

Safeguarding Children Policy

Foreword

This document has been produced by Salford CVS in partnership with the SSCP

The policy was reviewed & presented to CVS Board of Trustees on 30th August 2022

Final amendments were agreed and accepted by CVS Board of Trustees on ^{30th} August 2022

Find out more about Safeguarding Children's on the Salford CVS website: https://www.salfordcvs.co.uk/safeguarding-salford

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1. Introduction

- 1.1. This document is the Safeguarding Children Policy for **Salford CVS**, **which** will be followed by all members of the organisation and followed and promoted by those in the position of leadership within the organisation.
- 1.2. Individual agencies are responsible for ensuring that their employees are competent and confident in carrying out their responsibilities for safeguarding and promoting children's welfare.
- 1.3. The purpose of the organisation is as follows: -Salford CVS is the city-wide infrastructure organisation for the voluntary, community and social enterprise sector; providing specialist information, advice, development support and opportunities for influence and collaboration. We provide support for organisations to establish and develop including training for their staff, volunteers and trustees.
- 1.4. We know that young people can be 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.
- 1.5 This policy relates to Children and Young People up to the age of 18 as defined by the Children's ACT 2014 and the Working Together Guidance 2018
- 1.6. This document is written in accordance with the following:
 - a. Salford Safeguarding Standards Updated December 2016,
 - b. Salford Children's Services Joint Working Protocol with VCSE Sector,
 - c. Salford Safeguarding Children Board Policies,
 - d. Greater Manchester Safeguarding Children Procedures Manual
 - e. Working Together to Safeguard Children 2018.

1.7. Principles upon which the Safeguarding Children Policy is based:

- The welfare of the child is paramount.
- Children have a right to be safe and should be protected from all forms of abuse and neglect
- Safeguarding children is everyone's responsibility
- It is better to help children as early as possible, before issues escalate and become more damaging
- Children and families are best supported and protected when there is a coordinated response from all relevant agencies
- Voluntary, community and social enterprise organisations, including sports clubs and groups, play an important role in delivering services to children
- Voluntary, community and social enterprise organisations working with children and young people are in a unique position to be able to observe signs of abuse or neglect, or changes in behaviour which may indicate a child may be being abused or neglected.

Staff and volunteers should make sure that they are **alert** to the signs of abuse and neglect, that they **question the behaviour** of children and parents/carers and don't necessarily take what they are told at face value. They should make sure they know where to turn to if they need to **ask for help**, and **refer** to children's social care or to the police, if they suspect that a child is at risk of harm or is in immediate danger (see the section on Taking action for further information).

"Voluntary, charity, social enterprise (VCSE) and private sector organisations and agencies play an important role in safeguarding children through the services they deliver. Like other organisations and agencies who work with children, they should have appropriate arrangements in place to safeguard and protect children from harm. All practitioners working in these organisations and agencies who are working with children and their families are subject to the same safeguarding responsibilities, whether paid or a volunteer."

Working Together to Safeguard Children 2018

2. Safeguarding Children & Young People

This section covers a range of safeguarding measures which have been designed to safeguard children and young people from harm. They are as follows:

2.1 Safe Recruitment & Selection.

We have a policy and procedure which ensures that all potential staff and volunteers:

- Complete an application form or a letter of application. This includes: address, evidence of relevant qualifications, the reasons why they want to work with children and young people, paid work and voluntary work experience and all criminal convictions.
- Provide two pieces of identification which confirm both identity and address.
- Undergo an interview (formal or informal) involving at least two interviewers.
- Provide at least two references which are followed up before a post is
 offered. One reference is from the last employer or an organisation that has
 knowledge of the applicant's work or volunteering with children or young
 people. If the applicant has not worked with children or young people before,
 then they should confirm this and give an alternative referee.
- Consent to a Disclosure and Barring Service check (formally CRB check) at the appropriate level (standard or enhanced). Agree to sign up to the DBS update service.

Furthermore the organisation complies with all other safeguarding regulations:

- We understand that a person who is barred from working with children or vulnerable adults is breaking the law if they work or volunteer, or try to work or volunteer with these groups.
- We understand that an organisation which knowingly employs someone who is barred to work with those groups will also be breaking the law.
- We understand that if our organisation dismisses a member of staff or volunteer because they have harmed a child or vulnerable adult, or would have done so if they had not left, we must complete a DBS referral form:
 DBS referrals | Home Office.

2.2 Management & Support of Staff & Volunteers

- All staff and volunteers are provided with a job description (staff) or a role profile (volunteers) outlining their main responsibilities. This includes a requirement to comply with our Safeguarding Policy and Procedures and Ground Rules for appropriate behaviour.
- All staff and volunteers are supported through an Induction process during which safeguarding/child protection procedures are explained and training needs identified
- All staff and volunteers complete a role review at the end of their induction period before being confirmed in post. Inductions will be completed within 6 months.
- All staff are given supervision at least every 6 weeks by their line manager/ Chair of the organisation.
- All volunteers are given regular support sessions. (This may include one to one or group support, mentoring or shadowing opportunities).
- Salford CVS implements disciplinary and grievance procedures for all staff and volunteers, which comply with the ACAS¹ Code of Practice.
- All staff and volunteers attend regular ongoing safeguarding training appropriate to their role.

2.3 Providing Safer Activities and Trips

2.31 Necessary arrangements

- People whose suitability has not been checked, including through a DBS check will not be allowed to have unsupervised contact with children.
- All staff and volunteers undertaking specialist roles, (e.g. taking children and young people off site on trips) are provided with appropriate training.
- All activities are risk assessed to ensure that all reasonable steps are

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¹ ACAS – Advisory, Conciliation and Arbitration Service

taken to prevent children and young people being harmed whilst participating in the organisation's activities.

- Employer's liability and/or public liability insurance has been taken out to ensure that all activities and services and all people taking part, are covered.
- All activities being provided are properly planned and organised.
 Planning ensures that the activities are: age-appropriate, appropriately supervised, take account of staff ratio and use qualified instructors.
- The organisation i.e. Salford CVS or partner agencies –has a Photography Policy about taking and using photographs of children and young people and a consent form for the use of photographs and filming.

2.32 Transport

We ensure that our transport has:

- Appropriate insurance cover
- Tax MOT
- Appropriate seats (including booster seats and seatbelts)
- A first aid box
- Drivers who hold the correct driving license

2.4 Online safety

The welfare of the children/young people who come into contact with our services is paramount and governs our approach to the use and management of electronic communications technologies. Working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare and in helping young people to be responsible in their approach to e-safety;

The use of information technology is an essential part of all our lives; it is involved in how we as an organisation gather and store information, as well as how we communicate with each other. It is also an intrinsic part of the experience of our children and young people, and is greatly beneficial to all. However, it can present challenges in terms of how we use it responsibly and, if misused either by an adult or a young person, can be actually or potentially harmful to them.

We will seek to promote e-safety by:

- Appointing an e-safety coordinator (note: this may or may not be the same person as our named person for child protection).
- Developing a range of procedures that provide clear and specific directions to staff and volunteers on the appropriate use of ICT (see staff handbook).
- Supporting and encouraging the children and young people using our service to
 use the opportunities offered by mobile phone technology and the internet in a
 way that keeps themselves safe and shows respect for others.
- Supporting and encouraging parents and carers to do what they can to keep their children safe online and when using their mobile phones and game consoles.
- Incorporating statements about safe and appropriate ICT use into the codes of conduct both for staff and volunteers and for children and young people.
- Developing an e-safety agreement for use with children, young people and their carers.
- Using our procedures to deal firmly, fairly and decisively with any examples of inappropriate ICT use, complaints or allegations, whether by an adult or a child/young person (these may include breaches of filtering, illegal use, cyberbullying, or use of ICT to groom a child or to perpetrate abuse).
- Informing parents and carers of incidents of concern as appropriate.
- Reviewing and updating the security of our information systems regularly.
- Providing adequate physical security for ICT equipment.
- Ensuring that user names, logins and passwords are used effectively.
- Using only official email accounts provided via the organisation, and monitoring these as necessary.
- Ensuring confidential information sent by emails is sent securely, and depending on the sensitivity of the data, it may need to be encrypted.
 (See Appendix One)
- Ensuring that the personal information of staff, volunteers and service users (including service users' names) are not published on our website.
- Ensuring that images of children, young people and families are used only after their written permission has been obtained, and only for the purpose for which consent has been given.
- Ensuring that any social media tools used in the course of our work with children, young people and families are risk assessed in advance by the member of staff wishing to use them.
- Providing effective management for staff and volunteers on ICT issues, through supervision, support and training including with the Data Protection Act (GDPR).
- Examining and risk assessing any emerging new technologies before they are used within the organisation.

The name of our e-safety coordinator is:: Kirsten Robinson

Contact details: 0161 787 7795 / 07854375708

kirsten.robinson@salfordcvs.co.uk

2.5 Ground rules

Ground rules are used for any activity involving Children and Young People. The Ground rules will state clearly what is appropriate behaviour for children and young people, staff and volunteers, and parents/ carers. Systems are in place and implemented if the Ground rules are broken.

2.6 Bullying

Bullying will not be accepted or condoned. Bullying can include:

- Physical pushing, kicking, hitting, pinching etc.
- Name calling, sarcasm, spreading rumours, persistent teasing and emotional torment through ridicule, humiliation and the continual ignoring of individuals.
- Sectarian/racial taunts, graffiti, gestures.
- Sexual comments and/or suggestions.
- Unwanted physical contact.

Children from ethnic minorities, disabled children, young people who are gay or lesbian, bisexual or trans or those with learning difficulties are more vulnerable to this form of abuse and may well be targeted.

Everybody has the responsibility to work together to stop bullying – the coach/volunteer, the parent/guardian, the child/young person. **Salford CVS** is committed to the early identification of bullying and prompt, collective action to deal with it.

Anyone who reports an incident of bullying will be listened to carefully and be supported, whether it's the child/young person being bullied or the child/young person who is bullying. A bullying report form will be completed and appropriate action taken. Any reported incident of bullying will be investigated objectively and will involve listening carefully to all those involved. Children/young people being bullied will be supported and assistance given to uphold their right to play and live in a safe environment which allows their healthy development. Those who bully will be supported and encouraged to stop bullying.

2.7 Comments, Compliments & Complaints Policy

We have a written Comments, Compliments & Complaints Policy and procedure so that children and young people, and staff and volunteers can make any necessary comment, compliment or complaint.

3. Child Protection

3.1 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 OR CHILDREN CONCERNED 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 their powers to use police protection.

3.2 Recognition of Abuse or Neglect.

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child 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. They may be abused by an adult or adults, or another child or children.

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 organisation should know how to recognise and act upon indicators of abuse

or potential abuse involving children and where there are concerns about a child's welfare. 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.

Abuse can take many forms and the following is a summary of the most common forms of child abuse as set out in <u>Working Together to Safeguard Children</u> (2018) Appendix A.

3.21 Physical abuse

Physical Abuse - a form of abuse which 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 fabricates the symptoms of, or deliberately induces, illness in a child.

Some of the following signs may be indicators of physical abuse:

- · Children with frequent injuries;
- Children with unexplained or unusual fractures or broken bones; and
- Children with unexplained:
 - bruises or cuts;
 - burns or scalds; or
 - Bite marks.

3.22 Emotional abuse

Emotional abuse - The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the 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 include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), 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 maltreatment of a child, though it may occur alone.

Some of the following signs may be indicators of emotional abuse:

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder';
- Parents or carers blaming their problems on their child; and
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons.

3.23 Neglect

Neglect - 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. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers);
 or
- ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe;
- · Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- · Children who fail to receive basic health care4; and
- Parents who fail to seek medical treatment when their children are ill or are injured

3.24 Sexual abuse and exploitation

Sexual abuse- Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Some of the following signs may be indicators of sexual abuse:

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games; and
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

Further information on Child Sexual Exploitation /Child Criminal Exploitation

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Child exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

3.25 Further information on Preventing Radicalisation

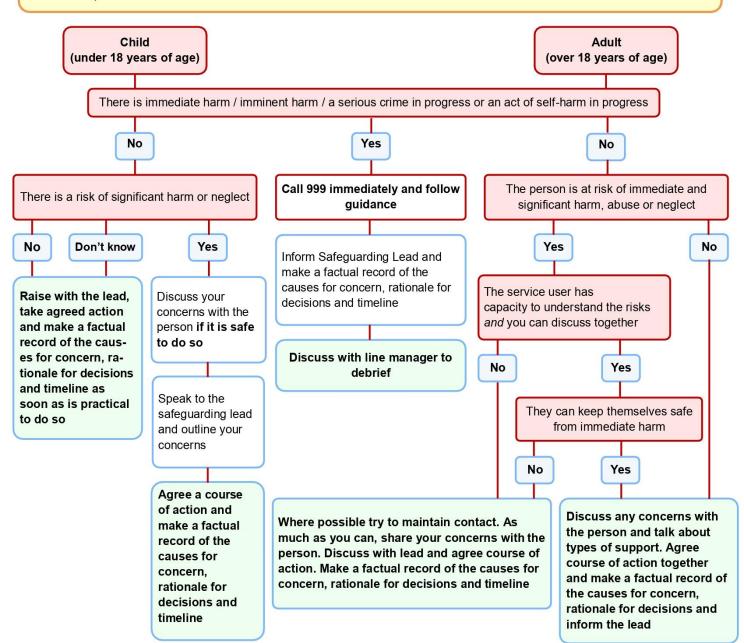
Protecting children from the risk of radicalisation should be seen as part of an organisations wider safeguarding duties and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people. As with managing other safeguarding risks, staff/volunteers should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection.

3.3 Taking Action

There are 4 key steps to follow to help you identify and respond appropriately to possible abuse and or neglect.

- ⇒ Follow this flowchart for concerns around safeguarding.
- ⇒ If you are unsure about anything, do not be afraid to ask your line manager (or the next safeguarding lead for support).
- ⇒ For issues raised by professionals in other organisations, **report and record**, but advise them to follow their own processes.
- No one is expected to make decisions around safeguarding on their own, discuss, decide and debrief! For who to contact, see the list at the bottom of this chart.



It may not always be appropriate to go through all 4 stages sequentially. If a child is in immediate danger or is at harm or risk you should refer to children's social care and/or the police. Before doing so, you should try to establish the basic facts. However, it is important that you do not ask the child or young person any leading questions as this may have a detrimental impact on any subsequent investigation. It is the sole role of the social workers and the police to investigate cases and make a judgement on whether there is statutory intervention and/or a criminal investigation.

You should record, in writing, all concerns and discussions about a child's welfare the decisions made and the reasons behind those decisions.

The first step is to be alert to the signs of abuse and neglect and to have read this document.

Whenever there is a safeguarding concern raised by a member of staff or volunteer at CVS a written record should be compiled using the Safeguarding Concerns Record (Template stored on Breathe).

This written record should **not** be stored electronically but instead should be printed off and passed to Kirsten Robinson so that it can be kept confidentially and in a secure place.

3.4 When You Must *Not* Discuss Your Concerns with Parents/Carers.

It is good practice to be as open and honest as possible with parents/carers about any concerns. However, you MUST NOT discuss your concerns with parents/carers in the following circumstances:

- Where sexual abuse or sexual exploitation is suspected
- Where organised or multiple abuse is suspected (see complex, organised or multiple abuse procedure)
- Where fabricated or Induced Illness (previously known as Munchausen Syndrome by proxy) is suspected (see Fabricated or Induced Illness procedure)
- Where Female Genital Mutilation is the concern (see Female Genital Mutilation procedure)
- In cases of suspected Forced Marriage (see Forced Marriage procedure)
- Where contacting parents/carers would place a child, yourself or others at immediate risk

These decisions should not be taken in isolation. Consult with your senior manager/line manager/designated safeguarding lead or the Bridge Partnership on 0161 603 4500.

3.5 What to do if Children Talk to You about Abuse or Neglect.

It is recognised 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 do not offer false confidentiality.
- Reassure the child that:
 - •they have done the right thing in telling you;
 - they have not done anything wrong;
- Tell the child what you are going to do next and explain that you will need to get help to keep him/her safe.
- DO NOT ask the child to repeat his or her account of events to anyone

If a child discloses information to you about abuse or neglect you must take action.

Contact your designated safeguarding person or if you cannot contact them go straight to the Bridge Partnership on 0161 603 4500

If a child is in immediate danger of being harmed, the police should be called on 999.

3.6 Consult about your Concern

Children will not always disclose information to you. If you are concerned about a child due to what you have observed or something that another individual has disclosed, you must share your concerns.

Initially you should talk to your line manager or one of the people designated as responsible for child protection within your organisation.

In Salford CVS Designated Safeguarding Leads are

Alison Page **07436102880**Kirsten Robinson **07854375708**Ben Whalley 07891-214-544

It will usually be the designated person who will then get in touch with the Bridge Partnership (Salford Safeguarding Referral Team) if necessary:

If you are worried about a child and cannot contact a designated person speak to another manager or go direct to the Bridge Partnership

The Bridge Partnership can be contacted directly by telephone on **0161 603 4500**.

3.7 Make a Referral

3.71 A referral involves giving the Bridge Partnership the Police, or the Local Authority Designated Officer (LADO) at the Safeguarding Children Unit 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.

Worried about a child?

Every child and young person has the right to be safe.

All reports or enquiries concerning the welfare or safety of a child must go straight to the **Bridge Partnership** Tel: **0161 603 4500** or via our online portal, which you can access below.

Children's portal

The Bridge Partnership is available Monday to Friday from 8:30am - 4:30pm. If you need to speak to someone outside of these times, please contact the **Emergency Duty Team (EDT)** on **0161 794 8888**.

If a child is in immediate danger of being harmed or is home alone, call the **police** on **999**.

This applies to the public, council staff, partners and outside agencies.

- 3.72 Parents/carers should be informed if a referral is being made except in the circumstances outlined in Section 3.3.
- 3.73 However, inability to inform parents for any reason should not prevent a referral being made. It would then become a joint decision with the Bridge Partnership about how and when the parents should be approached and by whom.
- 3.74 If your concern is about harm or risk of harm from a family member or someone known to the children, you should make a referral to the Bridge Partnership.
- 3.75 If your concern is about harm or risk of harm 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.
- 3.76 If your concern is about harm or risk of harm from an adult in a position of trust (see Section 3.8: Allegations against Adults Who Work with Children).

Information required when making a referral

- 3.77 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 of the child/young person
- 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 the concern.
- 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

- 3.78 You must take the following action after making a referral:
 - Ensure that you keep an accurate record of your concern(s) made at the time.
 - Or if you contacted The Bridge Partnership via phone, fill out an online form at Children's online portal
 - Accurately record the action agreed or that no further action is to be taken and the reasons for this decision.

3.8 Allegations against Adults who work with Children

- 3.81 If you have information which suggests an adult who works with children (in a paid or unpaid capacity) has:
- Behaved in a way that has harmed, or may have harmed, a child;
- Possibly committed a criminal offence against children, or related to a child; or
- Behaved towards a child or children in a way that indicates s/he may pose a risk to children. (Working Together 2018).

You should speak **immediately** with your line manager or designated officer who has responsibility for managing allegations. The senior manager will consult with/make a referral to the LADO (Local Authority Designated Officer) at the Safeguarding Children Unit

3.82 If one of those people is implicated in the concerns you should discuss your concerns directly with the **LADO on 0161 603 4350**

3.9 Record Keeping & Confidentiality

3.91 Not all safeguarding concerns raised will result in a referral to the Bridge Partnership . However ALL safeguarding concerns raised by a member of staff or volunteer at CVS – whether referred to the Bridge Partnership or not - should be

documented A written record should be compiled using the Template for Safeguarding Concerns (a copy of the blank form can be found on Breathe).

This written record should **not** be stored electronically but instead should be printed off and passed to Kirsten Blackwood so that it can be kept confidentially and in a secure place.

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

Information sharing advice for safeguarding practitioners.

3.10 Useful Salford Contacts

The Bridge Partnership can be contacted by telephone on 0161 603 4500.

Emergency Duty Team (EDT) on 0161 794 8888.

Police Public Protection Investigation Unit

• Child Protection: 0161 856 5125 / 5126

• Domestic Violence: 0161 856 5171

We are committed to reviewing our policy and good practice annually		
This policy was last reviewed November 2020		
All amendments approved and accepted by Salford CVS Board of Trustees on 30 th August 2022		
Date for Review: August 2023		
Signed		

Appendix One

Useful Websites & Guidance

Welcome to Salford CVS's Website | Salford CVS

Worried about a child? - Salford City Council

Salford Safeguarding Children Board

Early help strategy,

Early Help Webpages

Support and Safeguarding (formerly Thresholds of need and response),

Local multi-agency policies

Supporting pathways

Safeguarding children | NSPCC

Greater Manchester Safeguarding Children Procedures Manual

NCVO Safeguarding Resources

Government Guidance

What to do if you are worried a Child is Being Abused

What to do if you're worried a child is being abused - Publications - GOV.UK

Working Together 2018

<u>Working together to safeguard children - Publications - GOV.UK</u>

Keeping Children Safe in Education 2018 (from 3rd Sept)

Keeping children safe in education - Publications - GOV.UK

Information Sharing

Information sharing advice for safeguarding practitioners - Publications - GOV.UK

Sending Encrypted Emails

If an organisation sends emails via email client (e.g. Outlook) there is native support for encryption of emails. To enable encryption for email software go to the security settings and turn on email encryption

If an organisation is using webmail (e.g. yahoo, Gmail) this won't be a built in feature. In order to send encrypted emails other software or websites may need to be used, one of the easiest ways is to use a website that allows you to use secret-key encryption. Plugins can also be installed in browsers that allow you to send encrypted webmail.

If full email encryption is not available, email file attachments should be always protected by an approved encryption (password protected) method.

Further info:

http://www.basiccomputerinformation.ca/web-mail-vs-email-clients/

http://www.makeuseof.com/tag/encrypt-your-gmail-hotmail-and-other-webmail-heres-how/

https://support.office.com/en-gb/article/Encrypt-e-mail-messages-84d7e382-5f76-4d71-8705-324489b710a2

http://www.pcworld.com/article/254338/how_to_encrypt_your_email.html

Appendix Two

Salford CVS Policies Linked to this Policy

The following policies are also linked to the Safeguarding Children policies and procedures for Salford CVS. The policies are currently stored on the P drive but will eventually be accessed via the Breathe HR system.

- Lone Working Policy
- Online Safety Policy
- Confidentiality Policy
- Data Protection Policy
- Recruitment Policies (including recruitment of Volunteers)
- Comments Compliments and Complaints Policy
- Whistleblowing policy
- Trustee Recruitment policy
- Photography Policy consent to share
- Bullying & Harassment Policy