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**Registered Charity Number SC037175** 

### **LINKES**

### **CHILD PROTECTION POLICY**

**Reviewed: March 2024** 



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Safeguarding & Wellbeing Form

Appendix 1



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#### INTRODUCTION

LINKES aims to ensure that any vulnerable people are protected and kept safe from harm while they are with staff and volunteers in this organisation.

This policy sets out the guidelines and procedures to be followed in relation to child protection issues by all LINKES staff and in the management of the facilities. This will ensure that every child involved in LINKES activities is safe, comfortable, and able to participate in a relaxed, protective environment. This policy provides staff with the operational procedures to be followed in the event of child abuse being discovered or suspected.

#### The following points underpin the policy:

- Everyone under the age of 18 will be considered a child. (National Guidance for Child Protection in Scotland 2021)
- The child's welfare is the paramount concern.
- All children have the right to protection from abuse.
- Children in Scotland have the same protections against assault as adults. (Children (Equal Protection from Assault) (Scotland) Act 2019)
- All children should feel safe and secure while using LINKES facilities and or when in the care of its staff.
- All suspicions and allegations of abuse will be taken seriously, reacted to appropriately and actioned without delay.
  - Staff working with children have an understanding of the issues surrounding child protection and are aware of good practice in relation to working with young people.

IF IN DOUBT - SPEAK UP



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\*Throughout the document reference will be made to "Staff", this also applies to sessional Workers, Coaches, Self-employed Workers and Volunteers.

#### CHILD PROTECTION POLICY STATEMENT

LINKES believes that it is always unacceptable for a child or young person to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all children and young people, by a commitment to practice which protects them.

#### We recognise that:

- the welfare of the child/young person is paramount
- all children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have the right to equal protection from all types of harm or abuse
- Working in partnership with children, young people, their parents, carers and their agencies is essential in promoting young people's welfare.

#### The purpose of the policy:

- to provide protection for the children and young people who receive Linkes Youth Club services.
- to provide staff and volunteers with guidance on procedures they should adopt in the event that they suspect a child or young person may be experiencing, or be at risk of, harm.
- this policy applies to all paid staff, volunteers, management committee members, or anyone working on behalf of LINKES.



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#### We will seek to safeguard children and young people by:

- Valuing them, listening to and respecting them.
- Appointing a Designated Child Protection Officer for children and young people. Adopting child protection and safeguarding practices through procedures and a code of conduct for staff and volunteers.
- recruiting staff and volunteers safely, ensuring all necessary checks are made
   sharing information about child protection and good practice with children,
   parent's, staff and volunteers.
- sharing information about concerns with agencies who need to know, and
   involving parents and children appropriately.
- providing effective management for staff and volunteers through supervision,
   support and training.

LINKES Designated Child Protection Lead, to whom all child protection/safeguarding concerns should be referred in the first place, is Heather McGill-Crawford, Children & Young People's Development Worker, Rachel Ferguson, Senior Community Development Worker & Elaine Connelly, Senior Community Development Worker



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#### 3. CHILDREN & YOUNG PEOPLE'S RIGHTS

Child protection is integral to protection of human rights. This Policy is in line with the core principles of the national guidance and is underpinned by GIRFEC and the UN Convention on the Rights of the Child and the Children's Charter.

#### **Getting It Right For Every Child (GIRFEC):**

**GIRFEC** is the national approach to improving outcomes through public services that support the wellbeing of children and young people. Based on children's and young people's rights, it supports children, young people and their parents to work in partnership with the services that can help them.

- puts children's needs first
  - ensures that children are listened to and understand decisions that affect them
- ensures that they get the appropriate coordinated support needed to promote, support and safeguard their wellbeing, health and development.

These principles, enshrined in legislation and practice in Child Protection, are derived from Articles of the **UN Convention on the Rights of the Child**. The UNCRC (Incorporation) (Scotland) Bill was unanimously passed in Scottish Parliament on the 7<sup>th</sup> of December 2023. On the 16<sup>th</sup> of January 2024, Royal assent was granted for the UNCRC Bill meaning it is now officially an Act. Most of its provisions will come into force on 16th July 2024.

The Children's Charter was drawn up following consultation with children and young people as part of the Scottish Government's Child Protection reform programme. The Charter sets out a list of demands children should feel entitled to make:



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• get to know us

- speak with us
- listen to us
- take us seriously
- involve us
- respect our privacy
- be responsible to us
- think about our lives as a whole
- think carefully about how you use information about us
- put us in touch with the right people
- use your power to help
- make things happen when they should
- help us be safe.

Staff have a duty to ensure these rights are upheld



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#### 4. GOOD PRACTICE FOR LINKES STAFF

This section provides staff with guidelines and good practice which should be followed when working with children. Staff should be properly recruited and managed and appropriate training should be given. In addition to tackling abuse it is good practice to ensure that children feel safe and comfortable while engaging in activities. To this end, the policy also includes direction regarding issues such as bullying, name calling and horse play either between children or between adults and children. The more secure and safe children feel within LINKES facilities or whilst participating in programmes, the more likely they, and adults, are to realise that any form of child abuse is unacceptable.

#### This approach is based on the following underpinning principles:

- Staff should be properly recruited; managed and appropriate training should be made available.
- The development of all programmes should encourage and foster the empowerment of children.
- All activities which involve children should recognise the needs of the child and be child centered.
- Staff should ensure an environment in which children can enjoy their participation.
- All adults have a responsibility to be aware of child protection as an issue.
- Staff should be mindful of the fact that children with disabilities may be more vulnerable.

Positive adult-child interactions are characterised by an open and encouraging atmosphere, which recognises young people's voluntary engagement in activities, and shows an



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awareness of the child's autonomy. This is set in an atmosphere which promotes the protection and rights of children, displays an awareness of the development stages of childhood and fosters the promotion and encouragement of individual progress.

#### Those working with children should:

- Always be accessible to others when working with children.
- Avoid situations where they and a child are completely unobserved.
- Wear ID and, where issued, uniform at all times.

#### Those working with children should never:

- Engage in activities which could be considered physical or sexually provocative, even in horseplay.
- Allow or engage in any form of inappropriate touching.
- Allow inappropriate language to remain unchallenged, including remarks between children.
- Make sexually suggestive comments to a child or in the presence of a child
- Allow allegations by a child to go unreported, unrecorded or not acted upon.
- Do things of a personal nature that a child can do for themselves.

#### Reporting

From time to time incidents will occur which may upset a child, or an adult's actions or language may be misinterpreted. These incidents must be reported as soon as possible to the most senior member of staff available and noted. Parents or carers should also be

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informed of the incident as soon as possible. An incident log is included with this document. This process is one that safeguards and protects staff. The completion of the Safeguarding & Wellbeing Form should be viewed as a quality assurance and child protection issue and as such, reporting should be encouraged and supported by managers.

#### **Child Protection Training:**

Each new member of staff will receive child protection training, without which, they will not be permitted to work unsupervised with children. Sessional workers, coaches and volunteers must receive training prior to taking up each new appointment or annually whichever is appropriate to their work schedule. Staff should undertake training on a two year cycle. Child protection training will be tailored to the service in which staff work and their participation in that training will be logged.

#### **STAFF RESPONSIBILITIES**

It is everyone's responsibility to work within LINKES Child Protection Policy and to ensure you do everything you can (in your role) to safeguard children and young people. Concerns about a child or young person should always be reported either to a line manager or as a referral. Where necessary, concerns should be recorded as soon as possible. **Managers** 

#### should ensure staff:

- understand their role and responsibility in relation to Child Protection
- are familiar with LINKES Child Protection Policy
- know who the Child Protection Lead for the company is
- receive a Child Protection briefing
- · receive relevant training
- notify the Designated Child Protection Lead of action.



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#### Where possible, staff should avoid:

- Spending time with a child or a small group of children away from others.
- Taking sessions alone.
- Taking children on a journey alone in their car, unless it is an emergency or with prior consent from parent/carer

#### Staff should not:

- Use any form of physical force on a child.
- Exercise undue influence over a child in order to obtain personal benefit or reward.
- Engage in rough physical games.
- Make sexually suggestive comments about, or to, a child in the context of physical activity.
- Reduce a young person to tears as a form of control.

POLICY REVIEW This policy will be subject to review annually, following a reported incident and/or changes in legislation, whichever comes first.



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# 5. PROCESS FOR THE EMPLOYMENT OF SESSIONAL WORKERS, PLAY WORKERS, SELF EMPLOYED AND VOLUNTARY STAFF

Anyone may have the potential to abuse children in some way and it is important that all reasonable steps are taken to ensure that unsuitable people are prevented from working with children. Those who wish to harm children frequently seek out opportunities to work with children therefore vetting procedures and interviewing must be more than just a process to be gone through but seen as a vital step in protecting children from harm. Managers are required to ensure that all work is assessed with regard to the requirement for membership of the Protecting Vulnerable Groups Scheme and to ensure that, where appropriate, checks are completed. 'Regulated Work' as defined by the Protecting Vulnerable Groups Scheme will require membership of the PVG.

These procedures will be applied consistently whether staff are paid, unpaid, in part-time or full-time employment, permanent or self-employed. Linkes will maintain membership of the PVG with a named lead signatory and appropriate counter signatories. It is essential that these procedures are used consistently whether staff are paid, unpaid, in part time employment, permanent employment or self-employed.

#### The Protecting Vulnerable Groups Scheme (PVG):

On 28 February 2011, the Scottish Government introduced the membership scheme that replaced the previous disclosure arrangements for people who work with vulnerable groups.

The Protecting Vulnerable Groups Scheme will:



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 help to ensure that those who have regular contact with children and protected adults through paid and unpaid work do not have a known history of harmful behaviour

• be quicker and easier to use, reducing the need for PVG Scheme members to complete a detailed application form every time a disclosure check is required • strike a balance between proportionate protection and robust regulation and make it easier for employers to determine who they should check to protect their client group.

The PVG Scheme is Scotland's response to the principle recommendation of the Bichard Inquiry Report. This recommendation called for a registration system for all those who work with children and vulnerable adults in the UK that would confirm that there is no known reason why an individual should not work with these client groups. People, who work on a regular basis with vulnerable groups, will join the PVG Scheme and, from then on, their membership records will be automatically updated if any new vetting information arises. Vetting information is conviction information retrieved from criminal justice systems and non-conviction information held by the police that is considered relevant.

It is a legal requirement that all staff within LINKES who will complete 'regulated work' must be members of the PVG Scheme. Regulated work consists of the type of work in which a post holder is responsible for the welfare and wellbeing of a child or protected adult, or where there is a level of trust between the worker and the child or protected adult.

#### 6. WHAT IS CHILD ABUSE?

The Scottish Government's national guidance for Child Protection in Scotland 2014 defines abuse and neglect as follows:



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Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child. Children may be abused in a family or in an institutional setting, by those known to them or, more rarely, by a stranger. Assessments will need to consider whether abuse has occurred or is likely to occur.

Abuse can be physical, sexual or emotional. It may be acute or involve a long-term pattern of physical neglect, and often children are abused in more than one way. These categories of abuse are detailed below with examples of how abuse may manifest itself. The intention of this Policy is to produce a safe and comfortable environment for young people. Therefore, all other forms of harm to children must be dealt with including bullying and name-calling. In most, but certainly not all cases, the abuse is perpetrated by an adult, usually by someone known to and trusted by the victim.

It should be remembered that children can abuse other children. Staff must remain alert to these issues and also ensure that bullying and name-calling are always challenged.

Child abuse can occur in any situation in which children are involved. Training in Child Protection procedures and sharing of best practice will lead to staff being properly equipped to provide safe and enjoyable experiences for children. These Child Protection procedures must be followed at all times to ensure the safety of children and staff.

#### **CATEGORIES OF ABUSE**

All staff should be familiar with the ways in which abuse manifests itself. The lists below are by no means exhaustive but are designed to give employees and people involved with the organisation some guidance on how to recognise child abuse. Any information has to be seen in the context of the child or young person's whole situation and circumstances.



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Different types of abuse may overlap or co-exist. The following definitions are all taken from National Guidance for Child Protection in Scotland 2014.

#### **Physical abuse**

Physical abuse is the causing of physical harm to a child or young person. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

Signs of possible physical abuse:

- unexplained injuries or burns, particularly if they are recurrent
- improbable excuses given to explain injuries
- refusal to discuss injuries
- untreated injuries or delay in reporting them
- excessive physical punishment
- arms and legs kept covered even in hot weather
- fear of returning home
- aggression towards others
- running away
- administration of toxic substances.

#### Sexual abuse

Sexual abuse is any act that involves the child in any activity for the sexual gratification of



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another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, 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, indecent images or in watching sexual activities, using sexual language towards a child or encouraging children to behave in sexually inappropriate ways.

The sexual exploitation of children and young people is an often hidden form of child sexual abuse, with distinctive elements of exploitation and exchange. In practice, the sexual exploitation of children and young people under 18 might involve young people being coerced, manipulated, forced or deceived into performing, and/or others performing on them, sexual activities in exchange for receiving some form of material goods or other entity (for example, food, accommodation, drugs, alcohol, cigarettes, gifts, affection). Sexual exploitation can occur through the use of technology and without the child's immediate recognition.

Below are some indicators of sexual abuse. This list is not exhaustive, nor are all the behaviours exclusive to this type of abuse:

- self harm;
- excessive sexual awareness or knowledge of sexual matters inappropriate for the child's age;
- acting in a sexually explicit manner
- sudden changes in behaviour or school performance or school avoidance;
   displays of affection in a sexual way inappropriate to age;
- tendency to cry easily; to cling or need constant reassurance
- regression to younger behaviour, such as thumb-sucking, playing with discarded toys,



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acting like a baby;

distrust of a familiar adult, or anxiety about being left with someone
 unexplained gifts or money;

• secretive behaviour;

• eating disorders;

• fear of undressing for gym;

• phobias or panic attacks.

**Emotional abuse** 

Emotional abuse is persistent emotional neglect or ill-treatment that has severe and persistent adverse effects on a 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 involve the imposition of age — or developmentally — inappropriate expectations on a child. It may involve causing children to feel frightened or in danger, or exploiting or corrupting children. Some level of emotional abuse is present in all types of ill-treatment of a child; it can also occur independently of other forms of abuse.

Signs of possible emotional abuse:

• low self-esteem

• continual self-deprecation

• sudden speech disorder/refusal to speak

• fear of carers

• severe hostility/aggression towards other children

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- significant decline in concentration span
- self-harm.

#### **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. It may involve a parent or carer failing to provide adequate food, shelter and clothing, to protect a child from physical harm or danger, or to ensure access to appropriate medical care or treatment. It may also include neglect of, or failure to respond to, a child's basic emotional needs. Neglect may also result in the child being diagnosed as suffering from, 'non-organic failure to thrive', where they have significantly failed to reach normal weight and growth or development milestones and where physical and genetic reasons have been medically eliminated. In its extreme form children can be at serious risk from the effects of malnutrition, lack of nurturing and stimulation. This can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. With young children in particular, the consequences may be life-threatening within a relatively short period of time

Signs of possible physical neglect:

- constant hunger or inappropriate/erratic eating patterns
- poor personal hygiene
- constant tiredness
- lack of adequate clothing
- failure to seek appropriate/necessary medical attention
- unhygienic home conditions



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- children left without supervision
- Lack of care or supervision during activities.

#### 7. RECOGNISING ABUSE

It must be borne in mind that dealing with child abuse is complex. It is not easy to recognise situations where abuse may occur, or where it has already taken place. Staff are not expected to be experts in this area. However, any concerns with respect to the welfare of a child should be notified immediately to the most senior member of staff available. It is not the responsibility of the staff to decide that child abuse has occurred, but it is their responsibility to follow through on any concerns that they have, or are raised with them. As outlined above, signs of abuse can be physical, behavioural or developmental. Below is a list which details some indicators of abuse. It should be remembered that these indicators can occur in other, non-abusive, situations and that the list is not exhaustive.

#### **Physical Indicators:**

- Unexplained bruising in soft tissue areas
- Repeated injury
- Black eye(s)
- Injuries to mouth
- Torn or blood soaked clothing
- Burns or scalds
- Bites
- Fractures
- Marks from implements



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#### **Behavioural Indicators:**

- Unexplained changes in behaviour-becoming withdrawn or aggressive
- Regressive behaviour
- Sudden drop in performance
- Change in attendance pattern
- Inappropriate sexual awareness, behaviour or language
- Difficulty in making friends
- Inconsistent stories, excuses
- Distrustful of adults or excessive attachment to adults

As noted in the good practice section, child protection is more than recognising and combating child abuse. Children should be able to participate in activities free from concerns for their personal safety and comfort. To this end, staff are required to consider all issues which would make young people uncomfortable and take steps to combat bullying, name calling or any other form of harassment which would limit young people's involvement in LINKES programmes.

#### 8. BULLYING

#### What is bullying?

Bullying is behaviours such as teasing, taunting, threatening, hitting or extortion by one or more children against another. It is an act or series of acts designed to aggravate and intimidate. It is the responsibility of staff to deal immediately with bullying whenever it takes place. Many children are reluctant to tell adults that they are being bullied, more particularly older children. The risk of bullying and harassment by adults and children should be anticipated by taking active steps to prevent it occurring. Bullying is not to be tolerated under any circumstances.

#### **Examples of bullying include:**



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- Physical aggression
- Verbal bullying
- Intimidation
- Damage to property
- Isolation
- Repeated gestures or expressions of a threatening or intimidating nature
   Comments intended to degrade the child
- Initiation rules
- Cyber & text bullying

#### **Combating Bullying and Abuse**

Bullying and abuse can be reduced by the following measures:

- Raising awareness of bullying and abuse as unacceptable forms of behaviour Creating an ethos which encourages children, staff and parents/guardians to report bullying and abuse and to use procedures to address these issues
  - Ensuring the supervision of children during all activities
  - Ensuring a supportive environment for victims of bullying and abuse
  - Securing the support of parents/guardians to counter bullying and abuse
  - Removing persistent bullies from activities

#### **BULLYING WILL NOT BE TOLERATED WITHIN LINKES ACTIVITIES OR FACILITIES**



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#### 9. REPORTING SUSPECTED CHILD ABUSE PROCEDURES

The decision to respond to allegations of, or suspicions about, abuse can be a very difficult one. There is a responsibility to protect the child in order that appropriate agencies can then make enquiries. Staff should not be afraid to refer any concerns, particularly as others may have previously raised similar concerns. All Referrals will be considered thoroughly by the statutory agencies prior to action being taken. As noted previously, it is not the responsibility of Staff to investigate concerns, simply to report those concerns to the agencies charged with responsibility to conduct investigations. Social Work Staff are available to discuss concerns prior to submitting a report and staff should avail themselves of the support offered by Social Work to discuss their concerns in advance of making a formal report. A list of Social Work telephone numbers is provided in this document.

Should a situation arise where an immediate place of safety is required, such as a child fearing return home because of the risk of further abuse, or if staff suspect that further abuse would occur, it may be appropriate to contact the Police. Under these circumstances the Incident Report should be completed later and copied to the police.

#### What to do in the event of a Disclosure

If a child discloses or suggests that they have been abused, or information is obtained which gives concern that a child is being abused, the staff member receiving this information should:

• Stay calm and not rush into any inappropriate action



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- Reassure the child that they are not to blame and that they have done the right thing
   by telling
- Listen to what the child has to say and show them that you take them seriously
- Keep questions to an absolute minimum. The child should be allowed to speak freely without any undue interruption or questioning, but a clear account should be ensured
- Reassure the child but do not make a promise of confidentiality. Confidentiality
  might not be possible, given that a report may have to be prepared.
- Make a full written record of what was said, heard and/or seen as soon as possible
- If a Safeguarding & Wellbeing Form is not immediately available these details should be written on plain paper and transferred to a form later, retaining the original record.

#### **Reporting to Senior Staff**

- Any information regarding abuse of a child by a member of the public, staff or a volunteer should be reported to the Designated Child Protection Lead (DCPL)
- The DCPL will discuss the issue with Social Work immediately
- Discussion should only be with one senior member of staff and not with any other colleagues/friends.
- If the DCPL or most senior member of staff is unavailable, then direct contact must be made with the local Social Work office (of where the child lives) or the Out of Hours Social Work Team.

#### **Body Map Recording**

The body map provides a visual record of physical abuse and helps professionals to work together when deciding whether there is a safeguarding concern. This form will support you in



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making decisions about how to act on concerns raised by injuries observed on children and young people. Injuries should be considered carefully and appropriate decisions made about how to respond to them. (see appendix 1)

#### Safeguarding & Wellbeing Form

As soon as possible, a comprehensive report of everything that was said, heard and/or seen should be recorded on the Safeguarding & Wellbeing Form. Your full written record will assist in this process.

#### What happens next

- In the first instance, the most senior person on site will refer the allegation to the Social Work team in the area where the child lives by telephone.
- This phone call should be followed up in writing using the Safeguarding & Wellbeing Form
- Social Work may involve the Police. This will result in a Social Work inquiry and a separate Police inquiry to investigate any allegations. All possible assistance will be given to Social Work and Police Officers investigating the allegations.
- The parents/carers will be contacted as soon as possible <u>following advice from Social</u>

  Work and/or the Police.
- Following a referral to social work or other relevant agency, the DCPL will follow up within 5 working days to find out the outcome of the referral from that agency, and record the outcome on the incident form. This is to ensure the referral has been received and acted upon. Once confirmation has been received that the referral is being progressed or no further action is being taken, this will be recorded on the incident report form and the agencies involved will follow their processes from that point on.

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• On the rare occasion that a referral is not actioned by a relevant authority, and Linkes staff and DCPL still feel there is risk of significant harm to the child or young person, an escalation plan will be followed. Depending on the nature of the concern, that might involve contacting the police, reporting to the board, contacting the named person, seeking advice from NSPCC on next steps, and the DCPL will coordinate this with relevant staff members. All steps followed will be added to the timeline and outcomes documented fully on the incident report form.

#### Allegations of previous abuse:

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 still currently working with children). Where such an allegation is made, LINKES should follow the procedures as detailed above and report the matter to the social services or the police. This is because other children, either within or outside sport, may be at risk from this person. Anyone who has a previous criminal conviction for offenses related to abuse is automatically excluded from working with children. This is reinforced by the details of the Protection of Children Act 199

# 10. 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.

#### Action

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1. Concerns about poor practice:

• If, following consideration, the allegation is clearly about poor practice, the DCPL will

deal with it as a misconduct issue.

• If the allegation is about poor practice by the DCPL, or if the matter has been handled

inadequately and concerns remain, it should be reported to the relevant officer who

will decide how to deal with the allegation and whether or not to initiate disciplinary

proceedings.

2. Concerns about suspected abuse:

• Any suspicion that a young person has been abused by either a member of staff or a

volunteer should be reported to the DCPL, 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 DCPL 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.

• If the DCPL is the subject of the suspicion/allegation, the report must be made to the

appropriate Manager who will refer the allegation to social services.

**Confidentiality:** 

Every effort should be made to ensure that confidentiality is maintained for all concerned.

Information should be handled and disseminated on a need-to-know basis only.

This includes the following people:

the Designated Child Protection Lead;

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• the parents of the person who is alleged to have been abused;

• the person making the allegation;

• Social Work Services/Police; and

• the alleged abuser (and parents if the alleged abuser is a young person). Seek Social

Work Services advice on who should approach the alleged abuser. Information should be

stored in a secure place with limited access to designated people, in line with data

protection laws (e.g. that information is accurate, regularly updated, relevant and secure).

Internal enquiries and suspension;

The Child Protection Lead will make an immediate decision about whether any individual

accused of abuse should be temporarily suspended pending further police and social services

inquiries. Irrespective of the findings of the social services or police inquiries the LINKES

office bearers 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 Senior Community Development Worker or Chairperson 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. The welfare of the child

should remain of paramount importance throughout.

**11. CONTACT NUMBERS** 

The first point of contact for all staff is their most senior member of staff in the facility they

are working in. However, you will receive information or advice from a number of agencies

including Social Work and the Police. Please note: these details may change from time to

time, and up to date information can be obtained at www.glasgow.gov.uk

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#### The telephone numbers are as follows:

Linkes Designated Child Protection Lead:

Heather MCGill-Crawford - CYP Development Worker: 07535959967

Rachel Ferguson - Senior Development Worker: 07354994514

Elaine Connelly - Senior Development Worker: 07535177491

#### **SOCIAL WORK SERVICES**

Health and Social Care Connect	Tel: 0141 287 0555
Out of hours social Work	Tel: 0300 343 1505

#### **POLICE SCOTLAND**

In an emergency you should always dial **999** to get an immediate response. This should be considered where a child is in immediate danger. All other referrals to the Police should be made through the non-emergency number **101**. The Public Protection Unit lead on Child Protection matters and your call will either be directed to this unit or the local police office.

#### 12. FURTHER INFORMATION

More support and information about child protection

#### **NSPCC**

The NSPCC gives information on keeping children safe. They provide a helpline for anyone concerned about a child or young person. Telephone 0808 800 5000

#### Childline

Childline give children and young people access to confidential support and advice. They do it



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online and by phone or email. Telephone: 0800 1111

Children 1st

<u>Children 1st</u> provide <u>Parentline</u>. It's a free, confidential helpline for anyone caring for or concerned about a child or young person. Telephone: 08000 28 22 33

They also give support to children, young people and families. They give support to children and young people who have suffered abuse and trauma.

**Child Protection Committees Scotland (CPCScotland)** 

<u>CPCScotland</u> is a national group of childcare professionals who work together to improve the protection of children in Scotland. Their website gives information about supporting families and keeping children safe.

**Parent Club** 

The Scottish Government's <u>Parent Club</u> gives information about child sexual abuse and exploitation, including online abuse. It also explains how you can report a concern.

13. DECLARATION

On behalf of Linkes, we, the undersigned, will oversee the implementation	of the Child
Protection Policy and take all necessary steps to ensure it is adhered to.	

Signed:

Name:

Position within organisation:

Signed:

Name:

Position within :organisation



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### **Appendix 1: Safeguarding & Wellbeing Form**

Note that the club or association that you are working with may have their own incident reporting forms and processes.

Signature of person completing this form:
Date:
Incident
Date and time of incident:
Name/s of person/s involved in the incident and their clubs/associations:
Description of incident:

Reporting of the incident to club/association

Name and role of person completing this form:



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T	T
Incident Reported to:	Date:
Follow Up Action	
Follow Up Action	
Description of actions to be taken:	
DCDI Coondinations	
DCPL Coordinating:	
Outcome:	



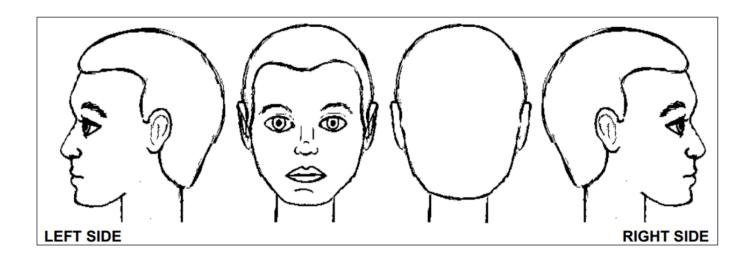
200 Lincoln Avenue Knightswood GLASGOW G13 3PP

Tel. 0141 9547554

contact@linkes.org.uk
Registered Charity Number SC037175

**Recording Proforma: Body Map** 

Name of Child:	Recorded by:	Date injury observed:	Date injury recorded:
	Job role:	Time injury observed:	Time injury recorded:
Date of Birth:			



Description of Injury:			



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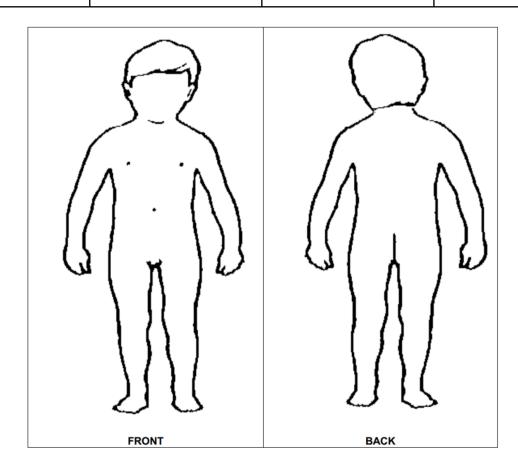
Tel. 0141 9547554

contact@linkes.org.uk

Registered Charity Number SC037175

**Recording Proforma: Body Map** 

Name of Child:	Recorded by:	Date injury observed:	Date injury recorded:
Date of Birth:	Job role:	Time injury observed:	Time injury recorded:





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Tel. 0141 9547554

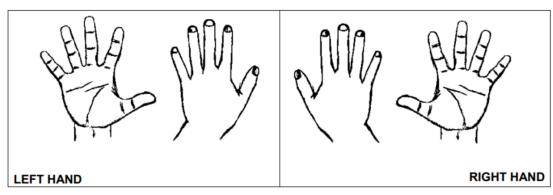
contact@linkes.org.uk

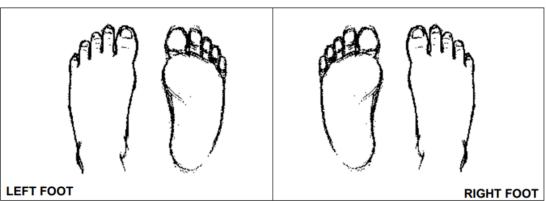
**Registered Charity Number SC037175** 

Description of Injury:		

**Recording Proforma: Body Map** 

Name of Child:	Recorded by:	Date injury observed:	Date injury recorded:
Date of Birth:	Job role:	Time injury observed:	Time injury recorded:







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Description of Injur	ry:		
Recording Proforma:	Physical injuries to child		
This sheet should be	completed every time the	e body map proforma is compl	eted and
filed with the corresp	ponding body map.		
Name of Child:	Recorded by:	Date injury observed:	Date injury recorded:
Date of Birth:	Job role:	Time injury observed:	Time injury recorded:
Summary of how inju	ury came to be known to s	staff:	
Child's account of the	ne injury:		
Parent/s' account of	the injury (if appropriate	):	



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Record of discussions with DCPL:	
Date: Time:	
Action Taken:	
Follow-up required: (Agreed actions and timescales)	
Name of Staff:	Name of DCPL:
Signed:	Signed:
Date:	Date:



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