**

***CENTRE PEACE HOMES***

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**CENTREPEACE HOMES**

**Safeguarding Policy**

**1 Legislative Framework and Guidance**

**England**

• [Regulation 12: The protection of children standard](http://www.legislation.gov.uk/en/uksi/2015/541/regulation/12/made)

• [Guide to the protection of children standard](http://onrezume.org/Guides/Guide%20to%20the%20protection%20of%20children%20standard.pdf)

**Wales**

• [Regulation 15: Personal plan](https://www.legislation.gov.uk/wsi/2017/1264/regulation/15/made)

• [Regulation 27: Safeguarding policies and procedures](https://www.legislation.gov.uk/wsi/2017/1264/regulation/27/made)

• [Regulation 36: Supporting and developing staff](https://www.legislation.gov.uk/wsi/2017/1264/regulation/36/made)

• [Social Services and Well-being (Wales) Act 2014](http://www.legislation.gov.uk/anaw/2014/4/pdfs/anaw_20140004_en.pdf)

* [All Wales Safe Guarding Procedure 2019](https://www.gwentsafeguarding.org.uk/en/safeguarding-adults/the-wales-safeguarding-procedures-for-children-and-adults-at-risk-of-abuse-and-neglect)

**2 Outcome**

Staff are aware of their responsibilities for creating a safe environment for children/young people in the home.

**3 Definitions**

**3.1 Child**

The Children’s Act 1989 and 2004 respectfully define a child as anyone who has not yet reached their

18th birthday. The fact that a child has reached 16 years of age and is living independently or in further education does not change his or her entitlement to protection under the Children Act 1989.

**3.2 Child Abuse or Maltreatment**

In 1999, the WHO Consultation on Child Abuse Prevention drafted the following definition: Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.

**3.3 Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning, scalding, drowning, suffocating or otherwise causing harm to a child or young person. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child/young person.

**3.3.1 Signs and Symptoms of Physical Abuse**

Signs and symptoms of physical abuse may include, but are not limited to:

• Unexplained recurrent injuries or burns

• Improbable excuses or refusal to explain injuries

• Wearing clothes to cover injuries, even in hot weather

• Refusal to undress for gym

• Bald patches

• Chronic running away

• Fear of medical help or examination

• Self-destructive tendencies

• Aggression towards others

• Fear of physical contact – shrinking back if touched

• Admitting that they are punished, but the punishment is excessive

• Fear of suspected abuser being contacted.

**3.4 Emotional Abuse**

Emotional abuse is the persistent emotional maltreatment of a child/young person such as to cause severe and persistent adverse effects on the child’s/young person’s emotional development. It may involve conveying to children/young people that they are worthless or unloved or inadequate. It may include not giving the child/young person opportunities to express their views, deliberately

silencing them or making fun of what they say. It may feature age or developmentally inappropriate expectations being imposed on children/young people. It may also involve serious bullying causing

children/young people to feel frightened or in danger or the exploitation or corruption of children/young people.

**3.4.1 Signs and Symptoms of Emotional Abuse**

Signs and symptoms of emotional abuse may include, but are not limited to:

• Physical, mental and emotional development lags

• Sudden speech disorders

• Continual self-depreciation (’I’m stupid, ugly, worthless, etc’)

• Overreaction to mistakes

• Extreme fear of any new situation

• Inappropriate response to pain (’I deserve this’)

• Neurotic behaviour (rocking, hair twisting, self-mutilation)

• Extremes of passivity or aggression.

**3.5 Sexual Abuse**

Sexual abuse involves forcing or enticing a child/young person to take part in sexual activities whether or not the child/young person is aware of what is happening. The activities may involve physical contact, assault by penetration or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. It may also include non-contact activities such as

involving children/young people in looking at sexual images, watching sexual activities, encouraging children/young people to behave in sexually inappropriate ways or grooming a child/young person

in preparation for sexual abuse.

**3.5.1 Signs and Symptoms of Sexual Abuse**

Signs and symptoms of sexual abuse may include, but are not limited to:

• Being overly affectionate or knowledgeable in a sexual way inappropriate to the child’s age

• Medical problems such as chronic itching, pain in the genitals, venereal diseases

• Other extreme reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia

• Personality changes such as becoming insecure or clinging

• Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys

• Sudden loss of appetite or compulsive eating

• Being isolated or withdrawn

• Inability to concentrate

• Lack of trust or fear of someone they know well

• Starting to wet again, day or night/nightmares

• Become worried about clothing being removed

• Suddenly drawing sexually explicit pictures

• Trying to be 'ultra-good' or perfect

• Overreacting to criticism.

**3.6 Neglect**

Neglect is the persistent failure to meet a child’s/young person’s basic physical and/or psychological needs to the extent that it is likely to result in the serious impairment of a child’s/young person’s health or development. Neglect may involve a parent or carer failing to provide adequate food, clothing and shelter; failing to protect a child/young person from physical and emotional harm or danger; failing to ensure adequate supervision or failing to ensure access to appropriate medical care.

**3.6.1 Signs and Symptoms of Neglect**

Signs and symptoms of neglect may include, but are not limited to:

• Constant hunger

• Poor personal hygiene

• Constant tiredness

• Poor state of clothing

• Emaciation

• Untreated medical problems

• No social relationships

• Compulsive scavenging

• Destructive tendencies.

**3.7 Sexual Exploitation**

Sexual exploitation involves exploitative situations, contexts and relationships where adults at risk (or a third person or persons) receive ’something’ (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. It affects men as well as women. People who are sexually exploited do not always perceive that they are being exploited. In all cases those exploiting the adult have power over them by virtue of their age, gender, intellect, physical strength, and/or economic or other resources. There is a distinct inequality in the relationship. Signs to look out for are not being able to speak to the adult alone, observation of the adult seeking approval from the

exploiter to respond and the person exploiting the adult answering for them and making decisions without consulting them.

**3.8 Domestic Abuse**

The Home Office (March 2013) defines domestic abuse as: Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse: Psychological; Physical; Sexual; Financial; Emotional. Domestic Abuse includes controlling and coercive behaviour.

**3.9 Exploitation**

Opportunistically or premeditated, unfairly manipulating someone for profit, personal gain, modern slavery, human trafficking, and radicalisation. Including online and online sexual exploitation.

**3.10 Financial abuse**

The use of a person’s assets and/or financial resources other than for purposes directed by her/him, and/or other than in her/his best interest. Financial abuse includes theft, exploitation, pressure in connections with wills, property, inheritance, or financial transactions, or misappropriation of property, possessions or benefits.

**3.11 Discriminatory Abuse**

Discriminatory abuse includes racist or sexual remarks, comments based on a person’s impairment, disability, age or illness and other forms of harassment, slurs, or similar treatment. This may also include isolation or withdrawal from religious or cultural activity, services or supportive networks, (No Secrets 2000) Culture, religion, politics and sexual orientation, discrimination that is based on

persons disability or age and Hate crime. Discrimination can be in two forms, Direct: when a person with a protected characteristic is treated less favourably than others. Indirect: when a person with a protected characteristic is placed at an unfair disadvantage by putting rules or arrangements in

place that apply to everyone. Consideration should be given to harassment and victimisation. Domestic Abuse is ’any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have intimate partners of family members regardless of gender or sexuality’ (Home Office 2013)

**3.12 Radicalisation**

Radicalisation ’refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism’ (Prevent HM Govt. 2011). The Organisation recognises that there is a threat of terrorism and understands that many terrorists are radicalised in the course of their contact with others. The UK government Prevention strategy (2011) which is a key aspect of safeguarding, outlines the commitment to be made by the healthcare sector in ensuring that threats of this kind are understood and responded to. In addition, ’Channel’ is a supportive multi-agency process, designed to safeguard those individuals who may be vulnerable to being drawn into any form of terrorism.

**3.13 Modern Slavery or Human Trafficking**

A person commits an offence if:

• The person holds another person in slavery or servitude and the circumstances are such that the person knows or ought to know that the other person is held in slavery or servitude, or

• The person requires another person to perform forced or compulsory labour and the circumstances are such that the person knows or ought to know that the other person is being required to perform forced or compulsory labour. There are many different characteristics that distinguish slavery from other human rights violations, however only one needs to be present for slavery to exist. Someone is in slavery if they are:

**–** Forced to work through mental or physical threat;

**–** Owned or controlled by an ’employer’, usually through mental or physical abuse or the threat of abuse;

**–** Dehumanised, treated as a commodity or bought and sold as ’property’;

**–** Physically constrained or has restrictions placed on his/her freedom of movement.

Contemporary slavery takes various forms and affects people of all ages, gender and races. Adults who are enslaved are not always subject to human trafficking. Recent court cases have found homeless adults, promised paid work opportunities enslaved and forced to work and live in dehumanised conditions, and adults with a learning difficulty restricted in their movements and threatened to hand over their finances and work for no gains. From 1 November 2015, specified public authorities have a duty to notify the Secretary of State of any individual identified in England and Wales as a suspected victim of slavery or human trafficking, under Section 52 of the Modern Slavery Act 2015.

The main elements of human trafficking are:

• The movement – recruitment, transportation, transfer, harbouring or receipt of people

• The control – threat, use of force, coercion, abduction, fraud, deception, abuse of power or vulnerability, or the giving of payments or benefits to a person in control of the victim

• The purpose – exploitation of a person, which includes prostitution and other sexual exploitation, forced labour, slavery or similar practices, and the removal of organs. Children cannot give consent to being moved. Therefore, the coercion or deception elements do not have to be present. Countries throughout Europe translate and interpret the Palermo Protocol in different ways so the definition of what constitutes human trafficking can differ between nations.

**3.14 Female Genital Mutilation**

• According to the NSPCC, Female Genital Mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons and it can be known as female circumcision, cutting or ’Sunna’. Sometimes, religious, social or cultural reasons are put forward for this happening but it is abuse and a criminal offence, to a woman or child. The term covers all harmful procedures to the female genitalia for non-medical purposes. There are four types of FGM and all are illegal and have serious health risks. FGM ranges from pricking or cauterising the genital area, through partial or total removal of the clitoris, cutting the lips (the labia) and narrowing the vaginal opening. FGM is usually performed by someone with no medical training and no anaesthetic or antiseptic treatment is used. Victims are often forcibly restrained and cutting is made using instruments such as a knife, pair of scissors, scalpel, glass or razor blade and serious health problems are common.

• FGM has been a criminal offence in the UK since 1985 and in 2003 it also became a criminal offence for UK nationals or permanent UK residents to take their child abroad to have female genital mutilation. Anyone found guilty of the offence faces a maximum penalty of 14 years in prison. FGM is a hidden crime and it is therefore difficult to assess the scope of this. More information can be found by contacting help@nspcc.org.uk or calling 0808 800 5000.

**3.15 Hate Crime**

The police define Hate Crime as ’any incident that is perceived by the victim, or any other person, to be racist, homophobic, transphobic or due to a person’s religion, belief, gender identity or disability’. It should be noted that this definition is based on the perception of the victim or anyone else and is not reliant on evidence. In addition, it includes incidents that do not constitute a criminal offence.

**3.16 Mate Crime**

A ’mate crime’ as defined by the Safety Net Project is ’when vulnerable people are befriended by members of the community who go on to exploit and take advantage of them. It may not be an illegal act but still has a negative effect on the individual.’ Mate crime is often difficult for police to investigate, due to its sometimes-ambiguous nature, but should be reported to the police who will make a decision about whether or not a criminal offence has been committed. Mate Crime is carried out by someone the adult knows and often happens in private. In recent years there have been a number of Serious Case Reviews relating to people with a learning disability who were murdered or seriously harmed by people who purported to be their friend.

**3.17 Restraint**

In extreme circumstances, unlawful or inappropriate use of restraint may constitute a criminal offence. Someone is using restraint if they use force, or threaten to use force, to make someone do something they are resisting, or where an adult’s freedom of movement is restricted, whether they are resisting or not. Restraint covers a wide range of actions. It includes the use of active or passive means to ensure that the person concerned does something, or does not do something they want to do, for example, the use of key pads to prevent people from going where they want from a closed environment. Please also see the Homes Behaviour Support Policy.

**3.18 Safeguarding**

Safeguarding and promoting the welfare of children/young people is defined as protecting children/young people from maltreatment; preventing impairment of health or development and ensuring that children/young people are growing up in circumstances consistent with the provision of safe and effective care in line with [Working together to safeguard people: code of safeguarding practice | GOV.WALES](https://www.gov.wales/working-together-safeguard-people-code-safeguarding-practice)

**3.19 Child Protection**

Child protection is a part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children/young people who are suffering or are likely to suffer significant harm.

**4 Introduction and Summary**

1. Centrepeace Homes is fully committed to the health and welfare of the children/young people in its care. In order to ensure immediate and appropriate responses to the issues of safeguarding and child protection, the home has its own Safeguarding Children Procedures which are detailed in accordance with the statutory requirements of the Local Safeguarding

Children Boards (LSCB) and the [Working together to safeguard people: code of safeguarding practice | GOV.WALES](https://www.gov.wales/working-together-safeguard-people-code-safeguarding-practice). Clyffard House follows the framework for managing allegations of abuse against people who work with children/young people as set out in Working Together to Safeguard Children.

2. The home’s Safeguarding Children Procedures are available to all staff and form the framework for the reporting and investigation of all allegations. Staff knowledge and understanding of safeguarding policies and procedures is tested during supervision, probationary assessment and appraisals.

3. The home takes seriously its responsibility to safeguard and promote the welfare of all children/young people in its care and any incidents which may undermine the welfare of a child/young person will be dealt with fairly, quickly and consistently in a way which provides both effective protection for the child/young person and at the same time gives impartial support to the person who is subject to an allegation. The designated person will liaise with the Local Authority Designated Officer (LADO) and a summary of the incident will be sent to the appropriate authorities. A full incident report will be logged and in accordance with The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017. All details will be recorded in the appropriate dedicated records.

4. All staff (including temporary or agency staff) with access to children/young people are made aware of our safeguarding procedures during induction training and their awareness continues to be regularly assessed during on-going supervision and training. In accordance with the requirements of the Social Services and Well Being Act 2014 and [Working together to safeguard people: code of safeguarding practice | GOV.WALES](https://www.gov.wales/working-together-safeguard-people-code-safeguarding-practice) , the home ensures that all staff employed by the organisation receive annual training in safeguarding and child protection. A link to the LSCB procedures is also kept in each of our residential units to ensure that staff have access to these procedures and are familiar with their requirements.

5. There is duty to share information in accordance with the Data Protection Act 2018 and the common law duty of confidentiality. Both allow for the sharing of information and should not be automatically used as a reason for not doing so. In exceptional circumstances, personal information can be lawfully shared without consent where there is a legal requirement or the professional deems it to be in the public interest. One of the exceptional circumstances is in order to prevent abuse or serious harm to others.

5. All staff are responsible for ensuring that all incidents which present a potential risk of significant harm to a child/young person in our care are reported immediately to the designated person for safeguarding and child protection or to either of the two deputy designated persons. The designated person or one of the deputies will refer directly to the LADO and to Local Authority children’s social care and the placing authority social worker and this referral will be followed up in writing. The designated person, working together with LADO, will also refer to the police as and when necessary. Reportable incidents includes any incidents which are alleged to have occurred while the child/young person is away from home, at school or on home contact.

6. On occasions where staff have concerns about (or receive an allegation about) a colleague; staff must ensure that these allegations are dealt with in the same way as any other allegation and consult with the designated person or one of the deputies. Should staff receive an allegation against the designated person or one of the deputy designated persons staff should refer this to the Responsible Individual . The home endeavour to ensure that any allegations are dealt with in a respectful, supportive and timely manner. On occasions, it may be necessary to suspend a member of staff from duty until the matter is concluded effectively. This measure is taken to protect both the child/young person and the member of staff who is the subject of an allegation.

7. All staff should bear in mind the possibility that allegations of improper conduct can be made against them by children/young people and should try to ensure that there are safeguards to themselves as far as possible; an example of this would be to ensure that a door is left ajar when talking to a child/young person in a one-to-one situation. Good practice will always minimise these situations.

8. Staff should consult their line manager immediately if they have any concerns in regard to a child’s/young person’s behaviour towards them.

9. Staff should ensure that any visitor to the home is vetted and supervised especially when undertaking work with children/young people. Staff should also ensure that they know the whereabouts of children/young people at all time and make regular contact with them if they are given free time. Any potential risks to a child/young person (such as exploitation due to vulnerability) must be highlighted in the child’s/young person’s risk assessment and placement plan. This information should always be disseminated to all staff to ensure that the safety, health and welfare of a child/young person is protected.

**5 Safeguarding and Child Protection Policy**

1. The home recognises that all children/young people deserve the opportunity to achieve their full potential. In order to achieve the best possible outcomes, children/young people need to feel valued, respected and understood and be supported by a network of reliable and appropriately affectionate relationships. If they are denied the opportunity and support they need to achieve these outcomes children/young people are at an increased risk of an impoverished childhood where abuse will pose particular problems. The home recognises

that all children/young people have the right to freedom from abuse regardless of their age, gender, disability, culture, language, racial orientation, religious beliefs or sexual orientation. All children/young people are also entitled to receive every opportunity to:

(a) Achieve physical and emotional health and well-being; (b) Receive a high-quality education;

(c) Live in a safe environment and be protected from harm;

(d) Feel respected, valued and supported by a network of reliable, positive relationships; (e) Be supported in increasing their independence and coping with everyday living;

(f) Have a positive self-image and a secure sense of identity;

(g) Develop good interpersonal skills and confidence in social situations.

2. The home provides staff with on-going training to assist them to act appropriately when they

are aware of any indicators that may point towards a suspicion that a child’s/young person’s welfare or safety may be at risk.

3. The Protection of Children standard highlights the importance of protecting children/young people from harm and enabling them to keep themselves safe.

4. Staff have specific responsibilities to protect children/young people:

(a) Assess whether each child/young person is at risk of harm, taking into account information in the child’s/young person’s relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child/young person;

(b) Help each child/young person to understand how to keep safe;

(c) Have the skills to identify and act upon signs that a child/young person is at risk of harm;

(d) Manage relationships between children/young people to prevent them from harming each other;

(e) Understand the roles and responsibilities in relation to protecting children/young people that are assigned to them by the registered person;

(f) Take effective action whenever there is a serious concern about a child’s/young person’s welfare; and

(g) Be familiar with, and act in accordance with, the home’s child protection policies;

(h) Ensure that the home’s day-to-day care is arranged and delivered so as to keep each child/young person safe and to protect each child/young person effectively from harm;

(i) Ensure that the premises used for the purposes of the home are located so that children/young people are effectively safeguarded;

(j) Ensure that the premises used for the purposes of the home are designed, furnished and maintained so as to protect each child/young person from avoidable hazards to the child’s/young person’s health;

(k) Ensure that the effectiveness of the home’s child protection policies is monitored regularly.

**6 Safeguarding and Promoting Welfare (Key Principles)**

To support the key principles of safeguarding and promoting the welfare of all children/young people in our care all staff will:

1. Treat all children/young people and their welfare with the utmost respect in line with the ethos of the organisation;

2. Be alert to potential indicators of abuse and neglect;

3. Be alert to the risks that potential abusers may pose to children/young people and be alert to situations in which potential abusers may operate i.e. strangers offering lifts to

children/young people or attempting to offer them alcohol or attempting to groom them for sexual favours;

4. Be alert to the potential grooming behaviours in others (including other staff) that may indicate a threat or potential threat to children/young people such as staff always requesting to be on duty with a particular child/young person, staff texting children/young people on mobile telephones, staff leaving letters for children/young people or taking them on frequent trips out;

5. Be aware of the effects of abuse and neglect on children/young people;

6. Be aware that bullying can be a safeguarding issue, the policy on bullying will be considered alongside and in conjunction with the Safeguarding policy;

7. Co-operate fully as required by the designated person/deputy designated person and/or external agencies e.g. LSCB’s; Children’s Social Care; Police in all stages of the child protection process.

**7 Roles and Responsibilities**

1. The home has appointed a designated person (RI) for child protection and (in the absence of the designated person) two deputy designated persons. The responsibilities of the designated persons include:

(a) Ensuring that all staff who have direct contact with children/young people are provided with safeguarding and child protection training;

(b) Promptly notifying the LADO or in Wales contact the local Safeguarding lead Gwent RSB Gwentsafeguarding@caerphilly.gov.uk

Tel: 01443 86 4373 / 4546 / 4670 of all reported concerns;

(c) Informing all staff of their roles and responsibilities in recognising and acting upon indicators that a child’s/young person’s welfare or safety may be at risk and implementing agreed procedures;

(d) Advising and supporting all staff when they encounter a child protection issue and acting as the first point of contact for all child protection matters;

(e) Informing the accused person (if the person is a member of staff) about the allegation as soon as possible after consulting the LADO. However, if a strategy discussion is needed or it is clear that the police or children’s social care may need to be involved, this should not be done until those agencies have been consulted and have agreed what information can be disclosed to the person;

(f) Attending and contributing to any strategy discussion and any further investigations and suspending a member of staff from duty in cases where the LADO, children’s social care and the police consider this to be necessary;

(g) Ensuring that placing authorities and Care Inspectorate Wales is informed of all child protection incidents and advising and informing the registered individual of all child protection events;

(h) Monitoring the child protection case until a conclusion is agreed by all parties and ensuring that accurate written records are kept;

(i) If the complaint or allegation is about a member of staff and is such that it is clear that investigation by the police or children’s social care is not necessary the designated person will discuss next steps with the LADO. Options may include taking no further action, instigating disciplinary proceedings following investigation or deciding not to use a person’s services in future;

(j) Where a case has been concluded and an allegation against a member of staff has been substantiated, the designated person will discuss with the LADO as to whether a referral to the Disclosure and Barring Service is required. Social Care Wales will also be informed, as all employees will be registered with the workforce regulator;

(k) At the conclusion of a case the designated person will review the circumstances of the case to determine whether there are any improvements to be made to help prevent similar events in the future;

(l) The designated person will monitor the home’s safeguarding and child protection policies and procedures on an annual basis.

2. All staff have the following responsibilities:

(a) To respond in accordance with the home’s procedures to every case of alleged abuse or neglect; The home has designated persons. If Senior Management or one of the other designated person are the subject of an allegation and the staff member does not feel they can refer to the other two, the staff member can refer direct to local LADO as listed, Ofsted or Care Inspectorate Wales as appropriate.

(b) To promptly refer any allegation, suspicion or incident of abuse to the designated person or in his or her absence the deputy designated person (should the designated person be the subject of an allegation the Responsible Individual should be contacted);

(c) To record all details of their involvement in child protection investigations; (d) Co-operate fully in the process and provide evidence as directed;

(e) To follow stringently the guidelines within safer recruitment policy to minimise risk of child protection or safeguarding issues when recruiting new staff.

3. The Whistleblowing Policy outlines the duty all staff have to pass on concerns of child protection, safeguarding and misuse of power.

4. No employee exercising their responsibilities under this procedure and in good faith will be penalised for doing so. Any attempt to victimise employees for raising genuine concerns or to prevent such concerns being raised will be regarded as a disciplinary matter.

**8 Child Protection Procedures**

There are a variety of ways in which staff may encounter a potential 'child protection issue' or concerns. For example staff may have concerns about another member of staff because they have witnessed something they may think is inappropriate; they may receive a letter or written communication with child protection implications; they may receive a telephone call with child protection implications or they may receive a disclosure from a child/young person which may implicate a person from outside the organisation, a member of the organisation’s staff or another child/young person. All staff have a duty to report any concerns even though a concern may not always trigger a child protection investigation. It is not the role of staff to investigate or seek out evidence on matters relating to child protection concerns and in no circumstances must they attempt to do so. Staff should inform the designated person or their deputy of their concerns in the first instance.

**8.1 Procedures to be followed where an Allegation Involves a Member of Staff**

*Any allegation against people who work with children should be reported immediately to a senior manager within the organisation. The designated officer, or team of officers, should also be informed within one working day of all allegations that come to an employer’s attention or that are made directly to the police. If an organisation or agency removes an individual (paid worker or unpaid volunteer) from work in regulated activity with children (or would have, had the person not left first) because the person poses a risk of harm to children, the organisation or agency must make a referral to the Disclosure and Barring Service to consider whether to add the individual to the barred list. This applies irrespective of whether a referral has been made to local authority children’s social care and/or the designated officer or team of officers. It is an offence to fail to make a referral without good reason.*

1. In cases where it is believed that a member of staff has behaved in a way that has harmed or may have harmed a child/young person; has possibly committed an offence in relation to a child/young person or has behaved in a way towards a child/young person that indicates s/he may be unsuitable to work with children/young people; staff will firstly refer the matter to the designated person as above.

2. The designated person will then inform the LADO; children’s social care (England) or health and social care (Wales) within one working day. The designated person will liaise with staff to ensure that the appropriate authorities are notified in writing.

3. The LADO will then discuss the matter with the designated person and if there is cause to suspect that a child/young person is likely to suffer significant harm the LADO will ask children’s social care to convene a strategy discussion. At this stage it may be necessary for the designated person to inform the member of staff and to suspend the member of staff in order to protect both the child/young person and the staff member.

4. If there is not cause to suspect that significant harm is an issue but a criminal offence may have been committed the LADO will convene a similar discussion to decide whether a police investigation is needed. If a criminal investigation is required the police will aim to complete their enquiries as quickly as possible and will keep the progress of the case under review. If the police decide not to charge the individual or to administer a caution they will pass any information they have which may be relevant to a disciplinary case to the designated person/employer.

5. Where it is decided that the allegation does not involve a possible criminal offence it will be dealt with by the employer. If the nature of the allegation does not require formal disciplinary action, appropriate action should be instituted within three working days. If a disciplinary hearing is required and can be held without further investigation, the hearing should be held within 15 working days. Where further investigation is required to inform consideration of disciplinary action the investigating officer should aim to provide a report to the employer within 10 working days. On receipt of the report the designated person/employer will decide whether a disciplinary hearing is required within two working days and if a hearing is required it should be held within 15 working days.

6. If the allegation is substantiated and on conclusion of the case the employer dismisses the person the designated person shall consult the LADO as to whether a referral to the Disclosure and Barring Service is required.

**8.2 Procedures to be followed when Receiving a Disclosure From a**

**Child/Young Person**

If you as a member of staff receive a disclosure from a child/young person, you should:

1. Explain in a manner that the child/young person may easily understand that you cannot keep the conversation secret. Try to make the young person aware that reporting concerns is not

a breach of trust;

2. Encourage the young person to talk but do not prompt or ask leading questions;

3. Do not interrupt the child/young person when they are recalling significant events;

4. Show that you have heard what is being said and that you take the allegations seriously;

5. Keep an accurate recording of the child’s/young person’s disclosure using exact words where ever possible;

6. Make notes of the time, place and people who were present at the disclosure;

7. Do not confront or inform the alleged abuser of the concern;

8. Contact the designated person for child protection or the deputy designated person and follow instructions;

9. Complete all relevant paperwork such as notifications and incident reports;

10. Maintain confidentiality as directed by the designated person. If the allegation is about a member of staff the designated person will liaise with the LADO to ascertain further action and the procedures for allegations against staff (described above) will be followed. If the allegation is not about a member of staff, the designated person will liaise with the locality safeguarding team.

**8.3 Procedures to be followed when Receiving a Letter or Written**

**Communication which may have Child Protection Implications**

If you as a member of staff receive a letter that may have child protection implications, you should immediately alert the designated person or deputy designated person. The designated person will make arrangements to collect the document which should be placed in a protective envelope in the home’s safe. Should the allegation arrive via email a copy should be printed and actioned as above.

The email should also be saved in the relevant incident folder. The designated person will alert the home’s IT support to ensure the document is secure and no further work should be carried out on the computer until authorised by the designated person. If the allegation is about a member of staff the designated person will then alert the LADO and the the procedures for allegations against staff (described above) should be followed. If the allegation is about someone outside the organisation the designated person will liaise with the locality safeguarding team team. You must ensure that confidentiality is always maintained.

**8.4 Procedures to be followed when Receiving a Telephone Call which may have Child Protection Implications**

If you as a member of staff receive a telephone call that may have child protection implications, you should:

1. Obtain the caller’s name and contact information. Should the caller wish to remain anonymous do not press for contact information but allow the caller to continue with the information;

2. Reassure the caller that the concerns will be taken seriously and investigated;

3. Make careful notes of the issues raised by the caller including the date and time of the call;

4. Treat the call as top priority and do not put the caller on hold or take other calls or allow interruptions. Do not rush the caller;

5. Clarify points if necessary i.e.,'So what you said is*·*', spell place names etc;

6. Remain polite and professional and offer no opinion or comment;

7. Do not insist that the caller puts the concerns in writing but state it would be helpful if they could do this;

8. Immediately inform the designated person;

9. Complete the necessary paperwork in consultation with the designated person;

10. Maintain confidentiality;

11. If the allegation is about a member of staff, the designated person will inform the LADO and the the procedures for allegations against staff (described above) will be followed. If the allegation involves someone outside the organisation the designated person will liaise with the locality safeguarding team (children’s social care).

**8.5 Procedures to be Followed if Staff’s Behaviour Causes Concern**

1. If the behaviour of a member of staff gives you cause for concern this should be taken seriously and thoroughly investigated. This is in the interests of all children/young people as well as the individual staff member. The kind of behaviours that may give cause for concern are as follows:

(a) Staff always requesting to work with one particular child/young person or a particular individual always requesting to work with the same member of staff;

(b) Staff giving unexplained presents to a child/young person for no particular reason; (c) Staff always wanting to take a particular child/young person out on trips;

(d) Any change in a child’s/young person’s behaviour which could be associated with a member of staff. For example a child/young person always appearing anxious after working with a particular member of staff;

(e) Staff texting a child/young person on a mobile phone;

(f) Staff coming into work unpaid to spend time with a child/young person; (g) Children/young people meeting up with staff when they are off duty;

(h) Staff not maintaining appropriate boundaries with children/young people; (i) Staff leaving letters for children/young people.

This list is not exhaustive.

2. If you witness any of the above you should immediate refer this to the designated person or

one of the deputy designated persons. The designated person will consider whether a referral to the LADO is required and the procedures for allegations against staff (above) will be followed. During investigations of a child protection concern against a member of staff it may be necessary to relieve staff of their duty or temporarily move implicated staff to another home until the investigation is concluded. The moving or suspension from duty of a member of staff is undertaken as a matter of good professional practice and is considered a neutral act.

3. Staff who are subject to investigation under child protection procedures will be supported by the HR or the HR appointed person and will receive feedback as appropriate from the designated person.

**9 Duty to report Child Protection Concerns**

All staff have the responsibility to respond in accordance with the service’s procedures to every case of alleged abuse or neglect; The service has designated persons. If the home manager or other senior staff are the subject of an allegation and the staff member does not feel they can refer to the registered individual, the staff member can refer direct to local LADO as listed or Care Inspectorate Wales.

**Designated Safeguarding Officer**

Lubna Shah

(Operations Manager CentrePeace Homes 16+ Supported Living) Level 5 Leadership and Management Health and Social Care; Lubna has completed the Designated Safeguarding Person (Group C) Wales; certified by CPD and accreditation through AIM Qualifications and Assessment Group

**10 Revision History**

The Registered Manager retains responsibility for ensuring the information displayed within this policy is up to date and current, with a review undertaken at least annually or sooner if the need arises.

**Version History**

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| --- | --- | --- | --- |
| Version: | Date: | Description: | Approved by: |
| 1.0 | 1st November | New policy.  |  |
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