

Project5 Child Safeguarding Policy

What is safeguarding?

Safeguarding refers to the actions that are taken to promote the health, welfare and human rights of all individuals, and enable them to live free from abuse, harm, and neglect, whatever their background. Project5 through its statement on difference and diversity, its complaints process, and whistleblowing policy, ensures that all those involved in the service have an opportunity to take action that will lead to **general safeguarding** being protected and promoted.

The safeguarding policies of Project5 deal with the protection of **vulnerable adults and all children**, and follow the principles enshrined within the Care Act 2014 - <https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Vulnerable adults and children are two sections of society which are particularly vulnerable to abuse, neglect, and exploitation, and who require particular actions and policies to protect them. A vulnerable adult is someone aged 18 or above who is likely to receive health and care services for poor mental health, disability, age, or illness. They will struggle to adequately care for and protect themselves, and as a consequence be more susceptible to harm, neglect or exploitation from others.

Any child or young person under the age of 18 can be considered to be at risk of harm or abuse, regardless of age, ethnicity, gender, sexuality, or religion. It is the responsibility of everyone who comes into contact with vulnerable adults and all children to ensure their wellbeing is being promoted and that they are protected from harm.

Project5 staff and volunteers have a responsibility to recognise a safeguarding concern about a vulnerable adult or child when a disclosure of abuse, harm or neglect has been made; respond with reassurance to the individual making the disclosure; ask what they would like to happen and explain how Project5 will act; record the disclosure; report the disclosure to the Designated Safeguarding Officer.

Project5 staff and volunteers can refer for further information and advice on safeguarding to the Social Care Institute for Excellence - <https://www.scie.org.uk/safeguarding/adults>

Child safeguarding

Although Project5 is an adult service for NHS staff suffering burnout it is nevertheless committed to promoting the welfare and protection of children and young people from harm. It is possible that during the course of conducting routine solution focussed interviews and consultations or during supervision of practice that Project5 volunteer wellbeing practitioners and coaches become aware of the abuse or possible abuse of children. This might be through the poor practice methods of the individual NHS staff member using the service, or of an NHS staff member expressing concerns about a child within the service they work.

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Anyone who has not yet reached their 18th birthday is regarded as a child. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.

Project5 believes it is everyone's responsibility to be aware of the need to safeguard them and their right to access appropriate services. Any concerns that the rights of children and young people are being infringed should be immediately reported to the **Project5 Designated Safeguarding Officer and should contact their supervisor.**

Abuse of children and young people can take the following form:

If a volunteer becomes aware that any of the forms of abuse detailed below are being committed whether by NHS staff or within NHS services then they should **automatically contact the Project5 Designated Safeguarding Officer and their supervisor.**

Physical abuse

A form of abuse which 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

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 or unloved, 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 a 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 cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual abuse

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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.

Child Sexual Exploitation (CSE)

Sexual exploitation of children and young people under 18 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 without the child's immediate recognition (e.g. 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.

Neglect

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Neglect may involve a parent or carer failing to: provide adequate food, clothing, and protect a child from physical and emotional harm or danger. A child requires adequate supervision and care, and they should have access to appropriate medical care or treatment. Neglect of a child also includes unresponsiveness to basic emotional needs.

Female Genital Mutilation (FGM)

FGM is a serious form of child abuse and violence against women and girls, and a violation of human rights. It has been illegal in this country since 1985 and there is a statutory duty to safeguard children and protect and promote the welfare of all

women and girls. People guilty of allowing FGM to take place are punished by fines and up to fourteen years in prison.

FGM is defined by the World Health Organisation as “all procedures that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons”. It can leave women and girls traumatised as well as in severe pain, cause difficulties in childbirth, and in some rare cases it can lead to death. There is no cultural or religious justification for FGM.

Policy statement

Project5 will work with NHS staff to ensure they support children’s rights and create and maintain the safest possible environment for children.

We do this by:

- Recognising that all children have the right to freedom from abuse and harm
- Promoting NHS staff in joint working with parents and carers in the interest of children’s welfare
- Following safe recruitment procedures which ensure that staff are carefully selected, vetted, and have the relevant qualifications and experience.
- Ensuring that all staff are aware of and accept responsibility for helping to prevent the abuse of child
- Designating a Safeguarding Officer (DSP) who will take appropriate action for children’s protection, safety, and well-being
- Supporting all staff in bringing concerns to the Designated Safeguarding Officer
- Responding quickly and appropriately to all suspicions or allegations of abuse
- Providing NHS and care staff with the opportunity to voice any concerns they may have.
- Adopting positive behaviour management strategies which are non-violent and do not impose humiliation
- Reviewing the effectiveness of the organisation’s Child Safeguarding Policy and Procedures
- Working in partnership with external organisations and professionals to ensure that children are protected

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The following guidance is relevant to both **Project5 volunteers** and **NHS staff referred to Project5** who express concerns about the protection of children and young people should be made aware of them:

- Working Together to Safeguard Children 2018
<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>
- Information sharing
<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>
- What to do if you're worried about a child:
[www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What to do if you re worried a child is being abused.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

Useful resources for Project5 volunteers

- These can be found on the NSPCC website:
www.nspcc.org.uk/preventing-abuse/safeguarding/

They include:

- standards for organisations to implement and a self-assessment tool kit
<https://learning.nspcc.org.uk/safeguarding-checklist/>
- advice on recruiting and managing staff and volunteers, including pre-employment and engagement checks
<https://learning.nspcc.org.uk/safeguarding-child-protection/safer-recruitment/>
- information and resources to support organisations to manage concerns raised about unacceptable or unsafe conduct by staff and volunteers towards other colleagues or children <https://learning.nspcc.org.uk/safeguarding-child-protection/managing-allegations-of-abuse/>

It is important to emphasize that everybody in whatever role working with children and young people has a duty to safeguard children and to report concerns about their safety and wellbeing. If you have any concerns that a child may be being abused, maltreated or neglected please email the Designated Safeguarding Officer at support@project5.org. It is recommended that you also contact your supervisor. They will be able to advise on what action, if any needs to be taken.

If your concern is out of hours, then please contact your **local council 24 hour support service** for advice.