

# **DPUK Child Protection/ Risk of Harm Policy**

Updated March 2007

## ***Policy Statement***

Deaf Parenting UK is committed to practice which protects children from harm. Staff and volunteers in this organisation accept and recognise our responsibilities to develop awareness of the issues which cause children harm.

**We will aim to safeguard children by:**

- **Adopting child protection guidelines through procedures and a code of conduct for staff and volunteers.**
- **Sharing information about child protection and good practice with children, parents and carers, staff and volunteers.**
- **Sharing information about concerns with agencies who need to know, and involving parents and children appropriately.**
- **Carefully following the procedures for recruitment and selection of staff and volunteers.**
- **Providing effective management for staff and volunteers through support, supervision and training.**
- **We are committed to reviewing our policy and good practice regularly (generally every 3 years).**

This policy sets out agreed guidelines relating to the following areas:

- Responding to allegations of abuse, including those made against staff and volunteers
- Recruitment and vetting of Staff and volunteers
- Supervision of organisational activities

## **1. Definitions of abuse**

These definitions are based on those from '*Working Together to Safeguard Children, A guide to interagency working to safeguard and promote the welfare of children*', HM Government 2006

### **What is Abuse and neglect?**

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.

### **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 the other person. 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 include seeing or hearing the ill-treatment of another. It may involve serious bullying, 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, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, sexual online images, watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

## **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 parents 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)
- Ensure access to appropriate medical care or treatment.

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

## **Note:**

*Recent guidance notes other sources of stress for children and families, such as social exclusion, domestic violence, the mental illness of a parent or carer, or drug and alcohol misuse. These may have a negative impact on a child's health and development and may cause concern to an organisation with responsibility for and/or have contact with a child. If it is felt that a child's is suffering harm as a consequence of any of these factors, the same procedures should be followed.*

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## **2. Recognising and Responding to Abuse**

***The following signs may or may not be indicators that abuse has taken place, but the possibility should be considered.***

### **Physical signs of abuse**

- Any injuries not consistent with the explanation given for them
- Injuries which occur to the body in places which are not normally exposed to falls or games
- Unexplained bruising, marks or injuries on any part of the body
- Bruises which reflect hand marks or fingertips (from slapping or pinching)
- Cigarette burns
- Bite marks
- Broken bones
- scalds
- Injuries which have not received medical attention
- Neglect-under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care

### **Changes in behaviour which can also indicate physical abuse:**

- Fear of parents being approached for an explanation
- Aggressive behaviour or severe temper outbursts
- Flinching when approached or touched
- Reluctance to get changed, for example, wearing long sleeves in hot weather
- Depression
- Withdrawn behaviour
- Running away from home

### **Emotional signs of abuse**

**The physical signs of emotional abuse may include;**

- Low self-esteem
- Sudden speech disorders
- Persistent tiredness
- Development delay, either in terms of physical or emotional progress

### **Changes in behaviour which can also indicate emotional abuse include:**

- Obsessions or phobias
- Sudden under-achievement or lack of concentration
- Inappropriate relationships with peers and/or adults
- Being unable to play
- Attention seeking behaviour
- Fear of making mistakes
- Self-harm
- Fear of parent being approached regarding their behaviour

## Sexual Abuse

### **The physical signs of sexual abuse may include:**

- Pain or itching in the genital/anal area
- Bruising or bleeding near genital/anal areas
- Repeated urinary infections or unexplained stomach pains
- Sexually transmitted disease
- Vaginal discharge or infection
- Stomach pains
- Discomfort when walking or sitting down
- Pregnancy

### **Changes in behaviour which can also indicate sexual abuse include:**

- Sudden or unexplained changes in behaviour e.g. becoming withdrawn or aggressive
- Fear of being left with a specific person or group of people
- Having nightmares
- Running away from home
- Sexual knowledge which is beyond their age or developmental level
- Sexual drawings or language
- Bedwetting
- Eating problems such as over-eating or anorexia
- Self-harm or mutilation, sometimes leading to suicide attempts
- Saying they have secrets they can not tell anyone about
- Substance or drug abuse
- Suddenly having unexplained sources of money
- Not allowed to have friends (particularly in adolescence)
- Acting in a sexually explicit way with adults

## Neglect

### **The physical signs of neglect may include:**

- Constant hunger, sometimes stealing food from other children
- Constantly dirty or smelly
- Loss of weight or being constantly underweight
- Inappropriate dress for the conditions
- A failure to thrive or grow particularly if a child puts on weight in other circumstances e.g. in hospital or away from their parents' care

### **Changes in behaviour which can also indicate neglect include:**

- Complaining of being tired all the time
- Not requesting medical assistance and/or failing to attend appointments
- Having few friends
- Mentioning being left alone or unsupervised

### **3. What to do if you suspect that abuse may have occurred**

1. You must report the concerns immediately to the designated person for your organisation/project:

**The role of the designated person is to:**

- Obtain information from staff, volunteers, children or parents and carers who have child protection concerns and to record this information.
- Assess the information quickly and carefully and ask for further information as appropriate.
- They should also consult with a **statutory child protection agency** such as the local children's services or the NSPCC (helpline no: 0808 800 5000) to clarify any doubts or worries.
- In consultation with the local children's services, the designated person should decide whether to make a formal referral without delay.

The designated person will be nominated by Deaf Parenting UK to refer allegations or suspicions of neglect or abuse to the statutory authorities. In the absence of the nominated person the matter should be brought to the attention of DPUK's Chairperson.

**2. Suspicions will not be discussed with anyone other than those nominated above.**

**3. It is the duty of any individual to make direct referrals to the child protection agencies.** If for any reason you believe that the nominated persons have not responded appropriately to your concerns, then it is up to you to contact the child protection agencies directly.

**4. What should or should not be said to the parents?**

At the point of referral, this is best discussed and agrees with the local Children's Services. The guiding principle would be one of openness with parents unless it places the child at further risk – but then discuss on case-by-case basis with the local Children's services.

#### **4. Responding to a child making an allegation of abuse**

- Stay calm, listen carefully to what is being said
- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others-do not promise to keep secrets
- Allow the child to continue at his/her own pace
- Ask questions for clarification only, and at all time avoid asking questions that suggest a particular answer
- Reassure the child that they have done the right thing in telling you
- Tell them what you will do next and with whom the information will be shared
- Record in writing what was said using the child's own words as soon as possible, note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated

#### *Helpful statements to make*

- I believe you (or showing acceptance of what the child says)
- Thank you for telling me
- Its not your fault
- I will help you

#### *Do not say*

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure that this is true?
- Why? Who? When? Where?
- Never make false promises

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## **5. What to do after a child has talked to you about abuse**

### **The procedure**

1. **Make notes as soon as possible (ideally within 1 hour of being told)** you should write down exactly what the child has said and what you said in reply and what was happening immediately before being told (i.e. the activity being delivered) You should record the dates, times and when you made the record. All hand written notes should be kept securely. **This principle is a general good practice principle and should be used generally and not just ‘disclosures’ by children.**

You should use the form “Reporting allegations or suspicions of abuse” This form is attached at the back of this policy. (Appendix 1)

2. **You should report your discussion with the designated person as soon as possible.** As you are committed to protecting children from abuse within families/ by trusted adults/ by staff within DPUK, it is important to recognised that if this designated person is implicated then you need to report to DPUK’s Chairperson: Sabina Iqbal on 07919 047 146.
3. **You should under no circumstances discuss your suspicions or allegations with anyone other than those nominated above.**
4. **After a child has disclosed abuse to the designated persons. If you have concerns about the immediate safety of the child, share these with the local Children’s Services. It’s then up to them to investigate & decide on the action.**

You need to add that written confirmation of your referral should be with children’s services within 48 hours - & that they should confirm within another 24. If they don’t, contact them again. This is covered succinctly in ‘What to do if you’re worried a child is being abused’ which can be readily downloaded.\

**Your Designated Person is:**

**Nicole Campbell, DPUK Co-ordinator on:**

SMS: 07789 027186

Fax: 0871 2643323

Email: [info@deafparent.org.uk](mailto:info@deafparent.org.uk)

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## **6. Recruitment and appointment of workers and volunteers**

In recruiting and appointing workers we will be responsible for the following:

- Identifying the tasks and responsibilities involved and the type of person most suitable for the job.
- Drawing up the Selection criteria and putting together a list of essential and desirable qualifications, skills and experience.
- All applicants should apply in writing and their application will cover their personal details, previous and current work/volunteering experience.
- We will always send a copy of our child protection policy with the application pack.
- We will make sure that we measure the application against the selection criteria
- All applicants need to sign a declaration stating that there is no reason why they should be considered unsuitable to work with children. The Rehabilitation of Offenders Act (1974) requires that people applying for positions which give them "substantial, unsupervised access on a sustained or regular basis" to children under the age of 18 must declare all previous convictions which are then subject to police checks. They can then only be offered a job subject to a successful CRB check. This includes potential employees, volunteers and self-employed people that contracted by DPUK. They are also required to declare any pending case against them. It is important that your applicant in this particular category understands that all information will be dealt with confidentially and will not be used against them unfairly.
- We will ask for photographic evidence to confirm the identity of the applicant e.g. their passport
- We will request to see documentation of any qualifications detailed by the applicant.
- We will always interview our candidates; ask for two references and a police check.
- We will at least two people from our organisation on the interview panel.
- We will request two written references from people who are not family members or friends and who have knowledge of the applicant's experience of working with children. We will ask the referee to also comment on their suitability for working with children. We will also try and follow up written references with a telephone call.
- The same principles apply to young people who have been involved with the organisation and have become volunteers.
- We will ensure that our successful applicant obtains an Enhanced Criminal Record Certificate (ECRC) from the Criminal Records Bureau. They will need to show the ECRC before we will confirm them in post.

## **7. Supervisory arrangements for the management of activities and services.**

***We will aim to protect children from abuse and our team members from false allegations by adopting the following guidelines:***

- We will keep a register of all children attending our activities.
- We will keep a register of all team members (both paid staff members and volunteers)
- Registers will include arrival and departure times and the names of others in the building at the time.
- We will keep a record of all sessions including monitoring and evaluation records.
- Our team members will record any unusual events on the accident/incident form.
- Written consent from a parent or guardian will be obtained for every child attending our activities.
- Where possible our team members should not be alone with a child, although we recognise that there may be times when this may be necessary or helpful
- Team members should escort children of the same sex to the toilet but are not expected to be involved with toileting, unless the child has a special need that has been brought to our attention by the parent/guardian.
- We recognise that physical touch between adults and children can be healthy and acceptable in public places. However our team members will be discouraged from this in circumstances where an adult or child are left alone.
- All team members should treat all children with dignity and respect in both attitude language and actions.

### **Support and Training**

We are committed to the provision of child protection training for all our team members.

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# (Appendix 1)

## Reporting allegations or suspicions of abuse

If you have any concerns about a child being abused you should inform the designated person detailed below.

### Deaf Parenting UK

**Nicole Campbell, DPUK Co-ordinator on:**

SMS: 07789 027186

Fax: 0871 2643323

Email: [info@deafparent.org.uk](mailto:info@deafparent.org.uk)

[www.deafparent.org.uk](http://www.deafparent.org.uk)

**Important contacts outside the Deaf Parenting UK. You need to add the numbers that is local to your area and copied it to the Deaf Parenting UK Head Office.**

Local Safeguarding Children Board

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Local Children's Services office

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Address

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Tel no

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Emergency no

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Police station

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Address

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Tel no

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NSPCC Child Protection Helpline 0808 800 5000

Other useful numbers

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# Reporting Suspected Abuse Confidential Recording Sheet

Organisation

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Name of person reporting

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Name of child

---

Date of birth

---

Ethnicity

---

Religion

---

First language

---

Disability

---

Parent's/Carer's name (s)

---

Home address/Tel no

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Are you reporting your concerns or reporting someone else's. Please give details.

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**Brief description of what has prompted the concerns: include date, time, specific incidents.**

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**Any physical signs? Behavioural signs? Indirect signs?**

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**Have you spoken to the child? If so, what was said?**

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**Have you spoken to the parent(s)? if so, what was said?**

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**Has anybody been alleged to be the abuser? If so, please give details?**

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**Have you consulted anybody else? Please give details**

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**Person reported to and date of reporting**

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**Signature of person reporting**

**Today's date**

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**Action taken**

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**Notes**

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**Please fax/email the report to Nicole Campbell, DPUK Co-ordinator on:**

SMS: 07789 027186

Fax: 0871 2643323

Email: [info@deafparent.org.uk](mailto:info@deafparent.org.uk)

[www.deafparent.org.uk](http://www.deafparent.org.uk)