

## DCW: Child protection and safeguarding procedures

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Notes:

This document is described as ‘child protection and safeguarding’ procedures to make sure they are accessible for all of our partners, especially as many of the contexts we operate in do not have the linguistic or sign language translation for safeguarding. This document uses the term “children” but the principles and procedures aim to be inclusive and apply equally to the protection of young adults at risk.

These procedures should be read in conjunction with our Child Protection and Safeguarding policy, which sets out our commitment to safeguard children and young adults at risk from harm.

There are separate procedures to be followed for child protection and safeguarding in the UK. These procedures apply specifically to our international work carried out in the name of Deaf Child Worldwide.

The UK Charity Commission requires all organisations working with children to implement safeguards and include a child protection or safeguarding policy. Allegations of abuse, whether founded or unfounded, can destroy an organisation’s reputation and could undermine our entire portfolio of work as well as damage the reputation of the sector as a whole.

The definition of terms in **bold and underlined** can be found in Appendix A.

We would like to acknowledge the following organisations and departments from which we have drawn material to develop this Policy: World Health Organisation, The United Nation Convention on the Rights of the Child (1989), United Nations Convention on the Rights of Disabled Persons (2006), Setting the Standard/ Keeping Children Safe Coalition, The World Association of Sign Language Interpreters, The UK Charity Commission, The UK government, inter-agency guidance on working together to safeguard children (2015) and ChildHope.

## 1. Introduction

- 1.1 Deaf Child Worldwide is the international arm of The National Deaf Children's Society. The Society was set up in 1944 by parents of deaf children and is now the leading charity dedicated to creating a world without barriers for deaf children and young adults at risk.
- 1.2 All deaf children have a right to full and effective participation and inclusion in society. We aim to support all deaf children and young adults at risk and particularly focus on those who most need our support. Deaf Child Worldwide works with partners in developing countries, facilitating work that enables deaf children and young adults at risk to be fully included in their family, education and community life. In all our work we take a holistic family and community based approach.
- 1.3 Our Child Protection and Safeguarding policy sets out our commitment to safeguard **children** and **young adults at risk** from harm. However, it is important to note that the existence of a Child Protection and Safeguarding policy is not sufficient to keep children safe. These procedures detail what is required to implement the policy and to make sure that our trustees, staff, volunteers, interns and others working on our behalf, prioritise children's protection, safeguarding and the **best interests** of the child at all times. A culture where concerns can be raised openly is critical to preventing abuse and protecting deaf children and young adults at risk from **harm**. These procedures addresses all forms of harm to children, including harm which may be caused intentionally or unintentionally, and which may not reach the threshold of significant harm (**abuse**). The procedures and practices contained in this document will be continuously monitored.
- 1.4 The **deaf** children we work with are especially vulnerable to harm, abuse and exploitation, and child abusers seek out organisations with weak communication structures and thrive where secrecy and shame prevail. Any organisation or individual working for the benefit of these children must pay particular attention to the safeguards that are in place to make sure that they do not put any child at risk or cause them harm – either through the deliberate actions of an individual or through perhaps well-intentioned but inappropriate behaviour.
- 1.5 These **child protection** and **safeguarding** procedures do not mandate specific child protection mechanisms in the communities where we support work as we expect all partners to have their own Child Protection/ Safeguarding policies and procedures which reflect the local context and legal framework. We do, however, expect partners to be aware of our policy and to collaborate closely with us in all aspects of child protection and safeguarding. We work closely with partners to make sure that they develop safer organisations and deliver programmes which protect, and promote the wellbeing of the children they work with.
- 1.6 These procedures detail the structures in place to manage child protection and safeguarding, and are split into 3 themes:
  - Prevention: Recruitment and contracting (section 3)
  - Prevention: Awareness and behaviours (section 4)
  - Reporting and response (section 5)Supporting definitions and forms are provided in the appendices.

## 2. Accountability and Management Structure

- 2.1 Everybody has a responsibility to prevent harm and promote the wellbeing of children and those affected by deafness, even though overseeing policy implementation may be assigned to particular individuals. We are accountable for everything we do, both to our partner organisations and to the deaf children and young adults at risk we work with.
- 2.2 Safer organisations require openness, constant monitoring and oversight of practice. The management structure within Deaf Child Worldwide will support this by:
- Making sure that child protection and safeguarding is included within the development of projects and in the monitoring visits conducted by Deaf Child Worldwide's programme managers.
  - Making sure all staff appraisals include feedback from staff on whether they feel they need further training, support or advice on child protection and safeguarding.
  - Appointing a Designated Safeguarding Officer to monitor all child safeguarding.
- 2.3 The designated safeguarding officer (DSO) is responsible for:
- Promoting awareness and implementation of the policy throughout the organisation.
  - Monitoring implementation of the policy and reporting on developments at staff meetings.
  - The development of child protection and safeguarding training resources as required.
  - Maintaining knowledge of best practice and statutory requirements.
  - Acting as a source of support and information for staff on safeguarding issues.
  - Sharing knowledge and information with staff and partners.
  - Making referrals where appropriate.
- 2.4 All representatives of Deaf Child Worldwide have a responsibility to ensure the safety and wellbeing of the children that the organisation comes into contact with and to implement the procedures contained within this document. This includes:
- All Deaf Child Worldwide staff (including in-country staff and long term consultants)
  - All Deaf Child Worldwide volunteers and interns
  - All those acting on behalf of Deaf Child Worldwide, such as other National Deaf Children's Society staff, consultants, interpreters, evaluators, trainers and photographers.
  - All those who visit partners' programmes in the name of Deaf Child Worldwide, such as members of the advisory group, patrons, donors, corporate sponsors, journalists and supporters.
- All these individuals will be expected to read this policy and sign a statement of commitment to adhere to its principles and procedures (included at the end of this document).
- 2.5 In accordance with the UK Charity Commission Guidelines (March 2009<sup>1</sup>), our trustees are responsible for overseeing safeguarding within the organisation to make sure that those

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<sup>1</sup> Charity Commission Guidance (2009). Available at:  
[http://forms.charitycommission.gov.uk/media/90446/safeguarding\\_strategy.pdf](http://forms.charitycommission.gov.uk/media/90446/safeguarding_strategy.pdf)

benefiting from, or working with, the charity are not harmed in any way through contact with it.

2.6 One of the trustees is nominated as safeguarding lead with additional duties including:

- a. To make sure that the National Deaf Children's Society including its international arm Deaf Child Worldwide has a safeguarding policy which is reviewed by the full board at least annually.
- b. To make sure that the National Deaf Children's Society including its international arm Deaf Child Worldwide complies with all legal and good practice requirements in relation to safeguarding, has clear up-to-date procedures and a clear training strategy for staff and volunteers.
- c. To support the senior member of staff responsible for safeguarding and help prepare a suitably anonymised report of any issues for the full Board.
- d. Where appropriate become involved with specific safeguarding issues, for example:
  - Allegations against senior staff
  - Safe recruitment of senior staff
  - Disciplinary proceedings that follow on from safeguarding concerns about members of staff and volunteers
  - Complaints
  - Whistleblowing
  - Safeguarding audits, reviews and inspections – whether internal or external
  - Risk management.

### **3. Prevention: Recruitment and contracting**

#### **Safer recruitment of personnel**

3.1 The term personnel applies to:

- Deaf Child Worldwide and National Deaf Children's Society staff
- In-country staff and long term consultants
- Volunteers and Interns

3.2 Full details of safer recruitment practices are set out in the National Deaf Children's Society Safer Recruitment policy and process. The summary below identifies key points relevant to child protection and safeguarding:

3.3 Prior to interview

- When advertising vacancies, we inform candidates of our Child Protection and Safeguarding policy and that their commitment to this policy is a condition of employment, and include a safeguarding specification within the job description.
- All candidates must declare on the application form whether they have any criminal convictions, spent or unspent. A false declaration that results in employment will render the person liable for dismissal without notice.
- Candidates must explain any gaps in employment history.

### 3.4 During Interviews:

- Specific questions relating to safeguarding and child protection are included in the interview.

### 3.5 Offers of Employment:

- A conditional offer of employment will only be made upon receipt of two satisfactory written references. Acceptable references exclude family members and those who have known the applicant personally for under two years. Referees are made aware that employees may have contact with children and are asked to draw attention to any child protection concerns they may have. Where concerns are indicated we may also contact referees by telephone for further clarification.
- Once the offer of employment has been accepted and references received, a Disclosure and Barring Service (DBS)<sup>2</sup> police check will be initiated. Only the director of international development and human resources department will know the findings of the DBS and only relevant convictions will be taken into account.
- Staff will not be allowed to visit partner programmes until a satisfactory DBS/police check is received.
- In the case of non-UK citizens where DBS or police checks cannot be obtained, we reserve the right to call referees to seek further information in relation to the candidate's practice in relation to children.

### **Freelance and short term consultants**

3.6 On occasion, we will commission consultants or freelance staff to undertake work with partner organisations. This may include journalists, sign language interpreters, photographers, evaluators and trainers. In these circumstances, the following safeguards will be in place:

- All consultants and freelance staff receive the Child Protection and Safeguarding policy as part of the consultant contract which they must read and agree to adhere to.
- All contracts contain a clause requiring adherence to our Child Protection and Safeguarding policy and stating that failure to comply could result in a termination of the contract.
- Where the consultant is expected to have **direct contact** with children or young adults at risk, a DBS check will be completed prior to departure.
- In the case of non-UK citizens where DBS and police checks cannot be obtained, we reserve the right to call referees to seek further information in relation to the candidate's practice in relation to children.
- For all freelance consultants and contractors, a minimum of one reference will be obtained. Where the individual is expected to have extensive direct contact with children or young adults at risk, a second reference will be obtained which specifically explores their suitability to work with children and young adults at risk.

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<sup>2</sup>A search of UK police records and, in relevant cases, barred list information.

## **Incomplete DBS and police checks**

- 3.7 In very rare circumstances where a DBS or police check is incomplete due to time bound deadlines, we will ask for two employer references. We reserve the right to call referees to seek further information in relation to the candidate's suitability to work with children. After completing a risk assessment, the director of international development will decide how to proceed on a case by case basis, taking advice as necessary.

## **Partners**

- 3.8 We expect all partners to have their own child protection and safeguarding policies and procedures. This requirement is set out within our Partnership Agreement and responses to safeguarding questions are mandatory.
- 3.9 A checklist for reviewing Child Protection and Safeguarding policies is provided in Appendix B and forms part of a risk assessment of the partner and those working with or for them.
- 3.10 When new partners do not have their own procedures, we will expect them to develop a child protection policy within six months of becoming a partner and we will support them to do this. Whilst they are developing their own policy, they are required to use our policy in the interim.
- 3.11 All individuals engaged on our partnership projects should be subject to safeguarding checks whether they are already working with the partner at the time the partnership is formed, or are recruited after this date.

## **4. Prevention: training, awareness and code of conduct**

### **Training and awareness**

- 4.1 Deaf Child Worldwide promotes an environment which encourages opportunities for questioning and learning about child protection and safeguarding issues. This includes:

#### For staff, volunteers and interns:

- Within one week of taking up their position, all staff, volunteers and interns will receive a brief introduction to the Child Protection and Safeguarding policy and procedures.
- Child safeguarding training will be given to all staff, volunteers and interns within one month of taking up their position.
- Deaf Child Worldwide staff will be required to sign a statement of commitment to our Child Protection and Safeguarding policy and procedures.
- Safeguarding issues will be discussed in staff appraisals and supervisions to gauge whether further training, support or supervision is needed.
- It is recognised that the topic of child abuse is sensitive and may raise personal issues. Details of available support can be found in Appendix C.
- Staff training needs will be monitored and evaluated regularly by the designated safeguarding officer (DSO) and line manager.



- Annual refresher training.

#### For freelance and short term consultants

- All consultants and freelance staff will receive a briefing prior to departure which includes expectations in regards to child protection and safeguarding. They will be required to sign a statement of commitment to our Child Protection and Safeguarding policy and procedures.
- Whilst on visits, consultants and freelance staff will always be accompanied by a member of staff from either Deaf Child Worldwide or the local partner when in direct contact with children or young adults at risk.
- Where it is not appropriate for a staff member to be present (e.g. where feedback about programme quality is being sought), the consultants/freelance staff will be accompanied by another responsible adult (e.g. teacher, parent etc.).

- 4.2 Any staff member, volunteer, intern or consultant visiting our partner's programmes, will also be expected to familiarise themselves and comply with the partner organisation's child protection/safeguarding policies and procedures. This may be achieved through reading the local child protection/safeguarding policies which we will maintain on file or via a briefing from the head of region, long term in-country consultants or local staff upon arrival.

#### Other visitors to Deaf Child Worldwide

- 4.3 On occasion, we receive requests to visit our programmes from donors, patrons, members from our advisory group and other interested parties. In this circumstance, the partner will ultimately determine whether the visit can take place, when it can happen and what contact with children and young adults at risk is appropriate.

If a visit is agreed, the following safeguards will be put in place:

- The visitor will receive a copy of the Child Protection and Safeguarding policy which they will be asked to read and adhere to at all times.
- The visitor will receive a briefing from the DSO or member of the programmes team prior to departure which includes expectations in regards to child protection and safeguarding.
- The visitor will sign a statement of commitment to our Child Protection and Safeguarding policy and procedures.
- The visitor will be accompanied by an employed staff member from either Deaf Child Worldwide or the partner organisation at all times whilst with children or young adults at risk.

Where we are notified of, but do not directly facilitate a visit to a partner (e.g. a donor providing grants directly to the partner wishes to visit), the responsibility for ensuring all relevant safeguards are in place will rest with the partner organisation.

In supporting partners to develop and strengthen their child protection procedures, we will stress the importance of implementing safeguards with all visitors irrespective of their status, the funding relationship, or the individual's celebrity.

## Supporting partners

- 4.4 Discussions with partners regarding their child protection and safeguarding procedures and practice are ongoing. This allows us and the partner to identify areas where we can offer support and capacity development. Progress is monitored on our visits and documented in quarterly and annual reports. In addition, partners are asked to provide us with copies of their latest child protection policies, quarterly, and annual reports regarding child protection cases that have been dealt with during the year.
- 4.5 In the event of persistent poor practice or abuse within a particular organisation, we may terminate the partnership relationship. However, we will always aim to work alongside partners to improve practice and address concerns before considering a termination of the partnership relationship.

## **Code of conduct**

- 4.6 The following expected behaviours apply to all staff and anyone acting on our behalf with the best interest of the child as the primary consideration.
- 4.7 Be Prepared
- Read the child protection and/or safeguarding protocol of the local partner organisation before arriving on a visit.
  - Ensure that you know who the designated child protection or safeguarding officer is within the partner organisation and if this role does not exist, who you should go to with any concerns.
  - Make an attempt to understand local norms, particularly those around contact between children and adults.
  - Communicate activity plans with the partner organisation and take their advice about where, when and how to conduct the activities in a safe manner and in a way that puts the children at ease.
  - Ensure that you take and wear clothing that is appropriate to the local culture and respects local norms.
- 4.8 Avoid being in a risky situation
- Plan and organise your work, taking into account and minimising potential risks.
  - Follow the two adult rule and avoid being alone with a child or young person where no-one else can see what you are doing.
  - DO NOT condone or participate in behaviour that is illegal and/or unsafe.
  - DO NOT believe “it could never happen to me”.
  - Never take a child to your home, hotel or to other private spaces.

#### 4.9 Your behaviour

- DO NOT initiate any type of physical contact with a child.
- If you are taking notes or recording the session, explain to the group what you are doing and how the information will be used.
- Always gain consent before taking photographs of a child, see Communication Guidelines for further guidance and Consent Form in Appendix D.
- DO NOT use personal phones, cameras or computers to store information, images or film of children or young people at risk. Always use Deaf Child Worldwide encrypted phones, computers or cameras for collecting or storing personal data.
- Always provide an example of the good conduct which you wish others to follow.
- DO NOT act in ways that are, or could be interpreted as, inappropriate or sexually provocative (e.g. winking, stroking etc.)
- DO NOT give assistance in aspects of personal care that a child could do for themselves (e.g. dressing, bathing etc.)
- NEVER hit or physically chastise a child (including using physical restraint to contain behaviour).
- NEVER engage in or allow sexually provocative games with children.
- NEVER act or use language which could in any way shame, humiliate or degrade a child.

#### 4.10 Interactions with children

- Be aware that there are power differences between adults and children.
- Communicate clearly what you intend to do at the start of any activity and explain exactly what you plan to do with any information shared.
- Give children the opportunity to communicate at their own pace and create an atmosphere where they can express themselves freely in their own way.
- Treat all children equally without discrimination on the basis of age, gender, disability, ethnicity, religion etc.
- Ensure that children are aware of their right NOT to participate or to withdraw from the activity at any time.
- DO NOT encourage close attachments with individual children – your visit is temporary and you cannot maintain contact beyond the visit.
- DO NOT show favouritism or spend excessive time with one child, treat everyone equally.
- DO NOT offer gifts to individual children. If providing a gift is appropriate, it should be given to the group and with the prior agreement of the partner organization.
- NEVER take or share personal contact information with children or young adults. Contact information refers telephone or mobile number, email, skype or social media addresses.

#### 4.11 Interactions for Sign Language interpreters

We will attempt to use a Sign Language Interpreter who is the same gender as the child. This is however limited to locality and it has been recognised by the World Health Organisation<sup>3</sup> that there is a global disparity of deaf persons compared to interpreters, especially trained and qualified interpreters. When interpreting:

- Adhere to confidential communication: Keep the assignment and child's information private. You must respect the confidential nature of any information gained in the course of your professional activity.
- Remain impartial: It is not the interpreter's role to counsel, advise, and judge or give personal opinions regarding the child.
- When signing, interpreters should use language accessible to the child. Interpreters must show a commitment to accurately translating the information being shared with them.
- Respect the child and keep professional boundaries. Boundaries create a division between work and personal life. Boundaries alter in different cultures and religions. We must be aware of the limits of our work and behave in a way that is safe towards beneficiaries and represents Deaf Child Worldwide respectfully.
- Avoid being alone with a child or young adult where no other adult can see what you are doing.

#### 4.12 Personal use of social networks

Social media networks refer to computer and mobile phone mediated technologies that facilitate the creation and sharing of information, with personal social networks.

Social media platforms include, but are not limited to:

- blogs (e.g. personal blogs)
- online discussion forums (e.g. BBC, Guardian, Daily Mail, Third Sector)
- collaborative spaces (e.g. Wikipedia, shared Google Docs)
- media sharing services (e.g. YouTube, Flickr, Pinterest)
- social networking systems (e.g. Facebook, LinkedIn)
- micro blogging applications (e.g. Twitter)
- online gaming
- mobile phone applications (e.g. Whatsapp and Snapchat)

Full details of acceptable and unacceptable use of social media are set out in the National Deaf Children's Society Social Media policy. The summary below identifies key points relevant to child protection and safeguarding:

- a. Staff and volunteers must never post images or stories about beneficiaries via personal social media accounts. **Informed consent** for images and stories is given to Deaf Child Worldwide as an organisation and not to any individual for personal use.

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<sup>3</sup> Olusanya B, Neumann K, Saunders J. The global burden of disabling hearing impairment: a call to action, 2014. *Bulletin of the World Health Organization* 2014; 92: 367-373. <http://dx.doi.org/10.2471/BLT.13.128728>

- b. Avoid befriending online, or taking personal contact details of beneficiaries. This includes children, young people, community members, parents and partners. Communication between children and young people and Deaf Child Worldwide staff by whatever method must take place within clear and explicit boundaries.
- c. Staff must not disclose personal data about our supporters, members or staff and must always act in accordance with the UK Data Protection Act and all other relevant legislation.
- d. Inform the designated safeguarding officer or director of international development if you observe or read uploaded content from another staff member, volunteer or young person which breaches the Child Protection and Safeguarding policy or these procedures.

### **Ramifications of misconduct**

4.13 Where it has been found that representatives of Deaf Child Worldwide have breached any of these procedures, immediate action will be taken. In serious cases this may include:

- Staff – disciplinary action and/or dismissal
- Trustees – termination of Board membership, reporting to Charity Commission
- Volunteers and interns – termination of their relationship with Deaf Child Worldwide
- Consultants, trainers or sub-contractors – termination of contract
- Local partners – withdrawal of funding/support and/or ending of relationship with Deaf Child Worldwide.

4.14 Acts of a criminal nature will be referred to the police and/or Children’s Services and may result in a criminal investigation and conviction.

4.15 See Section 5 for more detail on this process and Appendix C for contact details.

## **5. Reporting and response procedures**

5.1 Deaf Child Worldwide works through partner organisations and effective response and reaction protocols depend on the collaboration and shared understanding between Deaf Child Worldwide and our partners. For this reason, it is important that representatives of Deaf Child Worldwide are aware of local procedures so that action can be taken promptly.

5.2 Irrespective of the location in which the concerns arise, representatives of Deaf Child Worldwide are obligated to report any concerns about alleged or suspected harm to the director of international development or DSO immediately. In the event that the concerns relate to the Director, the report must be made to the chief executive of the National Deaf Children’s Society.

5.3 All concerns should be reported within **24 hours**, allowing for time differences in different countries. ***Failure to report any observations / reports you have received, however uncertain, could result in disciplinary action.*** All concerns should be recorded using the safeguarding reporting forms (Appendix E: Cause for Concern Form)

5.4 In addressing the concern, representatives of Deaf Child Worldwide will adhere to the following principles:

- **The best interest of the child:** Where any concern is raised, ensuring the safety and wellbeing of the child must be the primary consideration (see Appendix F).
- **Equal right to protection:** The procedures outlined below relate to harm caused to any child regardless of whether they are a beneficiary of Deaf Child Worldwide or our partner organisations, and irrespective of age, religion, gender, race or any other factor.
- **Organisational Responsibility:** The responsibility for decisions and actions rests with Deaf Child Worldwide as an organisation and not with any individual staff member. Staff and representatives must not act in isolation but must consult with the designated individuals.
- **Confidentiality:** Deaf Children and young adults at risk have the right to privacy. Details of the concern should be shared with the minimum number of people necessary in order to ensure the safety of the child. Records of child protection concerns will be kept securely and access limited to the director and DSO. Access by other individuals will require permission from the DSO.
- **Respect for local laws and customs:** Deaf Child Worldwide works in diverse contexts and suspected harm to children must be responded to and investigated in the context of local laws and customs.
- **Systemic:** Every child exists within a wider ecological system which includes their family, peers, community, teachers, NGOs, police and other state agencies. Children are best protected by recognising and building on the strengths and capabilities at every layer of this system rather than working with the child in isolation of their context.
- **Defensible Decision Making:** It is not possible for any procedure to cover every eventuality. In all circumstances, staff and representatives are expected to consult in order that they may make fair and defensible decisions that are appropriate and safeguard the welfare of the child.
- **Do No Harm:** This means ensuring that actions and interventions designed to support the child (and their family) do not expose them to further harm or risk.

### Disclosures from children

5.5 Children experience multiple barriers to disclosing abuse and this is further exacerbated for deaf children<sup>4</sup>. Many fear that they will not be believed or are concerned about the consequences that may follow from communicating abuse. If a child feels able to communicate their experiences to you, it is essential this is handled sensitively and professionally.

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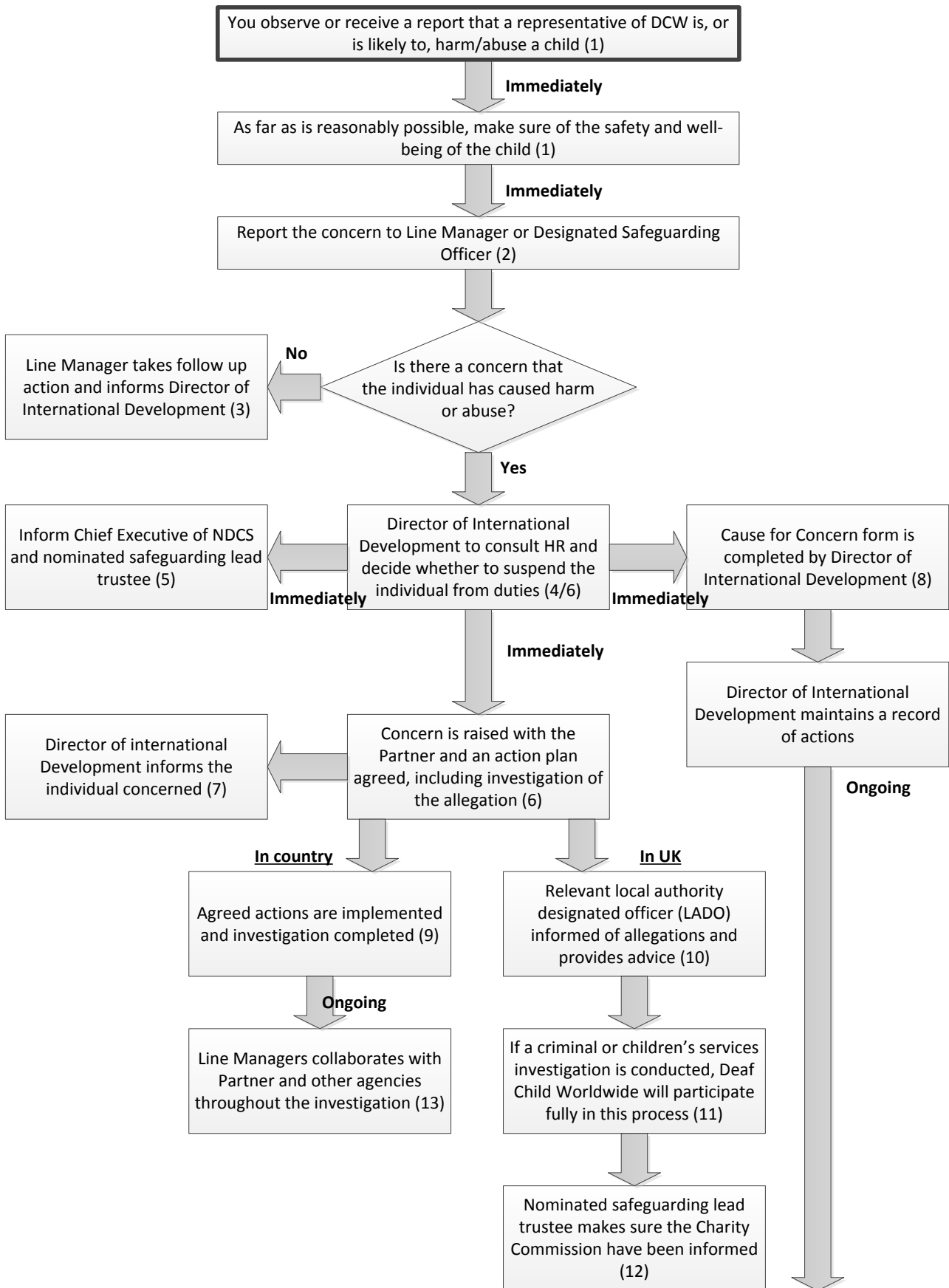
<sup>4</sup> NSPCC, (March 2015). Deaf and disabled children talking about child protection. Available at: <https://www.nspcc.org.uk/globalassets/documents/research-reports/deaf-disabled-children-talking-about-child-protection.pdf>

5.6 The following guidelines should be followed:

- Communication barriers may prevent a deaf child being properly understood and provision must be made for deaf children to communicate and be listened to when they or others report abuse.
- Accept what the child communicates and re-assure them that you will take what they are communicating seriously. Never minimise a child's concerns.
- Reassure the child that they have done the right thing by informing you.
- Do not promise secrecy to the child. Explain that you have to share the information they have provided to keep them and other children safe but that you will listen to their wishes about who is told and when this happens.
- Listen carefully and calmly to them. Let the child communicate freely but do not press for information, allow the child to communicate at his/her own pace.
- Ask open questions and be careful to not influence what they are communicating by asking leading questions.
- Clarify your understanding throughout so that you will be able to later report the incident correctly. However, try not to repeat the same questions to the child, as this gives the child the impression that they did not give correct information the first time and that they are not fully believed.
- Ask the child what would help them feel safe. Include this within any later discussions where protective actions are decided.
- Let the child know what you are going to do next and that they will be kept informed of what is going to happen happens.
- Do not allow personal doubt to prevent you from reporting the allegation.

**Procedure A: Alleged harm caused, or likely to be caused to a child by a representative of DCW**

Note: Numbers within the flow chart correspond with the steps below





## Steps for Procedure A

1. If you observe or receive reports that a **representative of Deaf Child Worldwide** is behaving in a way that is or is likely to cause harm to a child, your first responsibility is to ensure the safety of the child. This does not imply a responsibility to intervene directly as this could cause more harm and may also put you at risk. Rather, it implies a responsibility to consider the safety of the child before all other actions and take all reasonable action possible to ensure their wellbeing.

2. The concern must be reported immediately to your line manager or DSO.

If your line manager is unavailable or your allegation is regarding your line manager, the matter should be reported to the director of international development.

If the director of international development is unavailable, or your concern relates to the director, it should be raised with the chief executive of the National Deaf Children's Society.

Where necessary, the external safeguarding advisor may be contacted for guidance on how to manage and respond to the situation.

3. Where the concern represents a minor breach of the child protection and safeguarding policy, the matter will normally be managed by the line manager who will inform the director of international development of all actions taken.

4. Where actual harm or abuse to a child is suspected, the director of international development and HR manager will make a decision whether to suspend the individual from duties.

In most cases, it is expected that a permanent member of staff will be suspended on full pay pending an investigation.

This is not a presumption of guilt but a measure to protect the individual and all others involved.

5. The director of international development will immediately inform the chief executive of the National Deaf Children's Society and the trustee nominated safeguarding lead.

6. The director of international development and the director of partner organisation will make decisions in regards to:

- Actions to ensure the safety and wellbeing of the child
- Actions to prevent further harm being caused to other children
- How the matter will be investigated and whether the case needs to be reported to the police or other authorities
- Actions may involve the line manager/director going to support partner organisation.

The nature of the investigation will depend on the nature of the concerns, local procedures and legal obligations. Given that the incident occurred outside the UK, it is likely that the partner organisation will take the lead in organising any investigation but all actions will be planned and executed in close collaboration with Deaf Child Worldwide. Where necessary, Deaf Child Worldwide may commission external expertise to support this process.

7. Following the discussion with the partner organisation, the director will contact the individual who is subject to the allegation. They will be given brief details of the concerns that have been raised and how the matter is going to be investigated.

UK staff: Where possible, arrangements should be made for the individual to return to the UK but, where a criminal act is alleged, they may be required to remain in country whilst the

police investigation is completed. The director of international development will act as the point of contact for the suspended individual. Contact with other staff or those associated with the organisation will not be permitted. All access to organisational data will be blocked during the course of the investigation.

In-country staff: The director of international development will act as the point of contact for the suspended individual. Contact with other staff, partners or those associated with the organisation will not be permitted. All access to organisational data will be blocked during the course of the investigation. UK Individuals can also access additional support (see Appendix C).

8. All actions must be recorded on a Cause for Concern form (Appendix E) immediately. This should be completed by the director of international development who will be responsible for updating the form with all subsequent actions. The record will be maintained on the individual's personnel file and access limited to the director and HR department.
9. The director of international development will remain in close contact with the partner organisation and all other relevant agencies throughout the investigation process. Deaf Child Worldwide will seek to ensure that the investigation is thorough but also that it is completed as promptly as possible.
10. Where there are reasonable grounds to suspect that harm or abuse has occurred and the individual is a UK resident, the matter must also be reported to the local authority designated officer (LADO)/ Local Safeguarding Children's Board (LSCB)<sup>5</sup> in the area where the individual lives in the UK (director and/or HR manager). The LADO/LSCB will advise whether Children's Services or the police will need to take action in regards to the allegation and whether any further investigation is required. They will also provide advice regarding referrals to the police and Disclosure and Barring Service (DBS).
11. If a criminal or children's services investigation is conducted, Deaf Child Worldwide will participate fully in this process.
12. The trustee safeguarding lead must make sure that the incident is reported to the UK Charity Commission<sup>6</sup>.
13. Deaf Child Worldwide will continue collaborating and liaising with the partner on agreed actions, until the case is closed. Where action or agreed plan is not followed this will be

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<sup>5</sup> Working together to Safeguard Children (2015)

For more details see Working together to Safeguard Children (2015), pg.54. Available at:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/592101/Working\\_Together\\_to\\_Safeguard\\_Children\\_20170213.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/592101/Working_Together_to_Safeguard_Children_20170213.pdf)

<sup>6</sup> The Charity Commission must be informed of:

- Any incident where the beneficiaries of your charity have been or are being abused or mistreated while under the care of your charity or by someone connected with your charity such as a trustee, member of staff or volunteers
- Any incident where someone has been abused or mistreated and this is connected with the activities of the charity
- Any allegations have been made that such an incident may have happened, regardless of when the alleged abuse or mistreatment took place
- Where there are grounds to suspect that such an incident may have occurred

For more details see the Charity Commission (2013) Strategy for Dealing with Safeguarding Vulnerable Groups including Children Issues in Charities. Available at:

[www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/471896/safeguarding\\_strategy.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/471896/safeguarding_strategy.pdf)

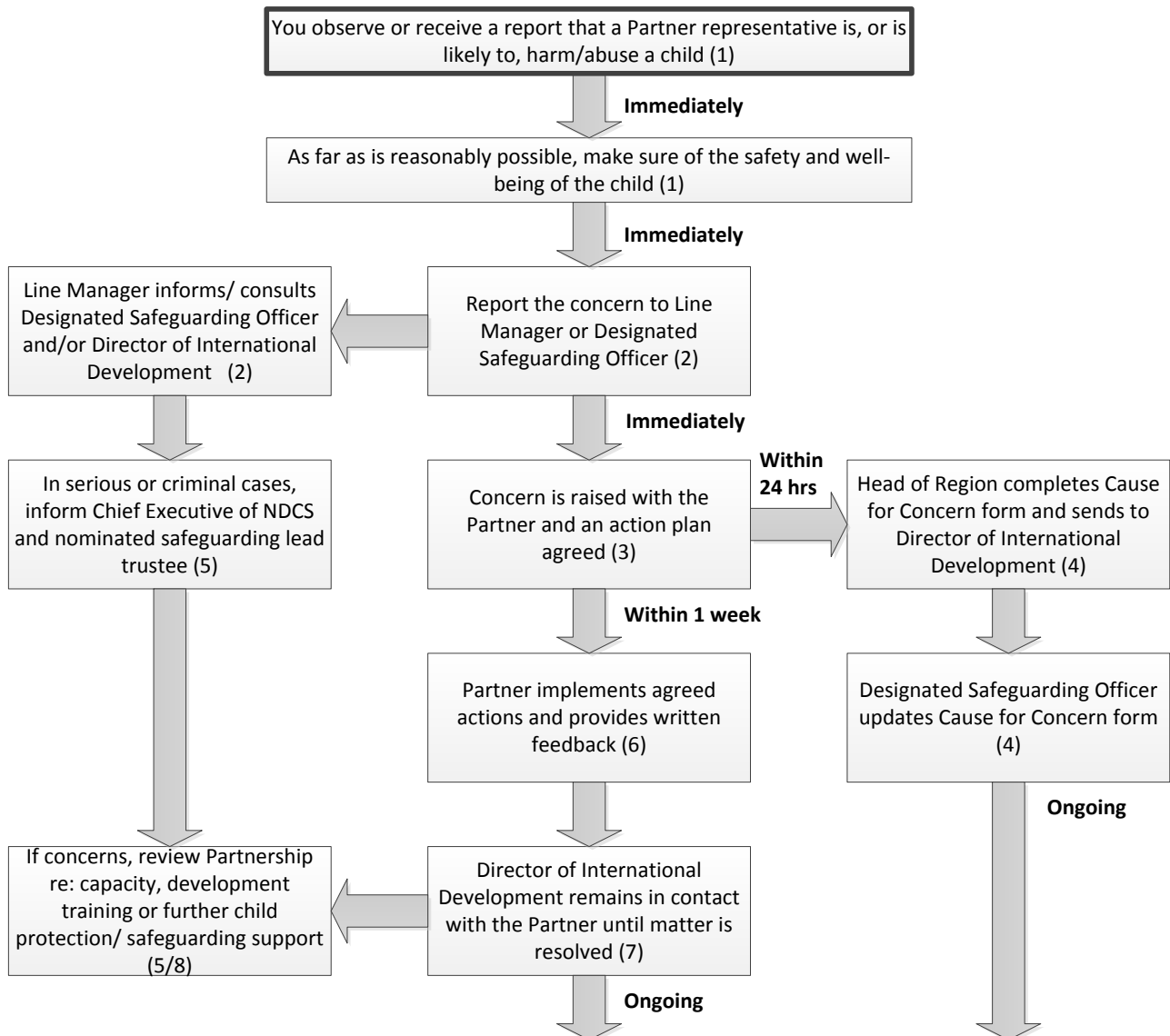
discussed and the partnership will be reviewed.

In addition to maintaining the confidentiality of the child, the confidentiality of the individual who is subject to the allegation must also be maintained. Staff will not be informed that the individual is suspended but will simply be told that they are unavailable for work. This aims to prevent any difficulties should the allegation be proven to be unfounded.

Although it is important that the DSO is able to maintain an overview of protection cases and safeguarding issues within the organisation, sharing details of allegations against colleagues or managers could place the DSO and the individual concerned in a difficult or compromising situation. For these reasons, the DSO will not be party to discussions regarding employed members of staff, interns or trustees.

## Procedure B: Alleged harm caused, or likely to be caused to a child by a partner representative

Note: Numbers within the flow chart correspond with the steps below



### Steps for Procedure B

1. If you observe or receive reports that a **representative of a partner organisation** is behaving in a way that is or is likely to cause harm to a child, your first responsibility is to ensure the safety of the child. This does not imply a responsibility to intervene directly as this could cause more harm and may also put you at risk. Rather, it implies a responsibility to consider the safety of the child before all other actions and take all reasonable action possible to ensure their well-being.
2. The concern must be reported immediately to your line manager or DSO.  
 If your line manager, or the DSO is unavailable the matter should be reported to the director of international development.  
 If the director of international development is unavailable it should be raised with the chief executive of the National Deaf Children's Society.

Where necessary, the director may choose to consult with the external safeguarding advisor for guidance on how to manage and respond to the situation.

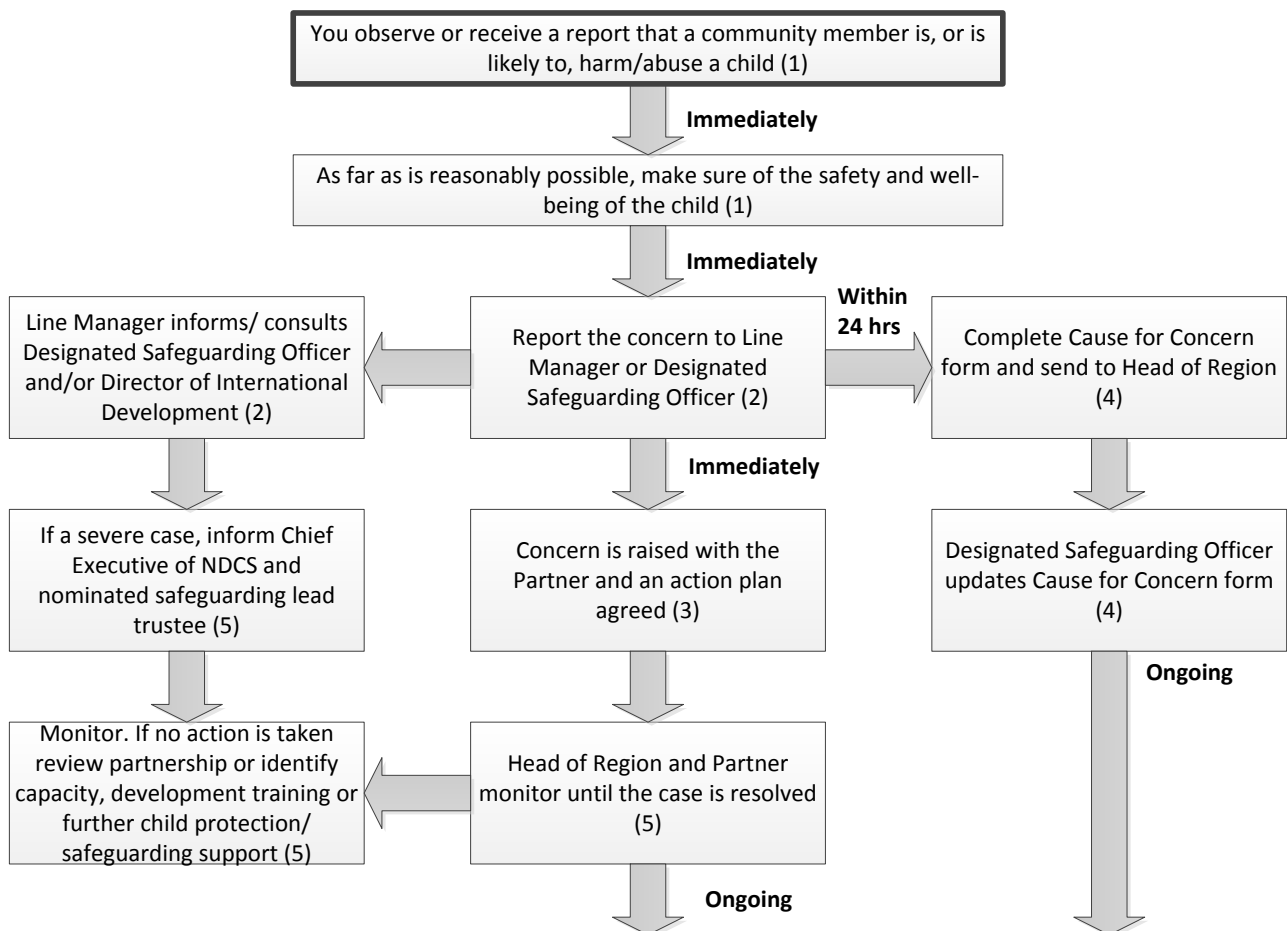
3. The partner organisation should then be informed immediately and decisions must be taken in regards to:
  - Actions to ensure the safety and wellbeing of the child
  - Actions to prevent further harm being caused to other children (including, in the case of employed staff, whether to suspend the person from duties)
  - How the matter will be investigated and whether the case needs to be reported to the police or other authorities

It is important that the partner takes lead responsibility in deciding the actions taken as they will be more familiar with the legal and social context in which the concern has arisen.

4. The decisions should be reported back to the head of region and a Cause for Concern form (Appendix C) completed within 24 hours. This should be sent to the director of international development who will share it with the DSO. The DSO is responsible for updating the form with all subsequent actions.
5. In serious or criminal cases, the chief executive of the National Deaf Children's Society and trustee nominated safeguarding lead should also be informed and consideration given to reviewing the partnership.
6. The partner will follow up agreed actions and will be asked to provide written confirmation of the actions taken within 1 week of the concern being reported, or sooner if appropriate
7. The director of international development or the head of region will remain in contact with the partner until the matter has been investigated and satisfactorily resolved. In some cases, it may be appropriate for the director or the head of region to visit the partner to support this process.
8. If Deaf Child Worldwide is concerned that the partner is failing or refusing to address a child protection or safeguarding concern, the director will raise this with the partner's director or Trustee Board, where appropriate. If this is insufficient to resolve the issue, DCW may review the partnership.

## Procedure C: Abuse to children occurring within the community and perpetrated by individuals not associated with either Deaf Child Worldwide or partner organisations

Note: Numbers within the flow chart correspond with the steps below



### Steps for Procedure C

Through their work, representatives of Deaf Child Worldwide may also encounter abuse of children within the community by **individuals unconnected to either Deaf Child Worldwide or any of our partner organisations representatives**. Although intervention in such cases presents additional complexities, the organisation has a duty to ensure the protection of all children regardless of their relationship with the work of Deaf Child Worldwide.

1. If you observe or receive reports that a child is suffering or likely to suffer harm or abuse, your first responsibility is to ensure the safety of the child. This does not imply a responsibility to intervene directly as this could cause more harm and may also put you at risk. Rather, it implies a responsibility to consider the safety of the child before all other actions and take all reasonable action possible to ensure their well-being.
2. The concern must be reported immediately to your line manager or DSO.

If your line manager, or DSO, is unavailable the matter should be reported to the director of international development.

Where necessary, the director of international development may choose to consult with the external safeguarding advisor for guidance on how to manage and respond to the situation.

3. The partner organisation should then be informed immediately in order to identify the most appropriate agency to follow up the concerns. In the majority of instances, this will involve a referral to the local welfare agencies or to the police. However, in some circumstances this may place the child at additional risk and alternative community based protections may need to be sought.
4. A Cause for Concern form (Appendix E) completed within 24 hours. This should be sent to the head of region who will share it with the director of international development and DSO. The DSO is responsible for updating the form with all subsequent actions.
5. Head of Region and partner monitor the case until the case is resolved. Severe cases will be reported to the chief executive of the National Deaf Children's Society and the trustee nominated safeguarding lead. In instances where no action is taken by the partner, the partnership will be reviewed and/or actions reviewed to ensure a "do no harm" approach is taken to safeguard the child.

## Deaf Child Worldwide Statement of Commitment to Safeguarding

Deaf Child Worldwide

Statement of Commitment to Safeguarding

I, \_\_\_\_\_ [name], have read and understood the National Deaf Children's Society and Deaf Child Worldwide's Child Protection and Safeguarding Policy.

I agree with the principles contained therein and agree to implement and promote the procedures and practices contained within this document while working or associated with Deaf Child Worldwide.

I understand that failure to comply could result in:

- Employed Staff/ long term consultants and interns – disciplinary action
- Freelance Staff/ Contractors – termination of contract
- Trustees – termination of Board membership
- Volunteers – ending the relationship with Deaf Child Worldwide
- Partners – withdrawal of funding/support and ending of the relationship

\_\_\_\_\_  
**(Print name)**

\_\_\_\_\_  
**(Job title / role)**

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**



## Appendix A: Definitions

The following definitions are used in these procedures (listed in the order they appear):

**Children:** Although we recognise that the legal definition of a child varies in different countries, for the purpose of this policy children are defined as all those less than 18 years of age in accordance with the UN Convention on the Rights of the Child<sup>7</sup>.

**Young Adults at Risk:** Some of our programmes and partners work with individuals aged 18-25 years. A young adult at risk, for purposes of this policy, is any young person aged 18-25 who may be at additional risk or in need of support due to mental health problems, learning disability, physical disability or other reasons which put them at increased risk of harm and abuse. This policy aims to be inclusive of both children and young adults at risk as we believe that we have a duty of care for both.

**Best Interests:** Article 3 of the UN Convention on the Rights of the Child establishes the best interests of a child as a primary consideration in all actions affecting children. Decisions that affect children should be made based on consideration of their physical, emotional and psychological well-being and the need to prevent harm to them or other children. In assessing what is a child's best interests, the child's views must be given due consideration in accordance with their age and understanding (Refer to Appendix F for guidance on how to assess the best interests of a child).

**Harm:** The following definitions of Harm and Abuse reflect the sub-categories provided by the World Health Organisation and are based on a review of definitions in different countries across the world. However, it is important to note that definitions will vary from country to country and it is essential that the Child Protection and/or Safeguarding Policies of individual partners identify the legal definitions in the country in which they operate as these will determine the parameters of protection that can be expected from the police and other welfare agencies.

- Physical Harm – Actual or attempted physical injury of a child inflicted intentionally or knowingly not prevented. This includes, but is not restricted to, punching, slapping, biting, burning, strangling, poisoning, drowning and smothering.
- Sexual Harm – The involvement of a child in sexual activity that he or she does not fully comprehend, or for which the child is not developmentally prepared for and is unable to give informed consent to. This includes direct sexual contact through kissing, touching and penetration as well as encouraging children to witness pornography or intercourse. It also includes the sexual exploitation of children through prostitution, trafficking and grooming with harmful intentions.
- Emotional Harm – The persistent failure to provide for the child's basic emotional needs to such a severe extent that it is harmful to the emotional development of the child. This includes repeatedly ignoring or rejecting a child, causing the child to feel frightened and in danger, isolating the child from social contact, and degrading and humiliating treatment.
- Neglect – The persistent failure to provide for the child's essential needs where there is the means to do so, to the extent that impairment to the child's physical health and development is likely. This includes the failure to provide appropriate clothing, food or shelter; failure to

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<sup>7</sup> UNCRC (1989) Guiding Principles. Available at: [https://www.unicef.org/crc/files/Guiding\\_Principles.pdf](https://www.unicef.org/crc/files/Guiding_Principles.pdf)

adequately supervise a child and protect them from harm; failure to access appropriate medical care or treatment.

- Exploitation – The physical, mental or emotional abuse or neglect of a child for financial or other benefit. This includes commercial sexual exploitation, child trafficking, child marriage and child labour.

**Abuse:** Child abuse, sometimes also referred to as ‘child maltreatment’, is defined as all forms of physical and/or emotional ill-treatment, sexual abuse, neglect, commercial or other exploitation resulting in actual or potential harm to the child’s health, survival, development or dignity<sup>8</sup>. Abuse is harm which is so severe or persistent that it is deemed “significant” and is likely to have a lasting effect on the health or development of the child.

- Peer-to-Peer Abuse: Historically, definitions of abuse have been restricted to harm inflicted by an adult. There is increasing recognition, however, that abuse can and does occur within peer to peer relationships. Bullying is well-recognised internationally but peer on peer abuse can include every type of harm described above, including serious physical and sexual harm.

**Deaf:** We use the term ‘deaf’ to refer to all levels of hearing loss in children and young people, including a partial, total or temporary loss of hearing. This includes those who may describe themselves as having a ‘hearing loss’, ‘hearing impairment’ or as ‘deaf’, and includes children who have glue ear.

**Child protection:** refers to the actions taken to protect children who are at immediate risk of harm. Whilst this document sets out clear response procedures which must be followed when harm or abuse is suspected, this document also includes wider measures aimed at preventing harm, both direct and indirect, and promoting wellbeing.

**Safeguarding** can be defined as:

- Protecting children from harm and maltreatment
- Preventing harm which could result in the impairment of children's health or development
- Promoting the welfare of children and enabling them to achieve the best outcomes<sup>9</sup>

**Direct contact:** Being in the physical presence of a child or children in the context of the organisation’s work, whether contact is occasional or regular, short or long term.

- Indirect contact with children includes, but is not limited to, having access to information on children in the context of the organisation’s work, such as children’s names, locations (addresses of individuals or projects), photographs and case studies. It also includes organisations which fund direct work with children as this also has an impact on children, and therefore confers a safeguarding responsibility upon donor organisations.

**Informed consent:** Making sure that consent is informed involves providing children with the facts, implications and future consequences of any action affecting them. This should be done in a manner appropriate to the child’s age and understanding. This includes, but is not restricted to, making sure that children understand the ways that their personal information and/or images will

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<sup>8</sup> World Report on Violence and Health, WHO 1999 and 2002.

<sup>9</sup> Adapted from the definition in Department for Education (2015) Working Together to Safeguard Children

be used and that they give consent to be involved in project activities (refer to our communication guidelines for further information and see Appendix D for Consent Form). Particular care needs to be taken when obtaining consent from deaf children and children, to ensure their full understanding and consent.

## Appendix B: Checklist for Reviewing Child Protection and Safeguarding Policies

BASIC DETAILS			
NAME OF ORGANISATION		COUNTRY	
REVIEW COMPLETED BY		DATE	
CRITERIA	A	FULLY IN PLACE	
	B	PARTIALLY IN PLACE	
	C	NOT IN PLACE	
BASIC PRINCIPLES Notes:			
The organisation has a written Child Protection or Safeguarding Policy			
The policy reflects the principles of UNCRC (Non-discrimination; Best Interests of the Child)			
DEFINITIONS			
The policy includes a definition of 'child' (and 'young people')			
The policy includes a definition of the different forms of harm and abuse			
The policy includes reference to definitions of harm and abuse within national legislation			
SCOPE OF THE POLICY			
The policy covers all staff, volunteers, interns, consultants			
The policy includes safeguards for Sign Language Interpreters			

The policy includes safeguards for visitors to the organisation's programmes		
<b>ROLES and RESPONSIBILITIES</b>		
The policy clearly identifies who staff can contact with concerns or for advice on CP issues (e.g. CPO)		
The policy clearly describes the responsibilities of managers, directors and trustees in overseeing safe practice		
<b>HUMAN RESOURCES</b>		
The policy describes safeguards for the recruitment of staff (JDs, reference checks etc.)		
The policy describes safeguards for the recruitment of volunteers and interns and sign language interpreters		
The policy includes guidelines regarding training and support to staff		
The policy includes a Code of Conduct outlining appropriate behaviour for staff, volunteers, interns and sign language interpreters		
The policy includes information on sanctions for misconduct		
<b>REPORTING PROCEDURES</b>		
The policy includes a clear procedure for reporting concerns		

The procedure provides information on what action should be taken, when and by whom		
The procedure includes guidance on how and where to document concerns		
The policy includes guidance on confidentiality		
<b>MEDIA and COMMUNICATIONS</b>		
The policy includes guidance on the use of photos and case studies		
The policy includes a procedure for gaining informed consent for the use of images and personal information		
The policy includes guidance on the use of information technology, social media and mobile phones		
<b>DISSEMINATION and REVIEW</b>		
The policy is endorsed by the relevant management committee		
The policy is translated into local languages and shared widely		
A simplified version of the policy is available or shared with children		
The policy is reviewed at least every 3 years		

## Appendix C: Key contacts

### **Deaf Child Worldwide Designated Safeguarding Officer**

Jo Cowan

Office: +44 (0)207 0140 529

E-mail: Jo.cowan@deafchildworldwide.org

### **Director of International Development**

Joanna Clark

Office: +44 (0)20 7549 0462

E-mail: Joanna.clark@deafchildworldwide.org

### **National Deaf Children's Society Designated Safeguarding Manager**

Rachael Gatesman

Office: +44 (0)20 7014 1196

Email: Rachael.gatesman@ndcs.org.uk

### **Confidential safeguarding email**

Confidential Safeguarding

Email: safeguarding@ndcs.org.uk

### **Confidential support for employees in the UK**

Employee Assistance Programme

Office: 0800 116 4368

[www.lifestyleaction.net](http://www.lifestyleaction.net) (for instant messaging)

### **Trustee safeguarding lead**

Name: Lisa Capper

### **External safeguarding advisor**

Name: Sir Roger Singleton

### **Useful external agencies**

#### **CHARITY COMMISSION**

Reporting serious incidents and source of guidance.

Helpline: 0300 0669197 (available 10am to 12pm and 1pm to 3pm, Monday to Friday)

Email: [rsi@charitycommission.gsi.gov.uk](mailto:rsi@charitycommission.gsi.gov.uk)

Website: [www.gov.uk/government/organisations/charity-commission](http://www.gov.uk/government/organisations/charity-commission)

#### **CHILDREN and FAMILIES ACROSS BORDERS**

Free and confidential. Advice and Information helpline for enquiries concerning children and family welfare matters and across international borders.

Tel: 0207 735 8941

E-mail: [info@cfab.org.uk](mailto:info@cfab.org.uk)

Website: [www.cfab.org.uk](http://www.cfab.org.uk)

## **Support and advice available in the UK**

### **NSPCC HELPLINE**

To report concerns or get advice and support regarding safeguarding based. Only works on UK based cases. Open 24hrs a day, 365 days a year

Tel: 0808 800 5000 Text: 88858

E-mail: [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

Website: [www.nspcc.org.uk/reportconcern](http://www.nspcc.org.uk/reportconcern)

### **CHILDLINE**

Confidential counselling and advice for children in the UK

Tel: 0800 11 11

Website: [www.childline.org.uk](http://www.childline.org.uk)

## **Support for Deaf Child Worldwide staff working in the UK**

### **FACT**

A support organisation for innocent victims of wrongful allegations of abuse in a work setting (UK only).

Tel: 0843 2892 016

Email: [sec@fact.org](mailto:sec@fact.org)

Website: [www.factuk.org](http://www.factuk.org)

### **UNISON**

Public service Union (including charity workers). Provides legal and work related support to its members.

Tel: 0800 085 7857; Text Talk: 0870 240 5152; Type Talk: 0800 096 7968 (Mon-Friday 6am till Midnight; Sat 9am-4pm)

Email enquiries: [www.unison.org.uk/get-help/online-enquiries](http://www.unison.org.uk/get-help/online-enquiries)

Website: [www.unison.org.uk](http://www.unison.org.uk)





## Deaf Child Worldwide Consent Form (English)

Staff should help children to complete the consent form and ensure they understand how their story, image or video will be used



My name is .....

My age is .....



Someone has explained to me that Deaf Child Worldwide works with deaf children and young people all over world. They work with ..... (name of partner) to support children here in ..... (name of country).

I understand that Deaf Child Worldwide will use/share my:



Stories



Photos

Videos (tick ✓ as appropriate)

so that people in other countries can understand the problems deaf children face and to ask for their support to make things better.



I understand that this might appear on Deaf Child Worldwide's website or in reports and publications they might create, and in their fundraising and media materials.



I know that Deaf Child Worldwide may change my name and other details so no-one knows it is about me.



I know who I can talk to, if I change my mind at any time and ask them to stop and not use my story, photo, video or any information about me.

**After five years, Deaf Child Worldwide will stop using the images they have taken of me or contact me to ask if they can continue.**



If Deaf Child Worldwide decide to use a photo with me in it, they will provide me with a copy of that photo or the publication it is in.



### Agreement

I say YES to the above ..... (sign name or write 'X')



### Disagreement

I say NO to the above ..... (sign name or write 'X')

**Date of consent:** .....

## Part 2: Parental/Care Giver Consent

Young adults over 18 can give their own consent

Someone has explained to me about Deaf Child Worldwide's work and how the images or information about my child might be used.



### Agreement

I say YES to the above ..... (sign name or write 'X')



### Disagreement

I say NO to the above ..... (sign name or write 'X')

## Part 3: Person Witnessing Consent

To be completed by Partner/Deaf Child Worldwide staff

Please tick how a clear agreement/disagreement was obtained:



- Sign language
- Through an interpreter
- Through pointing
- Other visual aid
- Other method: .....
- Through another person who can communicate with the child

Name: .....

Relationship with child: .....

I confirm that ..... (named person) agreed/disagreed with Deaf Child Worldwide using their story or images.



## Part 4: Teacher Consent

To be completed by teacher on behalf of class

- I have explained the content of this form to my class.
- The children understand how Deaf Child Worldwide may use their stories/photos/videos and they have given consent for this to happen.

Name of Staff completing the form: .....

Signature: ..... Date: .....

**Appendix E: DCW Cause for Concern Form**

**DCW Cause for Concern Form**  
This form should be completed in Response to Allegations of Harm/Abuse

**Details of Report**

<b>Date and time form completed:</b>		<b>Location/ Country:</b>	
<b>Concern Reported By:</b>		<b>Concern Reported to (i.e. Line Manager):</b>	

**Details of Child/Children at risk:**

Name	Age	Gender	Communication method used by child	Name and Tel No of Parent/Caregiver

**DETAILS OF CONCERN: Be impartial, non-judgemental and provide factual information**

<p><b>Explain what caused you to be concerned:</b></p> <ul style="list-style-type: none"> <li>• <b>Was it something observed?</b> (Please explain what you saw. i.e. harm being caused to a child, something online, on someone’s laptop?)</li> <li>• <b>Reported by a child?</b> (Did a child tell you something? What did they disclose?)</li> <li>• <b>Reported by a third party</b> (Did someone else tell you something to make you concerned; did you receive a letter, message or email?)</li> </ul>	
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<b>When did the incident occur?</b> (Date and Time)	
<b>Where did the incident occur?</b> (Country/Location/Place/Venue)	
<b>Who was involved?</b> (Who was present? Were there witnesses? Was there an interpreter - If yes, please add their name)	
<b>Please explain everything that happened: Please use facts, quotes, and time lines.</b> (If you have received data i.e. a letter, email, message, image, please attach it to this form)	
<div style="height: 500px;"></div>	

**Record of Decisions and Actions Taken:** (Please detail actions taken i.e. incident reported to line manager, informed child's family/carers)

Date	Description of Decisions /Action	Initials

**Closure of Concern**

**Final Outcome:**

Signature ..... Date.....

**Please pass this form to your Line Manager or the Designated Safeguarding Officer.**

## Appendix F: Guiding Questions for Determining the Best Interests of the Child

### Assessing Risk

- What is the exact nature of the harm/abuse (type of harm; severity)?
- When did it happen and is it likely to occur again in the near future?
- How many children are at risk (siblings; peers etc)?
- Does the alleged perpetrator still have access/contact with the child?
- Is there a trusted adult with the child who can help keep them safe?
- Is the child in need of urgent medical attention?

### Who should we talk to?

- Have I clarified all the facts with the person reporting the abuse/harm? Have I answered the “W” questions: What happened? When? Who was involved?
- Is it possible to communicate with the child to find out more and to assess their wishes and feelings about what happens next?
- Have you considered communication method and child’s needs?
- Who is the best person to communicate to the child (i.e. deaf staff or interpreter)?
- Who is the Designated Safeguarding Officer in my organisation? Who can I communicate to in my organisation to help me decide the actions that need to be taken?
- Do I need to communicate with anyone else to clarify the facts about what happened? Will talking to another person put the child at more risk? Will talking to another child breach the child’s confidentiality? (concerns must only be shared with those necessary to keep the child safe)

### Deciding what actions need to be taken

- Is this child in a safe place or are they still at risk? What can be done ensure the child’s immediate safety whilst other actions can be taken?
- Is there someone with the child who can support them? If not, who is the most appropriate person to support and protect the child whilst other actions are taken?
- Is it safe for the child remain at home (family home, residential, boarding school etc)? If not, where can the child stay that will cause them the least distress and provide the highest level of support?
- Are there other children at risk? What needs to be done to ensure they are safe?
- If the concern relates to a staff member, have they been suspended from duties? Do they present an on-going risk and who should be notified to address this?

### Who else should be informed?

- Who has parental responsibility for the child? Will informing this person put the child at risk? If so, who else in the child’s extended family/immediate network can we inform?
- Does the case need to be reported to the police/authorities? Will doing so put the child at any additional risk? Are the police/authorities likely to be willing/able to provide protection? Do we need parental consent to report to the police?
- Are there community based protections that we should report to or that can help keep the child safe (e.g. community elders, community based child protection committees)

- Are there additional services we need to contact to provide protection and support to the child (shelter, medical services, counselling services)?
- Have I informed the relevant people in my organisation to ensure that they are aware of the case and can support with any decisions and follow up actions?
- Who will keep the child informed of what is happening.