

mayford  
road  
children's home



## **Child Protection**

### **Introduction**

All staff must be aware of the possibility that a child may be abused during the period he/she is at the home. A child may also disclose that he/she has been abused prior to their admission to the home.

Staff at all levels have a key role in identifying abuse when it is suspected or identified and in bring it to the attention of the manager or an external person.

Staff at Mayford Road have a duty of care to safeguard, protect and value young people in their care regardless of the child's race, religion, first language or ethnicity, gender, sexuality, age, health, political or immigration status.

Staff will ensure the young people have access to opportunities that enable them to achieve their full potential.

### **Definitions of Child Abuse**

A child or young person up to the age of 18 years is considered to be abused or at risk of abuse by parents or carers when the basic needs of the child are not being met through acts which have caused or have placed the child at risk of significant harm.

Harm is defined by the Children Act as ill treatment or impairment of health or development.

## **Categories of Abuse**

### **Sexual Abuse**

Actual or likely sexual exploitation of a child or adolescent.

Sexual abuse is the forcing or coercion of a young person to take part in sexual activity whether or not the young person is aware of what is happening. This may involve physical contact such as prostitution, rape, buggery or oral sex. Non-contact abuse may involve encouraging young people to look at or be involved in the production of online sexual images, watching sexual activities and behaving in sexually inappropriate ways.

### **Physical Abuse**

Actual or likely physical injury to a child or failure to prevent physical injury, or suffering.

*Physical abuse may involve burning, hitting, drowning, suffocating, throwing or otherwise causing physical harm to a child. Physical abuse also involves the parent or carer deliberately inducing illness in a child (formerly known as Munchausen's by proxy)*

### **Emotional Abuse**

Actual or likely severe adverse effect on the emotional and behavioural development of a child caused by persistent or severe emotional ill treatment or rejection.

*Emotional abuse involves the conveying to children that they are worthless, unloved and*

*inadequate, causing severe and persistent adverse effects on the child's emotional well-being.*

### **Neglect**

The persistent or severe neglect of a child, or the failure to prevent a child from exposure to any kind of danger, which results in the significant impairment of the child's health or development.

*Neglect involves the failure to meet a child's basic physical and psychological needs which leads to the impairment of the child's health or development. Neglect may also occur before a child is born if the mother is involved in substance misuse. Other forms of neglect include failing to provide food, clothing and shelter, failing to protect the child from emotional and physical harm and danger, failing to provide adequate supervision and failing to ensure that the child has access to appropriate medical care or treatment*

## **General Comments**

Staff must be aware that all people have the potential for child abuse and that evidence indicates once a person has abused is very likely to do it again.

Children may suffer neglect, emotional, physical or sexual abuse or a combination of such types of abuse.

## **Policy**

All children have rights to protection under the Children Act 1989/04.

This child protection procedure is available to all staff. All staff will have received training in recognising the signs and symptoms of abuse and what to do in the event or suspicion of abuse.

In addition to the child protection procedure, staff will be provided with access to the manual containing Wandsworth's Safeguarding Procedures, Working Together and a wide range of reference material.

Whatever the circumstances of the alleged abuse, it is essential that the first priority be given to protecting the child and then setting in motion enquiries and or investigation through making the appropriate arrangements.

## **Procedure**

Whenever staff receives information that a child maybe suffering or has suffered abuse, they must;

1. Pass this information, without delay, to the Manager of the home
2. In the absence of the manager the consultant to the home must be informed.
3. A decision will be made whether to consult with and or refer the matter to the Social Safeguarding board who have lead responsibility for co-ordinating any necessary action.
4. Depending on the nature of the information, OFSTED is to be informed. (08456 404040)

## **Responding to a young person making a disclosure or allegation.**

The member of staff the child is disclosing to should:-

- 1) Remain calm so as not to frighten the young person.
- 2) Listen carefully to what they are being told.
- 3) Reassure the child that they are right to tell someone.
- 4) Not make promises of confidentiality and ensure the child knows that they will have to tell another authorised person i.e. the manager, consultant and social worker.
- 5) Take what the child says seriously.

**Actions to be avoided**

The member of staff the child has disclosed to should not:-

- 1) Panic.
- 2) Allow their shock or distaste to show.
- 3) Probe for more information than the child is offering or ask leading questions.
- 4) Speculate or make assumptions.
- 5) Make negative comments about the alleged abuser.
- 6) Approach the alleged abuser.
- 7) Make promises to keep secrets.
- 8) Discuss the allegations with anyone other than authorised people.

**REFERRALS**

WHERE THERE ARE CONCERNS ABOUT A CHILD IN THE HOME – ADVICE AND GUIDANCE CAN BE SOUGHT FROM:

WANDSWORTH SAFEGUARDING BOARD

LINDE WEBBER  
WANDSWORTH SAFEGUARDING CHILDREN BOARD  
3<sup>RD</sup> FLOOR  
WELBECK HOUSE  
43-51 WANDSWORTH HIGH STREET  
LONDON  
SW18 2PU

TELEPHONE NUMBER: 020 8871 8610  
FAX: 020 8871 7217

Email: [wscb@safeguardingchildreninwandsworth.org.uk](mailto:wscb@safeguardingchildreninwandsworth.org.uk)

### **Confidentiality**

If a child seeks to inform staff that they have been abused, staff are not to give them guarantees of confidentiality. Otherwise staff could be in the untenable position of possessing information that a crime has been committed without the necessary freedoms to report it.

It is essential that a relationship is built up between The children and staff such that they feel they can trust staff to do the right thing with a disclosure of abuse. Staff must listen very carefully to what they are being told, although they must not conduct an interview with the young person in an attempt to probe for more information. The young person will tell the member of staff as much as they feel comfortable with.

### **Recording**

As soon as practicable and within 24 hours, staff must record in writing as much detail of the disclosure as possible. This record should include when and where and to whom the disclosure was made.

### **Suspected or alleged abuse between young people**

Should a child abuse another child, a clear distinction will need to be made between, on one hand, behaviour which amounts to serious physical assault, intimidation and sexual assault which may require external child protection intervention and possibly criminal investigation and, on the other hand, normal childhood behaviour or sexual exploration which should be dealt with internally.

All incidents of this nature are to be reported to the manager or consultant and documented in accordance with procedures.

### **Bullying**

Bullying is normally regarded as hurtful behaviour that is usually repeated over a period of time and which may result in the victim being unable to protect themselves.

The effect that bullying may have should never be underestimated as it can cause considerable distress to young people. The effects may result in the child having health or development problems, self harming and in extreme cases, suicide.

Victims are usually shy, nervous, anxious or insecure. They may be singled out because of physical reasons, they may be overweight, of a different culture or faith, wear glasses and the list is endless.

The bullying usually takes place where there is a lack of adult supervision, commonly being on the way to school, on the way back home, in the local park etc.

Bullies may do so for a variety of reasons and may have been bullied or abused themselves – the crucial point is that they have learnt how to gain power over others.

Bullying takes many forms and may include:-

- 1) **Physical attacks** – hitting, kicking and theft of property.
- 2) **Verbal attacks** – teasing, sarcasm, name calling, racist or homophobic taunts and threats.
- 3) **Emotional abuse** – tormenting, humiliation, ridiculing and being ignored.
- 4) **Sexual abuse** – unwanted physical contact and sexually inappropriate comments.

The victim may react in several ways and staff should be vigilant in their observations. The effect of bullying may result in:-

- 1) **Behavioural changes** – becoming withdrawn, tearful, depressed, mood swings and no longer getting pleasure out of activities that they had previously enjoyed.
- 2) A reluctance to go to school, a drop in their performance and a lack of concentration.
- 3) **Physical signs** – stomach aches, headaches, bed-wetting, difficulty in sleeping, scratching or bruising, damaged clothes and overindulgence with cigarettes or alcohol.
- 4) A shortage of money or the frequent loss of personal property.

All bullying must be taken seriously and confronted and addressed by staff

#### **Suspected or alleged abused by a staff member**

It is incumbent upon staff to put the welfare and well being of the child first and to be aware and alert to the possibility that a colleague may be abusing a child in his/her care.

Every member of staff has a duty to report any concerns or practice issues relating to the care of the young people immediately to their senior who will then inform the manager or consultant and the owner. Any staff reporting a concern will be supported through this process.

If concerns arise and staff feel unable to discuss these concerns with the Manager or consultant, they should contact social services directly (see 'whistleblower' policy).

In the event of an allegation or suspicion of abuse against a member of staff, it is normally appropriate for the member of staff concerned to be suspended from duty on the grounds of the possibility of the alleged abuse recurring or concern that his/her presence might interfere with the investigation.