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|  | **Procedure for Protecting Children and Young People at possible Risk of Abuse** |

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| **Arrangement of Sections** |

1. Purpose of this procedure

2. Types of abuse

3. Indicators of abuse in children and young people

4. Ways that abuse might be brought to your attention

5. Talking to a child who has told you that they or another child is being abused

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Appendix 1: Record of Concern

Appendix 2: Dealing with child abuse or welfare concerns

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| **1. Purpose of this Procedure** |

This procedure applies to any member of staff or volunteer who may be concerned about the safety and protection of a child or young person.

We aim to ensure those children and young people who attend The Baby Equipment Loan Service & Toy Library (BELS & TL) and any others who may come to the attention of BELS & TL, receive the protection and support they need if they are at risk of abuse.

This procedure provides clear direction to Staff and Volunteers at BELS & TL if they have concerns that a child or young person needs protection.

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| **2. Types of 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** 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 and 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, ‘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 cyberbullying) causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

**Sexual abuse** involves forcing or enticing a child or children to take part in sexual activities, not necessarily involving a high level of violence, whether the child is aware of what is happening or not. 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, pornographic material or watching sexual activities, or 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** 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 it may involve a parent or carer failing to provide adequate food, clothing, and shelter, including exclusion from home or abandonment; failure to protect a child from physical harm or danger; failure to ensure adequate supervision, including the use of adequate care takers; 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.

There are also emerging types and methods of child abuse, including:

* Sexual exploitation
* Female genital mutilation (FGM)
* Trafficking of children in order to exploit them sexually, financially, via domestic servitude, or via the involvement in activity such as the production and sale of illegal drugs
* Abuse linked to beliefs such as spirit possession or witchcraft
* Radicalisation and the encouragement or coercion to become involved in terrorist activities
* Abuse via online methods e.g. from adults seeking to develop sexual relationships with children or to use sexual or abusive images of them
* Domestic violence (either witnessing violence between adult family members, or, in the case of older young people, being subjected to coercion or violence in an intimate relationship in the same way as an older person)

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| **3. Indicators of Abuse in Children and Young People** |

The NSPCC website provides useful information about the signs and symptoms of abuse – see link

www,nspcc.org.uk

The information makes it clear that abuse is not always obvious, and that there are many reasons why children may not tell anyone that they are being abused. They might not even realise that what is happening to them is abusive.

Many of the signs that suggest abuse may also be caused by other issues, and often it is a case of investigating agencies needing to build up a picture of a child’s life by piecing together information held by different individuals and organisations.

It is also important to point out that children and young people can experience various types of abuse at the same time. For example, all abuse involves an element of emotional abuse, and neglect often occurs in contexts where children are also being subjected to physical or sexual abuse.

In terms of specific signs and indicators, sometimes there are physical signs such as:

* Unexplained bruises, other injuries or health problems
* Unexplained gifts or additional mobile devices
* Poor appearance or hygiene
* Recurring health problems that are not treated
* Young children not meeting their developmental milestones (particularly if there is no disability)
* Being left alone
* An unsuitable home environment e.g. cold, dirty, physically unsafe
* Pregnancy, sexually transmitted infections or anal / vaginal soreness
* Any signs that a child / young person is at risk of being subjected to forced marriage or Female Genital Mutilation

A child’s behaviour can also help to indicate that they are being abused. It can be helpful to be aware of behaviour that you might normally associate with an older or younger child. Look out for signs that a child is unsettled or unhappy:

* Withdrawn
* Suddenly behaves differently
* Anxiety
* Clingy
* Depressed
* Aggressive
* Problems sleeping
* Eating disorders
* Wets the bed
* Soil clothes
* Takes risks
* Misses school
* Changes in eating habits
* Obsessive behaviour
* Nightmares
* Drugs
* Alcohol
* Self-harm
* Thoughts about suicide

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| **4. Ways that abuse might be brought to your attention** |

* A child might make a direct disclosure about him or herself.
* A child might make a direct disclosure about another child.
* A child might offer information that is worrying but not a direct disclosure.
* A member of staff might be concerned about a child’s appearance or behaviour or about the behaviour of a parent or carer towards a child.
* A parent or carer might make a disclosure about abuse that a child is suffering or at risk of suffering.
* A parent might offer information about a child that is worrying but not a direct disclosure

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| **5. Talking to a child who has told you that they or another child is being abused** |

* Reassure the child that telling someone about it was the right thing to do
* Tell them that you must do what you can to keep them (or the child who is the subject of the allegation) safe.
* Let the child know what you are going to do next and who else needs to know about it.
* Let the child tell his or her whole story. Don’t try to investigate or question the child, but make sure that you are clear as to what he / she is saying
* Ask the child what he / she would like to happen as a result of what he / she has said, but don’t make or infer promises you can’t keep
* Give the child the Childline phone number: 0800 1111

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| **6. Helping a child in immediate danger or in need of emergency medical treatment** |

* If the child is in immediate danger and is with you, remain with him / her and call the police
* If the child is elsewhere, contact the police and explain the situation to them
* If he / she needs emergency medical attention, call an ambulance and, while you are waiting for it to arrive, get help from your first aider
* If the first aider is not available, use any first aid knowledge that you may have yourself to help the child
* You also need to contact your Supervisor or Lead Board Member for Safeguarding or Designated Safeguarding Officers (DSOs) for children to let them know what is happening

A decision will need to be made about who should inform the child’s family and the local authority children’s social care department, and when they should be informed. If you have involved the police and / or the health services, they should be part of this decision. Consider the welfare of the child in your decision making as the highest priority.

Issues that will need to be considered are:

* The child’s wishes and feelings
* The parent’s right to know (unless this would place the child or someone else in danger, or would interfere with a criminal investigation)
* The impact of telling or not telling the parent
* The current assessment of the risk to the child and the source of that risk
* Any risk management plans that currently exist

Once any immediate danger or emergency medical need has been dealt with, follow the steps set out in the flowchart at the end of this document.

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| **7. Keeping a Record of your Concerns** |

Use the reporting form (Appendix 1) to record the concern and how it is deal with. The relevant sections of the form should be completed and signed at each stage of the procedure. It can be

used to forward information to the statutory child protection authorities if a referral to them is needed.

The form should be signed and dated by all those involved in its completion and kept confidentially on the child’s file. The name of the person making the notes should be written alongside each entry.

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| **8. Designated Safeguarding Officers (DSOs)** |

**Current Designated Safeguarding Officers**

**Katherine O’Donnell**

**Gemma Pinkney**

**Deb Walters**

**0191 2635770**

[**team@belsnorthtyneside.org,uk**](mailto:team@belsnorthtyneside.org,uk)

**Management Committee Safeguarding Representative**

**Charlotte Kennedy**

**0191 2635770**

**charlotte.e.osborne@gmail.com**

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| **9. Useful Contacts** |

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| Local Police | Emergency: 999  Non-emergency: 101 |
| North Tyneside Council  Out of Hours  Early Help and Coordination | Office hours: 0345 2000 101  0191 2006800  0191 643 8178 |
| NSPCC Helpline | 0808 800 5000  [help@nspcc.org.uk](mailto:help@nspcc.org.uk) |
| Childline | 0800 1111  [www.childline.org.uk](http://www.childline.org.uk) |
| Child Exploitation and Online  Protection Centre (CEOP) | [www.ceop.police.uk](http://www.ceop.police.uk) |

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| **10. Other Documents in this Series** |

This document is one of a series of nine that detail BELS & TL’s strategy for protecting children and young people. The other documents are:

SG1- Safeguarding Children and Young People

SG2 - Code of Conduct for Adults working with Children and Young People

SG3 - Code of Conduct for Young People

SG4 - Anti-Bullying Policy and Procedures

SG6 - Dealing with Allegations made against an Employee or Volunteer

SG7 - Dealing with Allegations made against another Child

SG8 - Guidelines for sharing Confidential Information

SG9 - Guidelines on the Storage and Retention of Records

In addition to the above this policy should be read alongside our policies and procedures on:

* Acceptable Access to and Use of Information and Communication Technologies (ICT)

e-safety Policy

* Communications Policy
* Complaints Procedure
* Disciplinary Policy and Procedure
* Equality and Diversity Policy
* GDPR Privacy Policy
* Grievance Policy and Procedure
* Health & Safety at Work Policy
* Recruitment & Selection Policy and Procedure
* Staff Induction Checklist
* Volunteer Policy and Procedure
* Whistleblowing Policy

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| **11. Document Details** |

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Registered Charity Number 1196768

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Updated January 2023 (change of DSOs and minor changes)

Updated 30.1.2024

This document has been adapted with permission from:

VODA North Tyneside

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| **Appendix 1: Record of Concern** |

**Reporting concerns about a child:** This form should be used in conjunction with the procedure for dealing with concerns about a child.

**Details of child**

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| Name of child: | | |
| Gender | Age | Date of Birth |
| Ethnicity | Language | Additional needs |
| Name of parents / carers | | |
| Home address: | | |

**Your details**

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| Your name: | Your position | Date and time of incident (if applicable) |

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| Are you reporting your own concerns or responding to concerns raised by someone else?  Reporting own concerns  Responding to concerns raised by someone else |
| If you are responding to concerns raised by someone else, please provide their name and position within the organisation: |
| Please provide details of the incident or concerns you have, including times, dates, description of any injuries, whether information is first-hand or the accounts of others, etc: |
| The child’s account / perspective: |
| Please provide details of anyone alleged to have caused the incident or to be the source of any concerns: |
| Provide details of anyone who has witnessed the incident or who shares the concerns: |
| Summary of discussion with supervisor / manager: |
| Has the situation been discussed with BELS & TL Designated Safeguarding Officers?  Yes/No  If so, please summarise the discussion: |
| Have you spoken to the child’s parents / carers?  Yes/No  If so, please summarise the discussion: |
| Have the following authorities been informed?  Police: yes / no  Date and time:  Name and phone number of the person spoken to:  Local Safeguarding Children’s Board: yes / no  Date and time:  Name and phone number of the person spoken to:  Action agreed with child protection authorities: |
| What has happened since referring to statutory agencies? Include the date and nature of feedback from referral, outcome and relevant dates: |

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| **Signed** | **Date and time** | **Name and position** |
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| **Appendix 2: Dealing with Child Abuse or Welfare Concerns** |



Do concerns still exist?

YES

Refer to/refer back to the child’s local social care department or NSPCC Helpline on 08088005000