

Nene Valley Christian Family Refuge

Child Protection Policy and Procedures

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This is the Safeguarding policy of Nene Valley Christian Family Refuge (NVCFR) known as *eve*.

NVCFR acknowledges the duty of care to safeguard and promote the welfare of children and is committed to ensuring safeguarding practice reflects statutory responsibilities, government guidance and complies with best practice and all statutory requirements.

The policy recognises that the welfare and interests of children are paramount in all circumstances. It aims to ensure that regardless of age, gender, religion or beliefs, ethnicity, disability, sexual orientation or socio-economic background, all children:

- have a positive and enjoyable experience at NVCFR in a safe and child centred environment
- are protected from abuse whilst participating in activities provided by NVCFR or outside of the activity.

NVCFR acknowledges that some children, including disabled children and young people or those from ethnic minority communities, can be particularly vulnerable to abuse and we accept the responsibility to take reasonable and appropriate steps to ensure their welfare.

As part of our safeguarding policy NVCFR will

- promote and prioritise the safety and wellbeing of children and young people
- ensure everyone involved with NVCFR understands their roles and responsibilities in respect of safeguarding and is provided with appropriate training and learning opportunities to recognise, identify and respond to signs of abuse, neglect and other safeguarding concerns relating to children and young people;
- ensure appropriate action is taken in the event of incidents/concerns of abuse and support provided to the individual/s that raise or disclose the concern;
- ensure that confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored;
- prevent the employment/deployment of unsuitable individuals;
- ensure robust safeguarding arrangements and procedures are in operation.

The policy and procedures will be widely promoted and are mandatory practice for everyone involved in NVCFR. Failure to comply with the policy and procedures will be addressed without delay and may ultimately result in dismissal/exclusion from the organisation.

This policy is the direct responsibility of the Operations Manager who is the NVCFR Safeguarding and Child Protection Lead.

Monitoring

The policy will be reviewed every three years, or in the following circumstances:

- changes in legislation and/or government guidance;
- as required by Northamptonshire Safeguarding Children Board, NSCB or Northamptonshire Children's Trust.

Section 1 General Background

1. Statement of principles

- 1.1 NVCFR is committed to providing high quality services to children and families affected by domestic abuse with the aim of achieving the best possible outcomes for each child recognising each is unique.
- 1.2 The guiding foundations for achieving those outcomes are based upon the Children Act 2004, and the Ofsted guidelines contained in 'Helping Children Achieve More'.
- 1.3 NVCFR aims to work within the Statutory Framework for the Early Years Foundation Stage (EYFS) which states:
Four guiding principles should shape practice in Early Years settings. These are:
 - Every child is a **unique child** who is constantly learning and can be resilient, capable, confident and self-assured;
 - Children learn to be strong and independent through **positive relationships**;
 - Children learn and develop well in **enabling environments** in which their experiences respond to their individual needs and there is a strong partnership between practitioners and parents and/or carers;
 - Children develop and learn in different ways and at different rates.

Assessments determining the needs of children and young people will be carried out in relation to all those receiving a service. These assessments, including those using the Early Help Assessment, will be used to create action plans with the aim of meeting identified outcomes for each child .

A clear process is in place to track any child from referral to exit, ensuring that their safety is paramount and includes regular checks to make sure that this remains so – see Section 4 for full details.

1.4 **NVCFR believes that all children have the right to be safeguarded and protected from all forms of abuse, whether this is physical, financial, sexual, emotional or spiritual abuse or neglect. NVCFR will endeavour to teach children using our services that they have rights and that no one should take away their right to be safe.**

1.5 NVCFR endeavours to reflect safe practice at every stage of working with any family.

1.6 NVCFR will provide guidance to the parent/carer regarding the Child Sex Offender Disclosure Scheme (CSODS), sometimes referred to as 'Sarah's Law' and the Domestic Violence Disclosure Scheme (Clare's Law).

1.7 Children and young people will be made aware that NVCFR staff will not keep 'secrets', and where relevant this will be communicated at initial assessment, in an ongoing way as part of worker/child interaction, and at the point of a possible disclosure.

1.8 Children using our services will be informed that it is alright to say no to any person who tries to do something to them which they feel is wrong and that some secrets should never be kept, even if they promised not to tell.

1.9 NVCFR provides regular safe opportunities for children to share any concerns with a safe adult.

1.10 NVCFR is committed to safeguarding and promoting the welfare of children and expects all staff and volunteers to share this commitment and follow the organisation's policies and procedures in this respect. This means:

- Protecting children from maltreatment, including physical, emotional, sexual or spiritual maltreatment;
- Preventing impairment of children's health or development;
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.

(Working Together to Safeguard Children (HM Govt 2006))

1.11 In ensuring this commitment, all NVCFR staff and volunteers, including Trustees, receive mandatory training in the NVCFR Safeguarding and Child Protection Policy, which includes definitions of abuse and the signs and symptoms that might indicate abuse, and how concerns regarding child protection should be reported. This training is part of the NVCFR Core Induction Training and will be delivered to all staff and volunteers within the first six weeks of their employment/volunteering with the organisation.

NVCFR is proud to deliver training to professionals across the Interpersonal Violence, Domestic Abuse, Health, Police, Voluntary and Community Sectors, working with all levels to ensure that awareness and knowledge about the subject is held. Trainers are qualified to deliver this training. As such our Core Induction Training Programme is held in high regard by other similar organisations and we are able to sell places on appropriate training programmes, such as Lone Working and Professional Boundaries. Our Core Induction Training Programme includes an overview of NVCFR to ensure that staff, volunteers and Trustees are fully aware of the ethos, purpose, values, structure and services of the organisation.

Line Managers will ensure that all staff and volunteers have training in relation to child protection, safeguarding and promoting the welfare of children appropriate to their roles. Training received will be recorded in Continued Professional Development logs. CPD logs and ongoing training needs will be reviewed in supervision and through the Professional Development Review/Appraisal process. Additional training will be offered on a needs led basis and training updates will be provided for all staff on an annual basis.

Specific role holders, such as the Operations Manager, Development Manager, CEO, Children and Young People's Practitioners and others on the Front Line Team will receive more in depth training, relevant to their roles, in Safeguarding and Child Protection provided by Northamptonshire Safeguarding Children Board and Barnados.

1.12 Our approach is child-centred, **and we believe that the child is never to blame for any abuse that s/he may suffer, that children have the right to be respected and believed.** We also believe that everyone has a duty to safeguard children.

1.13 **Safeguarding Children and promoting their welfare is a multi-agency responsibility.** It is the responsibility of NVCFR staff to gather information and report concerns, NOT to decide whether or not something is child abuse. It is not any one agency's responsibility to decide if something is child abuse. By reporting incidents and concerns to the police or Children' Services, wider enquiries can be carried out and a full picture can be built up about the child's circumstances. Thus, informed decisions can be made as to the most effective course of action to safeguard the child and promote his/her welfare. NVCFR recognises that there is a need for agencies to share information where there is a

suspicion of abuse or neglect. A referral should not be seen as a betrayal of trust but as a necessary and responsible way of safeguarding children.

1.14 NVCFR works with children and young people whose needs range from those with additional needs, to those who are children in need, to those in need of protection from significant harm. Many of these children will require integrated support from more than one practitioner but our aim is that they should experience a seamless and effective service and we will work closely, flexibly and openly with other agencies to achieve this. When/if it has been agreed that a NVCFR worker should act as the lead professional e.g. as result of using an Early Help Assessment, they will seek to ensure that services are coordinated, coherent and achieving intended outcomes.

1.15 NVCFR recognises that it is vital for the organisation to have good working relationships with Northamptonshire Children's Trust and the police, as they have the lead responsibility in dealing with child safeguarding issues. We will seek to establish good liaison with these agencies and to promote understanding of the dynamics of domestic abuse amongst other professionals working with abused children and their parents.

1.16 NVCFR recognises that one of the best ways to support a child is to provide support for the parent/carer, and this we will strive to do. However, we also recognise that sometimes there may be a conflict between the interests of the parent/carer and those of the child. This can raise difficulties, but as professionals **we have a duty to ensure that the welfare of the child is paramount.**

1.17 Concerns about the safety or well-being of a child will not be ignored. Concerns will be followed up and dealt with as quickly and sensitively as possible. In practical terms this means that when safeguarding children is an issue, the need for appropriate action will override the usual guarantee of confidentiality (see Section 7, Confidentiality and the Disclosure of Information).

1.18 NVCFR endorses the recommendations for dealing with cases of domestic abuse as set out in the Northamptonshire Safeguarding Children Board policies. Staff are also encouraged to use the document [What to do if you're worried a child is being abused: advice for practitioners](https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2) on <https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2> **All staff have access to these documents via the internet, saved on Huddle Intranet Site and in hard copy. Further support can be found at; [Help and protection for children \(nctrust.co.uk\)](http://nctrust.co.uk)**

1.19 NVCFR work within the Northamptonshire Children's Trust Threshold and Pathways Framework using Early Help Assessment, Complex Case Reviews and referral to all NCC services for children and families at appropriate levels to avoid escalation. There is standard involvement in training and processes, Complex Case Reviews, etc to show a trail of prevention through to reporting within the system, to ensure concerns are picked up early and prevent escalation where possible. The Northamptonshire Children's Trust Early Help process is shown here [Early Help advice for professionals - Help and protection for children \(nctrust.co.uk\)](#)

1.20 NVCFR endorses the United Nations Convention on the Rights of the Child (1989). (**Appendix 9**). With regard to Article 9. The Domestic Abuse Act 2021 makes it clear that children who have witnessed or experienced domestic abuse are victims of it in their own right. For this reason NVCFR considers that contact visits with a violent parent may involve unacceptable risks for the child and the non violent parent/carer.

1.21 A clear process exists which tracks any child from referral to exit to ensure that their safety is paramount and regular checks are made to ensure this remains so. If at any time child safeguarding

risks are identified which cannot be managed, the Child Protection referral process will take place (See Appendix 12). Line Managers must monitor with their staff ongoing safeguarding issues at all times. This is to ensure children cannot slip through the net when staff are very busy or a crisis occurs.

2 Anti-discriminatory practice

2.1 NVCFR is committed to anti-discriminatory practice and the organisation's policies and procedures apply to all service users irrespective of age, gender, ethnicity, disability, sexual orientation, religion, race, culture or any other protected characteristic as explained more fully in the Equality and Diversity Policy. Such practice will take into account the diverse needs of the client group. Any action taken within these guidelines will reflect equal opportunities principles and recognise that some groups of children are more vulnerable to abuse e.g. disabled children.

3 Rationale/justification

3.1 There are very strong links between domestic abuse and child abuse.

3.2 Various studies reviewed by Hughes et al (1989) have found child abuse and woman abuse by the same male perpetrator occurring together in 40% - 60% of cases. Research by Farmer & Owen in 1995 found that children whose mothers are experiencing domestic abuse are likely to have the worst outcomes in child safeguarding cases. This is borne out in the experiences of NVCFR and other refuge groups and domestic abuse service providers.

3.3 It is highly probable that workers in NVCFR services will encounter a variety of safeguarding issues. In response to this, the organisation has developed a clear and consistent approach to safeguarding and promoting the welfare of children. Clear guidelines provide protection for service users and for staff. Having effective policies and practice on safeguarding children also helps to ensure that referrals to Northamptonshire Children's Trust (MASH) are taken seriously and dealt with appropriately.

3.4 NVCFR recognises that many concerns about children and young people arise on a day to day basis, and in most cases these can be dealt with quickly and easily by discussions between staff and parents/carers where further advice or help may be offered. Regular discussions will be conducted during internal Team around the Family (TAF) meetings. These discussions must be recorded by staff.

3.5 **The policy on Child Protection and Confidentiality should be used in conjunction with the Northamptonshire Children's Trust and Northamptonshire Safeguarding Children's Board toolkits and referral procedures and is included in training for all staff and volunteers.** The policy has been drawn up with regard to the Children Act 2004, which is underpinned by the Children Act 1989, 'Helping Children Achieve More', Working Together to Safeguard Children (2006) and the Early Help Assessment for Families.

Section 2 Definitions of Abuse

4. Definitions of different types of abuse

4.1 The HM Government 2006 edition of Working Together to Safeguard Children states: "Somebody may abuse or neglect a child by inflicting harm, or by failing 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."

The 1996 National Commission of Inquiry into the Prevention of Child Abuse, Childhood Matters, defined child abuse as; 'Anything which individuals, institutions or processes do or fail to do, which directly or indirectly harms children or damages their prospects of safe and healthy development into adulthood'

It is important to note that children may experience one or many of these following symptoms, but that in themselves they may not necessarily be a sign of abuse – other factors MUST be taken into account.

NB NVCFR recognises that these definitions of abuse are not exhaustive or mutually exclusive. See Appendix 1 for indicators of abuse.

Physical abuse:

4.2 Physical abuse occurs when somebody inflicts injuries on a child or knowingly does not prevent them. Examples of physical abuse include hitting, shaking, kicking, throwing, smacking, hair pulling, burning, scalding, biting, choking, poisoning, mutilating, suffocating or drowning.

4.3 Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

4.4 Abuse can also result from corporal punishment, physical chastisement or excessive discipline. **NVCFR aims to make its refuge and other premises abuse-free environments and encourages women to use positive, non-physical forms of discipline** (see Section 5, point 36, Disciplining children).

Common signs/ Risk indicators

Bruises in places not normally harmed during play (back of legs, abdomen, groin area and bite marks).

Frequent bruises or burns

All other injuries, which do not have an explanation consistent with the injury

An undue fear of adults or watchfulness

Improbable excuses to explain injuries

Inconsistent story of how the injury occurred

Lateness in seeking medical attention/untreated injuries

Repeated admissions to casualty

Arms and legs kept covered in hot weather

Flinching or withdrawal from contact

Fear of returning home

Self-destructive behaviour

Running away

Sexual abuse

4.5 Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. This may include inappropriate touching or genital stimulation as well as penetrative acts such as rape, buggery or digital penetration. It can also include forcing or enticing a child to witness sexual acts, involving a child in pornography such as involving children in looking at or in the production of, sexual online images, or encouraging a child to behave in sexually inappropriate ways.

4.6 Forms of abuse that appear to be less severe (e.g. inappropriate touching while playing games) may be used to groom a child for future sexual exploitation or may indicate that other forms of sexual abuse are already occurring.

4.7 Sexual abuse typically involves a misuse of power that may be based on differences in age, intellect, physical strength or understanding and may involve bribes and threats.

Common signs/risk indicators

Emotional distress, incongruent behaviour

Age inappropriate knowledge/behaviour in sexual matters

Soreness or itching in the genital area

Eating disorders

Fear of men/fear of a specific adult

Mental illness/depression

Alcohol/substance abuse

Unexplained amounts of money

Absconding/running away from home

Bruise marks on inner thighs/upper arms/buttocks

Chronic throat infection/herpes/habitual mouth sores

Piles

Enuresis/Encopresis (Bed wetting and soiling)

Contact with Schedule 1 offender

Fear of dark/nightmares

Pain on urination

Difficulty in walking

Inappropriate fondling

Frequent masturbation (It is not uncommon for young children to masturbate occasionally for comfort or experimentation)

Fear of undressing for PE lessons

Emotional abuse

4.8 This is the persistent emotional maltreatment of a child. It can cause severe and persistent adverse affects on a child's emotional and behavioural development. Examples include causing a child frequently to feel frightened or in danger (e.g. by threatening physical injury or abandonment), exclusion, verbal abuse, racial abuse, humiliation (such as repeatedly telling the child that s/he is useless or inadequate), forcing a child to witness abuse, shouting, swearing, threatening or imposing expectations that are inappropriate for the child's age or development. It may involve conveying to the child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. Emotional abuse could include overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

4.9 Other forms of abuse usually involve an element of emotional abuse, particularly threats. There is a tendency to assume that emotional abuse is less serious, as its detrimental effects may not be

immediately apparent. However, it is especially damaging in infancy and the long-term effects can be very serious.

Common signs/risk indicators

Physical, mental and development delay or disturbance including speech/eating disorders

Persistent self-comforting behaviour (i.e. Rocking)

Inability to develop relationships with their peers and/or with adults

Overly aggressive behaviour, particularly with peers

Extremes of passivity or aggression

Fear of new situations

Inappropriate emotional responses

Fear of parents

Drug/solvent/alcohol abuse

Running away/absconding

Stealing/scavenging

Enuresis or Encopresis (bed wetting and soiling)

Over reaction to mistakes

Neurotic behaviour

Self-mutilation

Lack of attachment or lack of trust towards parents and other family members

Lack of praise or stimulation from parents and other family members

Neglect

Northamptonshire Safeguarding Children Board has a policy and procedures around neglect, which include a Neglect Assessment Tool. These can be found at:

- [Welcome to the Northamptonshire Safeguarding Children Board Procedures Manual \(proceduresonline.com\)](http://proceduresonline.com)
- [Responding to Abuse and Neglect \(proceduresonline.com\)](http://proceduresonline.com)

4.10 Neglect is the severe or persistent failure to meet the essential needs of a child likely to result in the serious impairment of the child's health or development, or failure to protect the child from danger.

4.11 The repeated failure to attend to the physical and developmental needs of the child may include failing to provide warmth, clothing, food or consistent care or failing to meet the educational or medical needs of the child. A lack of supervision may expose the child to danger (such as a fall or traffic accident). Severe neglect can result in the significant impairment of the child's health or development, including failure to thrive.

Common signs/risk indicators

A child may display its unhappiness by being withdrawn or unusually aggressive

Inadequate or inappropriate clothing

Malnourishment or always being hungry

Constant tiredness

Unhygienic home conditions

Poor personal hygiene

Frequent lateness at school/non attendance

Untreated illness/repeated failures to attend appointments

Poor social relationships

Stealing

Scavenging for food

Poor sense of identity/low self esteem

Running away from home

Lack of protection, including lack of supervision appropriate to a child's age

Exposure to danger, including moral danger

Failure to thrive (grow or develop) due to non-medical reasons

4.12 Spiritual abuse can occur when any person in a position of spiritual authority uses their spiritual position to control or dominate another person. It involves overriding the feelings and opinions of another, without regard to what will result in the other person's state of living, emotions or spiritual well-being. Religiously based psychological abuse of children can take the form of using teachings to subjugate children through fear, or imposing heavy indoctrination such that the child is taught only the beliefs and/or points of view of their particular sect (or even just that of their caregivers) and all other perspectives are stifled or kept from them. The beliefs are taught as absolute truth, with no way of ever questioning them. Psychologists describe this as crushing the child's chance to form a personal morality and belief system, making them reliant on their religious system and/or parents. They never learn to critically reflect on information they receive. Similarly, the use of fear and a judgmental environment (such as the concept of Hell) to control the child can be traumatic. Spiritual abuse is perpetuated when we assert judgments on others based upon what we believe to be correct.

NVCFR believes that spirituality is an individual and unique aspect of a person's life and while there are some beliefs that are essential to one's faith, the organisation believes that there is a very individualised aspect to spirituality that needs to be between the individual and their faith.

NVCFR has a Christian ethos, which impacts the way that the organisation works. Those who come to NVCFR for help come from other faiths or have no faith – each is accepted and respected and NVCFR does not seek to force faith upon them.

- NVCFR's Christian Ethos is at the heart of the organisation, making a positive impact on the work we do.
- Our motivation in serving others is based on our relationship with Jesus Christ, and our faith in Him, and is a response to the love and grace God has shown to us. This impels us to love and serve others in His name.
- Our values, attitudes and service offer unconditional acceptance and a firm belief in personal wholeness, growth and change.
- As Christians we are called to ensure that all those who have been damaged by abuse are given the opportunities to find their security, identity and purpose.

We value all individuals in a way that is consistent with our distinctive Christian ethos by creating an environment where service users, volunteers and employees are encouraged and enabled to realise their potential.

4.13 Concerns about a child may come to the attention of staff / volunteers in a number of ways:

- Through observation of the child. A child's behaviour may indicate that it is likely that he/she is being abused.
- A child may disclose abuse
- Information may be given by parents/carers, other people or agencies
- A child may show some signs of physical injury for which there seems to be no satisfactory explanation
- Something in the behaviour of one of the workers or young person, or in the way the worker or young person relates to a child, alerts them or makes them feel uncomfortable in some way

- Observing one child abuse another

Section 3 Responsibility

Abuse robs children of their childhood. Without help, the scars of abuse can last a lifetime. Child abuse is preventable - not inevitable. And it's up to each of us to do everything possible to keep the children in our care safe from abuse, so that they can grow up healthy and thrive.

It is the **duty and responsibility of everyone at NVCFR**, all our staff, volunteers and Trustees, to ensure that the children and young people that use our services are protected from harm and that they feel safe to tell us if they have been, are being, or are afraid that they might be, harmed.

As a member of staff, volunteer or Trustee you should know how to spot the signs and symptoms of abuse (see Section 2 of this policy and Appendix 1) and whom to report it to if you are concerned about a child or young person.

5. Responsibility for safeguarding issues in NVCFR

5.1 NVCFR has a clear structure for reporting and decision-making on Child Protection.

The **Operations Manager** is the appointed person responsible for Child Protection on a day to day basis and is trained in Child Protection and Safeguarding Procedures as a Designated Officer. The **Development Manager** is trained in Child protection and Safeguarding Procedures as a Designated Officer and is able to deputise in the absence of the Operations Manager. The **CEO** is the named registered person for Ofsted.

In the event of the Operations or Development Manager or CEO being unavailable, staff members should take any and all concerns to their Line Manager. If the Line Manager is unavailable they should take safeguarding or child protection issues and concerns to whichever of the other managers is available. In the unlikely event that a manager is not available, Staff should contact Suzy Van Rooyen, Trustee, who has appropriate expertise and may be contacted for advice.

The Operations Manager, Development Manager, CEO and Line Managers will offer support and guidance to staff and volunteers in dealing with concerns as a priority.

Name	Position	Telephone number	Mobile number
	Operations Manager	01604 230588	
	CEO	01604 230588	
	Trustee	01604 230588	

5.2 If any member of staff or volunteer has reason to believe that a child is being abused or has been abused, they must discuss this immediately with the Operations Manager, Development Manager, CEO or a manager. The manager will make a decision on action to be taken to prevent further abuse in line with this policy.

5.3 All staff and volunteers must be aware of the procedures to follow when dealing with child protection cases when a manager is not available. All staff and volunteers will receive training in child protection, safeguarding children and confidentiality.

6 Informing service users about policies on safeguarding children and confidentiality

6.1 Service users moving into refuge will be told about the house rules and will be informed verbally that the refuge has policies on child protection, safeguarding children and confidentiality. Further, detailed discussion about the child protection, safeguarding and confidentiality policies will be undertaken by the client's key worker as part of the assessment process undertaken with each individual adult and child service user.

6.2 Service users using other NVCFR services (e.g. Community Services) will also be given this information at the start of the service and it will be discussed as part of the assessment process.

6.3 **It is important that parents/carers with children should understand that there are limits to confidentiality when safeguarding issues are involved.** If there are clear indications that a child is at risk of abuse, NVCFR will either refer the case to MASH for assessment or involve the police if it is believed that a criminal offence has been committed or the child urgently requires protecting.

6.4 Where necessary interpreters or sign interpreters will be used to ensure that the parent understands issues regarding child protection, safeguarding and confidentiality and that children are able to be heard and understood.

Section 4 Child Protection and Safeguarding

If a child is in immediate danger, left alone or missing, you should contact the police directly and/or an ambulance using **999**.

7. General procedures

Confidentiality is of paramount importance when developing trusting relationships with all of our clients. However; the exception to this is where to maintain confidentiality on behalf of a service user or to share information with a service user about the risk and protection of their child/ren would put a child, young person or others at increased risk of significant harm or an adult at risk of serious harm, or if it would undermine the prevention, detection or prosecution of a serious crime including where seeking consent might lead to interference with any potential investigation. This tenet must be held as true in following the child protection and safeguarding procedures of NVCFR.

7.1 Referral. A risk and needs telephone assessment is made for every family entering the service, which must note any specific concerns about each child.

If **there are risks noted** but the family are **not** accepted for NVCFR service, a recommendation to the referee will be made to ensure these risks are mitigated. In the case of a self referral where child protection risks are identified which cannot be managed, the referee will be informed that these must be reported to MASH, **if it is safe to do so**. The procedure will be explained and the referee will be encouraged to respond to this assistance. The member of staff taking the referral will inform the Operations Manager and will ensure a referral is made to MASH on behalf of the child. All staff taking referrals will be trained in this procedure.

7.2 Assessment. On entering the service, a further assessment is made of each child's needs and their risk level and the source of any risk identified. A development plan for the family will be compiled using the Breaking the Cycle model with the involvement of the parent and where appropriate the children. Where needs are identified which cannot be managed, an Early Help Assessment will be made (see guidelines in Appendices 4 and 4a). **All staff conducting assessments will be trained in this procedure.**

Where imminent and serious risk is identified which cannot be managed, the member of staff will consult with the Operations Manager and will agree whether a referral to MASH is required. (See Appendix 4). If agreed, the designated worker will compile the referral within statutory timescales and the Operations Manager will check this for accuracy and professional standard of referral to ensure that every referral requiring initial assessment is accepted. **All staff and volunteers will be trained in this procedure.**

7.3 Ongoing Work The designated worker will ensure that the needs and risks of every child in the family are discussed at every key worker/team around the family meeting and actions are recorded and taken forward to mitigate risk and meet needs. The Children and Young People's Practitioners who have sight of children regularly are responsible for communicating regularly with other members of the team around the family to ensure all concerns are updated and likewise team around the family members will report new information to the Children and Young People's Practitioner. The Children and Young People's Practitioner will have sight of each child each week in refuge. For children receiving services in the community, regular contact will be made, but the frequency will be dependent on need

and after consultation with the Operations Manager. **All staff and volunteers involved in Team Around the Family (TAF) meetings will be trained in these procedures.**

7. 4 Specific Work Any actions noted for a child, by any member of the team around the family, must be allocated to a worker to ensure these are followed through and specific work is completed either by a specialist worker within NVCFR or a referral made to another specialist agency and monitored by the worker making the referral or a Manager where this is more appropriate. These referrals will be treated as part of the worker's caseload and will be monitored during supervision.

7. 5 Review Regular reviews of all families will take place and every child of the family will be discussed at these reviews, considering with the parent the needs and any risks of any child, especially noting if contact with the perpetrator is taking place and ensuring that this is safe. In the residential setting reviews will be held monthly and in the Community service they will be held 3 monthly.

7.6 Supervision The Operations Manager/Development Manager/CEO/Managers will make themselves available to discuss any safeguarding risks or concerns when raised by staff members as quickly as possible, and will ensure all staff are adequately supported. Line Managers should be in regular, at least weekly communication, with staff members and regular case management supervision will take place at least **every 6 weeks**. Line Managers are responsible for their staff's professional standards and should ensure that staff feel equipped to complete their work efficiently and to a high standard, having received all the requisite core and role-specific training for their position within the required time frame. If Line Managers have any concerns about a particular case, they should conduct a key worker meeting with the designated worker and the client **within 3 working days**.

7.7 Safeguarding If at any time during this process child safeguarding risks are identified, the Child Protection referral process will take place. These are outlined in appendices 4 and 4a. Line Managers **must** monitor with their staff any ongoing Safeguarding issues to ensure children's safety at all times.

If a referral to MASH for initial assessment is refused, the Operations Manager should meet with the family's designated workers and the parent where they are engaged in the process, to review the decision and decide on an appropriate course of action to keep the child safe.

7.8 Recording A clear tracking system has been created and implemented so that at any time a child who is engaged in the Safeguarding process can be tracked and regular monitoring can ensure referrals or actions are kept to time. Staff must inform and update the tracking system of all children who are engaged in the Safeguarding process. **All incidents and allegations of a safeguarding nature must be reported to the Operations Manager.**

Information regarding the recording of incidents is contained in section 8 of this policy and in Appendix 5.

7.9 Audit An audit is made annually by the Operations Manager to examine random case files, to ensure correct practice is being followed. Every case file which includes a MASH referral will be checked. The results of this audit will be shared with Trustees.

If any case is brought by an outside agency or a worker, which questions either the practise of NVCFR, or the refusal of a referral to MASH by NVCFR for an initial assessment on safeguarding grounds, the Operations Manager will review the case. If poor practice is noted or alternative action could have been taken successfully, then action will be taken to address the issues with the staff concerned and all staff if appropriate.

If policy or procedures require updating or changing as a consequence, then this must be completed within 28 days of the completion of the audit. The Operations Manager must check if all staff understand and are adhering to the new procedure approx 28 days following the update or change. All findings and subsequent actions will be shared with the CEO and Board of Trustees.

8. Safeguarding and Management system

- 8.1 Safeguarding children is reflected in NVCFR's management system.
- 8.2 The Operations Manager is responsible for management, review and development of organisational safeguarding policies, procedures and overall management.
- 8.3 The Development Manager and the Operations Manager are responsible for managing safeguarding within their area of work and should sign off any safeguarding referral and also be kept aware of current safeguarding issues. They are trained to manage safeguarding children.
- 8.4 Staff are trained to recognise and respond to safeguarding issues and work in ways which reflect this culture. All frontline staff receive training in Safeguarding, Core groups and Child Protection Conferences. All staff and volunteers are trained in NVCFR Safeguarding policy and procedure, and regularly given updated information as it becomes known.
- 8.5 All volunteers are trained internally in safeguarding to recognise and respond to safeguarding issues and all understand the NVCFR Child Protection Policy and Procedures.
- 8.6 All service users are encouraged to live in an environment which promotes safeguarding children and young people, and all activities reflect this.

9 Procedures for dealing with specific incidents or suspicion of abuse

9.1 NVCFR recognises that different levels of abuse will require different action. However it is not NVCFR's responsibility to decide if something is child abuse. It is the responsibility of NVCFR staff to report incidents and concerns **as they occur** to the Operations Manager or their Line Manager, who can contact the police or Northamptonshire Children's Trust so that wider enquiries can be carried out and informed decisions made as to the most effective course of action to safeguard the child and promote his/her welfare. **Safeguarding children is a multi-agency responsibility.**

9.2 It is a major issue in safeguarding children, and has been highlighted in reports into child deaths, that there is a need for agencies to share information where there is a suspicion of abuse or neglect. A referral should not be seen as a betrayal of trust but as a necessary and responsible way of safeguarding children.

9.3 It will not always be appropriate to ask MASH to assess the child's needs if NVCFR can deal with a problem effectively by arranging the provision of practical support. This does not apply to concerns about a child's need for protection, as this requires a multi-agency response.

9.4 It should not be assumed that the only function of Northamptonshire Children's Trust is enquiring into child protection matters, as they may be able to provide or offer access to care such as Children's Centres following referral and assessment of needs.

9.5 Before making an actual referral it may sometimes be helpful to discuss a possible referral with the Early Help Co-ordinator (see Appendix 4 – Early Help Pathway) and to ask what action they would be likely to take in these circumstances. Health Visitors may also be able to offer helpful advice.

9.6 NVCFR recognises that there may be barriers to children telling anyone about abuse; the power of relationships between adults and children should not be underestimated nor should the deliberate and skilled way that abusers target their victims. Children may not tell because:

- They are scared because they have been threatened
- They believe they will be taken away from home or their parent/carer
- They believe they are to blame
- They think it happens to all children
- They feel embarrassed
- They feel guilty
- They don't want to get the abuser into trouble
- They have communication or learning difficulties
- They may not have the vocabulary to say what happened
- They are afraid they won't be believed
- They believe they have told, maybe by dropping hints, but haven't been believed or understood, so don't bother to try again

9.7 NVCFR recognises that abuse thrives on secrecy and needs to be handled in a sensitive, accepting way. In order to achieve this staff and other adults involved may have to overcome certain barriers when dealing with concerns such as:

- Sometimes it may be hard to believe or understand what the child is saying
- It may be difficult if the suspicion is about someone that is known
- The fear of 'getting it wrong'
- The fear of what consequences there may be for 'getting it wrong' for the child, for the family and for themselves
- Worry that it may make things worse for the child
- Belief that the services dealing with concerns are stigmatising
- They simply do not want to become involved
- They do not have the necessary information on what to do or who to contact
- Lack of understanding of issues regarding cultural approaches to parenting

These issues will be covered in staff and volunteer training and in supervision, and in awareness raising sessions with service users e.g. at the refuge and in the drop in. Appropriate training will be given to all staff and volunteers.

9.8 NVCFR recognises that witnessing domestic abuse in itself is a safeguarding risk indicator, and so will be vigilant in recognising when children or young people require therapeutic intervention as a result of previous experience, and also ensure they are not put in danger by returning to potentially violent situations during child contact, or any other situation where contact with the perpetrator raises risk levels.

10 If a child discloses abuse to a member of staff or a volunteer

10.1 NVCFR staff or volunteers will:

- Explain to the child that in these circumstances confidentiality cannot be maintained, the staff member must tell someone so that the child can be helped.

- Stay calm and listen carefully. Believe them – when children go to an adult for help they need to know they will be believed and supported. This is especially true in the case of sexual abuse which children very rarely lie about.
- Reassure the child that s/he was right to disclose what happened, that the abuse is not her/his fault and that no matter what happens you will not be angry with them.
- Take appropriate action if the child is in need of urgent attention – If a child is in immediate danger, left alone or missing, you should contact the police directly and/or an ambulance using **999**.
- Assure the child that the issue will be taken seriously.
- Fill out an incident form (see Appendix 11) immediately stating what was said by both the child and the member of staff, **recording facts** rather than opinions. Collect as much information as possible about the situation – this may be from the child, parent/carer (if not implicated) or other workers. Your written record should include:
 - date and time of the incident or disclosure,
 - parties who were involved,
 - what was said or done and by whom
 - any further actions.
 - It may also be helpful to record perception of emotional and physical presentation.

Leading questions should never be asked, staff must record what the child is saying using, as far as possible, the child’s own words.

- Discuss the concerns with the Operations Manager, or a manager from the following list, as soon as possible – within the same working day, decide on the appropriate course of action with the manager and record this decision. One of the managers listed in the first 3 rows of the following table are available at all times, 24 hours per day, through the On Call buddy system. If your concern occurs out of hours (between the hours of 4pm and 9am, at weekends or on bank holidays) please call 01604 230311 to find the name of the Duty Manager and call them immediately.

Name	Position	Telephone number	Mobile number
	Operations Manager	01604 230588	
	CEO	01604 230588	
	Trustee	01604 230588	

- Tell the child what action is likely to be taken, who will be informed and what the consequences may be.
- If the child has sufficient understanding, discuss options realistically, including talking with the parent/carer with another staff member present (if the parent/carer is not the abuser).
- Keep the child informed throughout the entire process.

10.2 The staff member will discuss the disclosure with the Operations Manager or if unavailable, another manager from the list above, who will decide on a course of action depending on the nature and seriousness of the abuse and seeking advice from Northamptonshire Children’s Trust if appropriate. Any advice taken and the decision reached will be recorded on the form by the manager or the staff member working with the child (and **must** be checked by the manager). If no further action is considered necessary the reason why should be documented and the form should be placed on file.

10.3 Normally any concerns should be discussed with the parent/carer **EXCEPT** if they are the alleged abuser. If applicable, the parent should be encouraged to make their own referral to Northamptonshire Children's Trust. **However, this should only be done if such discussion and agreement seeking will not place a child at increased risk of significant harm. A referral should still be made with the guidance of the Operations Manager if the parent/carer does not consent, or it is not safe to inform the parent/carer, and concerns are significant.**

10.4 Further, up to date, information, advice and guidance regarding **Reporting a Concern regarding a child or young person – guidance for professionals** can be found at: [Early Help advice for professionals - Help and protection for children \(nctrust.co.uk\)](https://www.nctrust.co.uk/early-help-advice-for-professionals)

You can use the following document to assess the child or young person's level of need: [NSCB thresholds guidance 2018 \(nctrust.co.uk\)](https://www.nctrust.co.uk/nscb-thresholds-guidance-2018)

In the case of allegations of a sexual abuse nature, in no circumstance should staff question or discuss the alleged incident with the child. This could have serious implications for contaminating evidence and hamper any criminal prosecution or safeguarding of the child (see Section 4, points 12/13 on page 22).

10.5 The Operations Manager will notify relevant members of staff as to the course of action taken.

10.6 **If there is a need to ensure the immediate safeguarding of the child, after discussion with the Operations Manager the staff member will make a referral to MASH (0300 126 1000. Option 1 followed by Option 3) or the police without delay.** When making the referral the staff member should obtain the name of the Social Worker allocated to take on the Initial Assessment. They will need to be clear about:

- The nature of the concerns
- How and why they have arisen
- The apparent needs of the child e.g. are there urgent concerns about the immediate safety of the child
- Any previous assessments of the child, if known e.g. Common Assessment Framework (CAF)
- Decisions made and what will happen next

10.7 The referral should be followed up in writing; (electronic forms are available online at [Early Help advice for professionals - Help and protection for children \(nctrust.co.uk\)](https://www.nctrust.co.uk/early-help-advice-for-professionals) and sent by secure email, within 24 hours of the telephone referral. A copy should be placed on file. A signature should be obtained from the parent stating that they are aware of and in agreement with the referral. If the parent does not agree, the referral will be read to them and the staff member will indicate that the parent does not agree with the content and has refused to sign to agree the referral. **If the parent is implicated in the disclosure they will not be informed of the referral and will not be able to sign their agreement to it. In this instance a note should be made to this effect on the file.**

10.8 When Northamptonshire Children's Trust (MASH) receive a referral, they will acknowledge receipt by phone as soon as possible. The person receiving the referral will make any necessary enquiries and then pass the referral to a member of their team who will do an initial assessment and decide on further action. They will always action a referral as soon as possible and aim to reach a decision within 48 hours. They will let you (NVCFR) know what has been decided.

10.9 If NVCFR wishes to receive an acknowledgement, or notice of the decision, in writing or by fax, you must make that clear when you send in the referral. It is not general policy or procedure for them to

confirm anything in writing if they feel a phone call will suffice – the individual worker makes this decision.

11 If the abuse occurred previously and the child is no longer in danger

11.1 Intervention by Northamptonshire Children's Trust may not be necessary, although Northamptonshire Children's Trust (MASH) may offer other help such as referral to a Children's Centre

11.2 However, if the abuser is likely to be a danger to other children and especially if the abuse involved a serious physical injury or sexual abuse a referral to MASH will be necessary. This is to ensure that the abuser is prosecuted if possible and that there is a record of the alleged offence. Usually Northamptonshire Children's Trust will only require a medical examination of the child in extreme cases, but staff should ask for advice from their local MASH office.

12 If there is reason to believe that a child is at risk of sexual abuse

12.1 In these circumstances it is essential to seek specialist advice from Northamptonshire Children's Trust and a police investigation is likely to take place. It is **inappropriate** for NVCFR staff to make enquiries about sexual abuse (See point 10.4 and 13)

12.2 Children who have been sexually abused frequently feel very guilty and confused. It is important to reassure the child that the abuse is not his/her fault and to continue providing reassurance that they were right to tell.

13 Ensuring that evidence is not contaminated

13.1 NVCFR is aware of the danger of contaminating evidence, especially when dealing with young children and particularly in cases involving allegations of sexual abuse or serious physical abuse.

For this reason NVCFR staff and volunteers will

- give the child time and reassurance so s/he can say what has happened in his/her own words
- avoid asking any questions
- avoid making judgmental comments
- avoid jumping to conclusions
- avoid further discussion of the abuse with the child
- talk to the Operations Manager and Northamptonshire Children's Trust (MASH) **without delay** if a decision to refer is made.

13.2 **Any enquiries into allegations of sexual abuse or serious physical abuse must be conducted by specially trained police and social workers to meet legal requirements and be acceptable to the court. However, you can say certain things without contaminating evidence.**

Tell the child

- You take what they say seriously and that you believe them
- It was not their fault
- They were right to tell
- The adult was wrong
- It is right to say no to unwanted touching
- What is going to happen next and **keep them informed.**

14 If the parent/carer resumes a relationship with an abuser

14.1 If it is known that a child has been abused by the partner of the parent/carer or has been seriously affected by witnessing abuse, NVCFR staff will discuss the situation with the service user and explain that in these circumstances Northamptonshire Children's Trust will have to be informed if they return to the abuser.

14.2 As the safety of the child is of paramount concern, Northamptonshire Children's Trust will be notified even if there has been insufficient time or opportunity to explain our policies on confidentiality and safeguarding children to the service user or to discuss the implications of returning to the abuser.

15 Dealing with allegations of abuse occurring during contact

15.1 NVCFR recognises that the Children Act 1989 does not provide adequate safeguarding for abused service users and children involved in contact proceedings, because case law has established a strong presumption of contact which often overrides considerations of safety.

15.2 As contact may lead to further abuse of both the service user and the child(ren), NVCFR will offer practical support and will provide written or oral evidence in court if appropriate.

15.3 NVCFR will carefully record any disclosure or evidence of abuse (see section 8, point 41, page 36 Records and record keeping) which may be relevant to contact proceedings. We will also record information about the child's behaviour if s/he appears to be disturbed or traumatised by contact arrangements, as this evidence may be needed to show that contact is not in the best interests of the child.

15.4 Abusers often allege that the service user is an "unfit parent" and may apply for a residence order on this basis. If NVCFR has relevant evidence about the service user's ability to care for their child(ren), we will offer to provide that evidence for Northamptonshire Children's Trust for the police or for the court

15.5 In particular, we will seek to ensure that the court is made aware of any factors indicating a risk of harm to either the child or the parent/carer.

16 If the child discloses abuse by the parent/carer who is a service user of NVCFR

16.1 The first priority should be to ensure that the child is safe. Therefore any discussion with the parent/carer should not place the child at increased risk of harm. Bearing this in mind, if a referral is to be made to MASH, the parent/carer should be informed **if it is appropriate and safe to do so** as it may be possible to encourage the service user to speak to Northamptonshire Children's Trust.

16.2 The parent/carer should be shown the written report if it is considered safe to provide this information, and sharing the information **would not put the child, young person or others at increased risk of significant harm or an adult at risk of serious harm, or if it would not undermine the prevention, detection or prosecution of a serious crime including where sharing information might lead to interference with any potential investigation.** NVCFR will aim to support the parent/carer and, if necessary, will outline her support needs to MASH. Reports provided by NVCFR will include all aspects of parental care, both positive and negative where these occur.

16.3 If the parent/carer leaves the refuge or stops engaging with a service in an attempt to prevent further action from being taken, a referral should still be made to MASH or the police depending on the nature and urgency of the risk to the child's welfare.

17 If there is a conflict of interest between the child and the parent/carer

17.1 If there is a conflict of interest between the welfare of the child and the wishes of the parent/carer, **the welfare of the child must take priority.**

18 If a child has been injured in the refuge or other NVCFR premises

18.1 If a child needs medical help, NVCFR will ensure that the child is immediately taken to hospital or to a doctor. Ideally this should be done by the parent/carer with a staff member accompanying them to provide support, but anyone who has care of the child may do what is reasonable to safeguard the child's welfare (Children Act 1989 s.3 (5)).

18.2 If there is any indication that the injury is non-accidental or due to neglect, the consultant or GP is likely to make a referral to MASH or the police. NVCFR staff should inform the GP or consultant of any child safeguarding concerns they have regarding the injury.

18.3 Staff should record the injury that the child has sustained as soon as possible, using Appendix 6 – blank body map and noting anything that was said about how this happened. Staff should seek to provide support for both the child and the parent/carer.

19 If there are suspicions of abuse or neglect

19.1 If a member of staff or a volunteer suspect that a child is being abused or neglected, they should discuss this as soon as possible with the Operations Manager or another named person on the list in **Section 3, point 5 on page 14.**

19.2 If the suspicion of abuse or neglect continues or is repeated, an assessment will be made against our tenet of confidentiality and, if it is deemed to be appropriate and safe to do so, the situation will be discussed with the parent/carer and she will be reminded of the Child Protection Policy. Every effort will be made to work with the parent/carer, including offering support and practical help. However, a referral to MASH **must** be made if suspicions persist.

19.3 If there is an injury or bruising, staff will consider whether medical help is necessary and advise the parent/carer to act accordingly e.g. by taking the child to Accident and Emergency. It is essential to discuss how the injury or bruising happened with the parent/carer. This should be recorded on an incident form and body map(see Appendix 6). If there are concerns that an injury may not be accidental or if the injury does not appear to be consistent with the explanation given, this should be discussed with the Operations Manager or another manager and if necessary a referral will be made to MASH. Staff need to be alert to the possible significance of a number of injuries over a period of time and to discuss any concerns with the Operations Manager.

19.4 In cases of emotional abuse or neglect, it is important to stop the process of abuse and to be proactive in promoting better care for the child. Concern may not be confined to an isolated incident, so it is very important to record observations over a period of time. If the abuse is repeated, a meeting should be set up with the parent/carer to discuss the situation and any support needs. A decision may be reached to work with the parent/carer in the refuge or on an outreach basis over a stated period of

time. Staff may decide to involve outside professionals (such as a health visitor or Children's Centre using an Early Help Assessment if appropriate) or a referral may be made to MASH.

19.5 If a member of staff witnesses abuse by the parent/carer, they will intervene and challenge the behaviour if it is safe to do so. The situation should be calmed down and the child will be offered comfort and reassurance. As soon as possible the staff member will find an appropriate time to discuss the incident with the parent/carer in order to make it clear that abusive behaviour is unacceptable. This meeting will be recorded and discussed with the Operations Manager. Depending on the severity of the incident and/or if concerns continue, appropriate action will be taken as outlined in earlier sections of this policy. For refuge residents it may be appropriate to discuss the incident at a house meeting to allay fears. This should be done sensitively and with the consent of the family involved.

20 If another service user reports abuse by the parent/carer

20.1 NVCFR staff will

- Reassure the service user that this will be taken seriously and dealt with.
- Tell them that the allegation will have to be discussed with other team members but the parent/carer will not be told who made the complaint if the service user prefers.
- Explain the procedure for dealing with complaints of this kind.
- Offer the service user support and encourage them not to discuss this with other service users.
- Discuss the issue with the Operations Manager or another manager
- Make a referral to MASH if necessary, in which case the parent/carer should be informed. It may be possible to encourage them to speak to Northamptonshire Children's Trust themselves. **This should only be done where such discussion and agreement seeking will not place the child at increased risk of significant harm.**
- Monitor the situation and ensure regular recording.

21 If a child is abusing other children or adults

21.1 Many children feel intense anger and helplessness about the abuse that they have witnessed or been subjected to, and frequently this is expressed in aggressive and destructive behaviour. Managing challenging behaviour positively is an intrinsic part of working with children in refuge and other domestic abuse services.

21.2 In these cases NVCFR staff will

- Inform the child and the parent/carer that this behaviour is abusive and unacceptable.
- In partnership with the parent/carer, work with the child to enable her/him to cope with emotions and to relate to other people more positively.
- Inform other agencies of risk issues as necessary e.g. schools, with the parent/carers consent (and child/young person's consent if appropriate) where possible
- Monitor the situation and keep factual records.
- Make a referral to MASH if necessary

21.3 In extreme cases (such as sexual assault) it will be necessary to make a referral to MASH or the police explaining the situation clearly. If the child is a refuge resident and there is a clear danger to other children or adults, the Operations Manager will make the decision about whether the child or the whole family should be required to move to alternative accommodation. If this is the decision made the child and the family will be given positive and caring support to move.

21.4 Support will be given to the alleged abused adult/child including referral to Police, Northamptonshire Children's Trust or Safeguarding Adults team as appropriate.

22 If a child is abusing her/his sibling/s

22.1 NVCFR staff will

- Inform the children and the parent/carer that this behaviour is abusive and unacceptable.
- Provide support for the children and the parent/carer and work with them to resolve this problem.
- Monitor the situation and keep factual records, making a referral to MASH if necessary.
- Take further action if necessary to safeguard the abused child.

22.2 In serious cases of sibling abuse there is a danger that the family will have to split up, so it is essential to start preventive work as soon as possible.

23 If it is alleged that a child has been abused by a service user (not a family member)

23.1 NVCFR staff and volunteers will ensure that:

- They discuss this with the Operations Manager as a matter of urgency.
- The situation will then be discussed separately with the service user and the parent/carer of the child
- A record will be kept of any comments made
- If the allegation is of a serious nature and staff have reason to believe that it is not a vexatious complaint, Northamptonshire Children's Trust and police should be informed.

23.2 If they are a refuge resident, it may be necessary to move the accused resident to temporary accommodation pending full investigation, which should take place without delay. If the allegations are not substantiated, NVCFR will try to ensure that the accused service user and their family or the family making the allegation are offered accommodation elsewhere within the organisation or with a different refuge group.

24 If the perpetrator of a client is in a relationship with another woman with children

24.1 If staff have any concerns about the safety of any children of a family with whom they are working within NVCFR services, and the service user discloses that their ex perpetrator is now in a relationship with another person with children, any relevant details of that new relationship which the service user holds, should be recorded. The service user should be informed that this information must be referred to the MASH to ensure that these children are safe. The service user may wish to inform MASH themselves, however the member of staff must ensure that this is done. The service user should be informed that they must keep this information confidential to ensure for their own safety and the safety of the children concerned. This should be done within Interagency Procedure time guidelines.

25 If it is alleged that a staff member or volunteer has abused a child

25.1 NVCFR staff and volunteers will

- Ensure that any such allegation is reported immediately to the Operations Manager and the CEO who will inform the Board of Trustees, who will decide what action is necessary.
- Keep a record of any allegations of child abuse made against any staff member or volunteer.
- The Board of Trustees will fully investigate any allegation of inappropriate behaviour by a staff member or volunteer.
- The Board of Trustees will refer the matter to the police or Northamptonshire Children's Trust if a criminal offence appears to have been committed or where other children may be at risk.

25.2 It may be necessary to suspend the staff member or volunteer while the investigation is carried out. This will be determined by the CEO in consultation with the Board of Trustees, unless they are the alleged abuser.

26 If a child is subject to a Child Protection Plan

26.1 When a family is first referred to an NVCFR service, they will be asked whether they have any involvement with Northamptonshire Children's Trust. If the answer is yes and the child is subject to a Child Protection Plan, this should be recorded. Upon acceptance to NVCFR services a copy of the child protection plan will be requested from the relevant local authority

26.2 If the family is resident in the refuge, the parent/carer should be encouraged to contact Northamptonshire Children's Trust to inform them that the family is living in the refuge. If they are unwilling to do this, they must be told that NVCFR will inform Northamptonshire Children's Trust on their behalf. **It is essential that the parent does not state the actual address of the refuge to Northamptonshire Children's Trust, but only gives the PO Box number.**

26.3 NVCFR should seek the service user's consent to liaise with the Children's Services team which previously dealt with the family. This will be useful in obtaining clear information, providing ongoing support and, if necessary, negotiating a support package for the family with Northamptonshire Children's Trust.

26.4 If the parent/carer has moved to a new area, it is likely that there will be a child protection conference. It is possible that the ex-partner will be invited to such a meeting (see Section 10, point 46, page 40 - Child Protection Conferences).

27. If a service user discloses historic abuse concerning themselves or a sibling as a child

27.1 If a service user discloses historic abuse to a member of staff, concerning themselves or a sibling as a child, and the perpetrator was not investigated, the service user must be warned that the staff member may not be able to keep this information confidential if there is any chance that other children may still be at risk from that perpetrator. Any information given should be recorded accurately with details of the perpetrator and any current access to children or young people they may have.

27.2 Whilst it is essential to support the service user in their disclosure, assist in resolving their own issues, and maintain the safety of the service user and their children, the staff member should inform the service user that the Operations Manager must be informed and they will need to assess if this information is passed to the Multi Agency Safeguarding Hub (MASH) for possible investigation.

28 Schedule 1 offenders, sex offenders and others who may present a risk to children

28.1 A Schedule 1 offender is someone who has been convicted of an offence against children.

28.2 If a Schedule 1 offender applies for a contact or residence order relating to a service user, NVCFR staff will ensure that family court professionals are made aware of this risk.

28.3 If staff become aware that a service user in refuge is a Schedule 1 offender, a full risk assessment will be carried out and the individual may be asked to leave refuge.

28.4 NVCFR staff have a responsibility to pass information to Northamptonshire Children's Trust when they become aware of potential child abusers having contact with children and staff will ensure that service users are aware of this responsibility. Northamptonshire Children's Trust have a responsibility to assess the risk to children where there is significant contact.

29 Children or young people who are suicidal, self-harming or abusing drugs or alcohol

29.1 For a high proportion of these children there are likely to be safeguarding issues, but this may not be immediately apparent.

29.2 If concerns emerge which lead to a suspicion of abuse or risk of further harm, a referral should be made to Northamptonshire Children's Trust for an assessment as a child in need and/or in need of protection.

30 Children with disabilities

30.1 Research shows that children with disabilities are at increased risk of abuse and neglect due to their increased vulnerability, particularly when the child has difficulty in communicating. Children with disabilities may also be taught to be compliant. Physical disabilities may mean intimate care is required and this need may have to be met by several adults thus increasing their vulnerability. Children with learning disabilities may not be able to recognise what are acceptable boundaries of behaviour by carers and other adults.

30.2 Staff working with children with disabilities should be aware of the above factors and be extra vigilant. These factors could lead to staff being accused of abuse. Staff working with children and/or young people with disabilities must be extra vigilant regarding their own practice and should take additional care regarding their own protection from accusations of abuse.

31 Children of asylum seekers or with uncertain immigration status

31.1 These children are vulnerable because of the uncertainty of their situation. They may be subjected to racism or bullying by members of the wider community.

31.2 These children are entitled to the same standards of service, personal care, healthcare, parenting, discipline etc as are applied to other children.

32 Children Involved in Child Sexual Exploitation (previously prostitution)

Northamptonshire Safeguarding Children Board have a toolkit for professionals who are dealing with Child Sexual Exploitation. It can be accessed here: [Child Sexual Exploitation \(proceduresonline.com\)](http://proceduresonline.com)

32.1 Government guidance "Safeguarding Children Involved in Child Sexual Exploitation" (DOH 2000) recommends that such children should be regarded as victims of child abuse and neglect. They are therefore children in need of care and will be in need of protection.

32.2 By its very nature these children are being sexually abused by adults and may well be experiencing other forms of abuse. They are vulnerable even when there is an apparent "life style" choice, as adults are exploiting them.

32.3 Children who are being abused through Child Sexual Exploitation are likely to have complex needs, and multi-agency planning and delivery of care is important.

32.4 Concerns involving the possibility of young people being abused through CSE should be referred to MASH.

33 Female genital mutilation

33.1 The practice of female genital mutilation (female circumcision, excision or infibulation) is an offence under the Prohibition of Female Circumcision Act 1985. It is therefore a serious safeguarding issue and a referral should be made to the police and/or Northamptonshire Children's Trust if the practice is suspected. If staff suspect that a child is being taken 'on holiday' or goes missing for this practice to take place, then referrals should be made to the police and/or Northamptonshire Children's Trust. A discussion regarding suspicions and for support should take place with the Operations Manager and a call to Northamptonshire Children's Trust may be made for advice. The Northamptonshire Safeguarding Children Board policies and procedures for FGM can be accessed here:

[Female Genital Mutilation \(proceduresonline.com\)](http://proceduresonline.com)

Section 5

Parental responsibility and safety

34 Parental responsibility and child-minding

34.1 Service Users are responsible at all times for their children's care in the refuge or other NVCFR premises (unless a specific arrangement has been made for one to one work or group work with a member of staff or other professional without the parent/carer present). This responsibility includes health, safety and behaviour. Service users should supervise their children in the communal areas or public areas of the premises and ensure that children are never left alone. This obligation is stated clearly in the refuge house rules section of the licence agreement and is displayed in other premises.

34.2 Childcare is offered for appointments and for respite for parents/carers. Children of any age should never be left in the refuge without proper supervision.

34.3 NVCFR **does not permit** older children or other service users in the refuge to act as babysitters.

35 Safe Environments

35.1 NVCFR has a comprehensive health and safety policy and procedures to which the following guidelines are complementary. Any potential hazards must be drawn to the attention of Line Managers and service users and will be dealt with as soon as possible.

35.2 Refuge play session provision and out of school provision is registered with Ofsted on their voluntary register and their guidelines are followed.

35.3 For play activities not on NVCFR premises the level and quality of staffing will conform to the regulation of the Children Act 2004 and to national standards.

- Each child has a risk assessment completed on admission. Decisions on staff:child ratios are made for each individual occasion using Ofsted guidelines and in consultation with Line Managers.
- When transport is arranged NVCFR will ensure the appropriate provision of safety seats and belts for children within the vehicle.
- Activities will be planned to take account of the age, ability and needs of the children attending and to ensure safety and supervision at all times.
- Staff will work with children and young people prior to a trip to ensure they understand the standard of behaviour is acceptable through the use of the behaviour policy.
- Written consent from parents/carers will be obtained before a trip, and if necessary, a meeting will be held for parents/ carers to give them a briefing about the outing.
- Staff will ensure that before a trip they have all necessary information about every child attending, including contact number for emergencies, allergies, health and other special needs etc. and parents/carers will also be given all relevant information about the trip/activity.
- When children are collected at the end of a trip/activity, they will only be handed over to known/named parent/carer unless alternative arrangements have been agreed beforehand.

35.4 Use of the internet by children and young people is **only** permitted on NVCFR premises if supervised by staff or their parent/carer. The Use of Computer Policy can be found in **Appendix 11**.

36 Disciplining children

36.1 The prime responsibility for disciplining children lies with parents/carers. As an agency providing support to families escaping domestic abuse, we recognise that we are well placed to provide information and advice to service users on positive management of children's behaviour.

36.2 Staff will advise service users to avoid disciplining other people's children.

36.3 NVCFR will work directly with families to promote non-abusive methods of resolving conflict and to encourage parents/carers to consider other forms of discipline. The booklet 'Responding Positively to Behaviour' will be used as a resource, and is available from the Children and Young People's Practitioner.

36.4 In situations where the parent/carer is reported to have disciplined a child using means that could appear to be abusive, staff will investigate and refer to the Anti Social Behaviour and Non Violence Policy where necessary.

Section 6 Protecting Staff and Volunteers

37 Direct work with children – protecting staff and volunteers

37.1 Where practical, two staff members will be present when face to face work with children is being carried out in the refuge and at the Centre.

37.2 Refuge playrooms are covered by CCTV

37.3 All volunteers and staff members who are left alone with children **MUST** have a current enhanced DBS clearance certificate.

37.4 There are practical steps that must be taken to reduce the risk of unfounded allegations of abuse against staff. The importance of record keeping cannot be overstated.

- Keep a written record of any injury that occurs to a child. Ensure that another staff member witnesses the record and that the Operations Manager is informed. The child's parent/carer must also be informed as soon as possible and must countersign the accident form.
- Where possible, children should be encouraged to take responsibility for their own personal care (such as going to the toilet). Personal care should not be provided if children are able to care for themselves and can only be provided with the full understanding and written consent of the parent/carer. In an emergency situation that requires this type of help, parents/carers should be informed as soon as reasonably possible. Staff will conduct themselves with discretion in these circumstances. Appropriate protective clothing will be worn (gloves and apron).
- When providing personal care staff **must not** carry any device with a camera facility, this includes both personal and work mobile phones and iPads with a camera facility. Where staff are issued with mobile devices with cameras, Designated Safe Guarding Officers may randomly request to check the device to ensure that there are no photographs, videos or other media stored on it.
- If allegations of child abuse are made against any staff member, the procedures set out in Section 4 point 25, page 26 of this policy will be followed.
- If a child touches a staff member or volunteer in a sexually inappropriate way, a record must be kept of the incident. The Operations Manager must be told immediately and another staff member and the Operations Manager must witness this record. The child's parent/carers should be informed as soon as reasonably practical unless to do so **would put the child, young person or others at increased risk of significant harm or an adult at risk of serious harm, or if it would not undermine the prevention, detection or prosecution of a serious crime including where sharing information might lead to interference with any potential investigation.** The Operations Manager will decide whether or not the incident should be referred to Children and Young People's Services. A second such incident involving the same child will automatically trigger a referral.
- The parent's/carer's written permission should be sought before any one to one work. A record must be kept of play activities, noting any issues of concern.

37.5 NVCFR has a comprehensive Professional Boundaries Policy detailing appropriate behaviour in relation to service users and professional boundaries. It makes clear that discriminatory, offensive or violent behaviour is unacceptable and that complaints will be acted upon. In summary:

- Staff and volunteers must not enter into a personal or sexual relationship, sexually harass or behave in a sexual way with a service user of whatever age

- Staff must not give personal gifts or loans, and can only receive small gifts (i.e. box of chocolates, bunch of flowers) **on behalf of the organisation. All gifts should be declared to the Administrator** who will ensure that a gift register is kept for auditing purposes.
- Service users, of any age, must not be taken to staff or volunteer's homes or be introduced to a staff or volunteers friends and family.

In addition the following guidelines apply to all staff and volunteers coming into contact with children and young people:

- All children and young people should be treated with respect
- Staff and volunteers should behave in ways that offer an example of the good conduct they wish others to follow
- A young person's right to personal privacy should be respected and young people should be encouraged to point out attitudes and behaviour they do not like
- Staff and volunteers should remember that someone else may misinterpret their actions no matter how well intentioned these might be
- Staff and volunteers should be aware that **any** physical contact with a child or young person may be misinterpreted
- Staff and volunteers should recognise that special caution is required when they are discussing sensitive issues with children or young people
- Staff and volunteers must challenge unacceptable behaviour and report all allegations/suspensions of abuse
- Staff and volunteers must not have inappropriate physical or verbal contact with children or young people
- Staff and volunteers must not allow themselves to be drawn into inappropriate attention seeking behaviour
- Staff and volunteers must never make suggestive or derogatory remarks or gestures in front of children or young people
- Staff and volunteers must not jump to conclusions about others and must always check facts
- Staff and volunteers must not exaggerate or trivialise child abuse issues
- Staff and volunteers must not show favouritism to any individual
- Staff and volunteers must not rely on their name or that of NVCFR to protect them
- Staff and volunteers must not believe 'it could never happen to me'
- Staff and volunteers must not take a chance or risk when common sense, or NVCFR's policies and practice suggest another more prudent approach
- Staff and volunteers are reminded that unless there are exceptional circumstances (and these should be discussed with and consent gained from the Operations Manager) it is not appropriate to spend excessive amounts of time alone with children, away from others.
- Consent should always be gained from the parent/carer for one to one work with children – if there are emergency or exceptional circumstances that prevent this, the Operations Manager must be fully informed and must give agreement.

38 Recruitment, selection, training and supervision of staff and volunteers

38.1 NVCFR has policies and procedures in place to ensure the safe recruitment of its staff and volunteers. These are as follows:

- All potential staff and volunteers (including Trustees) must complete an application form including a self disclosure regarding previous convictions

- At least 2 references are obtained before interview and essential qualifications are checked before making appointments
- Reasons for gaps or inconsistencies in employment are requested and interviewees are not appointed unless a satisfactory explanation is given
- A face to face interview with at least two people is held
- Where appropriate (i.e. if the post involves mainly working with children) a Children's Interview Panel will also take place
- Where appropriate a Service User Interview Panel will also take place
- DBS (formerly Criminal Record Bureau) checks (enhanced) are completed on offer of a post and every three years for all staff where the DBS criteria of 'regulated activity' applies, including Trustees and volunteers including relief or temporary staff. Identity is checked during this process by looking at a birth certificate, driving licence, passport and/or other document with a photograph
- No unsupervised access to children and young people will be undertaken until a satisfactory DBS check has been received and references reviewed and verified. Advice from senior Management team and The Board of Trustees will be sought if there is a criminal record and/or the offence does not relate to children or vulnerable adults before appointing
- A comprehensive induction that includes training in Safeguarding and Child Protection Policy and Procedures is given to all staff and volunteers
- All staff working with children are required to attend Northamptonshire Safeguarding Children's Board multi agency training at least every three years or sooner if major changes in procedures have taken place.
- Staff training needs in Safeguarding and Child Protection Procedures are reviewed in supervision and appraisals by Managers who have delegated day to day responsibility; particular attention will be paid to those working directly with children. Regular training updates are arranged 'in house.'

38.2 Working with children who have experienced domestic abuse can be very demanding and stressful, particularly when safeguarding issues are involved. NVCFR ensures that all staff and volunteers working with children receive adequate support and supervision.

39 The duty of care and public liability insurance

39.1 NVCFR recognises that anyone who works with children, whether as a paid worker or a volunteer, is under a legal duty of care which case law has interpreted as a duty to act as a careful parent would. Failure to do so, in addition to being unprofessional, could invalidate the organisation's public liability insurance.

39.2 NVCFR will ensure that adequate records are kept of any accidents or injury involving children. All staff and volunteers will receive guidance and training in Health and Safety legislation. Staff and volunteers with relevant responsibilities will undertake training in Paediatric First Aid, and regulations concerning the care of children.

Section 7 Confidentiality

40 Confidentiality and sharing of information

40.1 Section 11 of The Children Act 2004 requires that agencies carry out their functions taking into account the need to safeguard and promote the welfare of children and young people by ensuring that all practitioners understand when to share information if they believe that a child or young person may be in need, including those children suffering or at risk of significant harm.

40.2 NVCFR has information sharing protocols and procedures. Staff and volunteers will explain to children, young people and families at the outset, openly and honestly, what information about them or their family will, or could be shared. Staff will endeavour to share each individual set of information with parents before sharing with other professionals e.g. Referral to MASH, Early Help Assessment etc. Staff will explain how and why the information needs to be shared, and will seek the parent/carers agreement except **where to do so would put that child, young person or others at increased risk of significant harm or an adult at risk of serious harm, or if it would undermine the prevention, detection or prosecution of a serious crime including where seeking consent might lead to interference with any potential investigation.**

40.3 Staff must always consider the safety and welfare of a child or young person when making decisions on whether to share information about them. Where there is concern that the child may be suffering or is at risk of suffering significant harm, the child's safety and welfare **must be the overriding consideration.** Staff and volunteers should, where possible, respect the wishes of children, young people or families who do not consent to share confidential information – this is often a particular concern for families who have experienced domestic abuse and have ongoing concerns for their safety from an abuser. However, staff may still share information, if in their judgement on the facts of the case; there is sufficient need to override that lack of consent. Staff and volunteers should seek advice where they are in doubt from the Operations Manager, especially where their doubt relates to a concern about possible significant harm to a child or serious harm to others.

Volunteers must not share information about service users, children or young people involved with the organisation with outside or external agencies. Any requests for information should be shared with their Line Manager, the Operations Manager or the CEO who will decide on appropriate action.

40.4 Staff should ensure that the information they share is accurate and up-to-date, necessary for the purpose for which they are sharing it, shared only with those people who need to see it and shared securely. Staff should always record the reasons for their decision – whether it is to share information or not.

40.5 In all situations the overriding consideration as to whether to share information should be the safety and welfare of the child.

40.6 Obtaining parental, or where appropriate the child's consent, should be a first consideration when staff or volunteers first have contact with a child and/or their family. A lack of consent should never compromise the safety or welfare of a child.

40.7 Article 8 of the European Convention on Human Rights states that everyone has the right to respect for his private and family life, his home and his correspondence. Disclosure of such information might give rise to an issue under Article 8, but it is permissible for the prevention of crime or disorder, for the safeguarding of health or morals, or for the safeguarding of the rights and freedoms of others.

Consideration should be given to seeking the views of the parent/child as to why consent may be being withheld in line with their human rights. The disclosure of information to safeguard children could come under any of these headings, but disclosure should be justifiable, appropriate for the purpose and only to the extent needed to achieve that purpose. Disclosure of information should be discussed with a Manager. Written consent to share information should be sought wherever possible.

40.8 Sharing confidential information without consent in the public interest is normally justified:

- Where, in the interest of the child, reasonable concerns identify that their health or development will be impaired without the provision of services;
- Where there is evidence that the child is suffering or is at risk of suffering significant harm;
- Where there is reasonable cause to believe that a child may be suffering or at risk of suffering significant harm;
- To prevent significant harm arising to children and young people or serious harm to adults, including through the prevention, detection and prosecution of serious crime.

40.9 The key factor in deciding whether or not to disclose confidential information is proportionality and pressing need. Two questions should be considered:

- Is the proposed disclosure a proportionate response to the need to protect the welfare of the child?
- Is there a pressing need to disclose the information to protect the welfare of the child? (i.e. there is an urgent need to share information).

40.10 NVCFR will ensure staff and volunteers comply with the Data Protection Act 1998 requirement that personal information is obtained and processed fairly and lawfully, that it is accurate, relevant and not held longer than necessary, that it is kept securely and only disclosed in appropriate circumstances.

Section 8 Record keeping

41 Records and record-keeping

41.1 Immediately after an incident of abuse or neglect has been reported or witnessed, a staff member must fill out an incident form (see Appendix 11) stating what was said by both the child and the member of staff, and **recording facts** rather than opinions. The member of staff must collect as much information as possible about the situation – this may be from the child, parent/carer or other workers and should include date and time of the incident or disclosure, parties who were involved, what was said or done and by whom and any further actions. It is also helpful to record perception of emotional and physical presentation. The dates and times of these conversations must be recorded. Discussions between staff about their concerns should also be recorded. All reports should be signed and dated, so it is clear who has written the report and when it was written. A full version of the procedures for reporting an incident of this nature can be found in Appendix 5.

41.2 The Operations Manager and the Line Manager must be informed immediately. The Operations Manager will provide support in ensuring that the correct processes are followed in a timely, efficient and professional manner. The Line Manager will provide supervisory support for the member of staff.

41.2 If the situation is being monitored, regular updated reports must be filed on Paloma. These can be useful if there are any further allegations or concerns about abuse or neglect.

42 Security and storage of records

42.1 It is essential that personal records including any record of safeguarding concerns should not be accessed by unauthorised persons; they should **never be left unsecured**. The records will be kept in a locked filing cabinet with restricted access. In the refuge and other premises “locking up” procedures must be followed to protect confidential information.

42.2 Records will be retained in line with the organisation’s Record’s Retention Schedule

43 Access to records

43.1 Child protection records should only be accessed by staff who work directly with families, Managers or by Board of Trustee members directly involved in safeguarding decisions. Volunteers may report incidents where there are child safeguarding concerns but should not have access to the records. There is a procedure for accessing records in an emergency. Staff and volunteers should be made aware where there are ongoing safeguarding issues.

43.2 It is a general principle of data protection legislation that individuals have a right of access to information recorded about them. Access will only be refused if it could cause harm to a person or might prejudice the prevention or detection of crime. Service users have the right to request access to their files. NVCFR aims to comply with requests for access to personal information as quickly as possible, but will ensure that it is provided within 10 working days unless there is good reason for delay. In such cases, the reason for the delay will be explained in writing.

43.3 The parent/carer has a right to see all written reports unless this might endanger the safety of the child or a staff member or volunteer. Children have a right to see their own records, if they have

sufficient understanding to comprehend the contents and this information will not harm them. The decision will be made by Children and Young Peoples Practitioners and the Operations Manager in consultation with the parent if appropriate.

43.4 Staff and volunteers should also be aware that child protection records might be subpoenaed for use in court proceedings.

44 Computer safety

44.1 Staff members who may need to compile records or reports for safeguarding purposes will receive basic computer training focussing on safety and confidentiality.

44.2 NVCFR computers are password protected.

Section 9
Northamptonshire Children's Trust

45 Working with Northamptonshire Children's Trust

45.1 Northamptonshire Children's Trust along with the police have the lead responsibility in child protection. Northamptonshire Children's Trust have a wide range of duties and powers to provide care and protection for children and their families. NVCFR recognises that it is important to have a good working relationship with Northamptonshire Children's Trust to ensure that child protection issues are dealt with sensitively and effectively.

45.2 Professional training on a multi-agency approach to Domestic Abuse is delivered as part of the Northamptonshire Against Domestic Abuse and Sexual Abuse (NADASA) training group

45.3 NVCFR will ensure that staff and volunteers attend multi agency training sessions on safeguarding and child protection on an on-going basis.

Section 10

Child Protection Conferences

46 Child Protection Conferences

46.1 Northamptonshire Children's Trust leaflets are available on a wide range of Child Protection issues. These are targeted at parents and children and young people and copies will be held in each location to assist service users to understand the child protection process.

46.2 Multi-agency protection conferences are a key part of the Child Protection process.

46.3 Staff member/s involved in a Child Protection Conference will contact the family's social worker before the Child Protection conference takes place to announce their involvement with the family, to ask for copies of reports, and will inform them that they will request an invitation for staff who have relevant information about the child and/or carer(s).

46.4 If staff believe they have information that will be valuable to the conference, they should contact the conference chair in advance and ask to be invited. Information will if at all possible, unless timescales do not allow, be provided in a written report with sufficient copies for everyone attending the conference. When sending reports in for conferences, a current online Conference Report form should be used. Please ask the Operations Manager where this form can be found. Staff should remember that conferences allow for the inclusion of positive aspects of parental care as well as concerns.

46.5 The issue of domestic abuse and keeping the location of the refuge confidential must be discussed with the social worker before the Child Protection conference. It is crucial to insist that, if the service user wants, they should be seen separately from their partner or ex-partner so that they can speak without fear of retribution. The service user should also be given sufficient time to consider any written report prior to the conference and it should be made clear if this will need to include time to engage translators or to accommodate learning needs.

46.6 In cases where there is an apparent conflict of interest between the parent and the child, it may be appropriate for two NVCFR staff members to attend the Child Protection conference: one to represent the interests of the child, and the other to provide support for the parent/carer. It is essential that these arrangements should be explained clearly to Northamptonshire Children's Trust, to the parent and to the child beforehand.

46.7 The role of staff at a Child Protection conference is primarily to give an accurate picture of NVCFR involvement with the family and present any concerns that might be held regarding the safety of the child. Secondly, staff may have an advocacy role to support the parent or child in expressing themselves clearly and effectively to conference. Staff must be aware that having listened to all reports and comments, each conference member will be required to give their professional opinion about whether the child is at continuing risk of significant harm.

46.8 If a child is at risk of or a continuing risk of harm and an outline Protection Plan is drawn up, the staff member may be required to take part in the Core Group who implement any actions.

46.9 Staff who are required, through their roles, to attend Child Protection Conference will receive training in Safeguarding and Child Protection Procedures that will include information regarding Child Protection Conference. Staff attending Child Protection Conference will receive support from their Line Manager through the Supervision process. Staff attending Child Protection Conference should ensure that their Line Manager is fully aware of their involvement.

Section 11

Police involvement

47 Involving the police

47.1 The police, along with Northamptonshire Children's Trust, have a lead role and statutory responsibility in child protection. They also have a general responsibility to protect the public and to prevent crime.

47.2 The police have emergency powers to remove a child from a dangerous situation, if there is an immediate threat to the child (such as abduction or threats occurring during a contact visit).

47.3 It will also be appropriate to contact the police directly in circumstances where an offence is thought to have been committed against a child and urgent investigation is needed to prevent the removal of evidence. This will be done in consultation with the Operations Manager.

Section 12 Complaints

48 Complaints

48.1 NVCFR has a comprehensive Complaints Policy and procedure detailing the aim and purpose of the policy, how to make a complaint and how NVCFR responds to complaints.

48.2 Anyone can make a complaint including any service user, children and young people, volunteers, paid staff or another person from outside of NVCFR.

48.3 Complaints are treated seriously and will be dealt with promptly, politely and with respect as well as within set timescales. NVCFR is committed to learning from mistakes and using them to improve our services. Line Managers will ensure that actions arising from complaints will be addressed at appropriate levels within the organisation e.g. team meetings, trustee meetings.

48.4 The Complaints Policy is available to all service users on request and a summary of 'how to complain' is displayed at all premises and discussed with all new service users.

48.5 Complaints are fully recorded including decisions made and actions taken and filed in a specific Complaints/Incidents File accessible to Trustee Board members and funders / inspectors or other appropriate agencies on request.

Section 13 Whistle Blowing

49 Whistle Blowing

49.1 NVCFR has a Whistle Blowing Policy that, in summary, affirms the organisation's belief that staff and volunteers have the right and responsibility to raise any matters of concern regarding poor practice at work. The policy stresses that staff and volunteers are responsible for safeguarding children and promoting their welfare and this must come above and before feelings of loyalty to the organisation or colleagues.

49.2 The Whistle Blowing policy encourages staff and volunteers to take action if they have a reasonable suspicion of serious poor practice at work or have been informed of serious poor practice from service users. The policy reassures them that they will be both protected and supported if they 'whistle blow', and that there will be no reprisals.

49.3 Staff and volunteers can 'whistle blow' through their Line Manager or another Manager, or to the trustees or where the staff member or volunteer feels that the normal line management route may be, for whatever reason too difficult, to Ofsted or to Northamptonshire Children's Trust for concerns regarding poor practice relating to children and young people's services.

49.4 NVCFR's Whistle Blowing Procedures operate in accordance with the Public Interest Disclosure Act and Department of Health Guidance 'No Secrets'.

Section 14

Appendices

Appendix 1	Staff Guidelines on recognising abuse
Appendix 2	Local links
Appendix 3	Early Help Procedures
Appendix 4	Early Help process overview
Appendix 5	Reporting Procedures
Appendix 6	Body map blank
Appendix 7	Body Map with signs
Appendix 8	Sarah's Law, Clare's Law
Appendix 9	UNICEF Rights of the Child
Appendix 10	Child and Young People's use of Computer policy
Appendix 11	NVCFR Incident Form
Appendix 12	MASH referral process
Appendix 13	Mapping