



Cambodian Organization for Living and Temporary-care (COLT)

Child Protection Policy

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1 Policy

1.1 Introduction

COLT affirms our belief that we have a moral and legal obligation to ensure that, when given responsibility for young people, trustees, staff and volunteers or partners provide them with the highest possible standard of care.

We are committed to devising and implementing policies so that everyone working either directly or indirectly with children accepts their responsibilities to safeguard them from harm and abuse. This means following procedures to protect children and report any concerns about their welfare to appropriate authorities.

The aim of this policy is to promote good practice, providing children and young people with appropriate safety/protection whilst in the care of COLT and to allow staff and volunteers to make informed and confident responses to specific child protection issues.

We recognize that when, as an organization, we come into contact with children that it has a fundamental duty of care towards them. This policy also acknowledges the responsibilities involved in keeping children safe in both relief and development interventions.

We believe in the right of all children to be protected from all forms of abuse, neglect, exploitation and violence, as set out in the *UN Convention on the Rights of the Child* 1989.

A child/young person is defined as a person under the age of 18 (Children's Act 1989)

1.2 Policy Statement

COLT is committed to the following:

- the welfare of the child is paramount;
- all children without exception have the right to protection from abuse regardless of gender, ethnicity, disability, sexuality or beliefs;
- taking all reasonable steps to protect children from harm, discrimination and degrading treatment and to respect their rights, wishes and feelings;
- all concerns, and allegations of abuse will be taken seriously by trustees, staff and volunteers or partners and responded to appropriately - this may require a referral to children's services and in emergencies, the Police;
- safe recruitment, selection, vetting and appropriate guidance/training of all trustees, staff and volunteers or partners;
- all children should be encouraged to fulfill their potential and inequalities should be challenged;

- any partners that we work with also have a responsibility to meet minimum standards of protection for the children in their programmes.

1.3 Definitions

In this policy:

- "young person" or "child" means a person under the age of 18;
- the "Charity" means 'COLT';
- the "Trustees" means the Trustees of the Charity/ Members of the Board;
- the "Welfare Officer" means the person appointed by the Trustees responsible for child protection implementation and compliance c.q. Shelter Manager;
- "Staff" means anyone employed and paid by the Charity;
- "Volunteer" means anyone who works for the Charity but is not paid;
- "Partners" means any organization or individual who works with the Charity to further its charitable aims.

1.4 Monitor & Review

The implementation of procedures should be regularly monitored and reviewed. The welfare officer should regularly report progress, challenges, difficulties, achievements gaps and areas where changes are required to the Trustees.

The policy should be reviewed every 3 years or whenever there is a major change in the organization or in relevant legislation.

2 Good Practice

2.1 Introduction

To provide children with the best possible experience and opportunities, trustees, staff or volunteers must operate within an accepted ethical framework.

It is not always easy to distinguish poor practice from abuse. It is therefore NOT the responsibility of trustees, staff, or volunteers to make judgments about whether or not abuse is taking place. It is however their responsibility to identify poor practice and possible abuse and act if they have concerns about the welfare of the child.

This section will help identify what is meant by good practice and poor practice.

2.2 Good Practice

All personnel should adhere to the following principles and actions:

- always work in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets);
- make experiences fun and enjoyable;
- promote fairness, confront and deal with bullying;
- treat all young people equally and with respect and dignity;
- maintain a safe and appropriate distance with children (e.g. it is not appropriate for trustees, staff or volunteers to have an intimate relationship with a child or share a room with them);
- avoid unnecessary physical contact with young people. Where any form of manual/physical support is required it should be provided openly and with the consent of the young person. Physical contact can be appropriate so long as it is neither intrusive nor disturbing and the young person's consent has been given;
- involve parents/caretakers if and wherever possible, e.g. where young people need to be supervised, encourage parents, if available, to take responsibility for their own child. If groups have to be supervised, ensure that supervisors work in pairs;
- be an excellent role model, this includes not smoking or drinking alcohol in the company of young people;
- always give enthusiastic and constructive feedback rather than negative criticism.

2.3 Poor Practice

The following is regarded as poor practice and should be avoided by all personnel:

- unnecessarily spending excessive amounts of time alone with young people;
- taking young people on journeys alone;
- taking young people to your home where they will be alone with you;
- sharing a room with a young person;
- engaging in rough, physical or sexually provocative games;
- allowing or engaging in inappropriate touching of any form;
- allowing young people to use inappropriate language unchallenged;
- making sexually suggestive comments to a young person, even in jest;
- reducing a young person to tears as a form of control;
- allowing allegations made by a young person to go unchallenged, unrecorded or not acted upon;
- doing things of a personal nature that the young person can do themselves.
- When a case arises where it is impractical/impossible to avoid certain situations where there will be poor practice, the tasks should only be carried out with the full understanding and consent of the parent/career and the young person involved.

If during your care you accidentally hurt a young person, the young person seems distressed in any manner, appears to be sexually aroused by your actions and/or if the young person misunderstands or misinterprets something you have done, report any such incidents as soon as possible to another colleague and make a written note of it. Parents should also be informed of the incident.

3 Child Abuse

3.1 Introduction

Child abuse is any form of physical, emotional or sexual mistreatment or lack of care that leads to injury or harm, it commonly occurs within a relationship of trust or responsibility and is an abuse of power or a breach of trust. Abuse can happen to a young person regardless of their age, gender, race or ability.

There are a number of types of abuse, including **physical abuse, emotional abuse, bullying, sexual abuse, and neglect**. The abuser may be a family member, someone the young person encounters in residential care or in the community, including sports and leisure activities. Any individual may abuse or neglect a young person directly, or may be responsible for abuse because they fail to prevent another person harming the young person.

Abuse in all of its forms can affect a young person at any age. The effects can be so damaging that if not treated may follow the individual into adulthood.

Young people with disabilities may be at increased risk of abuse through various factors such as stereotyping, prejudice, discrimination, isolation and a powerlessness to protect themselves or adequately communicate that abuse had occurred.

3.2 Types of Abuse

Physical Abuse: where adults physically hurt or injure a young person e.g. hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating or drowning. Giving young people alcohol or inappropriate drugs would also constitute child abuse.

This category of abuse can also include when a parent/career reports non-existent symptoms or illness deliberately, causing ill health in a person they are looking after. This is called Munchausen's syndrome by proxy.

Emotional Abuse: the persistent emotional ill treatment of a young person, likely to cause severe and lasting adverse effects on the child's emotional development. It may involve telling a young person they are useless, worthless, unloved, inadequate or valued in terms of only meeting the needs of another person. It may feature expectations of young people that are not appropriate to their age or development. It may cause a young person to be frightened or in danger by being constantly shouted at, threatened or taunted which may make the young person frightened or withdrawn.

Ill treatment of children, whatever form it takes, will always feature a degree of emotional abuse.

Bullying: may come from another young person or an adult. Bullying is defined as deliberate hurtful behavior, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. There are three main types of bullying.

It may be physical (e.g. hitting, kicking, slapping), verbal (e.g. racist or homophobic remarks, name calling, graffiti, threats, abusive text messages), emotional (e.g. tormenting, ridiculing, humiliating, ignoring, isolating from the group), or sexual (e.g. unwanted physical contact or abusive comments).

Neglect: occurs when an adult fails to meet the young person's basic physical and/or psychological needs, to an extent that is likely to result in serious impairment of the child's health or development. For example, failing to provide adequate food, shelter and clothing, failing to protect from physical harm or danger, or failing to ensure access to appropriate medical care or treatment.

Refusal to give love, affection and attention can also be a form of neglect.

Sexual Abuse: occurs when adults (male and female) use children to meet their own sexual needs. This could include full sexual intercourse, masturbation, oral sex, anal intercourse and fondling. Showing young people pornography or talking to them in a sexually explicit manner are also forms of sexual abuse.

3.3 Indicators of Abuse

Even for those experienced in working with child abuse, it is not always easy to recognize a situation where abuse may occur or has already taken place. Most people are not experts in such recognition, but indications that a child is being abused may include one or more of the following:

- unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on a part of the body not normally prone to such injuries;
- an injury for which an explanation seems inconsistent;
- the young person describes what appears to be an abusive act involving them;
- another young person or adult expresses concern about the welfare of a young person;
- unexplained changes in a young person's behavior e.g. becoming very upset, quiet, withdrawn or displaying sudden outbursts of temper;
- inappropriate sexual awareness;
- engaging in sexually explicit behavior;
- distrust of an adult, particularly those with whom a close relationship would normally be expected;
- difficulty in making friends;
- being prevented from socializing with others;
- displaying variations in eating patterns including over eating or loss of appetite;
- losing weight for no apparent reason;
- becoming increasingly dirty or unkempt.
- Signs of bullying include:
 - behavioral changes such as reduced concentration and/or becoming withdrawn, clingy, depressed, tearful or emotionally up and down;
 - physical signs such as stomach aches, headaches, difficulties in sleeping, bed wetting, scratching and bruising, damaged clothes or bingeing;
 - a shortage of money or frequent loss of possessions.

It must be recognized that the above list is not exhaustive, but also that the presence of one or more of the indications is not proof that abuse is taking place. It is **NOT** the responsibility of those working for the Charity to decide that child abuse is occurring. It **IS** their responsibility to act on any concerns.

Responding to Suspicions and Allegations

4.1 Introduction

It is not the responsibility of anyone working for or with the Charity in a paid or unpaid capacity to decide whether or not child abuse has taken place. However, there is a responsibility to act on any concerns through contact with the appropriate authorities, so that inquiries can be made and any necessary action is taken. This applies both to allegations/suspicions of abuse within the Charity and allegations/suspicions of abuse elsewhere.

4.2 Receiving Evidence of Possible Abuse

We may become aware of possible abuse in various ways. We may see it happening, we may suspect it happening because of signs such as those listed in section 3.2 of this document, it may be reported to us by someone else or directly by the young person affected.

In the last of these cases, it is particularly important to respond appropriately. If a young person says or indicates that they are being abused, you should:

- stay calm so as not to frighten the young person;
- reassure the child that they are not to blame and that it was right to tell;
- listen to the child, showing that you are taking them seriously;
- keep questions to a minimum so that there is a clear and accurate understanding of what has been said. The law is very strict and child abuse cases have been dismissed where it is felt that the child has been led or words and ideas have been suggested during questioning. Only ask questions to clarify;
- inform the child that you have to inform other people about what they have told you. Tell the child this is to help stop the abuse continuing;
- the safety of the child is paramount. If the child needs urgent medical attention call an ambulance, inform the doctors of the concern and ensure they are made aware that this is an emergency

Child protection issue;

- record all information;
- report the incident to the welfare officer.

4.3 Recording of Information

To ensure that information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern. In recording, you should confine yourself to the facts and distinguish what is your personal knowledge and what others have told you. Do not include your own opinions. Records should include the following:

- the child's name, age and date of birth;
- the child's home address and telephone number, resp. that of parents or family
- whether or not the person making the report is expressing their concern or someone else's;
- the nature of the allegation, including dates, times and any other relevant information;
- a description of any visible bruising or injury, location, size etc. Also any indirect signs, such as behavioral changes;
- details of witnesses to the incidents;
- the child's account, if it can be given, of what has happened and how any injuries have occurred;
- have the parents /family been contacted? If so, what information they have been told;
- has anyone else been consulted? If so, their details are to be recorded;
- has anyone been alleged to be the abuser? If so, their details are to be recorded.

4.4 Reporting the Concern

All suspicions and allegations MUST be reported appropriately. It is recognized that strong emotions can be aroused particularly in cases where sexual abuse is suspected or where there is misplaced loyalty to a colleague. It is important to understand these feelings but not allow them to interfere with your judgment about any action to take.

The Charity expects its members and staff to discuss any concerns they may have about the welfare of a child immediately with the person in charge and subsequently to check that appropriate action has been taken.

Where there is a complaint against an employee or volunteer, there may be three types of investigation:

- Criminal: in which case the police are immediately involved;
- Child Protection: in which case the social services (and possibly) the police are involved;
- Disciplinary or misconduct: in which case the Charity will be involved.

As mentioned previously in this document the Charity trustees, staff or volunteers are not child protection experts and it is not their responsibility to determine whether or not abuse has taken place. All suspicions and allegations must be shared with professional agencies that are responsible for child protection.

NB: If there is any doubt, you must report the incident: it may be just one of a series of other incidence which together cause concern.

Any suspicion that a child has been abused by an employee or a volunteer should be reported to the welfare officer who will take appropriate steps to ensure the safety of the child in question and any other child who may be at risk. This will include the following:

- the parent/caretaker of the child will be contacted as soon as possible following advice from social services;
- the chair person of the Charity should be notified to decide who will deal with any media inquiries and implement any immediate disciplinary proceedings;
- if the welfare officer is the subject of the suspicion/allegation the report must be made to the chair person of the Charity

Allegations of abuse are sometimes made after the event. Where such allegation is made, you should follow the same procedures and have the matter reported to the appropriate authority. This is because other children may be at risk from the alleged abuser.

Anyone who has a previous conviction for offences related to abuse against children is automatically excluded from working with children.

4.5 Concerns Outside the Charity Environment

- Report any concerns to the welfare officer;
- if the welfare officer is not available, the person being told or discovering the abuse should contact their local social services department or the police immediately;
- social services and the welfare officer should decide on how to inform the parents/caretakers;
- maintain confidentiality on a need to know basis.

4.6 Confidentiality

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only. This includes the following people:

- the welfare officer;
- the parents/family of the child;
- the person making the allegation;
- social services/police;
- the alleged abuser (and parents if the alleged abuser is a child).

Seek social services advice on who should approach the alleged abuser.

All information should be stored in a secure place with limited access to designated people, in line with data protection laws.

4.7 Internal Inquiry and Suspension

The welfare officer will make an immediate decision about whether any individual accused of abuse should be temporarily suspended pending further police and social services inquiries.

Irrespective of the findings of external authorities or police inquiries, the chairperson of the Charity will assess all individual cases to decide whether a trustee, staff or volunteer can be reinstated and how this can be handled sensitively.

This may be a difficult decision; especially where there is insufficient evidence to uphold any action by the police. In such cases, the Charity must reach a decision based upon the available information which could suggest that on the balance of probability, it is more likely than not that the allegation is true. The welfare of the child should remain paramount throughout.

5 Recruitment

5.1 Introduction

It is important that all reasonable steps are taken to prevent unsuitable people from working with children. This applies equally to paid staff and volunteers, both full and part time. To ensure unsuitable people are prevented from working with children the following steps should be taken when recruiting.

5.2 Controlling Access to Children

Whenever a member of staff or volunteer is taken on by the Charity, whether paid or unpaid, the following steps must be taken:

- an application form must be completed. The form must elicit information about the applicant's past and a self-disclosure about any criminal record;
- consent should be obtained from the applicant to see information from the Criminal Records Bureau;
- two references, including one regarding previous work with children should be obtained. These references must be taken up and confirmed through telephone contact;
- evidence of identity (passport or photo driving license) must be provided by the applicant.

5.3 Interview and Induction

All employees and volunteers will be required to undertake an interview carried out to acceptable protocol and recommendations. All employees and volunteers should receive formal or informal induction during which:

- a check should be made that the application form has been completed in full, including sections on criminal records and self-disclosures;
- their qualifications should be substantiated;
- the job requirements and responsibilities should be clarified;
- Child Protection Procedures are explained and training needs identified e.g. basic child protection awareness.

5.4 Training

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help staff and volunteers to:

- analyse their own practice against what is deemed good practice, and to ensure their practice is likely to protect them from false allegations;
- recognise their responsibilities and report any concerns about suspected poor practice and/or abuse;
- respond to concerns expressed by a child;
- work safely and effectively with children.

The Charity requires:

- all trustees, staff and volunteers who have access to children have to undergo a CRB check;
- all trustees, staff and volunteers to undertake relevant child protection training or undertake a form of home study, to ensure their practice is exemplary and to facilitate the development of positive culture towards good practice and child protection;
- all trustees, staff and volunteers to receive advisory information outlining good/bad practice and informing them what to do if they have concerns about the behavior of an adult towards a child.