



HAMPTON

# SAFEGUARDING

Children, young people and adults at risk

June 2019

## PRINCIPLES

We are committed to:

- The care, nurture of, and respectful work with, all children, young people and all adults at risk
- The safeguarding and protection of all children, young people and adults when they are vulnerable
- The establishing of safe, caring communities which provide a loving environment where there is a culture of 'informed vigilance' as to the dangers of abuse

**This Document** is a working document based on the Children Act 1989, outlining Policy and Procedures which need to be followed in order to ensure the safest possible practice.

**It sets out the Procedure** which must be followed in the event of suspected, actual, or disclosure of abuse of a child or vulnerable adult.

**This is a public document.** Copies of it and supportive training are to be provided and taken up by those who work with children and young people at MTV Youth Hampton.

## SAFEGUARDING POLICY STATEMENT

**MTV Youth Hampton commits to:**

- nurture, protect and safeguard all our members, particularly children, young people and adults at risk.
- recognise that safeguarding is the responsibility of all those involved in the charity.
- We undertake to exercise proper care in the selection, appointment, training and support of those working in a paid or voluntary position with children or adults at risk, including the use of Criminal Records disclosures and making appropriate referrals to the authorities.
- We will respond without delay to concerns or allegations that a child or adult at risk may have been harmed, cooperating with the police and social care services in any investigation.
- We will challenge any abuse of power by anyone in a position of trust.
- We will seek to offer support to anyone who has suffered abuse.

We have appointed Holger Marsen as our Safeguarding Lead, Nick Neilan and Penny Dimond are Deputy Safeguarding Leads. Ben Lovell is the chair of trustees and all safeguarding concerns must be reported to him or another member of the board.

The Trustees shall review this policy annually. The next review will take place in May 2020.

*Signed:*

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# SAFEGUARDING CHILDREN AND YOUNG PEOPLE

## Code for Safer Working

- Treat all children and young people with respect, keeping your language, attitude and body language respectful
- Actively communicate with children and involve them in planning and running activities.
- Avoid being alone with a child and aim to work within sight of another adult.
- Develop a culture where workers, children and young people feel comfortable to point out inappropriate behaviour and attitudes in each other.
- Make it plain who someone can speak to about a personal concern.
- Never use illicit drugs or alcohol when responsible for a child or young person.
- Obtain consent from parents/carers for photographs/videos to be taken or displayed.
- Never use rough play, sexually provocative words and games, or any form of physical punishment.
- Avoid showing favouritism to any one child or group. Do not encourage infatuations toward you.
- Never share sleeping accommodation with children or invite them to your home alone.
- Always ask for advice when unsure.

## Taking Children off the Youth Club Premises

Well planned visits can be very beneficial.

- Parental permission should be obtained, with contact details and any details of health problems or allergies. The group leader should have this list with them and a basic first aid kit.
- The appropriate ratio of adults to children must be observed.
- A Risk Assessment form should be completed
- If children are to be transported by car parental permission is needed. Those driving must have a clean driving licence and make sure their insurance covers the transportation of children.
- The trip should be carefully planned and parents informed about departure and return times.
- In case of emergencies there should be a telephone contact number in the Parish.

Report to the appropriate person within 24 hours, if concerns arise. Make clear notes of what has happened.

## Training, selection and recruiting workers

All those working with children should have a Disclosure and Barring Services check (DBS) and Safeguarding Training. These should be reviewed every five years.

## Categories of Abuse

There are four categories of abuse:

### 1. 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 fabricates the symptoms of, or deliberately induces illness in a child. Female genital mutilation is abusive and is illegal in the United Kingdom.

## 2. Sexual Abuse

**Sexual abuse** involves forcing or enticing a child to take part in sexual activities whether or not a child is aware of what is happening. Suspicion of abuse may be based on physical signs, the child's behaviour or a direct statement from the child.

### ***Signs of possible sexual abuse:***

- A level of sexual knowledge inappropriate to the child's age
- Sexually provocative behaviour with adults
- Sexualised play with other children
- Self harm, mutilation or suicide attempts or threats
- Recurrent urinary tract infections. Soiling or wetting
- Promiscuity. Requests for sexual advice or contraception.
- Behavioural problems.

## 3. Neglect

**Neglect** is the failure to meet a child's physical and /or psychological needs, likely to lead to the serious impairment of the child's health and development.

- failure to provide adequate food, clothing or shelter
- failure to protect a child from physical and emotional harm or danger
- failure to ensure adequate supervision
- failure to seek appropriate medical care or treatment.

## 4. Emotional Abuse

**Emotional abuse** is the persistent emotional maltreatment of a child causing harm to the child's emotional development. It is the result of coldness, hostility, rejection or belittlement, leading to low self esteem, apathy, fearfulness, attention seeking behaviour or constantly seeking to please.

### **Internet related abuse**

A child may be targeted by an adult or other children via chatrooms and social networks. Advice can be sought via the Child Exploitation and Online Protection Service (**CEOPS**)

## **Procedures to Follow If There is a Concern About a Child** Action to be taken:

Concerns about a child or young person may present in a number of ways. The core actions that should always be taken are:

- take any emergency action needed to alleviate any immediate to life or limb.  
**Call 999** for emergency services. Tell hospital staff of your suspicions.
- discuss your concerns with the Safeguarding Lead or their deputy.
- make a brief factual note of what you have seen, heard or become concerned about (within one hour if possible).
- listen, don't ask any leading questions and treat all information confidentially.
- ensure safeguarding action is taken.

***All situations of actual or suspected child abuse should be reported without delay (within 24 hours) to the Chair of Trustees (or another trustee) and their advice sought.***

## **Making a referral to Children's Social Care**

If it is agreed that a referral should be made to your local Social Care office this will normally be done by the Safeguarding Lead or the Chair of Trustees. The following points should be kept in mind:

- give the social worker as much detail as possible: description, dates, times, and what was actually said
- distinguish between fact and opinion and between what you have seen and what others have told you
- follow up your contact with children's social care with a letter stating what you have said to them (within 24 hours)
- keep a record of all contacts made regarding the concern.
- continue to support the child
- you may need support yourself.

## **Why children don't tell and adults don't act**

It is commonly believed that a child or young person would resist abuse or tell a trusted adult.

## **Children and young people often don't tell because they:**

- are scared because they have been threatened
- believe they will be taken away from home and put in care.
- believe they are to blame
- think it is what happens to all children
- feel embarrassed and guilty
- don't want to get the abuser into trouble
- have communication or learning difficulties
- may not have the vocabulary to explain what has happened
- are afraid they will not be believed

## **Reasons adults don't tell and share their concerns:**

- they find it hard to believe what they are hearing
- cannot believe it may be about someone they know
- fear they may get it wrong or make it worse
- fear the consequences of getting it wrong – for the child their family and /or themselves
- simply don't want to be involved
- believe they do not have the information on what to do or who to contact

## **Useful tips**

- remember that if a child asks to tell you something in confidence **always** tell them you may have to tell someone else so that help can be got if they are being harmed, so the abuse can be stopped
- give your full attention to what the child says
- if you need to clarify something, reflect back on what the child has said and ask if you heard it right.
- reassure the child they are not to blame
- reassure that they are right to tell
- try to explain simply what will happen next
- reassure the child of your continuing support
- keep accurate notes of what has been said and the child's emotional state  
add date and time

## Health and Safety

### Staffing Levels Age of Children:

0-2 years	1 person for every 3 children	Ratio 1:3
2-3 years	1 person for every 4 children	Ratio 1:4
3-8 years	1 person for every 8 children	Ratio 1:8

Over 8 years 1 person for the first 8 children and then 1 extra person for every extra 12 children

- each group should have a minimum of 2 adults
- if a person who has been assigned to help has to cancel at short notice it may be possible to secure the help of another suitable person so the group can run as scheduled
- young people aged 16 or 17 may help with groups but must be supervised by an adult worker, They cannot be counted as part of the staffing and cannot be left in charge
- no group of children under the age of 16 years can be left unattended at any time

Health and safety should be managed as part of ALL activities. A **First Aid Box** and **Accident Book** should be maintained.

First Aid training should be encouraged and workers should have access to First Aid training.

**Serious Accidents** – contact the emergency services by calling 999 following the instructions given over the telephone, and giving appropriate first aid until help arrives. The child's parents/ carers must be contacted as soon as possible. Record the details in the accident book.

**Minor Accidents** – have another adult present if basic first aid needs to be administered. Parents/ carers should be informed of the accident and any care given. Record details in the accident book.

**Administering Medicines:** as a general rule medicine should not be administered to children or adults at risk. If there is a need for regular medication a care plan should be drawn up and kept with the registration form. The information should include the name of the medicine, dose and frequency, with the written consent of the parent/carer.

## Administration

### Risk Assessments

Risk assessments of new and existing activities should be made. This should cover outside activities and travel arrangements. If specialized activities are to be undertaken appropriate instructors should be engaged and their credentials confirmed. However, the charity retains the duty to supervise the children.

### Record Keeping

Registration and consent forms should be kept for all activities. Contact details and special requirements should be kept for those who attend. Consent should be obtained for making and using appropriate images of children.

# **SAFEGUARDING ADULTS AT RISK**

An adult at risk is “any person over 18 years who is or may be in need of community care services, because of mental or other disability, age or illness and who is or may be unable to take care of him/herself, or unable to protect him/herself against significant harm.” (Department of Health 2000) This includes those who have recently suffered personal adversity. Factors increasing vulnerability include:

- sensory or physical disability
- learning disability
- physical illness
- mental ill health
- dementia
- addiction to drugs or alcohol
- frailty in old age
- permanent or temporary reduction in mental, physical or emotional capacity due to bereavement, abuse or trauma

## **Categories of Abuse**

There are 9 categories: physical, emotional, sexual, neglect, financial, discriminatory, institutional, spiritual, and domestic.

### **1. Physical abuse**

Physical ill treatment e.g. hitting, slapping, pushing, punching, kicking, burning, biting, suffocating, misuse of medication, restraint or in appropriate sanctions.

### **2. Emotional**

Emotional abuse is the use of threats or fear to deny the vulnerable person's independent wishes. It includes humiliation and denial of dignity and verbal abuse.

### **3. Sexual Abuse**

Sexual abuse is a sexual act carried out without the informed consent of the other individual. It may include sexual suggestions and indecent behaviour.

### **4. Neglect**

Neglect includes ignoring a need of medical or physical care. With holding nutrition and heating. Also denying contact with family and failing to intervene where there is a danger to the vulnerable person.

### **5. Financial**

Financial abuse is the willful use of the vulnerable person's property, monies or assets without their informed consent. This can include pressure to change wills, financial arrangements or misuse of property or benefits

### **6. Discriminatory Abuse**

Is the maltreatment or harassment based on any characteristics of a person's identity such as their race, sex, or disability. Many of the signs are the same as for emotional abuse.

### **7. Institutional Abuse**

Is when a culture of poor practice or maltreatment in a setting becomes routine instead of good professional practice.

### **8. Spiritual Abuse**

Harm can be caused by the inappropriate use of religious beliefs or practices. This can include misuse of authority of leadership.



## **9. Domestic abuse**

Is the use of forms of control which are physical or verbal and may include all forms of abuse, and also cyber bullying or stalking.

### **Procedure Following Disclosure or Concern Over Suspected Abuse**

Follow the actions below:

- take any emergency action needed – dial 999 for emergency service
- make brief factual notes of what you have seen or heard
- listen but don't ask any leading questions.
- discuss your concerns with the Safeguarding Lead or their deputy within 24 hours
- ensure safeguarding action is taken, supporting the adult if they have capacity to make a referral
- keep all notes safely and observe confidentiality

***All situations of actual or suspected abuse should be reported to the Chair of Trustees or another member of the board and their advice sought within 24 hours.***

### **Good Practice in Safeguarding Adults, Including Record Keeping**

#### **Relationships**

Anyone working with vulnerable adults should be aware of their own behaviours and how these might be viewed by an adult at risk.

The following principles should be followed:

- care when looking after a person where there is a close personal friendship or family relationship
- be aware of the dangers of dependency and seek advice or supervision when these concerns arise
- do not undertake any work outside your competence or role (eg: counselling or legal advice)
- avoid behaviour that could give the impression of favouritism or special relationship
- encourage self determination, independence and choice
- do not undertake any work while under the influence of alcohol or drugs

#### **Record Keeping**

Within 24 hours workers should make notes of anything said and seen by them that causes concern. They should aim to:

- note what was said using the individual's own words where possible
- describe the circumstances in which the disclosure came about
- note the setting and list anyone else who was there at the time
- separate factual information and your own opinions, recording the reasons for the latter

## GUIDANCE ON VOLUNTEERING AND WORKING IN MTV YOUTH

This information applies to all those in MTV Youth Hampton who are to be appointed to roles which involve working, either in a paid post or on a voluntary basis, with vulnerable groups – children/young people and/or adults at risk.

All those in this position need to be carefully selected and trained in line with Safer Recruitment principles, including the use of criminal records disclosures and registration with the relevant vetting and barring schemes through the Disclosure and Barring Service (DBS).

Volunteers make up a huge part of the 'workforce' and need to be treated in the same way as paid employees in relation to these guidelines. Where a volunteer's role is very limited, for example accompanying children on a day's outing once a year or helping at a one-off event, some elements of Safer Recruitment would not be required i.e. a Criminal Records disclosure (DBS check) would not be necessary **providing that** they are not left alone with children and adults at risk at any time, and are supervised by someone who has been recruited in the correct way who does have a DBS disclosure that has been carried out. A Confidential Declaration form should always be completed and assessed.

If 16 to 18's wish to volunteer, they must not be left with sole responsibility for vulnerable people (either individuals or groups) and must count as a child in the ratio of adults to children (see 'Guidance on Staffing' for further information on ratios). They must be supervised at all times by an adult who has been recruited safely (including the adult having two satisfactory references and a new DBS disclosure that has been carried out). The young person should still go through a recruitment process which should include the request for 2 references (one of which should be from their; or a trusted adult independent from the charity). If this is seen as being not possible due to a child's situation a risk assessment should be carried out and signed off by a trustee.

### Recruitment and Selection

MTV should have clear, effective appointment procedures and practices. The following checklists are to guide you through the process at each stage.

#### BEFORE YOU ADVERTISE THE POST:

- Ensure that you have an up to date job / role description which includes a person specification for the post.
- Ensure you know where the post will be advertised and that you have all of the relevant information for the advert, including a closing deadline.
- Ensure that you have a candidate information pack ready to send to any applicants, including: an application form, a job or role description, a copy of your safeguarding policy statement etc.

#### BEFORE YOU INTERVIEW:

***Interviews should take place for all those 'working' whether paid or voluntary.*** (The following procedure is for employed staff.) They can be less formal for those in a voluntary role but it is important that you ascertain that they are the right person for the role.

- Ensure that each application received is scrutinised in a systematic way by the shortlisting panel in order to agree a shortlist before sending out invitations to interview.
- Ensure the Confidential Declaration form has been completed by the shortlisted candidates (*please note that this shouldn't be used to short list and should only be looked at after a decision has been made as to who to interview*).
- Ensure that all candidates know when and where the interview is and what it will entail.

#### BEFORE SELECTING THE PREFERRED CANDIDATE (PAID POSTS):

- Ensure a face-to-face interview is conducted (by at least two people) for all suitable candidates based on an objective assessment of their ability to meet the person specification and role description.
- Ensure that all questions are designed to gain the required information and to assess the person's suitability for the role.
- Verify the applicant's identity

### **BEFORE YOU FORMALLY APPOINT (PAID POSTS AND VOLUNTEERS):**

- Ensure that you are confident about selecting a candidate. If you aren't, don't appoint.
- Ensure that two references have been requested for the chosen candidate.
- In the interests of transparency, that one referee should be from outside the MTV community (although it is not necessary to have a member of a profession, the referee should not be a relative).
- Carry out other necessary checks including a DBS disclosure where the role is eligible (those working in regulated activity with children / vulnerable adults) and follow up references.
- Ensure that your preferred candidate knows that the offer of employment is conditional on receiving satisfactory information from all necessary checks. **All elements of safer recruitment are to be completed including, when necessary, the receipt of a DBS disclosure before a volunteer is permanently in place. If a person is volunteering for more than 4 weeks of volunteering before the safer recruitment process is completed a trustee should be made aware of the situation.**

### **ONCE APPOINTED (PAID POSTS AND VOLUNTEERS):**

- Ensure that the individual receives a written contract (paid staff) or a Volunteer Agreement (voluntary staff) which includes a probationary period, keeping a signed copy on file.
- In accordance with the contract/agreement, provide a named supervisor and make sure that regular review meetings are set up. Induction should include: understanding of the expected behaviour and boundaries associated with the role; understanding of the charity policies relating to safeguarding, health and safety etc.; understanding of the conduct expected of them; understanding what good practice is for the work they are involved in – including boundaries etc.; organising both safeguarding and any other training identified as necessary.
- Ensure that the Volunteer Agreement including the Code of Conduct is signed and a copy kept on file.

### **When someone leaves a position, they should be offered an exit interview / conversation.**

They should be thanked for their services and encouraged to share any comments on how any aspect of the role and service could be improved.

If in doubt about any element of safer recruitment, please contact the Chair of Trustees.

## **CONTACT NUMBERS:**

Safeguarding Lead: Holger Marsen  
holger@mtvhampton.org.uk Mobile:  
07968 489 082

Deputy Safeguarding Lead: Nick Neilan  
nick@mtvhampton.org.uk  
Mobile: 07469 147 137

Deputy Safeguarding Lead: Penny Dimond  
penny@mtvhampton.org.uk

Chair of Trustees: Ben Lovell  
ben@mtvhampton.org.uk  
Mobile: 07734 775102

Social Services:  
Child Protection Team 020 8891 7969 (Mon-Fri 9-5pm)  
Out of hours 020 8770 5000  
Adult Emergency Team: 020 8744 2442  
Single Point of Access – 0208 547 5008 – Mon – Fri 8am- 6pm  
0208 770 5000 – out of hours

Police: **999** or 111 in non-emergencies  
Richmond Police Child Protection Team 020 8247 6331

NSPCC: 0808 800 5000  
Childline : 0800 1111  
STOP IT NOW : 0808 1000 900  
Family Lives (previously Parentline) helpline : 0808 800 2222  
CCPAS 24 helpline: 0303 003 1111

***In emergency always call 999.***