

## Safeguarding and Child Protection Policy

The purpose of this policy is to outline the duty and responsibility of staff, volunteers and trustees working on behalf of Tenovus Cancer Care in relation to child protection procedures.

The key objectives of this policy are:

- To explain the responsibilities Tenovus Cancer Care and its staff, volunteers and trustees have in respect of child protection.
- To provide staff with an overview of child protection.
- To provide a clear procedure that will be implemented where child protection issues arise.

### Context

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

- Children Act 1989
- United Convention of the Rights of the Child 1991
- Data Protection Act 1998
- Sexual Offences Act 2003
- Children Act 2004
- Protection of Freedoms Act 2012
- Relevant government guidance on safeguarding children
- All Wales Child Protection Policy

For the purpose of this document a child is defined as a person under the age of 18 (The Children's Act 1989). All children have the right to protection from all forms of abuse including exploitation, neglect, physical and mental abuse regardless of their age, gender, disability, culture, language, racial origin, religious beliefs or sexual orientation.

The Children's Act 1989 sets out the legislative framework for safeguarding and promoting the welfare of children and the Children's Act 2004 underpins the Every Child Matters, Change for Children programme.

## **The role of staff, volunteers and trustees**

All staff, volunteers and trustees working on behalf of Tenovus Cancer Care have a duty to promote the welfare and safety of children.

Staff, volunteers and trustees may receive disclosures of child abuse and observe children who are at risk. This policy will mean that we can all make informed and confident responses to specific child protection issues.

## **What is Child Abuse?**

Abuse and neglect are forms of maltreatment of a child. 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 (Working Together to Safeguard Children 2006)

The 'Working Together to Safeguard Children' guidance published by the Government defines four categories of abuse as follows.

**Physical Abuse** - This may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

**Emotional Abuse** - This is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless, unloved or inadequate. It may involve bullying, causing children to feel frightened or in danger.

**Sexual Abuse** - This type of abuse involves forcing or enticing a child to take part in sexual activities, including prostitution whether or not the child is aware of what is happening. Examples of physical contact include penetrative or non-penetrative acts. It may include non-contact activities involving children in looking at or be involved in sexual online images and or encouraging children to behave in sexually inappropriate ways.

**Neglect** - This is the persistent failure to meet a child's basic physical and or psychological

needs, likely to result in the serious impairment to the child's health and development. It can include failing to provide adequate food, clothing and shelter, adequate supervision or failing to provide medical help when needed.

### **What should do if I'm worried about a child?**

It is important that children are protected from abuse. All complaints, allegations or suspicions must be taken seriously and if you're worried about anything then you should report your concerns to the Child Protection Officer straight away.

This procedure must be followed whenever an allegation of abuse is made or when there is a suspicion that a vulnerable child has been abused.

Promises of confidentiality must not be given as this may conflict with the need to ensure the safety and welfare of the individual.

A full record shall be made as soon as possible of the nature of the allegation and any other relevant information.

This must include information in relation to the date, the time, the place where the alleged abuse happened, your name and the names of others present, the name of the complainant and, where different, the name of the child who has allegedly been abused, the nature of the alleged abuse, a description of any injuries observed, the account which has been given of the allegation.

Promises of confidentiality should not be given as this may conflict with the need to ensure the safety and welfare of the child.

If the complainant is the child, questions should be kept to the minimum necessary to understand what is being alleged and leading questions should be avoided. The use of leading questions can cause problems for the subsequent investigation and any court proceedings.

### **What should I do if a child tells me they're being abused?**

- Stay calm and listen carefully to what is said.
- Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others – do not promise to keep secrets.
- Tell the child that the matter will only be disclosed to those who need to know about

it.

- Allow the child to continue at her/his own pace.
- Ask questions for clarification only, and at all times avoid asking questions that suggest a particular answer.
- Reassure the child that they have done the right thing in telling you.
- Tell them what you will do next, and with whom the information will be shared.
- Record in writing what was said, using the child's own words as soon as possible – note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.

It is important to remember that the person who first encounters a case of alleged abuse is not responsible for deciding whether abuse has occurred. That is a task for the professional child protection agencies, following a referral from the designated child protection officer.

### **Confidentiality**

Child protection raises issues of confidentiality which should be clearly understood by all. Staff, volunteers and trustees have a professional responsibility to share relevant information about the protection of children with other professionals, particularly investigative agencies.

Clear boundaries of confidentiality will be communicated to all. All personal information regarding a child will be kept confidential except when; it is suspected that a child under 18 years is the victim of abuse.

If a child confides in you and requests that the information is kept secret, it is important that you explain sensitively that you have a responsibility to refer cases of alleged abuse to the appropriate agencies for the child's own sake. Reassure them however that the matter will only be disclosed to people who need to know about it.

Where possible, consent should be obtained from the child before sharing personal information with third parties. In some circumstances obtaining consent may be neither possible nor desirable as the safety and welfare of the child is the priority.

Where a disclosure has been made, you should let the child know the position regarding their role and what action they will have to take as a result. You should assure the child that you will keep them informed of any action to be taken and why. The child's involvement in the process of sharing information should be fully considered and their wishes and feelings taken into account.

Child Protection issues are highly sensitive and staff who receive information about children or their families in the course of their work should share that information only within appropriate professional contexts. All child protection records should be kept secure.

### **Role of designated child protection officer**

The Child Protection Officer shall telephone and report the matter to the appropriate local social services duty social worker. A written record of the date and time of the report shall be made and the report must include the name and position of the person to whom the matter is reported. The telephone report must be confirmed in writing to the relevant local authority adult social services department within 24 hours.

The role of the Child Protection Officer is to deal with all instances involving child protection that arises within Tenovus Cancer Care. They will respond to all child protection concerns and enquiries.

The designated Child Protection Officer for Tenovus Cancer Care is Julie Rees (to be reviewed annually). Should you have any suspicions or concerns relating to Child Protection, please contact Julie on 029 2076 8879.

### **Role of line managers**

The role of the line manager is to support the member of staff, trustee or volunteer involved with the incident and to ensure the correct procedures are followed.

The line manager could if agreed with the staff member dealing with the incident, make contact with the designated Child Protection Officer in the first instance.

The line manager should ensure that all staff within their team are familiar with our current Child Protection procedures and ensure that all staff undertake Child Protection training, where appropriate.

### **Use of photographic/video equipment**

Written consent to take and use images of children should be obtained prior to the taking of photographs and or video footage. Parents/carers should be made aware of when, where and how the images may be used to give their informed consent.

### **Training**

Training will be provided, as appropriate, to ensure that staff, are aware of these procedures. Specialist training will be provided for the member of staff with child protection responsibilities.

### **Complaints procedure**

Tenovus Cancer Care have a complaints procedure available to all staff, volunteers and trustees.

### **Recruitment procedure**

We operate procedures that take account of the need to safeguard and promote the welfare of children and young people, including arrangements for appropriate checks on new staff, volunteers and trustees where applicable.

## Safeguarding Vulnerable Children Policy

*Initial cause for concern form which must be discussed with the Child Protection Officer within 24 – 48 hours.*

Date

Time

Name of individual cause for concern is about

Age (if known)

Address (if known)

Describe your concern and action taken

Observations to support cause for concern

Description and location of any visible marks, bruising etc.

Name of alleged abuser, relationship with child (if known)

Name of person completing form:

Signature:

Date:

Name of Line Manager:

Signature:

Date:

Name of Safeguarding lead or Senior Manager

Signature:

Date: