



Children's Liver  
Disease Foundation

fighting childhood  
liver disease

# Child Protection and Safeguarding Procedure

Safeguarding Document 2

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CLDF's definition of young people is up to the age of 25. However, the Safeguarding Children policy principles and procedure apply to young people up to the age of 18 and then the Safeguarding Adults principles will apply. Guidance on this is included within this document.

## Responding to Child Protection Concerns

In practice, CLDF is rarely in the situation of seeing abuse first hand but a worker/volunteer may be informed of abuse via a disclosure, witness something or be given information that gives rise to concern. **In all situations, the Designated Safeguarding Officer MUST be informed. The CEO must then be informed of the situation or, in the absence of the CEO, a member of CLDF's Safeguarding team.**

### What to do if a child tells you about abuse or if you are concerned about a child's welfare

**The meaning of 'tell' is very broad in this context.** Often, it is not what a child says but what s/he does, or does not do, that alerts you. A child may be frightened to talk or sign about what is happening at home. A child may display sudden or strange changes of behaviour, for example angry outbursts or complete withdrawal. A child might become unusually dirty or disheveled, may lose weight dramatically or look exhausted. Changes in behaviour or appearance that worry you must be passed on. It may be that what is happening has nothing to do with child protection, but there may still be a need for support. Other agencies that can offer this help may need to be alerted.

**Listen Carefully.** Most children find it difficult to talk about abuse. If they have summoned up the courage to talk to you, it is because they believe you can help. Now is not the time to be working out whether what you hear can possibly be true.

**Let the child lead the pace.** Try not to ask questions. Don't jump in to fill pauses. Keep the conversation going with encouraging nods, attentive eye contact and repetitions of what has been said or signed.

**Once is enough.** Once you know you will have to report what you have been told, don't ask the child to repeat what s/he has said. Make sure the child knows that s/he is not alone, and that you are taking what s/he says seriously and that you will be getting help from someone who knows what to do in this kind of situation.

**Be honest.** Answer the child's questions as honestly as you can; if you don't know the answer, say so, but say you will try to find out.

**Don't investigate, don't confront.** Your job will be to pass on the information, not to investigate. Don't confront the alleged abuser; this will not be helpful and may cause difficulties for any investigation. Do not take photos or ask to see any harmful markings.

**Remember the boundaries of confidentiality.** Never promise total confidentiality if you are told about possible abuse. You will almost certainly have to share the information in order to help keep the child safe. If a child wants to tell, but wants a promise of confidentiality first, tell the child that you will keep a secret if you possibly can, but if you believe that the child or anyone else might be harmed, you will have to tell someone. If the child is not able to say anything more, you can help them find some privacy and a telephone to contact Childline (0800 1111 or Text phone 0800 056 0566 for hearing impaired children). This is a totally confidential service.

**Seek advice.** Explain to the child that this kind of thing can happen to children; that's why you are able to talk to people who know what to do to help. Enlist the support of your Designated Safeguarding Officer in making a confidential report. Even if the account the child has given seems vague or unlikely, still take advice from the Children's Social Care service in the area where the child lives. You can do this, if necessary, by discussing the situation without mentioning any names.

**Keep contact numbers handy.** Some general contact numbers are given at the end of the guidance document. It is also useful to gain access to the contact information for the child's or young adult's local police, social workers and other useful organisations in their area. Whilst CLDF is a national charity, the Designated Safeguarding Officer will need to do some research into the child or young adult's area for local services.

**In conclusion:** your job is to listen, support and pass information on. Then let the experienced professionals take over and cooperate with them in any way that you can to protect the child.

**Make a careful log of what has happened.** Write what the child has told you, use the child's own words as closely as you can; what you saw and heard; when and where the alleged abuse took place; who was involved, when and where the child told you about it.

- Whenever possible and practical, take notes during the conversation. Always ask permission to do this and explain the importance of recording all information. Where it is not appropriate to make notes at the time, make a written record as soon as possible afterwards and in any case **before the end of the day**. Use the **Confidential Safeguarding Children/Young People/Vulnerable adults Cause for Concern Form (Appendix 1)**
- Record the time, date, location (or e.g. by letter, by telephone) and person(s) present. The record should be signed and dated by the author.
- Your record must use direct speech wherever possible with actual words used. Do not make assumptions about the intended meaning of words used.
- Do not be selective. Include all details even though they may seem irrelevant. It may prove invaluable at a later stage in an investigation. The initial recording will form the first entry in a file of information about the case which will be retained by the Designated Safeguarding Officer in the Safeguarding folder.
- Include information about the circumstances of the referral, observations made and any background information which is considered relevant. Professional opinion may be included, though it must be specified as such.
- The reporting person will need to complete the multi-agency referral form which should be sent by the child's local authority or will be available online from their local safeguarding board website.
- Create a log of actions and record times, dates, names and contact details of persons spoken to, and any advice received, or agreement reached. It is important to include full details of any referral to the police or social services.

**In all cases the written records must be updated with actions, adding time, date and signature and passed to the Designated Safeguarding Officer.** Records must be passed to the CEO **by noon the next working day** and must be kept securely and confidentially. This applies to non-emergency concerns only. Prior communication would have taken place to appraise the CEO of the situation.

### **What to do if a child tells you about abuse or you have concerns about a child's welfare out of hours or away from home.**

In an out-of-hours situation, at an event for example, the immediate decision you will face is whether the child is safe to go home. You will need to consider what to do if the alleged abuser is likely to be there. If you believe the risk to the child is serious and immediate, or the child does not feel safe to go home, **call the local Children's Social Care Service, Emergency Duty/Out of Hours Team or the Police**. Make clear that this is a child protection matter and take advice on what to do next. Go over the log with the **Designated Safeguarding Officer** to make sure it is clear and then give it to the **DSO** for filing in a secure place as it may be needed

by other agencies. Under these circumstances the **CLDF CEO** must be called as soon as possible after receiving the information or becoming aware of the concern.

**The Designated Safeguarding Officer should call the appropriate Children's Social Care team<sup>1</sup>** if you have not already made an emergency referral. Make sure s/he has to hand the details from the child's registration form with the name(s), address and date of birth on it.

**The Designated Safeguarding Officer, where possible should seek advice on whether or not to inform the parents/carers of the report we have made to children's services and or police, and will:**

- Follow up the call with a written note (the Designated Safeguarding Officer will be advised about what needs to be included in it by the social worker who takes the call, from the local safeguarding team).
- Ensure that the reporting person completes and sends the multi-agency referral form which will be available online. This may not be immediately possible in a residential situation so should be done asap on return to home/CLDF offices. It will be sourced from the local authority safeguarding board website, in the area which the child resides (unless otherwise informed by the Social Care team.)
- Give a copy of the log, plus a log of any further action, to the CEO.

### **What to do if you have concerns about a child or young adult who might be harming other children**

It is important to be aware that children can abuse other children. There is a range of behaviours, starting with normal childhood activity, which, in the extreme, can extend to bullying, violence or sexual assault. Sexual activity between children and young adults under the age of consent can form part of normal childhood exploration, but in some circumstances can be abusive.

It is therefore important to understand the difference between consenting and abusive behaviours, and between appropriate and exploitative peer relationships. Staff should not dismiss some abusive sexual behaviour as 'normal' between young adults and should not develop high thresholds before taking action.

Therefore, when a child or young adult within, or outside the family alleges abuse by another child, the child protection procedures must be followed. Action should be considered in respect of both the victim and the alleged abuser.

It is not the responsibility of CLDF staff to assess the needs of either child, but to identify the level of concern and make appropriate decisions about immediate action and referral.

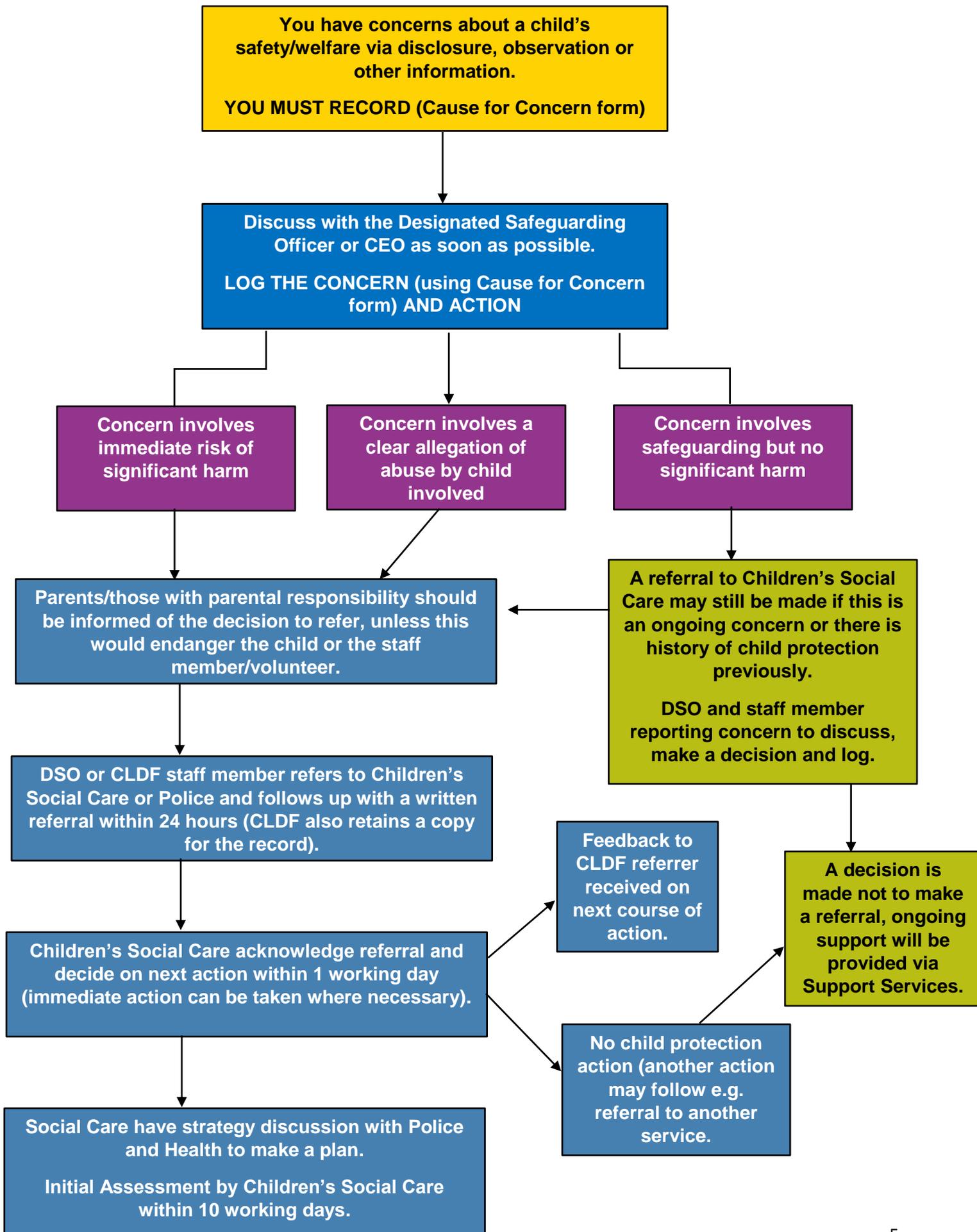
The principles of the child protection procedures as outlined above should be followed: **Listen carefully - Let the Child Lead the Pace - Once is enough - Be Honest - Don't Investigate, Don't Confront - Remember the Boundaries of Confidentiality - Seek Advice - Keep Contact Numbers Handy - Make a Careful Log including any Calls - Contact the Safeguarding Lead.**

If at any time you are in any doubt as to whether a child may be being harmed, abused or neglected, you should **always** raise your concerns with the Designated Safeguarding Officer.

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<sup>1</sup> This will usually be called the children's social care team or children's social services and is part of the local Council, or in NI the Health and Social Services Trust. You need to speak to the Duty Child Protection Worker or Duty Social Worker.

## How to report child protection/safeguarding concerns



## **Confidentiality**

All information connected with a child protection enquiry is confidential within the multi-agency network, abiding by their sharing of information policy. No information should be shared with any person who does not need to know for the purposes of protecting children and facilitating the conducting of an effective investigation.

If an alleged abuser wishes to be informed of information held about him/her in accordance with the provisions of the Data Protection Act or their Human Rights, explain that you are not permitted to comply with their request at this stage and refer them to the CEO.

The law allows particular information to be withheld from the subject of such information for the prevention and detection of crime.

The CEO will record full details of all decisions regarding information sharing, giving reasons in the log of actions for inclusion in the case file. In this way, any later challenges may be answered.

The welfare of the child is paramount. Children, as well as adults, have human rights.

Those with whom information can be shared are:

- Police
- Safeguarding board or Multi Agency Safeguarding Hub team, Social Services
- If it is not a safeguarding issue other statutory agencies e.g. health, education
- The Chairman of the Board (and trustees, as needed, depending on the circumstances e.g. a criminal investigation)

All of the above are required to keep information confidential within the boundaries of information sharing protocols and inter-agency professional confidentiality.

## **Responsibilities of CLDF after a referral has been made**

If the statutory child protection agencies decide a child is at risk of significant harm, a Child Protection Plan will be put in place to try to keep the child safe and support the child and family appropriately. The aim of these measures is to lower the level of risk to the child. Wherever possible, work will be done to keep the child within the family. If the child cannot be safely cared for within the home, despite everyone's best efforts, the local authority would seek to take legal measures to remove the child. This would be done through the family courts and would place the child into the care of the authority, with alternative carers.

The role of CLDF is to support the statutory agencies in seeking the best outcome for the child. This responsibility may not end at the referral stage.

There may be a request from other agencies to contribute to the Child Protection Plan that is formed for a child who has been referred. This should be discussed with the CLDF Designated Safeguarding Officer.

The staff member or volunteer who recognised the possible abuse, who heard the disclosure from the child or heard information of concern, should be offered appropriate de-briefing and emotional support from the DSO. If required, confidential counselling support can be arranged for staff and volunteers.

If the statutory agencies record or investigate your concerns but decide to take no further action, parents may want to know why a referral was made. CLDF's CEO will support and represent all staff, as appropriate, in explaining the actions taken in accordance with this policy.

## **What to do if you have concerns about an adult who works with children**

*(This section applies to anyone who works with children, whether in employment or as a volunteer)*

Sometimes, adults deliberately seek work or positions as a volunteer which will give them ready access to children in order to potentially sexually abuse them. There may be others who would be horrified at the thought of harming a child, but who nonetheless unintentionally put children at risk, or actually harm them.

You have a duty to seek advice from the Designated Safeguarding Officer or CEO where you observe any of the following:

- a lack of appropriate boundaries e.g. in physical contact
- personal issues affecting behaviour with children
- ignorance of, or refusal to accept health and safety issues
- an uncontrolled tendency to lash out when angry
- special attention to a child or group of children that singles them out from the rest of the group
- attempts to make contact with children outside the work environment
- flouting of guidelines for behaviour with children
- possible targeting and grooming of individual children
- a child's disclosure of abuse or behaviour that has made the child feel unsafe

If the Designated Safeguarding Officer is the person about whom you have concerns, contact the CEO. If the CEO is the person about whom you have concerns, contact the Chair of Trustees (the CLDF Office Manager would provide contact details).

Reporting the behaviour of a colleague can be an uncomfortable experience, particularly if you are unsure about what is happening. You might be worried that you are over-reacting and that you might be wrong. It may be helpful to consider what could happen if your concerns are well-founded and failure to act could result in harm to a child. Your role is to pass on concerns, not to investigate their merit. You have no option but to pass on concerns about behaviour displayed by a colleague that worries you.

You may be asked to provide written details of your concerns.

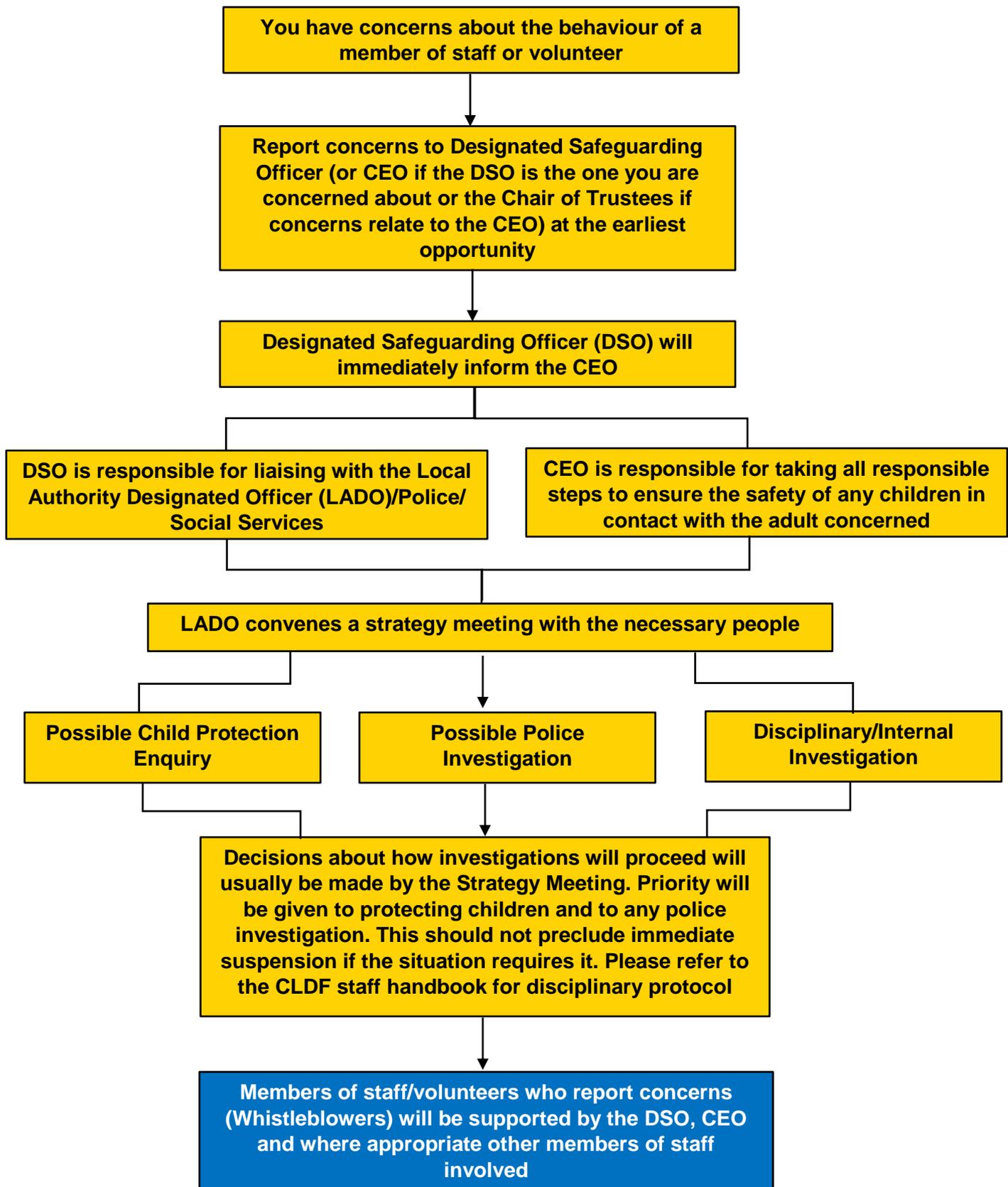
The Reporting Procedure is designed to protect you during the process of an investigation. If your concerns turn out to be mistaken, you should not be made to feel that you were wrong to bring it to the organisation's attention. People who raise concerns (i.e. whistleblowers) are protected by the law.

The Designated Safeguarding Officer will report any recorded concerns to the Local Authority Designated Officer (LADO). As CLDF is a national organisation, contact will be made with the LADO's where the worker lives, where the child lives, where the inappropriate behavior/conduct was observed (if on a residential project or at an event) and where the worker is based. It will then be up to the LADO's to agree who will lead on the investigation via the initial strategy meeting and inform CLDF who to liaise with subsequent to this.

A CLDF staff member or volunteer would also be subject to an internal investigation as per disciplinary procedures to ascertain whether their behaviour constituted gross misconduct and if found to be as such they would be subject to dismissal.

Please see the following flow chart:

## How to respond to concerns/allegations about adults working with children



# The role and responsibilities of the Safeguarding Lead and CEO

## Safeguarding Lead Roles and Responsibilities

The Safeguarding Lead (Designated Safeguarding Officer) within the organisation will be the Head of Support who will have relevant experience and training. They have responsibility for the overview of child protection cases. Because of the 'jigsaw' nature of child protection work, it is important that the Designated Safeguarding Officer can keep clear up-to date records and be able to co-ordinate any information that is received from staff/volunteers and other sources. Confidentiality is important, and fine judgments are necessary in many cases to assess what the staff/volunteers need to know, and what needs to be kept confidential for the sake of the child and the family, in line with data protection and information sharing protocols.

The following are examples of duties that a Designated Safeguarding Officer is expected to undertake:

- Update their designated NSPCC Designated Safeguarding Officer Training every two years.
- Ensure that all members of the CLDF team receive Educare Child Protection e-learning/training every three years at a minimum.
- Understand CLDF child protection and safeguarding policies and be able to use such policies when necessary.
- Ensure there is at least one hard copy of the Child Protection and Safeguarding Policy, Procedure and Guidance in the office and an electronic copy of the policy is kept on the L Drive so that all staff and volunteers can have easy access to it.
- Ensure that all staff and volunteers can use the policy if necessary.
- Ensure that parents/carers are also given access to the policy and understand the responsibility of CLDF to safeguard and promote the welfare of children. Sometimes a decision to refer might have to be made without the parents/carers knowledge or consent.
- Ensure that all staff, including volunteers, feel equipped to handle a disclosure and that everyone is clear about the need to pass on 'nagging doubts'.
- Keep child protection records in a locked cabinet. These records are only accessible to Designated Personnel and the CEO.
- Liaise with Children's Social Care Services and/or the Police (and/or any other appropriate agencies e.g. the Local Authority Designated Officer (also known as the LADO or Adult Social Care) as necessary to safeguard the welfare of children and/or vulnerable adults.
- Co-ordinate the implementation of any aspects of the Child Protection Plan to which you have agreed.

## CEO Role and Responsibilities

In addition to the responsibilities outlined above for the designated person, the CEO has overall

responsibility for:

- All policies and procedures relating to child and vulnerable adult protection within CLDF, including making sure that the Child Protection and Safeguarding Policy, Procedure and Guidance are reviewed and updated annually.
- Making sure that all workers and volunteers within CLDF are using the Child Protection and Safeguarding Policy, Procedure and Additional Guidance when there are concerns about the welfare of children.
- Gathering, managing and securely keeping all copies of child protection and adult safeguarding concerns from all designated personnel and/or directly from workers or volunteers if necessary so that s/he has an overview of how the whole of CLDF is managing such concerns.
- Noting and reporting any trends that may be emerging to Safeguarding management
- Intervening with any agency outside CLDF where there may be worries that concerns are not being taken seriously or managed in a timely way.
- Supporting any Safeguarding Lead or worker or volunteer with any child protection concern where help is required.
- Ensuring that the organisation has a Safeguarding Reference Group which meets regularly for designated personnel so that child protection/adult safeguarding concerns are managed effectively and all colleagues feel well supported in their roles. The CEO attends as required.

## Safeguarding Vulnerable Adults Procedure

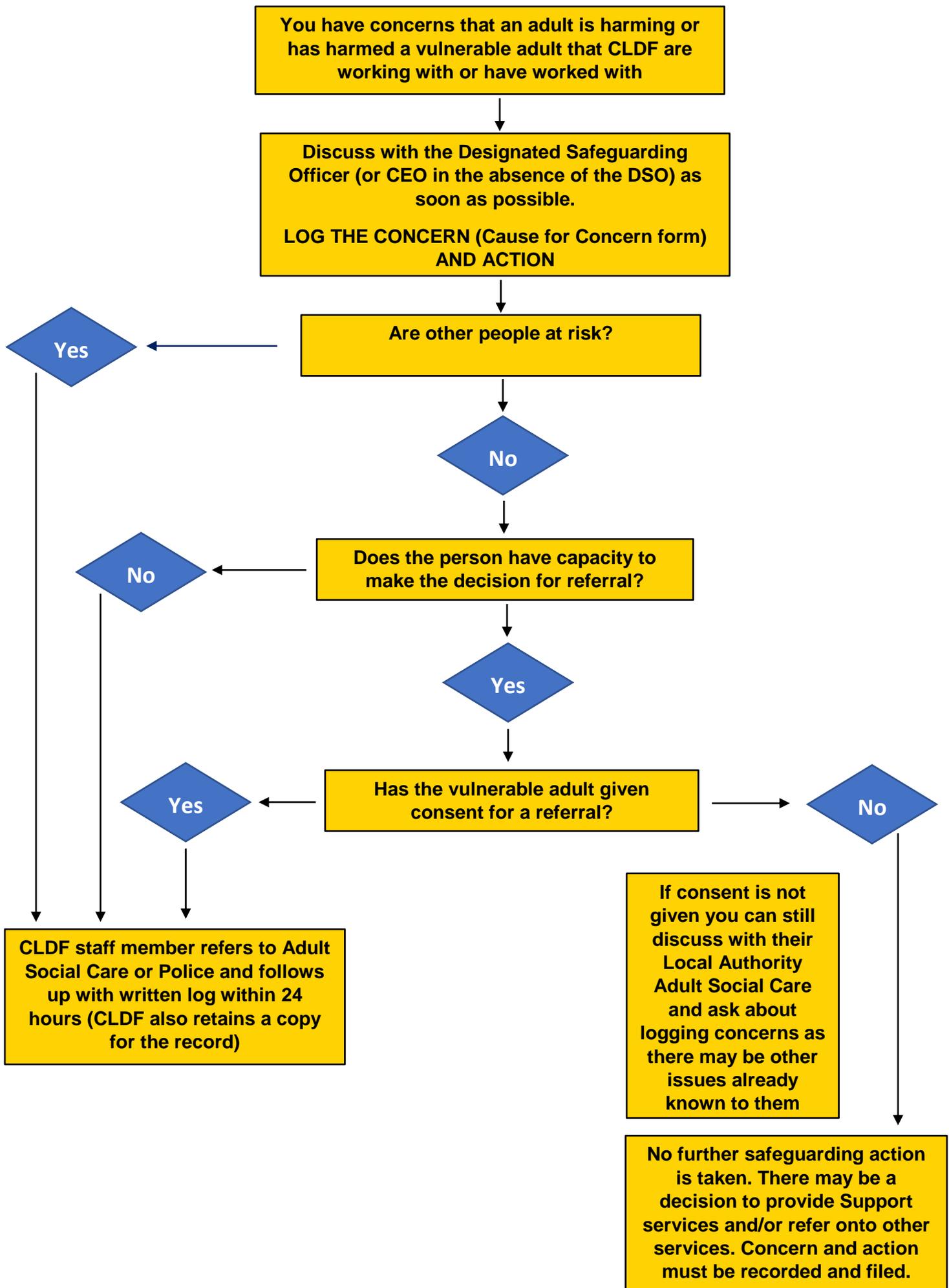
A person is described in the Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 and the Safeguarding Vulnerable Groups Act 2006 as a vulnerable adult if they have attained the age of 18 and receive any service or participate in any activity specifically for persons who have any form of disability. Protection procedures apply if someone is in receipt of a service where staff or volunteers are in a position of trust and people have a right to expect that this trust will not be abused. In Scotland, The Protection of Vulnerable Groups (Scotland) Act 2007 defines a protected adult as a person, aged 16 or over, who receives one or more type of care or welfare service, either regularly or for a short period of time. The purpose of the term 'protected adult' is to distinguish the category of adult requiring protection and to avoid labelling adults solely based on having a specific condition or disability. This definition is underpinned by Safeguarding Adults Board (SAB) legal framework Care Act 2014

An adult receiving a service from CLDF because of their liver disease could be regarded as a "vulnerable adult" or an "adult at risk".

If a CLDF worker or volunteer is concerned that someone aged 18 or over who is in receipt of a service might be being abused by someone in their lives then a referral can be made using the vulnerable adult's referral form from their local authority. All local authorities will have a Safeguarding Adult Board and via their website you will be able to access their referral form or online portal for reporting a concern of adult abuse. Consideration must be given to capacity and consent in terms of making a referral. A detailed description of the concern should be recorded (**via a Cause for Concern form**) and then discussed with the Designated Safeguarding Officer who will decide on the most appropriate course of action. If in doubt or in need of advice and guidance you should speak to Adult Social Care within the Local Authority in which they live.

Please see the following flow chart:

## How to report concerns about a vulnerable adult we are working with



## **What to do if you have concerns about an CLDF staff member or volunteer working with a vulnerable adult**

Where there is an allegation that a CLDF staff member or volunteer has harmed a vulnerable adult then action similar to how to respond to concerns/allegations about adults working with children should be undertaken. However, this should be done with the consent of the vulnerable adult unless other people are at risk, or the person does not have the capacity to make the specific decision.

Referral would be to Adult Social Care or the police rather than the LADO. Advice must be sought from Adult Social Care if the situation is unclear. The same good practices, such as staff monitoring each other's practice and behaviour and raising concerns (i.e. whistleblowing), apply to work with adults as well as work with children e.g. staff are expected to report any concerns to an appropriate manager.

Regardless of whether it is deemed appropriate to make a referral to Adult Social Care or the police, the CLDF staff member or volunteer would be subject to an internal investigation as per the disciplinary procedures, to ascertain whether their behaviour constituted gross misconduct. If this was found to be the case they would be subject to dismissal.

**CONFIDENTIAL**

**SAFEGUARDING CHILDREN/YOUNG PEOPLE/VULNERABLE ADULTS**

**CAUSE FOR CONCERN REPORT FORM**

Name of person completing report form:.....Position:.....

This report should be completed immediately following any incident which raises any concern about possible child abuse (eg. on observation of an unexplained/suspicious injury or following something said by a child which causes concern). It should be completed by the member of staff most directly involved. Care must be taken to record the information accurately and confidentially.

Child/Adult's Name:..... RE number.....

Date of Birth: .... / .... / .... Gender: ..... Liver Disease: .....

Parents/Persons with Parental Responsibility (if a child): ..... RE number: .....

Place where the incident/observation of injury/disclosure occurred: .....

Date of Concern/Incidence.....Time of Concern/Incidence.....

Adults/Young People present: .....

**DETAILS OF YOUR CONCERN.** Record here exactly what you saw or heard, including actual site of injury, (eg. Upper right arm), size/colour of bruising etc. or an exact record (as far as possible) of anything said to you by the young person/adult. Record also any relevant comments made by yourself. Avoid asking any more questions than are necessary to clarify any uncertainties. Please attach an additional sheet of paper if required.

**PREVIOUS CLDF INVOLVEMENT.** Record here any previous involvement with this child/ adult. Please give details of any other professional/organisation involved.

**What was the action taken so far, if any?** Including whether you have spoken to parents, relatives and appropriate staff members.

**What further action do you recommend is needed as a result of the concern.**

Signed: ..... (Individual/Staff with Concern)

Signed: ..... (Safeguarding Lead)

**Send this form to the Designated Safeguarding Officer. Make sure that your report is clear and will also be clear to anyone in the future who reads it who may not have pre-existing knowledge of this concern/incident.**

Ensure that it is written in clear language and makes sense, it is concise, all important details have been included, you have separated fact from opinion and only given your opinion where you have supported it with factual information, you have signed, timed and dated this account.

**This form may be made available to individuals involved in the incident in compliance with Data Protection legislation.**

I confirm that I have read, understood and will comply with Children’s Liver Disease Foundation’s (CLDF) Child Protection and Safeguarding Procedure (dated October 2018).

Name: .....

Signed: .....

Date: .....