

Safeguarding Children Policy

Date	Review Date	Designated Safeguarding Lead	Deputy Designated Safeguarding Lead	Designated Trustee for Safeguarding
01.08.18	01.08.19	Centre Manager Sally Mills	Garden Manager Kira Hardy	Trustee Samantha Strongman

The following are important telephone numbers that must be kept up to date:

Contacts	Home/ Daytime	Mobile
Chair of Trustees Neil Jones		
Vice-Chair Anne Everitt		
Nominated Trustee for Safeguarding Samantha Strongman		
Designated Safeguarding Lead Sally Mills - Centre Manager	01483 813846	
Deputy Designated Safeguarding Lead Kira Hardy- Garden Manager		
Surrey Police Main Switchboard	101	999 if a crime has been committed
Surrey MASH Multi Agency Safeguarding Hub	Office hours 0300 470 9100	Out of office hours 01483 517898
Surrey LADO (Local Authority Designated Officer)	0300 123 1630	
Hampshire Police Main Switchboard	101	999 if a crime has been committed
Hampshire MASH Multi Agency Safeguarding Hub	Office hours 0300 555 1384	Out of office hours 0300 555 1373

The Therapy Garden recognise our moral and statutory responsibility to safeguard and promote the welfare of all students. We endeavour to provide a safe and welcoming environment where children and young people are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children and young persons receive effective support, protection and justice.

The Safeguarding Children policy reinforces that safeguarding is everyone's responsibility and should be adhered to by all staff, trustees and volunteers.

The Therapy Garden follows good working practice in line with recommendations of the HM Government document "Working Together to Safeguard Children" July 2018 and the Surrey Safeguarding Children Board SSCB Child Protection Procedures.

Definition of Safeguarding

The 'Working Together to Safeguard Children' document defines safeguarding and promoting the welfare of children as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring children can grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes

Policy Principles

- The welfare of the child is paramount at all times.
- All children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection, safeguarding and opportunities.
- All trustees, staff and volunteers have a full and active part to play in protecting our students from harm and have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm by reporting any concerns to a Designated Safeguarding Lead.
- Our staff believe that the charity should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child.
- Pupils and staff involved in safeguarding issues will receive appropriate support.

Policy Aims

- To demonstrate The Therapy Garden's commitment with regard to safeguarding and child protection to students, schools, parents and other partners.
- To provide an environment in which children and young people feel safe, secure, valued and respected, and feel confident to, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
- To develop a structured procedure within The Therapy Garden, which will be followed by all members of the charity's community in cases of suspected abuse.
- To raise the awareness of all staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse.
- To develop and promote effective working relationships with other agencies, especially schools and Children's Services.
- To ensure that all staff working within The Therapy Garden who work closely with children and young people have been checked as to their suitability, including verification of their identity, qualifications, and an enhanced DBS check and a single central record is kept for audit.

Roles of Trustees, Staff and Volunteers

The Therapy Garden 'Safeguarding Children' policy clearly outlines the roles and responsibilities of all those involved in the procedures connected with this policy.

All trustees, staff and volunteers must be fully aware of their safeguarding responsibilities.

Role of the Trustee Board

The Trustee Board has the responsibility to ensure the following are in place:

Legislation, the Law and Documentation

- To ensure that the Safeguarding Children Policy is effective and complies with the law at all times.
- To ensure that all trustees are fully aware of their safeguarding responsibilities.
- To use the expertise of trustees and staff to regularly review the Safeguarding Children Policy.

Role of the Nominated Trustee for Safeguarding

- To act as the first point of contact within the board of trustees, regarding safeguarding concerns raised by the Designated Safeguarding Lead and Deputy Designated Safeguarding Lead.

Role of the Designated Safeguarding Lead

The Designated Safeguarding Lead (Centre Manager) has overall responsibility for the safeguarding of children and young people and has the appropriate status and authority within the organisation to carry out the duties of the post.

- To act as initial point of contact for staff or volunteers concerned about a child or young person in their care.
- To have responsibility for the effective implementation, monitoring and evaluation of this policy.
- To undertake periodic checks to ensure all safeguarding procedures are working effectively
- To have in place safe recruitment policy and procedures, including appropriate use of reference checks on new staff.
- To attend appropriate safeguarding refresher training on a regular basis.
- To organise all staff, trustee and volunteer safeguarding training.
- To ensure Disclosure and Barring Service checks are undertaken for all members of staff and volunteers working with adults with a care or support need at The Therapy Garden.
- To make a 'referral to the Disclosure and Barring Service if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have been had they not resigned'.
- To have procedures in place to deal with allegations of abuse against staff or volunteers.
- To hold weekly, documented safeguarding meetings with the horticulture team in order to share information with the staff team, on a need to know basis, in relation to children or young people for whom there is a concern.
- To maintain safeguarding records.

Role of the Deputy Designated Safeguarding Lead

The Deputy Designated Safeguarding Lead (Garden Manager) has the responsibility to:

- To discuss any adult safeguarding concerns with the Designated Safeguarding Lead/ Centre Manager as they arise or at the weekly safeguarding meeting.
- To deputise as the Designated Safeguarding Lead in the Centre Manager's absence.

Role of the Staff

The staff at The Therapy Garden has the responsibility to:

- To take time to familiarise themselves with this policy.
- To understand that safeguarding is everyone's responsibility and be vigilant with regards client wellbeing.
- To discuss any adult safeguarding concerns with the Designated Safeguarding Lead or Deputy Safeguarding Lead as they arise.

Volunteers

The Therapy Garden volunteers have been given training to provide the skills required to recognise situations and circumstances where a child or young person may be at risk.

Volunteers are asked to refer any safeguarding concerns to the Designated Safeguarding Lead (Centre Manager) or to any member of staff, who will also refer your safeguarding concerns to the Designated Safeguarding Lead.

Volunteers should feel that all staff could be approached with all safeguarding concerns, no matter how minor they might seem, at any time.

Role and Partnership with External Agencies

The safety and protection of children and young people is of paramount importance to everyone at The Therapy Garden.

The charity will work in close partnership with external agencies and associates including, but not limited to:

- SEND and SENCOs at mainstream schools
- Child Services and Family Services
- Parents
- Carers and support workers

Reporting Procedure

All staff and volunteers are made aware of the need to report any concerns to the Designated Safeguarding Lead (Centre Manager), or in their absence, the Deputy Designated Safeguarding Lead (Garden Manager). Any explanation given to account for the concern must be recorded. Staff must not directly question the child concerned as this may compromise future investigation. It is not the responsibility of The Therapy Garden to prove abuse has taken place but to report any concerns that this policy addresses.

The priority is to safeguard the child/ young person. This may mean that arrangements for their return home might be delayed or if the concern relates to a member of staff, temporarily suspending that person. Any such decisions will be made in consultation with a Designated Safeguarding Lead.

If concerns remain, the Designated Safeguarding Lead will make a referral to the MASH (Multi-Agency Safeguarding Hub). Prior to making the referral, the child or young person's parents or carer should be advised of the concern unless doing so might adversely affect the child's safety.

Verbal referrals must always be followed up by a written referral within 48 hours. The Designated Safeguarding Lead must record all action taken.

If at any stage the person who raises the initial concern is still unhappy about a child or young person's welfare, having followed the above procedure, you should discuss your concerns with the Chair of Trustees at The Therapy Garden. Failing that, any person has the right to discuss their concerns regarding a child's welfare with Child Services or report their concerns to the MASH directly.

Allegations Against Staff or Volunteers

Any allegation made in relation to a volunteer or a member of staff, by either an adult or a child, must be reported to the Centre Manager by the person who received or heard the concern.

The priority is to safeguard the child/ young person and as the concern relates to a member of staff, this may mean temporarily suspending that person. Any such decisions will be made in consultation with the Designated Safeguarding Lead, taking advice from the Chair of Trustees, the Vice-Chair or the Nominated Trustee Responsible for Safeguarding, if required.

This may involve:

- Making a referral to the MASH or LADO if appropriate
- If the allegation indicates a criminal offence has taken place, the police should be contacted at the earliest opportunity.
- Invoking the Disciplinary Policy

The Designated Safeguarding Lead will:

- Keep a factual record of the allegation that has been made.
- Meet with the member of staff or volunteer, inform them of the allegation and give them the chance to respond.
- It may be necessary to suspend the person concerned until an investigation has taken place. It is important that they are kept fully informed of the progress of the case and offered support while the investigation is ongoing.
- Contact Child Services or the school to discuss the issue and follow through the outcomes of the discussion, making a referral where appropriate or informing parents if advised. The Designated Safeguarding Lead will keep a record of all related conversations, actions and outcomes
- Where neither Child Services nor the police accept the complaint, then a thorough investigation should take place into the matter.

Allegations Against Another Child or Young Person

If a child makes an allegation against another child, members of staff should consider whether the complaint raises a safeguarding issue. If there is a safeguarding concern then the Designated Safeguarding Lead should be informed. The Anti-Bullying and Harassment policy should also be referred to.

- A factual record of the allegation should be made
- The Designated Safeguarding Lead should contact Child Services or the school to discuss the issue and follow through the outcomes of the discussion, making a referral where appropriate or informing parents if advised. The Designated Safeguarding Lead will keep a record of all related conversations, actions and outcomes
- If the allegation indicates a criminal offence has taken place, the police should be contacted at the earliest opportunity.
- Where neither Child Services nor the police accept the complaint then a thorough investigation should take place into the matter.
- The above should include a risk assessment with a preventative and supervision plan if appropriate
- The plan should be monitored and date set for a follow up evaluation with everyone concerned.

Maintaining Records

The Designated Safeguarding Lead is required to keep all records involving safeguarding concerns.

A secure record of all conversations held in relation to the concerns and investigation is kept on the Agile system. In addition observations of a child or young person's behaviour might be recorded.

Records concerning a member of staff must be held in their personnel file and the member of staff must be provided with a copy.

Confidentiality

The Designated Safeguarding Lead is required to keep all records involving safeguarding concerns in a secure place and make sure they remain confidential.

Information in relation to safeguarding children and young people should be shared on a 'need to know' basis. However, the sharing of information is vital to the safeguarding process and therefore the issue of confidentiality is secondary to a child or young person's need for protection

Definitions of Abuse

Working Together to Safeguard Children describes four main categories of abuse and gives the following definitions and possible signs or indicators of these types of abuse:

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Possible signs or indicators of physical abuse:

- Unexplained injuries or burns, especially if they are recurrent
- Improbably excuses given to explain injuries
- Refusal to discuss injuries
- Untreated injuries
- Admission of punishment which appears excessive
- Fear of parent being contacted
- Withdrawal from physical contact
- Flinching at sudden movements
- Arms and legs kept covered in hot weather
- Fear of returning home
- Fear of medical treatment
- Self-destructive tendencies
- Aggression towards others
- Chronic running away

Sexual abuse

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

Possible signs or indicators of sexual abuse:

- Genital injuries or soreness
- Presence of sexually transmitted disease
- Soiling
- Exposing themselves
- Masturbation in contextually inappropriate fashion
- Sexualised play or drawings
- Fears e.g. getting changed
- Nightmares
- Pregnancy
- Depression or suicide attempts
- Chronic running away
- Self-harming, self-mutilation, anorexia
- Obsessional washing
- Psychotic episodes
- Rebellious against specific gender
- Abdominal pains
- Concentration/ school difficulties

- Psychosomatic conditions
- Authority problems
- Drug and alcohol abuse

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

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

Possible signs or indicators of neglect:

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Frequent lateness or non-attendance
- Untreated medical conditions
- Destructive tendencies
- Low self-esteem
- Neurotic behaviour such as rocking, hair twisting, thumb sucking
- No social relationships
- Chronic running away
- Compulsive stealing
- Scavenging for food

Emotional abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age of developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's development capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill treatment of another. It may involve serious bullying, causing children to frequently 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.

Possible signs or indicators of emotional abuse:

- Physical, mental and emotional developmental delay or disturbance
- Admission of punishment which appears excessive
- Over-reaction to mistakes
- Sudden speech disorders
- Fear of new situations

- Inappropriate emotional responses to stressful situations
- Neurotic behaviour e.g. hair twisting, thumb sucking
- Self mutilation
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/ solvent abuse
- Chronic running away
- Compulsive stealing
- Scavenging for food or clothes

These categories of abuse are neither exhaustive nor mutually exclusive.

Staff and Volunteer Training

The Therapy Garden requires all staff and volunteering working directly with students to complete an enhanced DBS check.

The Designated Safeguarding Lead (Centre Manager) is required to attend a two-day multi-agency safeguarding training course and complete a refresher every two years. The horticulture tutors are required to complete the SSCB 'Working Together to Safeguard Children' online course as part of their staff induction or provide a certificate to show they have completed an equivalent qualification.

Safeguarding training is also offered to trustees and volunteers at regular intervals and all individuals working with children and young people at The Therapy Garden are encouraged to take part in this training.

Raising Awareness of this Policy

The Therapy Garden will raise awareness of this policy via:

- The Therapy Garden policy folder, which is located in the Centre Manager's Office and contains all the charity's policies. Staff and volunteers are to be informed when the policies are updated.
- During staff induction
- During volunteer induction
- Through emails to staff and volunteers when policies are updated
- The Therapy Garden policies are accessible via the charity's website

Monitoring the Implementation and Effectiveness of the Policy

The practical application of this policy will be reviewed annually, or when there is a change to legislation, by the Designated Safeguarding Lead (Centre Manager) and the Deputy Designated Safeguarding Lead (Garden Manager) and the Nominated Trustee for Safeguarding.

A statement of the policy's effectiveness and the necessary recommendations for improvement will be presented to the board of trustees for further discussion and endorsement, with all trustees required to agree changes.

Linked Policies

- Volunteer Policy
- Whistle Blowing Policy
- Prevent Duty
- Bullying and Harassment Policy
- Violence and Aggression Policy

Policy Approval

This policy was adopted on the 01 August 2018 by:

Chair of Trustees Neil Jones		Date:	
Samantha Strongman Nominated Trustee for Safeguarding		Date:	
Sally Mills Centre Manager & Designated Safeguarding Lead		Date:	
Kira Hardy Garden Manager & Deputy Designated Safeguarding Lead		Date:	