

St Osyth Historical Society / St Osyth Museum

Safeguarding & Child Protection Policy and Procedures SOHS 4

Section 1 Safeguarding Policy

Purpose of this policy and definitions

This document lays out the policies and procedures of St Osyth Museum and St Osyth Historical Society to protect children and adults with needs for care and support who visit St Osyth Museum or attend any outreach activity.

*A **child** is defined as any young person who has not reached their eighteenth birthday.*

*An **adult with needs for care and support** is a person eighteen or over who is or may be in need of community care services because of mental or other disability, age or illness and who is or may be unable to take care of themselves or unable to protect themselves against significant harm or exploitation.*

Children and adults with needs for care and support visit the Museum and volunteers could also be vulnerable. All children should be accompanied on site by a parent or other responsible adult who has overall charge of the child whilst on the Museum site. If a vulnerable person requires the support of a full time carer then they should be accompanied by that person on a visit.

1a Policy Statement

We believe everyone has a responsibility to promote the welfare of all children and adults with needs for care and support, to keep them safe and to work in a way that protects them. The welfare of children and adults with needs for care and support is paramount.

1b How will we achieve this?

We will give equal priority to keeping all children and young people safe regardless of their age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation

We will recognise that there may be additional needs of children from minority ethnic groups and disabled children and the barriers they may face, for example with communication or the impact of discrimination

We will endeavour to ensure our physical and virtual spaces are safe and secure and promote enjoyable and positive experiences.

We will take all suspicions and allegations of harm very seriously and responded to them speedily and appropriately.

We will make sure all staff and volunteers working in the museum or in outreach activities are aware of their responsibility to ensure the safeguarding of children and adults with needs for care and support and know how to record and report safeguarding concerns.

We will listen to children and respect them.

We will appoint a nominated child protection lead and a member of the St Osyth Historical Society Management Committee who takes lead responsibility for safeguarding at the highest level in the Society.

We will write and regularly review detailed safeguarding and child protection procedures.

We will make sure all staff and volunteers understand and follow the safeguarding and child protection procedures

We will ensure children, young people and their families know about the Society's safeguarding and child protection policies and what to do if they have a concern.

We will building a safeguarding culture where staff, volunteers and children know how they are expected to behave and feel comfortable about sharing concerns

Section 2

Safeguarding Procedures and Instructions

Definitions and core knowledge

2a What is abuse?

Abuse is a term used to describe ways in which children and adults with needs for care and support are harmed, usually by adults, but increasingly by peers. These may be people they know and trust. It refers to the damage done to a child or young person's physical, mental or emotional health. Children and adults with needs for care and support can be abused within or outside their family, at school and within the museum environment. Abusive situations arise when adults or peers misuse their power over children and adults with needs for care and support.

The four main forms of abuse.

Physical abuse occurs when children or adults with needs for care and support are hurt or injured by others, for example by hitting, shaking squeezing or biting. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child or vulnerable adult. Failure to prevent such harm also constitutes abuse.

Neglect takes place if adults fail to meet a child or vulnerable adult's basic physical needs, e.g. for food, warmth and clothing, or emotional needs for attention and affection. Neglect occurs if children or adults with needs for care and support are left alone or inadequately supervised or where they are exposed to danger, injury or extreme conditions.

Sexual abuse occurs if children or adults with needs for care and support are used to meet another person's sexual needs. This can include any form of sexual behaviour with a child or vulnerable adult (by another person), the use of sexually explicit language and jokes, exposure to pornographic material including "pin-ups", inappropriate touching and intimate relationships.

Emotional abuse is when children are persistently denied love and affection. Children will suffer if they are always shouted at, made to feel stupid, rejected, used as scapegoats or live in a violent environment. It can include adults who are over-protective or who constantly withhold affection. It can include racist or sexist behaviour and initiation ceremonies. Emotional abuse can also be inflicted by other children as well as adults. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child or vulnerable adult's development capability, as well as over protection and limitation of exploration and learning, or preventing the child or vulnerable adult participating in normal social interaction.

Bullying can be seen as emotional abuse (e.g. taunting, name-calling, verbal threats or isolating the individual), or physical abuse (hitting, kicking, taking belongings) or neglect (lack of supervision allowing the opportunity for bullying to occur).

Other relevant guidance

The procedures reflect current legislation and accepted best practice and comply with the government guidance: "Working together 2010" published by the Department for Children, Schools and Families in March 2010. Now called Working together to Safeguard Children 2015. (www.workingtogetheronline.co.uk).

2b Recognising abuse

Children or adults with needs for care and support tell us about themselves verbally and also through their behaviour. If a child or young person is being abused they may be able to tell you about it or they may be too frightened or ashamed of what has happened. Adults need to be aware that abuse involves strong feelings and emotions in children and adults with needs for care and support as well as themselves.

A child or vulnerable adult may display one or several things at once but the indicators do not solely indicate abuse so you will need to avoid jumping to conclusions. However, if you are concerned, seek help and advice immediately from one of the Designated Safeguarding Officers

Safeguarding is everyone's responsibility.

The following list of possible indicators is not an exhaustive one:

- 1) Neglect may become apparent through the child or vulnerable adult being inappropriately or inadequately dressed for the time of year, constantly seeming hungry or unwell, repeatedly not being collected from activities or having untreated medical conditions.
- 2) Be alert for any injury that the child or vulnerable adult cannot explain, any unusual bruising or bleeding. If a child or vulnerable adult has an injury ask yourself whether the accident seems ordinary and whether it appears appropriate in relation to the child's age.
- 3) Be wary of bruising or other injuries inflicted on areas of the body that are usually not seen.
- 4) Inappropriate language or a pre-occupation with sexual matters may make you suspicious that a child or vulnerable adult has been sexually abused. A child may know more than is natural for their age.
- 5) Abusers may have threatened the child or vulnerable adult so that they keep what has happened secret. This may cause a child or vulnerable adult to hide injuries or avoid activities that would involve revealing them.
- 6) Parents' and carers' attitudes towards a child or vulnerable adult may indicate emotional abuse – continual put-downs and absence of affection. You may also notice excessive or inappropriate discipline. The parent or carer may seem defensive or hostile or even uninterested.
- 7) Other indicators that may indicate possible abuse include anti-social behaviour, low self-esteem, self-harming, recurring nightmares, depression or lethargic behaviour. A child or vulnerable adult may be over-anxious to please or clumsy. A child or vulnerable adult may suddenly have money having had little or none before.

Remember that there is nothing unusual in many of these indicators. If you have some knowledge of the child or vulnerable adult and their family / carer that allows you to put the indicators into context, then you may feel the need to report this. It is important for everyone to remember that it is not our role to investigate any concerns but to report them to the Police for them to investigate.

Ask yourself:

Is this behaviour appropriate for this child or vulnerable adult?

Should I be concerned about this?

Should I be taking action?

2c What to do if a child or vulnerable adult is at risk

Staff and volunteers should report their concerns about children or adults with needs for care and support to the Designated Safeguarding Officer.

If the child or vulnerable adult is with a teacher or group leader, then the museum staff member or volunteer should speak to them first if there is a suspicion of child

abuse. They should also inform one of the Designated Child Protection Safeguarding Officers.

Any concerns should be reported at the earliest opportunity; certainly within the same working day. Staff should not feel that they must await proof before sharing concerns – Children and Young People’s Specialist Services, Adult Social Care and/or the Police have responsibility for looking at the evidence and forming judgements. **In the event that the Designated Safeguarding Person is not available** and cannot be contacted immediately, staff should contact the following, in order of priority:

**If you think a child or young person is in immediate danger telephone 999
Otherwise:**

**St Osyth Museum / Historical Society:
Lead Safeguarding Person – Judy Ward 01255 822246
Alternative Safeguarding Person – Jo Cole 01255 821759**

**Essex County Council Children’s Social Care: 0345 603 7627
Police (24 hour, non-emergency number: 101)
NSPCC 24 hour child protection help line 0808 800 500
Police / Ambulance 999**

The Designated Safeguarding Persons’ role is to receive concerns and discuss them with whoever has raised the concern and take advice from Children and Young People’s Services or Adult Social Care and make a decision as to how to proceed. This could include complex matters such as consent and whether parents / carers should be notified.

Ensure the procedure is followed on such matters as making a referral, confidentiality and recording.

The Designated Safeguarding Persons are expected to receive appropriate training, though they are **not** expected to become an expert in safeguarding.

2d What to do if a child or vulnerable adult discloses possible abuse

- 1) Listen carefully and let the child or vulnerable adult tell you what happened, at their own pace, only asking questions for clarification.
- 2) Remain calm and caring and avoid interpreting information.
- 3) Do not conduct an enquiry into what has happened.
- 4) Avoid cross-questioning or leading questions

- 5) Do not promise to keep it a “secret” and tell the child or vulnerable adult you need to share this information with others, but make it clear that you will only tell people who need to know and who can help.
- 6) Reassure the child or vulnerable adult that they did the right thing in telling you.
- 7) Make a note of what was said, using the child or vulnerable adult’s own words, as soon as possible after the disclosing conversation and complete a Safeguarding Incident Report form.
- 8) Speak immediately to a Designated Safeguarding Person and seek immediate advice to determine whether the issue is possible abuse.
- 9) **If none of the Designated Safeguarding Persons are available**, contact the phone numbers below, in order of priority. Ask the name and designation of the person you speak to, and make a note of the date and time of the call in case any follow up is needed.

**If you think a child or young person is in immediate danger telephone 999
Otherwise:**

St Osyth Museum / Historical Society:

Lead Safeguarding Person – Judy Ward 01255 822246

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- 10) Volunteers should not under any circumstances remove the child or vulnerable adult’s clothing if abuse is suspected.
- 11) Ensure the safety of the child or vulnerable adult – if they require immediate medical treatment, call the ambulance, inform paramedics or doctors of concerns and ensure that they are aware that this is a safeguarding issue.
- 12) Stay with the child or vulnerable adult and keep any questions to an absolute minimum.
- 13) Note should be made of any marks which you have observed, or which have been brought to your attention by the child, by filling in a Safeguarding Incident Report form. **NO FURTHER EXAMINATIONS SHOULD BE CARRIED OUT BY YOU.**
- 14) Confidentiality should be maintained on a strictly “need to know” basis and relevant documents stored in a secure location.

- 15) Inform the Museum Manager of the action you have taken
- 16) **Do not** contact parents / carers as your enquiries may be counter-productive. This is the responsibility of Children and Young People's Specialist Services or Adult Social Care.

2e Making a referral (Designated Safeguarding Persons only)

A referral can be made to:

If you think a child or young person is in immediate danger telephone 999
Otherwise:

St Osyth Museum / Historical Society:
Lead Safeguarding Person – Judy Ward 01255 822246
Alternative Safeguarding Person – Jo Cole 01255 821759

Essex County Council Children's Social Care: 0345 603 7627
Police (24 hour, non-emergency number: 101)
NSPCC 24 hour child protection help line 0808 800 500
Police / Ambulance 999

Make the referral by telephone in the first instance at the earliest opportunity and then confirm in writing within 48 hours using the Safeguarding Incident Report form.

2f Confidentiality / consent

Confidentiality

The right of a child or vulnerable adult to protection takes precedence over his / her (or parents') right to confidentiality. If you believe a child or vulnerable adult has been abused you should report it.

It is important to observe confidentiality within your organisation. This means that you: Ensure the names of child or vulnerable adult, or staff members about whom there are concerns or who have breached the code of conduct, are not shared around your organisation.

Retain any records in a central, lockable, non-portable cabinet. Government advice is that records should be kept for 6 years after the last contact with the child or vulnerable adult.

Consent

Explain to the child or vulnerable adult that the information will be shared appropriately.

The child or vulnerable adult's welfare is the overriding consideration.

Wherever possible respect the wishes of children or adults with needs for care and support who do not give consent, but still share information where there is sufficient need to override the consent.

Seek advice when in doubt.

Ensure information you share is accurate and only shared with people who need to see it. Information should be stored securely.

Always record the reasons for your decision.

Parents will be informed by either a social worker or police officer where appropriate.

2g Incidents that must be reported/recorded

If any of the following occur, report it to your line manager. You should also ensure the parents/carers or teacher of the child or vulnerable adult are informed unless allegations of abuse are involved.

If you accidentally hurt a child or vulnerable adult.

If a child or vulnerable adult seems distressed in any way with no obvious cause.

If a child or vulnerable adult appears to be sexually aroused by your actions.

If a child or vulnerable adult misunderstands or misinterprets something you have done as abusive, threatening or sexual.

2h Management of allegations against volunteers

Any concern about another member of staff or volunteer's behaviour should be discussed immediately with the most appropriate line manager.

Section 3 Volunteers

3a Code of conduct for volunteers

Volunteers at St Osyth Museum must:

- 1) Respect the rights, dignity and worth of each and every person and treat each equally within the context of the museum.
- 2) Place the well-being and safety of each visitor above all other considerations.

- 3) Develop an appropriate working relationship with each visitor based on mutual trust and respect.
- 4) Not exert undue influence to obtain personal benefit or reward.
- 5) Ensure that the activities they direct or advocate are appropriate for the age, maturity, experience and ability of the child or vulnerable adult.
- 6) Consistently display high standards of behaviour and appearance.
- 7) Only be left alone with child or adults with needs for care and support for short periods of time and then only when absolutely necessary, e.g. if a teacher takes another child to the toilet.
- 8) Take simple precautions e.g. leave a door open if left alone with a child
- 9) Avoid physical contact other than in emergencies
- 10) Not meet with, or contact, child or vulnerable adult visitors outside of the work context. They should not ask for or give personal contact details e.g. phone number or email address.
- 11) Not make suggestive comments, even in jest
- 12) Not accompany a child or vulnerable adult to the toilet
- 13) Avoid using public toilets at the same time as unaccompanied child or vulnerable adult
- 14) Exercise common sense and avoid placing themselves in situations which may be misinterpreted.
- 15) Report any potential safeguarding incident as outlined in the Safeguarding Policy.
- 16) Be alert for signs of child abuse, and be aware of the correct procedure should this be suspected, or if a child or vulnerable adult reports an abusive situation. Our position is one of referral, not investigation.

3b Dissemination and training

The safeguarding of children and adults with needs for care and support should always be included in volunteer induction. All new volunteers should be made familiar with all safeguarding policies and procedures.

Designated Safeguarding Officers and those who work more intensively with children or adults with needs for care and support will need more training than most staff.

A record will be kept by the Designated CP Safeguarding Officers of safeguarding training completed by volunteers so that there is a clear audit trail of who has received what.

Staff should sign the policy to indicate that they have read and understood it.

This policy will be made available to parents, carers, teachers, children and young people on demand.

3c Creating safe environments

Safe use of IT and the Internet

Internet access is not provided in the Museum so there is no risk of inappropriate on-line activity.

The laptop computers used in The Museum are for the purpose of controlling displays and storing a database of Museum Artefacts and for these specific uses only, so there is never any possibility of people accessing inappropriate or other sensitive information.

Managing risk

Risk assessment forms an integral part of the planning of any activity at our museum whether for exhibitions, public events or school workshops or tours.

Risk assessments

Staff, volunteers and freelancers should be familiar with the museum's risk assessments for workshops, events and museum sites as relevant to them.

Name labels

Children and adults with needs for care and support participating in events and activities in public places should not wear a name badge as this can help potential child abusers to make contact with them. They can wear a badge identifying the school or group they come from and its emergency contact number.

3d Photographs including children or adults with needs for care and support

Museum staff should not take photos which include recognisable faces, unless prior written permission for each individual has been obtained from the parent or guardian. It is good practice to seek permission directly from older children (or adults), as well as asking their parent or carer.

A picture of a child or adults with needs for care and support should never be identified by name on any publicity, posters or website under any circumstance.

In the case of a school party, verbal permission must first be obtained from the teacher in charge. Selected photos will then be sent to the school to gain parental permission. All other photos showing recognisable children's faces will be deleted from all electronic storage devices.

Only those photos supported by written parental permission should be stored.

3e Unaccompanied children or adults with needs for care and support

Minimum ages for unaccompanied children

Children under the age of 10 should always be accompanied by a parent/carer or teacher. An unaccompanied child of 9 or younger should be reported to: **The Police**. A child aged 10 – 15 years may be accompanied by an older sibling (aged 16 or older).

Young people aged 15 and over may visit this Museum without an older sibling or responsible adult. However, all minors remain the responsibility of their legal guardian whilst they are on the museum premises, whether the legal guardian is present or not.

The minimum age at which young people who are unaccompanied by a responsible adult may visit our sites is 15.

Children between the ages of 8 and 16 may be accompanied by a member of museum staff in exceptional circumstances, such as when attending a programmed study or activity session. In which case, staff must ensure that the correct paperwork for unaccompanied children has been completed by each child's carer.

In situations where the issue of a young person's age is contentious, staff would reserve the right to see proof of age such as a Citizen Card before allowing a young person to enter a site.

Section 4 Lost or unaccompanied children or adults with needs for care and support

4a What to do with an unaccompanied child or adult in need of care and support.

Approach the child or adult in need of care and support, with a colleague if possible, then:

- 1) Ascertain whether or not the parents / carers are at the museum

- 2) Try to find out if the parents / carers know they are in the museum unaccompanied and if they know how to get home.
- 3) Use your judgement in deciding if it is reasonable to expect the child or vulnerable adult to find their own way home. Ask yourself:
- 4) Does he/she seem capable of finding their own way home?
- 5) Does he/she appear to know clearly where they live?
- 6) Are there any busy roads on the way home?
- 7) What is their age and understanding?
- 8) If you are not sure, encourage the child or vulnerable adult to remain in the museum until the parent / carer can be contacted, then contact one of the Designated Safeguarding Officers for advice.
- 9) If attempts to contact a parent / carer fail, you should contact the Police (**24 hour, non-emergency number: 101**).
- 10) **Truanti**ng children will usually be wearing school uniform. Ask them for their name and the name of their school. With this information you can contact the **Access and Attendance School Service**.
- 11) If the young person is being a nuisance, phone the Police (**24 hour, non-emergency number: 101**).

4b What to do at closing time

Inform one of the Designated Safeguarding Persons. If neither is on site, those staff members present should proceed as described below.

- 1) Two members of staff should approach the child or adult with needs for care and support to find out if they are waiting for a parent / carer to collect them.
- 2) Ring the child or adult with needs for care and support's home to clarify the situation.
- 3) Two members of staff should wait for the parent / carer to arrive.
- 4) If you cannot contact the parent / carer, you should contact **the police (24 hour, non-emergency number: 101)**.
- 5) Both members of staff should wait with the child or adult with needs for care and support until they arrive.

- 6) Staff should not eject the child or adult with needs for care and support from the museum solely on the grounds of them being unaccompanied as they are more at risk on the street than they are in the museum.

4c If a child or adult with needs for care and support is reported by a member of the public as lost or missing:

Inform one of the Designated Safeguarding Persons immediately with the following information, giving as full details as possible:

- a) Name of child or adult with needs for care and support
- b) Age of child
- c) Address / name of school (where applicable)
- d) Physical description of child or adult with needs for care and support (height, colour of hair, clothing, etc.)
- e) Where the child or adult with needs for care and support was last seen
- f) The time the child or adult with needs for care and support was last seen

Once a sufficient check is made of the area of responsibility of the Museum and immediate surroundings, and if the child or adult with needs for care and support is not found, one of the Designated Safeguarding Officers or Museum Staff will inform the police.

The member of staff who took the initial report should reassure the parent that action is being taken to locate the child or adult with needs for care and support and explain that contact will be maintained with them until they are found.

If the Designated Safeguarding Officer is off site, the volunteers present should proceed as described above.

4d If there is a child or adult with needs for care and support found lost and alone in the museum or immediate vicinity:

- 1) Take them to Main Desk.
- 2) Do not broadcast their name.
- 3) Send a reliable person to find the parent / carer(s) – ask the child or adult with needs for care and support for a description.

- 4) Check beforehand with the child or adult with needs for care and support their name and the names of the parent / carer(s) who are with them.
- 5) If no-one comes to collect them by the end of the activity / event, call the Police.
- 6) Two members of staff should stay with the child or adult with needs for care and support and reassure them.
- 7) If two members of staff are not available, one should stay with the child or adult with needs for care and support in a public space.
- 8) Do not take them to a private office.

4e Outreach visits

When a member of staff visits another organisation, such as a school, the supervision of the children or adults with needs for care and support remains the responsibility of the organisation being visited. At least one member of staff from that organisation should be present at all times.

Museum staff should take identification with them and be prepared to comply with any security procedures the organisation has in place, for example, signing in and out and wearing a visitor's badge.

Any concerns a member of staff has about safeguarding issues whilst on an outreach visit should be reported to the designated safeguarding person in that setting, who will undertake the necessary response.

4f Recommendations for persons involved with the medical treatment of children or adults with needs for care and support (emergency first aid only)

- 1) It is recommended that no child or adult with needs for care and support should be treated in a situation where they are on their own with a member of staff
- 2) It is strongly recommended that all treatment procedures should be "open" i.e. the door remains open and parents / carers / teachers are invited to observe treatment procedures.
- 3) It is recommended that if treating an area of the body, which is potentially embarrassing to a child or vulnerable adult (e.g. the groin), a suitable consenting adult should be present as a chaperone (if the parent / carer is not present).
- 4) It is important to maintain medical confidentiality and patient dignity at all times.

- 5) It is recommended that all treatment procedures are explained fully to the child or vulnerable adult and **verbal consent** is given before they are carried out.
- 6) Under **no** circumstances (even in an emergency) will any person other than the child or adult with needs for care and support themselves, or their carer, administer medication (as opposed to emergency first aid).

This Policy was revised and approved January 2020