**SAFEGUARDING POLICY**

All Trustees, helpers, volunteers, users and hirers of the Ashenground Community Centre MUST comply with this policy. Users and hirers must provide the Centre, in writing, with adequate evidence to demonstrate compliance. This includes formal adoption of this policy and is evidenced by signing the Booking Form.

**GUIDING PRINCIPLES**

The welfare of the child is paramount. All children, without exception, have the right to protection from abuse.

As a community centre, the Trustees of the Ashenground Community Centre (ACC) want every child who uses the centre, regardless of age, to develop their potential and to enjoy and benefit from the services and facilities we have to offer. We therefore believe that at all times and in all situations they have a right to feel safe and protected from any situation or practice that might lead to their being physically or psychologically damaged. This policy is our commitment to provide systems for recognising and reporting any such risk, and outlines our duty of care to safeguard all children involved in activities at the centre.

**POLICY AIMS**

The aim of the ACC Child Protection Policy is to promote good practice.

Allow all staff/volunteers to make informed and confident responses to specific child Protection issues.

Safeguard children who are vulnerable to extremism – See Appendix B.

**STAFF INVOLVEMENT & POLICY APPLICATION**

Staff and Volunteers working directly with the ACC do not have regular or extensive involvement with children; the majority of contact is indirect through the use of the premises by external groups or clubs.

This Child Protection Policy applies to all Trustees, staff, volunteers, members, hirers and members of the public using the ACC premises.

It is the responsibility of all staff, paid and volunteers, Trustees, members and Centre users to follow the ACC Child Protection Policy guidelines (See Addendum) and to work together to maximise the protection we can offer children who use our facilities.

Whilst all staff are aware of, and have agreed to comply with, this policy, there will be many events and activities at the centre where parents are present and they must accept full responsibility for the activities and behaviour of their children.

**DEFINITIONS**

Child – Any person who has not yet reached their eighteenth birthday.

Young Person – Any person aged sixteen or seventeen.

Child Abuse – The actual harm or likely harm suffered by, or suspected, in relation to a person under the age of eighteen. That harm will be attributed to physical injury, neglect, emotional abuse or sexual abuse.

**CHILD PROTECTION POLICY**

1. No member of the Trustees, Management Committee, helpers or other persons contracted (or volunteering) to provide occasional or temporary services will have unsupervised access to children unless appropriately vetted.
	1. All members of the trustees, helpers or other persons contracted (or volunteering) to provide occasional or temporary services will be made aware of this policy and the relevant vetting procedures. Should checks become necessary, they will be undertaken in compliance with the relevant law pertaining at the time.
2. All suspicions or allegations of abuse against a child will be taken seriously and dealt with speedily and appropriately.
	1. A Trustee will be appointed for Child Protection Matters. This person will have responsibility for reporting concerns that arise, as a matter of urgency, to the local authority Child Protection lead agency.
3. All trustees and volunteers will be required to become aware of Child Protection issues.
	1. Copies of the relevant Acts and Department of Health guidelines will, **if necessary,** be held by the Trustees as reference material for volunteers. Relevant Child Protection training for Trustees will be encouraged.
4. The policies and procedures will be regularly reviewed.
	1. An annual review will take place following the AGM to allow for any required up-date of policies and or procedures. New trustees and volunteers will be provided with an understanding of their responsibilities in matters of child protection.
5. Members of the local community, hirers and members of the public who use the facilities provided by the ACC should be aware of the Child Protection policies as adopted by the Group.
	1. All hirers who wish to use the Centre for activities which include children and vulnerable adults, other than for hire for private parties arranged for invited friends and family only, will be asked to produce a copy of their Child Protection Policy. A copy of the ACC policy will be available in the Policy folder kept in the kitchen.

**Full guidance is contained in the addendum following this policy document.**

**CONTACT NUMBERS**

ACC Trustee appointed for Child Protection – Beth Hinton 07971 095243

ACC Trustee appointed for SPOC (Prevent Duty) – Beth Hinton 07971 095243

ACC Chairperson – Richard Goddard 07860 280238

Safeguarding Board (Central Access Point) 01403 229900

Or  Email mash@westsussex.gcsx.gov.uk

Multi Agency Safeguarding Hub, 4th Floor, County Hall North (Parkside), Chart Way, Horsham, West Sussex, RH12 1XH

Social Services Emergency out of hours 03302 226664

Childline – 0800 1111

NSPCC Helpline – 0808 800 5000

Local Police Child Protection Team – 0845 607 999

**Approved by Trustee Board November 2018**

**Good Practice Guidelines (Appendix A)**

**GOOD PRACTICE MEANS**

Always working in an open environment avoiding private or unobserved situations and encouraging open communication.

Treating all young people/disabled adults equally with respect and dignity.

Always putting the welfare of each young person first. Making activities fun, enjoyable and promoting fair play.

Maintaining a safe and appropriate distance.

Building balanced relationships based on mutual trust and empowering children to share in decision making.

Ensuring that if any form of manual/physical support is required, it should be provided openly.

Involving parents/carers wherever possible.

Giving enthusiastic and constructive feedback rather than negative criticism.

Securing parental consent in writing, in case the need arises to administer emergency first aid and/or other medical treatment.

Keeping a written record of any injury that occurs, along with the details of any treatment given. (This should be recorded in the accident book within the First Aid box located in the kitchen).

Requesting written parental consent if officials are required to transport young people in their cars (though this should be avoided).

**PRACTICES TO BE AVOIDED**

The following should be avoided except in emergencies. If a case arises where these situations are unavoidable (e.g. the child sustains an injury and needs to go to hospital, or a parent fails to arrive to pick a child up at the end of a session), it should be with the full knowledge and consent of someone in charge of the group or the child’s parents.

Otherwise, avoid:

* Spending excessive amounts of time alone with children away from others.
* Taking or dropping off a child to an event or activity, without written parental consent.

**PRACTICES NEVER TO BE SANCTIONED**

The following should never be sanctioned. You should never:

* Engage in rough physical or sexually provocative games, including horseplay.
* Share a room with a child.
* Allow or engage in any form of inappropriate touching.
* Allow children to use inappropriate language unchallenged.
* Make sexually suggestive comments to a child, even in fun.
* Reduce a child to tears as a form of control.
* Allow allegations made by a child to go unchallenged, unrecorded or not acted upon.
* Do things of a personal nature for children or disabled adults that they can do for themselves.
* Invite or allow children to stay with you at your home unsupervised.

**USE OF PHOTOGRAPHIC/FILMING EQUIPMENT**

Evidence suggests that some people have used some activities as an opportunity to take inappropriate photographs or film footage of young and disabled people in vulnerable positions. All clubs should be vigilant and any concerns should to be reported to the group leader.

Imaging devices (including mobile phones/tablets) should only be used with prior consent from the parents/carers of all those being photographed. The use of any photos showing children should be made clear while obtaining that consent. Parents taking photographs of their own children can only be for personal use and they are not to post them on social media sites if they contain images of other people’s children.

Video as a training aid: there is no intention to prevent appropriate groups using video equipment as a legitimate training/teaching aid. However, children and their parents/carers should be made aware that this is part of the programme and give written consent. Such films should be stored safely.

**CONFIDENTIALITY**

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and discussed on a need to know basis only (with need being defined as need to ‘*have access in the course of their duties’*). This includes the following people:

The ACC Trustee for Child Protection

The parents of the person who is alleged to have been abused

The person making the allegation

Social Services or Police

The ACC Chairperson

No confidentiality agreement should be offered to children in a disclosure situation.

**MANAGING INCIDENTS**

If any of the following occur you should report this immediately to another colleague and record the incident. You should also ensure the parent/carer of the child is informed:

* If you accidentally hurt a child
* If he/she seems distressed in any manner
* If a child appears to be sexually aroused by your actions
* If a child misunderstands or misinterprets something you have done.

**RESPONDING TO ALLEGATIONS OR SUSPICIONS**

It is not the responsibility of anyone working in the ACC, in a paid or unpaid capacity, 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. Contact should be made with the ACC Trustee for Child Protection who will support you in following the reporting procedures.

The ACC assures all staff/volunteers; that it will fully support and protect anyone who in good faith reports his/her concern that a centre user is, or may be, abusing a child.

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

* A Criminal investigation
* A Child Protection investigation
* A Disciplinary or Misconduct investigation.

The results of the police and child protection investigation may well influence the disciplinary investigation, but not necessarily.

**MEDICAL EMERGENCY**

The centre users must call an ambulance if a child requires emergency medical treatment and inform the Duty Social Worker at the Social Services Department, immediately if there is any suspicion that the injury is non-accidental. Staff must not transport children in their own cars.

Parents/carers must be contacted immediately if possible. A written consent form for emergency medical treatment should have been completed when the child started using the provision. Parents/carers should be informed of the specific symptoms or injuries which make it urgent that the child sees a doctor, *but not that abuse is suspected.*

ACC request that the Child Protection Trustee is informed of the incident as soon as possible.

**CONCERNS ABOUT SUSPECTED ABUSE**

Any suspicion that a child has been abused by either a member of staff or a volunteer should be reported to the ACC Trustee for Child Protection, who will take such steps as considered necessary to ensure the safety of the child in question and any other child who may be at risk.

The Trustee will refer the allegation to the Social Services Department, which may involve the police, or go directly to the police if out-of-hours.

The parents or carers of the child will be contacted as soon as possible following advice from the Social Services Department.

The Trustee will also notify the ACC Chairperson who will deal with any media enquiries.

If the Trustee is the subject of the suspicion/allegation, the report must be made to the ACC Chairperson, who will refer the allegation to social services.

**DISCLOSURE OF ABUSE**

In cases where a child makes a disclosure of abuse or where there is strong suspicion of abuse, the procedure is slightly different:

STAFF MUST NOT TRY TO INVESTIGATE THE MATTER THEMSELVES, or question a child for further information. This is a specialist task and is the responsibility of the Social Services Department who work in conjunction with the Police Child Protection Team. Inappropriate questioning, i.e. asking leading questions, can lead to vital evidence being inadmissible in court. It is also essential that where a child's clothing may be used as evidence, it is not tampered with, and that any evidence, such as a child's drawing, is not discarded.

The centre user must immediately report the concerns/incident to the Duty Social Worker at the Social Services Department who will decide what action to take. In cases where the parents/carers are the alleged abusers, the centre user/group leader must not inform parents/carers before reporting it the Duty Social Worker.

ACC request that the Child Protection Trustee is informed of the incident as soon as possible.

**ACTION IF BULLYING IS SUSPECTED**

If bullying is suspected, the following procedure should be followed:

* Talk with the bully(ies), explain the situation, and try to get the bully(ies) to understand the consequences of their behaviour. Seek an apology to the victim(s).
* Inform the bully(ies)’s parents.
* Provide support for the victim and their parent/carers.
* Impose sanctions as necessary.
* Encourage and support the bully(ies) to change behaviour.
* Hold meetings with the families to report on progress.
* Inform all organisation members of action taken.
* Keep a written record of action taken.

**Prevent Duty 2015**

Children and Young People may be vulnerable to radicalisation by others, whether in the family or outside and display concerning behaviour. Staff must take action when they observe behaviour of concern. By informing the ACC Trustee appointed for Child Protection – Beth Hinton 07971 095243

**FGM – Female Genital Mutilation**

ACC believe that all our users should be kept safe from harm. Female Genital Mutilation affects girls particularly from North African countries, including Egypt, Sudan, Somalia and Sierra Leone. Although our organisation has few children from these backgrounds and consider girls in our organisation to be safe from FGM, we will continue to review our policy annually.

If you are concerned inform the **ACC** Trustee appointed for Child Protection – Beth Hinton 07971 095243

**Appendix B**

**SAFEGUARDING CHILDREN WHO ARE VULNERABLE TO EXTREMISM**

Since 2010, when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been several occasions both locally and nationally in which extremist groups have attempted to radicalise vulnerable children and young people to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.

 At Ashenground Community Centre wevalue freedom of speech and the expression of beliefs / ideology as fundamental rights underpinning our society’s values. All Trustees, helpers, volunteers, users and hirers of the Ashenground Community Centre have the right to speak freely and voice their opinions. However, freedom comes with responsibility and free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion.

 The current threat from terrorism in the United Kingdom may include the exploitation of vulnerable people, to involve them in terrorism or in activity in support of terrorism. The normalisation of extreme views may also make children and young people vulnerable to future manipulation and exploitation. The Trustees of the Ashenground Community Centre (ACC) are clear that this exploitation and radicalisation should be viewed as a safeguarding concern.

The Trustees of the Ashenground Community Centre (ACC) seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

**Risk reduction**

 The Trustees and the Designated Safeguarding Lead will assess the level of risk within the centre and put actions in place to reduce that risk. Risk assessment may include consideration of the users and other issues specific to the Ashenground Community Centre (ACC), community and philosophy.

**Response**

 The Trustees of the Ashenground Community Centre (ACC), like all others, are required to identify a Prevent Single Point of Contact (SPOC) who will be the lead within the organisation for safeguarding in relation to protecting individuals from radicalisation and involvement in terrorism: this will normally be the Designated Safeguarding Lead. The SPOC for the Trustees of the Ashenground Community Centre (ACC) is named in the contacts list above.

When any member of staff has concerns that a child may be at risk of radicalisation or involvement in terrorism, they should speak with the SPOC and to the Designated Safeguarding Lead if this is not the same person.

 Numerous factors can contribute to and influence the range of behaviours that are defined as violent extremism, but most young people do not become involved in extremist action. For this reason the appropriate interventions in any particular case may not have any specific connection to the threat of radicalisation, for example they may address mental health, relationship or drug/alcohol issues.