

SAFEGUARDING POLICY

Contents

| | |
|--|-----------|
| Introduction | 2 |
| Key Principles..... | 3 |
| Safeguarding is everybody’s responsibility..... | 3 |
| Legal Framework and Guidance..... | 4 |
| The Designated Safeguarding Lead | 4 |
| The Designated Safeguarding Officers | 4 |
| Safeguarding and Recruitment | 5 |
| Good Practice Requirements | 6 |
| Employee support and training..... | 7 |
| Definitions and Indicators of abuse | 7 |
| Assessing need and providing early help | 14 |
| Identifying children and families who would benefit from Early Help..... | 14 |
| Recognising significant harm | 15 |
| What to do is you are worried a child is being abused | 16 |
| What to do if a child discloses abuse | 17 |
| Other incidents that must be reported to a DSL | 18 |
| Information for the police and or children’s services when abuse is suspected..... | 20 |
| Action to be taken in the event of a fatality of a child | 20 |
| Monitoring..... | 20 |
| Data protection..... | 20 |
| Whistleblowers | 20 |
| Allegations against Staff | 21 |
| Procedure in relation to multi agency concerns..... | 22 |
| Related Policies..... | 22 |
| Contact List..... | 23 |
| Monitoring and Review..... | 23 |
| Staff Confirmation | 24 |

Introduction

At Malachi we firmly believe that safeguarding children (the action we take to promote the welfare of children and protect them from harm) is everyone's responsibility. Everyone who comes into contact with children and families has a role to play.

Children are anyone who has not yet reached their 18th birthday. 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.

Safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment.
- Preventing impairment of children's mental and physical health or development.
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes.

Children are best protected when families and professionals are clear about what is required of them individually, and how they need to work together. This policy aims to help everyone understand what they need to do, and what they can expect of one another in order to safeguard children.

We recognise that effective safeguarding systems are those where:

- The child's needs are paramount, and the needs and wishes of each child, be they an unborn baby, baby or infant, or an older child, are put first, so that every child receives the support they need before a problem escalates.
- All professionals who come into contact with children and families are alert to their needs and any risks of harm that individual abusers, or potential abusers, may pose to children.
- All professionals share appropriate information in a timely way and can discuss any concerns about an individual child with colleagues and local authority children's services.
- High quality professionals are able to use their expert judgement to put the child's needs at the heart of the safeguarding system so that the right solution can be found for each individual child.
- All professionals contribute to whatever actions are needed to safeguard and promote a child's welfare and take part in regularly reviewing the outcomes for

the child against specific plans and outcomes, including where a plan is in place (child protection plan/child in need plan/looked after child plan).

- LSCPs (Local Safeguarding Children Partnerships) coordinate the work to safeguard children locally and monitor and challenge the effectiveness of local arrangements; The LSCPs that cover the area Malachi works are [Birmingham Safeguarding Children Partnership](#) and [Stoke on Trent and Staffordshire Children's Safeguarding Board](#)
- when things go wrong Serious Case Reviews (SCRs) are published and are transparent about any mistakes which were made so that lessons can be learnt; and

Ultimately, effective safeguarding of children can only be achieved by putting children at the centre of the system, and by every individual and agency playing their full part and working together to meet the needs of our most vulnerable children.

Key Principles

Effective safeguarding arrangements are underpinned by two key principles:

- safeguarding is everyone's responsibility: for services to be effective each professional and organisation should play their full part.
- a child-centred approach: for services to be effective they should be based on a clear understanding of the needs and views of children.

Safeguarding is everybody's responsibility

Everyone who works with children has a responsibility for keeping them safe.

No single professional can have a full picture of a child's needs and circumstances and, if children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

In order that organisations and practitioners collaborate effectively, it is vital that every individual working with children and families is aware of the role that they have to play and the role of other professionals.

All staff must:

- Be familiar with this Safeguarding & Child Protection Policy.
- Understand their role in relation to safeguarding.
- Be alert to signs and indicators of possible abuse [Definitions and Indicators of abuse](#)
- Record concerns on [Malachi Safeguarding Log](#) and give the record to the relevant DSO.
- Deal with a disclosure of abuse from a child in line with the guidance in the [What to do if a child discloses abuse](#) section of this policy document. You must inform a DSO immediately, and provide a [Malachi Safeguarding Log](#) as soon as possible.

Legal Framework and Guidance

Effective safeguarding systems are child centred. Anyone working with children should see and speak to the child; listen to what they say; take their views seriously; and work with them collaboratively when deciding how to support their needs. A child-centred approach is supported by:

The Children Act 1989, The Equality Act 2010 and the United Nations Convention on the Rights of the Child 1991

The legal framework and guidance underpinning this policy is:

[The Children Act 1989](#)

[The Children Act 2004](#)

[Working Together to Safeguard Children 2018](#)

[United Convention of the Rights of the Child 1991](#)

[Data Protection Act 2018](#)

[Sexual Offences Act 2003](#)

[Protection of Freedoms Act 2012](#)

[Birmingham Safeguarding Children Partnership](#)

[Stoke on Trent and Staffordshire Children's Safeguarding Board](#)

The Designated Safeguarding Lead

Dawn Treasure, Operations Director has responsibility for co-ordinating safeguarding and child protection issues.

Contact Number – 07572032734

The Designated Safeguarding Officers

Below are details of the Malachi staff who have undertaken NSPCC's Designated Safeguarding Officer (DSO) training.

- Jackie Synnott Contact Number - 07834621473
- Heather Lovegrove Contact Number - 07904879843
- Julian Lee Contact Number - 07966324528
- Michael York Contact Number - 07428 260717

Staff should direct safeguarding concerns to the named DSL in school they are working and a Malachi DSO. If you are delivering an intervention outside of a school setting you should report concerns to a Malachi DSO.

In all circumstances safeguarding concerns must be reported verbally by telephone directly to a Malachi Designated Safeguarding Officer (DSO) immediately. DSOs should be called in the order listed above. It is not sufficient to leave a message you must speak to the DSO directly. If you cannot get through to the DSO at the top of the list, you should call the next DSO listed. In the event that you are unable to get

through to any of the listed DSOs you should call Dawn Treasure, the Designated Safeguarding Lead on 07572032734.

All safeguarding concerns are logged and acknowledged using [Malachi Safeguarding Logs](#). In addition to supporting the immediate safeguarding process these records are used to identify trends, gaps in service provision and any additional training needs.

The Safeguarding Leads will:

- Take all reasonable steps to ensure that unsuitable people are prevented from working with children through its disclosure and barring recruitment practices, checking references from their previous employers regardless of time scales.
- Familiarise themselves with the relevant authorities Children's Safeguarding Board procedures ensuring staff are aware of the responses required by the Local Authority
- Attend training as required
- Ensure all staff and volunteers are aware of procedures within their settings/projects
- Organise training for staff and volunteers as necessary
- Receive suspicions of abuse and determine an appropriate response in accordance with this policy
- Support front line workers with attendance at case conferences, compiling reports for case conferences/court and other inter-agency meetings as appropriate
- Oversee the implementation of relevant aspects of child protection plan
- Ensure effective channels of communication are in place, with other agencies including health, education, children's services and families

Safeguarding and Recruitment

All employees and casual workers will be recruited in line with Malachi's [Safer Recruitment Policy](#), which includes a fully enhanced DBS check, for staff with either direct or indirect access to children, vulnerable adults and/or their records, verified references and completion of a self-disclosure form.

Volunteers will be required to undergo an interview carried out to acceptable protocol and recommendations and will also complete a fully enhanced DBS check where required. All employees, casual workers and volunteers will receive an induction, during which:

- The job requirements and responsibilities will be clarified
- Safeguarding procedures explained and training needs identified

Good Practice Requirements

- Malachi is committed to providing on going safeguarding training. All staff and volunteers will be expected to complete foundation and or intermediate Safeguarding training dependent upon their role, at the earliest possible opportunity and this will be regularly reviewed
- Social Networking – Malachi employees will adhere to the social media policy that reinforces appropriate professional boundaries with children, namely any staff member using social networking websites such as Facebook should ensure their personal settings are set to private and they do not accept friend requests from service users past or present.
- All staff should wear their id badges at all times.
- When staff are visiting parents/carers in their home they must, ensure they are wearing their id badge and have their work mobile phone switched on. An allocated person will be made aware of their where-abouts and expected time of return. This should be logged in their outlook diary and set as an activity on PeopleSafe.
- Staff members should not give children a lift in their car unaccompanied. If a school asks a staff member to pick up or drop off a child and there is parental consent for this, a staff member should never do this unaccompanied and has the right to refuse if they feel uncomfortable. If they have full business class insurance they may be able to transport clients in their car to appointments and meetings but they should not transport a minor without another professional or a parent in the car at all times.
- If at any time a staff member feels that their circumstances have changed which may cause their DBS disclosure not to be clear this should be raised immediately with their line manager.
- Those in a position of trust should have a clear understanding of the responsibilities this carries and should not abuse their position or put themselves in a position where allegations of abuse, whether justified or unfounded, could be made.
- All sessions should be risk assessed and due care should be given to where sessions are held. Doors should be left open when working with children if there is no window where the session can be visible from the outside – this is to safeguard against any allegations of impropriety.
- Likewise physical contact should be exceptionally minimal between a worker and child. Sometimes vulnerable children will crave physical contact or may not be aware of appropriate boundaries, a worker must be alert to this and manage attempts for physical contact sensitively but firmly. There must be no attempt to hug, tickle, playfight etc with a child, at any time. All Malachi employees, casual workers and volunteers are encouraged to demonstrate exemplary behaviour in order to promote welfare and reduce the likelihood of allegations being made.
- All Malachi employees have a duty to raise concerns, without prejudice to their own positions, about behaviour by managers, staff, volunteers or placements, which may be harmful to those in their care (see [Whistle Blowing Policy](#))
- All employees should follow Malachi's Use of Images Guidance, when using the organisation's camera facilities in groups and during activities, ensure photo consent has been received and recorded from parents before taking

photos. Ensure all photos are downloaded onto the memory stick from the camera every evening before the stick is locked away. Ensure no photos remain on the camera. If photos are on the camera it should be locked in the safe.

- Mobile phones fitted with camera devices should not be used in a group, activity or during a home visit and/or session.
- Staff should not give parents/carers their personal mobile or home telephone numbers so as to maintain a professional boundary.

Employee support and training

Malachi is committed to ensuring that it meets its responsibilities in respect of safeguarding through the provision of support and training to staff. Therefore, Malachi will ensure that:

- All staff and volunteers receive regular training and supervision in Safeguarding procedures and child protection issues, are aware of the main indicators of child abuse and are provided with any relevant information and guidance
- All staff and volunteers are given a copy of the Safeguarding Policy during their induction and have the procedures explained to them
- All staff are provided with supervision and 121 case management support commensurate with their responsibilities in relation to child protection and their requirement to maintain caring and safe relationships with children

Definitions and Indicators of abuse

1. Neglect

Neglect is 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 maternal substance abuse. Once a child is born, neglect may involve a parent or carer 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 care-givers); or
- Ensure access to appropriate medical care or treatment.

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

The following may be indicators of neglect (this is not designed to be used as a checklist):

- Constant hunger
- Stealing, scavenging and/or hoarding food
- Frequent tiredness or listlessness

- Frequently dirty or unkempt
- Often poorly or inappropriately clad for the weather
- Poor school attendance or often late for school
- Poor concentration
- Affection or attention seeking behaviour
- Illnesses or injuries that are left untreated
- Failure to achieve developmental milestones, for example growth, weight
- Failure to develop intellectually or socially
- Responsibility for activity that is not age appropriate such as cooking, ironing, caring for siblings
- The child is regularly not collected or received from school
- The child is left at home alone or with inappropriate carers

2. Physical abuse

Physical abuse 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.

The following may be indicators of physical abuse (this is not designed to be used as a checklist):

- Multiple bruises in clusters, or of uniform shape
- Bruises that carry an imprint, such as a hand or a belt
- Bite marks
- Round burn marks
- Multiple burn marks and burns on unusual areas of the body such as the back, shoulders or buttocks;
- An injury that is not consistent with the account given
- Changing or different accounts of how an injury occurred
- Bald patches
- Symptoms of drug or alcohol intoxication or poisoning
- Unaccountable covering of limbs, even in hot weather
- Fear of going home or parents being contacted
- Fear of medical help
- Fear of changing for PE
- Inexplicable fear of adults or over-compliance
- Violence or aggression towards others including bullying
- Isolation from peers

3. Sexual abuse

Sexual 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 rape and/or penetration 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.

The following may be indicators of sexual abuse (this is not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge
- Anal or vaginal discharge, soreness or scratching
- Reluctance to go home
- Inability to concentrate, tiredness
- Refusal to communicate
- Thrush, persistent complaints of stomach disorders or pains
- Eating disorders, for example anorexia nervosa and bulimia
- Attention seeking behaviour, self-mutilation, substance abuse
- Aggressive behaviour including sexual harassment or molestation
- Unusual compliance
- Regressive behaviour, enuresis, soiling
- Frequent or openly masturbating, touching others inappropriately
- Depression, withdrawal, isolation from peer group
- Reluctance to undress for PE or swimming
- Bruises or scratches in the genital area

4. Sexual exploitation

Child sexual exploitation occurs when a child or young person, or another person, receives “something” (for example food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of the child/young person performing sexual activities, or another person performing sexual activities on the child/young person.

The presence of any significant indicator for sexual exploitation should trigger a referral to Birmingham Children’s Trust via Birmingham Children's Advice & Support Service (CASS) on 0121 303 1888.

Or, if in Staffordshire:

First Response (Staffordshire County Council) on **0800 131 3126**.

Alternatively call Staffordshire Police Central Referrals Unit on **101** and ask for the MASH (Multi-Agency Safeguarding Hub) or email mash@staffordshire.pnn.police.uk

If you believe a child or young person is in immediate danger or in need of medical attention ring **999**.

The significant indicators are:

- Having a relationship of concern with a controlling adult or young person (this may involve physical and/or emotional abuse and/or gang activity)

- Entering and/or leaving vehicles driven by unknown adults
- Possessing unexplained amounts of money, expensive clothes or other items
- Frequenting areas known for risky activities
- Being groomed or abused via the Internet and mobile technology; and
- Having unexplained contact with hotels, taxi companies or fast food outlets.
- Missing for periods of time (CSE and county lines)

5. Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child/young person such as to cause severe and persistent adverse effects on the child/young person's emotional development. It may involve conveying to children/young people 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/young person 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/young person's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child/young person participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another person. It may involve serious bullying (including cyber bullying), causing children/young people frequently to feel frightened or in danger, or the exploitation or corruption of children/young people. Some level of emotional abuse is involved in all types of maltreatment.

The following may be indicators of emotional abuse (this is not designed to be used as a checklist):

- The child consistently describes him/herself in very negative ways – as stupid, naughty, hopeless, ugly
- Over-reaction to mistakes
- Delayed physical, mental or emotional development
- Sudden speech or sensory disorders
- Inappropriate emotional responses, fantasies
- Neurotic behaviour: rocking, banging head, regression, tics and twitches
- Self-harming, drug or solvent abuse
- Fear of parents being contacted
- Running away
- Compulsive stealing
- Appetite disorders - anorexia nervosa, bulimia; or
- Soiling, smearing faeces, enuresis.

N.B: Some situations where children stop communicating suddenly (known as “traumatic mutism”) can indicate maltreatment.

6. Responses from parents/carers

Research and experience indicate that the following responses from parents may suggest a cause for concern across all five categories:

- Delay in seeking treatment that is obviously needed
- Unawareness or denial of any injury, pain or loss of function (for example, a fractured limb)
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development
- Reluctance to give information or failure to mention other known relevant injuries
- Frequent presentation of minor injuries
- A persistently negative attitude towards the child
- Unrealistic expectations or constant complaints about the child
- Alcohol misuse or other drug/substance misuse
- Parents request removal of the child from home; or
- Violence between adults in the household
- Evidence of coercion and control.

7. Disabled children

When working with children with disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that may not be of concern on an ambulant child such as the shin, maybe of concern on a non-mobile child
- Not getting enough help with feeding leading to malnourishment
- Poor toileting arrangements
- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification such as deprivation of medication, food or clothing, disabling wheelchair batteries
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment, for example, callipers, sleep boards, inappropriate splinting
- Misappropriation of a child's finances; or
- Inappropriate invasive procedures.

8. Female Genital Mutilation (FGM)

FGM is also known as female circumcision or female genital cutting, and in practising communities by local terms such as “tahor” or “sunna”. It is a form of abuse which can have devastating physical and psychological consequences for girls and women

Since 1985 it has become a serious criminal offence under the Prohibition of Female Circumcision Act to perform FGM or to assist a girl to perform it on herself. In 2003, the FGM Act tightened this law to criminalise FGM being carried out on UK citizens overseas

The Home Office has identified girls from the Somali, Kenyan, Sudanese, Sierra Leonean, Egyptian, Nigerian, Eritrean, Yemeni, Kurdish and Indonesian communities as most risk of FGM (2014)

Risk Factors and signs:

- Coming from a community that is known to practice FGM
- Having a mother or sister or member of the family who has been subjected to FGM
- A child being taken back to her family's country of origin at the beginning of the school summer holiday (this allows time for her to heal from the procedure)
- Girls ask to be excused from PE or swimming classes and who spend long periods of time in the bathroom (Khalifa 2013) may also be an indicator.

9. Radicalisation and Extremism

Radicalisation is defined in KCSiE 2020 as:

The process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Extremism is defined by the government in the Prevent Strategy as:

Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Extremism is defined by the Crown Prosecution Service as:

The demonstration of unacceptable behaviour by using any means or medium to express views which:

- Encourage, justify, or glorify terrorist violence in furtherance of particular beliefs.
- Seek to provoke others to terrorist acts.
- Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
- Foster hatred which might lead to inter-community violence in the UK.

KCSiE 2020 describes terrorism as an action that endangers or causes serious violence to a person/people; causes serious damage to property; or seriously interferes or disrupts an electronic system. The use or threat must be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious or ideological cause.

There is no such thing as a "typical extremist". Those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

Children may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that Malachi staff are able to recognise those vulnerabilities.

Indicators of vulnerability include:

- Identity crisis – the child/young person is distanced from their cultural/religious heritage and experiences discomfort about their place in society
- Personal crisis – the child/young person may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging
- Personal circumstances - migration; local community tensions; and events affecting the child/young person country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy
- Unmet aspirations - the child/young person may have perceptions of injustice; a feeling of failure; rejection of civic life
- Experiences of criminality - which may include involvement with criminal groups, imprisonment, and poor resettlement/reintegration
- Special educational need - child/young person may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

This list is not exhaustive, nor does it mean that all children/young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

More critical risk factors could include:

- Being in contact with extremist recruiters
- Family members convicted of a terrorism act or subject to a Channel intervention
- Accessing violent extremist websites, especially those with a social networking element
- Possessing or accessing violent extremist literature
- Using extremist narratives and a global ideology to explain personal disadvantage
- Justifying the use of violence to solve societal issues
- Joining or seeking to join extremist organisations
- Significant changes to appearance and/or behaviour; and
- Experiencing a high level of social isolation resulting in issues of identity crisis and/or personal crisis.

Further information

Supplementary Guidance on particular safeguarding issues are online from the Department for Education and on the Local Safeguarding Board website for the relevant local authority an employee is working in.

[Birmingham Safeguarding Children Partnership](#)

[Stoke on Trent and Staffordshire Children's Safeguarding Board](#)

[Safeguarding children who may have been trafficked](#)

[Safeguarding children and young people who may have been affected by gang activity](#)

[Safeguarding children from female genital mutilation](#)

[Forced marriage guidance and phone numbers](#)

[Safeguarding children and young people from sexual exploitation](#)

[Safeguarding Children in whom illness is fabricated or induced](#)

[Preventing and tackling bullying and information on cyber bullying](#)

[Safeguarding Disabled Children: Practice guidance](#)

[DfE: What to do if you're worried a child is being abused](#)

[Preventing Radicalisation Guidance](#)

Assessing need and providing early help

At Malachi we firmly believe providing early support is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges.

Effective early support relies upon local agencies working together to:

- identify children and families who would benefit from early help;
- undertake an assessment of the need for early help; and
- provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child. Local authorities, under section 10 of the Children Act 2004, have a responsibility to promote inter-agency cooperation to improve the welfare of children.

Identifying children and families who would benefit from Early Help

Professionals working in universal services have a responsibility to identify the symptoms and triggers of abuse and neglect, to share that information and work

together to provide children and young people with the help they need. Practitioners need to continue to develop their knowledge and skills in this area. They should have access to training to identify and respond early to abuse and neglect, and to the latest research showing what types of interventions are the most effective.

A range of assessments are conducted by our family support team at Malachi, including Pre EHA (Early help assessments), in-house dartboard assessments and Outcome Star assessments. These assessments help to identify existing strengths and areas where support is needed by the child and family in order to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989.

For an early help assessment or any other assessment to be effective:

- the assessment should be undertaken with the agreement of the child and their parents or carers. It should involve the child and family as well as all the professionals who are working with them;
- a teacher, GP, health visitor, early years' worker or other professional should be able to discuss concerns they may have about a child and family with a social worker in the local authority. Local authority children's services should set out the process for how this will happen; and
- if parents and/or the child do not consent to an early help assessment, then the lead professional should make a judgement as to whether, without help, the needs of the child will escalate. If so, a referral into local authority children's services may be necessary.

If at any time it is considered that the child may be a child in need as defined in the Children Act 1989, or that the child has suffered significant harm or is likely to do so, a referral should be made immediately to the local authority children's services team. This referral can be made by any professional.

Recognising significant harm

Child abuse occurs in all races, social classes and religions. It can present in a variety of ways, sometimes as a suspicion, sometimes with clear physical signs or with an allegation or disclosure. The allegations/concerns might be to do with a risk of harm from their parents, other relatives, other people known to them (including those in a position of trust) or a stranger. The following indicators should alert all professionals to the possibility of abuse.

- Injuries which appear non-accidental
- Concerns about sexual abuse
- Allegations of possible abuse
- Physical symptoms of possible abuse
- Neglect of a child's physical and emotional needs
- Unexplained failure to thrive
- Worrying changes in/disturbed behaviour
- Female Genital Mutilation and/or a risk of FGM
- Contact with someone convicted of an offence against a child
- Child Abuse and New Technologies ie online grooming
- Domestic abuse

- Forced Marriage
- Abuse Linked to spirit possession or witchcraft
- Fabricated and induced illness
- Child Sexual Exploitation

For further guidance, refer to the definitions in the relevant Children's Safeguarding Partners Procedures

[Birmingham Safeguarding Children Partnership](#)

[Stoke on Trent and Staffordshire Children's Safeguarding Board](#)

All concerns need to be raised and discussed with the appropriate DSL as outlined at the beginning of this policy.

In the unlikely event that none of the designated leads are available, any concerns must be raised with area child protection team/first response team immediately. The contact details appear at the end of these procedures.

The appropriate DSL should make an assessment of the situation and follow the guidelines as laid out in the document:

What to do if you are worried a child is being abused

In general, seek to discuss any concerns with the child, ask **ONLY TWO QUESTIONS, HOW and WHAT**. Under no circumstances should staff carry out their own investigation into suspicions or allegations of abuse, neither should they question children closely, as to do so may distort any investigation which may be carried out subsequently by Children's Services Team or the Police.

The appropriate DSL has the responsibility to act on behalf of Malachi in dealing with allegations or suspicions of abuse or neglect. This will include collating details of the allegation/suspicion and supporting the worker with referring the matter to the appropriate statutory authorities. It is the task of the local area team, not Malachi, to investigate the matter, under Section 47 of the Children Act 1989. (A section 47 is an investigation conducted by children services when there is reasonable cause to believe that a child has suffered or is likely to suffer significant harm.)

If your concern is about a child you are supporting within a school environment you must immediately report the concern to the schools Designated Safe Guarding Lead. In addition, at the absolute earliest opportunity, you must report the concern to [The Designated Safeguarding Officers](#) at Malachi.

If you are not working within a school environment, the concern(s) should be reported **IMMEDIATELY** to [The Designated Safeguarding Officers](#) who will take the appropriate action and/or support you to report it to the authorities.

In all situations you should complete a [Malachi Safeguarding Log](#).

What to do if a child discloses abuse

If a child tells me about abuse they have suffered or says something or acts in such a way that abuse is suspected (either to have happened in the past, is happening currently or there is a fear it will happen in the future), the person receiving the information should:

- Stay calm.
- Do not communicate shock, anger or embarrassment.
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record in writing, all you have heard, though not necessarily at the time of disclosure.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language ([Malachi Safeguarding Log](#)). Include any questions you may have asked. Do not add any opinions or interpretations.
- If the disclosure relates to a physical injury do not photograph the injury but record in writing as much detail as possible.

The record ([Malachi Safeguarding Log](#)) should include:

A verbatim record of the child's disclosure. This may be used later in a criminal trial and it is vital that what the child discloses is recorded as accurately as possible. Therefore, the record must be drafted in the child's words and should not include the assumptions or opinions of others.

It must include:

- The nature of the allegation or concern
- A description of any visible physical injury (clothing should not be removed to inspect the child) using the body map form
- The child's account of what has occurred
- Any dates, times or places and any other potentially useful information

If the disclosure is made by a child you are supporting within a school environment you must immediately report the disclosure to the schools Designated Safe Guarding Lead. In addition, at the absolute earliest opportunity, you must report the disclosure to [The Designated Safeguarding Officers](#) at Malachi.

If you are not working within a school environment, the concern(s) should be reported **IMMEDIATELY** to [The Designated Safeguarding Officers](#) who will take the appropriate action and/or support you to report it to the authorities.

It is usual process to inform parents that a referral is being made and gain their consent to this, however if the consent is not forthcoming and a worker deems the child to be at risk of significant harm they must still report it but make it clear that consent was declined.

In the event of an alleged assault on a child by person with parental responsibility or if the worker deems that informing the parent of a referral will place the child at increased risk then they must not discuss with the parent and inform the DSL of this information so they can seek further guidance and support.

Other incidents that must be reported to a DSL

If any of the following occur you should report this immediately to the appropriate DSL:

- If you accidentally hurt a child
- If he/she seems unduly distressed in any manner
- If a child seems sexually aroused by your actions
- If you are concerned that a relationship is developing that could represent an abuse of trust
- If you are concerned that a child is becoming attracted to you
- If a child misunderstands or misinterprets something you have done
- If you have had to use reasonable physical restraint to prevent a child harming themselves, or another, or from causing significant damage to a property
- If a child reports an allegation of abuse regarding a member of an external organisation

It is also important to remember that sometimes children and young people may talk about historic abuse/domestic abuse. Sometimes they may even be referencing something from many years ago. It is imperative the worker never assumes that the relevant authorities know about this and the matter has been dealt with just because it is historic or appears to be historic. Any disclosures of this nature must also be reported to the DSL in the same way as current concerns or disclosures about abuse happening in the present time are reported.

An overview of procedure

Abuse Suspected/disclosed

If a disclosure is made follow the guidance in this policy [What to do if a child discloses abuse](#)

Record Concerns and/or disclosure ([Malachi Safeguarding Log](#)) as soon as possible and contact DSL either in the school, if that is where you are, and a Malachi's DSL. Do not ignore or minimise concerns, if you are in any doubt then seek advice from the [The Designated Safeguarding Officers](#) without delay.

Share ALL the relevant detail with the DSL for further advice including any information relating to gaining or not gaining parental consent in relation to a referral or discussing the concerns

With the DSL discuss and decide the following:-

- Do the police need to be called and the child placed under immediate protection?
- Is the concern placing the child at significant risk from harm and needs to be reported to the local authority Children Services team/first response team?
- If it is deemed a referral needs to be made, can consent be gained from the parents?
- Does the concern not meet threshold for referral but needs communicating to the parent and/or monitoring?

Reach an agreement with the DSL regarding a course of action to take. If you cannot agree or don't agree then you must seek a second opinion from another DSL immediately and/or [Birmingham Children's Advice & Support Service \(CASS\) on 0121 303 1888](#) or if [Staffordshire First Response on 0800 1313 126](#) for advice.

Record everything on the child's file. Even if the outcome was not to make a referral. Record the reason and rationale for the outcome, who you spoke to about it, when you spoke to them. If no referral was made then a safeguarding log must be completed so the concerns can be monitored internally. If it is agreed to make a referral and you are doing it seek advice from the DSL

Information for the police and or children's services when abuse is suspected

To ensure that this information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern, which should include the following:

- The reason for your concern
- Full name and date of birth of the child
- Names and dates of birth of the child's family/household members
- Other agencies/professionals involved with the family
- The child's first language and any special needs
- The child's developmental needs, family and environmental factors and parenting capacity
- Any work you may have already undertaken with the child and family

All incidents will be reported on a Social Care Referral form. The form will need to be forwarded to Children's Services within 24 hours of making the referral via telephone.

Action to be taken in the event of a fatality of a child

In the event of the death of a child or young person (up to the age of 18yrs) notify the Child Death Review Co-coordinator as soon as possible.

Monitoring

Malachi's Safeguarding and Child Protection Lead will keep a record of all incidents related to safeguarding each year reporting them in an anonymised form to Malachi's Board. Confidentiality will be maintained at all times. Any concerns or patterns that emerge will be dealt with appropriately.

Data protection

Any information regarding safeguarding issues will be stored in a secure place and there will be limited access to this by the Safeguarding and Child Protection Lead.

Information relating to any disclosures will be passed to the local Children's Services department or police Authority. Concerns relating to safeguarding which have not been referred to an external body will be retained in a secure location.

Whistleblowers

In accordance with the *Public Interest Disclosure Act 1988*, Malachi will support and protect those staff, who in good faith and without malicious intent, report suspicions of abuse or concerns about colleagues and their actions. All Malachi staff are expected to follow the procedures laid out in this policy as follows

Allegations against Staff

Inappropriate behaviour by staff/volunteers could take the following forms:

- Physical - For example, the intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects, or rough physical handling.
- Emotional - For example, intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes that discriminate on the grounds of race, gender, disability or sexuality.
- Sexual - For example, sexualised behaviour towards pupils, sexual harassment, inappropriate phone calls and texts, images via social media, sexual assault and rape.
- Neglect - For example, failing to act to protect children/young people, failing to seek medical attention or failure to carry out an appropriate risk assessment.
- Spiritual Abuse - For example, using undue influence or pressure to control individuals or ensure obedience, follow religious practices that are harmful such as beatings or starvation.

If an allegation is made about a member of staff, visitor or volunteer [The Designated Safeguarding Lead](#) must be informed immediately. The DSL must carry out an urgent initial consideration in order to establish whether there is substance to the allegation. The DSL should not carry out the investigation him/herself or conduct interviews. However, they should ensure that all investigations are completed appropriately.

The DSL should exercise and be accountable for their professional judgement on the action to be taken as follows:

If the actions of the member of staff, and the consequences of the actions, raise credible child protection concerns the **DSL will notify Birmingham Children's Trust Designated Officer (LADO) Team (Tel: 0121 675 1669)**. The LADO Team will advise about action to be taken and may initiate internal referrals within Birmingham Children's Trust to address the needs of children likely to have been affected.

If the actions of the member of staff, and the consequences of the actions, do not raise credible child protection concerns, but do raise other issues in relation to the conduct of the member of staff or the pupil. These should be addressed through the school's own internal procedures.

If the DSL decides that the allegation is without foundation and no further formal action is necessary, all those involved should be informed of this conclusion, and the reasons for the decision should be recorded on the clients records. The allegation should be removed from personnel records.

Where an allegation has been made against the DSL, then the Managing Director takes on the role of liaising with the LADO Team in determining the appropriate way forward. For details of this specific procedure see [Allegations against Staff and Volunteers in the West Midlands Child protection procedures](#)

Procedure in relation to multi agency concerns

Where safeguarding issues are raised by a multi-agency partner within their setting, e.g. schools/day nursery/children's centre, the agencies own safeguarding procedures will apply and it will be the responsibility of the agency to raise the concerns with Children's Services directly as deemed appropriate by the lead child protection coordinator of the agency. If a Family Support Worker from Malachi is involved with the family, the relevant agency will notify Malachi's relevant case worker/DSL of the concerns raised and any outcomes using the agencies relevant protocols within 24 hours, e.g. Malachi will **not** undertake a referral to Children's Services on behalf of another agency.

Serious incidents of bullying

Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves (e.g. social media such as face book, twitter, bb messenger). It can take many forms, but the main types are:

- Physical (e.g. hitting, kicking, theft)
- Verbal (e.g. racist or homophobic remarks, threats, name-calling)
- Emotional (e.g. isolating an individual from the activities and social acceptance of their peer group)

The damage inflicted by bullying (including bullying via the internet) can frequently be underestimated. It can cause considerable distress to children, to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-harm). All settings in which children are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies. [Working Together to Safeguard Children 2018](#)

If Malachi employees are concerned that a child is being bullied and/or they have disclosed bullying, this must be treated seriously and passed on to the DSL within the relevant school. All actions must be clearly recorded in the case notes

Related Policies

- [Safer Recruitment Policy](#)
- [Whistle Blowing Policy](#)
- [Data Protection Policy](#)

Contact List

- Julian Lee – Managing Director and DSL: 0121 441 4556/ 07966324528
- Dawn Treasure Operations Director – Safeguarding Lead : 07572032734
- Michael York – Director and DSL: 07428 260717
- Heather Lovegrove - DSL – 07904879843
- Sam Harnett - DSL – 07970107080
- Jackie Synnott – DSL – 07834621473
- Harinder Nijjar – DSL – (Maternity Leave)

All telephone numbers for the relevant children's services offices are available from head office and/or your nominated DSL.

Monitoring and Review

This policy will be reviewed annually and/or any time there is a serious incident or cause to review the policy.

Issued by: Malachi Specialist Family Support Services

Date reviewed October 2020

Review Date: October 2021

Name: Michael York (Director)

Signature:

A handwritten signature in black ink, appearing to be 'M. York'.

Date: 15th October 2020



Staff Confirmation

Please copy and paste the following declaration into an email to Malachi DSL dawn.treasure@malachi.org.uk .

I _____ confirm that I have received, read and understand the safeguarding policy (Policy 2020) and agree to abide by it and report all concerns appropriately and record details of concerns/referrals in line with the policy. I know who the designated DSLs are and understand if they are not available I must **not** delay in seeking advice or discussing concerns and must then approach another DSL or the safeguarding lead, in their absence.

Signature _____ date _____