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SAFEGUARDING CHILDREN POLICY

Reviewed: November 23

Next Review date: November 24

Signed: 1

Position:Administrator

Date: 14/11/23



If a child discloses information to you about abuse or neglect you must take action. For the purposes of child protection legislation the term 'child' refers to anyone up to the age of 18 years

Contact your Designated Safeguarding Lead or if you cannot contact them go straight to the Integrated Referral and Assessment Team on 0191 433 2653.

If a child is in immediate danger of being harmed, or a young child has been left unsupervised, the police should be called on 999.

Designated Safeguarding Leads;

1. Saul Mark Sommer Tel: 0191 477 1431 ext 7 Director saul@regalrespite.co.uk

2. Eliyohu Shepherd Tel: 07906344777 director alex@regalrespite.co.uk

The above numbers are available between 9.30am-1pm.

Out of hours please contact: 07952305373.

Introduction

- 1.1. This document is the Safeguarding Children Policy for Regal Respite which will be followed by all members, staff, volunteers, trustees, committee, and volunteers of the organisation and followed and promoted by those in the position of leadership within the organisation. It should be read and considered in conjunction with the Health & Safety Policy, Staff & Volunteer Code of Conduct and Complaints Policy.
- 1.2. Regal Respite recognises its responsibility for Safeguarding and Child Protection. It carries responsibility for ensuring that staff and volunteers are competent and confident in carrying out their responsibilities for safeguarding and promoting children's welfare.
- 1.3. The purpose of Regal Respite is to alleviate stress and promote stability and emotional health and wellbeing of families and individuals going through challenges. We do this by providing respite opportunities, getaways and retreats for those being affected. We also provide events and health-promoting activities. Whilst we do not provide services directly to children, we work with families with children that are challenged by illness, poverty, financial and other vulnerabilities. Regal Respite is an organisation that contributes to



early help for families and are recognised for their contribution to safeguarding and improving the welfare of children.

- 1.4. We know that children and young people can be vulnerable to abuse by adults. The purpose of this policy is to make sure that the actions of any adult in the context of the work carried out by the organisation are transparent and to safeguard and promote the welfare of all children and young people.
- 1.5. This document is written in accordance with the Gateshead LSCB Safeguarding and Child Protection Policy Checklist and Working Together to Safeguard Children 2019.

https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2

- 1.6. Principles upon which the Safeguarding Children Policy is based:
 - Children have a right to be safe and should be protected from all forms of abuse and neglect.
 - Safeguarding children is everyone's responsibility.
 - It is better to help children as early as possible, before issues escalate and become more damaging.
 - Children and families are best supported and protected when there is a co-ordinated response from all relevant agencies.
 - Voluntary organisations play an important role in delivering services to children.
 - Voluntary organisations working with children are in a unique position to be able to
 observe signs of abuse or neglect, or changes in behaviour which may indicate a child
 may be being abused or neglected.

2. Safeguarding Children & Young People

This section covers a collection of safeguarding measures which have been designed to safeguard children and young people from harm. They are as follows:

2.1 Safe Recruitment & Selection.

We have a policy and procedure which ensures that all potential paid staff and volunteers:



- Complete an application form or a letter of application. This includes address, evidence of relevant qualifications, the reasons why they want to work with children and young people, paid work and voluntary work experience and all criminal convictions.
- Provide two pieces of identification which confirm both identity and address.
- Undergo an interview (formal or informal) involving at least two interviewers.
- Provide at least two references which are followed up before a post is offered. One reference is from the last employer or an organization that has knowledge of the applicant's work or volunteering with children or young people. If the applicant has not worked with children or young people before, then they should confirm this and give an alternative referee.
- Consent to a Disclosure and Barring Service check (formally CRB check) at the appropriate level (standard or enhanced).

Furthermore, the organisation complies with all other safeguarding regulations:

- We understand that a person who is barred from working with children or vulnerable adults is breaking the law if they work or volunteer or try to work or volunteer with these groups.
- We understand that an organization which knowingly employs someone who is barred to work with those groups will also be breaking the law.
- We understand that if our organization dismisses a member of staff or volunteer because they have harmed a child or vulnerable adult, or would have done so if they had not left, we must complete a DBS referral form: <u>DBS referrals | Home Office</u>

2.2 Management & Support of Paid Staff & Volunteers

Whilst Regal Respite is currently totally volunteer run, were we to employ staff, they would be put through the process described below as we do with volunteers.

- All staff and volunteers are provided with a job description (paid staff) or a role
 profile (volunteers) outlining their main responsibilities. This includes a
 requirement to sign your agreement to comply with our Safeguarding Policy and
 procedures and code of conduct for appropriate behavior.
- All staff and volunteers are supported through an Induction process during which safeguarding/child protection procedures are explained and training needs identified.
- All paid staff and volunteers complete a role review at the end of their induction period before being confirmed in post. Inductions will be completed within 6 months.
- Currently there are no paid staff, but at such time that Regal Respite will employ



paid staff, they will be regularly supervised and will have an annual appraisal by their line manager or Chair of the organization.

- All volunteers and staff have opportunities for regular support sessions as required.
 (This may include one to one or group support, mentoring or shadowing opportunities).
- Our organisation has disciplinary and grievance procedures in place for all paid staff and volunteers.
- (All paid staff and) volunteers attend regular ongoing safeguarding training appropriate to their role.

Regal Respite will provide effective management for staff and volunteers through induction, supervision, support and training.

2.3 Providing Safer Activities and Trips

2.3.1 Necessary arrangements

- People whose suitability has not been checked, including through a DBS check will not be allowed to have unsupervised contact with children.
- All paid staff and volunteers undertaking specialist support roles are provided with appropriate training.
 - All activities are risk assessed to ensure that all reasonable steps are taken to prevent children and young people being harmed whilst participating in the organization's activities.
- Public Liability insurance has been taken out to ensure that all activities and services and all people taking part, are covered.
- All activities being provided are properly planned and organised. Planning
 ensures that the services are age-appropriate, appropriately supervised, take
 account of staff ratio and use qualified instructors, or guidance as
 appropriate.
- Reputable companies will be used when hiring any retreat or respite facilities. These will need to be in a good state of repair and meet Health & Safety standards and be covered by a comprehensive contract.
- The organization will not take or use photographs of children and young people without a signed consent form and will remain compliant with GDPR regulations.
 - Vehicles will have up to date Tax and MOT, appropriate seats (including booster seats and seatbelts)
- All events and activities will have first aid cover in line with risk assessments.

2.4 Online safety

The welfare of the children/young people who come into contact with our services is paramount and governs our approach to the use and management of electronic communications technologies;



Working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare and in helping young people to be responsible in their approach to e-safety;

The use of information technology is an essential part of all our lives; it is involved in how we as an organisation gather and store information, as well as how we communicate with each other. It is also an intrinsic part of the experience of our children and young people. However, it can present challenges in terms of how we use it responsibly and, if misused either by an adult or a young person, can be actually or potentially harmful to them.

We will seek to promote e-safety by:

- Examining and risk assessing any emerging new technologies before they are used within the organisation. We will provide guidance for staff and volunteers for use.
- We will work with TAG (Technology Awareness Group) to appropriately filter IT equipment.
- Supporting and encouraging parents and carers to do what they can to keep their children safe online and when using their mobile phones and any computer-based activities; We will encourage TAG services to support parents with this.
- Incorporating statements about safe and appropriate ICT use into the codes of conduct both for staff and volunteers and for children and young people;
- Use our procedures to deal firmly, fairly and decisively with any examples of inappropriate ICT use, complaints or allegations, whether by an adult or a child/young person (these may include breaches of filtering, illegal use, cyberbullying, or use of ICT to groom a child or to perpetrate abuse);
- Informing parents and carers of incidents of concern as appropriate;
- Reviewing and updating the security of our information systems regularly;
- Providing adequate physical security for ICT equipment;
- Ensuring that usernames, logins and passwords are used effectively;
- Using only official email accounts provided via the organisation, and monitoring these as necessary;
- Ensuring confidential information sent by emails is sent securely, and depending on the sensitivity of the data, it may need to be encrypted.
- Ensuring that the personal information of staff, volunteers and service users (including service users' names) are not published on any online websites or promotional links.
- Ensuring that images of children, young people and families are used only after their written
 permission has been obtained, (including children over 12) and only for the purpose for
 which consent has been given;
- Discouraging use of social media but must be approved by senior manager and risk assessed in advance if there is a need or wish to use them;
- Providing effective management for staff and volunteers on ICT issues, through supervision, support and training;

2.5 Code of Conduct

We have a Code of Conduct for staff and volunteers.



2.5.1 Whistleblowing

All our staff and volunteers should feel able to raise concerns about poor or unsafe practice that they observe, to their line manager, the Designated Safeguarding Lead or Senior person. Should a staff member feel unable to raise an issue with the team or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them.

The NSPCC whistleblowing helpline - 0800 028 0285 - this line is open from 8am to 8pm Monday to Friday or help@nspcc.org.uk

Alternatively, staff / volunteers may seek advice from the Shema Koli Helpline: 0203 670 1818

2.6 Comments, Compliments & Complaints Policy

We have a written Comments, Compliments & Complaints Policy and procedure so that children and young people, and staff and volunteers can make any necessary comment, compliment or complaint.

3. Child Protection

3.1 Recognition of Abuse or Neglect.

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them or, more rarely, by a stranger. They may be abused by an adult or adults, or another child or children.

Individuals within the organisation need to be alert to the potential abuse of children both within their families and also from other sources including abuse by members of that organisation.

Regal Respite staff are trained to recognise and act upon indicators of abuse or potential abuse involving children and where there are concerns about a child's welfare. There is an expected responsibility for all members of the organisation to respond to any suspected or actual abuse of a child in accordance with these procedures.

Abuse can take many forms and the following is a summary of the most common forms of child abuse as set out in *Working Together to Safeguard Children* (2019)



3.2.1 Physical abuse

Physical Abuse - a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Some of the following signs may be indicators of physical abuse:

- Children with frequent injuries;
- · Children with unexplained or unusual fractures or broken bones; and
- Children with unexplained:
 - bruises or cuts;
 - burns or scalds; or
 - Bite marks.

3.2.2 Emotional abuse

Emotional abuse - The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child 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 children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Some of the following signs may be indicators of emotional abuse:

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder';
- Parents or carers blaming their problems on their child; and
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons.



3.2.3 Neglect

Neglect - The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.

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

Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care; and
- Parents who fail to seek medical treatment when their children are ill or are injured.

3.2.4 Sexual abuse and exploitation

Sexual abuse- Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Some of the following signs may be indicators of sexual abuse:

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games; and
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

Further information on Child Sexual Exploitation



Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

3.2.5 Peer on Peer Abuse and Bullying

Peer on Peer abuse can take different forms including:

- 1) bullying (including cyberbullying)
- 2) sexual violence and sexual harassment
- 3) physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm
- 4) Upskirting
- 5) Sexting;

Children from ethnic minorities, disabled children, young people who have any other of the protected characteristics or those with learning difficulties are more vulnerable to this form of abuse.

In Regal Respite we recognize:

Where users have SEN or disabilities, they may be more vulnerable. As such staff will be specifically made aware:

- Not to assume that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- To recognise that children with SEND are more prone to peer group isolation than other children;
- Of the potential for children with SEN and disabilities being disproportionally impacted by behaviours such as bullying, without outwardly showing any signs; and
- communication barriers and difficulties in overcoming these barriers.

Everybody has the responsibility to work together to stop peer on peer abuse – staff, the parent/guardian, the child/young person, the official commitment to the early identification of peer on peer abuse or bullying and prompt, collective action to deal with it.

Any reported incident of peer on peer abuse will be investigated objectively and will involve listening carefully to all those involved. We recognize that both the victim and the perpetrator may need support.

Children/young people experiencing peer on peer abuse will be supported or mentored and



assistance given to reduce the risk of further incidences to uphold their right to play and live in a safe environment which allows their healthy development.

3.2.6 Discriminatory abuse – this includes racist, religious and sexist abuse, plus abuse based on a person's disability.

3.2.7 Further information on Preventing Radicalisation

Protecting children from the risk of radicalisation should be seen as part of an organisations wider safeguarding duties and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people. As with managing other safeguarding risks, staff/volunteers should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection.

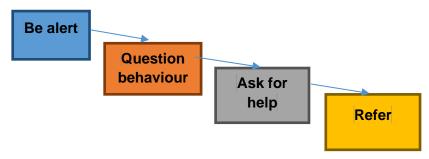
3.3 Taking Action

3.3.1 Immediate Action to Ensure Safety.

Immediate action may be necessary at any stage in involvement with children and families.

IN ALL CASES IT IS VITAL TO TAKE WHATEVER ACTION IS NEEDED TO SAFEGUARD THE CHILD OR CHILDREN CONCERNED i.e.:

- If emergency medical attention is required, this can be secured by calling an ambulance (dial 999) or taking a child to the nearest Accident and Emergency Department.
- If a child is in immediate danger the police should be contacted (dial 999) as they alone have the power to remove a child immediately if protection is necessary, via their powers to use police protection.
- **3.3.2** There are 4 key steps to follow to help you identify and respond appropriately to possible abuse and or neglect.





It may not always be appropriate to go through all 4 stages sequentially. If a child is in immediate danger or is at harm or risk you should refer to the children's social care and/or the police. Before doing so, you should try to establish the basic facts. However, it will be the role of the social workers and the police to investigate cases and make a judgement on whether there is statutory intervention and/or a criminal investigation.

You should record, in writing, all concerns and discussions about a child's welfare the decisions made and the reasons behind those decisions. (form found at end of policy)

The first step is to be alert to the signs of abuse and neglect, to have read this document.

3.4 When You Must Not Discuss Your Concerns with Parents/Carers.

It is good practice to be as open and honest as possible with parents/carers about any concerns. However, you MUST NOT discuss your concerns with parents/carers in the following circumstances:

- Where sexual abuse or sexual exploitation is suspected
- Where organized or multiple abuse is suspected
- Where fabricated or Induced Illness (previously known as Munchausen Syndrome by proxy) is suspected
- Where Female Genital Mutilation is the concern
- In cases of suspected Forced Marriage
- Where contacting parents/carers would place a child, yourself or others at immediate risk

These decisions should not be taken in isolation. Consult with your senior manager/line manager/Designated Safeguarding Lead or Integrated Referral and Assessment Team on 0191 433 2653

3.5 Recognising signs of abuse It is not always easy to recognise signs of abuse, but it is important for you to have some idea about some of the signs to look out for when you're concerned about a child.

Some common signs that there may be something concerning happening in a child's life include:

- Unexplained changes in behaviour or personality
- Becoming withdrawn
- Seeming anxious
- Becoming uncharacteristically aggressive



- Lacking social skills and having few friends, if any
- Poor bond or relationship with a parent
- Knowledge of adult issues inappropriate for their age
- Always choosing to wear clothes which cover their body

For more information visit:

https://www.nspcc.org.uk/what-is-child-abuse/spotting-signs-child-abuse/

3.5 What to do if Children Talk to You about Abuse or Neglect.

- Paid and volunteer staff in voluntary organisations need to be aware of their responsibilities for safeguarding and promoting the welfare of children, how they should respond to child protection concerns and make a referral to local authority children's social care or the police if necessary.
- Paid and volunteer staff should make sure that they are **alert** to the signs of abuse and neglect, that they **question the behaviour** of children and parents/carers and don't necessarily take what they are told at face value. They should make sure they know where to turn to if they need to **ask for help**, and **refer** to children's social care or to the police, if they suspect that a child is at risk of harm or is immediate danger (see the section on Taking action for further information).

It is recognised that a child may seek you out to share information about abuse or neglect or talk spontaneously individually or in groups when you are present. In these situations, YOU MUST:

- Listen carefully to the child. DO NOT directly question the child
- Give the child time and attention.
- Allow the child to give a spontaneous account; do not stop a child who is freely recalling significant events.
- Make an accurate record of the information you have been given taking care to record the timing, setting and people present, the child's presentation as well as what was said. Do not throw this away as it may later be needed as evidence.
- Use the child's own words where possible.
- Explain that you cannot promise not to speak to others about the information they have shared do not offer false confidentiality.
- Reassure the child that:
 - they have done the right thing in telling you;
 - they have not done anything wrong;
- Tell the child what you are going to do next and explain that you will need to get help to keep him/her safe.
- DO NOT ask the child to repeat his or her account of events to anyone

If a child discloses information to you about abuse or neglect you must take action.



Contact your Designated Safeguarding Lead or if you cannot contact them go straight to the Integrated Referral and Assessment Team on 0191 433 2653. If a child is in immediate danger of being harmed, or a young child has been left unsupervised, the police should be called on 999.

3.6 Consult about your Concern

Because of your observations of a child, or information received you may become concerned about a child who has not spoken to you.

Ask a child why they are upset or how a cut or bruise was caused or respond to a child wanting to talk to you. This practice can help clarify vague concerns and result in appropriate action.

If you are concerned about a child, you must share your concerns. Initially you should talk to one of the two designated safeguarding leads who are:

- 4. Saul Mark Sommer Tel: 07952305373 Director
- 5. Eliyohu Shepherd Tel: 07906344777 Director

It will usually be the designated person who will then get in touch **with Integrated Referral and Assessment Team** on 0191 433 2653.

If you are worried about a child and cannot contact a designated person, speak to another manager or go direct to the **Integrated Referral and Assessment Team** on 0191 433 2653. **Out of hours** the number to call is 0191 477 0844

3.7 How to Make a Referral

- **3.7.1** A referral involves giving the Integrated Referral and Assessment Team, or the Police at the Safeguarding Children Unit, information about concerns relating to an individual or family in order that enquiries can be undertaken by the appropriate agency followed by any necessary action.
- **3.7.2** Parents/carers should be informed if a referral is being made except in the circumstances outlined in Section 3.3.
- **3.7.3** However, inability to inform parents for any reason should not prevent a referral being made. It would then become a joint decision with the Integrated Referral and Assessment Team about how and when the parents should be approached and by whom.
- **3.7.4** If your concern is about harm or risk of harm from a family member or someone known to the children, you should make a referral to Integrated Referral and Assessment Team.
- **3.7.5** If your concern is about harm or risk of harm from someone not known to the child or child's family, you should make a telephone referral directly to the Police and consult with the parents.



3.7.6 If your concern is about harm or risk of harm from an adult in a position of trust (see Section 3.8: Allegations against Adults Who Work with Children).

Information required when making a referral

- **3.7.7** Be prepared to give as much of the following information as possible (in emergency situations all of this information may not be available). Unavailability of some information should not stop you making a referral.
 - Your name, telephone number, position and request the same of the person to whom you are speaking.
 - Full name and address, telephone number of family, date of birth of child and siblings.
 - Gender, ethnicity, first language, any special needs.
 - Names, dates of birth and relationship of household members and any significant others.
 - The names of professionals known to be involved with the child/family e.g.: GP, Health Visitor, School.
 - The nature of the concern; and foundation for the concern.
 - An opinion on whether the child may need urgent action to make them safe.
 - Your view of what appears to be the needs of the child and family.
 - Whether the consent of a parent with Parental Responsibility has been given to the referral being made.

Action to be taken following the referral

- **3.7.8** You must take the following action after making a referral:
 - Ensure that you keep an accurate record of your concern(s) made at the time.
 - Or if you contacted Gateshead Council's Children's Social Care via phone, accurately record the action agreed or that no further action is to be taken and the reasons for this decision.

3.8 Allegations against Adults who work with Children

- **3.8.1** If you have information which suggests an adult who works with children for Regal Respite (in a paid or unpaid capacity) has:
- Behaved in a way that has harmed, or may have harmed, a child;
- Possibly committed a criminal offence against children, or related to a child; or
- Behaved towards a child or children in a way that indicates s/he may pose a risk to children.
- **3.8.2** You should speak immediately with your DSL who has responsibility for managing allegations. The DSL can seek informal advice from the Designated Officer at the local authority in deciding how to take the concern forward.



3.9 Confidentiality

3.9.1 The organisation should ensure that any records made in relation to a referral should be kept confidentially and in a secure place.

3.9.2 Information in relation to child protection concerns should be shared on a "need to know" basis. However, the sharing of information is vital to child protection and, therefore, the issue of confidentiality is secondary to a child's need for protection. <u>Information sharing advice for safeguarding practitioners.</u>

3.9.3 If in doubt, consult.

3.10 Useful contact details

Designated Safeguarding Lead

Saul Mark Sommer Tel: 07952305373

Deputy Designated Safeguarding Lead

Eliyohu Shepherd Tel: 07906344777

Gateshead Council's Children's Social Care: 0191 433 2653 during office hours, Mon-Fri 8.30 am - 5.00 pm or

Out of Hours at night, at weekends and bank holidays: 0191 477 0844 if you are worried about a child.

Email: R&Aduty@gateshead.gov.uk

Postal address: Gateshead Local Safeguarding Children Board, Gateshead Civic Centre, Regents Road, Gateshead, NE8 1HH

All referrals from professionals must be made in writing, for online forms go to: https://www.gateshead.gov.uk/article/3948/Worried-about-a-child-in-Gateshead

NSPCC Helpline: 0808 800 5000

help@nspcc.org.uk ChildLine: 0800 1111

Child Line textphone 0800 400 222)

Northumbria Police non-emergency number is 101

enquiries@northumbria-pcc.gov.uk



This procedure is consistent with the government guidelines set out in *Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children*, 2019, and with Keeping Children Safe in Education 2019 (recruitment guidance)

This policy has been drawn up following national and local guidance on legislation, policy and guidance.

Key legislation:

- A summary of key national legislation learning.nspcc.org.uk/child-protectionsystem/England/
- Working together to safeguard children (2018), visit
 https://www.gov.uk/government/publications/working-together-to-safeguard-children--2
- What to do if you're worried a child is being abused, visit https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2
- Multi agency safeguarding children procedures

Staff and volunteers who work with children and young people should use the latest version of the relevant Local Safeguarding Children Board (LSCB) multi-agency procedures / practice guidance.

ADDENDUM TO SAFEGUARDING CHILDREN POLICY - JUNE 2020

SCOPE OF ADDENDUM

This addendum has been added to the Safeguarding Children Policy, in light of the effects of Covid 19. It will remain in force as long as service provision is impacted by Covid 19; staff or volunteers work or volunteer remotely and non-face to face activities are in place to enable services and programmes to continue. Together with the Safeguarding Children Policy, and other policies to which it is linked, it forms part of our stated aims of robust consideration for the safety of children and young people and protecting them from harm.

In all activities where there is provision for children and families, staff, volunteers, management and others will be bound by our Safeguarding Children Policy and any subsequent addendum, which may be added as the need arises.

OBJECTIVE OF THIS ADDENDUM

Regal Respite is aware of government Covid 19 guidance by which all operations are governed. Although we are operating in a different way to normal, we are still following important safeguarding principles.



- The best interests of children come first
- If anyone has a safeguarding concern about any child, they should continue to act on it immediately
- A designated safeguarding lead (DSL) or deputy will be available at all times
- > It is essential that unsuitable people do not gain access to children
- > Children should continue to be protected when they are online
- > Measures in line with government guidelines such as social distancing and hygiene protocols will be followed at all times. Retreats will only be offered when guidance will allow.

RAISING AWARENESS AND REPORTING CONCERNS

We will be mindful as to the effects of exposure to trauma, crises or bereavement and the effects of lockdown can have on the emotional stability of families. Staff and volunteers should be alerted to any early warning signs and Regal Respite will give consideration to staff or volunteer training needs in this regard. There will be a focus on the emotional health and wellbeing of staff and volunteers during these challenging times, so that everyone performs at their optimum levels.

It is still vitally important that any concerns about children or young people should be raised immediately with Designated Safeguarding Leads in line with protocols and/or addendums to Safeguarding policies.

Designated Safeguarding Leads can be contacted in the usual way to deal with any concerns in a timely and appropriate manner.

Working remotely or being in contact with service users remotely still offers opportunities to pick up concerns which should be acted upon in line with existing policies or special arrangements that may have to be put into place. It is better to err on the side of caution and to remember that information being shared, might be the missing piece of the jig saw puzzle.

The Charedi community does not encourage the use of social media and networking. As a result, children that have had minimal or no exposure to social media may be blissfully unaware of the risks involved. Schools and other settings are reaching out to all aged children and young people via a plethora of conference call provision and zoom meetings and teaching.

Children are tuning in to their arranged provisions, but some are also consciously experimenting with other avenues of communication online. We will raise awareness with families about keeping children safe online.

RECRUITING NEW STAFF AND VOLUNTEERS

We continue to recognize the importance of robust safer recruitment procedures, so that adults and volunteers applying to work, or volunteer are safe to work with children. We continue to follow Safer Recruitment procedures.

In urgent cases, verification of scanned proof of identity documents to apply for a DBS check will be accepted, rather than being in physical possession of the original documents (in line with revised guidance from the DBS). New staff or volunteers must still present the original documents when they first attend work.



Observer

SAFEGUARDING INDUCTION AND TRAININGS

Safeguarding training will continue to be offered in line with our Safeguarding Children Policy. New staff and volunteers will be given safeguarding induction including a focus on the Covid 19 Addendum for as long as it is operational. They will be required to familiarise themselves with the Safeguarding Children Policy and Addendum.

Existing staff/volunteers will be briefed on the Addendum to the Safeguarding Policy with which they should familiarise themselves and use as part of operating safely.

DESIGNATED SAFEGUARDING LEADS CONTACT DETAILS

Date & Time

D 2 3 1 3 1 1 1 1		LL/IDS COITI/IC	. 52171125				
6. Saul M	lark Sommer Tel: 0	7952305373					
7. Eliyohi	u Shepherd Tel: 07	906344777					
Signed	l:			Date:			
Child Protect	ion Procedures Incident	Concerns/Referral	. Form F	Records should be handwritt	en :		
Childs address							
	he nature of this report:	ccurring					
	involved/witnessed an incident	-					
	e received an allegation of abuse						
	d has told me that they are beir						
	n to be on a child protection re		Yes/No				
	cident details as follows:	Bioter.	resynto				
Context	Incident	What child said	What you said	Action	Concern	Observer	Sig.
					raised with parents		of
				i			



Was any other person present at the time of the allegation being made? Yes/No
If Yes, please detail who
Any further action or details must be recorded on the monitoring sheet - (unless a further separate incident needs recording on another incident referral sheet).
CONFIDENTIAL: MAY ONLY BE KEPT IN DESIGNATED SECURE PLACE



Child Protection Procedures Monitoring Sheet

To be used when a situation is being monitored Records should be handwritten

This monitoring form is for those children about whom there is concern or whose name is on the child protection Please record summary details as follows: Date Concern Action Concern raised Observ	
Please record summary details as follows: Date Concern Action Concern raised Observ	
Date Concern Action Concern raised Observ	register.
	ver

CONFIDENTIAL INFORMATION MAY ONLY BE KEPT IN DESIGNATED SECURE PLACE

Child's Name



Signed by person recording ______ on date _____

	Name Of Child Date Of Birth Name Of Worker Date Recorded Observations