

**Simeon Centre Counselling Service**

**Child Protection Policy**

## **Introduction**

The Simeon Centre Counselling Service is open to all members of the local community aged 16 years and above. However, all staff and volunteers must be vigilant and alert to disclosures of child abuse from adult clients.

This document outlines the Simeon Centre's Child Protection Policy which will be followed by all members of the Simeon Centre and followed and promoted by those in the position of leadership within the organisation.

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 Simeon Centre are transparent and safeguard and promote the welfare of all young people.

For the purposes of clarity, all people under the age of 18 are classed as children. Where this document mentions: a child, children, young person, young people, it is referring to someone under the age of 18.

## **Immediate action to ensure safety**

Immediate action may be necessary at any stage of involvement with clients. **IN ALL CASES IT IS VITAL TO TAKE WHATEVER ACTION IS NEEDED TO SAFEGUARD CHILDREN.**

- If emergency medical attention is required this can be obtained by calling an ambulance (dial 999).
- If a child is in immediate danger the police should be contacted (dial 999). They alone have the power to remove a child immediately if protection is necessary, via Police Protection Order.

## **Recognising Abuse or Neglect**

Abuse or neglect of a child is caused by inflicting harm or by failing to act to prevent harm. Children may be abused in a family, institutional or community setting: by those known to them or more rarely by a stranger.

### **Physical Abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms, of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using terms such as, fabricated illness by proxy or Munchausen Syndrome by proxy.

### **Emotional Abuse**

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of ill treatment of a child though it may occur alone.

### **Sexual Abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery) or non-penetrative acts. It may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material, or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

### **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Individuals within the Simeon Centre need to be alert to the potential abuse of children both from statements made by clients and also from other sources including abuse by members of our own organisation.

All Simeon Centre staff and volunteers should know how to recognise and act upon indicators of abuse or potential abuse involving children. There is an expected responsibility for everyone to respond to any suspected or actual abuse of a child in accordance with these procedures.

It is good practice to be as open and honest as possible with clients about any concerns. However, you **must not** discuss your concerns with clients in the following circumstances:

- where sexual abuse of a child (other than the client) is suspected
- where organised or multiple child abuse is suspected
- where fictitious illness by proxy (also known as Munchausen Syndrome by proxy) is suspected
- where raising your concerns with a client would place a child, yourself or others at immediate risk

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

A child may decide to share information about abuse or neglect in your presence. 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 disclosure using the Disclosure Record form (see Appendix). Take care to record the timing, setting and people present, the child's process as well as what was said. Do not throw this away as it may later be needed as evidence.
- Use the child's own words where possible.
- Explain that you cannot promise not to speak to others about the information they have shared.
- Reassure the child that:
  - you are glad they have told you;
  - they have not done anything wrong;
  - what you are going to do next.
- Explain that you will need to get help to keep the child safe.
- Do NOT ask the child to repeat his or her account of events to anyone.

## **Consulting about any concerns**

The purpose of consultation is to discuss your concerns in relation to a child and decide what action is necessary.

You may become concerned about a child who has not spoken to you, because of your observations of, or information about that child. It is good practice to ask a child why they are upset or how a cut or bruise was caused, or respond to a child wanting to talk to you. This practice can help clarify vague concerns and result in the appropriate action.

If you are concerned about a child you must share your concerns. Initially you should raise your concern(s) with the Manager/Co-ordinator as soon as possible. If this person is implicated in the concerns you should discuss your concerns directly with Social Services.

You should consult externally with your local Social Services Department in the following circumstances:

- when you remain unsure after internal consultation as to whether child protection concerns exist
- when there is disagreement as to whether child protection concerns exist
- when you are unable to consult promptly with the Manager/Co-ordinator
- when the concerns relate to any member of the organising committee

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

### **Making a referral**

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

All referrals will be made by the Manager/Co-ordinator. If s/he is unavailable the Superintendent Minister of the Victoria Hall will make the referral. If neither are contactable, and only in an emergency, counsellors may contact Social Services or the Police directly. The Manager/Co-ordinator and/or Superintendent Minister must be informed at the first opportunity.

In certain cases the level of concern will lead straight to a referral without external consultation being necessary. Clients should be informed if a referral is being made except in the circumstances outlined at the bottom of page 3. However, inability to inform clients for any reason should not prevent a referral being made. It would then become a joint decision with Social Services about how and when the parents should be approached and by whom.

**If your concern is about abuse or risk of abuse from someone not known to the child or child's family, you should make a telephone referral directly to the police and consult with the parents.**

If your concern is about abuse or risk of abuse from a family member or someone known to the children, you should make a telephone referral to your local Social Services Office. (see Appendix).

### **Information required**

Be prepared to give as much of the following information as possible (in emergency situations all of this information may not be available).

Unavailability of some information should not stop you making a referral.

- Your name, telephone number, position and request the same of the person to whom you are speaking.
- Full name and address, telephone number of family, date of birth of child and siblings.
- Gender, ethnicity, first language, any special needs.
- Names, dates of birth and relationship of household members and any significant others.
- The names of professionals' known to be involved with the child/family e.g.: GP, Health Visitor, School.
- The nature of the concern(s); and foundation for them.
- An opinion on whether the child needs 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**

- Inform the Superintendent Minister of the Victoria Hall that a referral has been made.
- Ensure you keep an accurate record of your concern(s) made at the time.
- Put your concerns in writing to Social Services following the referral (within 48 hours).
- Accurately record the action agreed or that no further action is to be taken and the reasons for this decision.

### **Confidentiality**

The Simeon Centre will ensure that any records made in relation to a referral will be kept confidentially and in a secure place.

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.

*If in doubt, consult.*

# **Appendix**

# Simeon Centre Disclosure Record

**Date of disclosure:**

**Time:**

**Location:**

**Counsellor's name:**

**Client name/ref:**

*Please write factually the words of the client's disclosure.*

*If more space is required please use the reverse ensuring client signs and dates both sides.*

We do everything we can to maintain each clients' confidentiality. However, on this occasion your counsellor feels that this information needs to be passed on to the relevant agency.

**Please sign below to indicate that the details listed above are an accurate record of your disclosure.**

\_\_\_\_\_  
Client's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counsellor's signature

\_\_\_\_\_  
Date

Please tick this box if you would like a copy of this completed form

## **Contacts**

### **Simeon Centre Counselling Service**

Victoria Hall  
Knowsley Street  
Bolton  
BL1 2AS

Office Tel: 01204 387 363

Email: [counselling@simeoncentre.org.uk](mailto:counselling@simeoncentre.org.uk)

### **Simeon Centre Manager/Co-ordinator**

Gary Jones

Mobile: 07958 250421

Email: [gary@simeoncentre.org.uk](mailto:gary@simeoncentre.org.uk) (office hours only)

### **Emergency Duty Team**

Bolton Council

Tel: 01204 337777

### **Child Protection Unit**

Endeavour House  
Waters Meeting Road  
Bolton  
BL1 8SW

Tel: 01204 337468

### **Bolton Public Protection Investigation Unit**

Police

Tel: 0161 856 7948/9