

SAFEGUARDING CHILDREN POLICY

Name of organisation:

Chinese Arts Southampton (CAS)

Address:

51 The Park Way, Bassett, Southampton SO16 3PD

Telephone number:

02380 904002

Name of Nominated Safeguarding Children Advisor:

Vivian Lam

Contact telephone number:

07812515356

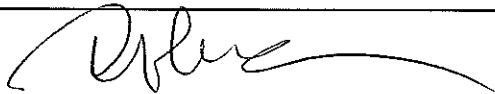
Name of deputy Nominated Safeguarding Children Advisor:

PUNG HUA

Contact telephone number:

07855611786

Signed:



Name and title:

PUNG HUA (Dr)

Review date:

20th March 2013

1. Aim of this policy

The aim of this policy is to outline the practice and procedures for volunteers in the Chinese Arts Southampton (CAS) in order to safeguard and promote the welfare of children and young people. It is aimed at protecting the child and the worker, recognising the risks involved in working along side children and young people.

The policy covers all volunteers and areas of work with specific guidance for projects regularly in contact with children and young people.

The child protection policy overrides issues of confidentiality as stated in the Children Act 1989.

The welfare of the children at Chinese Arts Southampton (CAS) is of primary importance. We will endeavour to protect the children attending Chinese Arts Southampton's projects by following the procedures in "Working Together to Safeguard Children 2010".

The Safeguarding Children Officer/Deputy for Chinese Arts Southampton (CAS) is responsible for implementing the Safeguarding Policy.

The Chinese Arts Southampton's Committee will ensure that all staff and volunteers working with children have CRB checks and where possible, have completed Safeguarding Children Training. It will ensure that all staff and volunteers understand and follow its Safeguarding Children Policy.

It is not the responsibility of groups to investigate incidences of suspected child abuse but to gather information and refer only.

2. Good practice

All volunteers working along side children and young people will follow this recruitment process:

- Group membership forms will be completed
- Satisfactory checking of references, at least one of which is from a person who knows the member's paid or voluntary work with children
- Criminal Record Bureau (CRB) Disclosure will be required at a level appropriate for the role:

Criminal Records Bureau: for information about the disclosure process:

Customer Services

CRB

PO Box 110

Liverpool

L69 3EF

Tel: 0870 90 90 811

Textphone: 0870 90 90 344,

Disclosure application line:

0870 90 90 844

Web: <http://www.crb.org.uk>

- All volunteers have a duty to declare any existing or subsequent convictions, adverse child protection or care proceedings.

Management

- It's the safeguarding Advisor's responsibility to clarify with the volunteer their role and responsibilities regarding child protection.

Training

- It is the responsibility of the Chinese Arts Southampton (CAS) to ensure up to date and adequate training on child protection issues is available to all volunteers, where relevant (as described in "Working Together 2010")

Planning

- Wherever possible all volunteers should avoid working alone with a child.

Incident forms

- An incident form should be completed recording any concerns. Any comments made by parents/carers should also be recorded. This confidential information will be kept by the appropriate person and will be kept for the duration of the project.

Independent person

- Any volunteer who has concerns for a child or another volunteer or colleague can speak independently to:

Independent person's name and contact details:

..... *Steph Smith*
 *023 80330698*

- All volunteers will be given this information as part of their introduction training.

3. Responsibilities

Volunteers should make a note of any discussions with a child. Taking care to record when and where it happened and who was present, as well as what the child said (in their words). Observation of their behaviour and any actions taken. This must be dated and kept confidentially in a safe place by [insert CDWs/support worker's name if appropriate]:

..... *Jenny He (07765993086)*

If a volunteer believes a child may be suffering or may be at risk of suffering significant harm then he/she should always refer his or her concerns to the local authority social services department.

What to do if you have concerns regarding abuse

- These could be physical or behavioural signs or any other indicator that raises concerns.
- These concerns should be logged immediately.
- You should log exactly what was witnessed and not include your own opinions e.g. a small circular burn, rather than a cigarette burn.
- You should use one form per child.
- You should continue to monitor the situation recording any further concerns.
- ***Remember that anything you have been told is confidential***

What to do if a child discloses information:

During

- Stay calm.
- Do not stop a child who is recalling significant events.
- Find a quiet place to talk if possible.
- Listen, but DO NOT press for information.
- Do not appear shocked at anything you might see or hear.
- Listen and sympathise with anything a child might disclose.

- Believe what you are being told.
- Say you are glad the child told you and reassure them that they are not to blame.
- Ask if they have told anyone else.
- If they decide not to tell you, ask them who they would be able to tell.
- **Tell the child you will need to share the information with someone else who will help them and not keep it a secret.**

As soon as possible after and not during the disclosure:

Record the following:

- Name, address and date of birth of child.
- Parent/Carer's name and contact number.
- When and where it happened.
- Who was present?
- What happened up to the time when the child disclosed?
- What the child said. This **MUST** be recorded in the child's words.
- What you said. This **MUST** be recorded in your words.
- **Remember that this form and anything you have been told is confidential.**

You should only discuss details of any Safeguarding issues with people who have a legitimate need to know.

4. Conclusion

Remember:

- The volunteers primary responsibility is to protect the child
- Each volunteer has a duty to take action
- Volunteers will not have to cope alone

5. Contacts

Children and Families Assessment Team – 023 8083 3336

Police: 0845 045 45 45

Child-line: 0800 1111

NSPCC Child Protection Helpline: 0808 800 5000

NHS Direct: 0845 4647

Children's Information Service (CIS): 0800 169 8833

Safeguarding Specialist Nursing: 023 8071 6671

Important Note:

If you think the child is about to suffer, or has suffered significant physical or mental harm, then immediately contact one of the following:

- Children and Families Assessment Team – 023 8083 3336
Monday – Thursday 8.30 – 5.00 and Friday 8.30 – 4.30
- Emergency Duty Team – 023 8023 3344 (outside normal working hours)
- Police – 0845 045 4545 (Main Switchboard)

In cases of extreme emergency, the police should be your first contact.

Dealing with Concerns

If you are unclear whether a referral should be made you can discuss your concerns with the following for advice:

- Children and Families Assessment Team on 023 8083 3336
(Children First Team)
Marland House (off Civic Centre Road)
Southampton

children.first@southampton.gov.uk

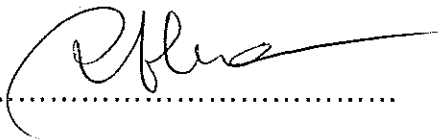
- NSPCC - 0800 800 500

Any allegations against staff (paid or unpaid) must be reported to the Local Authority Designated Officer – LADO - (Tim Pascoe): 023 8091 5443

The name of the client does not have to be given to Social Services at this stage, although they would prefer it if you did.

ANY ALLEGATIONS AGAINST STAFF/VOLUNTEERS SHOULD BE REFERRED TO THE SAFEGUARDING CHILDREN'S UNIT (Social Services).

Date: 14.05.2012



PUNG HUA

Signed by Chair person of the group

PRINT NAME

Appendix 1 – Categories of abuse

Categories of abuse

What is meant by abuse or neglect?

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.

There are four categories of abuse and neglect, as follows:

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 feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using the term Fabricated and Induced illness (previously known as Munchausen's syndrome by proxy).

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 what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery) or non penetrative acts. They may 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.

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 carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, 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.

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 conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill-treatment of a child, though it may occur alone.

Vulnerable Children

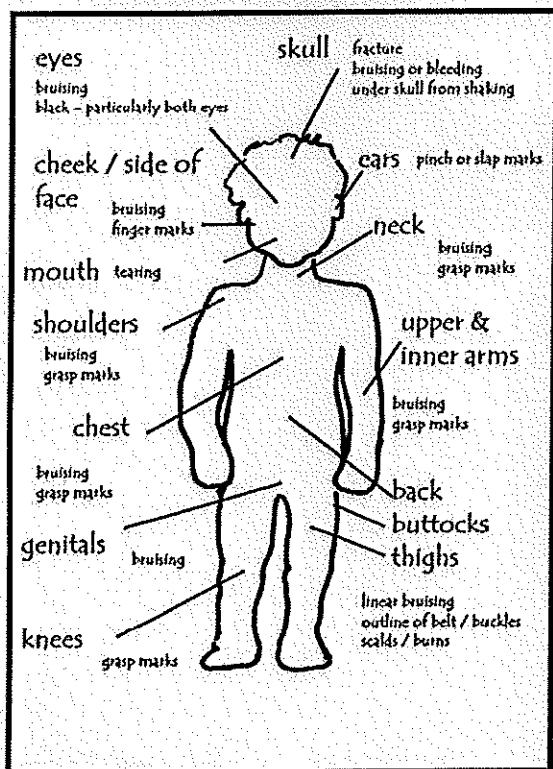
Children with special needs have the potential to be more vulnerable than other children and young people. Some children may have difficulty with communication or physical mobility. These children may be unaware that they do have power over their own bodies and that they have the right to say no. By having an understanding of the different factors

that make children and young people with special needs more vulnerable this can help staff and volunteers to put safeguards in place to protect these children and young people.

Appendix 2 – Diagrams of physical signs of abuse

This diagram summarises the main physical signs of abuse

Common sites for non-accidental injury



Non accidental injuries

Bruises likely to be:

Frequent
 Patterned e.g. finger & thumb marks
 Old & new in same place (note colour)
 In unusual positions (see chart)

Consider

Developmental level of the child & their activities

May be more difficult to see on darker skins

Burns and scalds likely to have:

Clear outline
 Splash marks around burn areas
 Unusual position e.g. back of hand
 Indicative shapes e.g. cigarette, bar of electric fire

Injuries are suspicious if:

Bite marks or fingernail marks
 Large and deep scratches
 Incisions e.g. from razor blade

Fractures are likely to be:

Numerous – healed at different times

Consider

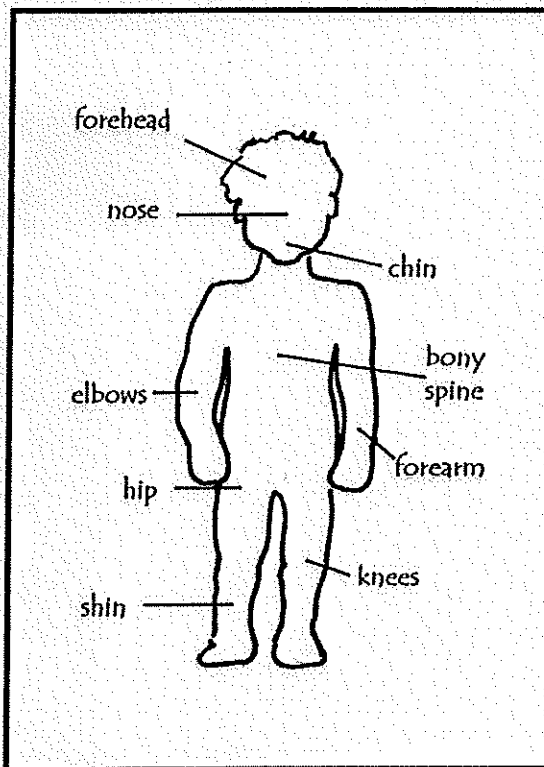
Age of child – always suspicious in babies under two years of age

Delay in seeking treatment

Sexual abuse may result in:

Unexplained soreness, bleeding or injury in genital or anal area
 Sexually transmitted diseases e.g. warts, gonorrhoea

Common sites for accidental injury



Accidental injuries

Bruises likely to be:

Few – but scattered
 No pattern
 Same colour and age
Consider

Age and activity of the child e.g. learning to walk

May be confused with birth marks & other skin conditions

Burns and scalds likely to be:

Treated
 Easily explained
 May be confused with other conditions e.g. Impetigo, nappy rash

Injuries are likely to be:

Minor and superficial
 Treated

Easily explained

Fractures are likely to be:

Of arms and legs
 Seldom on ribs except for road traffic accidents
 Rare in very young children
 May rarely be due to brittle bone disease

Genital area:

Injury may be accidental – seek expert medical opinion
 Soreness may be nappy rash or irritation from bubble bath

Parental attitude is important in assessing all of the above

When a child is suffering a severe and painful injury most would seek medical help

Diagram featured in SVS Safeguarding Children Policy

CAS Child Protection Concern Record Form

<ul style="list-style-type: none">• Name and address of child• Age (Include date of birth if known)
Parent/Carer's Name and contact number
Name and address of community group
Chinese Arts Southampton 51 The Park Way, Bassett, Southampton SO16 3PD
Contact telephone number of the group
Concern please remember to indicate clearly whether what is being written is fact, observation, allegation or opinion: include what happen and where, who was present
What was said by a child and what was said to the child

Action Taken
Name of person reporting this concern
Position
Date:
Signature
Date Record sheet given to the Designated Officer
Name of Designated Officer (please print)
Signature of Designated Officer to confirm receipt
Date:

Remember to maintain confidentiality on a need to know basis – only if it will protect the child. Do not discuss this incident with anyone other than those who need to know.

NB: A copy of this form should be sent to social care.