**Child and Adult Protection**

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

**Scope of this chapter**

This chapter primarily applies to all children and young people who are taking part in any activities with Reach and Unite Outreach and Empowerment CIC and also applies to any person taking part in any activities including young adults over the age of 18.

Where the term ‘young people’ is used in the policy it refers to children under the age of 18, and also involves any vulnerable adults involved in any of the company’s activities.

**Outcome statement**

The safety and welfare of all young people engaged in services by Reach and Unite Outreach and Empowerment CIC is paramount. They are protected from abuse, harm and sexual exploitation (see [**Child Sexual Exploitation Policy Statement**](http://www.proceduresonline.com/brynmelyn/chapters/p_ch_sex_exp_pol.html)) and an appropriate response is made to any allegation or suspicion of abuse.

The protection of young people is everyone’s responsibility. It is a legal requirement that you report any concerns – **DOING NOTHING IS NOT AN OPTION!**

This chapter must be read in conjunction with the Local Safeguarding Children Board (LSCB) or Vulnerable Adults Procedure in the area where activities are located and the LSCB policies of that Local Authority.

 **1. Introduction, Summary and Definitions**

 **Introduction and summary**

These procedures are part of the system to safeguard and promote the welfare of children and young people and to ensure that children and young people are protected from abuse. The procedures should be known and understood by all directors and all staff (including, volunteers and agency staff)

Safeguarding and promoting the welfare of children and young people and in particular protecting them from abuse and harm is a shared responsibility and depends on effective joint working between agencies and professionals. All Local Authorities have a duty to promote and safeguard the welfare of children in their area and to investigate and take necessary action to protect children and young people from abuse and harm.

The [**Local Safeguarding Children Board (LSCB)**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/lscb.html)is the inter-agency forum which acts as the coordinator for all agencies and professionals to work together.

If there is an allegation of abuse or neglect, or a suspicion of abuse or neglect directors and staff are expected to adhere to the procedures in this Chapter in conjunction with Local Safeguarding Children Board procedures in the area where the young person’s home is located.

The procedures are mandatory and any failure to comply with them will be addressed through appropriate disciplinary procedures.

Staff must report any concerns, suspicions or allegations of abuse or harm to any child. Staff should report concerns to the company directors unless the concern relates to a director, in which case, the report must be made to the Chief Executive Officer Dominique Williams, however if the person making an allegation think’s that Dominique Williams is implicated, report to one of the following:

* Local Authority or Children's Social Care Services for the area where the child lives
* Police;
* NSPCC;
* The [**Regulatory Authority**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/regulatory_authority.html);
* Mauvette Dixon (Director)
* Vanessa Brown (Director)
* Dominique Williams (Chief Executive Officer)- 07954092466

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It is acknowledged that reporting concerns regarding the possibility of abuse can be difficult, but anyone who in good faith reports his or her concerns that a child or young person is being or is at risk of abuse or harm or that a colleague may pose a risk to a child or young person will be provided with support and assistance.

The company reserves the right to assess and act upon any concerns expressed under these procedures about the behaviour of a member of staff towards children, irrespective of the outcome of any investigation undertaken by the police or local authority children's social care services or a decision not to investigate and whether the behaviour has occurred in or outside of the work situation.

**Definition of abuse**

What is child abuse?

Child abuse happens when a person – adult or child – harms a child. It can be

physical, sexual or emotional, but can also involve a lack of love, care and attention.

Neglect can be just as damaging to a child as physical or sexual abuse.

Children may be abused by:

• family members

• friends

• people working or volunteering in organisational or community settings

• people they know

• or, much less commonly, by strangers.

Children suffering abuse often experience more than 1 type of abuse. The abuse

usually happens over a period time, rather than being a single, isolated incident.

Increasingly, abuse can happen online (NSPCC, 2017).

**General signs of abuse include:**

Children who suffer abuse may be afraid to tell anybody about the abuse. They may

struggle with feelings of guilt, shame or confusion – particularly if the abuser is a

parent, caregiver or other close family member or friend. Many of the signs that a

child is being abused are the same regardless of the type of abuse. Anyone working

with children or young people needs to be vigilant to the signs listed below.

• regular flinching in response to sudden but harmless actions, for example

someone raising a hand quickly

• showing an inexplicable fear of particular places or making excuses to avoid

particular people

• knowledge of ‘adult issues’ for example alcohol, drugs and/or sexual

behaviour which is inappropriate for their age or stage of development

• angry outbursts or behaving aggressively towards other children, adults,

animals or toys

• becoming withdrawn or appearing anxious, clingy or depressed

• self-harming or thoughts about suicide

• changes in eating habits or developing eating disorders

• regularly experiencing nightmares or sleep problems

• regularly wetting the bed or soiling their clothes

• in older children, risky behaviour such as substance misuse or criminal activity

• running away or regularly going missing from home or care

• not receiving adequate medical attention after injuries.

These signs do not necessarily mean that a child is being abused. There may well be

other reasons for changes in a child’s behaviour such as a bereavement or

relationship problems between parents/carers. In assessing whether signs are

related to abuse or not, they need to be considered in the context of the child’s development and situation (NSPCC, 2017).

**Physical abuse**

What is physical abuse?

Physical abuse happens when a child is deliberately hurt, causing injuries such as

cuts, bruises, burns and broken bones. It can involve hitting, kicking, shaking,

throwing, poisoning, burning or suffocating.

It’s also physical abuse if a parent or carer makes up or causes the symptoms of

illness in children. For example, they may give them medicine they don’t need,

making them unwell. This is known as fabricated or induced illness.

Spotting signs of physical abuse include:

Bruising

• bruises on babies who are not yet crawling or walking

• bruises on the cheeks, ears, palms, arms and feet

• bruises on the back, buttocks, tummy, hips and backs of legs

• multiple bruises in clusters, usually on the upper arms or outer thighs

• bruising which looks like it has been caused by fingers, a hand or an object,

like a belt or shoe

• large oval-shaped bite marks.

Burns or scalds

• any burns which have a clear shape of an object, for example cigarette burns

• burns to the backs of hands, feet, legs, genitals or buttocks.

Other signs of physical abuse include multiple injuries (such as bruising, fractures)

inflicted at different times.

If a child is frequently injured, and if the bruises or injuries are unexplained or the

explanation doesn’t match the injury, this should be investigated. It’s also concerning

if there is a delay in seeking medical help for a child who has been injured (NSPCC, 2017).

**Neglect**

What is neglect?

Neglect is persistently failing to meet a child’s basic physical and/or psychological

needs usually resulting in serious damage to their health and development. Neglect

may involve a parent’s or carer’s failure to:

• provide adequate food, clothing or shelter

• supervise a child (including leaving them with unsuitable carers) or keep them

safe from harm or danger

• make sure the child receives appropriate health and/or dental care

• make sure the child receives a suitable education

• meet the child’s basic emotional needs – parents may ignore their children

when they are distressed or even when they are happy or excited. This is

known as emotional neglect.

Neglect is the most common type of child abuse. It often happens at the same time

as other types of abuse.

Spotting the signs of neglect

Neglect can be difficult to identify. Isolated signs may not mean that a child is

suffering neglect, but multiple and persistent signs over time could indicate a serious

problem.

Some of these signs include:

• children who appear hungry - they may come to school without lunch money

or even try to steal food

• children who appear dirty or smelly and whose clothes are unwashed or

inadequate for the weather conditions

• children who are left alone or unsupervised

• children who fail to thrive or who have untreated injuries, health or dental

problems

• children with poor language, communication or social skills for their stage of

development

• children who live in an unsuitable home environment, for example the house

is very dirty and unsafe, perhaps with evidence of substance misuse or

violence

• children who have taken on the role of carer for other family members (NSPCC, 2017).

**Sexual abuse**

What is sexual abuse?

Sexual abuse is forcing or enticing a child to take part in sexual activities. It doesn’t

necessarily involve violence and the child may not be aware that what is happening is

abuse.

Child sexual abuse can involve contact abuse and/or non-contact abuse. Contact

abuse happens when the abuser makes physical contact with the child.

It includes:

• sexual touching of any part of the body whether the child is wearing clothes or

not.

• rape or penetration by putting an object or body part inside a child's mouth,

vagina or anus

• forcing or encouraging a child to take part in sexual activity

• making a child take their clothes off, touch someone else's genitals or

masturbate.

Non-contact abuse involves non-touching activities. It can happen online or in

person and includes:

• encouraging a child to watch or hear sexual acts

• not taking proper measures to prevent a child being exposed to sexual

activities by others

• showing pornography to a child

• making, viewing or distributing child abuse images

• allowing someone else to make, view or distribute child abuse images.

Online sexual abuse includes:

• persuading or forcing a child to send or post sexually explicit images of

themselves, this is sometimes referred to as sexting

• persuading or forcing a child to take part in sexual activities via a webcam or

smartphone

• having sexual conversations with a child by text or online

• meeting a child following online sexual grooming with the intent of abusing

them.

Abusers may threaten to send sexually explicit images, video or copies of sexual

conversations to the young person's friends and family unless they take part in other

sexual activity. Images or videos may continue to be shared long after the abuse has

stopped.

Abusers will often try to build an emotional connection with a child in order to gain

their trust for the purposes of sexual abuse. This is known as grooming.

Spotting the signs of sexual abuse

There may be physical signs that a child has suffered sexual abuse.

These include:

• anal or vaginal soreness or itching

• bruising or bleeding near the genital area

• discomfort when walking or sitting down

• an unusual discharge

• sexually transmitted infections (STI)

• pregnancy.

Changes in the child’s mood or behaviour may also cause concern. They may want to

avoid spending time with specific people. In particular, the child may show sexual

behaviour that is inappropriate for their age.

For example:

• they could use sexual language or know things about sex that you wouldn't

expect them to

• a child might become sexually active at a young age

• they might be promiscuous (NSPCC, 2017).

**Child sexual exploitation**

What is child sexual exploitation?

Child sexual exploitation (CSE) is a type of sexual abuse. Young people in exploitative

situations and relationships receive things such as gifts, money, drugs, alcohol,

status or affection in exchange for taking part in sexual activities.

Young people may be tricked into believing they're in a loving, consensual

relationship. They often trust their abuser and don't understand that they're being

abused. They may depend on their abuser or be too scared to tell anyone what's

happening. They might be invited to parties and given drugs and alcohol before

being sexually exploited. They can also be groomed and exploited online.

Some children and young people are trafficked into or within the UK for the purpose

of sexual exploitation. Sexual exploitation can also happen to young people in gangs.

Child sexual exploitation can involve violent, humiliating and degrading sexual

assaults and involve multiple perpetrators.

Spotting the signs of child sexual exploitation

Sexual exploitation can be very difficult to identify. Warning signs can easily be

mistaken for ‘normal’ teenage behaviour.

Young people who are being sexually exploited may:

• go missing from home, care or education

• be involved in abusive relationships, appearing intimidated and fearful of

certain people or situations

• hang out with groups of older people, or anti-social groups, or with other

vulnerable peers

• get involved in gangs, gang fights, gang membership

• have older boyfriends or girlfriends

• spend time at places of concern, such as hotels or known brothels

• not know where they are, because they have been moved around the country

• be involved in petty crime such as shoplifting

• have access to drugs and alcohol

• have new things such as clothes and mobile phones which they can’t or won’t

explain

• have unexplained physical injuries.

Harmful sexual behaviour

What is harmful sexual behaviour?

Children and young people who develop harmful sexual behaviour (HSB) harm

themselves and others.

HSB can include:

• using sexually explicit words and phrases

• inappropriate touching

• using sexual violence or threats

• full penetrative sex with other children or adults.

Sexual behaviour between children is also considered harmful if 1 of the children is

much older – particularly if there is more than 2 years’ difference in age or if 1 of the

children is pre-pubescent and the other isn’t. However, a younger

child can abuse an older child, particularly if they have power over them – for

example, if the older child is disabled.

Spotting the signs of harmful sexual behaviour

It’s normal for children to show signs of sexual behaviour at each stage in their

development. Children also develop at different rates, and some may be slightly more

or less advanced than other children in their age group. Behaviours which might be

concerning depend on the child’s age and the situation.

If you're unsure whether a child’s sexual behaviour is healthy, Brook provide a

helpful, easy-to-use traffic light tool. The traffic light system is used to describe

healthy (green) sexual behaviours, potentially unhealthy (amber) sexual behaviours

and unhealthy (red) sexual behaviours (NSPCC, 2017).

**Emotional abuse**

What is emotional abuse?

Emotional abuse is persistent, and, over time, it severely damages a child’s emotional

health and development.

It involves:

• humiliating, putting down or constantly criticising a child

• shouting at or threatening a child or calling them names

• mocking a child or making them perform degrading acts

• constantly blaming or scapegoating a child for things which are not their fault

• trying to control a child’s life and not recognising their individuality

• not allowing them to have friends or develop socially

• pushing a child too hard or not recognising their limitations

• manipulating a child

• exposing a child to distressing events or interactions such as drug taking,

heavy drinking or domestic abuse

• persistently ignoring them

• being cold and emotionally unavailable during interactions with a child

• never saying anything kind, positive or encouraging to a child and failing to

praise their achievements and successes.

Spotting the signs of emotional abuse

There aren’t usually any obvious physical signs of emotional abuse but you may spot

signs in a child's actions or emotions.

It’s important to remember that some children are naturally quiet and self-contained

whilst others are more open and affectionate. Mood swings and challenging

behaviour are also a normal part of growing up for teenagers and children going

through puberty. Be alert to behaviours which appear to be out of character for the

individual child or are particularly unusual for their stage of development.

Babies and pre-school children who are being emotionally abused may:

• be overly affectionate towards strangers or people they haven’t known for

very long

• not appear to have a close relationship with their parent, for example when

being taken to or collected from nursery

• lack confidence or become wary or anxious

• be unable to play

• be aggressive or nasty towards other children and animals.

Older children may:

• use language, act in a way or know about things that you wouldn’t expect for

their age

• struggle to control strong emotions or have extreme outbursts

• seem isolated from their parents

• lack social skills or have few, if any, friends

• fear making mistakes

• fear their parent being approached regarding their behaviour

• self-harm (NSPCC, 2017).

**Domestic abuse**

What is domestic abuse?

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour

between people who are or were in an intimate relationship. There are many different

types of abusive behaviours that can occur within intimate relationships, including

emotional, sexual, financial, psychological, and physical abuse. Domestic abuse can

be underpinned by an on-going pattern of psychologically abusive behaviour

(Coercive control) that is used by 1 partner to control or intimidate the other partner.

In situations of domestic abuse, both males and females can be abused or be

abusers. Domestic abuse can happen in any relationship regardless of age, sexuality,

gender identity, race, or religious identity. Research by the NSPCC has indicated that

many young people experience domestic abuse in their own intimate relationships. The UK’s cross-government definition of domestic abuse also covers

relationships between young people aged 16 and 17.

Children’s exposure to domestic abuse between parents and carers is child abuse.

Children can be directly involved in incidents of domestic abuse, or they may be

harmed by seeing or hearing abuse happening. The developmental and behavioural

impact of witnessing domestic abuse is similar to experiencing direct abuse.

Children in homes where there is domestic abuse are also at risk of other types of

abuse or neglect.

Spotting the signs of domestic abuse

It can be difficult to tell if domestic abuse is happening because it usually takes

place in the family home and abusers can act very differently when other people are

around.

Children who witness domestic abuse may:

• become aggressive

• display anti-social behaviour

• suffer from depression or anxiety

• not do as well at school - due to difficulties at home or disruption of moving to

and from refuges (NSPCC, 2017).

**Bullying and cyberbullying**

What are bullying and cyberbullying?

Bullying is behaviour that hurts someone else. It usually happens over a lengthy

period and can harm a child both physically and emotionally.

Bullying includes:

• verbal abuse, such as name calling

• non-verbal abuse, such as hand signs or glaring

• emotional abuse, such as threatening, intimidating, or humiliating someone

• exclusion, such as ignoring or isolating someone

• undermining, by constant criticism or spreading rumours

• controlling or manipulating someone

• racial, sexual or homophobic bullying

• physical assaults, such as hitting and pushing

• making silent, hoax or abusive calls.

Bullying can happen anywhere – at school, at home or online. When bullying

happens online it can involve social networks, games and mobile devices. Online

bullying can also be known as cyberbullying.

Cyberbullying includes:

• sending threatening or abusive text messages

• creating and sharing embarrassing images or videos

• 'trolling' - sending menacing or upsetting messages on social networks, chat

rooms or online games

• excluding children from online games, activities or friendship groups

• setting up hate sites or groups about a particular child

• encouraging young people to self-harm

• voting for or against someone in an abusive poll

• creating fake accounts, hijacking or stealing online identities to embarrass a

young person or cause trouble using their name.

Spotting the signs of bullying and cyberbullying

It can be hard to know whether or not a child is being bullied. They might not tell

anyone because they're scared the bullying will get worse. They might also think that

the bullying is their fault.

No one sign indicates for certain that a child’s being bullied, but you should look out

for:

• belongings getting ‘lost’ or damaged

• physical injuries such as unexplained bruises

• being afraid to go to school, being mysteriously 'ill' each morning, or skipping

school

• not doing as well at school

• asking for, or stealing, money (to give to a bully)

• being nervous, losing confidence or becoming distressed and withdrawn

• problems with eating or sleeping

• bullying others (NSPCC, 2017).

**Child trafficking**

What is child trafficking?

Child trafficking is child abuse. It involves recruiting and moving children who are

then exploited. Many children are trafficked into the UK from overseas, but children

can also be trafficked from one part of the UK to another.

Children are trafficked for:

• child sexual exploitation

• benefit fraud

• forced marriage

• domestic servitude such as cleaning, childcare, cooking

• forced labour in factories or agriculture

• criminal exploitation such as cannabis cultivation, pickpocketing, begging,

transporting, drugs, selling pirated DVDs and bag theft.

Children who are trafficked experience many forms of abuse and neglect. Physical,

sexual and emotional abuse is often used to control them and they’re also likely to

suffer physical and emotional neglect.

Child trafficking can require a network of organised criminals who recruit, transport

and exploit children and young people. Some people in the network might not be

directly involved in trafficking a child but play a part in other ways, such as falsifying

documents, bribery, owning or renting premises or money laundering.

Child trafficking can also be organised by individuals and the children’s own

families.

Traffickers trick, force or persuade children to leave their homes. They use grooming

techniques to gain the trust of a child, family or community. Although these are

methods used by traffickers, coercion, violence or threats don’t need to be proven in

cases of child trafficking - a child cannot legally consent to their exploitation so child

trafficking only requires evidence of movement and exploitation.

Modern slavery is another term which may be used in relation to child trafficking.

Modern slavery encompasses slavery, servitude, forced and compulsory labour and

human trafficking. The Modern Slavery Act passed in 2015

in England and Wales categorises offences of slavery, servitude, forced or

compulsory labour and human trafficking.

Spotting the signs of child trafficking

Signs that a child has been trafficked may not be obvious but you might notice

unusual behaviour or events.

These include a child who:

• spends a lot of time doing household chores

• rarely leaves their house, has no freedom of movement and no time for

playing

• is orphaned or living apart from their family, often in unregulated private

foster care

• lives in substandard accommodation

• isn't sure which country, city or town they're in

• is unable or reluctant to give details of accommodation or personal details

• might not be registered with a school or a GP practice

• has no documents or has falsified documents

• has no access to their parents or guardians

• is seen in inappropriate places such as brothels or factories

• possesses unaccounted for money or goods

• is permanently deprived of a large part of their earnings, required to earn a

minimum amount of money every day or pay off an exorbitant debt

• has injuries from workplace accidents

• gives a prepared story which is very similar to stories given by other children.

There are also signs that an adult is involved in child trafficking, such as:

• making multiple visa applications for different children

• acting as a guarantor for multiple visa applications for children

• travelling with different children who they’re not related to or responsible for.

• insisting on remaining with and speaking for the child

• living with unrelated or newly arrived children

• abandoning a child or claiming not to know a child they were previously with (NSPCC, 2017).

**Female genital mutilation**

What is female genital mutilation?

Female genital mutilation (FGM) is the partial or total removal of external female

genitalia for non-medical reasons. It's also known as female circumcision or cutting.

The age at which FGM is carried out varies. It may be carried out when a girl is newborn, during childhood or adolescence, just before marriage or during pregnancy.

Religious, social or cultural reasons are sometimes given for FGM. However, FGM is

child abuse. It's dangerous and a criminal offence.

There are no medical reasons to carry out FGM. It doesn't enhance fertility and it

doesn't make childbirth safer. It’s used to control female sexuality and can cause

severe and long-lasting damage to physical and emotional health.

Spotting the signs of female genital mutilation

A girl at immediate risk of FGM may not know what's going to happen. But she might

talk about or you may become aware of:

• a long holiday abroad or going 'home' to visit family

• relative or cutter visiting from abroad

• a special occasion or ceremony to 'become a woman' or get ready for

marriage

• a female relative being cut – a sister, cousin or an older female relative such as

a mother or aunt

• missing school repeatedly or running away from home.

A girl who has had FGM may:

• have difficulty walking, standing or sitting

• spend longer in the bathroom or toilet

• appear withdrawn, anxious or depressed

• have unusual behaviour after an absence from school or college

• be particularly reluctant to undergo normal medical examinations

• ask for help, but may not be explicit about the problem due to embarrassment

or fear (NSPCC, 2017).

 **2. Reporting Concerns, Suspicions or Allegations of Abuse, Harm or Sexual Exploitation**

The following actions should be taken when there is any concern, suspicion or allegation about the welfare of a child or young person which is causing or likely to cause significant harm. This includes harm perpetrated by another child or young person (including serious or persistent bullying), a member of staff, a director, a visitor, a person in the community, a teacher, a social worker, a parent or other family member, and any colleague within the company.

Staff should report concerns to a chief executive officer or director unless the chief executive officer or one of the directors are believed to be implicated. In which case staff must notify one of the following:

A director who is not implicated or one of the below

* The Local Authority Children's Social Care Services in the area the individual who you suspect has been abused lives.
* Police;
* NSPCC;
* The Regulatory Authority;

In an emergency, where there is an immediate risk to the child or adult, staff must take necessary action. This may involve asking for Police assistance or seeking emergency medical assistance e.g. taking the child or adult to a hospital or contacting the emergency services via 999. If the child or adult is taken to hospital or the Police are called, staff must inform them that there is a suspicion of abuse or harm. Staff must then notify the chief executive officer, or another director as described above.

Once notified, the chief executive officer Dominique Williams will be responsible for following the Local Safeguarding Children Board procedures.

The chief executive officer or director must inform his/her [**Regulatory Authority**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/regulatory_authority.html) of the instigation and outcome of any subsequent [**Child Protection Enquiry**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/chi_prot_enquiry.html) (See [**Delegated Authorities and Notifiable Events**](http://www.proceduresonline.com/brynmelyn/chapters/p_notif_events.htm)).

At this stage any action taken must not alert the person(s) who may have caused or be implicated in causing the abuse or harm.

 **3. Receiving Concerns or Allegations of Abuse, Harm or Sexual Exploitation**

The following is good practice that must be followed.

Staff members seeing, hearing or being told anything that causes them to become concerned that a child or young person may be at risk of, is being or has been abused must report it immediately to the chief executive officer.

Non-action is not an option in the protection of children and all staff have a duty to act.

Children and young people will sometimes disclose abuse to an adult who they have come to feel they can trust. If a child or young person discloses abuse it is important that staff respond appropriately by remaining calm and receptive; listening without interrupting; only asking questions of clarification; acknowledging the child's courage in telling.

It is not staff members responsibility to investigate or in any way make judgements about what is reported to them. Investigations, if necessary, must be undertaken by properly trained, independent professionals.

If a disclosure or allegation of abuse or harm has been made, staff should discuss with the child or other person who has made the complaint what steps they would like taken to protect them and their wishes should be shared, if not in conflict with procedures, followed.

Where the allegation is of an historical nature, e.g. relating to abuse or harm that may have been perpetrated in the past with another service, allegations must still be taken seriously and must be reported in the same way as any other allegation.

Staff must not give absolute guarantees of confidentiality to those who report possible abuse or harm, but they should guarantee that they will take steps to ensure that appropriate action is taken and the child or young person protected.

If an allegation or any suspicion is about the behaviour, past or present of another member of staff, including the chief executive officer and directors, which may in any way put children at risk, staff must follow the reporting procedures in accordance with [**Section 2, Reporting Concerns, Suspicions or Allegations**](http://www.proceduresonline.com/brynmelyn/chapters/p_cp_ap.htm)

Staff must make a written record as soon as possible of their concerns, what they have been told, any questions they asked and the replies given and the actions taken and by whom. They must then give the report to the person they report the concern to.

The record should be placed on the child’s file except where a colleague is implicated or there is any risk to the child as a result, and these records should be given to the person dealing with the matter.

Staff should not discuss the matter with others, including other staff, parents etc unless asked to do so by those responsible for dealing with any subsequent investigation or enquiry.

 **4. Action by the Chief Executive Officer or Director**

After receiving a report of a concern, suspicion or allegation of abuse or harm, the chief executive officer or director must firstly take any steps needed to protect any child or young person from risk of immediate harm and should then consult the [**Local Authority Designated Officer (LADO) HYPERLINK "http://www.proceduresonline.com/resources/keywords\_online/nat\_key/keywords/local\_authority\_desig.html" HYPERLINK "http://www.proceduresonline.com/resources/keywords\_online/nat\_key/keywords/local\_authority\_desig.html" HYPERLINK "http://www.proceduresonline.com/resources/keywords\_online/nat\_key/keywords/local\_authority\_desig.html". HYPERLINK "http://www.proceduresonline.com/resources/keywords\_online/nat\_key/keywords/local\_authority\_desig.html" HYPERLINK "http://www.proceduresonline.com/resources/keywords\_online/nat\_key/keywords/local\_authority\_desig.html" HYPERLINK "http://www.proceduresonline.com/resources/keywords\_online/nat\_key/keywords/local\_authority\_desig.html"**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/local_authority_desig.html)

The chief executive officer or director should be familiar with and follow the Local Safeguarding Children Board procedures in the area all activities are located and also these procedures for where the young person lives which in most cases will be Wolverhampton. These procedures will normally require contacting the relevant Local Authority Children's Social Care Services Team; if the allegations relates to a member of staff, the chief executive officer or director must consult the Local Authority Designated Officer (LADO) in the area where the abuse is reported - the LADO will advise on the steps that must be taken - see [**Allegations Against Staff Procedure**](http://www.proceduresonline.com/brynmelyn/chapters/p_alleg_agst_staff.htm).

The chief executive officer or director should also inform the Regulatory Authority of the instigation and outcome of any subsequent Child Protection Enquiry (See [**Delegated Authorities and Notifiable Events**](http://www.proceduresonline.com/brynmelyn/chapters/p_notif_events.htm)).

It will be for the Local Authority Children's Social Care Services team, probably after discussing the matter with the Placing Authority and conducting a [**Strategy Discussion/Meeting**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/strategy_discussion_meeting.html), to decide whether to initiate a [**Child Protection Enquiry**](http://www.proceduresonline.com/resources/keywords_online/nat_key/keywords/chi_prot_enquiry.html) and, if so, to agree the following with the chief executive officer

* Who should inform the child’s parent(s);
* Arrangements for any medical examination of the child;
* Any immediate arrangements for protection of the child;
* Any immediate arrangements for protection of other children involved or at risk;
* Whether it is necessary to inform staff within the company and if so, who will do it?
* Who should inform/update the person making the initial allegation of the steps/actions taken

The chief executive officer should ensure that the child is supported during any enquiries/investigation, this may require an independent person to be involved. The chief executive officer should also ensure that all staff co-operate fully.

 **5. Allegations made Against Children or Young People**

Abuse and Harm can be perpetrated upon one child or young person by another in many ways, including persistent or serious bullying, sexual exploitation, aggressive, exploitative or other threatening behaviour which places a child or young person at risk.

Where there is any suspicion or allegation of abuse or harm perpetrated by one child or young person upon another, the procedures in [**Section 2, Reporting Concern, Suspicions or Allegations**](http://www.proceduresonline.com/brynmelyn/chapters/p_cp_ap.htm) should be followed.

Protecting the rights of both victim and alleged perpetrator is important. It may be necessary, dependent on an assessment of all the facts, to separate the alleged perpetrator and victim but it may not be possible to explain why this is necessary to the perpetrator.

Throughout the process thereafter it will be necessary to ensure that children or young people with allegations made against them are properly supported, by an Independent Person if appropriate or required, as well as their parent(s) and carers(s).

Once the investigation is complete, consideration will then need to be given to the needs and interests of both alleged victim and perpetrator, and whether counselling and/or other support should be given.

 **6. Concerns Arising whilst Young People are in any Educational Establishment**

Where a concern arises within a educational establishment, the Child Protection & Safeguarding In establishments Policy should be followed.

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| --- |
| Local Contacts: Wolverhampton |
| Multi-Agency Safeguarding HubDesignated Officer (DO)Key Wolverhampton contact for concerns relating to a child  | 01902 555392Monday -Thurs8:30am - 5pmMonday – Friday8:30 am - 4:30pm | 01902 552999Out of hours |
| Designated Adult Safeguarding Manager (DASM)Key Wolverhampton contact for concerns relating to an adult | 01902 551199Monday -Thurs8:30am - 5pmMonday – Friday8:30 am - 4:30pm | 01902 552999Out of hours |

**References**

National Society for the Prevention of Cruelty to Children, 2017. Definitions of Child Abuse [online]. [Accessed 13th August 2020]. Available at: [file:///C:/Users/Dominique%20Williams/AppData/Local/Packages/microsoft.windowscommunicationsapps\_8wekyb3d8bbwe/LocalState/Files/S0/3/Attachments/definitions-signs-child-abuse[2661].](file://C:\Users\Dominique%2520Williams\AppData\Local\Packages\microsoft.windowscommunicationsapps_8wekyb3d8bbwe\LocalState\Files\S0\3\Attachments\definitions-signs-child-abuse%255B2661%255D.pdf)

To be Reviewed 10/04/2022

 **End**

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