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CHILD PROTECTION AND SAFEGUARDING POLICY

Last Reviewed: 01/07/2025

#### **INTRODUCTION**

This document is the Child Protection and Safeguarding Policy for New Hope, Global, which will be followed by all members of the organisation and followed and promoted by those in the position of leadership within the organisation.

The organisation does not undertake activities with children in the absence of their parents/carers but has the opportunity to observe the young persons'/children's welfare within their family setting. Parents/carers remain responsible for their children's welfare throughout all the work undertaken by the organisation.

We know that being a young person makes them vulnerable to abuse by adults. The purpose of this policy is to make sure that the actions of any adult in the context of the work carried out by the organisation are transparent and safeguard and promote the welfare of all young people.

If any parent or young person/child has any concerns about the conduct of any member of the organisation, this should be raised in the first instance with Rumena Ahmed (Programme Manager), designated child protection and safeguarding contact.

This document is written in accordance with Birmingham Safeguarding Children Board West Midlands Child Protection and Safeguarding Procedures Manual 2019.

### <u>Principles</u> upon which the Child Protection and safeguarding Policy is based.

- The welfare of a child or young person will always be paramount.
- The welfare of families will be promoted.
- The rights, wishes and feelings of children, young people and their families will be respected and listened to.
- Those people in positions of responsibility within the organisation will work in accordance with the interests of children and young people and follow the policy outlined below.
- Those people in positions of responsibility within the organisation will ensure that the same opportunities are available to everyone and that all differences between individuals will be treated with respect.

All staff and volunteers must familiarize themselves with the 5 r's in safeguarding, this will ensure that you protect vulnerable individuals and make a positive difference. The five R's provide a clear framework for responding to safeguarding concerns. They are

- Recognise and being aware of potential signs of abuse, neglect, exploitation and harm to vulnerable adults and children.
- Respond (See below)

- Report
- Record
- Refer

### SAFEGUARDING POLICY

# 1. Immediate Action to Ensure Safety

Immediate action may be necessary at any stage in involvement with children and families.

IN ALL CASES IT IS VITAL TO TAKE WHATEVER ACTION IS NEEDED TO SAFEGUARD THE CHILD/REN i.e.:

- If emergency medical attention is required, this can be secured by calling an ambulance (dial 999) or taking a child to the nearest Accident and Emergency Department.
- If a child is in immediate danger the police should be contacted (dial 999) as they alone have the power to remove a child immediately if protection is necessary, via Police Protection Order.

## 2. Recognition of Abuse or Neglect

Abuse or neglect of a child is caused 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.

### 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 feigns the symptoms, of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using terms such as, fabricated illness by proxy or Munchausen Syndrome by proxy.

## **Emotional Abuse**

Emotional abuse is the persistent emotional ill treatment 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 in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption

of children. Some level of emotional abuse is involved in all types of ill treatment of a child though it may occur alone

### Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person 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 (e.g. rape or buggery) or non-penetrative acts. This may include 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.

## **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, failing to protect a child from physical harm or danger, 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.

Individuals within the organisation need to be alert to the potential abuse of children both within their families and also from other sources including abuse by members of that organisation.

The members of the organisation should know how to recognise and act upon indicators of abuse or potential abuse involving children. There is an expected responsibility for all members of the organisation to respond to any suspected or actual abuse of a child in accordance with these procedures.

It is good practice to be as open and honest as possible with parents/carers about any concerns.

However, you <u>must not</u> discuss your concerns with parents/carers in the following circumstances:

- where sexual abuse is suspected
- where organised or multiple abuse is suspected
- where fictitious illness by proxy (also known as Munchausen Syndrome by proxy) is suspected
- where contacting parents/carers would place a child, yourself, or others atimmediate risk.

### Respond

## What to do if children talk to you about abuse or neglect

It is recognized that a child may seek you out to share information about abuse or neglect or talk spontaneously individually or in groups when you are present. In these situations, you must:

- Listen carefully to the child. DO NOT directly question the child.
- Give the child time and attention.
- Allow the child to give a spontaneous account; do not stop a child who is freely recalling significant events.
- Make an accurate record of the information you have been given taking care to record the timing, setting and people present, the child's presentation as well as what was said. Do not throw this away as it may later be needed as evidence.
- Use the child's own words where possible.
- Explain that you cannot promise not to speak to others about the information they have shared.
- Reassure the child that:
  - you are glad they have told you.
  - they have not done anything wrong.
  - what you are going to do next.
- Explain that you will need to get help to keep the child safe.
- Do NOT ask the child to repeat his or her account of events to anyone.

## 3. Consulting about your concern

The purpose of consultation is to discuss your concerns in relation to a child and decide what action is necessary. You may become concerned about a child who has not spoken to you, because of your observations of, or information about that child.

It is good practice to ask a child why they are upset or how a cut or bruise was caused or respond to a child wanting to talk to you. This practice can help clarify vague concerns and result in appropriate action.

If you are concerned about a child, you must share your concerns. Initially you should talk to one of the people designated as responsible for child protection and safeguarding within your organisation. In this organisation

this person is **Rumena Ahmed07507497222**. /**Mohammed Foiz Uddin 07591 598 340** / If one of those people is **Inter** in the concerns, you should discuss your concerns directly with:

Multi-Agency Safeguarding Hub (MASH) on the same day.

Tel: 0121 303 1888, Monday to Thursday 08.45 - 17.15 and Friday 08.45 - 16.15, Email: MASH@birmingham.gov.uk

And the citywide contact number outside office hours is The Emergency Duty Team Tel: 0121 675 4806

You should consult externally with your MASH in the following circumstances:

- when you remain unsure after internal consultation as to whether child protection and safeguarding concerns exist
- when there is disagreement as to whether child protection and safeguarding concerns exist
- when you are unable to consult promptly or at all with your designated internal contact for child protection and safeguarding
- when the concerns relate to any member of the organising committee.

Consultation is not the same as making a referral but should enable a decision to be made as to whether a referral to MASH or the Police should progress.

### 4. Making a referral

A referral involves giving MASH or the Police information about concerns relating to an individual or family in order that enquiries can be undertaken by the appropriate agency followed by any necessary action.

In certain cases, the level of concern will lead straight to a referral without external consultation being necessary.

IF YOUR CONCERN IS ABOUT ABUSE OR RISK OF ABUSE FROM SOMEONE NOT KNOWN TO THE CHILD OR CHILD'S FAMILY, YOU SHOULD MAKE A TELEPHONE REFERRAL DIRECTLY TO THE POLICE AND CONSULT WITH THE PARENTS.

If your concern is about abuse or the risk of abuse from a family member orsomeone known to the children, you should make a telephone referral toMASH.

### <u>Information required</u>

Be prepared to give as much of the following information as possible (in emergency situations all of this information may not be available). Unavailability of some information should not stop you making a referral.

- Your name, telephone number, position and request the same of the person to whom you are speaking.
- Full name and address, telephone number of family, date of birth of child and siblings.
- Gender, ethnicity, first language, any special needs.
- Names, dates of birth and relationship of household members and any significant others.
- The names of professionals' known to be involved with the child/family e.g: GP, Health Visitor, School.
- The nature of the concern; and foundation for them.
- An opinion on whether the child may need urgent action to make them safe.
- Your view of what appears to be the needs of the child and family.
- Whether the consent of a parent with parental responsibility has been given to the referral being made.

## Action to be taken following the referral

- Ensure that you keep an accurate record of your concern(s) made at the time.
- Put your concerns in writing to MASH following the referral (within 24 hours).
- Accurately record the action agreed or that no further action is to be taken and the reasons for this decision.

### 5. <u>Confidentiality</u>

The organisation ensures that any records made in relation to a referral should be kept confidentially and in a secure place.

Information in relation to child protection and safeguarding concerns should be shared on a "need to know" basis. However, the sharing of information is vital to child protection and safeguarding and, therefore, the issue of confidentiality is secondary to a child's need for protection.

If in doubt, consult.

### MODEL CODE OF PRACTICE

- 1. It is the policy of New Hope Global to provide a safe and secure environment in which children can thrive and develop and where all aspects of their welfare will be protected.
- 2. The organisation will minimise the situations in which the abuse of children might occur.
- 3. Any child using the services of this organisation, and anyone acting on behalf of such a child, may complain to the management about any aspect of the service they receive. There will be a simple and well publicised process for this, and complainants will have a right of appeal to an independent person/agency if they are dissatisfied with the way a complaint is handled.
- 4. Any child using the services of this organisation may disclose to a staff member or volunteer any abuse they may be suffering elsewhere in their lives and staff and volunteers will be vigilant for the signs of abuse.
- 5. Any indications that a child may be suffering from abuse will immediately trigger this child protection and safeguarding procedures. These procedures are consistent with the good practice guidelines of Birmingham Safeguarding Children Board.
- 6. In recruiting staff and volunteers, this organisation will follow a systematic selection process designed to assess the applicant's suitability for the post and to work with children.
- 7. Checks will be made to ensure that all the information provided by any potential member of staff or volunteer of this organisation is accurate and, within the limits of procedures available, staff and volunteers will be checked for any offences they may have committed against children.
- 8. No member of staff will be appointed to any position in this organisation without two suitable references being provided. All referees must be persons who can comment on relevant and recent aspects of the applicant's work with children.
- 9. All staff appointments to this organisation will be subject to a probationary period during which the probationer will be closely supervised.
- 10. All new staff, volunteers, and sessional workers will be appointed subject to a clear DBS check (all staff currently working are DBS checked)
- 11. All paid staff and volunteers of this organisation will have clear roles detailed for them.
- 12. The supervision of staff and volunteers will be used as a means of ensuring that the children using the services of this organisation receive adequate and appropriate protection.
- 13. Where staff occupy high risk posts or are working in high-risk settings or situations, this organisation will be particularly vigilant in its supervisory role.

- 14. Induction programmes for all new staff and volunteers will include basic information on recognising and responding to child protection and safeguarding issues. Staff at all levels of the organisation will be encouraged to undertake further training on safeguarding issues, and in appropriate circumstances this training will be compulsory.
- 15. Staff are expected to attend mandatory Safeguarding training on a yearly basis.
- 16. This organisation will ensure that safeguarding issues receive continuous attention and will regularly review the way that the organisation operates to support this principle.

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We are committed to reviewing this policy and good practice annually. This document is signed by the Chairman of New Hope, Global with consent of the Board of Trustee and Management Committee.

Chairman's Signature: \_-

Name: Mohammed Foiz Uddin MBE MInstF Accepted and Review Date: 01/07/2025

Review Date: 01/07/2026

Programme/Centre Signature:

Name: Rumena Ahmed

Review Date: 01/07/2026