

Safeguarding Children Policy

1. Introduction

The purpose of this policy is to outline the duty and responsibility of staff, directors and volunteers working on behalf of Healthwatch Sutton in relation to child protection procedures.

The key objectives of this policy are:

- To explain the responsibilities of Healthwatch Sutton and its staff, directors and volunteers 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.

2. Context

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.

3. Legal Framework

The guidance reflects the principles contained within the United Nations Convention on the Rights of the Child (UNCRC) ratified by the United Kingdom in 1991 and the Human Rights Act 1998.

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.

3.1. Definition of Safeguarding for Children and Young People

Safeguarding and Promoting the Welfare of Children and Young People is defined within the Government Working Together to Safeguard Children 2012 guidance as:

- Protecting children and young people from maltreatment
- Preventing impairment of children and young people's health or development
- Ensuring that children and young people grow up in circumstances consistent with the provision of safe and effective care and undertaking that role so as to enable children and young people to have optimum life chances and enter adulthood successfully.

Child protection is part of safeguarding and refers to the specific activity that is undertaken to protect children and young people. The associated practice guidance, [‘What to do if you’re worried a child is being abused’](#) provides information for staff and volunteers about signs and symptoms of abuse and what to do if there are concerns.

In London, all Boroughs operate within the framework of the London Child Protection Procedures (revised 2011) which provides further guidance and information.

4. The role of staff, directors and volunteers

All staff, directors and volunteers working on behalf of Healthwatch Sutton have a duty to promote the welfare and safety of children.

Staff, directors and volunteers may receive disclosures of child abuse and observe children who are at risk. This policy will enable staff, directors and volunteers to make informed and confident responses to specific child protection issues.

5. What is child abuse?

The [‘Working together to safeguard children’](#) guidance published by the Government defines four categories of abuse as follows (Department of Health, Home Office, Department for Education and Employment, 1999).

5.1. 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.

5.2. 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, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. It may involve bullying, causing children to feel frightened or in danger. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

5.3. Sexual abuse

This type of abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the

child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

5.4. 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 medical help when needed. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or care failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision (including the use of inadequate caregivers)
- Ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

5.5. Domestic abuse

Any incident or threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults:

- Who are or have been intimate partners or family members, regardless of gender or sexuality (English government definition)
- Any violent or abusive behaviour (whether physical, sexual, psychological, emotional, verbal, financial etc.) that is used by one person to control and dominate another with whom they have or have had a relationship (Hester et al, 2007).

5.6. Child sexual exploitation

The sexual exploitation of children and young people under 18 is defined as that which 'involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing and/or another or others performing on them, sexual activities.

Child sexual exploitation can occur through the use of technology within the child's immediate recognition; for example being persuaded to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources.

Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social, economic and/or emotional vulnerability.'

6. Procedure in the event of a disclosure

It is important that children are protected from abuse. All complaints, allegations or suspicions must be taken seriously.

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

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.

7. Responding to an allegation

A full record shall be made as soon as possible of the nature of the allegation and any other relevant information using the '[Reporting Suspected Abuse](#)' form.

Any suspicion, allegation or incident of abuse must then be reported immediately to the Children's First Contact Service (CFCS).

- The [CFCS](#) referral form is now the quickest and easiest way to access support from Children's Services.
- Phone: 020 8700 6001 between 9am and 5pm, Monday to Friday
- Email: childrensfirstcontactservice@sutton.gov.uk
- Call the out of hours or weekend duty team on 020 8770 5000

8. Responding appropriately to a child making an allegation of abuse

When responding to a child making an allegation of abuse, make sure you:

- Stay calm
- 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 their 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 using the 'Reporting Suspected Abuse' form.

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.

Name of the designated person: Pete Flavell

Phone number: 020 8641 9540

In the absence of the designated adult at risk safeguarding person, a deputy must be identified.

Name of the deputy designated person: Gemma Thatcher

Phone number: 020 8641 9540

9. Confidentiality

Child protection raises issues of confidentiality which should be clearly understood by all.

Staff, directors and volunteers 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 a member of staff and requests that the information is kept secret, it is important that the member of staff tells the child sensitively that they have the responsibility to refer cases of alleged abuse to the appropriate agencies for the child's own sake.

Within that context, the child should, however, be assured that the matter will be disclosed only 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, staff should let the child know the position regarding their role and what action they will have to take as a result.

Staff should assure the child that they 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.

10. Policy Framework

10.1. Use of photographic/video consent

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.

10.2. Training

Training will be provided, as appropriate, to ensure that staff are aware of these procedures.

10.3. Complaints procedure

Healthwatch Sutton has a [complaints procedure](#) available to all staff, directors and volunteers.

10.4. Recruitment procedure

Healthwatch Sutton operates procedures that take into account the need to safeguard and promote the welfare of children and young people, including arrangements for appropriate checks on new staff, directors and volunteers where applicable.

11. Further information

Further information about Safeguarding and Child Protection in Sutton can be found at:

https://www.sutton.gov.uk/info/200235/safeguarding_children

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Responsible Officer: Chief Executive Officer of Healthwatch Sutton