

CHILD DEVELOPMENT FOUNDATION

CHILD PROTECTION POLICY

2015

Introduction:

CDF a Child Right Oriented Organization is committed to implementing policies so that everyone in the organization accepts their responsibilities to safeguard children from harm and abuse. This means to follow procedures to protect children and report any concerns about their welfare to appropriate authorities.

The aim of the policy is to promote good practice, providing children Adolescents youth with appropriate safety/protection whilst in the Organisation and to allow staff and volunteers to make informed and confident responses to specific child protection issues.

A child is defined as a person under the age of 18 (Child Right's Act 1989)

Child Protection Policy Statement

CDF is committed to practice to ensure that as possible children are protected. Staff and volunteers in this organization accept and recognize CDF responsibilities to develop awareness on the issues which cause children harm. CDF will undertake to provide a safe environment and experience, where the welfare of the child is paramount. CDF will adhere to the recommendations of **Children First**.

We in Child Development Foundation (CDF) are committed to practices which protects children from harm.

Management, staff and volunteers (as appropriate) in this organisation recognise that the welfare of children is paramount.

The Protection policy principles:

This policy is based on the following principles:

- The welfare of the child is paramount.
- All children, whatever their age, culture, disability, gender, language, racial origin religious beliefs and/or sexual identity have the right to protection from abuse.
- All suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately.
- All staff has a responsibility to report concerns to the Designated Person with responsibility for child protection.
- Staff/volunteers are trained to deal with situations of abuse or to if abuse has occurred.

Children Safeguard:

CDF will aim to safeguard children by:



- Adopting child protection guidelines through procedures and a code of conduct for staff and volunteers.
- Sharing information about child protection and good practice with children, parents and care givers, staff and volunteers.
- Sharing information about concerns with agencies who need to know, and involving parents and children appropriately.
- Carefully following the procedures for recruitment and selection of staff and volunteers.
- Providing effective management for staff and volunteers through support, supervision and training.
- CDF is committed to review the protection policy and good practice regularly.

CDF will:

1. Acknowledge the rights of children to be protected, treated with respect, listened to and have their own views taken into consideration.
2. Recognize that the welfare of children must always come first, regardless of all other considerations.
3. Adopt the safest possible practices to minimize the possibility of harm or accidents happening to children and protect workers from the necessity to take risks and leave themselves open to accusations of abuse or neglect;
4. Develop procedures for responding to accidents and complaints;
5. Provide child protection training for workers. This should clarify the responsibilities of both the organization and individuals, and clearly show the procedures if child abuse is suspected;
6. Co-operate with any other child care and protection agencies and professionals by sharing appropriate information when necessary and working together towards the best possible outcome for the children concerned;
7. Make links with other relevant organizations in order to promote child protection and welfare policies and practices.

CDF's Child Protection policy is an evolving document. Periodically, CDF will evaluate the Policy taking into account such items as feedback received best practices and/or any changing legislation over that period and amend accordingly.

A copy of CDF's Child Protection Policy will be circulated to all staff and will also be available on CDF's web-sites including CDF's area of interventions. Heads of Sub Offices are asked to remind all staff of the procedures on a regular basis and the policy will be outlined to all new staff members who may have regular contact with children. Training will be provided to relevant staff as required.

Code of Practice for CDF staff:



Staff in CDF will observe the following good work practices to ensure that every child remains safe and has a favorable interaction with CDF whether in work placement, in participation programs and projects. Anyone working on behalf of CDF who is in contact with children as part of their working day must adopt a child centered approach.

1. Always put the child's welfare and safety first.
2. Treat all children and young people equally and as individuals, with respect and dignity.
3. Involve children and young people in decision-making, as appropriate.
4. Use appropriate language and maintain awareness around language and comments made.
5. Respect a child's or young person's personal space
6. Lead by example and create an atmosphere of trust.
7. Give children encouragement, support and enthusiastic and constructive feedback rather than negative criticism.
8. Ensure any dangerous behavior is avoided or stopped.
9. Ensure that any personal details relating to children are kept confidential.
10. Keep a written record of any injury that occurs to a child, along with details of treatment given.
11. Ensure there are clear channels of communication and access to staff/teachers if parents/guardians or children/young people wish to voice their concerns if there is something they are not happy about.

All CDF staff or volunteers:

1. Should not take one young person alone on outings such as car journeys. Where this is unavoidable, it should be with the full consent and knowledge of the parents/guardians.
2. Should not spend excessive amounts of time alone with an individual child/young person. Where an adult needs to meet with a child/young person alone, the door should be left open and another adult informed of the meeting.
3. There should be no unnecessary physical contact between a staff member and a young person although there are times when for example, placing a hand on a distressed child/young person's shoulder to comfort him/her would be appropriate. Physical contact should only be in response to the needs of the child and should be appropriate to the age and the level of development of the child.
4. Should not communicate with children they have met through their workplace using text messages, facebook or any other forms of social media. Phone calls on personal mobiles should also be avoided.

In addition, anyone working on behalf of CDF will never engage in the following inappropriate behavior:

1. Do not use or allow offensive or sexually suggestive physical and/or verbal language.
2. Do not single out a particular child/young person for unfair favoritism, criticism, ridicule, unwelcome focus /or attention.
3. Do not allow/engage in inappropriate touching of any form.



4. Do not hit or physically chastise children/young people.
5. Do not leave children unattended or unsupervised.
6. Do not exert undue influence over a child in order to gain personal benefit or reward.
7. Do not let allegations made by a child go not recorded?
8. Do not make or receive private calls/texts while supervising a children's activity.
9. Do not accompany a child into toilet facilities

Anyone working on behalf of CDF should report concerns they note about any inappropriate behavior with regards to a child/ren in writing where relevant to a Head of the office.

Defining Child Abuse

Child abuse is any form of physical, emotional or sexual mistreatment or lack of care that leads to injury or harm, Abuse can happen to a young person regardless of their age, gender, race or ability.

There are four main types of abuse:

Physical abuse, Sexual abuse, Emotional abuse, and Neglect.

The abuser may be a family member, or in the community. Any individual may abuse or neglect a young person directly, or may be responsible for abuse because they fail to prevent another person harming the young person.

Abuse in all of its forms can affect a young person at any age. The effects can be so damaging that if not treated may follow the individual into adulthood.

Young people with disabilities may be at increased risk of abuse through various factors such as stereotyping, prejudice, discrimination, isolation and a powerlessness to protect themselves or adequately communicate that abuse had occurred.

Types of Abuse

- **Physical Abuse:** where adults physically hurt or injure a young person e.g. hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating, and drowning. Giving young people alcohol or inappropriate drugs would also constitute child abuse.
- **Emotional Abuse:** the persistent emotional ill treatment of a young person, likely to cause severe and lasting adverse effects on the child's emotional development. It may involve telling a young person they are useless, worthless, unloved, and inadequate or valued in terms of only meeting the needs of another person. It may cause a young person to be frightened or in danger by being constantly shouted at, threatened or haunted which may make the young person frightened or withdrawn.



Ill treatment of children, whatever form it takes, will always feature a degree of emotional abuse.

- **Bullying** may come from another young person or an adult. Bullying is defined as deliberate hurtful behavior, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. There are three main types of bullying. It may be physical (e.g. hitting, kicking, slapping), verbal (e.g. racist or homophobic remarks, name calling, graffiti, threats, abusive text messages), emotional (e.g. tormenting, ridiculing, humiliating, ignoring, isolating from the group), or sexual (e.g. unwanted physical contact or abusive comments).
- **Neglect** occurs when an adult fails to meet the young person's basic physical and/or psychological needs, to an extent that is likely to result in serious impairment of the child's health or development. For example, failing to provide adequate food, shelter and clothing, failing to protect from physical harm or danger, or failing to ensure access to appropriate medical care or treatment. Refusal to give love, affection and attention can also be a form of neglect.
- **Sexual Abuse** occurs when adults (male and female) use children to meet their own sexual needs. This could include full sexual intercourse, masturbation, oral sex, anal intercourse and fondling. Showing young people pornography or talking to them in a sexually explicit manner are also forms of sexual abuse.

Indicators of Abuse

Even for those experienced in working with child abuse, it is not always easy to recognise a situation where abuse may occur or has already taken place. Most people are not experts in such recognition, but indications that a child is being abused may include one or more of the following:

- 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.
- An injury for which an explanation seems inconsistent.
- The young person describes what appears to be an abusive act involving them.
- Another young person or adult expresses concern about the welfare of a young person
- Unexplained changes in a young person's behavior e.g. becoming very upset, quiet, withdrawn or displaying sudden outbursts of temper.
- Inappropriate sexual awareness.
- Engaging in sexually explicit behavior.
- Distrust of adult's, particularly those whom a close relationship would normally be expected.
- Difficulty in making friends.
- Being prevented from socializing with others.
- Displaying variations in eating patterns including over eating or loss of appetite.
- Losing weight for no apparent reason
- Becoming increasingly dirty or unkempt



The physical signs of sexual abuse may include:

- Pain or itching in the genital/anal area.
- Bruising or bleeding near genital/anal areas.
- Sexually transmitted disease.
- Vaginal discharge or infection.
- Stomach pains.
- Discomfort when walking or sitting down.
- Pregnancy.

Changes in behavior which can also indicate sexual abuse include:

- Sudden or unexplained changes in behavior e.g. becoming withdrawn or aggressive.
- Fear of being left with a specific person or group of people.
- Having nightmares.
- Running away from home.
- Sexual knowledge which is beyond their age or development al level.
- Sexual drawings or language.
- Bedwetting.
- Eating problems such as over-eating or anorexia.
- Self-harm or mutilation, sometimes leading to suicide attempts.
- Saying they have secrets they cannot tell anyone about.
- Substance or drug abuse.
- Suddenly having unexplained sources of money.
- Not allowed to have friends (particularly in adolescence).
- Acting in a sexually explicit way with adults.

Signs of emotional abuse may include;

- Sudden speech disorders
- Persistent tiredness
- Development delay, either in terms of physical or emotional progress

Changes in behavior which can also indicate emotional abuse include:

- Obsessions or phobias.
- Sudden under-achievement or lack of concentration.
- Inappropriate relationships with peers and/or adults.
- Being unable to play.
- Attention seeking behavior.
- Fear of making mistakes.
- Self-harm.
- Fear of parent being approached regarding their behavior.

Signs of bullying include:

- Behavioral changes such as reduced concentration and/or becoming withdrawn, clingy, depressed, tearful, emotionally up and down, reluctance to go training or competitions.
- An unexplained drop off in performance.



- Physical signs such as stomach aches, headaches, difficulty in sleeping, bed wetting, scratching and bruising, damaged clothes, bingeing e.g. on food, alcohol or cigarettes.
- A shortage of money or frequents loss of possessions.

It must be recognized that the above list is not exhaustive, but also that the presence of one or more of the indications is not proof that abuse is taking place. It is **NOT** the responsibility of those working in the Organization to decide that child abuse is occurring. It **IS** their responsibility to act on any concerns.

The physical signs of neglect may include:

- Constant hunger, sometimes stealing food from other children.
- Constantly dirty or smelly.
- Loss of weight or being constantly underweight.
- Inappropriate dress for the conditions.

Changes in behavior which can also indicate neglect include:

- Complaining of being tired all the time.
- Not requesting medical assistance and/or failing to attend appointments.
- Having few friends.
- Mentioning being left alone or unsupervised.

Responding to Suspicions and Allegations

It is not the responsibility of anyone working in the organization to decide whether or not child abuse has taken place. However there is a responsibility to act on any concerns through contact with the appropriate authorities so that they can then make inquiries and take necessary action to protect the young person.

How to respond to allegations/suspicions.

Receiving Evidence of Possible Abuse

We may become aware of possible abuse in various ways. We may see it happening, we may suspect it happening because of signs such as those listed in section above, it may be reported to us by someone else or directly by the children affected.

In the last of these cases, it is particularly important to respond appropriately. If a child or a young person says or indicates that they are being abused, you should:

- **Stay calm** so as not to frighten the young person
- **Reassure** the child that they are not to blame and that it was right to tell.
- **Listen** to the child, showing that you are taking them seriously.
- **Keep questions to a minimum** so that there is a clear and accurate understanding of what has been said. The law is very strict and child abuse cases have been dismissed



- where it is felt that the child has been led or words and ideas have been suggested during questioning. Only ask questions to clarify.
- **Inform** the child that you have to inform other people about what they have told you. Tell the child this is to help stop the abuse continuing.
- **Safety of the child** is paramount. If the child needs urgent medical attention call an ambulance, inform the doctors of the concern and ensure they are made aware that this is a child protection issue.
- **Record** all information.
- **Report** the incident to the directorate and social workers.

Recording Information

To ensure that information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern. In recording you should confine yourself to the facts and distinguish what is your personal knowledge and what others have told you. Do not include your own opinions.

Information should include the following:

- The child's name, age and date of birth.
- The child's home address and telephone number.
- Whether or not the person making the report is expressing their concern or someone else's.
- The nature of the allegation, including dates, times and any other relevant information.
- A description of any visible bruising or injury, location, size etc. Also any indirect signs, such as behavioural changes.
- Details of witnesses to the incidents.
- The child's account, if it can be given, of what has happened and how any bruising/injuries occurred.
- Have the parents been contacted? If so what has been said?
- Has anyone else been consulted? If so record details.
- Has anyone been alleged to be the abuser? Record detail.

Reporting the Concern:

All suspicions and allegations MUST be reported appropriately.

The Organisation expects its members and staff to discuss any concerns they may have about the welfare of a child immediately with the person in charge and subsequently to check that appropriate action has been taken.

There may be three types of investigation.

- **Criminal** in which case the police are immediately involved.
- **Child protection in** which case the social workers (and possibly) the police will be involved.
- **Disciplinary or misconduct** in which case the Organisation will be involved.



Confidentiality

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only. This includes the following people:

- The Social worker, coordinator, or Officer.
- The parents of the child.
- The person making the allegation.
- Social Services/police.
- The organisation Manager.
- The alleged abuser (and parents if the alleged abuser is a child)

All information should be stored in a secure place with limited access to designated people, in line with data protection laws.

Internal Inquiries and Suspension

- The Organisation will make an immediate decision about whether any individual accused of abuse should be temporarily suspended pending further police and social services inquiries
- Irrespective of the findings of the social services or police inquiries the Organisation will assess all individual cases to decide whether a member of staff or volunteer can be reinstated and how this can be sensitively handled. The organization or the disciplinary committee must reach a decision based upon the available information which could suggest that on the balance of probability, it is more likely than not that the allegation is true. The welfare of the child should remain of paramount importance throughout.

Recruiting and Selecting Personnel with Children

It is important that all reasonable steps are taken to prevent unsuitable people from working with children. This applies equally to paid staff and volunteers, both full and part time. To ensure unsuitable people are prevented from working with children the following steps should be taken when recruiting:

Controlling Access to Children

- All staff and volunteers should complete an application form. The application form will elicit information about the applicants past and a self disclosure about any criminal record.
- Consent should be obtained from the applicant to seek information from the Criminal Records Bureau.
- Two confidential references, including one regarding previous work with children should be obtained. These references MUST be taken up and confirmed through telephone contact.
- Evidence of identity (passport or driving licence with photo)



Interview and Induction

All employees and volunteers will be required to undertake an interview carried out to acceptable protocol and recommendations. All employees and volunteers should receive formal or informal induction during which:

- A check should be made that the application form has been completed in full, including sections on criminal records and self disclosures.
- Their qualifications should be substantiated.
- The job requirements and responsibilities should be clarified.
- They should sign up to the organization's Code of Ethics and Conduct.
- Child Protection Procedures are explained and training needs identified e.g. basic child protection awareness.

Training

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help staff and volunteers to:

- Analyse their own practice against what is deemed good practice, and to ensure their practice is likely to protect them from false allegations.
- Recognise their responsibilities and report any concerns about suspected poor practice and/or abuse
- Respond to concerns expressed by a child.
- Work safely and effectively with children.
- All employees, volunteers, and team managers to undertake relevant child protection training to ensure their practice is exemplary and to facilitate the development of positive culture towards good practice and child protection
- All staff and volunteers to receive advisory information outlining good/bad practice and informing them what to do if they have concerns about the behaviour of an adult towards a young person.

