

Marsden Community Trust Safeguarding Policy

September 2020

Review date: September 2023

Marsden Community Trust is a company limited by guarantee and a registered charity. Company Number 09392970 Charity Number 1168910

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Marsden Community Trust Safeguarding Policy

Our designated Safeguarding officer is Trustee, Sheila Bates.

Principles

1. Marsden Community Trust Ltd (MCT) is committed to the safeguarding of all children, young people and adults at risk with whom it has contact.

2. We acknowledge that everyone involved in the care of children, young people and adults at risk has a responsibility for the protection of those individuals from harm. It is also essential that we honour the trust of those who allow us to care for their children, young people and adults at risk.

3. There is a duty placed on public agencies under the Human Rights Act (1998) to intervene to protect the rights of citizens. Also the Children Act (1989) makes it clear that the welfare of the child is paramount and that everyone involved in the care of children has a responsibility to protect those children from harm.

4. In order to protect everyone from potential and actual abuse it is necessary for all staff and volunteers to have an understanding of the issues involved and that appropriate procedures are in place that are shared and understood by all concerned. We will ensure the appropriate trustees complete online training.

5. MCT's safeguarding policy is based on the following principles:

• The welfare of the child, young person or adult at risk is paramount

• Everyone, regardless of age, gender, disability or ethnic origin has a right to be protected from all forms of harm, abuse, neglect and exploitation

• It is not our responsibility as members of MCT to decide whether or not abuse is occurring, but it is our responsibility to act on any concerns and do something about it.

Objectives

6. The key objectives of this policy are:

• To explain the responsibilities that MCT and its staff, volunteers, and Board of trustees have in respect of safeguarding children and adults at risk.

• To provide staff, volunteers and the board of trustees with an overview of child and adult safeguarding.

• To provide a clear procedure that will be implemented where a child or adult at risk safeguarding issue arises.

Definitions

7. A child is a child before their birth (i.e. during pregnancy) and until their 18th birthday.

8. An adult at risk is any adult who needs community care services because of mental or other disability, age or illness and who are, or may be, unable to take care of themselves against harm or exploitation. The term replaces "vulnerable adult" and "alleged victim".

Identifying abuse and what to do if abuse is suspected

It is considered best practice for all staff and volunteers of any organisation that has contact with children, young people, their families and adults at risk to complete the appropriate training outlined in section 4.

9. The term 'abuse' is used to describe various ways that someone can be harmed or mistreated.

10. Abuse can happen anywhere and at any time, but research indicates that the perpetrators of abuse are more likely to be known and trusted by the child or young person. For adults at risk evidence suggests that the perpetrators of abuse are often professional carers or other adults at risk.

11. Child abuse is split into four categories - physical, neglect, sexual and emotional. Abuse of adults at risk is split into seven categories, it includes the four used for children but includes three further categories; financial, institutional and discriminatory. The definitions of these different types of abuse are as follows:

Physical abuse

This may involve hitting, kicking, shaking, throwing, squeezing, suffocating, drowning, burning or biting the child or adult at risk. Giving a child alcohol is also a form of physical abuse. Giving a child or adult at risk (against their free and informed consent) drugs, poison or overmedicated using prescribed medications are also forms of physical abuse. Physical harm may also be caused when a parent fabricates the symptoms of, or deliberately induces, illness in a child.

Neglect

Neglect is the persistent failure to meet a child's or an adult at risk's basic physical and psychological needs. This may include the failure to meet basic needs, like food, shelter, warm clothing or medical attention.

Neglect of children may occur before their birth (i.e. during pregnancy) as a result of substance misuse and is also the failure to provide adequate supervision (including leaving children with inappropriate carers).

Sexual abuse

Sexual abuse involves forcing or enticing a child or adult at risk to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. Activities may involve penetrative and non-penetrative acts or non-contact activities such as forcing a child or adult at risk to look at, or take part in the production of pornographic materials.

For children it can also include encouraging them to behave in sexually inappropriate ways. Sexual abuse includes grooming a child in preparation for abuse, for example, via the internet.

Emotional abuse

For children emotional abuse is the persistent emotional ill-treatment of a child, such as to cause severe adverse effects on that child's emotional development. This may involve a lack of love and affection, telling a child they are worthless, serious bullying or being constantly shouted at. Emotional abuse also occurs when the child is valued only insofar as they meet the needs of another person, when the child is overprotected and unable to explore and learn on their own, or when they witness the ill-treatment or abuse of another (including domestic violence, or animal cruelty). Other examples are serious bullying, including cyber bullying, making fun of what the child says or how they communicate.

For adults at risk emotional, sometimes called psychological, abuse can include the threats of harm or abandonment, blaming or controlling behaviour or enforced isolation.

Financial abuse

This type of abuse is used for abuse of adults at risk only, however if you think that a child is being abused financially you should report this in the usual way.

Financial abuse is when an adult at risk is exploited for financial gain. This can include theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Institutional abuse

Again this type of abuse is used for abuse of adults at risk only, however if you think that a child is experiencing this type of abuse you should report this in the usual way and also consider contacting the Local Authority Designated Officer (see section on managing allegations).

Institutional abuse occurs when the routines, systems and regimes of an institution result in poor or inadequate standards of care and poor practice which affects the whole setting and denies, restricts or curtails the dignity, privacy, choice, independence or fulfilment of adults at risk. Decisions will be taken because they are in the best interests of the staff or institution not in the best interests of the adult at risk.

Discriminatory abuse

Discriminatory abuse is behaviour that makes or sees a distinction between people as a basis for prejudice or unfair treatment. This can include racism, sexism, homophobia, disabilism and not respecting individuals' right to worship.

12. Possible signs of abuse include:

• Unexplained or suspicious injuries such as bruising, cuts, or burns, particularly if situated on a part of the body not normally prone to such injuries, or the explanation of the cause of the injury is ill-fitting.

- A disclosure of abuse, or description of what appears to be an abusive act by a child or adult at risk.
- Someone else (child or adult) expresses concern about the welfare of another child or adult at risk.
- Unexplained change in behaviour, such as withdrawal or sudden outbursts of temper.
- Inappropriate sexual awareness or sexually explicit behaviour.

• Distrust of a particular individual, particularly those with whom a close relationship would normally be expected.

- Difficulty in making friends.
- Eating disorders, depression, self-harm or suicide attempts.
- Deterioration in health or appearance including loss of weight.
- Unexplained loss of money or material goods (financial abuse)
- Unexplained possession of money or goods such as mobile phones (child sexual exploitation)
- Fear or anxiety

This is not an exhaustive list of possible indicators of abuse

What to do if abuse is suspected

13. If any member of MCT suspects abuse is taking place they should immediately inform the designated safeguarding champion (Sheila Bates- <u>sheila2bates@gmail.com</u> or on 01484 844171) who will decide whether or not to take the matter further. An accurate log of the concern must be kept which include

- An account of the incident.
- Action taken
- Decisions made.
- This record should be signed and dated

14. If it is felt that further investigation is required in order to keep a child safe then the matter must be referred to Kirklees Children's Safeguarding Team. They may be contacted at any time for advice and consultation. In the event of a referral to the safeguarding team all relevant information must be shared, including copies of correspondence, log of previous concerns and notes of any conversations with the people concerned, their family or other staff.

Kirklees Safeguarding Team are at Civic Centre, 3 Market Street, Huddersfield, HD1 2TG

15. If it is felt that further investigation is required in order to keep an adult at risk safe then the matter must be referred to Gateway to care. Gateway to care may be contacted at any time for advice and consultation. In the event of a referral to Gateway to care all relevant information must be shared, including copies of correspondence, log of previous concerns and notes of any conversations with the adult at risk, their family or other staff.

16. The Data Protection Act is not a barrier to information sharing where doing so is necessary to safeguard children or an adult at risk.

17. In the event that the designated safeguarding champion is not available or contactable this should not delay action being taken to protect a child or adult at risk. Any trustee of Marsden Community Trust may contact the Kirklees Safeguarding Team or Gateway directly to raise their concerns.

18. If there are any concerns about the immediate safety of a child or an adult at risk then the police must be contacted on 999 without delay. Report a crime on 191.

Allegations against staff

19. Any suspicion that a child, or an adult at risk, has been abused by a member of staff or a volunteer must be reported to the designated safeguarding champion otherwise known as the Alerting Manager, who will take such steps as considered necessary to ensure the safety of the child or adult at risk in question and any other child who may be at risk.

20. The designated safeguarding officer will refer the allegation to Kirklees Safeguarding team, Children's Social Care or Gateway to care who may involve the police, or will refer directly to the police if out-of-hours.

21. For abuse (or allegations of abuse) of children, Children's Social Care and the designated safeguarding champion will liaise with the Local Authority Designated Officer (LADO) whose responsibility it is to:

- Provide advice and guidance;
- Liaise with the police and other agencies;
- Provide assistance in discussions regarding suspension and referral to the Disclosure and Barring Service.

Details for the Kirklees LADO including a referral form can be found at: http://www.kirkleessafeguardingchildren.co.uk/allegations.html

22. The parents or carers of the child or adult at risk will be contacted as soon as possible following advice from Children's Social Care / Gateway to care and/or the police.

23. If the designated safeguarding officer (safeguarding champion) is the subject of the suspicion/allegation, the concern must be made directly to Children's Social Care or Gateway to care.

24. Where there is a complaint against a member of staff there may be three types of investigation:

- A criminal investigation
- A child protection / safeguarding adult investigation
- A disciplinary or misconduct investigation

Internal enquiries and suspension

25. The designated safeguarding champion will make an immediate decision about whether any individual suspected of abuse should be temporarily suspended pending further police and Social Care enquiries.

26. Where an individual is suspended it is advised that other employees / volunteers should have no contact with them until enquires have concluded.

27. Irrespective of the findings of Social Care or police enquiries the organisation will assess all individual cases to decide whether a member of staff or volunteer can be reinstated. The welfare of the child or adult at risk should remain of paramount importance throughout. Capacity

28. N.B. The following section applies only to adults. As a general rule children cannot be assessed for capacity under the Mental Capacity Act (2005) except in specific circumstances. (For more information on this you must access appropriate training).

29. In accordance with the Mental Capacity Act (2005), public agencies work from a presumption that an adult has capacity to make their own decisions unless a person's apparent comprehension of a situation gives rise to doubt. It is the right of adults who have capacity to make their own choices, irrespective of how wise we might consider that decision to be.

However, where:

- A crime is suspected or;
- Allegations involve a member of staff, paid carer or volunteer, or;

• There is a risk of significant harm to that person or any other adult at risk then relevant agencies must be informed and allegations must be investigated whether the alleged victim is willing to take an active part in the process or not.

30. Where adults lack the capacity to safeguard themselves, other people will need to make those decisions, and to ensure that this is done appropriately you may wish to ask the following agencies to support you:

Social Services (Adults); Gateway to care 01484 414933; Police 999; Vulnerable Victims Team 01924 206309 or 01924 206349.

Record keeping

31. Any records kept in relation to safeguarding concerns for a child or an adult at risk must be kept securely and confidentially in an agreed place. Records must be factual, accurate and clearly written in black ink or typed, with a legible date, time and signature.

Additional related policies

32. All staff members of MCT will receive a copy of this policy and undergo training as part of their induction to the organisation.

33. MCT also has policies on the following related topics which all staff and volunteers must be familiar with:

- Disciplinary / Grievance
- Health and Safety
- Complaints and Compliments
- Code of Conduct

34. This policy will be formally agreed and adopted by the Board of Trustees of MCT and will be reviewed regularly by the board of trustees who are also responsible for the implementation of this policy.

Signed: Name: Sheila Bates. Position: – Named Trustee for Safeguarding Issues.

Date: 21 July 2020