

Safeguarding Children,  
Young People and  
Vulnerable Adults  
Policy and Procedure

May 2018  
Version 2

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## **1. SCOPE**

1.1 This policy applies to:

- (a) Employees, workers (this includes bank, casual, and sessional workers), agency workers, contractors, apprentices, students, secondees, volunteers, Trustees, and Directors (hereafter referred to as "Colleagues") of YMCA England & Wales and its subsidiaries (hereafter referred to as "the Organisation"); and
- (b) All other persons supporting, providing or delivering services for or on behalf of the Organisation (hereafter referred to as "Partner Organisations").

1.2 This policy is to be read by all those covered under the scope of this policy, in conjunction with the Safeguarding Procedures, the Organisation's Grievance, Disciplinary, Equal Opportunities, Anti-Harassment and Bullying, Data Protection, Whistleblowing, Health & Safety, IT and Social Media policies.

1.3 Colleagues are expected to comply with this policy at all times. Failure to comply may be detrimental to Children, Young People and Vulnerable Adults (here after, "CYPVA"); it may also result in legal liability for the Organisation and/or have a detrimental impact on the Organisation's reputation. Additionally, if you are working under a contract of employment, this policy forms part of the contract of employment and any breach of the policy, including falling below the standards set out below, will be a potential ground for dismissal. If you are not working under a contract of employment (for example, you are a volunteer or trustee), a breach of the policy (including falling below the standards set out below) may mean that we have to ask you to cease being a volunteer or trustee.

## **2. PURPOSE**

2.1 This policy sets out the Organisation's commitment to ensuring that CYPVA who use our services are protected and to provide all Colleagues with the overarching principles that guide our approach to safeguarding.

2.2 Colleagues should understand the procedures for recognising, responding to and referring any concerns, allegations or disclosures of harm or abuse in accordance with the Procedures.

### 3. DEFINITION OF TERMS

3.1 **Child or Young Person** – The term ‘child’ or ‘young person’ applies to any person under the age of 18 years.

3.2 **Vulnerable Adult or Adult at Risk** – The term ‘vulnerable adult’ or ‘adult at risk’ applies to any person aged 18 or over who is or may be in need of care and support (e.g. health care, relevant personal care or social care) and is experiencing or is at risk of abuse or neglect and as a result of this is unable to protect themselves from either the risk or experience of neglect or abuse.

(It should be noted that whereas the methods of planning for the protection and safety of vulnerable adults are very similar to that of children, the legislative framework is very different. This particularly applies to such matters as levels of responsibility and reporting abuse when the adult has a legal status quite different from that of a child.)

3.3 **Volunteers** – Anyone volunteering for YMCA England and Wales, regardless of their role, including trustees

3.3 **Safeguarding** means protecting children from maltreatment; preventing impairment to their health or development; taking action to enable all children to have the best life chances and ensuring children grow up in circumstances consistent with the provision of safe and effective care. In relation to vulnerable adults it means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse and neglect whilst at the same time making sure that the adult's wellbeing is promoted.

3.4 **Child Protection** is part of safeguarding and promoting welfare and is the activity undertaken to protect specific children who are suffering or likely to suffer significant harm. The welfare of the child is paramount.

3.5 **Abuse and neglect** are forms of maltreatment of a child or vulnerable adult. Somebody may abuse or neglect a child or vulnerable adult by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family, in an institutional or in a community setting; by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or

adults or another child or children. Abuse can be physical, sexual, emotional, financial or due to neglect. Abuse of vulnerable adults can vary from treating someone with disrespect in a way which significantly affects the person's quality of life, to causing actual physical suffering. Abuse can be a single or repeated act or omission, which causes harm or distress. Abuse can be physical, financial, discriminatory, due to neglect or omission, psychological, sexual, organisational or as a result of self-neglect, modern slavery, domestic violence. See Appendix 1 for more information and for potential indicators of abuse.

**3.6 Regulated activity** – The definition of regulated activity for work in the Organisation in relation to children comprises, in summary:

- (a) unsupervised activities: teaching, training, instruction, care for or supervision of children, or providing advice or guidance on well-being, moderating a public electronic interactive communication service which is likely to be used wholly or mainly by children or driving a vehicle only for children;
- (b) work for a limited range of establishments ('specified places'), with opportunity for contact: e.g. schools, children's homes, childcare premises. Not work by supervised volunteers;
- (c) relevant personal care, e.g. washing or dressing; or health care by or supervised by a health care professional;
- (d) registered childminding; and foster-carers;
- (e) day to day management or supervision of those carrying out regulated activity (or which would be regulated activity if it was unsupervised).

Work under (a) or (b) is regulated activity only if done frequently (once a week or more often), on 3 or more days in a 30-day period or overnight.

Work under (c), (d) or (e) is always regulated activity.

Any frequency (even a one-off occurrence) of one of the following activities is regulated activity relating to an adult:

- Providing healthcare;
- Providing personal care;
- Providing social work;
- Assistance with general household matters;
- Assistance in the conduct of a person's own affairs;

- Conveying; and
- Day to day management or supervision of regulated activity.

#### **4. GENERAL PRINCIPLES**

- 4.1 All CYPVA have the right to be protected from abuse regardless of their age, gender, disability, culture, language, racial origin, religious beliefs, sexual identity, personality or lifestyle.
- 4.2 The Organisation recognises the importance of its work with CYPVA and its responsibility to protect and safeguard their welfare.
- 4.3 As one of its major activities the Organisation seeks to serve the needs of CYPVA promoting holistic development. In doing so, the Organisation takes seriously the welfare of all CYPVA who come onto its premises or who are involved in any of our activities.
- 4.4 We aim to ensure that all CYPVA are welcomed into a safe, caring, environment with a happy and friendly atmosphere.
- 4.5 It is the responsibility of everyone covered under the scope of this policy to protect and safeguard CYPVA and to report any concerns, allegations or disclosures of abuse in accordance with the Procedures.
- 4.6 The Organisation recognises its responsibility to implement appropriate and comprehensive policies and procedures for safeguarding and to review them regularly, which are designed to recognise, respond and refer such abuse.
- 4.7 We are committed to supporting, resourcing and training those who work with CYPVA and to provide ongoing support and supervision, including support for Colleagues in reporting any concerns, allegations or disclosure of abuse.
- 4.8 We are committed to checking the suitability of all those who work with CYPVA and anyone else covered under the scope of this policy.
- 4.9 The Organisation is committed to maintaining good links with the statutory safeguarding authorities.

## **5. OUR COMMITMENT**

5.1 The Organisation seeks to keep CYPVA safe by:

- (a) Valuing them, listening to them and respecting them and taking steps to ensure they understand how to raise a concern;
- (b) Providing the Organisation with a comprehensive safeguarding strategy and a comprehensive portfolio of policies and procedures (including complaints and whistleblowing policies) and reviewing them regularly;
- (c) Appointing a Designated Safeguarding Officer (DSO), a deputy DSO and a lead board member for safeguarding;
- (d) Operating safe recruitment procedures, ensuring all necessary checks are made;
- (e) Ensuring that positions are risk assessed to identify the levels of Disclosure and Barring Service Check required;
- (f) Ensuring that the Organisation has policies and systems in place for the recording and storing of information professionally and securely;
- (g) Ensuring that there is a consistent and effective response to any concerns, allegations or disclosures of abuse which are raised in accordance with the Procedures;
- (h) Providing effective management for Colleagues through supervision, support, training and quality assurance measures and supporting Colleagues in reporting and investigating any concerns, allegations or disclosures of abuse;
- (i) Ensuring Colleagues have a knowledge and understanding about CYPVA protection and that they receive appropriate training on adhering to the Organisation's policies and procedures;
- (j) Enabling all covered under the scope to follow best practice in preventing abuse from occurring within our Organisation;
- (k) Sharing information about safeguarding and good practice with children, their families, carers and Colleagues;
- (l) Using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and carers appropriately;

- (m) Ensuring that we provide a safe physical environment for our children, young people, staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance.

## **6. RESPONSIBILITIES**

- 6.1 It is the responsibility of the Board of Trustees to ensure that there is a robust policy and procedure for safeguarding, to monitor safeguarding issues at each Board meeting and to make Serious Incident Reports to the Charity Commission.
- 6.2 The DSO and the Director of Resources are responsible for reviewing the policy at least annually for formal approval by the Board of Trustees.
- 6.3 Managers and the DSO are responsible for ensuring that Colleagues are aware of and comply with the Safeguarding Policy and Procedure and that they receive training appropriate to their role.
- 6.4 It is the responsibility of all Colleagues to be familiar with the Safeguarding Policy and Procedure, to reread it annually and to be aware of other policies and procedures including in relation to Whistleblowing and Data Protection.
- 6.5 It is the responsibility of all Colleagues to promote the wellbeing of the CYPVA with whom they work.
- 6.6 It is the responsibility of all Colleagues who work with Partner Organisations, contractors and volunteers to ensure that they agree to comply with the Safeguarding Policy and Procedure.
- 6.7 It is the responsibility of all Colleagues who receive an allegation or disclosure of abuse from any source, or who suspect abuse to report their concerns to their line manager and/or the DSO using the Referral Form at Appendix 2. In the situation where an allegation or suspicion of abuse involves or implicates the line manager or DSO they should inform the Director of Resources.
- 6.8 In the situation where an allegation or suspicion of abuse involves or implicates the Director of Resources or another member of the Senior Leadership Team, they should inform the Chief Executive Officer. If the allegation or suspicion involves or implicates the



Chief Executive Officer, the matter should be referred to the Board of Trustees' Safeguarding Lead.

- 6.9 The DSO receiving allegations is responsible for referring the concerns to the appropriate bodies, maintaining confidential records and reporting matters to the trustees so that they may consider whether to make a Serious Incident Report to the Charity Commission.
- 6.10 In the case of allegations relating to Colleagues it is the responsibility of the DSO to liaise with the Local Authority Designated Officer (LADO) or the Local Adult Social Care office before progressing the issue.
- 6.11 It is the responsibility of the DSO to make any required referrals to the Disclosure and Barring Service (DBS).

## **7. CONTACT DETAILS**

- 7.1 If required, referrals to external agencies will be made by the DSO. Such referrals should be made as soon as possible once a concern has been received and certainly no more than 24 hours later. Referrals should be made using the Referral Form at Appendix 2.
- 7.2 Concerns regarding any of our Colleagues must be dealt with by the DSO, in liaison with the Local Authority Designated Officer (LADO). See section 10.2 of the Safeguarding Procedures.

Designated Safeguarding Officer: Human Resources Manager

Deputy Designated Safeguarding Officer: Director of Income Generation

Senior Lead for Safeguarding: Director of Resources

Local Authority Designated Officer: contact Local Authority of abused

CEOP: [www.ceop.police.uk](http://www.ceop.police.uk)

NSPCC Helpline: 0808 800 5000

ChildLine: 0800 1111

## **8. POLICY MONITORING AND REVIEW**

This policy will be reviewed annually by the Designated Safeguarding Officer and Director of Resources.

## **PROCEDURES**

### **9. COLLEAGUES**

#### 9.1 Recruitment and Vetting

- (a) It is a criminal offence to allow someone to work with CYPVA if they are barred from doing so.
- (b) The Organisation's activities do not qualify as a regulated activity, however, Retail staff regularly work directly with children or vulnerable adults. Basic screening of all applicants for employment includes a written application, personal interviews and at least two reference checks. All Colleagues will be required to complete a criminal record declaration and two references will be taken up and verified.
- (c) For those working directly with children, at least one of the references should be from the most recent setting where the applicant worked with children.
- (d) Where the activity of the role means that the Organisation is required to request a Disclosure and Barring Service (DBS) check (i.e. basic, standard or enhanced with or without a check of the barred list), a check will be undertaken at the appropriate level.
- (e) As appropriate, DBS disclosures/checks of the DBS Update Service will be repeated during employment. For those working directly with CYPVA this will be on at least a five yearly basis. Refusal to comply could be grounds for dismissal for gross misconduct.
- (f) On an annual basis all staff and volunteers will complete a confidential annual declaration form regarding their ongoing suitability to continue working with CYPVA.

#### 9.2 Induction and training

All Colleagues will receive basic training in safeguarding CYPVA, identifying and responding to evidence or suspicions of abuse. This training is included in the induction process for all Colleagues and is then supplemented by further training and individual supervision for those working with CYPVA. Ongoing safeguarding training will be provided throughout employment as appropriate to the role.

#### 9.3 Barring and Criminal Offences

- (a) Employees who, whilst employed with us, become barred from working with children and / or vulnerable adults must inform their line manager and HR immediately so that appropriate action (which may include redeployment or dismissal) can be taken. Failure to inform will result in dismissal.
- (b) If an employee is facing criminal charges or is convicted of a criminal offence they must inform their line manager and HR immediately (and complete a Declaration of Criminal Background form) so that appropriate action (which may include redeployment or dismissal) can be taken. Failure to inform will result in dismissal.

## **10. ALLEGATIONS / SUSPICIONS OF ABUSE**

### 10.1 Referrals

- (a) A child, young person, vulnerable adult, member of staff, volunteer, relative or member of the public may disclose to a Colleague information about an incident or incidents that could be construed as abuse. Colleagues must:
  - Find an appropriate and early opportunity to explain that it is likely that the information will be shared with others. Do not promise to keep secrets even if the CYPVA says that they will 'only tell' if it is a secret. If the CYPVA decides not to tell you further information in case you tell others, you must record that s/he wanted to make a disclosure so that the DSO can follow up as necessary (which may include notifying the relevant agencies that an individual may be at risk);
  - Listen to and record exactly what is said;
  - Ask questions only to seek clarification and make sure they are not leading questions. Do not attempt to 'interview' a child or vulnerable adult as this is a highly sensitive and specialised area and you may inadvertently do more harm than good;
  - Explain what will happen next and who will be told;
  - Ask if the person is injured in case immediate medical treatment is required. If emergency medical treatment is required, call an ambulance and while you are waiting for it to arrive, get help from your first aider. If the child is in

immediate danger, remain with him/her and call the police, or if the child is elsewhere, contact the police and explain the situation;

- Every allegation must be recorded using the Referral Form at Appendix 2 and reported to a DSO, whether or not the staff member/volunteer hearing the allegation believes it is well founded. See the Guidance for dealing with a Disclosure at Appendix 3 for further details.
- (b) If a Colleague believes that a child/young person or vulnerable adult has injuries or requires medical attention they should be supported in gaining access to emergency treatment. The clinical staff should be informed of the nature of the suspicions about the source of the injury so that they can take steps to ensure that potential evidence is not destroyed or compromised.
- (c) If a Colleague suspects abuse, it is their responsibility to report their concerns to a DSO or their line manager who will then report the issue immediately to the DSO. They should give as much detail as possible about the nature of their concerns and the time, place, content and nature of any discussions with anyone else involved.
- (d) Grounds for suspecting that abuse is occurring may also be based on personal knowledge of the child/young person or vulnerable adult and observations of changes in their mood, behaviour or personal presentation, as well as evidence of injury or disclosure. These indicators should be reported to the DSO and recorded in detail.
- (e) The DSO will document the full details of the situation and make further enquiries if necessary to ensure that the child or young person or vulnerable adult is protected from any further harm while the appropriate authorities are informed. Where risk of harm is suspected, the manager/DSO will take further steps to protect that child/young person or vulnerable adult from further harm.
- (f) The DSO will decide who should inform the child's family and when they should be informed.
- (g) If there is not an immediate explanation, the suspicion that abuse has occurred must be referred by the DSO to the LADO or Local Adult Social Care office in accordance with the local authority's procedures and within one working day of being advised of the concern.

- (h) If the DSO decides, after investigation, that a referral is not required (for example independent witnesses to an accident) the incident must still be fully documented and the senior DSO informed.

## 10.2 Concerns regarding employees or volunteers

- (a) If any concerns or allegations relate to a Colleague, the DSO must be informed immediately and they will consult the LADO or Local Adult Social Care office prior to any action and before the Colleague is informed. This is to ensure that child/vulnerable adult protection processes and any criminal investigations are not compromised. In the absence of the DSO or Deputy DSO, this contact should be made by the Director of Resources and, in either case, must be done within one working day of being advised of the concern.
- (b) If an allegation is received out of office hours that requires immediate attention then the DSO should consult the Children's Social Care Emergency Duty Team/the Local Adult Social Care Emergency Duty Team or the local police and then inform the LADO.
- (c) An allegation against a Colleague could come from a number of sources including a report from a child/vulnerable adult, a concern from a colleague or a complaint by a parent or carer. It may also arise from the volunteer's/employee's life outside work.
- (d) When informed of a concern or allegation, the DSO must not investigate the matter or speak to the child/vulnerable adult, parent, volunteer, employee, witness etc. They must obtain written details of the concern/allegation, signed and dated by the person receiving or making the allegation; approve and date the written details and record any additional information. The LADO or Local Adult Social Care office must then be contacted and the allegations discussed with them. The LADO or Local Adult Social Care office and the DSO will consider how much information can be shared with the Colleague, whether a police investigation may be required, whether the child needs additional support, if anyone else needs to be informed and what the next steps will be.
- (e) Where, as a result of investigation, a Colleague is permanently removed from regulated activity through dismissal or permanent transfer (or would have if the person had not left, resigned, retired or been made redundant), the DSO must refer to the DBS if he/she believes that the

Colleague, in summary, has engaged in conduct (including by omission):

- which endangers or is likely to endanger a child or vulnerable adult
- which if repeated against or in relation to a child or vulnerable adult would endanger or be likely to endanger the child or vulnerable adult
- which involves sexual material relating to children (including possession of such material)
- which involves sexually explicit images depicting violence against a person (including possession of such images)
- which is of a sexual nature involving a child; or
- has harmed a child or vulnerable adult (e.g. there has been no relevant conduct but a risk of harm to a child or vulnerable adult exists); or
- has been cautioned or convicted of an automatic barring offence.

(f) For further information please see: [DBS guidance about making referrals](#)

(g) We want to encourage staff and volunteers to feel confident about raising concerns about the actions and attitudes of colleagues and want to create an atmosphere of transparency, openness, shared good practice and professionalism. If a concern is raised but the individual does not believe it is being dealt with appropriately then the individual should speak to the DSO and, if still not satisfied, could use our Whistleblowing Procedure or contact the LADO or Local Adult Social Care office directly.

### 10.3 Concerns regarding another child (peer-to-peer abuse)

(a) Where a concern or allegation relates to another child, it should be referred to the DSO who will decide, in consultation with the Colleague responsible for the child, the Colleague's manager/supervisor and if necessary the LADO, whether the problem behaviour constitutes bullying or a child protection concern. If it is a child protection concern, it will be dealt with in accordance with the procedure above.

(b) The Colleague should consider whether either the child who has been allegedly abused or the child has allegedly

perpetrated the abuse is in immediate danger or needs emergency medical attention.

- (c) The DSO will decide who should inform the families of both children (if known) and when to inform them.

#### 10.4 Historic abuse

- (a) It is not unusual for people to disclose experiences of physical, sexual and / or emotional abuse and / or neglect only when they reach adulthood. Our response to allegations by an adult of abuse experienced as a child must be of as high a standard as a response to current abuse because:
  - There is a significant likelihood that a person who abused a child/ren in the past will have continued and may still be doing so;
  - Criminal prosecution may be possible if sufficient evidence can be carefully collated.
- (b) When an adult discloses childhood abuse, the Colleague receiving the information should record the discussion in detail. If possible, the Colleague should establish if the adult has any knowledge of the alleged abuser's recent or current whereabouts and contact with children. The Colleague should refer the allegation to the DSO who will refer it to the LADO.

### **11. DISCLOSURE REVIEWS**

Copies of all Referral Forms will be retained securely and in compliance with the Data Protection Act 1998/General Data Protection Regulations. Safeguarding activity will be reviewed quarterly by the DSO and/or Director of Resources to check the policy is being followed correctly, to identify any areas of practice improvement and/or training needs for staff, and to monitor the outcomes of concerns raised. The DSO and/or Director of Resources will report to the Board of Trustees.

### **12. GOOD PRACTICE WITH CHILDREN, YOUNG PEOPLE & VULNERABLE ADULTS**

- 12.1 When working with CYPVA you should act as an ambassador for the Organisation and embody our core values of caring, honesty, respect and responsibility in all that you do. We aim to create an atmosphere of professionalism, support, caring and transparency

where good practice can be shared and concerns raised and resolved.

## 12.2 Colleagues must:

- (a) Maintain professionalism in their conversations and conduct at all times;
- (b) Maintain appropriate dress and personal appearance when working with CYPVA;
- (c) Not undertake other work e.g. babysitting services, childminding etc. for children / young people who are receiving services from us or attending our provisions;
- (d) Not disclose their home address or personal phone numbers, share information about their personal lives, arrange to meet children, young people, their parents or vulnerable adults socially or allow access to their personal social networking sites, on line messaging systems etc.;
- (e) Never start a personal relationship with a child, young person or vulnerable adult receiving our services or accessing our schemes. In posts working directly with CYPVA any potential relationship with an individual who has previously accessed our provisions should be discussed with the line manager and formally declared. In the interests of transparency, pre-existing relationships must be declared to the line manager and on a declaration of interest form;
- (f) You should treat all CYPVA with respect and dignity befitting their age and always be sure to be mindful of your own language, tone of voice, body language and dress;
- (g) You should never encourage the use of alcohol, drugs or tobacco or the watching /playing of violent films, games etc. and you must never smoke or drink alcohol in front of the children or young people in your care and be prepared to actively intervene to stop any inappropriate games/activities/conversations etc.

## 12.3 Colleagues working with CYPVA should never:

- (a) Engage in any of the following:-



- Participation in rough, physical or sexually provocative games – your role could be to supervise for example a game of rugby etc.
  - Inappropriate and intrusive touching of any form
  - Any scapegoating, intimidating, ridiculing or rejecting of a CYPVA
- (b) Invade the privacy of CYPVA when they are showering or toileting.
- (c) Make sexually suggestive comments to or about a CYPVA, even in 'fun'.
- (d) Let CYPVA involve you in excessive attention seeking, especially that which is overtly sexual or physical in nature.
- (e) Invite a child or young person or vulnerable adult to your home or communicate with them via personal social media / on line messaging sites.
- (f) Use corporal, physical, verbal or psychological punishment in dealing with CYPVA.

Additional guidance on process to be followed for all shop volunteers under the age of 18 is found in the Policy for Involving Young Retail Volunteers Under 18.

### **13. PLANNING**

- 13.1 Colleagues will not plan to be alone with CYPVA in an environment where activities cannot be observed by others. This may mean leaving a door open or staying in a public area.
- 13.2 Those covered under the scope of this policy should not meet CYPVA outside of the Organisation's services or premises without a parent/carer or other member of staff being present; where this is not possible the meeting must take place in a public area.
- 13.3 However, there will be occasions where employees will engage with CYPVA outside of the Organisation i.e. on outings arranged by the Organisation, taking vulnerable adults to professional appointments etc. In these instances there will be appropriate departmental procedures covering these events and a comprehensive risk assessment will be in place.

- 13.4 Ratios of staff to children/young people will be adhered to for appropriate age range; gender and/or specific need.
- 13.5 A minimum of two adults are to be present with a group particularly when it is the only activity taking place on the Organisation's premises. If possible, have at least one male and one female if the group is mixed. A group of solely under 18's must never be taken off the premises with fewer than two adults. The ratio of staff to children/young people in the retail shop setting should be in line with the Retail Children and Young People (Under 18s) Volunteering Risk Assessment
- 13.6 In a situation with a child or young person where privacy and confidentiality are important ensure that any meeting that takes place in a private setting, involves at least one other adult in close proximity who is aware that additional support is necessary. The child / young person should be made aware of their additional presence and any such meetings should preferably be conducted under CCTV surveillance.
- 13.7 Unsupervised routes to and from premises must be appropriate for the safety of children and young people.
- 13.8 A diary or daily log of activities, register of attendees (where practicable), Colleagues present and any significant incidents must be kept for each service delivered.
- 13.9 Children or young people being transported by car must wear seatbelts and should not normally be seated in the front seats. In minibuses children/young people are able to sit in front seats and staff escorts should be seated in the rear if any rear seats are occupied.
- 13.10 Staff/volunteers must not use their own cars to transport children or young people except in very exceptional circumstances and only with the approval of their line manager and the DSO. When driving any children or young people in Organisation owned vehicles, the vehicle tracking system must be activated.
- 13.11 Never be left alone with a young person in a vehicle. Take steps when giving lifts to drop a minimum of two young people off at the last point, involving staff, carers, and parents if necessary.

13.12 All destinations, stops, and areas where the vehicle is stopped for long periods of time must be pre-planned and approved by the employee's line-manager. Any emergency/unplanned departures from the pre-approved travel itinerary should be immediately reported to the line-manager, and if out of hours the Association's Duty Manager, once it is safe to do so. Participants must never travel to, enter, or know the location of private dwellings that are related to staff members.

#### **14. PARTNER ORGANISATIONS**

When working with Partner Organisations, the following clause will be included in agreements which must be signed and dated by the Partner Organisation:

*"The Partner Organisation confirms that they have read and understood our Safeguarding Policy and Procedure and agree to abide by it."*

#### **15. THE USE OF ANY DEVICES THAT CAN TAKE PICTURES OR VIDEO MATERIAL**

15.1 Please remember that only Communications Team are authorised to publish photos, images or moving images on behalf of the Organisation.

15.2 When taking still or moving images the following key principles should be remembered:

- (a) Parents/carers/children, young people and vulnerable adults have a right to decide whether images are to be taken, and how those images may be used.
- (b) Parents/carers/children, young people and vulnerable adults must provide written consent using the standard consent form, to take and use their image, which will be stored confidentially by the Organisation, for images to be taken and used. This consent must state how long the image(s) will be stored for as well as for what purpose(s).
- (c) Care must be taken to ensure that images are not sexual or exploitative in nature, nor open to obvious misinterpretation and misuse.

- (d) All images of children, young people and vulnerable adults will be securely stored and in the case of images used on web-sites, particular care will be taken to ensure that no identifying details facilitate contact with a child, young people or vulnerable adult by a potential abuser.
  - (e) If the Organisation uses external photographers they will be advised of our safeguarding and other pertinent policies and will sign to acknowledge that they have read, understand and will abide by them.
- 15.3 If spectators or visitors are intending to photograph or video at an event/activity, they must be told of our expectations and wherever possible written notices to this effect will be displayed. Any concerns regarding inappropriate or intrusive photography / filming should be reported to the event / activity manager / co-ordinator immediately and dealt with in the same manner as any other safeguarding concern.
- 15.4 In very exceptional and rare circumstances Colleagues may be allowed to take photographs of service users or residents on their own phone or camera but this is only with the express prior permission of their Head of Department or line manager and all images must be downloaded as soon as possible only onto designated YMCA equipment and deleted from the phone/camera.

## **16. THE ROLE OF THE DESIGNATED SAFEGUARDING OFFICER**

- 16.1 The DSO will be appointed from within the Organisation and will be responsible for overseeing the Safeguarding Policy and the way it is put into practice. S/he will be responsible for ensuring Child Protection/Vulnerable Adult issues are reported to the relevant authorities and for maintaining a proper record of any child protection referral, complaint or concern.
- 16.2 The senior DSO will be a senior member of staff with appropriate experience and training in safeguarding procedures and in working with CYPVA. The DSO has a key duty to take lead responsibility for raising awareness with the staff on issues relating to the welfare of CYPVA and the promotion of a safe environment for CYPVA within the Organisation.
- 16.3 The appointed person(s) will be ratified by the Board. The DSO will be accountable to the Chief Executive and the Senior Leadership

Team. S/he will be trained in child protection issues and inter-agency working and will be required to keep up to date with developments in child protection and safeguarding issues.

- 16.4 Where an individual may be implicated the DSO must ensure the case is reported in confidence to the Director of Resources in order for the necessary support and advice to be made available.
- 16.5 The DSO shall ensure that his/her contact details shall be displayed in all appropriate operational sites of the Organisation.

## **17. EXTERNAL AGENCIES / CONTACTS**

- 17.1 Please see section 7 of the policy for the contact details of the Organisation's DSO and deputy DSO.
- 17.2 In an emergency and/or in the unlikely event that the DSO is unavailable then, depending where the child lives, a referral can be made to or advice sought from:
  - (a) The local children's social care team or local adult social care team
  - (b) Police – 999 or 101
- 17.3 The local children's social care team or local adult social care team can also be contacted for advice and guidance in relation to safeguarding. The NSPCC can also be contacted for advice or guidance on their free helpline - 0808 800 5000.
- 17.4 These procedures are to be read in conjunction with the Safeguarding Policy, the Grievance, Disciplinary, Equal Opportunities, Anti-Harassment and Bullying, Data Protection, Whistleblowing, Health & Safety, IT, Social Media policies and Involving Young Retail Volunteers Under 18.

## APPENDIX 1

### Indicators of Abuse

#### Children

|                 |   |
|-----------------|---|
| Physical Abuse  | <p>Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Any injuries not consistent with the explanation given for them</li> <li>• Injuries which occur to the body in places which are not normally exposed to falls, bumps, etc.</li> <li>• Injuries which have not received medical attention</li> <li>• Reluctance to change for, or participate in, games or swimming</li> <li>• Finger marks or multiple bruising</li> <li>• Bruises, bites, cuts, scratches, burns, fractures, etc. which do not have an accidental explanation</li> <li>• Flinching or evidence of pain/discomfort during normal activity</li> </ul>  |
| Emotional Abuse | <p>Emotional abuse is the emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless, unloved or inadequate or causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. It may feature age or developmentally inappropriate expectations. Some level of emotional abuse is involved in all types of ill treatment of a child, though it may occur alone.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging</li> <li>• Nervousness, frozen watchfulness</li> <li>• Obsessions or phobias</li> <li>• Sudden under-achievement or lack of concentration</li> <li>• Inappropriate relationships with peers and/or adults</li> <li>• Attention seeking behaviour</li> <li>• Running away/stealing/lying</li> </ul> |
| Sexual Abuse    | <p>Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not they are aware what is happening. This may involve physical contact, including penetrative (e.g. rape, buggery) or non-penetrative acts or non-contact activities, such as involving children in looking at, or the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.</p>  |

|                 |  |
|-----------------|--|
|                 | <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Any allegations made by the child concerning sexual abuse</li> <li>• Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour, or who regularly engages in age-inappropriate sexual play</li> <li>• Sexual activity through words, play or drawing</li> <li>• Child who is sexually provocative or seductive with adults</li> <li>• Inappropriate bed sharing arrangements at home</li> <li>• Unexplained bruising around or bleeding from the genital area</li> <li>• Stained or bloody underclothing</li> <li>• Unexplained difficulties in walking</li> </ul>  |
| Neglect         | <p>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. It may involve a parent or carer failing to provide adequate food, shelter or clothing, failure to protect a child from physical harm or danger, or failure to ensure access to appropriate medical care or treatment.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Persistent hunger</li> <li>• Weight loss</li> <li>• Poor hygiene</li> <li>• Dress inappropriate to weather or activities</li> <li>• Physical problems and medical needs that are not attended</li> </ul>                                 |
| Organised Abuse | <p>Organised or multiple abuse may be defined as abuse involving one or more abuser and a number of related or non-related abused children and young people. The abusers concerned may be acting in concert to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children for abuse.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Series of complaints from different parents about the same staff/situations/issues</li> <li>• Records regularly being mislaid/poor record keeping</li> <li>• Controlling relationships</li> <li>• Children/activities being visited regularly by “associates” of staff</li> </ul> |

## Adults

|                             |  |
|-----------------------------|--|
| Physical Abuse              | <p>Physical abuse is the deliberate infliction of pain, physical harm or injury and includes withholding or misuse of medication.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Injuries not consistent with falls or offered explanations</li> <li>• Unexplained loss of hair in clumps</li> <li>• Cuts that are not likely to be explained by self-injury</li> <li>• Finger-marks</li> <li>• Flinching or evidence of pain/ discomfort during normal activity</li> </ul>   |
| Psychological abuse         | <p>Psychological abuse is any pattern of behaviour by another that results in harm and may include insults, humiliation, ridicule, bullying, threats, enforced isolation, interference in relationships and contact between consenting adults, coercion, lack of privacy or choice, denial of dignity.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Signs of strain within a relationship and/ or tension when a particular person is present</li> <li>• Indicators that an individual acts differently when a third person is present than at other times</li> <li>• Suggestions of refusal to allow a choice eg to eat or not eat more or less of particular foods, to dress according to preference</li> <li>• Signs of withdrawal or fear or other changes to emotional state</li> <li>• Signs of unexplained sleep or weight loss</li> </ul> |
| Sexual Abuse                | <p>Sexual Abuse is any sexual activity involving but carried out without the informed consent of an adult at risk. Sexual abuse may include sexual intercourse, inappropriate touching, offensive or suggestive language, 'voyeuristic' behaviour and exposure to the suggestive or sexually explicit activities of others, including films, photographs, images etc.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Unexplained bruising around or bleeding from the genital area;</li> <li>• Stained or bloody underclothing</li> <li>• Unexplained difficulties in walking</li> <li>• Reluctance of the person to be alone with an individual known to them</li> <li>• Unusual and inappropriate sexualised language</li> </ul>  |
| Financial or material abuse | <p>Financial abuse is the misappropriation of funds (savings or income) or property of an adult at risk. This may include exploitation, theft or fraudulent use of money, misuse of property or possessions and incurring financial liabilities on behalf of an adult at risk without their</p>  |



|                              |  |
|------------------------------|--|
|                              | <p>informed consent.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Unexplained shortage of money despite a seemingly adequate disposable income</li> <li>• Unexplained withdrawals from savings accounts</li> <li>• Unexplained disappearance of financial documents for example bank statements, receipts for non-routine expenditure</li> <li>• Loss of personal possessions</li> </ul>  |
| Neglect and acts of omission | <p>Neglect may be deliberate or by default where the abuser is not able to provide the care and support needed or may not recognise the need for the care and support to be given. The abuser may also be neglecting themselves.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Persistent hunger and / or weight loss</li> <li>• Poor hygiene</li> <li>• Dress inappropriate to weather or activities</li> <li>• Denial of religious or cultural needs</li> <li>• Physical problems and medical needs that are not attended to</li> <li>• Physical problems and medical needs that are not attended</li> </ul> |
| Discriminatory abuse         | <p>When the adult at risk is harassed or discriminated against because of their age, race, gender, sexuality, religion, disability, culture etc</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Signs of strain within a relationship and/ or tension when a particular person is present</li> <li>• Signs of withdrawal or fear or other changes to emotional state</li> <li>• Unexplained outbursts</li> <li>• Out of character discriminatory language, behaviour</li> </ul>  |
| Organisational abuse         | <p>Where neglect and poor professional practice impact on care. It can occur when poor communication, systems, practice and norms mean the care received is below that what should be expected.</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Medication errors</li> <li>• Poor record keeping</li> <li>• Complaints from service users and their family</li> <li>• Loss of personal possessions / clothing</li> <li>• Controlling relationships between staff and service users</li> </ul>  |
| Self-Neglect                 | <p>Where the adult at risk is neglecting to care for their own personal hygiene, health or surroundings</p> <p>Indicators include:</p>   |

|                   |   |
|-------------------|---|
|                   | <ul style="list-style-type: none"> <li>• Hoarding</li> <li>• Poor personal hygiene</li> <li>• Unexplained weight loss</li> <li>• Wearing the same clothes for a number of days</li> <li>• Physical problems and medical needs that are not attended to</li> </ul>   |
| Modern Slavery    | <p>Includes forced labour, debt bondage, sexual exploitation, criminal exploitation and domestic servitude</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• Not being allowed to travel alone or make decisions</li> <li>• Lack of personal possessions</li> <li>• Reluctance to seek help</li> <li>• Poor levels of nourishment, dress and energy</li> </ul>  |
| Domestic violence | <p>Includes controlling, coercive or threatening behaviour and / or violence between people who are or have been intimate partners or family members</p> <p>Indicators include:</p> <ul style="list-style-type: none"> <li>• 'Honour' based violence</li> <li>• Female genital mutilation (FGM)</li> <li>• Forced marriage</li> <li>• Signs of strain within a relationship and/ or tension when a particular person is present</li> <li>• Signs of withdrawal or fear or other changes to emotional state</li> </ul> |

## APPENDIX 2

### Referral Form for Suspicions or Allegations of abuse of a Child, Young Person or Vulnerable Adult.

This form must be completed as soon as possible after receiving information that causes suspicion or an allegation of the abuse of a child, young person or vulnerable adult. This must be discussed with a designated safeguarding officer as soon as possible. Do not delay by attempting to obtain information to complete the details.

Note: Confidentiality must be maintained at all times. Information must only be shared on a need to know basis i.e. only if it will protect the child, young person or vulnerable adult. Do not discuss this incident with anyone other than those who need to know. Ensure that this form is kept securely and confidentially if in hard copy format or is password protected if stored electronically.

*Continue on a separate sheet of paper if required and attach securely to this form.*

#### **Details of person making this report:**

|                           |
|---------------------------|
| Name:                     |
| Position:                 |
| Contact telephone number: |

#### **Details of child/vulnerable adult:**

|   |
|---|
| Name:   |
| Date of birth:                                |
| Address:                                      |
| Contact telephone number:                     |
| Names and address of parents/guardian/carers: |

#### **Details of person about whom there is concern:**

|                |
|----------------|
| Name:          |
| Position:      |
| Date of Birth: |
| Address:       |

|   |
|---|
| Relationship to child/vulnerable adult: |
|---|

*If you are reporting this alleged incident on behalf of someone else, please provide details of that person:*

|       |
|-------|
| Name: |
|-------|

|           |
|-----------|
| Position: |
|-----------|

|          |
|----------|
| Address: |
|----------|

|                           |
|---------------------------|
| Contact telephone number: |
|---------------------------|

|   |
|---|
| Date this person advised you of alleged incident: |
|---|

|   |
|---|
| Record here the information you were given from this person about the alleged incident: |
|---|

**Details of alleged incident:**

|                           |
|---------------------------|
| Date of alleged incident: |
|---------------------------|

|       |
|-------|
| Time: |
|-------|

|        |
|--------|
| Place: |
|--------|

|                                  |
|----------------------------------|
| Name and addresses of witnesses: |
|----------------------------------|

|                                   |
|-----------------------------------|
| Describe in detail what happened: |
|-----------------------------------|

|  |
|--|
| Describe in detail visible injuries / bruises and concerning behaviour of the child / vulnerable adult, if any (use diagrams if this helps you to describe): |
|--|

|  |
|--|
|  |
|--|

Was the child / vulnerable adult asked what happened: **YES / NO**

If YES, record exactly what the child said in their own words and any questions asked if the situation needed clarification:

|  |
|--|
|  |
|--|

**Details of action taken:**

Detail what action, if any, has been taken following receipt of this information (for example, if you have contacted the police or other emergency services, please provide details):

|  |
|--|
|  |
|--|

Signature \_\_\_\_\_

Print name: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR COMPLETION BY THE DESIGNATED SAFEGUARDING OFFICER ONLY**

**Details of action taken:**

Detail what action, if any, has been taken following receipt of this information:

**ONLY AFTER SEEKING ADVICE FROM THE POLICE / / LADO / LOCAL ADULT SOCIAL CARE OFFICE** were the child / vulnerable adult's parents / carers contacted?

**Details of external agencies contacted:**

|                                |   |
|--------------------------------|---|
| Police                         | Police Station contacted:<br>Name and contact number:<br>Advice received: |
| LADO / Local Adult Social Care | Local authority:<br>Name and contact number:<br>Advice received:          |
| Other                          | Name of organisation:<br>Name and contact number:<br>Advice received:     |

Other information

Signature \_\_\_\_\_

Print name: \_\_\_\_\_ Date: \_\_\_\_\_

**Where a referral has been made to the Police / LADO / Local Adult Social Care office a copy of this form must be sent to them as soon as possible.**

## **APPENDIX 3**

### Guidance when dealing with a Disclosure

#### General Points:

- Show acceptance / belief of what the child or vulnerable adult says (however unlikely the story may sound)
- Keep calm
- Look at the child or vulnerable adult directly
- Tell the young person / child or vulnerable adult you will need to let someone else know – don't promise confidentiality
- Even when a child or vulnerable adult has broken a rule eg used the internet when told not to, they are not to blame for the abuse
- Be aware that the child or vulnerable adult may have been threatened or bribed not to tell
- Never push for information. If the child or vulnerable adult decides not to tell you, then accept that and let them know you are always ready to listen and respond immediately

#### Helpful things you may say or show:

- I believe you (or showing acceptance of what the child or vulnerable adult says)
- Thank you for telling me
- It's not your fault
- I will help you

#### Don't

- Say "Why didn't you tell anyone before?"
- Say "I can't believe it"
- Say "Are you sure this is true?"
- Ask "Why? How? When? Who? Where?"
- Make false promises
- Probe or ask questions other than to clarify points made
- Never make statements such as "I am shocked, don't tell anyone else"
- Say you won't tell anyone else

#### Concluding:

- Reassure the child or vulnerable adult that they were right to tell you and show acceptance
- Let the child or vulnerable adult know what you are going to do next and that you will let them know what happens (you might have to consider referring to the Police)
- Contact one of the DSOs directly or via your line manager as soon as possible

- Consider your own feelings and seek appropriate pastoral support if needed whilst maintaining confidentiality

#### Follow Up

- Make notes as soon as possible (preferably within one hour of being told), writing down exactly what the child or vulnerable adult said and when, what you said in reply and what was happening immediately beforehand (e.g. description of activity)
- Record dates and times of these events and when you made the record. Keep all hand written notes securely, even if these have been typed subsequently
- Report the discussion to your manager and / or one of the DSOs as soon as possible
- You must not discuss your suspicions, allegations or any disclosure with anyone other than those named in this policy.



# Signature Sheet

## Confirmation

I confirm that I have read, understood and accept YMCA England & Wales' policy and procedures for Safeguarding Children, Young People and Vulnerable Adults.

Name:- \_\_\_\_\_  
(Block Capitals)

Signature:- \_\_\_\_\_

Department:- \_\_\_\_\_

Date:- \_\_\_\_\_

**Please keep this signed copy of the signature sheet for your personal records.**



# Signature Sheet

## Confirmation

I confirm that I have read, understood and accept YMCA England's policy and procedures for Safeguarding Children, Young People and Vulnerable Adults.

Name:- \_\_\_\_\_  
(Block Capitals)

Signature:- \_\_\_\_\_

Department:- \_\_\_\_\_

Date:- \_\_\_\_\_

**Please return this fully signed copy of the signature sheet back to the Human Resources Department.**

## YMCA NEWCASTLE SAFEGUARDING PROCEDURES

### SCOPE OF THESE PROCEDURES

These procedures apply to all staff, volunteers, freelance and sessional workers and organisations with whom the YMCA Newcastle may be working in partnership. It relates to everyone that YMCA Newcastle comes into contact with directly or indirectly.

Although this document outlines working practice and conduct for all staff and volunteers whilst at work it also relates to their non-work related personal conduct. Any inappropriate conduct outside work will also be considered most seriously and appropriate action will be taken dependent on the situation.

Everyone is expected to comply with this policy at all times. Failure to comply may be detrimental to Children, Young People and Vulnerable Adults (here after, "CYPVA"); it may also result in legal liability for the Organisation and/or have a detrimental impact on the Organisations' reputation.

Additionally, if you are working under a contract of employment, this policy forms part of the contract of employment and any breach of the policy, including falling below the standards set out below, will be a potential ground for dismissal. If you are not working under a contract of employment (for example, you are a volunteer or trustee), a breach of the policy (including falling below the standards set out below) may mean that we have to ask you to cease being a volunteer or trustee. This policy also relates to people outside the scope of YMCA Newcastle's work where concerns are raised by a third party ie. a YMCA Newcastle client about friends, siblings etc.

Where YMCA Newcastle is working in partnership with other organisations, agreement must be reached with regard to the responsibilities procedures and practices contained in this document. This must be reflected in an agreement by both parties to commit to common practices and procedures in their protection of everyone and responses to issues of abuse whilst working in partnership.

Failure to reach agreement, or a situation arising that causes concern with regard to the partner organisations practice, may lead to cessation of that partnership.

### DEFINITION OF TERMS

**Child or Young Person** – The term 'child' or 'young person' applies to any person under the age of 18 years.

**Vulnerable Adult or Adult at Risk** – The term 'vulnerable adult' or 'adult at risk' applies to any person aged 18 or over who is or may be in need of care and support (e.g. health care, relevant personal care or social care) and is experiencing or is at risk of abuse or neglect and as a result of this is unable to protect themselves from either the risk or experience of neglect or abuse. (It should be noted that whereas the methods of planning for the protection and safety of vulnerable adults are very similar to that of children, the legislative framework is very different. This particularly applies to such matters as levels of responsibility and reporting abuse when the adult has a legal status quite different from that of a child.)

**Volunteers** – Anyone volunteering for YMCA Newcastle, regardless of their role, including trustees

**Safeguarding** means protecting children from maltreatment; preventing impairment to their health or development; taking action to enable all children to have the best life chances and ensuring children grow up in circumstances consistent with the provision of safe and effective care. In relation to vulnerable adults it means protecting an adult's right to live in safety, free from abuse and neglect. It is about people and organisations working together to prevent and stop both the risks and experience of abuse and neglect whilst at the same time making sure that the adult's wellbeing is promoted.

**Child Protection** is part of safeguarding and promoting welfare and is the activity undertaken to protect specific children who are suffering or likely to suffer significant harm. The welfare of the child is paramount.

**Abuse and neglect** are forms of maltreatment of a CYPVA. Somebody may abuse or neglect a CYPVA by inflicting harm, or by failing to act to prevent harm.

Children may be abused in a family, in an institutional or in a community setting; by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or another child or children. Abuse can be physical, sexual, emotional, financial or due to neglect.

Abuse of vulnerable adults can vary from treating someone with disrespect in a way which significantly affects the person's quality of life, to causing actual physical suffering.

Abuse can be a single or repeated act or omission, which causes harm or distress. Abuse can be physical, financial, discriminatory, due to neglect or



omission, psychological, sexual, organisational or as a result of self-neglect, modern slavery, domestic violence. See Appendix 1 for more information and for potential indicators of abuse.

**Regulated activity** – The definition of regulated activity for work in the Organisation in relation to children comprises, in summary:

- (a) unsupervised activities: teaching, training, instruction, care for or supervision of children, or providing advice or guidance on well-being, moderating a public electronic interactive communication service which is likely to be used wholly or mainly by children or driving a vehicle only for children;
- (b) work for a limited range of establishments ('specified places'), with opportunity for contact: e.g. schools, children's homes, childcare premises. Not work by supervised volunteers;
- (c) relevant personal care, e.g. washing or dressing; or health care by or supervised by a health care professional;
- (d) registered childminding; and foster-career's;
- (e) day to day management or supervision of those carrying out regulated activity (or which would be regulated activity if it was unsupervised).

Work under (a) or (b) is regulated activity only if done frequently (once a week or more often), on 3 or more days in a 30-day period or overnight.

Work under (c), (d) or (e) is always regulated activity.

Any frequency (even a one-off occurrence) of one of the following activities is regulated activity relating to an adult:

- a) Providing healthcare;
- b) Providing personal care;
- c) Providing social work;
- d) Assistance with general household matters;
- e) Assistance in the conduct of a person's own affairs; 6
- f) Conveying; and
- g) Day to day management or supervision of regulated activity.

## **PRINCIPLES**

YMCA Newcastle recognises that everyone has the right to freedom from abuse as outlined in the UN Convention of Human Rights. In all work YMCA Newcastle will ensure that the welfare and safety of everyone is paramount and that we

constantly strive to provide an environment free from abuse through implementation of appropriate policies and guidelines.

We value and will respond promptly and constructively to all information presented to us regarding people's safety and welfare.

YMCA Newcastle will respond swiftly and appropriately to all concerns or allegations of abuse within a procedure that:

- Respects and empowers the individual
- Is supportive for YMCA Newcastle workers;
- Avoids collusion with the suspected perpetrator of abuse.

YMCA Newcastle will appoint a Designated Safeguarding Officer who has specific responsibility for monitoring and evaluating Safeguarding practice, ensuring the organisation is kept up to date with evolving Safeguarding practice and providing the main reference for advising and co-coordinating Safeguarding cases. This officer will be responsible for discussing concerns with the following services in any Safeguarding matter:

- Children's Social Care
- Adult's Social Care
- Local Authority designated Officer ( LADO )
- The Police
- Third party agencies involved

The Designated Safeguarding Officer should also ensure that Safeguarding procedures comply with all relevant legislation and other guidance or advice from the Newcastle Local Safeguarding Boards.

We will ensure that all staff are aware of the risk of abuse and receive ongoing training in Safeguarding and good practice.

YMCA Newcastle will also seek external advice and expertise when necessary when reviewing its Safeguarding Policy Practice and Guidelines

## **RESPONSIBILITIES**

The implementation of the safeguarding policy and procedures is mandatory across the full scope of YMCA Newcastle's work, specific responsibilities are outlined below. All staff, as part of their contract, are expected to operate within codes of conduct outlined within the various policies that support the work of YMCA Newcastle. Any behaviour by a member of staff towards anyone else that contravenes the terms of the Safeguarding Policy and Procedures may be considered for disciplinary action which in turn may lead to dismissal.



## **Trustees**

It is the responsibility of the Board of trustees to ensure that there is a robust policy and procedure for safeguarding, to appoint a Trustee with specific responsibility for safeguarding, to monitor safeguarding issues at each Board meeting and to make Serious Incident Report to the charities commissions.

## **Chief Executive Officer**

The Chief Executive Officer is ultimately responsible for the implementation of the YMCA Newcastle Safeguarding Policy and procedures.

### *Responsible for:*

- a. Ensuring that the policy and its accompanying procedures are implemented across the geographical and functional areas of responsibility.
- b. Ensuring that the role of Safeguarding Officer is maintained and for acting as the Safeguarding Officer in their absence.
- c. Ensuring that Safeguarding implications are constantly reviewed across the scope of the service YMCA Newcastle delivers and are fully considered in the development of all new pieces of work.
- d. Considering and authorising any immediate changes in operational policy required due to a Safeguarding incident or near miss.
- e. Ensuring that Safeguarding is considered in all appointments of staff to include volunteers, freelance staff etc.
- f. Informing the Board of Directors of any incidents.

## **Designated Safeguarding Officer**

### *Responsible for:*

- a. Supporting managers and staff with advice on Safeguarding issues and advising management regarding decision and action to be taken in any Safeguarding situation.
- b. Ensuring that the Chief Executive is informed on Safeguarding incidents and advising on Safeguarding issues.
- c. Keeping and monitoring central records of all Safeguarding cases.
- d. Ensuring that the YMCA Newcastle Safeguarding Procedures are regularly reviewed.
- e. Ensuring Safeguarding Training is available, adequate and current.

## **Project Managers**

### *Responsible for:*

- a. Ensuring the policy is fully implemented in their project and that procedures to support the policy are set up as outlined and are complied with.
- b. Referring all Safeguarding issues to the Designated Safeguarding Officer



- c. Ensuring all staff who they line manage are aware of their roles and responsibilities within this policy, including any locally developed guidelines. This must form part of their induction.
- d. Integrating Safeguarding related issues into local recruitment and selection, staff inclusion and project management process such as team meetings, staff supervision.
- e. Ensuring Safeguarding procedures are fully integrated into health and safety procedures such as risk assessment.
- f. Ensuring staff undertake appropriate training in Safeguarding, in consultation with the Designated Safeguarding Officer.
- g. Ensuring that when working in partnership with other agencies a recorded local agreement is reached on managing Safeguarding, sharing of information etc.
- h. Ensuring that staff are able to discuss Safeguarding and abuse issues confidentially and receive guidance and support on action as situations arise. An open and responsive management culture is essential if YMCA Newcastle is to safeguard everyone and support staff effectively. Staff must be confident of the support and guidance in dealing with Safeguarding issues and of receiving personal support for needs that may arise as a result of Safeguarding issues and situations that they may from time to time be professionally involved in.

## **RAISING AND REPORTING SAFEGUARDING ISSUES**

### **Importance of raising concerns**

Everyone working within YMCA Newcastle can play an important part in promoting the safety and protection of people with whom they are working. 'Working together' sets out how different services and professional groups should work together effectively regarding information sharing and communication to ensure good outcomes for people are achieved.

It is **not** the responsibility of anyone working within YMCA Newcastle, in a paid or unpaid capacity to decide whether or not abuse has taken place. It is therefore vital that staff raise **all** cases of suspected or alleged abuse in line with the procedures identified in the next section. It is important to do this as there may already have been concerns expressed by other members of staff that you do not know about and failure to do so may put a person at risk.

It is YMCA Newcastle's policy therefore, that suspicions and allegations of abuse will be reported to the appropriate Local Social Services Department and/or the Police whose duty it will be to take further steps to protect the person and investigate the allegations or suspicions.

There are many reasons why staff may consider not reporting the matter to their line manager.

- You are not sure that your concern is correct
- You have been asked by the person not to tell anyone
- You believe the consequences of raising the issue may not be in, what you believe to be, the best interests of the person.
- The consequences for the alleged abuser may be very serious even if the case is not proven against them (personal reputation).
- You are not sure if the person's story is credible
- The desire to protect a colleague or friend who is implicated.

However the need to safeguard overrides these concerns

### **What to do if a person tells you that they have been or is being abused.**

The following are guidelines on immediate action to be taken following a reporting of abuse.

- React calmly so not to frighten or deter them
- Re-assure them that you are glad they have told you, and it is not their fault
- Don't promise to keep it to yourself, at the earliest opportunity remind them of our confidentiality policy and explain what this means
- Explain that you need to make sure that they will be safe and will have to pass on the information to somebody trusted to deal with it appropriately
- Listen carefully to what they say and take them seriously
- Ask them to tell you what happened in their own words
- It is important to clarify what you have heard, and to establish the basic facts. However avoid leading questions and do not ask them specific questions about explicit details. This is the job of the professional Safeguarding agencies
- If possible make brief notes during the initial disclosure, explaining to them why you are doing this. If it not possible to do at the time, make notes as soon as possible afterwards.

Your information should include:

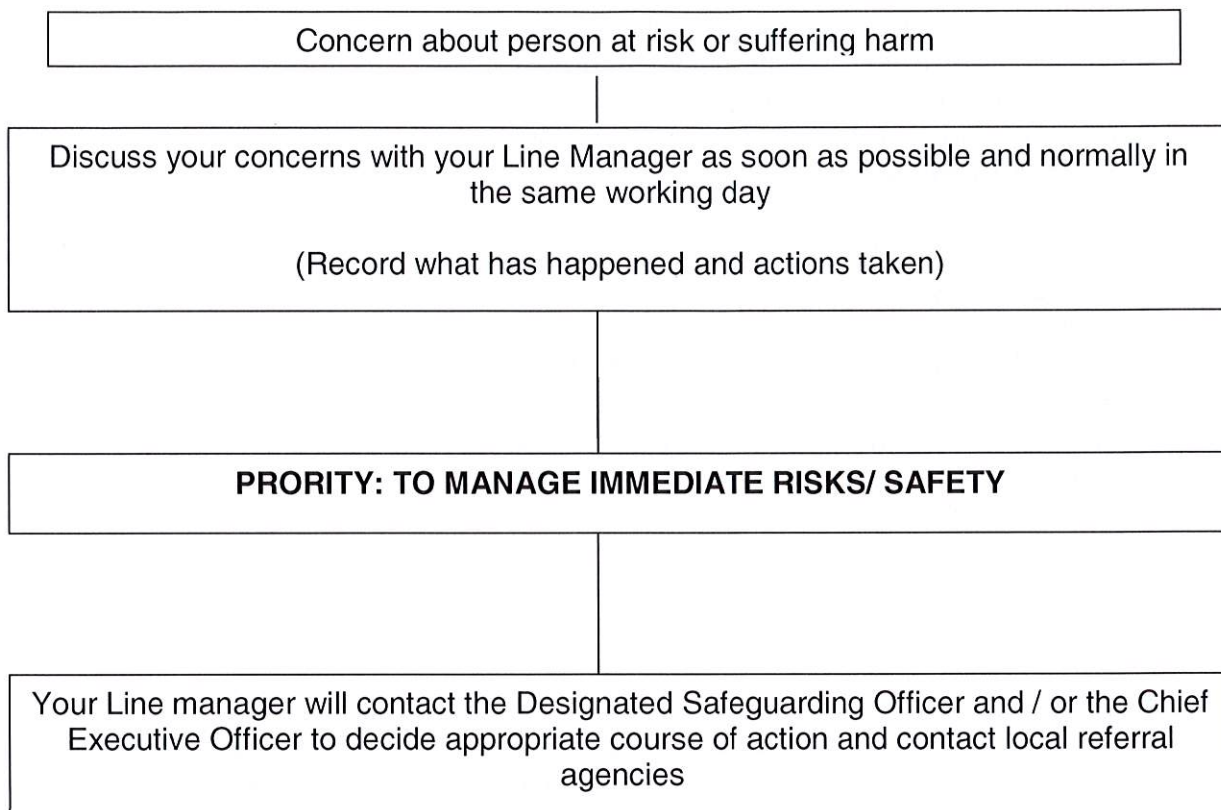
- The nature of the suspicion or allegation
- A description of any visible injury
- The staff members account of what has happened
- Dates and times and any other factual information
- The distinction between fact, opinion or hearsay

The procedures as outlined in the flow chart on the following page must be followed.

Staff should not attempt to investigate any disclosure, suspicion or allegation beyond the gathering of information as outlined above. To do so may jeopardise any future possible Police or agency investigation and/or prosecution.



## **Flowchart of YMCA Newcastle Safeguarding Procedure**



### **Recording Safeguarding Incidents**

It is essential to keep a written account of the concern including full details of the concern, notes of all events (eg. telephone calls made, content of conversations, emails etc) as they take place and in particular to keep a record of any decision or actions agreed, including; who made them, when, and on what basis.

All documents must be signed and dated by the person recording the information.

All concerns and reported allegations, and action taken must be recorded in line with the incident procedures and forwarded to YMCA Newcastle's Designated Safeguarding Officer.

Where records are updated, they must be signed and dated by the person who wrote them and a copy of the update sent to the Designated Safeguarding Officer, clearly stating the report they apply to.

All records must be stored securely and remain confidential.

### **Action where a report or suspicion of abuse is made concerning a paid member of staff or volunteer.**

If a concern or allegation of abuse or inappropriate conduct is made against a member of staff or volunteer or you have a suspicion regarding a member of staff's or volunteers conduct, you must contact your line manager immediately. If the allegation or suspicion concerns your line manager then the YMCA Newcastle Designated Safeguarding Officer and the Chief Executive must be contacted immediately.

Where a concern has been raised regarding a member of staff or volunteer, the Local Authority Designated Officer (LADO) must be informed of the allegation by the Designated Safeguarding Officer at YMCA Newcastle. A meeting with the individual staff member will need to take place immediately to inform them that they may be suspended without prejudice following an allegation. The individual must not be informed at this stage of the nature of the allegation. The individual will be asked to leave the premises and advised not to discuss the allegation with anyone linked to the setting.

A strategy meeting would then take place with LADO and the employer and an appropriate course of action decided upon and the staff member informed.

#### **Note**

Lack of further Police and/or Social Services action will not preclude the possibility of there being outstanding disciplinary issues. All individual cases must be reviewed with a risk assessment to decide the future of that employee. This may be a difficult decision, particularly where there is insufficient evidence to uphold any action by the Police, but where concerns about risk and/or poor practice remain. In such cases, those implementing the disciplinary procedures will reach a decision based upon the available information. The welfare of all must always remain paramount.

It is recognised that such allegations may be difficult to understand, but ALL allegations must be taken seriously and action taken.

### **RECOGNISING ABUSE**

Abuse manifests itself in a variety of ways some overt and others much less do. Recognition of abuse and neglect is not always easy or straight forward.

#### **Physical Abuse:**

This involves hitting, shaking, throwing, burning, suffocating or any other physical harm. Deliberately causing ill health also constitutes physical abuse. Physical harm may also be caused when a person fabricates the symptoms of, or deliberately induces illness in someone they are caring for.



### **Sexual Abuse:**

Includes forcing or enticing a person to take part in sexual activities, not necessarily involving a high level of violence, whether or not they are aware of what is happening.

The activities may involve physical contact including assault by penetration (eg. rape or oral sex) or non-penetrative acts such as masturbation, kissing and touching outside of clothing.

They may include non contact activities, such as involving others in looking at, or in the production of sexual images, watching sexual images, watching sexual activities, or encouraging others to behave in sexually inappropriate ways or grooming others in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males, women and children can also commit acts of sexual abuse.

### **Emotional Abuse:**

Emotional abuse is the persistent emotional maltreatment of a person such as to cause severe and persistent adverse effects on the person's emotional development. It may involve conveying to the person that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving a person the 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 a person. These may include interactions that are beyond the person's developmental capability, as well as over protection and limitation of exploration and learning, or preventing the person from 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 others frequently to feel frightened or in danger, or the exploitation or corruption of others.

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

### **Neglect**

Neglect is the **persistent** failure to meet the person's basic physical and/or psychological needs, likely to result in the **serious** impairment of the person's health and development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food and clothing, shelter including exclusion from home or abandonment, failing to protect a person from physical and emotional harm or danger, failure to ensure adequate supervision including the

use of inadequate care-takers, or the failure to ensure access to appropriate medical care or treatment. It may include neglect of, or unresponsiveness to, a person's basic emotional needs.

## CONTACT DETAILS OF LOCAL AGENCIES

**The Designated Safeguarding Officer will review this list annually.**

|   |  |
|---|--|
| Trustee with oversight of Safeguarding<br>Jon Burns             | <b>Jonathan.burns@virginmoney.com</b><br><b>0191 2796019</b><br><b>07718 202161</b>  |
| YMCA Newcastle Designated Safeguarding Officer:<br>Helen parker | <b>0191 2765327 (office)</b>   |
| Deputy Designated Safeguarding Officer:<br>Jeff Hurst           | <b>0191 2765327 (office)</b><br><b>07949 737074 (mobile)</b>   |
| Safeguarding Children Concern 0-18 years:                       | <b><a href="https://www.nscb.org.uk/">https://www.nscb.org.uk/</a></b><br><b><a href="https://www.gatesheadsafeguarding.org.uk">https://www.gatesheadsafeguarding.org.uk</a></b>   |
| Newcastle Initial Response Team                                 | <b>0191 2772500 (Office hours)</b>   |
| Newcastle Emergency Duty Team                                   | <b>0191 2787878 (Out of hours)</b>   |
| Gateshead Initial Response Team                                 | <b>0191 4332653 (Office hours)</b>   |
| Gateshead Emergency Duty Team                                   | <b>0191 4770844 (Out of hours)</b>   |
| Safeguarding Adults Unit over 18s                               | <b><a href="http://www.newcastle.gov.uk/social-care-and-health">www.newcastle.gov.uk/social-care-and-health</a></b><br><b><a href="http://www.gateshead.gov.uk/article/1819/Adult-social-care">www.gateshead.gov.uk/article/1819/Adult-social-care</a></b> |
| Newcastle<br>Advice line  | <b>0191 2788156</b>  |
| Referrals (working hours)                                       | <b>0191 2788377</b>  |
| Referrals (out of hours)  | <b>0191 2787878</b>  |
| Gateshead   | <b>0191 4337033</b>  |
| If you think a crime against a person has been committed        | <b>101 /</b><br><b>0191 2146555</b>  |



|   |  |
|---|--|
| Advice about sexual exploitation                    | <b>101 (ask for Police protecting vulnerable persons team)</b>     |
| NSPCC Helpline                                      | <b>0800 800 5000</b>   |
| (managing allegations against staff and volunteers) |  |
| The Newcastle LADO is Melanie Scott                 | <b>0191 2774636</b><br><b>Email melanie.scott@newcastle.gov.uk</b> |
| The Gateshead LADO is Nicholas Leon                 | <b>0191 433 8021</b><br><b>Email nicholasleon@gateshead.gov.uk</b> |



**J Burns**  
**Safeguarding Trustee**



**J Hurst**  
**Chief Executive Officer**

| <b>Version Number</b> | <b>Summary of changes</b>   | <b>Date approved</b> | <b>Approved by</b>       |
|-----------------------|---|----------------------|--------------------------|
| <b>V.1</b>            | <b>Policy rewrite</b>   | <b>26/11/2014</b>    | <b>Board of Trustees</b> |
| <b>V.1</b>            | <b>Procedures review</b>  | <b>23/03/2017</b>    | <b>CEO</b>               |
| <b>V.2</b>            | <b>Change from covering children to covering Children, Young people and Vulnerable Adults</b> | <b>22/11/2017</b>    | <b>Board of Trustees</b> |
| <b>V3</b>             | <b>Add definition of terms and incorporate best</b>   | <b>26 Sep 2018</b>   | <b>Board of Trustees</b> |



|  |  |  |  |
|--|--|--|--|
|  | <b>practice from<br/>YMCA England<br/>Update phone<br/>numbers</b> |  |  |
|  |  |  |  |