems are mild, last for a short period of time, are not associated with family disharmony, and where there is another parent or family member who can respond to the child's needs and offer protection. Where mental illness is

accompanied by problem alcohol use, domestic violence or associated with poverty and social isolation, children are particularly vulnerable. The potential impact of a parental mental illness and the child's ability to cope with it is related to age, gender and individual personality (Working Together, HM Government 2010: pages 265-269).

9. Domestic Violence – The Home Office (2009) defines domestic violence as 'Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality' (HM Government 2010: page 262, paragraph 9.17). Domestic violence affects both adults and children in the family. Children and young people can suffer directly and indirectly if they live in a household where there is domestic violence. It is likely to have a damaging effect on the health and development of children. The amendment made in section 120 of the Adoption and Children Act 2002 to the Children Act 1989 clarifies the meaning of harm to include, for example, impairment suffered from seeing or hearing the ill-treatment of another. This can include children witnessing violence in the home. Domestic violence has an impact in a number of ways:
 - It can pose a threat to the physical well being of an unborn child, if a mother is kicked or punched.
 - Children may suffer injuries as a result of being caught up in violent episodes.
 - Children become distressed by witnessing the physical and emotional suffering of a parent.
 - The physical and psychological abuse suffered by the adult victim can have a negative impact upon their ability to look after their children.
 - The impact of domestic violence is exacerbated when the violence is combined with problematic alcohol or drug use.
 - People working with children should also be alert to the frequent inter-relationship between domestic violence and the abuse and neglect of children (Working Together, HM Government 2010: pages 262-265).
10. Bullying – This can be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (*e.g.*, hitting, kicking, theft), verbal (*e.g.*, racist or homophobic remarks, threats, name calling) and emotional (*e.g.*, isolating an individual from activities and social acceptance of their peer group). The damage inflicted by bullying (including bullying via the internet) can frequently be underestimated. Bullying can be through the use of electronic communication, *e.g.*, text or social network sites, and is commonly known as cyberbullying. Bullying can cause considerable distress,

to the extent that it can affect health and development and at the extreme significant harm. All settings in which children are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies (Working Together, HM Government 2010: pages 305-307).

11. Gang Activity – Children and young people who become involved in gangs are at risk of violent crime and as a result of this involvement are deemed vulnerable. Agencies and professionals have a responsibility to safeguard these children and young people and to prevent further harm both to the young person and other potential victims. Risks associated with gang activity include access to weapons (including firearms), retaliatory violence and territorial violence with other gangs. Other risks include increased likelihood of involvement in knife crime, sexual violence and substance misuse (Working Together, HM Government 2010: page 192, paragraph 6.5).

The guidance *Safeguarding children and young people who may be affected by gang activity* 2010(b) advises that agencies should follow the referral process in *Working Together to Safeguard Children* 2010 when they have concerns about a child's safety and welfare. In relation to those children and young people who may be affected by gang activity concerns may be raised that a child or young person is:

- not involved in gangs but vulnerable to, or at risk of, becoming involved in a gang
- non-gang-involved and at risk of harm from gang members
- gang-involved and at risk of harm through their own gang-related activities (HM Government 2010(b): page 22, paragraph 68).

Appendix 4: Signs and Symptoms of Abuse (children)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

Physical

Injuries not consistent with the explanation given for them

Injuries that occur in places not normally exposed to falls, rough games, etc

Injuries that have not received medical attention

Reluctance to change for, or participate in, games or swimming

Repeated urinary infections or unexplained tummy pains

Bruises on babies, bites, burns, fractures etc which do not have an accidental explanation*

Cuts/scratches/substance abuse*

Sexual

Any allegations made concerning sexual abuse

Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour

Age-inappropriate sexual activity through words, play or drawing

Child who is sexually provocative or seductive with adults

Inappropriate bed-sharing arrangements at home

Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations

Eating disorders - anorexia, bulimia

Emotional

Changes in mood or behaviour, particularly where a child withdraws or becomes clinging.

Depression, aggression, extreme anxiety.

Nervousness, frozen watchfulness

Obsessions or phobias

Sudden under-achievement or lack of concentration

Inappropriate relationships with peers and/or adults

Attention-seeking behaviour

Persistent tiredness

Running away/stealing/lying

Neglect

Under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care, etc

Appendix 5 - Vulnerable Adults

5.1 Definition of a Vulnerable Adult

A vulnerable adult is defined as a person aged 18 years or over:

“who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation”

(Department of Health Guidance “No Secrets” March 2000)

This can include people who are elderly or frail, suffer from a mental disorder, have a physical, sensory or learning disability, or have a debilitating illness. We recognise that there are also a number of adults who may have mild or moderate learning disabilities and who manage their lives relatively independently but remain exposed to risks of exploitation within their communities. There are also adults who may only be temporarily vulnerable, for example due to mental ill health that is transient.

“significant harm” refers to:

“ill-treatment (including sexual abuse and forms of ill-treatment that are not physical): the impairment of, or an avoidable deterioration in, physical or mental health and the impairment of physical, emotional, social or behavioural development”.

(Law Commission 1995 and quoted in “No Secrets”).

5.2 The Rights of Vulnerable Adults

All people have human rights in accordance with the Human Rights Act 1998. In this context the rights of vulnerable adults should be acknowledged and respected during the course of an investigation into abuse.

These rights include the right:

- to be left alone, undisturbed and free from intrusion into their affairs
- to be able to move freely about the community without fear of violence or harassment
- to be empowered through education and counselling where appropriate, to make choices about their lives and their relationships, including sexual relationships
- to engage in relationships and sexual activities that are wanted and understood by the person and that do not expose them to exploitation and/or sexual violence
- to live safely in the home of their choice without fear of domestic violence from caregivers or other service users
- to be given appropriate and accessible information about keeping themselves safe and exercising their human rights
- to have their money, goods and possessions treated with respect
- to be given the same respect and support as any other adult regardless of age, ability, gender, religion, sexual orientation or cultural background, when making a complaint or seeking help as a consequence of abuse
- to bring a formal complaint under the relevant agency procedure if they are not satisfied with the outcome of a vulnerable adult investigation
- to be supported in making their own decisions about how they wish to proceed in the event of abuse, to whom they wish to confide, and to know that their wishes will be followed unless it was considered necessary for their safety or the safety of others not to follow those wishes
- to receive appropriate support following abuse, which may include advice, support, education, counselling, therapy, treatment, access to redress etc.

5.3 Definition of Adult Abuse

There have been many definitions of adult abuse. Most stress a number of common elements even if they frequently vary in emphasis and scope. The Department of Health - No Secrets Guidance, March 2000, on the protection of vulnerable adults, defines abuse as ***“a violation of an individual’s human and civil rights by another person or persons”***

This global definition reflects the implementation of the Human Rights Act 1988.

The Council of Europe definition is given as:

“any act, or failure to act, which results in significant breach of a vulnerable person’s human rights, civil liberties, bodily integrity, dignity or well-being; including exploitative sexual relationships and financial transactions to which the person has not, or cannot validly consent. Abuse, whether intended or inadvertent, may be perpetrated by any person, (including another person with disabilities) and raises particular concern within a relationship based on,

- *a position of trust such as one with legal, professional or authority status*
- *unequal physical, economic or social power*
- *inequalities of gender, race, religion or sexual orientation*
- *responsibility for, and control over, day to day care*

It may arise out of poor or ill-informed practice; individual cruelty, negligence or neglect; inadequate and/or under-resourced service provision; public hostility or society’s indifference. It requires a proportional and equivalent response, one which recognises exploitation without cutting across autonomy, and which assures equitable access to support, justice and redress”.

5.4 Types of Abuse

A vulnerable adult may be abused by a wide range of people including relatives, family members, professional staff, paid care workers, volunteers, other service users, neighbours, friends etc - in other words, anyone! Abuse can take place within any context - if a person lives alone, with family, in nursing or care settings, in support services etc.

For ease of understanding, abuse is often viewed in terms of types or categories. However, it must be emphasised that abusive situations are rarely as tidy or straightforward as putting them into types or categories might suggest. Abuse may consist of a single or repeated acts over time, of one particular type or of several types. It may be physical, verbal, psychological, or an act of neglect or omission. It may occur when a vulnerable person is persuaded to enter into a transaction (sexual or financial) to which he or she has not consented or is unable to consent to. Abuse can occur in any relationship and it may result in harm to, or exploitation of, the person exposed to it.

Although some abuse comes to light through disclosure by the vulnerable adult to someone whom they trust, there are times when abuse only comes to light through situations or events that may indicate to professionals involved that all is not well.

Patterns of abuse vary greatly, and may include the following:

- Serial abuse where perpetrator seeks out and grooms vulnerable adults - sexual abuse and some forms of financial abuse fall into this pattern
- Long term abuse in context of family relationships e.g. domestic violence
- Opportunist abuse e.g. theft of property left lying about
- Situational abuse resulting from build up of stress or because of challenging behaviour
- Neglect if carer cannot respond to care needs
- Institutional abuse (see above ‘abuse in care settings’)
- Unacceptable ‘treatments’ or programmes which may include sanctions or punishments such as withholding food and drink, seclusion, inappropriate use of control and restraint, misuse of medication
- Misappropriation of benefits or misuse of vulnerable adult’s money, fraud or intimidation with respect to finance, property, wills etc

Listed below in brief are types of abuse and some definitions.

- **Physical Abuse:** includes hitting, slapping, pushing, kicking, misuse of medication, restraint or inappropriate sanctions
- **Sexual Abuse:** includes rape and sexual assault or sexual acts to which the vulnerable adult has not consented, could not consent to, or was pressured into consenting to
- **Psychological or Emotional Abuse:** includes threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, isolation or withdrawal from services or supportive networks.
- **Financial and/or Material Abuse:** includes theft, fraud, exploitation, pressure in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits
- **Neglect/Acts of Omission:** includes ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition or heating
- **Discriminatory Abuse:** includes racism, sexism, abuse based on a person's disability and other forms of harassment, slurs or similar treatment.

5.5 Predisposing Factors

Abuse occurs for many reasons and the causes are not always understood.

Some risk factors have been identified, to include:

- environmental problems - overcrowding, poor housing, lack of facilities
- financial problems - low income, dependent vulnerable adult adding to financial problems, person unable to work due to caring role, debt arrears, low uptake on benefits
- social Isolation (those abused usually have fewer social outlets than those who are not)
- history of a poor quality long term relationship between abused and abuser, a pattern of family violence may exist
- high levels of stress due to dependency issues e.g. increased dependency of the vulnerable adult, changes in personality and behaviour, unwanted changes in lifestyle for carer, lack of practical and emotional support to carer, multiple dependents to care for, lack of free time and space for carer, personal problems of carer, role reversal where for example domineering parent becomes dependent
- person who abuses has a history of mental health problems or a personality disorder or a drug or alcohol problem
- care settings where staff are inadequately trained or supervised, work in isolation or have little support from managers, where there is high staff turnover, or where staff do not interact with other professionals.

Appendix 6 Self Declaration Form for Staff Appointments Requiring a Disclosure

STRICTLY CONFIDENTIAL

As an organisation we undertake to meet the requirements of the Data Protection Act 1998 and all other relevant legislation. All applicants are asked to complete this form and return it in a separate sealed envelope

Appointment applied for: _____

Have you ever been charged with, cautioned or convicted in relation to any criminal offence; or are you at present the subject of a criminal investigations/pending prosecution?

Yes No (please tick)

If yes, please give details including the nature of the offences and the dates. Please give details of the court(s) where your conviction (s) were heard, the type of offence and sentence(s) received. Could you also give details of the reasons and circumstances that led to the offence(s). Continue on a separate sheet if necessary.

POLICE INVESTIGATIONS

This should include relevant police non-conviction information. Please complete this section if the post you are applying for requires an Enhanced Disclosure check.

Have you ever been the subject of a police investigation that didn't lead to a criminal conviction?

Yes No (please tick)

If yes, please give details below, including the date of the investigation, the Police Force involved, details of the investigation and the reason for this, and disposal(s) if known.

To your knowledge have you ever had any allegation made against you, which has been reported to, and investigated by, Social Services/Social Work Department (Children's or Adult Social Care)?

Yes No (please tick)

If yes, please provide details, we will need to discuss this with you.

Has there ever been any cause for concern regarding your conduct with children, young people, vulnerable adults? Please include any disciplinary action taken by an employer in relation to your behaviour with adults.

Yes No (please tick)

If yes, please give details.

DECLARATION

To help us ensure that we are complying with all relevant safeguarding legislation, please read the accompanying notes and complete the following declaration.

I (full name) _____ of

(address) _____

Confirm that I am not barred from working with children/vulnerable adults from engaging in regulated or controlled activity.

I consent to a criminal records check if appointed to the position for which I have applied. I am aware that details of pending prosecutions, previous convictions, cautions, or bindovers against me will be disclosed along with any other relevant information which may be known to the police, and Lists held in accordance with the Safeguarding Vulnerable Groups Act 2006.

I understand that a check will be made with the Independent Safeguarding Authority and that it is an offence for any person to commence Regulated Activity without first being ISA-registered.

I agree to inform the person within the organisation responsible for processing applications for Criminal Records Bureau/SCRO/Access NI Service checks if I am convicted of an offence after I take up any post within the place of worship/organisation*. I understand that failure to do so may lead to the immediate suspension of my work with children or vulnerable adults and/or the termination of my employment.

I agree to inform the person within the organisation responsible for processing applications for Criminal Records Bureau/SCRO/Access NI Service if I become the subject of a police and/or a social services/(Children's Social care or Adult Social Services)/social work department investigation. I understand that failure to do so may lead to the immediate suspension of my work with children or vulnerable adults and/or the termination of my employment.

Signed: _____ Date: _____

Appendix 6 cont'd Legalese

The Disclosure of any offence may not prohibit employment. Please refer to our Rehabilitation of Offenders Policy.

As this post involves substantial, unsupervised contact with children, young people and/or vulnerable adults all applicants who are offered an appointment will be asked to submit to a criminal records check before the position can be confirmed. You will be asked to apply for an Enhanced Disclosure through The Criminal Records Bureau (CRB) (England & Wales).

As the position is exempted under the Rehabilitation of Offenders Act this check will reveal any details of cautions, reprimands or final warnings, as well as formal convictions. Because of the nature of the work for which you are applying, this position is exempt from the provision of section 4(ii) of the Rehabilitation of Offenders Act 1974 (Exemptions Orders as applicable within the UK), and you are not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act. You must therefore declare all convictions whenever they occurred. In the event of appointment, any failure to disclose such convictions could result in the withdrawal of approval to work with children or vulnerable adults within the church/organisation.

This process is subject to a strict code to ensure confidentiality, fair practice and security of any information disclosed. The CRB/SCRO/PVA (NI) Service Code of Practice and our own procedures are available on request for you to read. It is stressed that a criminal record will not necessarily be a bar to appointment, only if the nature of any matters revealed could be considered to place children or vulnerable adults at risk. As an organisation we agree to abide by the Code of Practice on the use of personal data in employee/employer relationships under the Data Protection Act 1998 as well as the expectations of the CRB.

As a condition of employment we ask that you keep us informed of any other work (either paid or voluntary) which you are undertaking which involved working with children or vulnerable adults. Should ever we need to refer an individual to any of the lists of people deemed unsuitable for working with children or vulnerable adults then we would also inform them of any knowledge we have of that individual working in any other capacity with children/vulnerable adults.

Notes for England, Wales & Northern Ireland Only - Children and Young People

Under the Safeguarding Vulnerable Groups Act 2006 it is an offence for any organisation to offer employment to anyone who has been convicted of certain specific offences, or included on either of the two barred lists under the Independent Safeguarding Authority Vetting and Barring Scheme.

Note: The ISA Barred Lists replace the Protection of Children Act (PoCA) List, List 99 and the Protection of Vulnerable Adults (PoVA) List in England and Wales, and the Disqualification from Working with Children (DWC) List, the Unsuitable Persons List (UP List) and the Disqualification from Working with Vulnerable Adults (DWVA) List In Northern Ireland as well as the system of Disqualification Orders, which was operated by the Criminal Justice System.

Definition of regulated activity: Any activity of a specified nature that involves contact with children or vulnerable adults frequently, intensively and/or overnight. (Such activities include teaching, training, care, supervision, advice, treatment and transportation.)

- Any activity allowing contact with children or vulnerable adults that is in a specified place frequently or intensively. (Such places include schools and care homes.)
- Fostering and childcare. Any activity that involves people in certain defined positions of responsibility. (Such positions include school governor, director of children's services and director of adult social services, and trustee of certain charities.)
- 'Regulated activity' is when the activity is frequent (once a week or more), 'intensive' (takes place on four or more days in a 30-day period) or overnight.

Appendix 7. Responding to Abuse - Worker Reporting Form

CONFIDENTIAL

Name of Places of Worship/Organisation _____

Name of Child/Young Person/Vulnerable Adult _____

Address _____

Date of Birth _____ / _____ / _____

Name of Person Reporting Incident _____

Date _____ / _____ / _____ Time of incident _____

Sequence of Events/Actual Words Used/Observations

Action Taken (including person(s) contacted)

Date _____ / _____ / _____ Time _____

Notes: _____

Appendix 8 Resources and Internet links

This section acts as a guide, rather than an exhaustive list. Its aim is to provide you with some useful resources and links.

1. HM Government (2010) *Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of Children*. Department of Children Schools and Families. Internet link:
<http://publications.dcsf.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-00305-2010>
2. HM Government (2007) *Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004*, London. Internet link:
<http://www.dcsf.gov.uk/everychildmatters/resources-and-practice/IG00042/>
3. HSCB (2010) *Procedures and Guidance*. Hull Safeguarding Children Board. NB - This document is currently under revision – Please visit Hull Safeguarding Children Board on the following internet link:
http://www.hullcc.gov.uk/portal/page?_pageid=221,75119&_dad=portal&_schema=PORTAL
4. DfES (2006) *What to do if you're worried a child is being abused*. Internet link:
www.dcsf.gov.uk/everychildmatters/resources-and-practice/IG00182/
5. DoH (2005) *Responding to domestic abuse: A handbook for health professionals*. Internet link:
http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4126161
6. Cleaver, H., Nicholson, D., Tarr, S. and Cleaver, D. (2007) *Child Protection, Domestic Violence and Parental Substance Misuse: Family Experiences and Effective Practice*. London: Jessica Kingsley Publishers.
7. Cleaver, H., Unell, I. and Aldgate, A. (2010) *Children's Needs – Parenting Capacity: The impact of parental mental illness, learning disability, problem alcohol and drug use, and domestic violence on children's safety and development*. 2nd Edition. London: Jessica Kingsley Publishers.
8. HM Government (2010b) *Safeguarding Children and Young People who may be affected by Gang Activity*. Internet link:
<http://publications.everychildmatters.gov.uk/default.aspx?PageFunction=productiondetails&PageMode=publications&ProductId=DCSF-00064-2010>
9. DCSF (2009) *Safe from bullying in youth activities*. Internet link:
http://publications.education.gov.uk/eOrderingDownload/Safe_from_Bullying-Youth_Activities.pdf
10. DCSF (2009) *Cyberbullying: Supporting School Staff*. Internet link:
<http://publications.education.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-00242-2009>
11. DCSF (2007) *Cyberbullying Safe to Learn: Embedding anti-bullying work in schools*. Internet link:
http://www.safesocialnetworking.com/img/safety/Cyberbullying_2.pdf
12. Get Safe Online: awareness and advice. Internet link: www.getsafeonline.org
13. CEOP Website - Think U Know: awareness and advice. Internet link: <http://www.thinkuknow.co.uk/>
14. Child Protection in Sport Unit (CPSU); www.thecpsu.org.uk/
15. Safe Network: www.safenetwork.org.uk

Appendix 9 National and Local Guidance

This Safeguarding Policy should be read in conjunction with the Hull Safeguarding Children Board (HSCB) Guidelines and Procedures, accessible via: www.hullsafeguardingchildren.org, and the equivalent guidelines for adults which can be accessed at www.safeguardingadultshull.com.

In accordance with the Children Act 2004 it is a statutory responsibility for key agencies coming into contact with children and young people, to make arrangements to ensure that in discharging their functions, they have regard to the need to safeguard and promote the welfare of children (Section 11, Children Act 2004). Where private or voluntary organisations come into contact with or offer services to children they should, as a matter of good practice, take account of this guidance and follow it as far as possible. The following national guidance should also be referred to:

- The Children Act (1989)
- The Children Act (2004).
- Every Child Matters
- Working Together To Safeguard Children: A Guide to Inter-Agency Working To Safeguard and Promote the Welfare of Children (HM Government 2010).
- Human Rights Act 1998
- Criminal Justice & Court Services Act 2000
- The Protection of Children Act 1999
- The Sexual Offences Act 2003
- What To Do If You're Worried A Child Is Being Abused (Department of Health, Home Office, Department for Education & Skills, the Lord Chancellor's Department, the Office of the Deputy Prime Minister & the Department for Culture, Media & Sport 2006)
- Safeguarding Vulnerable Groups Act 2006
- AMA Guidance for Safer Working Practice for Adults who Work with Children and Young People (2007)
- Information Sharing: Guidance for practitioners and managers. HM Government (2006)