

# Helston & District Town Twinning Association Safeguarding Policy

Helston & District Town Twinning Association is committed to practice which protects children and vulnerable adults from harm. Volunteers in this organisation accept and recognise our responsibilities to develop awareness of the issues which can cause harm. This policy applies to any young person under the age of 18, as well as to vulnerable adults.

**This policy is based on the following principles:**

- The welfare of the child/vulnerable person is paramount;
- All children/vulnerable adults, whatever their age, culture, disability, gender, language, racial origin religious beliefs and/or sexual identity have the right to protection from abuse;
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately;
- All members of the Association have a responsibility to report concerns to the Designated Person with responsibility for Safeguarding.
- The Designated person is usually the Safeguarding Officer but can also be the group leader or another person appointed for a specific activity or visit.
- Members of the Association are not trained to deal with situations of abuse or to decide if abuse has occurred.

We will aim to safeguard children and vulnerable adults by:

- Adopting Safeguarding guidelines through procedures and a Code of Conduct.
- Sharing information about Safeguarding and good practice with children, parents and carers, vulnerable adults and volunteers.
- Sharing information about concerns with agencies who need to know, and involving parents and children/vulnerable persons appropriately.
- We are committed to reviewing our policy and good practice regularly.

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

- Responding to allegations of abuse
- Supervision of organisational activities

## 1. Definitions of abuse

These definitions are based on those from Working Together to Safeguard Children (UK Government, Department for Education, 2015))

### **Physical abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing harm to a child/vulnerable adult. Physical abuse, as well as being the result of a deliberate act, can also be caused through omission or the failure to act to protect.

## **Emotional abuse**

Emotional abuse is the persistent emotional ill treatment of a child/vulnerable adult such as to cause severe and persistent adverse effects on their emotional development. It may involve making them feel or believe they are worthless or unloved, inadequate or valued only insofar as they meet the needs of the other person.

It may feature age or developmentally inappropriate expectations being imposed on children/vulnerable adults. It may also involve causing them to feel frequently frightened or in danger, or the exploitation or corruption of a child.

Some level of emotional abuse is involved in all types of ill treatment though it may occur alone.

## **Sexual abuse**

Sexual abuse involves forcing or enticing a child or vulnerable adult to take part in sexual activities, whether or not they are aware of, or consent to, what is happening.

Sexual abuse may also include non-contact activities, such as encouraging them to behave in sexually inappropriate ways.

## **Neglect**

Neglect is the persistent failure to meet a child or vulnerable adult's basic physical and or psychological needs, likely to result in the serious impairment of their health or development. It may involve a parent or a carer failing to provide adequate food, shelter and clothing, or the failure to ensure that they get appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, their basic emotional needs.

It is accepted that in all forms of abuse there are elements of emotional abuse, and that some people are subjected to more than one form of abuse at any time.

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

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

### **Physical signs of abuse**

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

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

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

## Emotional signs of abuse

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

- A failure to thrive or grow particularly if a child puts on weight in other circumstances e.g. in hospital or away from their parents' care
- Sudden speech disorders
- Persistent tiredness
- Development delay, either in terms of physical or emotional progress

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

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

## Sexual Abuse

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

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

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

- Sudden or unexplained changes in behaviour e.g. becoming withdrawn or aggressive
- Fear of being left with a specific person or group of people
- Having nightmares
- Running away from home
- Sexual knowledge which is beyond their age or developmental level
- Sexual drawings or language
- Bedwetting
- Eating problems such as over-eating or anorexia
- Self-harm or mutilation, sometimes leading to suicide attempts
- Saying they have secrets they can not tell anyone about

- Substance or drug abuse
- Suddenly having unexplained sources of money
- Not allowed to have friends (particularly in adolescence)
- Acting in a sexually explicit way with adults

## Neglect

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

- Constant hunger, sometimes stealing food from other children
- Constantly dirty or smelly
- Loss of weight or being constantly underweight
- Inappropriate dress for the conditions

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

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

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

1. You must report the concerns immediately to the Designated Person, or when on a visit abroad, the Group Leader.

The role of the designated person is to:

- Obtain information from volunteers, children/vulnerable adults or parents and carers who have safeguarding concerns and record this information.
- Assess the information quickly and carefully and ask for further information as appropriate.
- Consult with a statutory Safeguarding agency such as the local social services department or the NSPCC to clarify any doubts or worries.
- The designated person should make a referral to a statutory Safeguarding agency or the police without delay.

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

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

## Allegations of physical injury or neglect

### ***If a child has a symptom of physical injury or neglect the designated person will:***

1. Contact Social Services for advice in cases of deliberate injury or concerns about the safety of the child/vulnerable adult.
2. Where emergency medical attention is necessary it will be sought immediately. The designated person will inform the doctor of any suspicions of abuse.

3. In other circumstances speak with the parent/carer/guardian and suggest that medical help/attention is sought for the child/vulnerable adult. The doctor will then initiate further action if necessary.
4. If appropriate the parent/carer will be encouraged to seek help from Social Services. If the parent/care/guardian fails to act the designated person should in case of real concern contact social services for advice.
5. Where the designated person is unsure whether to refer a case to Social Services then advice from the Area Safeguarding Committee will be sought.

## Allegations of sexual abuse

### ***In the event of allegations or suspicions of sexual abuse the designated person will:***

1. Contact the Social Service duty social worker for Safeguarding directly. The designated person will not speak to the parent (or anyone else)
2. If the designated person is unsure whether or not to follow the above guidance then advice from the Area Safeguarding Committee will be sought.
3. Under no circumstances is the designated person attempt to carry out any investigation into the allegation or suspicions of sexual abuse. The role of the designated person is to collect and clarify the precise details of the allegation or suspicion and to provide this information to Social Services whose task it is to investigate the matter under section 47 of the Children Act.
4. Whilst allegations or suspicions of sexual abuse should normally be reported to the designated person, their absence should not delay referral to Social Services.

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

- Stay calm, listen carefully to what is being said
- Find an appropriate early opportunity to explain that it is likely that the information will need to be share with others-do not promise to keep secrets
- Allow the child/vulnerable adult to continue at his/her own pace
- Ask questions for clarification only, and at all time avoid asking questions that suggest a particular answer
- Reassure them 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 their own words as soon as possible, note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated

## Helpful statements to make

- I believe you (or showing acceptance of what they say)
- Thank you for telling me
- It's not your fault
- I will help you

## Do not say

- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure that this is true?
- Why? Who? When? Where?
- Never make false promises or promise to keep what they have told you secret.

## 5. What to do after a child or vulnerable adult has talked to you about abuse

### The procedure

1. Make notes as soon as possible (ideally within 1 hour of being told). You should write down exactly what they have said and what you said in reply and what was happening immediately before being told (i.e. the activity being delivered). You should record the dates, times and when you made the record. All hand written notes should be kept securely.
2. You should report your discussion with the designated person as soon as possible. If this person is implicated you need to report to the HDTTA Chairperson. If both are implicated, report to Social Services.
3. You should under no circumstances discuss your suspicions or allegations with anyone other than those nominated above.
4. After a child/vulnerable adult has disclosed abuse the designated persons should carefully consider whether or not it is safe for them to stay in a potentially abusive situation. On these rare occasions it may be necessary to take immediate action to contact Social Services to discuss putting safety measures into effect.

## 7. Allegations against a member of the Twinning Association or our partners in the Twin Towns

We will assure all members that our organisation will fully support and protect anyone, who in good faith reports his or her concern that a colleague is, or may be, abusing a child or vulnerable adult. Where there is a complaint against a member of the association there may be three types of investigation:

- A criminal investigation,
- A Safeguarding investigation,
- A disciplinary or misconduct investigation.

The results of the police and safeguarding investigation may well influence the disciplinary investigation, but not necessarily.

### Action if there are concerns

#### 1. Concerns about poor practice:

- If, following consideration, the allegation is clearly about poor practice; this will be dealt with as an internal issue.
- If the allegation is about poor practice by the Designated Person or if the matter has been handled inadequately and concerns remain, it should be reported to the Chairman who will decide how to deal with the allegation and whether or not the organisation should initiate disciplinary proceedings.

#### 2. Concerns about suspected abuse

- Any suspicion that a child/vulnerable adult has been abused by a member of the Twinning Association or our partners must be reported to the Designated Person, who will take such steps as considered necessary to ensure the safety of the child/vulnerable adult in question and any other person who may be at risk.
- The Designated person will refer the allegation to the social services department who may involve the police, or go directly to the police if out-of-hours.
- The parents or carers of the child/vulnerable adult will be contacted as soon as possible following advice from the social services department.
- If the Designated Person is the subject of the suspicion/allegation, the report must be made to the Chair who will refer the allegation to Social Services.

## **8. Supervisory arrangements for the management of Helston & District Town Twinning Association activities**

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

- We will keep a register of all children/vulnerable adults attending our activities.
- Written consent from a parent or guardian will be obtained for every child / vulnerable person attending visits abroad.
- All Helston children and adults visiting our partner organisations in Plougasnou and Sasso Marconi will be obliged to have insurance cover for the duration of their visit.
- Our partner organisations in France and Italy will be asked to ensure that their children and adults have adequate insurance cover when visiting Helston
- Where possible our team members should not be alone with a child/vulnerable adult, although we recognise that there may be times when this may be necessary or helpful
- We recognise that physical touch between adults and children/vulnerable adults can be healthy and acceptable in public places. However our team members will be discouraged from this in circumstances where an adult or child/vulnerable adult are left alone.
- All team members should treat all children/vulnerable adults with dignity and respect in attitude, language and actions.
- Although there is no current legal requirement for DBS checks on host families, HDTTA will undertake to ensure that families hosting children and vulnerable adults from our twin towns are trusted and suitable. Our sister organisations in France and Italy will be asked to do the same when hosting Helston visitors.

### **Note**

This policy was adopted on