

Safeguarding and Child Protection Policy Statement

The Deafness Resource Centre exists to empower and support children, young people and adults who are deaf or have a hearing loss. The organisation offers a range of services to meet the needs of its client group and is committed to ensuring that children and young people accessing services can do so in a safe and protected environment.

The DRC will be rigorous and vigilant in protecting children and young people accessing its service, from abuse, bullying, harassment, neglect and intimidation.

1. Scope of the policy

The purpose of this policy statement is:

- to protect children and young people who receive DRC services from harm. This includes the children of adults who use our services
- to provide staff and volunteers, as well as children and young people and their families, with the overarching principles that guide our approach to child protection. This policy applies to anyone working on behalf of the DRC including senior managers and the board of trustees, paid staff, volunteers, sessional workers, freelance workers and students.

2. Legal Framework

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children in England.

The Children Act 1989 provides the legislative framework for child protection in England. Key principles established by the Act include:

- the paramount nature of the child's welfare
- the expectations and requirements around duties of care to children.

This is strengthened by the Children Act 2004, which encourages partnerships between agencies and creates more accountability, by:

- placing a duty on local authorities to appoint children's services members who are ultimately accountable for the delivery of services
- placing a duty on local authorities and their partners to co-operate in safeguarding and promoting the wellbeing of children and young people.

Both of these acts are amended by the Children and Social Work Act 2017, which received Royal Assent on 27 April 2017.

Working together to safeguard children **(Department for Education, 2018)**

3. Information sharing

The DRC will actively work in partnership with local safeguarding partners and boards to deliver our safeguarding commitments. This includes sharing appropriate and relevant information and participating in any investigations and reviews.

4. Policy Statement

- The DRC believes everyone has a responsibility to promote the welfare of all children and young people, to keep them safe and to practise in a way that protects them.
- The DRC will give equal priority to keeping all children and young people safe regardless of their age, disability, gender, race, religion or belief, sex, or sexual orientation.
- The DRC believes that we all have a responsibility to keep all children and young people safe. A child being d/Deaf or needing additional support should never stop someone acting on child protection concerns.
- The DRC recognises that children and young people who are d/Deaf are at an increased risk of being abused compared with their non-disabled peers and are also less likely to receive the protection and support they need when they have been abused.
- The DRC will ensure that children and young people accessing our services are fully aware of this policy and supporting procedures and are supported to recognise and report any concerns they may have.

5. DRC Commitments

The DRC will:

- Listen to children and respect them
- Appoint a nominated child protection lead and a member of the trustee board who takes lead responsibility for safeguarding at the highest level in the organisation
- Write detailed safeguarding and child protection procedures
- Make sure all staff and volunteers understand and follow the safeguarding and child protection procedures
- Ensure that all staff, volunteers and Trustees are fully trained and up dated on aspects of Child Safeguarding appropriate to their role.
- Ensure children, young people and their families know about the organisation's safeguarding and child protection policies and what to do if they have a concern
- Build a safeguarding culture where staff, volunteers and children know how they are expected to behave and feel comfortable about sharing concerns.

6. Supporting Documents

- Disclosure & Responding to Children at Possible Risk of Abuse Procedure
- Anti- Bullying Policy
- Recruitment Policy
- Behavioural Code for Staff Working with Children
- Managing concerns about or allegations made against staff or volunteers
- Allegations of Abuse by Children Procedure
- Children & Young People's Activities and Events Procedure
- Photography & Filming Policy
- E-Safety Policy
- Whistleblowing Policy
- Complaints Procedure

7. Contact Details

Nominated Child Protection Lead:

Name: Helen Fitzgerald Phone: 01744 23887 Email:
helen.fitzgerald@deafnessresourcecentre.org

Deputy Child Protection Lead:

Name: Tanya McGibbon Phone: 01744 23887 Email:
tanya.mcgibbon@deafnessresourcecentre.org

Trustee Child Protection Lead:

Name: Janet Yates Phone: Email:

NSPCC Helpline 0808 800 5000

We are committed to reviewing our policy and good practice annually. This policy was last reviewed on: March 23..... (date)

Signed:

A handwritten signature in black ink, appearing to be 'Helen Fitzgerald', written over a light blue horizontal line.

Date: 19th April 22

Procedure: Recognising & Reporting Child Abuse

This procedure applies to any member of staff, sub-contractor or volunteer who may be concerned about the safety and protection of a child.

1. Purpose and aim of this procedure

We aim to ensure those children who attend the Deafness Resource Centre (DRC), and any other children who may come to the attention of the DRC, receive the protection and support they need if they are at risk of abuse.

This procedure provides clear direction to staff and volunteers at the DRC if they have concerns that a child is in need of protection.

2. What is child abuse?

Child abuse happens when a person harms a child. It can be physical, sexual or emotional, but can also involve neglect. Children may be abused by:

- Family members
- Friends
- People working or volunteering in organisational or community settings
- People they know
- Strangers.

3. General signs of abuse

Children experiencing abuse often experience more than one type of abuse over a period of time. Children who experience abuse may be afraid to tell anybody about the abuse. They may struggle with feelings of guilt, shame or confusion – particularly if the abuser is a parent, caregiver or other close family member or friend.

4. Definitions and signs of child abuse

Many of the signs that a child is being abused are the same regardless of the type of abuse. Anyone working with children or young people needs to be able to recognise the signs. These include a child:

- being afraid of particular places or making excuses to avoid particular people
- knowing about or being involved in 'adult issues' which are inappropriate for their age or stage of development, for example alcohol, drugs and/or sexual behaviour
- having angry outbursts or behaving aggressively towards others
- becoming withdrawn or appearing anxious, clingy or depressed
- self-harming or having thoughts about suicide
- showing changes in eating habits or developing eating disorders
- regularly experiencing nightmares or sleep problems
- regularly wetting the bed or soiling their clothes
- running away or regularly going missing from home or care
- not receiving adequate medical attention after injuries.

These signs do not necessarily mean that a child is being abused. There may well be other reasons for changes in a child's behaviour such as a bereavement or relationship problems between parents or

carers. If you have any concerns about a child's wellbeing, you should report them following the organisation's safeguarding and child protection procedures.

5. Recognising different types of abuse

Physical abuse

What is physical abuse?

Physical abuse happens when a child is deliberately hurt, causing physical harm. It can involve hitting, kicking, shaking, throwing, poisoning, burning or suffocating. It's also physical abuse if a parent or carer makes up or causes the symptoms of illness in children. For example, they may give them medicine they don't need, making them unwell. This is known as fabricated or induced illness (FII).

Spotting the signs of physical abuse

All children have trips, falls and accidents which may cause cuts, bumps and bruises. These injuries tend to affect bony areas of their body such as elbows, knees and shins and are not usually a cause for concern. Injuries that are more likely to indicate physical abuse include:

Bruising

- bruises on babies who are not yet crawling or walking
- bruises on the cheeks, ears, palms, arms and feet
- bruises on the back, buttocks, tummy, hips and backs of legs
- multiple bruises in clusters, usually on the upper arms or outer thighs
- bruising which looks like it has been caused by fingers, a hand or an object, like a belt or shoe
- large oval-shaped bite marks.

Burns or scalds

- any burns which have a clear shape of an object, for example cigarette burns
- burns to the backs of hands, feet, legs, genitals or buttocks.

Other signs of physical abuse include multiple injuries (such as bruising, fractures) inflicted at different times. If a child is frequently injured, and if the bruises or injuries are unexplained or the explanation doesn't match the injury, this should be investigated. It's also concerning if there is a delay in seeking medical help for a child who has been injured.

Neglect

What is neglect?

Neglect is not meeting a child's basic physical and/or psychological needs. This can result in serious damage to their health and development.

Neglect may involve a parent or carer not:

- providing adequate food, clothing or shelter
- supervising a child or keeping them safe from harm or danger (including leaving them with unsuitable carers)
- making sure the child receives appropriate health and/or dental care
- making sure the child receives a suitable education
- meeting the child's basic emotional needs – this is known as emotional neglect.

Neglect is the most common type of child abuse. It often happens at the same time as other types of abuse

Neglect can be difficult to identify. Isolated signs may not mean that a child is suffering neglect, but multiple and persistent signs over time could indicate a serious problem.

Some of these signs include:

- children who appear hungry - they may not have lunch money or even try to steal food
- children who appear dirty or smelly
- children whose clothes are inadequate for the weather conditions
- children who are left alone or unsupervised for long periods or at a young age
- children who have untreated injuries, health or dental problems
- children with poor language, communication or social skills for their stage of development
- children who live in an unsuitable home environment.

Sexual abuse

What is sexual abuse?

Sexual abuse is forcing or enticing a child to take part in sexual activities. It doesn't necessarily involve violence and the child may not be aware that what is happening is abuse. Child sexual abuse can involve contact abuse and non-contact abuse. Contact abuse happens when the abuser makes physical contact with the child.

It includes:

- sexual touching of any part of the body whether the child is wearing clothes or not
- rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
- forcing or encouraging a child to take part in sexual activity
- making a child take their clothes off or touch someone else's genitals.

Non-contact abuse involves non-touching activities. It can happen online or in person and includes:

- encouraging or forcing a child to watch or hear sexual acts
- making a child masturbate while others watch
- not taking proper measures to prevent a child being exposed to sexual activities by others
- showing pornography to a child
- making, viewing or distributing child abuse images
- allowing someone else to make, view or distribute child abuse images.
- meeting a child following online sexual grooming with the intent of abusing them.

Online sexual abuse includes:

- persuading or forcing a child to send or post sexually explicit images of themselves, this is sometimes referred to as sexting
- persuading or forcing a child to take part in sexual activities via a webcam or smartphone
- having sexual conversations with a child by text or online.

Abusers may threaten to send sexually explicit images, video or copies of sexual conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the abuse has stopped. Abusers will often try to build an emotional connection with a child in order to gain their trust for the purposes of sexual abuse. This is known as grooming.

Spotting the signs of sexual abuse

There may be physical signs that a child has suffered sexual abuse.

These include:

- anal or vaginal soreness or itching
- bruising or bleeding near the genital area
- discomfort when walking or sitting down
- an unusual discharge • sexually transmitted infections (STI)
- pregnancy.

Changes in the child's mood or behaviour may also cause concern. They may want to avoid spending time with specific people. In particular, the child may show sexual behaviour that is inappropriate for their age.

For example:

- they could use sexual language or know things about sex that you wouldn't expect them to
- they might become sexually active or pregnant at a young age.

Child sexual exploitation

What is child sexual exploitation?

Child sexual exploitation (CSE) is a type of sexual abuse. Young people may be coerced or groomed into exploitative situations and relationships. They may be given things such as gifts, money, drugs, alcohol, status or affection in exchange for taking part in sexual activities. Young people may be tricked into believing they're in a loving, consensual relationship. They often trust their abuser and don't understand that they're being abused. They may depend on their abuser or be too scared to tell anyone what's happening. They might be invited to parties and given drugs and alcohol before being sexually exploited. They can also be groomed and exploited online. Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs. Child sexual exploitation can involve violent, humiliating and degrading sexual assaults and involve multiple perpetrators.

Spotting the signs of child sexual exploitation

Sexual exploitation can be very difficult to identify. Young people who are being sexually exploited may:

- go missing from home, care or education
- be involved in abusive relationships
- hang out with groups of older people
- be involved in gangs or anti-social groups
- have older boyfriends or girlfriends
- spend time at places of concern, such as hotels or known brothels
- be involved in petty crime such as shoplifting
- have access to drugs and alcohol
- have new things such as clothes and mobile phones, which they aren't able to easily explain

Harmful sexual behaviour

What is harmful sexual behaviour?

Harmful sexual behaviour (HSB) is developmentally inappropriate sexual behaviour which is displayed by children and young people and which may be harmful or abusive. It may also be referred to as sexually harmful behaviour or sexualised behaviour.

HSB encompasses a range of behaviour, which can be displayed towards younger children, peers, older children or adults. It is harmful to the children and young people who display it, as well as the people it is directed towards.

HSB can include:

- using sexually explicit words and phrases
- inappropriate touching
- using sexual violence or threats
- sexual activity with other children or adults.

Sexual behaviour between children is considered harmful if one of the children is much older – particularly if there is more than two years' difference in age or if one of the children is pre-pubescent and the other isn't. However, a younger child can abuse an older child, particularly if they have power over them – for example, if the older child is disabled

Spotting the signs of harmful sexual behaviour

It's normal for children to show signs of sexual behaviour at each stage in their development. Children also develop at different rates and some may be slightly more or less advanced than other children in their age group. Behaviours which might be concerning depend on the child's age and the situation.

Emotional abuse

What is emotional abuse?

Emotional abuse involves:

- humiliating, putting down or regularly criticising a child
- shouting at or threatening a child or calling them names
- mocking a child or making them perform degrading acts
- constantly blaming or scapegoating a child for things which are not their fault
- trying to control a child's life and not recognising their individuality
- not allowing a child to have friends or develop socially
- pushing a child too hard or not recognising their limitations
- manipulating a child
- exposing a child to distressing events or interactions
- persistently ignoring a child
- being cold and emotionally unavailable during interactions with a child
- not being positive or encouraging to a child or praising their achievements and successes.

Spotting the signs of emotional abuse

There aren't usually any obvious physical signs of emotional abuse but you may spot changes in a child's actions or emotions. Some children are naturally quiet and self-contained whilst others are more open and affectionate. Mood swings and challenging behaviour are also a normal part of growing up for teenagers and children going through puberty. Be alert to behaviours which appear to be out of character for the individual child or are particularly unusual for their stage of development.

Babies and pre-school children who are being emotionally abused may:

- be overly-affectionate towards strangers or people they haven't known for very long
- not appear to have a close relationship with their parent, for example when being taken to or collected from nursery
- lack confidence or become wary or anxious
- be unable to play
- be aggressive or nasty towards other children and animals.

Older children may:

- use language, act in a way or know about things that you wouldn't expect for their age
- struggle to control strong emotions or have extreme outbursts
- seem isolated from their parents
- lack social skills or have few, if any, friends
- fear making mistakes
- fear their parent being approached regarding their behaviour
- self-harm.

Domestic abuse

What is domestic abuse?

Domestic abuse is any type of controlling, coercive, threatening behaviour, violence or abuse between people who are, or who have been in a relationship, regardless of gender or sexuality. It can include physical, sexual, psychological, emotional or financial abuse. Exposure to domestic abuse is child abuse. Children can be directly involved in incidents of domestic abuse or they may be harmed by seeing or hearing abuse happening. Children in homes where there is domestic abuse are also at risk of other types of abuse or neglect.

Spotting the signs of domestic abuse

It can be difficult to tell if domestic abuse is happening, because abusers can act very differently when other people are around.

Children who witness domestic abuse may:

- become aggressive
- display anti-social behaviour
- suffer from depression or anxiety
- not do as well at school - due to difficulties at home or disruption of moving to and from refuges.

Bullying and cyberbullying

What are bullying and cyberbullying?

Bullying is when individuals or groups seek to harm, intimidate or coerce someone who is perceived to be vulnerable.

Bullying includes:

- verbal abuse, such as name calling
- non-verbal abuse, such as hand signs or glaring
- emotional abuse, such as threatening, intimidating or humiliating someone
- exclusion, such as ignoring or isolating someone
- undermining, by constant criticism or spreading rumours
- controlling or manipulating someone
- racial, sexual or homophobic bullying
- physical assaults, such as hitting and pushing
- making silent, hoax or abusive calls.

Bullying can happen anywhere – at school, at home or online. When bullying happens online it can involve social networks, games and mobile devices. Online bullying can also be known as cyberbullying.

Cyberbullying includes:

- sending threatening or abusive text messages
- creating and sharing embarrassing images or videos

- 'trolling' - sending menacing or upsetting messages on social networks, chat rooms or online games
- excluding children from online games, activities or friendship groups
- setting up hate sites or groups about a particular child
- encouraging young people to self-harm
- voting for or against someone in an abusive poll
- creating fake accounts, hijacking or stealing online identities to embarrass a young person or cause trouble using their name.

Spotting the signs of bullying and cyberbullying

It can be hard to know whether or not a child is being bullied. They might not tell anyone because they're scared the bullying will get worse. They might also think that the bullying is their fault. No one sign indicates for certain that a child's being bullied, but you should look out for:

- belongings getting 'lost' or damaged
- physical injuries such as unexplained bruises
- being afraid to go to school, being mysteriously 'ill' each morning, or skipping school
- not doing as well at school
- asking for, or stealing, money (to give to a bully)
- being nervous, losing confidence or becoming distressed and withdrawn
- problems with eating or sleeping
- bullying others.

Child trafficking

What is child trafficking?

Child trafficking is child abuse. It involves recruiting and moving children who are then exploited. Many children are trafficked into the UK from overseas, but children can also be trafficked from one part of the UK to another.

Children may be trafficked for:

- child sexual exploitation
- benefit fraud
- forced marriage
- domestic servitude such as cleaning, childcare, cooking
- forced labour in factories or agriculture
- criminal exploitation such as cannabis cultivation, pickpocketing, begging, transporting, drugs, selling pirated DVDs and bag theft.

Children who are trafficked experience many forms of abuse and neglect. Physical, sexual and emotional abuse is often used to control them and they're also likely to suffer physical and emotional neglect. Child trafficking can require a network of organised criminals who recruit, transport and exploit children and young people. Some people in the network might not be directly involved in trafficking a child but play a part in other ways, such as falsifying documents, bribery, owning or renting premises or money laundering. Child trafficking can also be organised by individuals and the children's own families. Traffickers trick, force or persuade children to leave their homes. They use grooming techniques to gain the trust of a child, family or community.

Although these are methods used by traffickers, coercion, violence or threats don't need to be proven cases of child trafficking - a child cannot legally consent to their exploitation so child trafficking only requires evidence of movement and exploitation.

Modern slavery is another term which may be used in relation to child trafficking. Modern slavery encompasses slavery, servitude, forced and compulsory labour and human trafficking. The Modern

Slavery Act passed in 2015 in England and Wales categorises offences of slavery, servitude, forced or compulsory labour and human trafficking.

Spotting the signs of child trafficking

Signs that a child has been trafficked may not be obvious but you might notice unusual behaviour or events.

Children who have been trafficked may:

- have to do excessive housework chores
- rarely leave the house and have limited freedom of movement
- not have any documents (or have falsified documents)
- give a prepared story which is very similar to stories given by other children
- be unable or reluctant to give details of accommodation or personal details
- not be registered with a school or a GP practice
- have a history with missing links and unexplained moves
- be cared for by adults who are not their parents or carers
- not have a good quality relationship with their adult carers
- be one among a number of unrelated children found at one address
- receive unexplained or unidentified phone calls whilst in a care placement or temporary accommodation.

There are also signs that an adult is involved in child trafficking, such as:

- making multiple visa applications for different children
- acting as a guarantor for multiple visa applications for children
- having previously acted as the guarantor on visa applications for visitors who have not left the UK when the visa expired.

Female genital mutilation

What is female genital mutilation?

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. The age at which FGM is carried out varies. It may be carried out when a child is new-born, during childhood or adolescence, just before marriage or during pregnancy.

FGM is child abuse. There are no medical reasons to carry out FGM. It's dangerous and a criminal offence.

Spotting the signs of female genital mutilation

A child at risk of FGM may not know what's going to happen. But they might talk about or you may become aware of:

- a long holiday abroad or going 'home' to visit family
- relative or cutter visiting from abroad
- a special occasion or ceremony to 'become a woman' or get ready for marriage
- a female relative being cut – a sister, cousin or an older female relative such as a mother or aunt
- missing school repeatedly or running away from home.

A child who has had FGM may:

- have difficulty walking, standing or sitting
- spend longer in the bathroom or toilet
- appear withdrawn, anxious or depressed
- have unusual behaviour after an absence from school or college

- be particularly reluctant to undergo normal medical examinations
- ask for help, but may not be explicit about the problem due to embarrassment or fear.

Reporting requirements Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under-18s to the police (Home Office, 2016).

6. Disclosure

Disclosure is the process by which children and young people start to share their experiences of abuse with others. This can take place over a long period of time – it is a journey, not one act or action.

Children may disclose directly or indirectly and sometimes they may start sharing details of abuse before they are ready to put their thoughts and feelings in order.

Not all disclosures will lead to a formal report of abuse or a case being made or a case being taken to court, but all disclosures should be taken seriously.

It takes extraordinary courage for a child to go through the journey of disclosing abuse.

It's vital that anyone who works with children and young people undertaking this journey is able to provide them with the support they need.

Barriers to disclosure

Some children and young people are reluctant to seek help because they feel they don't have anyone to turn to for support.

They may have sought help in the past and had a negative experience, which makes them unlikely to do so again.

They may also:

- feel that they will not be taken seriously
- feel too embarrassed to talk to an adult about a private or personal problem
- worry about confidentiality
- lack trust in the people around them (including parents) and in the services provided to help them
- fear the consequences of asking for help
- worry they will be causing trouble and making the situation worse
- find formal procedures overwhelming

Helping children disclose abuse

It's important to create an environment where children and young people are comfortable about speaking out if anything is worrying them. They need to:

- be able to recognise abuse and know it is wrong
- know who they can talk to about it.

The people they choose to disclose to need to listen, understand and respond appropriately so the child gets the help, support and protection they need.

Talking PANTS (the underwear rule) is a simple way to talk to children as young as four about staying safe from sexual abuse. It helps children to:

- name their body parts and know which parts should be private
- know the difference between appropriate and inappropriate touch
- understand they have the right to say "no"
- think about who they trust and who they can ask for help.

7. Responding to disclosures

- **show you care, help them open up:** Give your full attention to the child or young person and keep your body language open and encouraging. Be compassionate, be understanding and reassure them their feelings are important. Phrases such as 'you've shown such courage today' help.
- **take your time, slow down:** Respect pauses and don't interrupt the child – let them go at their own pace. Recognise and respond to their body language. And remember that it may take several conversations for them to share what's happened to them.
- **show you understand, reflect back:** Make it clear you're interested in what the child is telling you. Reflect back what they've said to check your understanding – and use their language to show it's their experience.

If a child tells you they are experiencing abuse, it's important to reassure them that they've done the right thing in telling you. Make sure they know that abuse is never their fault.

Never talk to the alleged perpetrator about the child's disclosure. This could make things a lot worse for the child.

8. Non-biased approach

It's vital that any child who is trying to disclose abuse feels that they are being listened to and taken seriously.

But there can be a risk that if professionals just believe the child's account without thoroughly investigating the situation, this can lead to unfair bias against the alleged abuser as formal investigations progress (Child Protection Resource, 2021; Transparency Project, 2018).

This means it's important to maintain an unbiased approach when responding to disclosures and follow your organisation's procedures to ensure each case is treated in a fair and transparent manner and that the child gets the protection and support that they need.

9. Making notes

It's important to keep accurate and detailed notes on any concerns you have about a child. You will need to share these with your nominated child protection lead.

Include:

- the child's details (name, age, address)
- what the child said or did that gave you cause for concern (if the child made a verbal disclosure, write down their exact words)
- any information the child has given you about the alleged abuser.

10. When to share information

Timely information sharing is key to safeguarding and promoting the welfare of children. People who work with children, whether in a paid or voluntary role, may need to share information about the children and families they are involved with for a number of reasons. These include:

- you are making a referral to arrange additional support for someone in the family
- someone from another agency has asked for information about a child or family
- someone in the family has asked to be referred for further help
- a statutory duty or court order requires information to be shared
- you are concerned that a child or a member of their family may be at risk of significant harm
- you think a serious crime may have been committed or is about to be committed which involves someone in the family.

You must always have a clear and legitimate purpose for sharing a child's personal information. Keep a record of the reasons why you are sharing or requesting information about a child or their family. You should also make sure you are not putting a child's safety and welfare at risk by sharing information about them.

Some professionals have a legal duty to share information relating to safeguarding concerns. More information about this is available in the Mandatory reporting tab.

Always seek consent to share information about a child and their family. However if consent isn't given, you can still share information with relevant professionals under certain circumstances, for example if you are protecting a child from significant harm.

11. What information to share

You need to decide what specific information is appropriate to share and who to share it with.

- Prioritise the safety and welfare of the child and anyone else who may be affected by the situation.
- Make sure you share the information quickly and securely. The sooner you report your concerns the better. This means the details will be fresh in your mind and action can be taken quickly.
- Identify how much information should be shared. This will depend on the reasons for sharing it.
- Use language that is clear and precise. Different agencies may use and understand terminology differently.
- Make sure the information you are sharing is accurate. Make it clear what information is factual and what is based on opinion (yours or other people's).

12. Facts and opinions

When working with children and families you will gather information from a variety of sources. How you interpret this information can depend on:

- any previous information received
- your knowledge of research and theory
- your own frame of reference.

When recording information you should be as factual as possible. If you need to give your own or somebody else's opinion make sure it is clearly differentiated from fact. You should identify whose opinion is being given and record their exact words.

13. Seeking consent to share information

Children should be given the opportunity to decide whether they agree to their personal information being shared. If a child doesn't have the capacity to make their own decisions ask their parent or carer (unless doing so would put the child at risk of harm).

You should always seek consent to share information about an adult.

Tips for getting consent:

- be open and honest
- make sure the person you're asking for consent understands what information will be shared and why
- explain who will see the information and what it will be used for
- make sure the person you're asking for consent understands the consequences of their information not being shared
- get the consent in writing, in case there are any disputes in the future. If it's only given verbally, make a written record of this
- make sure the person knows they can withdraw consent at any time.

14. Sharing information without consent

If consent is refused or if you're unable to seek consent, you can still share information with relevant professionals if this is in the public interest. This includes protecting children from significant harm and promoting the welfare of children.

When deciding whether to share information without consent, you should consider each case individually.

- Decide if the need to share information is in the public interest and whether it outweighs the need to maintain confidentiality.
- Consider all the implications of sharing the information, for example if you are sharing sensitive details about a person's life.

If you're sharing information without consent keep a written record explaining:

- what steps you took to get consent
- the person's reasons for not giving consent (if known)
- why you felt it was necessary to share information without consent.

15. Confidentiality

Never promise a child that you will keep the things they're telling you a secret. Explain that you need to share what they've told you with someone who will be able to help.

16. Reporting concerns

If a child is suffering or at risk of suffering significant harm, you can share information with appropriate agencies or professionals without the child's or their parent's consent

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

Helping a child in immediate danger or in need of emergency medical attention

- If the child is in immediate danger and is with you, remain with him/her and call the police.
- If the child is elsewhere, contact the police and explain the situation to them.
- If he/she needs emergency medical attention, call an ambulance and, while you are waiting for it to arrive, get help from your first aider.
- If the first aider is not available, use any first aid knowledge that you may have yourself to help the child.
- You also need to contact your supervisor/manager or named person for child protection to let them know what is happening.

A decision will need to be made about who should inform the child's family and the local authority children's social care department, and when they should be informed. If you have involved the police and/or the health services, they should be part of this decision. Consider the welfare of the child in your decision making as the highest priority.

Issues that will need to be taken into account are:

- the child's wishes and feelings
- the parent's right to know (unless this would place the child or someone else in danger, or would interfere with a criminal investigation)
- the impact of telling or not telling the parent
- the current assessment of the risk to the child and the source of that risk
- any risk management plans that currently exist.

Once any immediate danger or emergency medical need has been dealt with, follow the steps set out in the flowchart at the end of this document.

17. Keeping a record of your concerns

It's important to keep accurate and detailed notes on any concerns you have about a child. You will need to share these with your nominated child protection lead.

Include:

- the child's details (name, age, address)
- what the child said or did that gave you cause for concern (if the child made a verbal disclosure, write down their exact words)
- any information the child has given you about the alleged abuser

Use the **DRC Reporting Form** to record the concern and how it is dealt with. The relevant sections of the form should be completed and signed at each stage of the procedure. It can be used to forward information to the statutory child protection authorities if a referral to them is needed.

The form should be signed and dated by all those involved in its completion and kept confidentially on the child's file.

The name of the person making the notes should be written alongside each entry.

18. Retention & Storage

- Child protection records need to be kept confidential and stored securely. Electronic files should be password protected and stored on computers with protection against hackers and viruses.
- Information about child protection concerns and referrals should be kept in a separate child protection file for each child, rather than in one 'concern log'. The child protection file should be started as soon as you become aware of any concerns.
- It's good practice to keep child protection files separate from a child's general records. You should mark the general record to indicate that there is a separate child protection file.

If you need to share records (within the DRC or externally), make sure they are kept confidential. Use passwords and encryption when sharing electronic files.

19. Useful contact details

DRC Named person for child protection and deputy:

Helen Fitzgerald Chief Officer 01744 23887

Tanya McGibbon Service Manager 01744 23887

Local police: 999

St Helens Council Contact Centre: 01744 676767

St Helens Emergency Duty Team (out of hours): 0345 0500 148

Halton Borough Council Children's Social Care: 0151 907 8305

(Out of hours) Emergency Duty Service: 0345 0500 148

NSPCC Helpline: 0808 800 5000 or help@nspcc.org.uk

ChildLine: 0800 1111 (textphone 0800 400 222) or www.childline.org.uk

Reporting Procedure

