

# **SAFEGUARDING POLICY**

This is the safeguarding policy for Hope Church – Registered Charity Number 1122549

Adopted by the Board of Trustees on 28/10/2019 Amended to reflect name change in July 2020

Hope Church Policy Reference: Version 2.1

To be reviewed every year or sooner in the light of updated guidance/legislation or changes to Hope Church relating to safeguarding procedures

Next review due date: July 2021

This document is based on a Model Safeguarding Policy supplied by ThirtyOne:Eight (formerly CCPAS - the Churches' Child Protection Advisory Service). This Policy must not be copied by other churches/organisations without the written agreement of ThirtyOne:Eight.

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## **SECTION 1 - GENERAL INFORMATION**

Safe and Secure – Standard 1

## Church Details

Name of Church: Hope Church

Address: Hope Church

Suite 1D and 1E Compton House

Walnut Tree close

Guildford GU1 4TX

Tel No: 01483 351600

Email: Office@HopeChurchGuildford.com

Website: hopechurchguildford.com

#### **Membership of Denomination and Organisations:**

Hope Church is part of the Commission Family of Churches, which in turn is part of NewFrontiers Churches.

**Registered Charity Number:** 1122549 **Registered Company number:** 06457041

Insurance Company: Baptist Insurance

The following is a brief description of Hope Church and the type of work / activities we undertake with children and adults who have care and support needs:

Hope Church is a Christian church that is based in the heart of Guildford. We are passionate about the transforming love of Jesus. We believe Jesus has the answers to this world's challenges and we want to see very life transformed by Jesus.

Hope Church provides a safe space for children and adults with care and support needs through various types of activities. For children, we have the Fireflies and Kidswork programs on Sunday morning during the service. The groups available to adults include: Life Groups, women's ministry, a men's ministry, and a variety of additional courses. These are led and supported by elders and leaders in the church.

The heart of the safeguarding team is that it is a visible, trusted entity that people can turn to regarding the wellbeing of all who attend Hope Church.

## Safeguarding team details:

Numbers to contact for advice or reporting a concern

Safeguarding Co-ordinator: Marissa Trugilo 07541119423 Safeguarding Team: Phil Duncalfe 07877092673

Safeguarding Admin: Leah East

Email: safeguarding@hopechurchguildford.com Disclosure form: <a href="https://www.bit.ly/HopeSafeguard">www.bit.ly/HopeSafeguard</a>

#### **Our Commitment**

As a Leadership Team we recognise the need to provide a safe and caring environment for children, young people and adults. We acknowledge that children, young people and adults can be the victims of physical, sexual and emotional abuse, and neglect. We accept the UN Universal Declaration of Human Rights and the International Covenant of Human Rights, which states that everyone is entitled to "all the rights and freedoms set forth therein, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status". We also concur with the Convention on the Rights of the Child which states that children should be able to develop their full potential, free from hunger and want, neglect and abuse. They have a right to be protected from "all forms of physical or mental violence, injury or abuse, neglect or negligent treatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s), or any other person who has care of the child." As a Leadership we have therefore adopted the procedures set out in this safeguarding policy in accordance with statutory guidance. We are committed to build constructive links with statutory and voluntary agencies involved in safeguarding.

The policy is based on the ten **Safe and Secure** safeguarding standards published by ThirtyOne:Eight (formerly CCPAS - the Churches' Child Protection Advisory Service)

The Leadership undertakes to:

- endorse and follow all national and local safeguarding legislation and procedures, in addition to the international conventions outlined above.
- provide on-going safeguarding training for all its workers and will regularly review operational guidelines.
- support the Safeguarding Co-ordinator(s) in their work and in any action they may need to take in order to protect children and adults with care and support needs.
- the Leadership agrees not to allow the document to be copied by other organisations.

## SECTION 2 – RECOGNITION AND RESPONSE

Safe and Secure - Standards 2 and 7

## Safeguarding Awareness

The Leadership is committed to on-going safeguarding training and development opportunities for all workers, developing a culture of awareness of safeguarding issues to help protect everyone. All our workers will receive induction training and undertake safeguarding training on a regular basis.

The Leadership will also ensure that children and adults with care and support needs are provided with information on where to get help and advice in relation to abuse, discrimination, bullying or any other matter where they have a concern.

## Understanding Abuse and Neglect

Defining child abuse or abuse against an adult is a difficult and complex issue. A person may abuse by inflicting harm or failing to prevent harm. Children and adults in need of protection may be abused within a family, an institution or a community setting. Very often the abuser is known or in a trusted relationship with the child or adult.

In order to safeguard those in our church we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19 which states:

- 1. Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.
- 2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.

Also, for adults the UN Universal Declaration of Human Rights with particular reference to Article 5 which states:

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

**Detailed definitions of abuse can be found in the appendices.** This section will focus on signs and indicators of abuse, as well as how to respond to a disclosure of abuse.

## Signs of Possible Abuse (Children and Young People)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

## **Physical**

- Injuries not consistent with the explanation given for them
- Injuries that occur in places not normally exposed to falls, rough games, etc
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises on babies, bites, burns, fractures etc which do not have an accidental explanation\*
- Cuts/scratches/substance abuse\*

#### Sexual

- Any allegations made concerning sexual abuse
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour
- Age-inappropriate sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders anorexia, bulimia\*

#### **Emotional**

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

## Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food, Untreated illnesses,
- Inadequate care, etc

## Signs of Possible Abuse (Adults with Care and Support Needs)

#### **Physical**

- A history of unexplained falls, fractures, bruises, burns, minor injuries
- Signs of under or over use of medication and/or medical problems unattended

#### Sexual

- Pregnancy in a woman who is unable to consent to sexual intercourse
- Unexplained change in behaviour or sexually implicit/explicit behaviour
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting
- Infections or sexually transmitted diseases
- Full or partial disclosure or hints of sexual abuse
- Self-harming

#### **Psychological**

- Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful
- Intimidated or subdued in the presence of the carer
- Fearful, flinching or frightened of making choices or expressing wishes
- Unexplained paranoia

## **Financial or Material**

- Disparity between assets and living conditions
- Unexplained withdrawals from accounts or disappearance of financial documents
- Sudden inability to pay bills
- Carers or professionals fail to account for expenses incurred on a person's behalf

<sup>\*</sup>These indicate the possibility that a child or young person is self-harming. Approximately 20,000 are treated in accident and emergency departments in the UK each year.

Recent changes of deeds or title to property

#### **Neglect or Omission**

- Malnutrition, weight loss and /or persistent hunger
- Poor physical condition, poor hygiene, varicose ulcers, pressure sores
- Being left in wet clothing or bedding and/or clothing in a poor condition
- Failure to access appropriate health, educational services or social care
- No callers or visitors

## Discriminatory

- Inappropriate remarks, comments or lack of respect
- Poor quality or avoidance of care

#### Institutional

- Lack of flexibility or choice over meals, bed times, visitors, phone calls etc
- Inadequate medical care and misuse of medication
- Inappropriate use of restraint
- Sensory deprivation e.g. denial of use of spectacles or hearing aids
- Missing documents and/or absence of individual care plans
- Public discussion of private matter
- Lack of opportunity for social, educational or recreational activity

## How to Respond to a Child Wishing to Disclose Abuse - Effective Listening

Ensure the physical environment is welcoming, giving opportunity for the child or vulnerable adult to talk in private but making sure others are aware the conversation is taking place.

- It is especially important to allow time and space for the person to talk
- Above everything else listen without interrupting
- Be attentive and look at them whilst they are speaking
- Show acceptance of what they say (however unlikely the story may sound) by reflecting back words or short phrases they have used
- Try to remain calm, even if on the inside you are feeling something different
- Be honest and don't make promises you can't keep regarding confidentiality
- If they decide not to tell you after all, accept their decision but let them know that you are always ready to listen.
- Use language that is age appropriate and, for those with disabilities, ensure there is someone available who understands sign language, Braille etc.

#### **Helpful Responses**

- You have done the right thing in telling
- I am glad you have told me
- I will try to help you

#### **Don't Say**

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where?
- I am shocked, don't tell anyone else

Once a disclosure has been made, as soon as possible document what was said. A blank pro-forma will be found in the Fireflies and Kidswork and here in Appendix B. This should then be handed or emailed as per the process in the next section.

If it is not possible to access this form, the Safeguarding Co-ordinator can be reached via email at <a href="mailto:safeguarding@hopechurchguildford.com">safeguarding@hopechurchguildford.com</a> or by calling 07541 119423.

## Responding to Allegations of Abuse

Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse. The procedures below should be followed in all situations. Please see accompanying flowchart in Appendix C:

- The person in receipt of allegations or suspicions of abuse should report concerns as soon as possible to the Safeguarding Co-ordinator who is nominated by the Leadership to act on their behalf in dealing with the allegation or suspicion of neglect or abuse, including referring the matter on to the statutory authorities.
  - o Marissa Truglio 07541 119423 safeguarding@hopechurchguildford.com
- In the absence of the Safeguarding Co-ordinator or, if the suspicions in any way involve the Safeguarding Co-ordinator, then the report should be made to the Deputy Safeguarding Co-ordinator:
  - o Phil Duncalfe 07877 092673, Phil@hopechurchguildford.com
- If the suspicions implicate both the Safeguarding Co-ordinator and the Deputy / then the report should be made in the first instance to:
  - o ThirtyOne:Eight, PO Box 133, Swanley, Kent, BR8 7UQ.
  - o Telephone **0303 003 1111**.
  - o Alternatively contact Social Services or the police.
- Where the concern is about a child the **Safeguarding Co-ordinator** should contact Children's Social Services. Where the concern is regarding an adult in need of protection contact Adult Social Services or take advice from ThirtyOne:Eight as above.

Concerns of abuse, neglect or harm in the Guildford area are handled by the Surrey Multi Agency Safeguarding Hub (MASH). Their office telephone number (office hours) is **0300 470 9100**.

The out of hours emergency number is 01483 517 898.

They may also be contacted via email on ascmash@surreycc.gov.uk (for adults) or csmash@surreycc.gov.uk (for children and young people).

- The Safeguarding Co-ordinator may need to inform others depending on the circumstances and/or nature of the concern.
- Suspicions must not be discussed with anyone other than those nominated above. A written record of the concerns should be made in accordance with these procedures and kept in a secure place.
- Whilst allegations or suspicions of abuse will normally be reported to the Safeguarding Co-ordinator, the absence of the Safeguarding Co-ordinator or Deputy should not delay referral to Social Services, the Police or taking advice from ThirtyOne:Eight.
- The Leadership will support the Safeguarding team in their role and accept that any information they may have in their possession will be shared in a strictly limited way on a need to know basis.
- It is, of course, the right of any individual as a citizen to make a direct referral to the safeguarding agencies or seek advice from ThirtyOne:Eight, although the Leadership hope that members of the church will use this procedure. If, however, the individual with the concern feels that the Safeguarding Co-ordinator/Deputy has not responded appropriately, or where they have a disagreement with the Safeguarding Co-ordinator(s) as to the appropriateness of a referral they are free to contact an outside agency direct. We hope by making this statement that the Leadership demonstrate its commitment to effective safeguarding and the protection of all those who are vulnerable.

The role of the safeguarding co-ordinator/deputy is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies who have a legal duty to investigate.

## Detailed Procedures Where There is a Concern About a Child:

## Allegations of physical injury, neglect or emotional abuse.

If a child has a physical injury, a symptom of neglect or where there are concerns about emotional abuse, the Safeguarding Co-ordinator/Deputy will:

- Contact Children's Social Services (or ThirtyOne:Eight) for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
- Not tell the parents or carers unless advised to do so, having contacted Children's Social Services.
- Seek medical help if needed urgently, informing the doctor of any suspicions.
- For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek help, but not if this places the child at risk of significant harm.
- Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Children's Social Services direct for advice.
- Seek and follow advice given by ThirtyOne: Eight (who will confirm their advice in writing) if unsure whether or not to refer a case to Children's Social Services.

#### Allegations of sexual abuse

In the event of allegations or suspicions of sexual abuse, the Safeguarding Co-ordinator/Deputy will:

- Contact the Children's Social Services Department Duty Social Worker for children and families or Police Child Protection Team direct. They will NOT speak to the parent/carer or anyone else.
- Seek and follow the advice given by ThirtyOne:Eight if, for any reason they are unsure whether or not to contact Children's Social Services/Police. ThirtyOne:Eight will confirm its advice in writing for future reference.

## Detailed Procedures Where There is a Concern That an Adult is in Need of Protection:

Suspicions or allegations of abuse or harm including; physical, sexual, organisational, financial, discriminatory, neglect, self-neglect, forced marriage, modern slavery, domestic abuse

If there is concern about any of the above, Safeguarding Co-ordinator/Deputy will:

- contact the Adult Social Care Team who have responsibility under the Care Act 2014 to investigate allegations of abuse. Alternatively, ThirtyOne:Eight can be contacted for advice.
- If the adult is in immediate danger or has sustained a serious injury contact the Emergency Services, informing them of any suspicions.

If there is a concern regarding spiritual abuse, Safeguarding Co-ordinator will:

- Identify support services for the victim i.e. counselling or other pastoral support
- Contact ThirtyOne:Eight and in discussion with them will consider appropriate action with regards to the scale of the concern.

## Allegations of Abuse Against a Person Who Works with Children/Young People

If an accusation is made against a worker (whether a volunteer or paid member of staff) whilst following the procedure outlined above, the Safeguarding Co-ordinator, in accordance with Local Safeguarding Children Board (LSCB) procedures will need to liaise with Children's Social Services in regards to the suspension of the worker, also making a referral to a designated officer formerly called a Local Authority Designated Officer (LADO). ThirtyOne:Eight can also be contacted for advice.

# Allegations of Abuse Against a Person Who Works with Adults with Care and Support Needs.

The Care Act places the duty upon Adult Services to investigate situations of harm to adults with care and support needs. This may result in a range of options including action against the person or organisation causing the harm, increasing the support for the carers or no further action if the 'victim' chooses for no further action and they have the capacity to communicate their decision. However, this is a decision for Adult Services to decide not the church.

# SECTION 3 - PREVENTION OF ABUSE: THE RECRUITMENT AND MANAGEMENT OF WORKERS

Safe and Secure — Standards 3 and 4 Safer recruitment Management of workers

## Safer Recruitment

The Leadership will ensure all workers will be appointed, trained, supported and supervised in accordance with government guidance on safe recruitment. This includes ensuring that:

- There is a written job description / person specification for the post\*
- Those applying have completed an application form and a self-declaration form
- Those short listed have been interviewed\*\*
- Safeguarding has been discussed at interview\*\*
- Written references have been obtained in all cases for employed staff and for those volunteers who have been known to the church less than 2 years.
- For volunteers who have been part of the church for other 2 years the reference of suitability will be taken from the Elders of the church. \*\*\*
- For volunteers who have been known to the church for less than 2 years references will be taken from someone outside the church, however someone who has been in the church for more than 2 years a reference from the leadership team would suffice.
- An enhanced disclosure and barring check have been completed where necessary (we will comply with Code of Practice requirements concerning the fair treatment of applicants and the handling of information)
- Qualifications where relevant have been verified
- A suitable training programme is provided for the successful applicant
- The applicant has completed a probationary period
- The applicant has been given a copy of the organisation's safeguarding policy and knows how to report concerns.

In general, all workers will be recruited from within the church. All workers, aged 18 and above, will be required to complete a disclosure and barring check (DBS) <u>before</u> they begin any role with child, young people or adults with care or support needs. Failure to reveal relevant information on a self-disclosure form could lead to withdrawal of an offer of employment (paid or voluntary) and/or any involvement with children, young people and adults.

Support workers under the age of 18 will be classified as 'Young Leaders'. These helpers will follow a similar recruitment process as other workers but will not complete a DBS until they are 18. A 'Young Leaders' should not be let alone with the children, young people or adults that they are supporting, and should not be given adult responsibility for the group. 'Young Leaders' count as children / young people when calculating the adult to child care ratio.

All DBS applications will be handled through ThirtyOne: Eight, who act as an umbrella organisation for the church.

Because the DBS will only reflect UK items, all applicants must have been resident in the UK for at least 3 years prior to applying to work with children, young people or adults with care and support needs, unless the applicant is able to provide and clearly demonstrate 'fit person' checks from their country of origin.

<sup>\*</sup>For volunteer roles these may not be written but communicated with the volunteer verbally.

<sup>\*\*</sup>For volunteer roles these may be in the form of an informal discussion with the group leader or appointed leader.

<sup>\*\*\*</sup>For volunteer roles this reference maybe in the form of a verbal recommendation from the Leadership team.

We will encourage all workers to apply for the DBS update service and we will ask all workers to renew their DBS every 3 years if they are still involved in these areas. Any worker who does not renew their DBS when requested will be asked to step down from working with children, young people or adults.

We will treat any applicant for any position (paid or voluntary) within the church fairly and not discriminate unfairly against the subject of a disclosure on the basis of conviction or other information revealed.

Having a criminal record will not necessarily debar an individual from working/volunteering to help within the church. Only convictions or conviction information that is deemed relevant. We implement a fair policy that ensures individuals have the opportunity to disclose any convictions or conviction information in a way that allows for a clear risk assessment to be carried out that will determine whether or not the conviction or conviction information is relevant.

When receiving a disclosure which shows any allegation of abuse against a child or vulnerable adult, we will take into consideration –

- Whether the allegation is relevant to the position being offered.
- The seriousness of the offence revealed.
- The length of time since the offence took place.
- Whether the applicant has a pattern of offending behaviour.
- Whether the applicant's circumstances have changed since offending took place.
- ThirtyOne:Eight will be consulted for advice on these matters for individual blemished disclosures.

Yearly safeguarding training will be provided by Hope Church for individuals who serve on teams that deal directly with children as well as those who work with adults with additional care and support needs. Workers may also attend any inter agency training provided by a Local Safeguarding Children's Board or Local Adult Protection Board.

## Management of Workers

As a Leadership we are committed to supporting all workers and ensuring they receive support and supervision. All workers will have regular safeguarding training which will also cover expected conduct towards children, young people and adults with care and support needs. This is based on the principles outlined in the Home Office issued guidance 'Abuse of Trust: Caring for young people and the vulnerable: Guidance for preventing abuse of trust'.

As well as issues covered in this policy, our training addresses what to do if a child is ill or injured and safe communication with children, including touch, photography of children and praying with children.

## SECTION 4 – SUPPORTING VICTIMS AND WORKING WITH OFFENDERS

Safe and Secure – Standards 8 and 9 Supporting those affected by abuse Working with offenders

## **Supporting Those Affected by Abuse**

The Leadership is committed to offering pastoral care, working with statutory agencies as appropriate, and support to all those who have been affected by abuse who have contact with or are part of the church.

This may be offered in a range of ways as most appropriate for the situation, including direct support from experienced pastors, pastoral care teams or through support from church members via life groups, or via reference to external agencies that are better equipped to provide the relevant support.

## **Working with Offenders**

When someone attending the church is known to have abused children, or is known to be a risk to adults with care and support needs the Leadership will supervise the individual concerned and offer pastoral care, but in its safeguarding commitment to the protection of children and adults with care and support needs, set boundaries for that person, which they will be expected to keep. This will be in the form of a behaviour and pastoral care contract that will detail the boundaries we expect the individual to keep and the support that we will offer to them.

In addition to writing a contract, the Church Leaders / Safeguarding Team should:

- Ensure they maintain close links with the offender's probation or supervising officer, if any
- Ensure the contract is enforced, not allowing themselves to be manipulated by the offender
- Provide close support or pastoral care and observation of the offender
- Ensure key leaders are aware of the situation and consider whether to tell the church as a whole

## SECTION 5 - BEST PRACTICE GUIDELINES

Safe and Secure - Standards 5, 6 and 10

#### **Best Practice Guidelines**

As an organisation / place of worship working with children, young people and adults with care and support needs we wish to operate and promote good working practice. This will enable workers to run activities safely, develop good relationships and minimise the risk of false or unfounded accusation.

As well as a general code of conduct for workers we also consider specific good practice guidelines and risk assessments for every activity we are involved in.

## General Safeguarding Principles for Group or Activity

Some general principles for running a club, activity or service include:

- Ensuring that everyone is treated with dignity and respect in attitude, language and actions.
- Consideration for the number of workers needed to run the group and whether they should be male, female or both.
- A clear strategy for summoning additional help (if needed) in situations where a worker is working alone with a child, young person or adult with care or support needs.
- The level of personal care (e.g. toileting) required appropriate to the needs of the individual. On a Sunday morning this will involve contacting the parents via the screen and coded registration system to supervise their child in toileting.
- Clear guidelines on personal privacy e.g. when working with children avoiding questionable activity such as rough or sexually provocative games and comments.
- Not allowing anyone under 18 years of age to be left in charge of children of any age or those attending the group being left unsupervised.
- Only workers assigned to the group being allowed to participate in the activity. Other adults should not be allowed unsupervised access.

## Adult to Child Ratios

The activities for young children are not regulated to the same extent as Early Years Provision. However, following good practice guidelines the same ratios will be followed wherever possible:

Age of Children	Minimum Number of Adults	
Under 2 Years Old	1 for every 3 children	
Aged 2 Years Old	1 for every 4 children	
Aged 3-7 Years	1 for every 8 children	
Aged 8 Years or Above	No legal ratio but 1 in every 10 children is	
	recommended	

In especially risky or outdoor activities more adults per child may be necessary.

#### **Activities involving Food**

When the provision of food is part of the activity, leaders must ensure that food is prepared in accordance with Basic Food Hygiene standards or otherwise was food brought from home by the parent/guardian of each particular child.

Any medical issues, dietary needs and allergies will be appropriately managed.

## **Keeping Records**

Suitable records of children's activities will be kept for management and accountability purposes. Examples of record keeping will include:

#### • Consent Form (Appendix D)

Before attending the children or youth work parents will be expected to complete an online consent form through Churchsuite. This form should give details of parents/carers as well as medical and other details such as allergies or special dietary requirements. Consent forms should be reviewed annually and updated by parent annually. These are kept on ChurchSuite which is an encrypted database management system.

#### • Keeping a Register

A register of those attending the children's work will be kept. This will include information of the workers running that session. This record is kept on Church Suite.

#### Record of Unusual Events or Conversations

A note should be made of any unusual events or conversations that are witnessed and recorded on a Safeguarding Report Form. This information should be passed to either the Safeguarding Team, Children's group leader depending on the nature of the observation.

Note that under Data Protection legislation, people may be entitled to view what is recorded about them although there may be circumstances where this will not be appropriate. Always speak to the Safeguarding Coordinator or Deputy Safeguarding Coordinator if you have any queries regarding this sort of request.

## Accident Log and First Aid

All accidents, however minor, should be recorded. In the event of an accident, the parent/carer of a child or young person should be asked to read and sign the accident book.

In the event of an injury the worker should alert the parent or carer in the first instance or call emergency services (999) in an urgent situation.

## Discipline and Challenging Behaviour

We are committed to following guidelines provided by ThirtyOne:Eight when disciplining children and dealing with challenging behaviour.

## **Guidelines for Discipline**

- Build healthy relationships and be a good role model by setting an example. You can't expect others to observe the ground rules if you break them yourself.
- Lay down simple ground rules that are known by all attending e.g. no swearing, racism or calling each
  other names, respect for property, and make sure everyone understands what action will be taken if
  not adhered to.
- Do not compare a child, young person or adult with another in the group; rather encourage and affirm and, if possible, give them responsibility for appropriate tasks.
- Take care to give the quieter and/or well-behaved attention and resist allowing the demanding individuals to take all your time and energy.
- Be consistent in what you say and ensure that other team members know what you have said. This avoids manipulation.
- Never smack or hit anyone and don't shout. Change voice tone if necessary.

- Call on support from other leaders if you feel angry or feel you may deal with the situation unwisely.
- Every person is unique and will respond in different ways to different forms of discipline. It follows therefore each child should be dealt with on an individual basis.
- For those who are continuously disruptive:
  - Have them sit right in front of you or get a helper to sit next to them.
  - Challenge them to change their behaviour whilst encouraging their strengths.
  - Warn them you may speak to their parents/carers about their behaviour, they may be sent outside the room (under supervision) and/or be banned from attending the group for a period of time.
- All helpers should be pro-active and support the team and children / young people rather than waiting to be told to deal with a situation.

#### **Challenging Behaviour**

Following the government-developed national standards in relation to early years and day care, the following guidelines will be followed when providing services to children and young people.

If someone is being disruptive:

- Ask them to stop.
- Speak to them to establish the cause(s) of the upset.
- Inform them they will be asked to leave if the behaviour continues.
- Warn them if they continue to be disruptive, this might result in longer-term exclusion from the group.

If they are harming themselves, another person or property then others in the group should be escorted away from the area where the disruption is occurring. At the same time, and with a second worker present, request them to STOP. If your request is ignored, you might need to warn the individual that you will consider calling their parent/carer or the Police as appropriate. As a last resort, in the event of them harming themselves, other people or property, physical restraint may be needed until the parent or Police arrive.

The workers involved should always record what happened in writing as soon as possible after the incident. A Safeguarding Report Form should be used if possible. This should include:

- What activity was taking place.
- What might have caused the disruptive behaviour.
- The person's behaviour.
- What was said and how the worker and others responded.
- A list of others present who witnessed the incident.

Parents should be informed if their child has been restrained.

## **Working in Partnership**

The diversity of organisations and settings means there can be great variation in practice when it comes to safeguarding children, young people and adults. This can be because of cultural tradition, belief and religious practice or understanding, for example, of what constitutes abuse.

We therefore have clear guidelines in regard to our expectations of those with whom we work in partnership, whether in the UK or not. We will discuss with all partners our safeguarding expectations and have a partnership agreement for safeguarding.

Good communication is essential in promoting safeguarding, both to those we wish to protect, to everyone involved in working with children and adults and to all those with whom we work in partnership. This safeguarding policy is just one means of promoting safeguarding.

## Signed by:

#### Date:

This policy is a 'living' document and will be reviewed every 12 months.

## APPENDIX A – DETAILED DEFINITIONS OF ABUSE

## **Statutory Definitions of Abuse (Children and Young People)**

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults or another child or children.

Child protection legislation throughout the UK is based on the United Nations Convention on the Rights of the Child. Each nation within the UK has incorporated the convention within its legislation and guidance. The four definitions of abuse below operate in England based on the government guidance 'Working Together to Safeguard Children (2018)'.

#### 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.

#### **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 or 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 developmental 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. Women 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.

## Statutory Definitions of Abuse (Adults with Care and Support Needs)

The following definition of abuse is laid down in 'No Secrets: Guidance on developing and implementing multiagency policies and procedures to protect Adults with Care and Support Needs from abuse (Department of Health 2000):

'Abuse is a violation of an individual's human and civil rights by any other person or persons. In giving substance to that statement, however, consideration needs to be given to a number of factors:

Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological, it may be an act of neglect or an omission to act, or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented or cannot consent. Abuse can occur in any relationship and may result in significant harm to, or exploitation of, the person subjected to it'.

#### **Physical Abuse**

This is the infliction of pain or physical injury, which is either caused deliberately, or through lack of care.

#### **Sexual Abuse**

This is the involvement in sexual activities to which the person has not consented or does not truly comprehend and so cannot give informed consent, or where the other party is in a position of trust, power or authority and uses this to override or overcome lack of consent.

#### **Psychological or Emotional Abuse**

These are acts or behaviour, which cause mental distress or anguish or negates the wishes of the vulnerable adult. It is also behaviour that has a harmful effect on the vulnerable adult's emotional health and development or any other form of mental cruelty.

#### **Financial or Material Abuse**

This is the inappropriate use, misappropriation, embezzlement or theft of money, property or possessions

## **Neglect or Act of Omission**

This is the repeated deprivation of assistance that the vulnerable adult needs for important activities of daily living, including the failure to intervene in behaviour which is dangerous to the vulnerable adult or to others. A vulnerable person may be suffering from neglect when their general well-being or development is impaired

#### **Discriminatory Abuse**

This is the inappropriate treatment of a vulnerable adult because of their age, gender, race, religion, cultural background, sexuality, disability etc. Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies opportunity to some groups or individuals. Discriminatory abuse links to all other forms of abuse.

#### **Institutional Abuse**

This is the mistreatment or abuse of a vulnerable adult by a regime or individuals within an institution (e.g. hospital or care home) or in the community. It can be through repeated acts of poor or inadequate care and neglect or poor professional practice.

#### **Further Definitions of Abuse**

## **Significant Harm**

This relates to the degree of harm that triggers statutory action to protect a child. It is based on the individual child's health or development compared to that which could reasonably be expected of a similar child e.g. severity of ill-treatment, degree and extent of physical harm, duration and frequency of abuse and neglect, premeditation. Department of Health guidance suggests that 'significant' means 'considerable, noteworthy or important.'

#### Children in Whom Illness is Fabricated or Induced (formerly known as Munchausen's Syndrome by Proxy)

This is a form of child abuse in which the parents or carers give false accounts of symptoms in their children and may fake signs of illness (to draw attention to themselves). They seek repeated medical investigations and needless treatment for their children. The government guidance on this is found in 'Safeguarding Children in whom Illness is Fabricated or Induced' (2002).

#### **Spiritual Abuse**

Linked with emotional abuse, spiritual abuse could be defined as an abuse of power, often done in the name of God or religion, which involves manipulating or coercing someone into thinking, saying or doing things without respecting their right to choose for themselves. Some indicators of spiritual abuse might be a leader who is intimidating and imposes his/her will on other people, perhaps threatening dire consequences or the wrath of God if disobeyed. He or she may say that God has revealed certain things to them and so they know what is right. Those under their leadership are fearful to challenge or disagree, believing they will lose the leader's (or more seriously God's) acceptance and approval.

#### **Domestic Violence**

The current cross-government definition of domestic violence or 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 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

Controlling behaviour is: a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is: an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim. (Home Office, March 2013)

This definition includes so called 'honour violence', female genital mutilation (FGM), forced marriage and modern slavery. It is clear that victims, whilst predominately female, are not confined to one gender or ethnic group.

#### Complex (organised or multiple) Abuse

This abuse may be defined as abuse involving one or more abusers and a number of children. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse.

Complex abuse occurs both as part of a network of abuse across a family or community, and within institutions such as residential homes or schools. Such abuse is profoundly traumatic for the children who become involved. Its investigation is time-consuming and demanding work, requiring specialist skills from both police and social work staff. Some investigations become extremely complex because of the number of places and people involved, and the timescale over which abuse is alleged to have occurred. The complexity is heightened where, as in historical cases, the alleged victims are no longer living in the setting where the incidents occurred or where the alleged perpetrators are also no longer linked to the setting or employment role. (Working Together 2010 Sections: 6.10-6.11)

#### **Child Prostitution**

'Working Together to Safeguard Children' (2006) Section 6.2 stated:

Children involved in prostitution and other forms of commercial sexual exploitation should be treated primarily as the victims of abuse, and their needs require careful assessment.

'Working Together to Safeguard Children' (2010) Section 12:10 states:

The Sexual Offences Act 2003 introduced a number of new offences to deal with those who sexually exploit children and young people. The offences protect children up to the age of 18 and can attract tough penalties. They include:

- paying for the sexual services of a child;
- causing or inciting child prostitution;
- arranging or facilitating child prostitution; and
- controlling a child prostitute.

## Female Genital Mutilation (FGM)

The World Health Organization defined FGM as all procedures involving partial or total removal or stitching up of the female genitalia or other injury to the female genital organs whether for cultural or other non-therapeutic reasons.

FGM has been a criminal offence in the UK since the Prohibition of Female Circumcision Act 1985 was passed. The Female Genital Mutilation Act 2003 replaced the 1985 Act and made it an offence for UK nationals or permanent UK residents to carry out FGM abroad, or to aid, abet, counsel or procure the carrying out of FGM abroad, even in countries where the practice is legal.

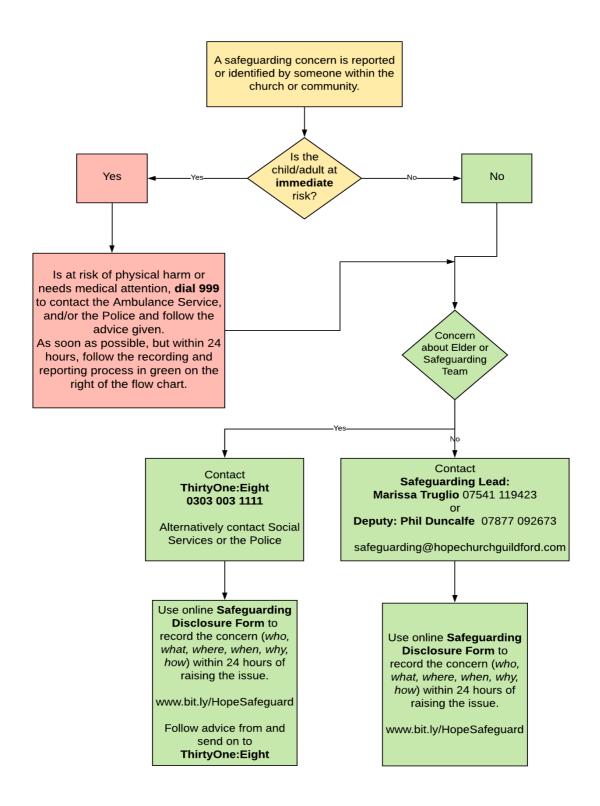
# APPENDIX B - SAFEGUARDING REPORT FORM

# Section A - Person(s) Reporting Concern

Location of concern:
Name:
Date and time of concern:
Date and time report submitted:
Safeguarding Advisor concern referred to:
Section B - Person(s) concerned details
Name:
Approx. Age:Sex:
Section C- Report
Please provide a clear and concise report of concern(s):
Please provide any action taken or advice given at time of witnessing concern:

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## APPENDIX C – FLOW CHART FOR REPORTING A CONCERN



# APPENDIX D - CONSENT FORM ON CHURCHSUITE

Name *			
Formal Name			
Sex	<u>·</u>		
Date of Birth	. • . • . •		
Child's Email			
Child's Mobile			
Additional Email(s)			
	Enter additional emails separated by a comma.		
	These emails will be copied into all parental communication.		
Additional			
Mobile(s)	Enter additional mobile numbers separated by a		
	comma. These mobile numbers will be copied into all parental communication.		
	into an parental communication.		
Medical Short	This information is displayed as societaes and		
	This information is displayed on registers and check-in badges.		
Medical			
	Use this field for notes on medical conditions,		
	dietary requirements and allergies.		
Special Needs			
	- A		
Doctor's Details			
	4		
Additional Information	6		
Please tell us a bit			
about your child,			
do they have particular interests			
or likes?			
Any stipulations or			
additional	A.		
comments regarding			
photography			
consent?			
If your child is in	Yes		
Youth, are you happy for them to	☐ No		
go to the toilet on	□ N/A		
their own?			
Child information for	m for entry into kid's groups		
Details Communication	Photo/Video Consent	Details Communication	Photo/Video Consent
	I give photo/video consent for:		Receive general emails
	I give photo/video consent for:  Internal presentation, e.g. Sunday services		Receive general emails Receive general SMS Receive rota reminder emails