

# Safeguarding Children and Vulnerable Adults Policy

Last review: January 2017 | Next review: January 2019



## Background

The Democracy School will fulfil its obligations on safeguarding the welfare of children and vulnerable adults when undertaking commissions and projects. This Policy Statement aims to provide a framework for fellows and associates that leads to informed decision making for the protection of children and vulnerable adults. It sets out how the School, relevant agencies and professionals should work together to promote the welfare of children and vulnerable adults and protect them from abuse and neglect.

This policy acknowledges that:

- Abuse exists and can present itself in any of its forms: physical, emotional, neglect or sexual, alone or in any combination
- Children and vulnerable adults may be abused and/or neglected by their parents, carers, guardians or other trusted adults as well as by strangers
- Abuse may be perpetrated by individuals, groups or networks of individuals
- Children and vulnerable adults may also be abused by other children or vulnerable adults

Children and young persons under the age of 18 of all races, religions and cultures, with or without disabilities, from any model of family life have an equal right to protection from abuse. The Children Act 1989 (UK) places two specific duties on agencies to co-operate in the interests of vulnerable children:

Section 27 provides that a local authority may request help from:

- Any local authority
- Any local education authority
- Any local housing authority
- Any Local Health Board, Special Health Authority, Primary Care Trust, National Health Service Trust or NHS foundation trust; and
- Any person authorised by the appropriate national authority

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In exercising the local authority functions under Part 3 of the Act this places a duty on local authorities to provide support and services for children in need; including children looked after by the local authority and those in secure accommodation. The authority whose help is requested in these circumstances has a duty to comply with the request, provided it is compatible with its other duties and functions.

Section 47 of the act places a duty on:

- any local authority
- any local education authority
- any local housing authority
- any Local Health Board, Special Health Authority, Primary Care Trust, National Health Service Trust or NHS foundation trust; and
- any person authorised by the secretary of state

to help a local authority with its enquiries in cases **where there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm.**

## Categories of Abuse

The definitions of abuse outlined below are based upon those set out in 'Working Together to Safeguard Children' Department for Education and Skills, 2006.

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.

### ***Physical Abuse***

This 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 feigns the symptoms of, or deliberately causes ill health

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to a child or person they are looking after. This situation is commonly described using terms such as factitious illness by proxy or Munchausen's syndrome by proxy.

## **Emotional Abuse**

This is the persistent emotional maltreatment of a child such as to cause severe and persistent effects on their emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may involve age or developmentally inappropriate expectations being imposed on them. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of them. 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, whether or not they are aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving them in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

## **Neglect**

Neglect is the persistent failure to meet the basic physical and or psychological needs of a child, which is likely to result in the serious impairment of their health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failure to protect a child from physical and emotional harm or danger, failure to ensure adequate supervision or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

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## Complex Abuse

Complex (organised or multiple abuse) may be defined as abuse involving one or more abusers and a number of children. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit them for abuse.

Complex abuse occurs both as part of a network of abuse across a family or community, and within institutions such as residential homes or schools.

**Note:** Children whose situations do not currently fit the above categories may also be at significant risk of harm. This could include situations where another child or person in the household has been harmed or the household contains a known abuser. Vulnerable adults may also be at significant risk of harm within the above categories or in other situations.

## Key Issues in Identifying Abuse

Abuse can take place in a number of different settings, of which the following are examples:

- It is likely to occur most commonly where the child or person knows the individual/s and is trusted. This can be a parent, carer, babysitter, sibling, relative, or friend of the child or of the family.
- The abuser is sometimes someone in authority such as a teacher, youth leader, children's worker or church worker/leader.
- The abuser is sometimes a paedophile or other person who sets out to join organisations to obtain access to children.

When working with children, young people and/or vulnerable adults, the Democracy School has a responsibility to act if abuse comes to light. As far as possible, the School recognises its responsibility to protect children and vulnerable adults from the possibility

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of being abused. For the purposes of this policy a child or young person is anyone under the age of 18 years of age.

## Detection – Signs of Abuse

Extreme care should be taken as misreading signs of abuse can result in significant harm or trauma to the child or vulnerable adult and their family. In general staff employed in the independent and voluntary sector will not have the expertise to diagnose abuse but do have a responsibility to be alert and aware of the signs. However, just because a child or vulnerable adult exhibits one of the signs listed below, this does not mean that they have been abused. Nevertheless, the presence of one or more of the signs, or their repeated presence, might raise concerns and should be used as a prompt for discussion with the Director of the School. Where a child or vulnerable adult has made a direct allegation or there is clear evidence of suffering or the risk of suffering significant harm, the matter should be referred immediately to the relevant Social Services District Office.

### Physical signs

- any injuries, bruises, bites, burns, fractures, etc, which are not consistent with the explanation given for them
- injuries which occur to the body in places which are not normally exposed to falls, rough games, etc
- injuries which appear to have been caused by a weapon e.g. cuts, welts, etc
- injuries which have not received medical attention
- instances where children or vulnerable adults are kept away from the group inappropriately or without explanation
- self-mutilation or self-harm e.g. cutting, slashing, drug abuse

### Emotional signs

- changes or regression in mood and behaviour, particularly where a child or vulnerable adult withdraws or becomes clinging, depression/aggression
- nervousness/inappropriate fear of particular adults e.g. frozen watchfulness

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- sudden changes in behaviour e.g. under-achievement or lack of concentration
- inappropriate relationships with peers and/or adults e.g. excessive dependence
- attention-seeking behaviour
- persistent tiredness
- wetting or soiling of bed or clothes

## Neglect signs

- regular poor hygiene
- persistent tiredness
- inadequate clothing
- excessive appetite
- failure to thrive e.g. poor weight gain
- consistently being left alone and unsupervised

## Sexual signs

- any direct disclosure made by a child or vulnerable adult concerning sexual abuse
- a child or vulnerable adult with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age inappropriate sexual play
- preoccupation with 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
- other emotional signs (see above) may be indicative of sexual or some other form of abuse

## Procedures for Responding to Allegations/Concerns Regarding Abuse

1. All concerns about the welfare of a child or vulnerable adult or concerns that a child or vulnerable adult may be suffering, or at risk of suffering abuse or neglect should

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be referred to the Social Services District Offices who will seek to clarify the nature of the concern and whether immediate action is needed to make them safe from harm.

2. Where there is a clear allegation or strong suspicion or evidence of abuse, there must be no delay in making a referral to the statutory agencies.
3. Where there is no clear evidence or allegation but suspicion exists that abuse may have occurred, a preliminary consultation with the Director of the Democracy School should take place without delay.
4. Where the level of risk remains unclear consultation should be sought from Social Services as to whether a referral is appropriate.
5. At the end of any discussion about a child or vulnerable adult, the referrer and Social Services should be clear about who will be taking what action or that no further action will be taken. The decision will be recorded by Social Services and the professional referrer.
6. Concerns should be discussed with the parent or carer and, where possible their agreement should be sought before making referrals to Social Services **unless this places them at increased risk of significant harm**, for example, in cases where the allegation of abuse is of a sexual nature, which must involve a referral directly to the relevant Social Services department or Police Child Protection Team.
7. Social Services should decide on the next course of action within 24 hours. On the basis of available evidence they have a responsibility to address whether there are concerns about both the child or vulnerable adult's health and development, or actual and/or potential harm which justify further inquiries, assessment or intervention.
8. Suspicions or allegations should not be discussed with anyone other than those named in the above points.
9. Under no circumstances attempt to carry out any investigation into allegations or suspicions of abuse. It is the task of Social Services to investigate the matter under Section 47 of the Children Act 1989.
10. Referrals may lead to:
  - a. no further action
  - b. directly to the provision of services or other help
  - c. a fuller assessment of the needs and circumstances of the child or vulnerable adult which may in turn lead to child protection inquiries

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- d. emergency action to safeguard the child or vulnerable adult
- e. child protection inquiries being undertaken

## Guidelines for Responding to an Allegation of Abuse from a Child or Vulnerable Adult

### General Points

- Keep calm – do not appear shocked or disgusted
- Accept what the child or vulnerable adult says without passing judgment (however unlikely the disclosure may sound)
- Look directly at the child or vulnerable adult
- Be honest
- Let them know you will need to tell someone else, don't promise confidentiality
- Be aware the child or vulnerable adult may have been threatened and fear reprisals for having spoken to you
- Never push for information or question the child or vulnerable adult as this can undermine any subsequent criminal investigation. If at any point they decide not to continue, accept that and let them know that you are ready to listen should they wish to continue at any time

### Helpful things to say or show

- Show acceptance of what the child or vulnerable adult says
- "I take what you are saying very seriously"
- "I am pleased that you have told me. Thank you for telling me"
- If appropriate, "it isn't your fault and you are not to blame at all"
- "I am sorry that happened to you"
- "I will help you"

### Things not to say

- "Why didn't you say something before?"





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- "I really can't believe it"
- "Are you sure this has happened?"
- "Why?" "Where?" "When?" "Who?" "What?" "How?"
- Don't make false promises – like confidentiality – be honest now, any lies will be further abuse and betrayal
- Never make statements such as 'I am shocked!' or 'don't tell anyone else'

## Concluding the conversation

- Reassure the child or vulnerable adult that they were right to tell you
- Let the child or vulnerable adult know what you are going to do next and tell them that you will let them know what is happening at each stage

## What to do after the conversation

- Make notes about the conversation as soon as possible after the discussion. Record exactly what the child or vulnerable adult said and when s/he said it and what was happening immediately beforehand e.g. (description of the activity). Note the time, date and place of the conversation and the name of any other person present. If the initial note is handwritten, keep it if it is subsequently typed up.
- Inform the Director of the Democracy School immediately.
- The Director should contact the Social Services Area Office or, in his/her absence, you should not delay a referral and therefore should contact the Office directly.
- Exceptionally, should there be any disagreement between the person in receipt of the allegation or suspicion and the Director as to the appropriateness of a referral to the Social Services District Office, that person retains a responsibility as a member of the public to report serious matters to the Social Services District Office, and should do so without hesitation.
- Do not be tempted to try to investigate further the claims – this could lead to contamination of the evidence and could jeopardise any police investigation and criminal prosecution activity.

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## Undertaking work with children, young people and vulnerable adults

The Democracy School, and any fellow or associate working on its behalf, will follow the procedures outlined by the commissioning organisation and recognises that these are designed to promote the effectiveness of work and to protect children, vulnerable adults and workers. These may include being asked to complete an application form requesting basic details, experience of working with children and vulnerable adults. In addition there may also be an expectation to be subject to enhanced police checks. Disclosure of a criminal record may not itself prevent appointments as the nature of any offence is considered; with the exception of convictions for crimes against children.

## Boundaries and Touch

All Democracy School fellows and associates are responsible for establishing and maintaining appropriate boundaries and or ensuring that meeting their own emotional needs are not dependent on their relationships with children and young people or vulnerable adults. Keep everything public. A hug in the context of a group is very different from a hug behind closed doors. Touch should be related to a child or vulnerable adult's needs not the worker's. Touch should be age appropriate and generally be initiated by the child or vulnerable adult rather than the worker. Avoid any physical activity, which is, or may be construed as, sexually stimulating the adult or child, for example, fondling, touching private parts of the body. Workers should take responsibility for monitoring one another in the area of physical contact. They should be free to challenge a colleague constructively if necessary.

## Seeking Expert Advice or referral

In undertaking projects for different organisations or places the Democracy School will ensure that it is aware of the relevant local contacts for further expert advice or referral.