

## **Safeguarding Policy**

### **1. Introduction**

- 1.1. Sacriston Youth and Community Project ("the Charity") is committed to providing practice that protects children or young people from harm. Staff and volunteers who work for the Charity will recognise and accept our responsibilities to develop the awareness of the issues that may cause children or young people harm.
- 1.2. As a Charity we make provision for children and young people to ensure that:
  - 1.2.1. The welfare of the child or young person is paramount.
  - 1.2.2. All children and young people, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity have the right to protection from abuse.
  - 1.2.3. All suspicions and allegations of abuse and poor practice will be taken seriously and responded to swiftly and appropriately.
  - 1.2.4. All staff and volunteers working with children and young people have a responsibility to report concerns to the Charity's Designated Safeguarding Lead.
- 1.3. We will equip staff and volunteers with the necessary information and knowledge to give children and young people the support, guidance and help needed.

### **2. Policy Statement**

- 2.1. Sacriston Youth and Community Project has a duty of care to safeguard all children who access or attend our services from harm. All children and young people have a right to protection, and the needs of disabled children and others who may be particularly vulnerable must be taken into account. The Charity will ensure the safety and protection of all children and young people involved through adherence to the Child Protection guidelines adopted by the Charity.

### 3. **Policy aims**

3.1. The aim of the Safeguarding Policy is to promote good practice:

- Providing children and young people with appropriate safety and protection whilst in the care of the Charity.
- Allow all staff/volunteers to make informed and confident responses to specific child protection issues.

3.2. The Charity will endeavour to safeguard children and young people by: –

- Adopting Safeguarding Policies and Guidelines through a code of behaviour for all staff or volunteers.
- Providing adequate up to date training around safeguarding issues.
- Ensuring that Disclosure and Barring Service (DBS) check are in place for all staff and volunteers.
- Ensuring all staff and volunteers are aware of the Safeguarding Procedures and Policies,
- Appointing designated people to enable any concerns to be reported in accordance with Policies and Procedures.
- Reviewing Policies and Good Practice Guidelines on a regular basis.

### 4. **The Safeguarding Team**

4.1. The Charity has an appointed Designated Safeguarding Lead (DSL) who is responsible for overseeing the implementation of this Policy. The Charity's Designated Safeguarding Lead is Jo Cameron, Trustee and the Safeguarding Officer is Helen Lee, Session Lead for Minis and Juniors. As first point of contact any Safeguarding issue should be reported to your immediate Session Lead.

### 5. **Definition of Abuse**

5.1. A child is considered to be abused, or at risk of abuse, when basic needs are not met by avoidable acts of either commission or omission: in other words there is a recognition that abuse is not necessarily a physical act but can occur through omitting to act. Abuse can also involve exposing children to activities that are, in themselves, abusive (this can include pornography, grooming etc).

5.2. 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. The four main types of abuse; Physical, Emotional, Sexual and Neglect:

#### 5.2.1. **Physical abuse**

Physical abuse 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.

Most children suffer accidents from time to time, which result in physical injury. When faced with an injured child the worker must decide whether the accident is of accidental origin or not.

Some injuries may seem insignificant in themselves but repeated injuries, even of a minor nature, may be symptomatic of child abuse and if no action is taken the child may be injured more seriously.

Physical injuries of children can take many forms, including; bruises, fractures, scalds/burns, weal's, scars, brain injuries, eye injuries, internal injuries, poisoning, bites, grip marks.

Common sites for accidental injuries are: forehead, crown, bony spine, elbow, hip, knee and shin.

#### 5.2.2. **Emotional Abuse**

Emotional abuse is 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 children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the 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 causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Abuse may include: verbal hostility, ridicule, sarcasm, shaming, belittling, threatening, tantalising.

It may go on to cruel treatment, e.g.: locking children in their bedrooms or cupboards; making unrealistic domestic demands of them; withholding basic needs such as food, warmth, clothing, as punishment.

Young people may require protection as a result of their own action. These may include:

- Inappropriate use of computers
- Ill-judged relationships
- Inappropriate social behaviour such as bullying
- Misuse of drugs or alcohol
- Sexually explicit language or behaviour
- Eating disorders
- Self-harming
- Running away

### 5.2.3. **Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, including prostitution, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts.

They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

The nature of sexual abuse covers a broad spectrum from caressing to intercourse.

Sometimes there are physical signs and symptoms which may indicate sexual abuse, including:

- Injury to the genitals or anal area, e.g. tearing or bruising
- Infection or abnormal discharge in the genital, anal or oral area
- Pregnancy (real or imagined)

Sometimes there are behavioural signs or symptoms which may indicate sexual abuse, including:

- Sexualised behaviour
- Sexualised drawing or play
- Sudden decline in school performance
- Regression i.e. soiling or wetting
- Low self esteem
- Psychosomatic disorders
- Suicidal acts or threats
- Sexual victimisation of others
- Promiscuity or promiscuous behaviour
- Eating disorders
- Sleep disturbance or nightmares
- Depression
- Running away

#### 5.2.4. **Neglect**

Neglect is 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 and clothing, shelter including exclusion from home or abandonment, failing to protect a child from physical and emotional harm or danger, failure to ensure adequate supervision including the use of inadequate caretakers, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators of Neglect may include:

- A child who is underweight for their age
- Cold mottled skin or poor skin condition
- Swollen limbs or sores which are slow to heal

- Diarrhoea (due to poor/inappropriate diet, irregular meals and tension)
- Abnormal voracious appetite
- Patchy hair or bald spots

NB: This is not exhaustive or exclusive.

## 6. **Bullying**

- 6.1. Bullying is not defined as a form of abuse in *Working Together* but there is clear evidence that it is abusive and will include at least 1, if not 2, 3 or all 4 of the defined categories of abuse. For this reason it is included here below.
- 6.2. Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the 3 main types are physical (hitting kicking theft), verbal (eg racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group). The damaging inflicted by bullying can frequently be under estimated. It can cause considerable distress to children and young people to the extent that it affects their health and development or, at the extreme, causes them significant harm (including self-harm). All settings in which children and young people are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies.

## 7. **Terrorism**

- 7.1. All childcare providers have a vital role to play in protecting children and young people from the risks of extremism and radicalisation, a role which is underpinned by the Counter-Terrorism and Security Act 2015 "to have due regard to the need to prevent people from being drawn into terrorism.
- 7.2. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
- 7.3. Extremism is defined by the Government in the Prevent Strategy as: Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

- 7.4. The Government's Prevent Strategy has raised awareness of the specific need to safeguard children, young people and families from violent extremism and terrorism. There have been nationally situations in which extremist groups have attempted to radicalise 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.
- 7.5. The Charity values freedom of speech and the expression of beliefs / ideology as fundamental rights underpinning our society's values. Children, young people and staff 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.
- 7.6. The current threat from terrorism in the United Kingdom may include the exploitation of individuals, 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 Charity is clear that this exploitation and radicalisation should be viewed as a safeguarding concern.
- 7.7. The Charity 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.
- 7.8. **Risk reduction**
- 7.8.1. The Management Team / Board of Trustees, the Designated Safeguarding Lead (DSL) and Safeguarding Officer will assess the level of risk within the organisation and put actions in place to reduce any identified risks.
- 7.9. **Procedure**
- 7.9.1. Keeping children and young people safe from these risks is a safeguarding matter and should be approached in the same way as safeguarding children from other risks.

- 7.9.2. When any member of staff has concerns that a child or young person may be at risk of radicalisation or involvement in terrorism, they should speak with the Designated Safeguarding Lead who will have responsibility for assessing whether the child or young person may be at risk of radicalisation and where relevant, for referring the child to the Police Prevent Team.
- 7.9.3. Numerous factors can contribute to and influence the range of behaviours that are defined as violent extremism, but most children or 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.

## **8. Recruitment and Training of Staff and Volunteers**

- 8.1. The Charity recognises that anyone may have the potential to abuse children in some way and that all reasonable steps are taken to ensure unsuitable people are prevented from working with children. Pre-selection checks must include the following:
  - 8.1.1. All volunteers/staff should complete an application form. The application form will elicit information about an applicant's past and a self disclosure about any criminal record
  - 8.1.2. Two confidential references, including one regarding previous work with children. These references must be taken up and confirmed.
  - 8.1.3. Evidence of identity (passport or driving license with photo).
  - 8.1.4. All staff and volunteers are subject to a Disclosure and Barring Service (DBS) check. All staff will be subject to renewal of police checks at least once every three years.
  - 8.1.5. All staff, whether paid or voluntary, will undergo an interview conducted by at least two panel members
  - 8.1.6. Panel members will assess applicants and seek explanations for: gaps in employment history, a number of house moves, changes in name etc.
  - 8.1.7. DBS checks are only as good as the day they are received; therefore the Charity's staff and volunteers will endeavour to work in pairs and to good practice guidelines.
  - 8.1.8. All staff will be subject to a satisfactory probationary period.
  - 8.1.9. Interview panels may request verification of qualifications and work placements.



## 9. **Rehabilitation of offenders**

- 9.1. All applicants are subject to Disclosure and Barring Service (DBS), whilst there are a number of situations preventing applicants from working with children, the Designated Safeguarding Lead will review individuals circumstances and may, on occasion, and without precedent employ former offenders providing they are not on the sex offenders register, have a schedule one conviction or subject to license or court orders preventing them from working with children.

## 10. **Induction**

All employees and volunteers should receive an induction, during which:

- The job requirements and responsibilities should be clarified.
- Safeguarding procedures should be and explained and training needs identified.

## 11. **Training**

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

- Analyse their own practice against established good practice, and to ensure their practice is not likely to result in allegations being made.
- Recognise their responsibilities and report any concerns about suspected poor practice or possible abuse.
- Respond to concerns expressed by a child or young person.
- Work safely and effectively with children.

## 12. **Physical Contact**

- 12.1. Staff and Volunteers need to be aware of any physical contact they may have with a child or young person, for instance,

- Keep everything public, for example, a hug with a child is hurt or upset within a group context is very different from one behind closed doors.
- Touch should be age-appropriate and generally be initiated by the child.

- Workers should avoid any physical activity that is, or may be thought to be, sexually stimulating to the adult or the child.
- Children have the right to decide how much physical contact they have with others, except in exceptional circumstances such as when they need medical attention.
- When giving first aid (or applying sun cream, etc.), workers should encourage the child to do what they can manage themselves, but consider the child's best interests and give appropriate help where necessary.
- Staff and volunteers should monitor one another in the area of physical contact. They should help each other by constructively challenging anything which could be misunderstood or misconstrued.

### 13. **Reporting an Incident**

13.1. If a member of staff or volunteer observes a safeguarding incident or concern or is made aware of one by a colleague, child or young person, they should adhere to the following guidelines and the **Safeguarding and Procedure Flowchart (Appendix 1)**:

- All incidents of direct disclosure must immediately be reported to your Session Lead.
- All incidents of concern where there is a significant suspicion abuse must be reported directly to your Session Lead.
- All incidents of concern where there is reasonable doubt as to a child's well being must be reported to your Session Lead.
- Incidents must be recorded, signed and dated using the Charity's **Safeguarding Incident Form (Appendix 2)** by the person reporting the incident. Information must be counter signed by the Session Lead to indicate that the concern has been communicated.
- The safeguarding incident or concern must then be reported to the Designated Safeguarding Lead by telephone and the completed and password protect Safeguarding Incident Form must then be sent via email. The password must be sent in a separate email or via text to the DSL. **Key Contacts** of the Safeguarding Team and support services are documented in **Appendix 3**.
- The DSL will take all reasonable steps to investigate the concern/incident.

- ALL information will be dealt with in the strictest confidence and will remain the sole knowledge of the DSL and those reporting any incidents/concerns.
- Depending on the severity of the concern First Contact 03000 267 979 or Police 999/111 will be contacted. The DSL will conduct this conversation unless circumstances lead suitably qualified members to act on this concern. This will be as the discretion of the DSL or the Safeguarding Officer.
- All paperwork must be stored and recorded as in accordance to our Confidentiality and Data Protection policies.

### **13.2. Reporting of an External Organisation**

13.2.1. In the event of Disclosure/Suspicion concerning an individual from an external organisation, the Charity's staff and volunteers must report any incidence or suspicions directly to the Designated Safeguarding Lead or Safeguarding Officer. Under no circumstances must they alert the person to the fact that a complaint/disclosure/allegation or suspicion has been made against them or their colleagues. All information which is sent via email must be password protected and the password must be sent in a separate email or via text to the DSL or Safeguarding Officer.

### **13.3. Reporting within Sacriston Youth & Community Project**

13.3.1. In cases of Disclosure/Suspicion concerning a member or staff or volunteer within the Charity, the person reporting the incident must report directly to the Designated Safeguarding Lead, Safeguarding Officer, Business Manager or a member of the Board of Trustees. Under no circumstances must the individual be alerted to the fact that a complaint/ allegation/suspicion has been made against them or disclose this information to colleagues. All information which is sent via email must be password protected and the password must be sent in a separate email or via text to the DSL or Safeguarding Officer.

### **13.4. Internal Enquiries and Suspension**

13.4.1. The Designated Safeguarding Lead or Safeguarding Officer will make a decision about whether any individual accused of abuse should be temporarily suspended pending potential police inquiries.

13.4.2. Irrespective of the findings of the potential police inquiries the Charity will assess all individual cases to decide whether a member of staff or volunteer can be reinstated and how this can be sensitively handled. This may be a difficult decision; particularly where there is insufficient evidence to uphold any action by the police. In such cases the Charity must reach a decision based upon the available information which could suggest that on a balance of probability, it is more likely than not that the allegation is true.

13.4.3. The welfare of the child or young person should remain of paramount importance throughout.

#### 14. **Safeguarding Children & Risk Assessment**

14.1. The following guidelines are used to attempt to minimise abuse within the workplace. They are not in specific order and are neither exclusive nor exhaustive.

- Ensure children have a safe place to talk or report an incident, following the guidance in the **Guidelines to Direct Disclosure (Appendix 4)**.
- Ensure all children's concerns are taken seriously and reported in the correct manner.
- Ensure staff and volunteers work in pairs whenever possible, but certainly do not encourage one-to-one work as the 'norm'.
- Wherever possible do not work in an enclosed or unobserved area.
- Ensure all staff and volunteers are familiar with Safeguarding procedures and offer appropriate training whenever possible.
- Ensure there is a named person who will deal with any Safeguarding enquiries.
- Follow usual and appropriate Health & Safety and Risk Assessment Guidelines (personal care, first aid etc).
- Ensure all staff and volunteers have carried out a DBS check, references are taken up and probationary periods are set in place.
- Ensure supervision can be used as a means to address any concerns and to involve 'whistle-blowing'.
- Do not transport children alone; always ensure there is an escort.
- Written permission should be given by parents or carers if children want to walk home from the sessions.
- If a child or young person does not attend a session twice in a row, the session lead must contact their parent or carer to check on their wellbeing. If there is a concern about the safety of the child or young person, the session lead must raise this with the DSL or Safeguarding Officer.

- If staff or volunteers notice a change in a child or young person's behaviour which may include, negative conduct, a physical injury, non-attendance or become withdrawn, they must notify the Session Lead and make a record of this using the **Safeguarding Chronology Log (Appendix 5)**
- Ensure staff and children are not placed in any vulnerable positions. Although there is no legal requirement or guidance around staff/child ratios in Youth Group settings, the Charity aim to follow Ofsted's appropriate ratio guidance when possible. However, at a minimum there should be at least 2 members of staff and 1 volunteer present at each session.

## 15. **Trips out/Residentials**

15.1. When organising or attending trips or residentials staff must ensure:

- They have parental consent forms from ALL children, which are clearly signed and dated by the parent/carer.
- They have undertaken a risk assessment at the place you are visiting.
- Parent/carer know which staff are responsible for children.
- First-aider present.
- All specific requirements of the child are detailed and held by a responsible adult (medication, allergies etc).
- Parental consent forms are received to enable staff to administer medication.
- Adequate transport provision – are seat belts fitted.
- We are correctly insured.
- They have an emergency contact number at ALL times.
- All equipment has been checked.
- They have an agreed 'lost' procedure (for children and staff).
- All staff have the phone number of the organisation.
- All know who the nominated person in charge is.
- Staff are clear about their responsibilities.
- Children are aware of their responsibilities and understand the boundaries.
- Always retain a list of children's details at all times.

## 16. **Use of the Internet**

16.1. When children or young people are using the internet, staff must ensure they:

- Place the computer where everyone can use it and where others can see it.
- Supervise its usage.
- Talk to children about the types of sites they can and can't use.
- Ensure that children are aware that chat sites can be extremely dangerous.

- Ensure children do not give out their personal details over the net.
- Ensure children NEVER arrange face-to-face meetings either alone or with a friend.
- Encourage children to report to you if they come across anything, which they feel is abusive or offensive.
- Introduce allocated time limits for children to spend on the net.
- Block out access to certain sites.

## 17. **Photographs and Videos**

17.1. The Charity is required to adhere to the Data Protection Act 1998 when taking photographs and videos of children or young people, especially if the still or moving images are of clearly identifiable people. There are several issues to be aware of:

- Parental or carers permission must be obtained, via the consent form, of all children who will appear in photographs or videos before the photograph is taken or footage recorded.
- It must be made clear why that person's image is being used, what you will be using it for, and who might want to look at the pictures.
- If images are being taken at an event attended by large crowds, such as a sports event, this is regarded as a public area and permission from a crowd is not necessary.
- Many uses of photographs are not covered by the Data Protection Act 1998, including all photographs and video recordings made for personal use, such as a parent/carer taking photographs at family fun day or videoing a Christmas event.
- Children and young people under the age of 18 should not be identified by surname or other personal details, including email, postal address or telephone number.
- When using photographs of children and young people, it is preferable to use group pictures.
- All photographs should be taken using one of the Charity's iPads or a staff work phone. Images should be then stored and processed in accordance with the Data Protection Policy. Staff or volunteers must not use their personal phones to take photographs or videos of children or young people.

## 18. **Visitors**

- 18.1. All visitors should be signed into the premises and be provided with a visitors' badge so they are clearly identifiable to staff, volunteers, children and young people.
- 18.2. Visitors should be supervised at all times and accompanied if they are moving through the Charity's premises.
- 18.3. Staff should encourage pre-approved visitors and discourage 'drop-ins' to ensure the safeguarding of children and young people.

## 19. **Support to deal with the aftermath of abuse**

- 19.1. Consideration should be given to the kind of support that children, parents and members of staff may need. Use of helplines, support groups and open meetings will maintain an open culture and help the healing process.
- 19.2. Consideration should be given to what kind of support may be appropriate for the alleged perpetrator.

## 20. **Allegations of previous abuse**

- 20.1. Allegations of abuse may be made some time after the event (e.g. by an adult who was abused as a child or by a member of staff who is currently working with children).
- 20.2. Where such an allegation is made, the Charity should follow the procedures as detailed above and report the matter to the First Contact or the police. This is because other children may be at risk from this person. Anyone who has a previous criminal conviction for offences related to child abuse is automatically excluded from working with children.

## 21. **Confidentiality**

Staff and volunteers must maintain the organisations policy on confidentiality at all times.

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**This policy has been approved & authorised by:**

**Name:**

**Position:** Trustee – Sacriston Youth Project

**Date:** June 2022

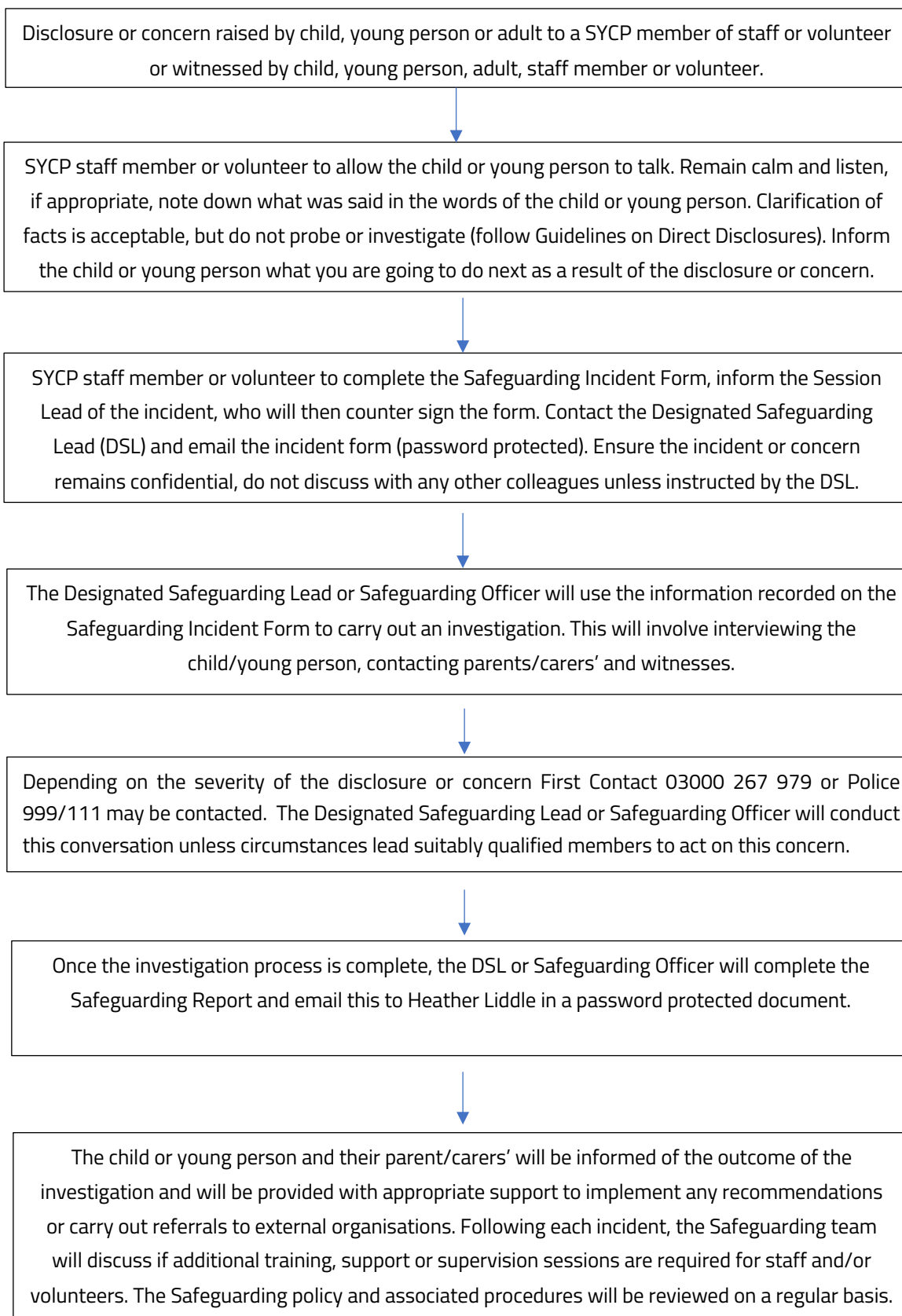
**Signature:**

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Date of Review	Reviewed By	Changes Made	Date of Next Review
March 2024	Jo Cameron - Trustee	Safeguarding Office changed	June 2024



## Safeguarding and Procedure Flowchart



## Safeguarding Incident Form

<b>Your name:</b>	<b>Position:</b>
<b>Address:</b>	
<b>Mobile:</b>	<b>Email:</b>

Child/Young Persons Details	
<b>Child's Name:</b>	<b>Date of birth:</b>
<b>Parent/Carers Name:</b>	
<b>Address:</b>	
<b>Tel No:</b>	<b>Mobile:</b>
<b>Email:</b>	
<b>Have Parents/Carers been notified?</b>	<b>Yes/No</b>
<b>If yes, please give details of what was said:</b>	

Incident Information
<b>Date and time of the incident:</b>
<b>Location of the incident:</b>
<b>Who was the incident/concern reported:</b>
<b>What was the incident:</b>
<b>Record of exactly what the child, young person or adult at risk said and what you said: (Remember not to lead the person, record actual details and continue on a separate sheet/s if necessary)</b>

Any witnesses? Yes/No	Witness name and contact details
	Witness 1
	Witness 2
Please ask witnesses to make a written statement of the incident or write down their account if unable to do so.	

<b>Subject of concern/allegation</b>	
Name:	Position/Relationship to child:
Address:	
Tel No:	
Any previous concerns:	
Any further comments:	

Signature:	
Date:	
Session Lead Name:	
Session Lead Signature:	
Date:	

Please contact the Designated Safeguarding Lead Jo Cameron immediately on 07930 106988 to let her know about the incident and send the completed form to [jo@sacristonyouthproject.co.uk](mailto:jo@sacristonyouthproject.co.uk).

## Key Contacts

### SYCP Safeguarding Team

All concerns should be reported to the Sacriston Youth and Community Project Safeguarding Officers:

Jo Cameron – Designated Safeguarding Lead    07930106988  
[jo@sacristonyouthproject.co.uk](mailto:jo@sacristonyouthproject.co.uk)

Helen Lee – Safeguarding Officer                    [helen@sacristonyouthproject.co.uk](mailto:helen@sacristonyouthproject.co.uk)

### Police

Sacriston Local Neighbourhood Officer            PC Steve Brown Sacriston  
[steven.brown@durham.police.uk](mailto:steven.brown@durham.police.uk)  
 Extension number 201637

Police Emergency    999

Police Non-emergency                                    101

### NSPCC Helpline

If you are worried about the safety or welfare of a child or young person:

Helpline    0808 800 5000  
[help@nspcc.org.uk](mailto:help@nspcc.org.uk)

Childline counsellors are able to take calls 24 hours a day, 7 days a week from children and young people under 19.

Childline    0800 1111  
[www.childline.org.uk](http://www.childline.org.uk)

### Local Authority Services

First Contact     03000 267 979

Local Authority Designated Officer (LADO)        03000 268 835

## Guidelines on Direct Disclosures

If a child or young person makes a direct safeguarding disclosure to a member of staff or volunteer, they must follow the following guidelines:

- Stay calm
- Do not react to the disclosure, it is human nature to want to 'criticise' the abuser, but remember this could be the child's father, mother or other family member, who in all likelihood, the child still either loves or has a close relationship with. By responding in a negative manner you could actually add additional discomfort or uncomfortable feelings to the child.
- Do not tell the child you can keep this information secret, you cannot attempt to solve this situation alone, but you can find someone who can help.
- Never tell a child you don't believe them (that is precisely what the abuser will have told them).
- Do not make the child tell anybody else at this stage.
- Do not question the child but DO clarify what they have said.
- Listen but not ask leading questions or probe for information.
- Do not assume the role of counsellor.
- Use simple language when explaining what will happen next.
- Document, sign and date ALL information EXACTLY as the child has reported it to you.
- Only use the words the child has used (if the child uses the word 'willy' for example, write that down and do not make any assumptions as to what it means).
- Inform your Session Lead or DSL of the incident, who will then investigate the disclosure or incident.
- UNDER NO CIRCUMSTANCES must you approach the alleged abuser nor attempt to take matters into your own hands.
- Do not prevent the child from going home, unless instructed by the DSL.

It is essential that staff and volunteers remember the following:

- You HAVE to report the incident.
- Don't assume the child will be taken into care.
- Don't make any personal judgements about the abuser.
- Always maintain confidentiality and personal boundaries.

