# Child Protection & Safeguarding



# **Child Protection and Safeguarding Policy**

### **Contents**

Owner and version control	1
Purpose	1
Scope	1
Overview of our Policy	1
Recruitment of employees	2
Recruitment of associates	2
Ongoing responsibility for employees and associates	2
Working in schools and settings	2
Ongoing training	2
What to do if you are worried a child is at risk	3
Confidentiality	3
Appendices	1
Legal Framework	1
Context	1
Definitions of abuse	2



## Child Protection & Safeguarding



### Owner and version control

Document Owner: Sian Marsh, Programme Director.

This document must be approved annually by Senior Leadership Team and presented to the Board.

### **Purpose**

The purpose of this Policy is to ensure that we recruit and work in a way that is consistent with child protection and safeguarding, that we promote child protection and safeguarding and that we are clear about how to respond to any issues we identify that may place a child at risk.

### Scope

The Policy relates to all employees, associates, individuals supplying services and volunteers.

It is a requirement that all of the above read and sign that they have accepted this Policy before undertaking work with Best Practice Network.

## **Overview of our Policy**

Best Practice Network is fully committed to safeguarding the welfare of all children and young people, and demonstrates this by taking all reasonable steps to protect them from physical, sexual, or emotional abuse or neglect.

Our Policy is to recruit all staff safely, ensuring all necessary checks are made on every employee regardless of role. We require suppliers and associates to comply with our policy and procedures, and to provide effective supervision, support, training and quality assurance measures.

It is our Policy not to undertake work that involves direct and unaccompanied access to children or vulnerable adults or to have access to their individual data.

We work in numerous schools and settings and so it is essential that our staff and associates have the requisite checks, knowledge and skills to carry out their jobs safely and effectively.

Best Practice Network defines safeguarding and promoting the welfare of children as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care;
- and undertaking that role so as to enable those children to have optimum life chances and enter adulthood successfully.

Best Practice Network has a responsibility to work with others to safeguard and promote children's welfare.





We ensure that all staff, including freelance, contracted staff and/or associates are aware of the requirements within this policy. We update our staff and associates as to effective safeguarding practice.

## **Recruitment of employees**

BPN Recruitment Policy and Procedure should always be followed.

- All new starters must complete the DBS process.
- All new starters must be briefed on this safeguarding policy and undertake child protection / safeguarding training online within the first month of employment as part of induction.
- It is the responsibility of both the line manager and of HR to ensure that this occurs and that a log is kept to evidence this.
- No employee can work in a school or setting until this is complete, except with written Waiver from the MD.

### Recruitment of associates

- Every new associate, supplier or contractor must agree to a contract specifying that they comply with BPN Safeguarding Policy and Procedures and have undertaken safeguarding / child protection training.
- They will be sent these documents by HR as part of the 'on-boarding' process and updates will be communicated to all associates annually.
- Any individual working under contract to BPN, must provide BPN in advance with Date of Birth, DBS registration number and date, and where available proof of registration to the DBS update service.
- It is the responsibility of both the line manager and of HR to ensure that this occurs and that a log is kept to evidence this.
- No employee can work in a school or setting until initial checks are complete, except with written Waiver from the MD.

## Ongoing responsibility for employees and associates

- BPN managers may not deploy staff or associates to do work on BPN's behalf without the checks and induction described above being completed.
- On an annual basis, or when specific new legislation or requirements arise, BPN HR will run a briefing session for employees, circulating the briefing to any non-attenders.
- It is the responsibility of the line manager/commissioner/contractor to ensure that Safeguarding is included as a standard item on updates and ongoing training to staff and to work with HR to ensure that the appropriate actions are carried out.

## Working in schools and settings

Representatives of BPN should always ensure they comply with the procedures in place at the school, setting or other site being visited, which will be under its own obligations to have arrangements in place for visitors and those working on site.

## **Ongoing training**

BPN will ensure that all employees are given online safeguarding training and that this policy is





communicated regularly at staff briefings and in communications through the line management structure as well as at briefings and training days for associate facilitators, consultants etc.

## What to do if you are worried a child is at risk

- 1. In the case of an emergency where you consider that a child is in immediate danger call the police on 999.
- 2. In the event of a situation in which you consider a child is at risk, you should contact the Best Practice Network designated Child Protection Officer:
  - Sian Marsh: sianmarsh@bestpracticenet.co.uk 07795 683297 (out of office hours 07799 072872) or
  - Lyndsie Barnard: lyndsiebarnard@bestpracticenet.co.uk and 0117 920 9205.
  - If you are sending an email, please copy it to both Sian and Lyndsie.
- 3. If you witness something that is of concern when visiting a school or setting, you should inform the setting manager at the time and tell the manager that you intend to pass on your concerns to BPN. You will need to inform us that day that you have referred this concern to the manager.
- 4. Every individual has the right to make a referral to Social Care (particularly if they feel their concerns are not being taken seriously) but we would always advise you to consult with the named people first:
  - their local authority child protection team https://www.gov.uk/report-child-abuse-to-local-council:
  - the NSPCC on 0808 800 5000, email help@nspcc.org.uk or text 88858; or
  - in the case of an emergency where you consider that a child is in immediate danger call the police on 999
  - under paragraph 27 of Keeping Children Safe in Education (2018) If a teacher, in the course of their work in the profession, discovers that an act of Female Genital Mutilation appears to have been carried out on a girl under the age of 18, the teacher must report this to the police.

Referrals made to the NSPCC and the police are passed on, as appropriate, to local authority child protection teams.

Best Practice Network recognises that persons working for the organisation are themselves vulnerable in their work with children and young people. In such circumstances you should speak to the designated Child Protection Officer or an appropriate member of their organisation, as indicated above.

## Confidentiality

In any work with children and young people it is important to be clear about confidentiality. While personal information held by professionals and agencies is subject to a legal duty of confidence, and should not normally be disclosed without the subject's consent, when there are concerns that a child is or may be at risk of significant harm, then the over-riding objective must be to safeguard that child and disclosure of information is imperative.

Confidentiality and child protection should be discussed with children and young people at the beginning of any piece of work, and reminders and information given from time to time, to ensure that they understand





the processes and what responsibilities the staff members have. It is absolutely essential to be clear about the limits of confidentiality well before any such matter arises.

- Do not promise to keep secrets. If in the process of your work a child discloses to you that they are being abused you will need to tell them that you must report it.
- Should it become necessary to pass on information shared by another party, this decision should always be discussed with them and where possible their co-operation sought beforehand.

Explanations of the reasons; the processes; the likely sequence of events; who to contact for information or for support should also be provided.



# Child Protection & Safeguarding



## **Appendices**

### The Disclosure Barring Service

https://www.gov.uk/guidance/dbs-check-requests-guidance-for-employers

### **Legal Framework**

This policy has been drawn up on the basis of law and guidance that seeks to protect children, namely;

- Children Act 1989
- United Convention of the Rights of the Child 1991
- Data protection Act 1998
- Human Rights Act 1998
- Sexual Offences Act 2003
- Female Genital Mutilation Act 2003
- Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Children and Families Act 2014
- Special Educational Needs and Disabilities (SEND) 0 to 25 2014Counter-Terrorism and Security Act 2015

### **Context**

Child protection is a part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or at risk of suffering significant harm. This document applies to children and young people below the age of eighteen. The term 'children' will be used throughout the policy to apply to children and young people below the age of eighteen.

The DfE's Working Together to Safeguard Children (2018) PDF (Links to an external site) defines safeguarding and promoting the welfare of children as:

- protecting children from maltreatment
- preventing impairment of children's health or development
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes
- The Prevent Duty Guidance (2015) Counter-Terrorism and Security Act 2015 should be read in conjunction with Working Together to Safeguard Children (2015)

The DfE's **Keeping Children Safe in Education (2018)** sets out what schools and colleges must do to safeguard and protect the welfare of children and young people under the age of 18. The term 'School' includes maintained nursery schools.





https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\_data/file/55 0511/Keeping\_children\_safe\_in\_education.pdf

We work within the UN Convention on the Rights of the Child and believe that:

- All children have the right to be protected;
- All children should be listened to and their views taken seriously;
- Children's needs should be looked at holistically and should not be defined solely in terms of their abuse;
- All interventions must be child-centred;
- To effectively protect children, professionals must identify and work with safe and protective adults within children's families and communities;
- Professionals need to be aware of how issues of race, gender, disability, culture, sexuality and age impact on an individual's life experiences;
- Professionals need to be aware of how issues of race, gender, disability, culture, sexuality and age impact on their understanding of and response to keeping children safe;
- Joint working between agencies and disciplines is essential for the protection of children.

#### **Definitions of abuse**

Abuse and neglect are forms of maltreatment of a child. An individual may abuse or neglect a child by inflicting harm or failing to act to prevent harm. Neglect or abuse, physically, emotionally or sexually, can have major long-term effects on all aspects of a child's health, development and wellbeing. Sustained abuse is likely to have a deep impact on the child's self-image and self-esteem, and on his or her future life.

Harm may occur intentionally or unintentionally. The definitions of harm outlined in Working Together 2013 are used to determine whether a child needs a child protection plan.

#### 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. FGM is a form of violence against women and girls and should be addressed under existing procedures designed to safeguard children and vulnerable adults.

#### **Emotional abuse**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say of how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's





development capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

#### Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Woman can also commit acts of sexual abuse, as can other children.

#### **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

### Abuse and children with a disability

Evidence available in the UK on the extent of abuse among children with a disability suggests that they are at increased risk of abuse, and that the presence of multiple disabilities appears to increase the risk of both abuse and neglect.

Disability may be defined as:

- a major physical impairment, severe medical illness, and/or a moderate to severe learning disability;
- an ongoing high level of dependency on others of personal care and the meeting of other basic needs.

Children with a disability may be especially vulnerable to abuse for a number of reasons. Some may:

- have fewer social contacts with other children;
- receive intimate personal care and other contacts, from a larger number of caregivers;





- have an impaired capacity to challenge abuse;
- have communication difficulties which may make it difficult to tell others what is happening;
- be inhibited about complaining because of a fear of losing services
- be especially vulnerable to bullying and/or intimidation;
- be more vulnerable than other children to abuse by their peers.

Where there are concerns about the welfare of a disabled child, they should be acted upon in accordance with these procedures in the same way as with any other child. The same thresholds for action and the same timescales apply. It would be unacceptable if poor standards of care were tolerated for disabled children that would not be tolerated for nondisabled children.

