

St. Margaret's House Child Protection Policy

Section One: Introduction to the Policy

INTRODUCTION:

This document is the Child Protection Policy for St. Margaret's House which will be followed by all members of the organisation and followed and promoted by those in the position of leadership within the organisation.

We know that being a young person makes them vulnerable to abuse by adults. The purpose of this policy is to make sure that the actions of any adult in the context of the work carried out by the organisation are transparent and safeguard and promote the welfare of all young people.

This document is written in accordance with a local authority's Child Protection Policy and 'Working Together to Safeguard Children' produced by the Department of Health in 1999.

Principles upon which the Child Protection Policy is based.

Definition of a child

A child is defined as a person under the age of 18 (The Children Act 1989).

- The welfare of a child or young person will always be paramount.
- All children, whatever their age, culture, disability, gender, language, racial origin religious beliefs and/or sexual identity have the right to protection from abuse
- The welfare of families will be promoted.
- The rights, wishes and feelings of children, young people and their families will be respected and listened to.
- Those people in positions of responsibility within the organisation will work in accordance with the interests of children and young people and follow the policy outlined below.
- All staff and volunteers have a responsibility to report concerns to the appropriate officer
- Those people in positions of responsibility within the organisation will ensure children and young people are provided with appropriate safety and protection whilst in the care of St Margaret's House no matter what setting we are in that the same opportunities are available to everyone and that all differences between individuals will be treated with respect.
- Staff/volunteers are not trained to investigate situations of abuse or to decide if abuse has occurred.

CHILD PROTECTION POLICY

Policy statement

St Margaret's House has a duty of care to safeguard all children involved in its projects and activities both physical and online from harm. Safeguarding is ensuring children are protected by having systems and policies in place and taking appropriate action when a child is harmed or at risk of harm. All children have a right to protection, and the needs of disabled children and others who may be particularly vulnerable must be taken into account. St Margaret's House will ensure the safety and protection of all children involved through adherence to the Child Protection guidelines adopted by the organisation.

Child Protection is protecting children from abuse and neglect

Child Safeguarding is the action that is taken to promote the welfare of children and protect them from harm.

- Safeguarding means: protecting children from abuse and maltreatment
- preventing harm to children's health or development
- ensuring children grow up with the provision of safe and effective care
- taking action to enable all children and young people to have the best outcomes

NSPCC (2015)

Children with special educational needs and disabilities

St Margaret's House understands that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children. This can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- children with SEN and disabilities can be disproportionately impacted by things like bullying without outwardly showing any signs;
- communication barriers and difficulties in overcoming these barriers

Section Two Recognising Abuse

2. Recognition of Abuse or Neglect

Abuse or neglect of a child is caused 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.

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 feigns the symptoms, of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using terms such as, fabricated illness by proxy or Munchausen Syndrome by proxy.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment 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 in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill treatment 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, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (eg rape) or non-penetrative acts. This may include non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material, or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Sexual

abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children (Department of Education CSA "Working Together to Safeguard Children").

Child Sexual Exploitation is a form of child sexual abuse. It occurs when an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator.

The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

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. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Other forms of Abuse

Self Abuse

Self-harm is when somebody intentionally damages or injures their body. It's usually a way of coping with or expressing overwhelming emotional distress. There are many different ways people can intentionally harm themselves, such as: cutting or burning their skin, punching or hitting themselves, poisoning themselves with tablets or toxic chemicals, misusing alcohol or drugs, deliberately starving themselves (anorexia nervosa) or binge eating (bulimia nervosa) excessively exercising

FGM

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to female genital organs. It is illegal in the UK and a form of child abuse. As of October 2015, the Serious Crime Act 2015 (Home Office, 2015) introduced a duty on teachers (and other professionals) to notify the police of known cases of female genital mutilation where it appears to have been carried out on a girl under the age of 18. We will operate in accordance with the statutory requirements relating to this issue, and in line with existing local safeguarding procedures.

Radicalisation

Radicalisation is defined as the process by which people come to support terrorism and violent extremism and, in some cases, to then participate in terrorist groups. Examples include use of inappropriate language, possession of violent extremist literature, behavioural changes, the expression of extremist views, advocating violent actions and means, Association with known extremists and seeking to recruit others to an extremist ideology.

Radicalisation is grooming and can often happen online where perpetrators create relentless output that is often of high quality with high production values. Perpetrators use the method of raising awareness, engaging, promoting their purpose and creating friendship. For a young person this can result in them isolating themselves from their families, communities and can lead to produce an intense change in personality for the victim.

It is worth noting that going online creates a bias in the way a young people receive news e.g people always refer and go on the sites they know and like. Because of this it can foster radicalisation and a loss in trust in

local services such as police and community leaders. That is why group activities that bring young people together can be a positive way to counteract the negative aspects of continual use online.

Online Abuse

Inappropriate content: It's possible that children may come across things online which are inappropriate for their age and stage of development.

Cyberbullying is when someone bullies others using electronic means, this might involve social media and messaging services on the internet, accessed on a mobile phone, tablet or gaming platform. The behaviour is usually repeated.

Online Grooming: Grooming is a word used to describe people befriending children in order to take advantage of them for sexual purposes.

Sexting: The term 'sexting' is used to describe the sending and receiving of sexually explicit photos, messages and video clips, by text, email or posting them on social networking sites. It's increasingly done by young people who send images and messages to their friends, partners, or even strangers they meet online.

Self harm; See description above but this can be started through young people online in chat rooms or through websites.

Online pornography; As a result of their curiosity, or just by accident, children could find pornography fairly easily on the internet. They may find this upsetting or confusing as pornography portrays an unrealistic image of sex and relationships.

Radicalisation: See above

More information on Grooming:

Grooming is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse, sexual exploitation or trafficking.

Children and young people can be groomed online or face-to-face, by a stranger or by someone they know - for example a family member, friend or professional.

Groomers may be male or female. They could be any age.

Many children and young people don't understand that they have been groomed or that what has happened is abuse. The signs of grooming aren't always obvious and groomers will often go to great lengths not to be identified. If a child is being groomed they may be very secretive (including about what they are doing online), have older boyfriends or girlfriends, go to unusual places to meet friends, have new things such as clothes or mobile phones that they can't or won't explain and have access to drugs and alcohol.

In older children, signs of grooming can easily be mistaken for 'normal' teenage behaviour, but you may notice unexplained changes in behaviour or personality, or inappropriate sexual behaviour for their age.

Financial Abuse

Taking money from, stealing money from a child or young person

Child trafficking

When children are recruited, moved or transported and then exploited, forced to work or sold. Children are trafficked for: child sexual exploitation, benefit fraud, forced marriage, domestic servitude, forced labour in

factories or agriculture and criminal activity such as pickpocketing, begging, transporting drugs, working on cannabis farms, selling pirated DVDs, bag theft.

Many children are trafficked into the UK from abroad, but children can also be trafficked from one part of the UK to another. 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 and 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
- gives a prepared story which is very similar to stories given by other children

Forced marriage

A forced marriage is one entered into without the full consent of one or both parties. It is where violence, threats or other forms of coercion is used and is a crime.

Honour-based Violence

Honour based violence (HBV) can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

Honour based violence might be committed against people who; become involved with a boyfriend or girlfriend from a different culture or religion; want to get out of an arranged marriage; want to get out of a forced marriage; wear clothes or take part in activities that might not be considered traditional within a particular culture.

It is a violation of human rights and may be a form of domestic and/or sexual abuse. There is no, and cannot be, honour or justification for abusing the human rights of others.

Peer on Peer Abuse

Children can abuse other children. This is generally referred to as peer on peer abuse and can take many forms. This can include (but is not limited to) bullying (including cyberbullying); sexual violence and sexual harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexting and initiating/hazing type violence and rituals.

This form of abuse occurs when there is any kind of physical, sexual, emotional or financial abuse or coercive control exercised between children. It includes bullying, cyberbullying, sexual violence, harassment and sexting.

It should be recognised that the behaviour in question is harmful to both the perpetrator (who is a child) and the victim. Behaviour may be intimate or non-intimate.

In most instances, the conduct of participants towards each other will be covered by our behaviour policies and agreements. However, some allegations may be of such a serious nature that they may raise safeguarding concerns. We recognise that children are capable of abusing their peers. It will not be passed off as 'banter' or 'part of growing up'. The forms of peer on peer abuse are outlined below.

- * Domestic abuse – an incident or pattern of actual or threatened acts of physical, sexual, financial and/or emotional abuse, perpetrated by an adolescent against a current or former dating partner regardless of gender or sexuality.
- * Child Sexual Exploitation – children under the age of 18 may be sexually abused in the context of exploitative relationships, contexts and situations by peers who are also under 18.
- * Abuse can happen in intimate personal relationships between peers
- * Harmful Sexual Behaviour – Children and young people presenting with sexual behaviours that are outside of developmentally 'normative' parameters and harmful to themselves and others.
- * Serious Youth Violence – Any offence of most serious violence or weapon enabled crime, where the victim is aged 1-18' i.e. murder, manslaughter, rape, wounding with intent and causing grievous bodily harm. 'Youth violence' is defined in the same way, but also includes assault with injury offences.
- * Upskirting is typically when a photograph is taken under a person's clothing without them knowing, for sexual gratification or to cause the victim humiliation, distress or alarm.

The term peer-on-peer abuse can refer to all of these definitions and a child may experience one or multiple facets of abuse at any one time. There are also different gender issues that can be prevalent when dealing with peer on peer abuse (i.e. girls being sexually touched/assaulted or boys being subjected to initiation/hazing type violence).

We aim to reduce the likelihood of peer on peer abuse through;

- * the established ethos of respect, friendship, courtesy and kindness;
- * high expectations of behaviour;
- * clear consequences for unacceptable behaviour;

Signs and symptoms of peer on peer sexual abuse and harassment:

absence from school or disengagement from school activities

physical injuries

mental or emotional health issues

becoming withdrawn – lack of self esteem

lack of sleep

alcohol or substance misuse

changes in behaviour

inappropriate behaviour for age

abusive towards others

Vulnerable Groups at risk of peer on peer sexual abuse and harassment

Those aged 10 and upwards (although victims as young as 8 identified)

Girls and young women are more likely to be victims and boys and young men more likely to be abusers

Black and minority ethnic children often under identified as victims and over-identified as perpetrators

Young people with intra-familial abuse in their histories or those living with domestic abuse are more likely to be vulnerable

Young people in care and those who have experienced loss of a parent, sibling or friend through bereavement

Young people who have been abused or have abused their peers.

Abusers can be younger than their victims.

Violent Crime

Indicators that may signal that children are at risk from, or are involved with, serious violent crime. Include:

Unexplained gifts/new possessions – these can indicate children have been approached by/involved with individuals associated with criminal networks/gangs

Increased absence from school

Change in friendship/relationships with others/groups

Significant decline in performance

Signs of self-harm/significant change in wellbeing

Signs of assault/unexplained injuries

Individuals within St Margaret's House need to be alert to the potential abuse of children both within their families and also from other sources including abuse by members of that organisation.

Section Three: Why people do not make disclosures

Why don't Children Disclose?

- Children don't tell about abuse because they:
- Are scared because they have been threatened
- Believe they will be taken away from home
- Believe they are to blame
- Think it is what happens to all children
- Feel embarrassed or guilty
- Don't want the abuser to get into trouble
- Have communication or learning difficulties
- May not have the vocabulary for what happened
- Are afraid they won't be believed

Why don't Adults Report?

Adults don't report abuse because they:

- Find it hard to believe what they are hearing
- Cannot believe the suspicion may be about someone they know
- Fear we might get it wrong or make it worse
- Fear the consequences of getting it wrong – for the child, family and for themselves
- Simply don't want to be involved
- Do not have the information on what to do and who to contact

Everyone at St Margaret's House should know how to recognise and act upon indicators of abuse or potential abuse involving children. There is an expected responsibility for all members of the organisation to respond to any suspected or actual abuse of a child in accordance with these procedures.

Section Four: St Margaret's Practice and Guidelines

The aim of the Child Protection Policy is to ensure that all staff/volunteers who work with us know how to keep children safe. This policy will allow all staff /volunteers to make informed and confident responses to specific child protection issues.

Code of Practice

- St Margaret's House will ensure that all relevant staff and workers receive a copy of this policy and an explanation of what it requires.
- Before working with children staff will be aware of the registration form parents have completed and will not ask children directly for personal details or offer their own details.
 - No contact outside of workshops with young people is allowed except by agreed telephone methods of communication with parents/carers who have given consent as set out in the registration form or in exceptional cases, for reasons of health and safety.
- All relevant staff/volunteers will have a full Disclosure and Barring Service check and in the event that previous criminal convictions evidence they are not suitable to work with children they will not be hired.
- Children will be invited to explore a range of topics using a range of information and materials. Workshop leaders/staff and volunteers will consider the appropriateness of any information/material shared out to young people according to age and maturity.
- Workshop leaders and staff will especially check the content and appropriateness of websites, films and TV programmes before recommending them to children and will only recommend in relation to topics of research relevant to the workshops.

Promoting good practice

Child abuse, particularly sexual abuse, can arouse strong emotions in those facing such a situation. It is important to understand these feelings and not allow them to interfere with your judgement about the appropriate action to take.

When a child enters activity at St Margaret's House having been subjected to child abuse outside the arts environment, art can play a crucial role in improving the child's self-esteem. In such instances St Margaret's House will work with the appropriate agencies to ensure the child receives the required support.

Good practice guidelines

All personnel are encouraged to demonstrate exemplary behaviour in order to promote welfare and reduce the likelihood of allegations being made.

Good practice means:

- Always working in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets). In situations where cover can't be found the workshop/class will be cancelled.
- Treating all young people/disabled and vulnerable adults equally, with respect and dignity.
- Always putting the welfare of each young person first.
- Our work will entail physical contact with children due to the nature of well-being, arts and drama activities. Touch will be done thoughtfully respecting the young person's personal space in accordance with the activity. Staff will only make physical contact with children in an open planned environment with other professionals and young people present.
- Building balanced relationships based on mutual trust which empowers children to share in the decision-making process.
- Making well-being and arts fun and enjoyable.
- Ensuring that if any form of manual/physical support is required, it should be provided openly and according to guidelines. Care is needed, as it is difficult to maintain hand positions when the child is constantly moving. Young people and their parents should always be consulted and their agreement gained.
- Involving parents/carers wherever possible.
- Being an excellent role model - this includes not smoking or drinking alcohol in the company of young people.
- Giving enthusiastic and constructive feedback rather than negative criticism.

- Securing parental consent in writing to act in loco parentis, if the need arises to administer emergency first aid and/or other medical treatment. Keeping a written record of any accident or injury that occurs, along with the details of any treatment given.
- Requesting written parental consent if staff or volunteers are required to transport young people in their cars.
- Recognising the developmental needs and capacity of young people and disabled adults.
 - Applying good practise when working online ensuring there is clear guidance in place for parents/carers on how sessions will be managed, behaviour agreements and code of conducts in place to ensure young people have a positive experience and that anyone delivering a session online has training in this.

Practices in an emergency

If an emergency arises action will be taken after consultation with the Designated Child Protection Officer or St Margaret's House who is Stuart Cox (Arts and Wellbeing Director) or St Margaret's House Director Tony Hardie. For example, a child sustains an injury and needs to go to hospital, or a parent fails to arrive to pick a child up at the end of a session:

- avoid spending time alone with children away from others. Staff should not be alone. All programmes are designed for staff to have cover.
- avoid taking or dropping off a child to an event or activity. This is unless given written permission by parents/carers

Practices that are never sanctioned

The following are never sanctioned. Staff/volunteers must never:

- engage in rough, physical or sexually provocative games, including horseplay
- allow or engage in any form of inappropriate touching
- allow children to use inappropriate language unchallenged
- make sexually suggestive comments to a child, even in fun
- reduce a child to tears as a form of control
- fail to act upon and record any allegations made by a child
- do things of a personal nature for children or disabled adults, that they can do for themselves
- invite or allow children to stay with you at your home unsupervised.
- Invite children to invite you onto any form of social media.

Photography of children and vulnerable adults

- Children will not be identified in the use of any images. If St Margaret's House seeks to take photographs of participants for promotion or feedback to funders then permission is always to be sought from parents/guardians and a signed acknowledgment form received.

Online Safety

St Margaret's House activities mostly do not involve young people going online. However we will:

- Ask permission from parent/carers and young people themselves before uploading photos of children and young people on any form of St Margaret's House social media.
- Children and young people will not be identified online.
- St Margaret's House staff, freelancers and volunteers will monitor very carefully the appropriateness of content of any websites, vlogs or blogs they signpost young people to and ensure that they only recommend any online material that is relevant to project or activity the young person is undertaking.
- All St Margaret's House staff and tutors will not engage with participants through any form of personal social media.
- St Margaret's House staff will be aware of positive resources that parents, carers or partner organisations can be signposted to if they require information on online safety for young people. These are www.childnet.com/ www.counterextremism.lgfl.org / www.parentzone.org.uk/ www.saferinternet.org.uk and www.educateagainsthate.com

- The use of mobile phones is not allowed within workshops or any other settings such as meetings, work experience or trips for participants unless in an emergency.
- All St Margaret's House staff will be aware of the dangers on online abuse as set out in Section Two of this policy.
 - When conducting workshops on a platform such as Zoom staff will apply good practise ensuring there is clear guidance in place for parents/carers on how sessions will be managed, behaviour agreements and code of conducts in place to ensure young people have a positive experience and that anyone delivering a session online has training in this.
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Incidents that must be reported/recorded (See appendix one)

If any of the following occur you should report this immediately to the appropriate designated child protection officer and record the incident. You should also ensure the parents of the child are informed:

- if you accidentally hurt a child/young person
- if he/she seems distressed in any manner
- if a child appears to be sexually aroused by your actions
- if a child misunderstands or misinterprets something you have done or said

What to do if children talk to you about abuse or neglect

It is recognised that a child may seek you out to share information about abuse or neglect, or talk spontaneously individually or in groups when you are present.

It is common that the child or young person will start to disclose to you whilst you are on your own - It is not appropriate to call another worker over – but equally you may be putting yourself at risk of a later allegation if you are locked away in a private place with a child or young person. Ideally try to make sure the door of the room you are in is not shut. It is usually easy to have a private conversation with other people still able to see you

- Listen carefully to the child. DO NOT directly question the child.
- Even if what they are saying is shocking to you try not to show this.
- Remain calm and in control, do not panic
- Give the child time and attention.
- Ensure the child is safe and address any immediate health issues.
- Allow the child to give a spontaneous account; do not stop a child who is freely recalling significant events.
- Make an accurate record of the information you have been given taking care to record the timing, setting and people present, the child's presentation as well as what was said. Do not throw this away as it may later be needed as evidence. (See appendix)
- Use the child's own words where possible.
- Explain that you cannot promise not to speak to others about the information they have shared. You cannot keep this a secret, so let them know that you can't and that you will have to pass it on to the designated child protection officer. **The welfare of the child is paramount and takes precedence over confidentiality.**
- Reassure the child that:
 - you are glad they have told you;
 - they have not done anything wrong;
 - what you are going to do next.
- Explain that you will need to get help to keep the child safe.

- Do NOT ask the child to repeat his or her account of events to anyone. Remember that it is not your job to prove if this information is true or not – nor is it up to you to notify the police or social services. You have to get as accurate a record as possible of the disclosure to the lead child protection person as quickly as you can.

What will happen to a Disclosure

- Once a written record has been taken ensure that it gets to the Designated Child Protection Officer as soon as possible. The Disclosure form will be kept and locked away in a safe place that only the designated child protection officer will have access to.
- The Designated Child Protection Officer will consider the report and decide on the next course of action. This could include making an agreement to monitor the child or referring to the Local Authority Designated Officer (LADO)
- A record of the disclosure and action taken will be kept in the Safeguarding log book and only the Designated Child Protection Officer will have access to. This log book will be kept in a secure locked place.

Recruitment and training of staff and volunteers

St Margaret's House recognises that anyone may have the potential to abuse children in some way and that all reasonable steps are taken to ensure unsuitable people are prevented from working with children. Pre selection checks included the following:

- All volunteers/staff will complete an application form. The application form will elicit information about an applicant's past and a self-disclosure about any criminal record.
- Consent will be obtained from an applicant to seek information from the Disclosure and Barring Service
- Two confidential references, including one regarding previous work with children. These references will be taken up and confirmed through telephone contact.
- Evidence of identity (passport or driving licence with photo).

Interview and induction

All employees (and volunteers) are required to undergo an interview carried out to acceptable protocol and recommendations. All employees and volunteers will receive an induction, during which:

- A check will be made that the application form has been completed in full (including sections on criminal records and self-disclosures).
- The job requirements and responsibilities will be clarified.
- Child protection procedures are explained and training needs are identified.
- They will sign up to the organisation's Child Protection policy.

Training

In addition to pre selection checks, the safeguarding process includes training after recruitment to help staff and volunteers to:

- Analyse their own practice against established good practice, and to ensure their practice is not likely to result in allegations being made.
- Recognise their responsibilities and report any concerns about suspected poor practice or possible abuse.
- Respond to concerns expressed by a child or young person.
- Work safely effectively with children.

Responding to allegations or suspicions

It is not the responsibility of anyone working at St Margaret's House in a paid or unpaid capacity to decide whether or not child abuse has taken place. However there is a responsibility to act on any concerns by reporting these to the Child Protection Officer, Director and the appropriate authorities.

St Margaret's House assures all staff/volunteers that it will fully support and protect anyone, who in good faith reports his or her concern that a colleague is, or may be, abusing a child.

Whistleblowing

We want everyone to feel able to report any child protection / safeguarding concerns. However, for members of staff who feel unable to raise these concerns internally, they can call the the NSPCC whistleblowing helpline on: 0800 028 0285 (line is available from 8:00 AM to 8:00 PM,(Monday to Friday) or email: help@nspcc.org.uk. Parents or others in the wider school community with concerns can contact the NSPCC general helpline on: 0800 800 5000 (24 hour helpline) or email: help@nspcc.org.uk. The NSPCC website also has further information on this: <https://www.nspcc.org.uk/what-we-do/news-opinion/new-whistleblowing-advice-line-professionals/>

Policy Review

The policy will be reviewed and updated annually in case the pattern of work and contact with children and young people changes and will include any new legal requirements that may arise.

Last Updated: April 15th 2022

Next Update: April 15th 2023

Partners

St Margaret's House will ensure we are aware of the partner venue's child protection policies and will make sure they are not in conflict. We will have an agreed protocol on how to deal with situations of abuse and risk of harm to children.

Implementation of this policy

The ways in which our policy will be made aware to staff, volunteers and partners are:

- 1- Face to face meetings with the designated safeguarding lead to explain and talk through the policy before the activity starts with relevant staff, volunteers and partners to that activity.
- 2- Where policies are targeted at specific groups such (as pregnant women) they will be made aware of these policies through our website and signing up methods such as sign up form or Mindbody/app accounts.
- 3-The designated safeguarding lead will send the policies by email after meeting with someone and ask them to confirm by email that they have read them and understood them and sign and date the bottom of the policy.
- 4- St Margaret's House will have some kind of team training each year on safeguarding in which the policy and updates are referenced.

5. Confidentiality

The organisation should ensure that any records made in relation to a referral should be kept confidentially and in a secure place.

Information in relation to child protection concerns should be shared on a "need to know" basis. However, the sharing of information is vital to child protection and, therefore, the issue of confidentiality is secondary to a child's need for protection.

If in doubt, report

Section Five: Contacts

Designated Child Protection Officer (St Margaret's House): Stuart Cox – Arts and Wellbeing Director / 0771 891 3860/020 89802092

Or call Tony Hardie (Director) at (07926259402) or email tony.hardie@stmargarethouse.org.uk

If either the Designated Child Protection Officer or Deputy is not around and you still wish to report concerns contact:

Tower Hamlets Multi Agency Safeguarding Hub

Tel: 020 7364 5006 option 3

Extensions: 5606/5601/5358/7796

Email: Mash@towerhamlets.gov.uk

If a child is in immediate danger, please call the police on 999.

Your responsibility is to report your concerns. A Social Worker will follow these up with any necessary investigations or assessment or alternatively contact:

Emergency Duty Team (EDT) – Out of hours service

Tel: 020 7364 4079 (after 5pm and at weekends).

Write to the following address:

Tower Hamlets Multi-Agency Safeguarding Hub
4th Floor Mulberry Place
5 Clove Crescent
London
E14 2BG

If they are unavailable, please contact the Child Protection Advice Line on Tel: 020 7364 3444 / 5601 / 5606

If you cannot get through to anyone and are unsure what to do call NSPCC on 0808 800 5000.

If you want to call the police but is a non-emergency call 101

In an emergency, contact the Police – Dial 999

Appendix One

Disclosure Form, St Margaret's House

St Margaret's House has a duty of care to safeguard all children involved in its projects from harm. This form is to be used to record any incidents which may have threatened a young person's welfare during an activity/workshop. This form should also be completed in the instance of a workshop facilitator having been alerted to the potential of some external/ indirect danger to the young person in question.

Please notify Stuart Cox (Child Protection Officer) as soon as possible 07718913860 (Designated Child Protection Officer) on the same day as the concern has arisen

Please complete by hand and return to Child Protection Officer immediately or within 24 hours of the workshop. The Child Protection Officer will be responsible for any further action to be taken.

Date and time of session:	Venue:
Staff/ volunteers present:	

Date:

If Stuart is not available contact Tony Hardie on tony.hardie@stmargarets house.org.uk or call 07926259402

Appendix Two

INTER-AGENCY REFERRAL FORM

This form is to be used by all agencies referring child/children to London Borough of Tower Hamlets CSC for assessment as a child in need, including in need of protection.

All urgent referrals should be initiated by phone/fax and with completion of as much of this form as possible or an updated CAF or a Signs of Safety Mapping tool. If information is incomplete, a MASH worker will work through the form to ensure the information is accurate and good quality. If you are a service provider in Tower Hamlets, as part of the Family Wellbeing Model, you may be asked to provide a CAF as well as this form. You should get feedback within 24 hours on this referral and we will proactively work with you and other services to ensure a service is provided to the child, even if it does not meet the thresholds for a statutory response as outlined in the Family Wellbeing Model.

A. CHILD/ YOUNG PERSON

Family Name					Forename/s			
DOB/EDD		M		F		*Ethnicity code	Religion	
Child's first language					Is an interpreter or signer required?			
Address								
Postcode					Tel.			
Current address if different from above								
Postcode					Tel.:			

***ONS Ethnicity Codes:** White British 1a; White Irish 1b; White other 1c; White & Black Caribbean 2a; White & Black African 2b; White & Asian 2c; Other Mixed 2d; Indian 3a; Pakistani 3b; Bangladeshi 3c; Other Asian 3d; Caribbean 4a; African 4b; Other Black 4c; Chinese 5a; Other ethnic group 5b

B. CHILD/YOUNG PERSON'S PRINCIPAL CARERS

FULL NAME	DOB If known	Relationship to child	Ethnicity code	Parental responsibility

First language of carers: Is an interpreter or signer required: Y / N				

C. OTHER HOUSEHOLD MEMBERS

FULL NAME	DOB If known	Relationship to child/ young person	Ethnicity code	Tick if also referred

D. OTHER SIGNIFICANT PEOPLE IN THE CHILD/YOUNG PERSON'S LIFE, INCLUDING OTHER FAMILY MEMBERS

FULL NAME	Relationship to child/young person	Address	Tel No

Referrals will be shared with the family and should not be made without their knowledge/agreement unless this would jeopardise the child/young person's safety

	Y / N	If no, state reason
The child/young person knows about the referral		
The parent/carer knows about the referral		
The parent/carer has given consent to the referral.		

F. INFORMATION ON STATUTORY STATUS

	Y/ N	Please give details of name of child/young person, dates, category (if known)
Any child in family is/has been on the disability register?		
Any child in family is/has been on the child protection register (CPR)?		

Any child or other family member has been looked after by a local authority?		
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G. KEY AGENCIES INVOLVED

Insert name of professional if involved		Tel	Insert Name of professional if involved		Tel
H.V.			G.P.		
Nursery			EWO		
School			Police		
YOT			Dentist		
Community mental health			Community Paediatrician		
School Nurse			Midwife		
Hospital Consultant			Other		

H. INFORMATION SUPPORTING THIS REFERRAL

The purpose of this section is to assist the inter-agency assessment. Where you have no information about a particular area, please write N/K (not known). Please record strengths as well as areas of need or risk so that resources can be directed appropriately.

REASON FOR REFERRAL/REQUEST FOR SERVICES

What are your concerns? (If an allegation of possible physical abuse, please give specific details of any injury including dates and explanations given)

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Scale how safe you think the child is:

With 0 being I am certain the abuse will happen again if something is n't done immediately and 10 being the case needs action but I don't think the child is in immediate danger, what rating would you give?

Comments on Score: Please tell us how you reached this score.

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<i>What existing safety is there for the child(ren) – are there safe people around the child?</i>
<i>What are you most worried will happen to the child(ren) if the situation doesn't change?</i>
<i>What convinced you to take action now and contact us?</i>
<i>Have you done anything to address this problem (apart from making this referral)? For example has your agency used a CAF or a TAC to focus professional efforts on addressing the concerns? Has the Social Inclusion Panel been consulted for support?</i>
<i>What do you see as the cause of the problem?</i>
<i>What do you expect to happen as a result of this notification?</i>

I. DETAILS OF REFERRER AND SOCIAL WORKER TAKING REFERRAL

Name of worker completing this referral (please print)			
Agency			
Address			
Ward/Consultant			
Telephone number			
Signature		Date	

Name of social worker taking referral			
Team		Date	
Social work context scale (for social worker to complete): <i>On a scale of 0 to 10 with 0 being this is the worst case that the agency has ever worked with and 10 indicates that this is a case the agency would take no further action with, where would you rate yourself?</i>			

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