

**MY BAOBAB LEARNING**  
**(MBL) CIC**  
**SAFEGUARDING**  
**CHILDREN &**  
**VULNERABLE ADULTS**  
**POLICY**

All adults contributing to the education and training of children and vulnerable adults have a responsibility for their social, physical and emotional welfare. MBL CIC aims to establish systems to protect children and vulnerable adults from abuse and non-accidental injury whilst on MBL CIC premises.

All adults contributing to the education and training of children and vulnerable adults have a responsibility for their social, physical and emotional welfare. Risk assessments will be done to ensure

- The appropriateness of activity – taking into consideration the age, experience and maturity of the trainee or child
- The appropriateness of the environment in which any activities take place – as above
- The monitoring of the above.

MBL CIC aims to ensure that it provides a safe environment for children and vulnerable adults through appropriate recruitment, training and ensuring that all policies and procedures are adhered to. **All members of the Organisation are considered to be in a “position of trust” as defined by the Sexual Offences Act 2003.** All appropriate members of staff who work directly with children and vulnerable adults must have a valid DBS Certificate prior to starting with MBL CIC. All appropriate staff will have child and vulnerable adult protection awareness sessions within the first two days of starting with MBL CIC, Or at induction before their role commences. MBL CIC reserves the right to refuse Employment and/or training to those that it reasonably considers a high risk to these groups, this may include some ex-offenders. All reported or suspected cases of abuse will be thoroughly investigated in line with our procedures; this may result in disciplinary action and with reference to MBL CIC’s Disciplinary and Whistle Blowing Policies and Procedures.

All information held will conform to the Data Protection Acts 1984 and 1998.

A child or vulnerable adult is considered to be abused or at risk of abuse when their basic needs are not being met through avoidable acts of either commission or omission. The types of abuse covered by this policy are: (see appendix for definitions)

- **Physical abuse** – this may involve hitting, throwing, poisoning, burning, scalding, suffocating or otherwise causing physical harm to a child or vulnerable adult.
- **Neglect** – this is the persistent failure to meet a child or vulnerable adult’s basic physical and/or psychological needs, likely to result in the severe impairment of their health or development. This could include failure to protect a child or vulnerable adult from physical harm or danger.
- **Emotional abuse** – this is the persistent emotional ill treatment of a child or vulnerable adult such as to cause

severe and persistent adverse effects on their emotional development.

- **Sexual abuse** – this involves forcing or enticing a child, young person or vulnerable adult to take part in sexual activities whether or not they are aware of what is happening.

The policy procedures cover:

- Information that is required at recruitment,
- Staff in a position of trust.
- What to do if child or vulnerable adult discloses abuse
- what to do in the event of suspected abuse
- What to do if a child or vulnerable adult requires medical attention
- What to do if a member of staff is suspected of abusing
- Staff behaviour guidelines

# Child Protection Policy Procedures

## 1.0 A Shared Responsibility

1.1 As adults that will be involved in the training and education as well as creating events for children and vulnerable adults, we are offering an opportunity for them to maximise their potential. In order to realise this goal we all share some responsibility in enabling them to:

1.1.1 Be as physically/mentally/emotionally healthy as possible

1.1.2 Access and benefit from quality social, educational, economic, and eco friendly opportunities that are rooted in their development and focussed on outcomes

1.1.3 Feel safe and protected from harm

1.1.4 Feel loved, valued and supported, involving the children and families whenever possible.

1.1.5 Learn skills in independent living

1.1.6 Enjoy a positive self image

1.1.7 Develop confidence and social skills, Building on Strengths and identifying difficulties.

1.1.8 Signposting to other established and respected organisations if need be for specialist help and support.

1.2 To secure effective promotion of these core elements of a child's well being, MBL CIC will nurture a culture of shared responsibility within the company and with all partnership agencies working with children. A collaborative approach is sought after at all levels and will be coordinated especially where a child is suffering or at risk of suffering significant harm.

- 1.3 MBL CIC will use the following recommendations in accordance with the Department of Health (Working Together To Safeguard Children 1999 along with any changes that are to be implemented from 2009 onwards).
- 1.4 All agencies and professional agencies should:
  - 1.4.1 Be alert to potential indicators of abuse or neglect
  - 1.4.2 Be alert to risks which individual abusers, or potential abusers may pose to children
  - 1.4.3 Share and help analyse information so that informed assessment can be made of the child's needs and circumstances
  - 1.4.4 Contribute to whatever actions are needed to safeguard a child and promote his/her welfare
  - 1.4.5 Regularly review the outcomes for the child against specific shared objectives
  - 1.4.6 Work cooperatively with parents unless this is inconsistent with the need to ensure the child's safety

## **2.0 Roles and Responsibilities.**

### **2.1 The responsibility of the Governing Body of MBL CIC**

- 2.1.1 MBL CIC has a child protection policy and procedures in place.
- 2.1.2 Operates safe recruitment procedures
- 2.1.3 Has procedures for dealing with allegations of abuse against members of staff & volunteers.
- 2.1.4 Will have appointed a senior member of MBL CIC's leadership team to be responsible for Child Protection issues.
- 2.1.5 Promote effective governance of the Child Protection Policy within the organisation.
- 2.1.6 Champion Child Protection throughout the organisation.
- 2.1.7 Liaise with any key person in various government departments to ensure the safety and protection of any child and vulnerable adult.
- 2.1.8 Child Protection policy and practice.  
It is also the responsibility of the designated person from the board of directors to liaise with the appropriate Social Services regarding Child Protection in respect of allegations against any member that may be employed or volunteering for MBL CIC.
- 2.1.9 The Governing Body is expected to review policies and procedures annually and provide any updated information to the staff and volunteers about any changes.

### **2.2 Project Manager or Department Heads**

Should ensure that:

- 2.2.1 The policies and procedures adopted by the Governing Body or Proprietor are fully implemented and followed by all staff;
- 2.2.2 Sufficient resources and time are allocated to enable the designated person and other staff to discharge their responsibilities.
- 2.2.3 All staff and volunteers feel able to raise concerns about poor or unsafe practice in regard to children, Young People and Vulnerable Adults, and such concerns are addressed sensitively and effectively.
- 2.2.4 The Project Managers or Department Heads or (The most senior member /board of directors. if the DCP (Designated Contact Person is unavailable either by phone or in person) is responsible for receiving child protection allegations about members of staff, and implementing proper procedures. The DCP **Must** contact (without delay) the relevant Authority i.e. Wolverhampton MASH on **01902 555392** or Birmingham's The Children's Advice and Support Service **0121 303 1888** and Birmingham Safeguarding Children's Partnership on **0121 464 2612**.

### **2.3 The Designated Contact Person (DCP) for Child Protection.**

- 2.3.1 The DCP must be a senior member/s of MBL CIC'S leadership team. The DCP must have the status and authority within the organisation's management structure to carry out the duties of the post, including committing resources and directing other staff.
- 2.3.2 All child protection concerns should be passed on immediately to the DCP.
- 2.3.3 Receive child protection concerns from staff. Act as a source of support, advice and expertise within the educational establishment when deciding whether to make a referral by liaising with relevant agencies.
- 2.3.4 Refer cases of suspected abuse or allegations to Social Care Services (SCS) or relevant investigating agencies and maintain appropriate links.
- 2.3.5 Liaise with the internal senior persons and inform him/her of any issues and ongoing investigations and ensure there is always cover for this role.
- 2.3.6 Assisting in referral of "Child in Need" who may not necessarily be at risk of significant harm
- 2.3.7 Referring allegations about any staff, including senior staff to DCP
- 2.3.8 The DCP is Jeremy Salmon t. +44 [0]7931 971290 e. [jeremy@mybaobablearning.com](mailto:jeremy@mybaobablearning.com)

### **3.0 Training:**

- 3.1 All staff should:
  - 3.1.1 be able recognise, how to identify signs of abuse and when it is appropriate to make a referral.

- 3.1.2 Have a working knowledge of how the Local Area Safeguarding Board operates the conduct of a Child Protection case conference and be able to attend and contribute to these effectively when required to do so.
- 3.1.3 Have knowledge of the role of investigating agencies.
- 3.1.4 Who to contact for support and advice within the directorate.
- 3.1.5 Ensure each member of staff has access to and understands MBL CIC'S child protection policy especially new or part time staff who may work in different establishments.
- 3.1.6 Ensure that all staff have an induction training covering child protection and are able to recognise and report any concerns immediately as they arise.
- 3.1.7 Be able to keep detailed, accurate, secure written records of any referrals or concerns.
- 3.1.8 Obtain access to resources and **attend any relevant or refresher training courses at least every two years.**
- 3.1.9 Ensure that all other MBL CIC staff within the organisation **have child protection training at least every three years and that records of that training are accurately maintained.**
- 3.1.10 Ensure that parents or carers see a copy of the child protection policy which alerts them to the fact that referrals may be made and the role that MBL CIC play in this.
- 3.1.12 All staff whether permanent or temporary, and volunteers who will work with children and vulnerable adults should be given a written statement about MBL CIC'S policy and procedures, and the name and contact details of the DCP when they start work in a new establishment.

#### **4.0 Recruitment**

- 4.1 All vacancies that fall into the categories requiring disclosure checks will be identified prior to advertising.
- 4.2 All adverts for jobs must state which require a disclosure check.
- 4.3 All applicants called to interview must be issued with the correct DBS enhanced check form and shall bring the completed form and all necessary documentation to the interview.
- 4.4 All documents will be examined by a fully trained counter signatory and recorded on the form.
- 4.5 The successful candidate's form will be sent prior to making an offer of employment.
- 4.6 The successful candidate will not be able to start until a complete disclosure has been returned.
- 4.7 If there are disclosures detailed on the form these must be discussed with the candidate prior to commencement of employment. Having a criminal record does not necessarily prevent employment within MBL CIC.
- 4.8 Depending on the outcome of the disclosure check the offer of employment may be withdrawn.

## **5.0 What to do if a child or vulnerable adult requires medical attention**

- 5.1 If medical attention is needed urgently MBL CIC will gain consent from those with parent responsibility or the child if this is appropriate. MBL CIC will take the *in loco parentis* role until a person with parental/guardian responsibility can respond. If the need for medical attention is urgent then this will take priority over obtaining consent. In this case medical staff involved must be informed if consent has not been obtained from parents/carers/guardians.
- 5.2 MBL CIC staff will ensure they know who has parental/carer/responsibility for every child or vulnerable adult except in the cases of contact with children or vulnerable adults is within educational institutions and settings or in the case of detached youth work.
- 5.3 If a child or vulnerable adult needs to be taken to hospital then another member of staff should be in the vehicle at the same time.

## **6.0 Guidelines For Contact Children (0-18) And Vulnerable Adults**

- 6.1 Staff should avoid private interviews with young people. If a confidential meeting needs to take place, try to conduct the interview in a room with visual access or with an open door. Where possible another person should present or nearby for any interview. This is required in any setting including educational environments such as schools or training centres.
- 6.2 Meetings with young people away from MBL CIC are NOT permitted unless specific approval of another manager has been obtained and with another member of staff in attendance.
- 6.3 If you have to administer First Aid, ensure another person is present
- 6.4 Following any incident where a member of staff feels his/her actions may be misconstrued, report it immediately to your project manager and write down what occurred, as this may be required later
- 6.5 Try to avoid physical contact, especially physical comforting or gratuitous contact such as patting someone on the shoulder or arm.
- 6.6 If physical restraint has to be used to avoid the young person injuring themselves or others, do so with the minimum force.
- 6.7 Be careful to avoid any sexual connotation. Systematic use of insensitive, disparaging or sarcastic comments is also unacceptable
- 6.8 Staff should ensure that their relationships with children, young people/vulnerable adults are appropriate at all times. Staff should also consider the appropriateness of any relationship with volunteers or vulnerable adults – **any** relationship seen to be

inappropriate would immediately instigate disciplinary proceedings and would be deemed as gross misconduct. Please also be aware that an incident of this nature would automatically be reported under Child Protection Regulations.

6.9 Attitudes, demeanour and language all require thought and care

## 7.0 Staff behaviour Guidelines

- 7.1 in events where MBL CIC is solely responsible for children and vulnerable adults, in any event, workshop, interactive session or setting where sole responsibility of child/vulnerable adult has been left with MBL CIC. Parents must be informed if a child or vulnerable adult leaves the setting before the specified finish time (this includes those that we may choose to send home as well as those who fail to return after a break period)
- 7.2 Those under 18 should not leave the premises or setting, even for a short time during specified start and finish times unless we have permission from the parents.
- 7.3 Notification of all trips and visits off site/setting must be given in advance and parental MBL CIC permission via a signed consent form must be obtained
- 7.4 All young people must be warned of possible dangers to themselves and others during the implementation of any interaction, event or workshop. This should not only be in relation to health and safety in MBL CIC, but also safety between home and MBL CIC, for example, remind them about road safety, speaking to strangers, not to accept lifts from people unknown to them etc. This also applies to any interaction with vulnerable adults via detached youth work.
- 7.5 Remember **we are liable if it can be proven that we have not taken sufficient steps** to ensure the safety of our young people.

## 8.0 Responding to a Child Protection Issue

- 8.1 A 'Child Protection' issue may come to your notice in a number of ways:
  - 8.1.1 A child, young person, vulnerable adult may make a direct allegation
  - 8.1.2 A child, young person or vulnerable adult may make a comment which seems to suggest abuse.
  - 8.1.3 A child, young person, vulnerable adult may have bruises or marks which do not have a satisfactory explanation.
  - 8.1.4 A child, young person or vulnerable adult's behaviour may suggest the possibility of abuse.
  - 8.1.5 Something about an adult's behaviour may suggest he/she is not a suitable person to care for children.
- 8.2 If one of the above or something else prompts you to have a concern about a child, young person or vulnerable adult you should report it to the designated Child Protection Coordinator for your place of work. If they are not available you should report



it to one of MBL CIC's other Child Protection Coordinator named in this policy. The designated Child Protection Coordinator must then report to the person in charge of their particular work base.

- 8.3 Staff need to be aware the allegation could be about their designated Child Protection Co-ordinator or the senior member of staff at their work base, the people to whom they would normally report their concerns. They may need to report it to another designated Child Protection Co-ordinator or senior manager but staff must equally be aware that they have a duty to report concerns directly to a duty social worker if there is no one else at the work base or within the organisation to report to.
- 8.4 Staff also need to be aware that if they believe their concern is not being taken seriously they can refer to another designated Child Protection Co-ordinator or directly to a duty social worker at Social Care and Health.
- 8.5 Telephone numbers for Social Care & Health Area offices are included in this policy.

## **9.0 Reporting Concerns/Making a Referral**

- 9.1 As Child Protection Coordinators or Senior Managers, if you are unsure whether to report a concern or make a referral to the children, young adult & families directorate at Social Care & Health you can seek advice from:
  - 9.1.1 Early Years, Child Protection Officer, Schools & Education Protection Officer or Young Persons Protection Officer.
  - 9.1.2 Social Care & Health Area Offices do have advice and referral workers who are available to discuss concerns and give advice whether a referral should be made.
- 9.2 If you need to report a concern or allegation to Social Care and Health, Children, Young People & Families Directorate you must have as much of the following information available as possible:
  - 9.2.1 Name of child, young person or vulnerable adult.
  - 9.2.2 Name of G.P.
  - 9.2.3 Ethnic origin and parent/ carer ethnic origin.
  - 9.2.4 Language spoken at home. (in case an interpreter is needed)
  - 9.2.5 Address of child, young person or vulnerable adult.
  - 9.2.6 Relevant contact details for parent/carers
  - 9.2.7 Dates and times of all your records of concerns
  - 9.2.8 Details of what prompted your concerns
  - 9.2.9 Details of previous concerns if any.
  - 9.2.10 what was said by those concerned
  - 9.2.11 whether there are any visible indicators such as bleeding or bruising etc
  - 9.2.12 Who else has been told of your concerns
  - 9.2.13 Was the child able to say what had happened
  - 9.2.14 Any action you have taken, such as talking to parents.
- 9.3 Following the telephone conversation you may be asked to follow this up in writing possibly by completing a multi-agency referral form.

- 9.4 Once you have made your referral, you have fulfilled your responsibility to the child. If a social worker has not contacted you in 48 hours, you should make contact with them again.
- 9.5 If it is decided by the social workers there is no cause for concern, but you subsequently still feel worried, you must phone again and stress your concern to the social worker. Remember it is important to record, date and time of any telephone conversations you may have with social workers ensuring the name of the person you have spoken to.
- 9.6 On very rare occasions it may be necessary to act quickly, for example to protect a child, young person, vulnerable adult from a drunk parent/carer. In this instance you must contact the police. If a child is brought into your care with serious injuries, call an ambulance and go to the nearest accident and emergency department, ensuring you have their record details with you.**
- 9.7 When contacting social care health make it clear whether you are seeking advice or making a referral. Always state this is a child protection concern.
- 9.8 When making a referral to Social Care & Health the parents/carers should be contacted before the referral is made unless doing so would:
- 9.8.1 Put the child or another child at increasing risk of harm.**
- Or**
- 9.8.2 A member of staff is at risk of harm (including situations where there is an allegation involving staff)**
- Or**
- 9.8.3 You think by notifying the parents/carers could tamper a criminal investigation by allowing possible interference with evidence.**
- 9.9 If you have tried to make contact with the parents but are unable to do so it is not appropriate to delay the referral and therefore the referral would be made before the parent/carers have been informed.

## **10.0 Procedures when an allegation is made against a member of staff**

- 10.1 For procedural purposes a member of staff is considered to be a "person in a position of trust". The following procedures should be followed by any person considered to be a person in a position of trust.
- 10.2 If a concern arises or an allegation is made against any person in a position of trust, that raises a query as to their suitability to work with children, young people or vulnerable adults (this may include a cleaner/cook/gardener/student/staff member or volunteer) we will immediately take the person to one side and inform them that an allegation has been made or a concern raised against them.

**We will not at this point tell the person the nature of the allegation.**

- 10.2 We will remove the person from any direct contact with children, young people or vulnerable adults; this may mean **Suspension without prejudice**. It is important we stress **without prejudice**.
- 10.3 We will ensure that someone in the organisation is designated to offer support to the member of staff. If necessary making contact on a daily basis. This person will not discuss the allegation with the person.
- 10.4 If the parent/carer of the child, young person or vulnerable person is not already aware of the concern, we will immediately inform them (if at all possible try to ensure the confidentiality of all parties concerned)
- 10.5 We will contact Birmingham CASS - 0121 303 1888
  - 10.5.1 We will contact Birmingham Safeguarding Children's Partnership LADO - 0121 464 2612
- 10.6 If appropriate we will inform Ofsted of the concern and our actions to date. (Always if the child is in nursery or the Training Centre).
- 10.7 We will fully co-operate at all times with any external investigation which may include a multi-agency "position of Trust Co-ordination meeting", and will take on board any advice given in relation to the allegation.
- 10.8 If the allegation is found, we will take the person through a disciplinary process and dismiss them, we will also refer their name to the secretary of state for possible inclusion in the list of people banned from working with children.
- 10.9 If not proven we will follow the advice given by the Principal Officer for Social Care & Health and the Child Protection Officer for early years education, young persons and vulnerable adults.
- 10.10 This process is only to be followed when concerns arise or allegations are made around "persons in a position of trust".
- 10.11 In the Appendix there is a checklist for Handling and Recording allegations or complaints made against a member of staff.

## **11.0 Staff Protection**

- 11.1 It is important that staff do everything possible to protect themselves in positions where allegations could be made against them. They need to be aware of their vulnerability to allegations and must address their practice accordingly. Wherever possible make sure that people can observe what you're doing particularly if you are working with just one child, young person or vulnerable adult. If there are situations when you need to work on a one to one basis away from the main group make sure other staff know where, or what you are doing and who you are with. Whenever possible make sure that you are working in a room with internal windows or viewing panels in the door so that you can be easily observed.
- 11.2 Staff should give considered regard:
  - 11.2.1 Appropriate touch and contact

- 11.2.2 Appropriate care and contact
- 11.2.3 Out of hours care and contact
- 11.2.4 Out of hours contact with children, young people and vulnerable adults
- 11.2.5 Use of letters, mobile phones, texts and emails
- 11.2.6 Appropriate guidelines, policies about use of the internet
- 11.2.7 Behaviour policy
- 11.2.8 Visibility in any individual contact with children
- 11.2.9 Ensuring potential and managerial consent where individual work with children, young children and vulnerable adults when required
- 11.2.10 Areas of practice requiring joint/paired work
- 11.2.11 Communication and confidentiality policy/guidance

**11.3 Staff should be aware that any allegation even unsubstantiated may be recorded on future DBS checks.**

**12.0 Recording System**

12.1 It is extremely important that dated and timed recordings are kept of all Child Protection incidents prior to and following a referral to the appropriate authority being made. You must record the name of everyone you speak to and the outcome of any conversations including telephone calls. You must use the attached form for recording of all incidents of suspected abuse.

**12.2 Always:**

- 12.2.1 Report as soon as you have a concern
- 12.2.2 Record information verbatim using the actual words of the child, young person or vulnerable adult noting any questions they raise.
- 12.2.3 Note dates, times, who was present, positions in the room, anything factual about the child, young person or vulnerable adults appearances.

**12.3 Never:**

- 12.3.1 Investigate the allegation yourself with or without others
- 12.3.2 Ask leading questions
- 12.3.3 Ask the child, young person or vulnerable adults to write down their own account.
- 12.3.4 Take photographs of marks.
- 12.3.5 Attempt any medical judgements
- 12.3.6 Arrange a medical examination
- 12.3.7 Tape/video record an interview
- 12.3.8 Ask a child to remove clothing. Staff should always be aware of their own vulnerability at this point and should take steps to minimise risk to themselves whilst supporting the child.
- 12.3.9 Promise not to tell someone. You will have to if you have a concern.

**13.0 Confidentiality**

- 13.1 It is important at all times to respect and appropriately protect children, young people and vulnerable adult's rights to confidentiality.
- 13.2 It is important however when a disclosure is made to you or you believe is about to be made to you, you **must** never promise **not** to tell someone, explain to them you will have to if you have a concern. State that if you believe what they tell you is going to put themselves or another person at risk you will have to share the information.
- 13.3 When sharing information with other people this should only be on a need to know basis, you should be mindful that you do not tamper or contaminate any investigation that will follow.
- 13.4 It is important that you understand any information given to you that puts the person or anyone else at risk cannot be kept confidential.
- 13.5 You may share concerns with a child, young person or vulnerable person, parents or carers only if you are sure that by doing so you are not exposing them to greater risk.
- 13.6 If the allegation is made against a member of staff leading to them being suspended without prejudice, the remainder of the staff team should only be informed that this has happened and not the details of the allegation.

#### **14.0 Online safety**

- 14.0.1 There's now a link to new DfE guidance on teaching online safety in schools which My Baobab Learning CIC will be familiar with and encourage the learning of children and young people that we support. You can find the details in the below link: <https://www.gov.uk/government/publications/teaching-online-safety-in-schools>

#### **14.1 USE OF COMPUTER EQUIPMENT AND YOUNG PEOPLE**

- 14.1.1 All communication when contacting young people on official works business should be conducted using work issued ICT computer equipment.
- 14.1.2 Personal ICT computer equipment must **NOT** be used when communicating with clients or young people.

#### **14.2 Communication with Young People**

- 14.2.1 Communication with any clients and young people must always take place with the appropriate person e.g. Referrer, Appropriate adult unless the child is the appropriate contact.

- 14.2.2 Any contact made by to a young person must be to a number that is held on file for the young person.
- 14.2.3 Any collection of additional contact details **MUST** be logged to show
- 14.2.4 Who the contact information was provided by
- 14.2.5 That consent has been provided by the data subject for contact to be made with this information, unless the person providing that information e.g. An Appropriate adult can provide consent
- 14.2.6 The date the information was collected
- 14.2.7 Any communication must be conducted in accordance with the My Baobab Learning CIC Staff Conduct Policy and be strictly for the purposes of their role. Any and all contact that may be deemed as inappropriate, will be the subject of Disciplinary procedures and may result in the termination of employment.
- 14.2.8 My Baobab Learning CIC staff/volunteers/partners must **NOT** connect, become friends with or follow any young person employing our services.
- 14.2.9 Young people **MUST** be directed to My Baobab Learning CIC official social media accounts.
- 14.2.10 Any Breach of this policy will become the subject of Disciplinary procedures and may result in the termination of employment.

## 14.0 Definitions

WORD	DEFINITION
<p><b>Child:</b></p> <p>(BHES Child Protection Training for Designated Senior Persons)</p>	<p><b>A child is a person who is less than 18 years of age</b> as defined by the Children’s Act 1989, and UN Convention on the Rights of the Child (came into force in the UK in 1992) and the Children’s Act 2004 (for most purposes)</p>
<p><b>Young Person:</b></p> <p>(<a href="http://www.everychildmatters.gov.uk/delivering/services/multiagencyworking/glossary">www.everychildmatters.gov.uk/delivering/services/multiagencyworking/glossary</a>).</p>	<p><b>The term “Young Person”</b> is used in other statutes, but not always with the same definitions as that set out in the Children and Young Persons Act 1933 (which still provides the main regulatory framework for children in the workplace). Health and Safety regulations, for example, define a child as someone who is not over the minimum school leaving age, and a young person as anyone under 18.</p> <p>You must remember that the preference for the term “children and young people” also reflects the fact that many teenagers under the age of 18 strongly dislike being referred to as children.</p> <p>The term “Young People” is also often used by some advice and information services, for example to include young adults aged 18-25. Care should be taken when using “Young Person” in a specific rather than generic or catch-all sense in order to make intended age limits absolutely clear.</p>
<p><b>Safeguarding and promoting the welfare of children:</b></p> <p>(BHES Child Protection Training for Designated Senior Persons)</p>	<ul style="list-style-type: none"> <li>❖ Protecting children from maltreatment</li> <li>❖ Preventing impairment of children’s health or development</li> <li>❖ Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care</li> </ul> <p>And undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.</p>

<p><b>Harm:</b></p> <p>(BHES Child Protection Training for Designated Senior Persons)</p>	<p>Ill-treatment or the impairment of health or development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another;</p> <ul style="list-style-type: none"> <li>❖ <b>Development</b> means physical, intellectual, emotional, social or behavioural development.</li> <li>❖ <b>Health</b> means physical or emotional health</li> <li>❖ <b>Ill-treatment</b> includes sexual abuse and forms of ill-treatment which are not physical.</li> </ul>
<p><b>Significant Harm:</b></p> <p>(BHES Child Protection Training for Designated Senior Persons)</p> <p><b>To understand and identify significant harm, it is necessary to consider:</b></p>	<p>The question of whether harm suffered by a child is significant turns on the child's health and development. His/her health or development shall be compared with that which could reasonably be expected of a similar child.</p> <ul style="list-style-type: none"> <li>❖ The nature of harm, in terms of maltreatment or failure to provide adequate care;</li> <li>❖ The impact on the child's health and development;</li> <li>❖ The child's development within the context of their family and wider environment</li> <li>❖ Any special needs, such as a medical condition, communication impairment or disability that may affect the child's development and care within the family;</li> <li>❖ The capacity of parents to meet adequately the child's needs.</li> <li>❖ The wider and family context.</li> </ul>



## Recording of Child Protection Concerns

Child's Name	
Date of Birth	
Is the complaint written or verbal	
Complaint made by	
Relationship to child	
Parent/carers name, Address and contact Details?	
School Link/Mentor Name (if Appropriate)	
Date of alleged incident(s)	
Did the Child attend on this/these dates?	Y N
Was the staff member present on the alleged date	Y N
Name and position of member of staff Complaint was first reported.	
Date and Time	
Signed by Line manager with whom concerns have been Discussed	
Date and Time	
Name of person contacted at Social Services	
Date and Time contacted	
Date letter of referral sent to social services:	
Have OfSTED been informed?	Y N Date .....
Further Actions advised by OfSTED and Social Services?	

Details of concern /Incident/allegation/observation

Use exact descriptions of what was said by the child or young person. record observations of injuries or behaviours giving cause for concern.

[Large empty area for recording observations]

Please sign and date:

Staff member:	
Project Manager:	