


Safeguarding Policy		
Date Approved: 06.01.22	Authorised by: Hannah Bryant	
Review Date: 18.12.22	Signed: HM Bryant	
Page no: 1	Position: Trustee	

The Avon Centre Safeguarding Policy

Policy Statement.

The Avon Centre (TAC) recognises its responsibilities for safeguarding for all its staff, volunteers, site users, children, and vulnerable adults. TAC aims to ensure that regardless of age, gender, religion or beliefs, ethnicity, disability, sexual orientation or socio-economic background, everyone within the centre feels safe. TAC is committed to ensuring any activities undertaken at the centre have a positive effect. TAC is committed to ensuring these activities will be in a safe environment in which employees, volunteers, site users, children, and vulnerable adults are protected from abuse.

TAC will:

- Promote and prioritise the safety and wellbeing of all, particularly children and vulnerable adults.
- Ensure employees, volunteers, and trustees understand their roles and responsibilities in respect of safeguarding and are provided with appropriate learning opportunities to recognise, identify, and respond to signs of abuse, neglect, and other safeguarding issues.
- Ensure appropriate action is taken in the event of incidents/concerns of abuse and support provided to the individual(s) who raise or disclose the concern.
- Ensure that confidential, detailed, and accurate records of all safeguarding concerns are maintained and securely stored and retained in accordance with Data Protection Act legislation.
- Ensure its recruitment procedures are thorough.
- Ensure robust safeguarding arrangements and procedures are in operation.

Relevant Legislation.


- The Children's Act 1989 and 2004.
- The Data Protection Act 2018.

Related Policies and Procedures.

- Safeguarding Policy Statement.

Aims of the Policy.

- Ensure safe recruitment of trustees, staff, and volunteers by checking their suitability.
- Raise awareness of safeguarding issues and what action to take if there are concerns.
- Ensure staff and volunteers are aware of the signs of abuse, both physical and behavioural.
- Ensure that all staff and volunteers have the appropriate up to date DBS checks.

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Responsibility of Management.


- To ensure staff and volunteers understand their roles and responsibilities in respect of safeguarding and that they are provided with appropriate learning opportunities to recognise, identify, and respond to signs of abuse, neglect, or other safeguarding concerns.
- Ensure appropriate action is taken the event of an incident or a concern.
- Ensure that any records taken are detailed and accurate and that safeguarding concerns are maintained. Ensure that any records are securely stored in accordance with the Data Protection Act.
- Ensure that recruitment procedures are sound, and all staff and volunteers have an up-to-date DBS.
- Ensure that safeguarding arrangements and procedures are in operation.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child and vulnerable adult protection matters.

Duties of Employees and Volunteers.

- Ensure the safety of children and vulnerable adults by providing effective supervision, proper pre-planning of sessions, always using safe methods.
- Always consider the wellbeing and safety of participants.
- Treat all people fairly and ensure that they feel valued.
- Do not discriminate on the grounds of religious beliefs, race, gender, social class, socio-economic background, or lack of ability.
- Be positive, approachable, and offer praise.
- Do not allow any allegation of abuse, bullying, or poor practice go unchallenged or unrecorded. Notify coaches and managers.
- Report any incidents.
- Foster team work to ensure the safety of the children and vulnerable adults.
- Maintain confidentiality about sensitive information.
- Do not spend any time alone with a child or vulnerable adult.

What to do if there is a Concern.

Staff and volunteers must report any incident or allegation to a manager. The manager must investigate, and if concerned report it to the appropriate authority, making detailed notes from the investigation. A record of the incident should be kept, whether it was considered serious or not, unless the manager considers it to be totally unfounded.

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Any concerns relating to staff or volunteers should be reported immediately to the manager, who will investigate the concern.


Responding to a Disclosure.

If a child, vulnerable adult, carer, volunteer, or member of staff informs you of a perceived incident, this is known as a disclosure. The person receiving the disclosure should:

- React calmly so as not to frighten the individual.
- Take what the individual says seriously.
- If the individual needs immediate medical treatment contact a first aider.
- Ensure the immediate safety of the individual.
- Avoid leading the individual in questioning and keep any questions to a minimum. Ask only what is necessary to ensure a clear understanding of what has been said.
- Re-assure the individual but do not make promises of confidentiality or outcome, which might not be feasible in the light of subsequent developments.
- Make no physical contact or allow the individual to wash, if a physical or sexual assault is suspected.
- Notify a manager who may then need to notify the appropriate authorities, and, unless they are the suspected perpetrators, family members or parents.

In the Event of a Disclosure Volunteers or Staff Should Not:

- Dismiss the concern.
- Panic.
- Allow your shock or distaste to show.
- Probe for more information than is offered.
- Speculate or make assumptions.
- Make negative comments about the alleged abuser.
- Make promises or agree to keep secrets.
- Ask the child or any witnesses to sign your written information as this may be significantly detrimental to any subsequent police investigation.
- Take photographs of any alleged injuries. Any such recording must only be done by an approved medical or other practitioner, following referral.

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Forms of Abuse to be Aware of.

N.B. Signs and symptoms individually does not indicate abuse. However if there are a number of signs, or if the child/vulnerable adult is behaving strangely, then it is important to be aware of the signs.

Neglect.

This is when adults consistently or repeatedly fail to meet an individual's basic physical and/or psychological needs which could result in the serious impairment of the individual's health or development e.g.: failure to provide adequate food, shelter, and clothing; failing to protect someone from physical harm or danger; failure to ensure access to appropriate medical care or treatment. It may also include refusal to give love, affection, and attention.

Neglect.	
Examples include	Signs include
<ul style="list-style-type: none"> • Withholding help or support necessary to carry out daily living tasks. • Ignoring medical and physical care needs. • Failing to provide access to health, social or educational support. • The withholding of medication, nutrition, and heating. • Keeping someone in isolation. • Failure to intervene in situations that are dangerous to the vulnerable person. Inadequate supervision and guidance. Leaving the child/vulnerable adult to cope alone, abandoning them, or leaving them with inappropriate carers and failing to provide appropriate boundaries about behaviours such as underage sex or alcohol. 	<ul style="list-style-type: none"> • Constant hunger, sometimes stealing food from others. • Dirty or "smelly". • Loss of weight or being constantly underweight. • Inappropriate dress for the weather. • Complaining of being tired all the time. • Having few friends. • Worsening of health conditions. • Mentioning their being left alone or unsupervised. • Sore or extreme rash. • Skin infections. • Lack of response to stimuli or contact. • Poor skin condition. • Anxiety.


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	<ul style="list-style-type: none"> • Distressed. • Child moves away from parent under stress. • Inappropriate emotional responses. • Language delay.
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Physical Abuse.

When someone physically hurts or injures another person by hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating, drowning or otherwise causing harm. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to someone they are looking after.

Physical Abuse.	
Examples include	Signs include
<ul style="list-style-type: none"> • Shaking. • Pinching. • Slapping. • Force-feeding. • Biting. • Burning or scalding. • Causing needless physical discomfort. • Inappropriate restraint. • Locking someone in a room. 	<ul style="list-style-type: none"> • Unexplained bruising, marks, or injuries on any part of the body. • Frequent visits to the GP or A&E. • An injury inconsistent with the explanation offered. • Fear of parents or carers being approached for an explanation. • Aggressive behaviour or severe temper outbursts. • Flinching when approached. • Reluctance to get changed or wearing long sleeves in hot weather. • Depression. • Withdrawn behaviour or other behaviour change.


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	<ul style="list-style-type: none"> • Running away from home/residential care. • Distrust of adults, particularly those with whom a close relationship would normally be expected.
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Sexual Abuse.

This where someone is abused by an adult (male and/or female) or others, who use them to meet their own sexual needs. This would include rape, kissing or fondling, showing the vulnerable pornographic material or taking pornographic photographs of them, or sending pornographic images to them, or asking them to take and send images of themselves.

Sexual Abuse	
Examples include	Signs include
<ul style="list-style-type: none"> • Rape and other sexual offences. • Contact, sexual or otherwise, that an individual does not want or consented to, or were pressurised to consent to. • Being encouraged or enticed to touch the abuser. • Coercion into watching or participating in pornography. • Any sexual relationship that develops where one is in a position of trust, power, or authority. 	<ul style="list-style-type: none"> • Pain or itching in the genital/anal areas. • Bruising or bleeding near genital/anal areas. • Sexually transmitted diseases. • Vaginal discharge or infection. • Stomach pains. • Discomfort when walking or sitting down. • Pregnancy. • Sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn. • Fear of being left with a specific person or group of people. • Nightmares. • Leaving home.


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	<ul style="list-style-type: none"> • Sexual knowledge which is beyond their age or development age. • Sexual drawings or language. • Bedwetting. • Saying they have secrets they cannot tell anyone about. Self-harm or mutilation, sometimes leading to suicide attempts. • Eating problems such as overeating or anorexia.
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Emotional Abuse.

This is the persistent emotional ill-treatment of an individual to cause severe and persistent adverse effects on the person's emotional development. It may involve conveying to people 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 someone or even the over protection of an individual. It may involve causing people to feel frightened or in danger by being constantly shouted at, threatened, or taunted which may make the person very nervous and withdrawn. Some level of emotional abuse is involved in all types of ill-treatment of a child.

Emotional/Psychological Abuse.	
Examples include.	Signs include.
<ul style="list-style-type: none"> • Intimidation and/or threats. • Bullying. • Rejection. • Shouting. • Indifference and the withdrawal of approval. • Denial of choice. • Deprivation of dignity or privacy. • The denial of human and civil rights. 	<ul style="list-style-type: none"> • A failure to thrive or grow. • Sudden speech disorders. • Developmental delay, either in terms of physical or emotional progress. • Behaviour change. • Being unable to play or socialise with others. • Fear of making mistakes. • Self-harm.

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<ul style="list-style-type: none"> • Harassment. • Being made to fear for one's wellbeing. 	<ul style="list-style-type: none"> • Fear of parent or carer being approached regarding their behaviour. • Confusion.
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Additional Welfare Considerations.

Poor Practice.

Poor practice is behaviour of an individual in a position of authority which falls below required standards. This may not be immediately dangerous or intentionally harmful to an individual but may set a poor example to others. Poor practice could create or lead to an environment conducive to more serious abuse. It may lead to suspicions about the individual's motivation.

Bullying.

This can take many forms and is harmful to the victim. It may be physical – hitting; belittling; online or cyberbullying – abusive messages; comments or images on social media; involve damage or theft of property; which may be based on someone's gender, ethnicity, sexuality, disability, or physical ability.

Cyberbullying.

This is the use of technology to harass, threaten, embarrass, humiliate, spread rumours, or target another person.

Child sexual exploitation.

This is child sexual abuse and occurs where an individual or groups of people take advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual activity. This can take place using technology.

Sexting.

This is where a person sends or receives sexually explicit or suggestive images.

Persons in authority must always be mindful of the grooming or radicalisation of young persons.