

Safeguarding Children Policy

Policy Statement

Biddulph Moor Village Hall is committed to ensuring the safeguarding of children from harm through the development and implementation of effective policies and best practice.

Relevant legislation and guidance relating to the protection of children are reflected in this policy.

Designated person for safeguarding

The current designated safeguarding lead is Jennifer Dulson.

This policy is based on the following principles

- The welfare of the child is paramount
- All children, 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
- Everyone has a responsibility to report concerns to a designated person with responsibility for safeguarding.

Dealing with cases of Abuse

1. Definitions of abuse

Abuse may be defined as the wrongful application of power by someone in a dominant position. It involves an imbalance of power and exploitation without a full and informed consent. Abuse can take several different forms and may be a single act or repeated acts.

Please see Appendix 1 for a further breakdown of categories and types of abuse.

2. Responsibility for Safeguarding during hiring of Biddulph Moor Village Hall

During any hire or use of Biddulph Moor Village Hall for any event, all matters regarding Safeguarding will be the responsibility of the Hirer/Organiser of the event. In accepting the Terms & Conditions of Biddulph Moor Village Hall, the Hirer/Organiser accepts full responsibility for Safeguarding.

3. Recognising and Responding to Abuse

There are many potential indicators and signs of abuse, most of which may also be signs of other forms of injury or ill health. Those working with children, parents and carers should familiarise themselves.

Please see Appendix 2 for a list of potential signs of abuse.

4. What to do if you suspect that abuse may have occurred

1. You must report the concerns immediately to the designated person or to the local authority
2. Suspicions will not be discussed with anyone other than those nominated above.

5. Responding to a child making an allegation of abuse

- Stay calm, listen carefully to what is being said

- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others-do not promise to keep secrets
- Allow the child to continue at his/her own pace
- Ask questions for clarification only, and at all times avoid asking questions that suggest a particular answer
- Reassure the child 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
- Record in writing what was said using the child's own words as soon as possible.

Helpful statements to make

- I believe you (or showing acceptance of what the child 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 false promises

6. What to do after a child has talked to you about abuse

1. Write down what they said as soon as possible afterwards, using the person's own words.
2. You should report your discussion with the designated person as soon as possible. If the designated person is implicated report to Social Services. Do not discuss with anyone else.

7. Recruitment and appointment of workers and contactors

In recruiting and appointing workers/contractors the Chairman will be responsible for the following:

- We will draw up the selection criteria and putting together a list of essential and desirable qualifications, skills and experience.
- All applicants should apply in writing and their application will cover their personal details, previous and current work/volunteering experience.
- We will make sure that we measure the application against the selection criteria.
- We will ask for photographic evidence to confirm the identity of the applicant e.g. their passport.
- We will request two written references from people who are not family members or friends.
- If relevant to the role we will ensure that our successful applicant has obtained the Enhanced DBS as required from the Disclosure and Barring Service.
- We will include our safeguarding children policy in the induction process.

Appendix 1

Categories and Types of Abuse

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.

Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described as factitious illness, fabricated or induced illness in children or "Munchausen Syndrome by proxy" after the person who first identified this situation.

A person might do this because they enjoy or need the attention they get through having a sick child.

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 such as to cause severe and persistent adverse effects on the child's emotional development. It may involve making a child feel or believe they are worthless or unloved, inadequate or valued only insofar as they meet the needs of the other person.

It may feature age or developmentally inappropriate expectations being imposed on children. It may also involve causing children to feel frequently frightened or in danger, or the exploitation or corruption of a child.

Some level of emotional abuse is involved in all types of ill treatment 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, whether or not the child 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 in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

Boys and girls can be sexually abused by males and or females, by adults and by other young people. This includes people from all different walks of life.

Neglect

Neglect is the persistent failure to meet a child's basic physical and or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or a carer failing to provide adequate food, shelter and clothing, leaving a young child home alone or the failure to ensure that a child gets appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

It is accepted that in all forms of abuse there are elements of emotional abuse, and that some children 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 notes other sources of stress for children and families, such as social exclusion, domestic violence, the mental illness of a parent or carer, or drug and alcohol misuse. These may have a negative impact on a child's health and development and may be noticed by an organisation caring for a child. If it is felt that a child's well-being is adversely affected by any of these areas, the same procedures should be followed.

Appendix 2

Signs of Abuse

Physical signs of abuse

- 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-under nourishment, 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:

- Fear of parents being approached for an explanation
- Aggressive behaviour or severe temper outbursts
- Flinching when approached or touched
- Reluctance to get changed, for example, wearing long sleeves in hot weather
- Depression
- Withdrawn behaviour
- Running away from home

Emotional signs of abuse

The physical signs of emotional abuse may include;

- A failure to thrive or grow particularly if a child puts on weight in other circumstances e.g. in hospital or away from their parents' care
- Sudden speech disorders
- Persistent tiredness
- Development delay, either in terms of physical or emotional progress

Changes in behaviour which can also indicate emotional abuse include:

- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Being unable to play
- Attention seeking behaviour
- Fear of making mistakes
- Self-harm
- Fear of parent being approached regarding their behaviour

Sexual Abuse

The 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 e.g. 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 their age or developmental level
- Sexual drawings or language
- Bedwetting
- Eating problems such as over-eating or anorexia
- Self-harm or mutilation, sometimes leading to suicide attempts
- Saying they have secrets they cannot tell anyone about
- Substance or drug abuse
- Suddenly having unexplained sources of money
- Not allowed to have friends (particularly in adolescence)
- Acting in a sexually explicit way with adults

Neglect

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from other children
- 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