

CHILD PROTECTION POLICY

The following named designated person has been nominated by this organisation to refer allegations or suspicions of neglect or abuse to the statutory authorities.

The named designated person is: Nicola Ritchie – 07875 049 922

In the absence of the named designated person, the matter should be brought to the attention of the second named responsible person.

The second named designated person is: Beverley Verity – 07944 780 818

Other relevant numbers:

The Local Safeguarding Children Board is **01908 253 169/70**

Local Safeguarding Children's Board out of hours is **01908 265 545**

Police Child Protection Team is **01908 253 169**

CHILD PROTECTION POLICY

Objective

To contribute to the personal safety of all children/young people who attend any of our services by promoting Child Protection awareness, good practice and sound procedures.

Policy statement

Milton Keynes Christian Centre [hereafter MKCC] is a contemporary city church with a range of community-oriented activities for children and young people. The Governance Board [hereafter referred to as GB] recognises the importance of its ministry to children and young people and its responsibility to protect and safeguard the welfare of children and young people entrusted to MKCC'S care.

The policy and attached practice guidelines prepared in consultation with legislation and government guidance – in particular 'What To Do If You're Worried A Child Is Being Abused'.

The GB is committed to on-going child protection training for all children/youth workers and will regularly review the operational guidelines attached.

For the purposes of this document the term children and young people refers to those under the age of 18 years.

This policy is based on the following principles:

- The welfare of the child/young person is paramount
- We recognise 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.
- We believe 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/young people, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity, have the right to protection from abuse.
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately
- Staff/volunteers are trained to understand the nature of abuse and to be alert to matters of concern
- All staff/volunteers working at MKCC have a responsibility to report concerns to the designated person with responsibility for child protection or to the second named person.

We aim to safeguard children/young people by:

- adopting child protection guidelines through procedures and a code of conduct for staff/volunteers
- sharing information about child protection and good practice with children/young people, parents and carers and staff/volunteers
- sharing information about concerns with agencies who need to know, and involving parents and children/young people appropriately
- following carefully the procedures for safe recruitment and selection of staff/volunteers
- providing effective management for staff/volunteers through support, supervision and training
- Reviewing our policy and good practice regularly.

The role of the named responsible person

Every place of worship or organisation should have a named person who acts as the designated child protection person, who must undergo child protection training. It is the responsibility of this person to make themselves available for consultation by staff, volunteers, visitors and children/young people and their families.

The name of the named designated person and information about their duties should be visible, so that everyone [including parents/carers] are aware of who to talk to if they have concerns.

In the absence of the designated child protection person, a deputy must be identified.

The named person's role includes:

- ensuring that this policy is implemented throughout MKCC
- ensuring that all necessary enquiries, procedures and investigations relating to child protection are carried out
- reporting results of screening enquiries and preserving 'need to know' levels of confidentiality and access to secure records
- ensuring that all confidential records relating to child protection matters are kept secure
- liaising with social services at a formal and informal level on child protection matters, also with the police
- reporting allegations and suspicion of abuse to the appropriate authorities
- ensuring that there is adequate induction and training relating to child protection matters
- ensuring that each activity carried out by the organisation is sound in terms of child protection as regards personnel, practices and premises
- checking all incident reports made by staff/volunteers, countersigning them and making such reference to the appropriate authority as is appropriate.

Good practice

Before any activity starts, the designated person shall ensure that adequate child protection procedures are in place, as follows.

- Parent's must fill out a consent form for each child/young person attending an event.
- Team members will record any unusual events on the accident/incident form, unless this includes anything confidential.
- Where possible, staff/volunteers should not be alone with a child/young person, although it is recognised that there may be times when this may be necessary, however accountability is always required and an appropriate space should be sought where other staff/volunteers can see.
- MKCC recognises that physical touch between adults and children/young people can be healthy and acceptable in public places. However, staff/volunteers will be discouraged from this in circumstances where an adult and child/young person are alone together.
- All team members should treat all children/young people with dignity and respect in their attitude, language and actions.

Recognising and responding appropriately to an allegation or suspicion of abuse

Understanding abuse and neglect

Defining child abuse or abuse against an 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 adult.

In order to safeguard those in our organisations 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.

Also for adults 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.

Details of definitions, signs and symptoms of abuse can be found in the appendix.

Safeguarding awareness and good practice

The GB is committed to the ongoing training and development for all workers, developing a culture of awareness of safeguarding issues to help protect everyone. All our workers will receive an induction process and recognised safeguarding training delivered by those authorised. The training received is from the Milton Keynes Safeguarding Board. The training will raise awareness of good practice; all personnel should be encouraged to demonstrate exemplary behaviour in order to protect themselves from false allegations. The following are common sense examples of how to create a positive culture and climate.

Good practice means:

- always working in an open environment (for example, avoiding private or unobserved situations and encouraging open communication with no secrets)
- treating all children/young people equally, and with respect and dignity
- always putting the welfare of each child/young person first
- maintaining a safe and appropriate distance with children/young people (for example, it is not appropriate for staff/volunteers to have an intimate relationship with a child/young person or to share a room with them)
- building balanced relationships based on mutual trust, empowering children/young people to share in the decision-making process
- making activities and other off-site activities, fun, enjoyable and safe
- keeping up to date with technical skills, qualifications and insurance
- involving parents/carers wherever possible
- Ensuring that staff/volunteers work in pairs for accountability.(for this purpose a spouse does not count as an accountable person)

- ensuring that, when mixed groups are taken away, they are always accompanied by a male and a female member of staff/volunteer (but remember that same-gender abuse can also occur)
- ensuring that, at residential events, adults do not enter children's/young people's rooms or invite children/young people into their rooms
- being an excellent role model, including not smoking or drinking alcohol in the company of children/young people
- giving enthusiastic and constructive feedback rather than negative criticism
- recognising the developmental needs and capacity of children/young people and not pushing them against their will
- securing written consent from parents/carers for staff to act in loco parentis, if the need arises to administer emergency first aid and/or other medical treatment
- keeping a written record of any injury that occurs, along with the details of any treatment given
- Requesting written consent from parents/carers, if it is necessary for staff/volunteers to transport children/young people in their cars. (two unrelated adults are able to transport children/young people but only when permission has been given by parent/carer and the relevant member of staff for the event)

Practices to be avoided

The following should be avoided except in emergencies. If cases arise where these situations are unavoidable, it should be with the full knowledge and consent of the person in charge at the event or of the child/young person's parents – for example, if a child/young person sustains an injury and needs to go to hospital, or if a parent/carer fails to arrive to pick up a child/young person at the end of a session.

- Avoid spending excessive amounts of time alone with children/young people away from others.
- Avoid being in a situation where you are alone with a child, e.g. taking a child/young person to an event, or dropping them off in your car.

Practices never to be sanctioned

The following should never be sanctioned. You should never:

- engage in rough, physical or sexually provocative games, including horseplay
- use corporal/physical punishment to manage behaviour
- share a room with a child/young person
- allow or engage in any form of inappropriate touching
- allow children/young people to use inappropriate language unchallenged
- make sexually suggestive comments to a child/young person, even in fun
- reduce a child/young person to tears as a form of control
- allow allegations made by a child/young person to go unchallenged, unrecorded or not acted upon
- do things of a personal nature for children/young people or disabled adults that they are able to do for themselves
- Invite or allow children/young people to stay with you at your home unsupervised.

Please note

It may sometimes be necessary for staff/volunteers to do things of a personal nature for children/young people, particularly if they are young or disabled. These tasks should be carried out only with the full understanding and consent of parents/carers and of the child/young person involved. There is a need to be responsive to a person's reactions. If a person is fully dependent on you, talk with him/her about what you are doing and give choices, where possible. This is particularly so if you are involved in any dressing or undressing of outer clothing or where there is physical contact – for example, lifting or

assisting a child/young person to carry out particular activities. Avoid taking on the responsibility for tasks for which you are not appropriately trained.

Allegations against a member of staff/volunteer

The organisation will fully support and protect anyone who, in good faith, reports their concern that a colleague is, or may be, abusing a child/young person. Where there is a complaint against a member of staff/volunteer, there may be three types of investigation: criminal investigation, child protection investigation or disciplinary/misconduct investigation. The results of the police and child protection investigation may well influence the disciplinary investigation, but this will not necessarily be the case.

Concerns about poor practice

If, following consideration, the allegation is clearly about poor practice, this will be dealt with as a misconduct issue.

If the allegation is about poor practice by the organisation's designated person, or if the matter has been handled inadequately and concerns remain, it should be reported to GB, addressed to Mark Sherratt, who will advise how to deal with the allegation and whether or not they should initiate disciplinary proceedings.

Internal enquiries and suspension

The designated person will make an immediate decision about whether any individual accused of abuse should be temporarily suspended, pending further police and social services inquiries.

Irrespective of the findings of the social services or police inquiries, the organisation will assess all individual cases to decide whether a member of staff or volunteer can be reinstated and how this can be handled sensitively. This may be a difficult decision, particularly where there is insufficient evidence to uphold any action by the police. In such cases, the organisation must reach a decision based upon the available information. This might suggest that, on a balance of probability, it is more likely than not that the allegation is true. The welfare of the child/young person must remain of paramount importance throughout.

Responding to allegations of abuse

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

1 You must report your concerns immediately to the named responsible person at your organisation.

The named designated person is Nicola Ritchie (07875 049 922) who is nominated by the GB to act on their behalf in dealing with the allegation or suspicions of neglect or abuse, including referring the matter on to the statutory authorities.

In the absence of the nominated person or if the suspicions in any way involve the nominated person, then the report should be made to the deputy Beverley Verity (07944 780 818)

The named responsible person will:

- obtain information from staff/volunteers, children/young people or parents/carers who have child protection concerns and record this information
- assess the information quickly and carefully and ask for further information, as appropriate
- consult with a statutory child protection agency such as the local social services department, NSPCC or CCPAS to clarify any doubts or worries (all contact numbers are at the end of the policy)
- ensure that the parents/carers of the child/young person are contacted as soon as possible, following advice from the social services department

- make a referral to a statutory child protection agency or to the police without delay.

If the organisations named responsible person is the subject of the suspicion/allegation, the report must be made to the GB, addressed to Mark Sherratt who will refer the allegation to social services.

2 Suspicions will not be discussed with anyone other than those named above.

3 It is the right of any individual to make direct referrals to the child protection agencies. If, for any reason, you believe that the designated people have not responded appropriately to your concerns, then it is up to you to contact the child protection agencies directly.

4 If a child makes a disclosure of abuse:

- make notes as soon as possible (ideally within one hour of being told)
- write down exactly what the child/young person has said, what you said in reply and what was happening immediately before you were told (for example, what activity was taking place)
- record dates, times and when you made the record
- keep all your handwritten notes secure
- report your discussion to the designated person as soon as possible
- if the named responsible person is implicated, you need to report to the second designated person
- if both are implicated, report to the chair of the GB who will act on behalf of the organisation
- do not discuss your suspicions or allegations with anyone other than those nominated above
- the designated person must consider carefully whether or not it is safe for a child/young person to return home to a potentially abusive situation, and, if necessary, they should take immediate action to contact social services in order to discuss putting safety measures into effect.

Allegations of physical injury, neglect or emotional abuse:

If a child/young person has a symptom of physical injury neglect or emotional abuse, the named responsible person will:

- contact social services for advice in cases of deliberate injury or concerns about the safety of the child/young person, but they must not inform the parents/carers
- seek emergency medical attention if necessary
- In other circumstances for lesser concerns (e.g. poor parenting), encourage the parent/carer to seek help from social services, but not if this places the child at risk of significant harm.
- in the case of real concern, contact social services for advice, NSPCC or CCPAS for advice.

Allegations of sexual abuse

In the event of allegations or suspicions of sexual abuse, the named responsible person will:

- contact the social services duty social worker for children and families directly, but must not speak to the parent or to anyone else
- seek advice from the Local Safeguarding Children Board
- collect and clarify the precise details of the allegation or suspicion and provide this information to social services, but should not attempt to carry out any investigation into the allegation or suspicion of sexual abuse
- While allegations or suspicions of sexual abuse should normally be reported to the named responsible person, their absence should not delay referral to social services.

Responding to a child making an allegation of abuse

- It is important **not** to make promises that you may not be able to keep. Do **not** say that you will keep confidential what a child/young person is about to tell you, as you may have a duty to share it with others.
- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others.
- Stay calm and listen carefully to what the child/young person is saying.
- Allow the child/young person to continue at their own pace.
- Ask questions for clarification only and at all times avoid asking questions that suggest a particular answer.
- Reassure the child/young person that they have done the right thing in telling you.
- Tell them what you will do next and with whom the information will be shared.
- As soon as possible, record in writing what was said, using the child's/young person's own words.
- Make a note of the date, time, any names mentioned and to whom the information was given, and ensure that the record is signed and dated.

Helpful statements to make

- 'I believe you (showing acceptance of what the child/young person says).'
- 'Thank you for telling me.'
- 'It's not your fault.'
- 'I will help you.'

Do not say:

- 'Why didn't you tell anyone before?'
- 'I can't believe it!'
- 'Are you sure that this is true?'
- 'Why? Who? When? Where?'

Never make promises you can't keep.

Support for dealing with the aftermath of abuse

Consideration should be given to the kind of support that children/young people, parents/carers and members of staff/volunteers may need. Use of helplines, support groups and open meetings will maintain an open culture and help the healing process. The Directory of the British Association for Counselling is available from the British Association for Counselling, 1 Regent Place, Rugby CV21 2PJ, tel: 01788 550 899, fax: 01788 562189.

Safe recruitment

The GB is committed to the safe recruitment of all volunteers and that they will be trained and supported in their roles. All staff and volunteers will work in teams or in open environments where they are not alone with children.

All staff/volunteers will:

- be given a clear role description, setting out expectations for their work and conduct
- Complete an application form and self-declaration form.

- Supply the names of two referees, who will be contacted to send references preferably in writing (however telephone references can be sought as a last measure)
- be required to produce either permission to check their DBS if subscribed to the update service or go through the Disclosure and Barring Service, giving photographic and other evidence of identity and including a formal declaration of any criminal convictions
- Go through child protection policy and procedure on induction, followed by full safeguarding training. Plus a raised awareness of child protection twice a year in staff meetings to remind them of procedures and important concepts

Important contacts outside the organisation

- Local Safeguarding Children Board: **01908 253 169/70**
- Local Safeguarding Children's Board out of hours: **01908 265 545**
- Social services office: **01908 253 169**
- Social Services Emergency number: **01908 265 545**
- Police Child Protection Team: **01908 253 169**
- Churches Child Protection Advisory Service (CCPAS) **0845 120 4550**
- NSPCC Child Protection Helpline: **0800 800 5000**
- ChildLine: **0800 1111**

Appendix 1

Definitions of abuse

These definitions are based on those from *Working together to safeguard children* (Department of Health, Home Office, Department for Education and Employment, 1999).

Physical abuse

- Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing harm to a child/young person.
- Physical harm may also be caused when a parent/carer feigns the symptoms of, or deliberately causes, ill health to a child/young person whom they are looking after. This situation is commonly described as factitious, fabricated or induced illness in children/young people or ‘Munchausen syndrome by proxy’.
- A person might do this because they enjoy or need the attention they get through having a sick child/young person.
- Physical abuse, as well as being the result of a deliberate act, can also be caused through omission or the failure to act to protect.

Emotional abuse

- Emotional abuse is the persistent emotional ill treatment of a child/young person, such as to cause severe and persistent adverse effects on the child’s/young person’s emotional development. It may involve making a child/young person feel or believe that they are worthless, unloved, inadequate or valued only insofar as they meet the needs of the other person.
- It may feature expectations being imposed on a child/young person that are inappropriate for their age or stage of development. It may also involve causing a child/young person to feel frequently frightened or in danger, or the exploitation or corruption of a child/young person.
- Some level of emotional abuse is involved in all types of ill treatment of a child/young person, though it may occur alone.

Sexual abuse

- Sexual abuse involves forcing or enticing a child/young person to take part in sexual activities, whether or not the child/young person is aware of, or consents to, what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex, or non-penetrative acts such as fondling.
- Sexual abuse may also include non-contact activities, such as involving children/young people in looking at, or in the production of, pornographic material, or watching sexual activities, or encouraging children/young people to behave in sexually inappropriate ways.
- Boys and girls can be sexually abused by both males and females, whether adults or other children/young people.

Neglect

- Neglect is the persistent failure to meet a child’s/young person’s basic physical and/or psychological needs, that is likely to result in the serious impairment of the child’s/young person’s health or development. It may involve a parent or a carer failing to provide adequate food, shelter or clothing, leaving a child/young person at home alone or failing to ensure that a child/young person gets appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s/young person’s basic emotional needs.
- It is accepted that, in all forms of abuse, there are elements of emotional abuse and that some children/young people are subjected to more than one form of abuse at any time.

These four definitions do not minimise other forms of maltreatment.

Note

Recent guidance identifies other sources of stress for children/young people and families, such as social exclusion, domestic violence, the mental illness of a parent/carer or drug and alcohol misuse. These may have a negative impact on a child/young person's health and development and may be noticed by an organisation caring for a child/young person. If it is felt that a child/young person's well-being is adversely affected by any of these situations, the same procedures should be followed.

The following signs may or may not be indicators that abuse has taken place but the possibility should be considered.

Physical signs of abuse

Physical signs of abuse may include:

- any injuries not consistent with the explanation given for them
- injuries which occur to the body in places which are not normally exposed to falls or games
- unexplained bruising, marks or injuries on any part of the body
- bruises which reflect hand marks or fingertips (from slapping or pinching)
- cigarette burns
- bite marks
- broken bones
- scalds
- injuries which have not received medical attention
- neglect, undernourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care
- Repeated urinary infections or unexplained stomach pains.

Changes in behaviour which can also indicate physical abuse may include:

- fear of parents/carers being approached for an explanation
- aggressive behaviour or severe temper outbursts
- flinching when approached or touched
- reluctance to get changed in front of others – for example, wearing long sleeves in hot weather
- depression
- withdrawn behaviour
- running away from home.

Appendix 2

Emotional signs of abuse

Emotional signs of emotional abuse may include:

- a failure to thrive or grow, particularly if a child/young person puts on weight in other circumstances – for example, in hospital or away from their parents/carers
- sudden speech disorders
- persistent tiredness
- Development delay, in terms of either physical or emotional progress.

Changes in behaviour which can also indicate emotional abuse include:

- obsessions or phobias
- sudden underachievement or lack of concentration
- inappropriate relationships with other children and/or adults
- being unable to play
- attention-seeking behaviour
- fear of making mistakes
- self-harm
- fear of the parent/carer being approached regarding their behaviour.

Sexual abuse

Physical signs of sexual abuse may include:

- pain or itching in the genital/anal area
- bruising or bleeding near genital/anal areas
- sexually transmitted disease
- vaginal discharge or infection
- stomach pains
- discomfort when walking or sitting down
- Pregnancy.

Changes in behaviour which can also indicate sexual abuse include:

- sudden or unexplained changes in behaviour, such as becoming withdrawn or aggressive
- fear of being left with a specific person or group of people
- having nightmares
- running away from home
- sexual knowledge which is beyond the child's/young person's age or developmental level
- sexual drawings or language
- bed-wetting
- eating problems such as overeating or anorexia
- self-harm or mutilation, sometimes leading to suicide attempts
- a child/young person saying they have secrets that they cannot tell anyone about
- substance or drug abuse
- suddenly having unexplained sources of money

- not being allowed to have friends (particularly during adolescence)
- Acting in a sexually explicit way with adults.

Neglect

Physical signs of neglect may include:

- constant hunger, sometimes stealing food from other children/young people
- being constantly dirty or smelly
- loss of weight or being constantly underweight
- Inappropriate dress for the conditions.

Changes in behaviour which can also indicate neglect include:

- complaining of being tired all the time
- not requesting medical assistance and/or failing to attend appointments
- having few friends
- Mentioning being left alone or unsupervised.

**Appendix 3 - Reporting Safeguarding Concerns.
Confidential recording sheet.**

Child Name: D.O.B		Date:	
Time of Incident		Time of writing report	
Area		Any other volunteers present	
Details of Incident:			
What happened:			
Who was involved:			
What did you do:			
Who did you report to:			
Actions Taken:			
Signed:		Designated person signed:	
Date:		Date:	

