



Child Protection Policy

- 1.DBC believes that children must be protected from harm at all times.
- 2.We believe every child should be valued, safe and happy. We want to make sure that children we have contact with know this and are empowered to tell us if they are suffering harm.
- 3.We want children who use or have contact with this organisation to enjoy what we have to offer in safety.
- 4.We want parents and carers who use or attend our organisation to be supported to care for their children in a way that promotes their child's health and well-being and keeps them safe.
- 5.We will achieve this by having an effective child protection procedure and following National and Local guidance;
6. If we discover or suspect a child is suffering harm, we will notify social services or the police in order that they can be protected if necessary. See Appendix A for the categories of abuse
- 7.This child protection policy and our child protection procedure apply to all staff, volunteers and users of DBC and anyone carrying out any work for us or using our premises.
- 8.We will review our child protection policy and procedures at least every 2 years to make sure they are still relevant and effective.

Child Protection Procedure

1. There will be a named person for child protection who will be responsible for dealing with any concerns about the protection or welfare of children. This person is currently Elaine Blaby. For further details of their role please see Appendix B.
2. Those staff and volunteers who are involved in regulated activity with children, young people and vulnerable adults will be checked through the Criminal Records Bureau CRB.
3. Staff and volunteers working with young children at DBC will receive information and basic training in safe conduct and what to do if they have concerns about a child. This will include information on recognising where there are concerns about a child, where to get advice and what to do if no one seems to have taken their concerns seriously.
4. We will endeavour to make DBC a safe and caring place for children to be by having a code of conduct for staff and volunteers. This will be made available to them.
5. There will be a complaints procedure, see Appendix E

Appendix A

Categories of Abuse

Recognising the Signs and Symptoms of 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, clothing and shelter (including exclusion from home or abandonment);
- Protect a child from physical and emotional harm or danger;
- Ensure adequate supervision (including the use of inadequate care-givers); or
- Ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

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 fabricates the symptoms of, or deliberately induces, illness in a child.

Sexual Abuse

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

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 include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone

Signs and Symptoms of Abuse

Possible Signs of Abuse	• Bruise marks consistent with either straps or slaps • Undue fear of adults - Reluctant to go home after club/Fear of going home to parents or carers • Aggression towards others • Unexplained injuries or burns – particularly if they are recurrent and especially in non mobile babies • Any injuries not consistent with the explanation given for them • Injuries that occur to the body in places which are not normally exposed to falls, rough games, etc • Bruises, bites, burns, fractures etc which do not have an accidental/satisfactory explanation • Cuts/scratches/substance abuse • Hitting (with the hand or implement) smacking, punching, kicking, slapping, twisting/pulling ear, hair or fingers, holding/squeezing with a tight grip, biting, and burning • Fabricated illness –see SSCB website for the procedure inc signs and symptoms • Becomes secretive and reluctant to share information. • Late being picked up. • Parents show little interest in child’s performance and behaviour • Parents are dismissive and non-responsive to concerns. • Is reluctant to get changed for sports etc. • Is concerned for younger siblings without explaining why. • Talks of running away.
Neglect	• Exposure to danger/lack of supervision • Neglect - under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses, inadequate care etc. • Injuries that have not received medical attention • Inadequate/inappropriate clothing • Constant hunger

There is no clear dividing line between one type of abuse and another. The following section is divided into four areas to help categorise what may be seen or heard. Children/young people may show symptoms from one or all of the categories. This should not be used as a checklist. Workers and volunteers should be aware of anything unusual displayed by the child.

Emotional Signs of Abuse	• Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging. Also depression/ aggression, extreme anxiety • Nervousness, frozen watchfulness • Obsessions or phobias • Sudden under-achievement or lack of concentration • Inappropriate relationships with peers and/or adults • Attention-seeking behaviour • Persistent tiredness • Running away/stealing/lying • Humiliating, taunting or threatening a child whether in front of others or alone. • Persistent lack of attention, warmth or praise. • Shouting/yelling at a child • Radicalisation – use of inappropriate language, possession of violent extremist literature, behavioural changes, the expression of extremist views, advocating violent actions and means, association with known extremists, seeking to recruit others.
Indicators of Possible Sexual Abuse	• Language and drawing inappropriate for age. • Child with excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour • Regularly engages in age inappropriate sexual play • Sexual knowledge inappropriate for their age • Wariness on being approached • Soreness in the genital area or unexplained rashes or marks in the genital areas • Pain on urination • Difficulty in walking or sitting • Stained or bloody underclothes • Recurrent tummy pains or headaches • Bruises on inner thigh or buttock. • Any allegations made by a child concerning sexual abuse • Sexual activity through words, play or drawing • Child who is sexually provocative or seductive with adults • Inappropriate bed-sharing arrangements at home • Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations • sexual language or know information that you wouldn't expect them to • Eating disorders - anorexia, bulimia • Unaccounted sources of money • Telling you about being asked to 'keep a secret' or dropping hints or clues about abuse. • Pregnancy

Remember- Signs and symptoms often appear in a cluster, but also many of the indicators above may be caused by other factors- if in doubt check it out. The most important factor is a report by the child

Appendix B

Designated Child Protection Person

1. DBC have a dedicated team to take responsibility for child protection matters.
2. They have selected by Management and trustees
3. Because of their key role in keeping children safe, DBS checks will be undertaken and 2 references taken up.
4. Their role is to;
 - Ensure DBC child protection policy and procedures are followed.
 - Ensure they know how to make contact with First Response– Advice and Referral Team and the police who are responsible for dealing with child protection concerns both during and after office hours.
 - Report any concerns to First Response Advice and Referral Team or the police. (N.B. Urgent concerns should be reported immediately by those aware of them even if the designated person is not available.)
 - Act as a source of advice on all child protection matters and seek further advice and guidance from local statutory agencies as needed.
 - Ensure that a record is kept of any concerns about a child or adult and of any conversation or referrals to statutory agencies.
 - Maintain and regularly update their knowledge of child protection and safeguarding children through relevant training
 - Conduct regular audit activity to ensure DBC is working in line with current practice

See Appendix F

Appendix C

Guidance for Staff and Volunteers

DBC believes that EVERYONE has a responsibility to safeguard children from harm. Please read this guidance carefully. It will tell you what you need to know to safeguard children.

All staff and volunteers are expected to follow this guidance.

1. The Child Protection designated lead for DBC is Elaine Blaby. They can be contacted by telephone 01827250454/07872341479 and email meblaby@hotmail.com. If you have any queries around the welfare of any child please contact them.
2. Please read: -
 - This guidance
 - The Code of Conduct for staff and volunteers
 - 'What To Do If You're Worried A Child Is Being Abused' (DfES) and the additional information on recognising a child in need and what to do next

You must follow the advice given in the documents above. If there is anything that you do not understand or do not agree with please talk to the Child Protection designated lead about this.

3. All staff and volunteers must inform the Child Protection designated lead if they are: -
 - Charged with a criminal offence involving a child, violence, breach of trust or a criminal offence relevant to their duties, for example driving offence if they are driving as part of their duties.
 - Investigated by any authority due to concerns that you may have had involvement in causing harm to a child.
 - Diagnosed with any medical condition that may affect your ability to carry out your role with children safely, for example psychotic illness.
4. Make sure you know what to do if a child tells you or you suspect that they are being harmed.

Action to take:

1. If a child has a serious injury (for example involving pain and bleeding) or is in immediate danger (for example parent has arrived to collect a child and is unfit to care for them, or a child left alone at home) dial 999 and request assistance from the ambulance service and/or police. If you know or suspect the child has come to harm through the actions of another make sure that the professional staff you hand the child over to understand this and take their name and record it. It will generally be appropriate to inform the child's parent or carers what has happened once the child is safe with an appropriate professional.
2. If it seems that a child has been abused in any way including sexual abuse (but is not in immediate danger) report this immediately to the service for the area where they live. The numbers are;

Staffordshire's First Response

0800 1313 126

8.30am – 5.00pm Monday to Thursday, 8.30am- 4.30pm Friday

EDS (out of hours) Tel No. 0345 604 2886

If a child is immediate danger call 999 or 101 for non emergency calls

3. If the concern is long term rather than immediate, for example a child who is often dirty, smelly or who has disruptive behaviour, you should discuss this with the child protection designated lead who will decide whether to make a referral.
4. If you have had to make an emergency referral, tell the child protection designated lead as soon as possible. They should follow up and take further advice if they think the action that First Response/Advice and Referral Team take leaves the child in danger.

Code of Conduct

1. Always remember that while you are caring for other people's children you are in a position of trust and your responsibilities to them and to DBC must be uppermost in your mind at all times.
2. Never use any kind of physical punishment or chastisement such as smacking or hitting.
3. Do not smoke in front of any child or young person.
4. Do not use unprescribed drugs or be under the influence of alcohol.
5. Never behave in a way that frightens or demeans any child or young person.
6. Do not use any racist, sexist, discriminatory or offensive language.
7. Do not give your personal contact details / personal website details to children or young people.
8. Do not use internet or web-based communication channels to send personal messages to/ befriend children / young people.
9. Do not use mobile telephones or any other devices to take images of children and young people. You should always follow DBC policy and procedures in relation to the taking or recording of images and informed written consent from parents / carers should always be sought. For further advice and guidance on the use of social networking sites/ mobile phones/ computers/ cameras, please visit www.ceop.police.uk
10. Generally you should not give children presents or personal items. The exceptions to this would be a custom such as buying children a small birthday token or leaving present or help to a family in need such as equipment to enable them to participate in an activity. Both types of gift should come from DBC and be agreed with the named person for child protection and the child or young person's parent. Similarly do not accept gifts yourself other than small tokens for appropriate celebrations, which you should mention to the Leader of DBC.
11. Exercise caution about being alone with a child or young person. In situations where this may be needed (for example where a young person wants to speak in private) think about ways of making this seem less secret for example by telling another worker or volunteer what you are doing and where you are, leaving a door ajar, being in earshot of others and lastly note the conversation in the log.
12. Physical contact should be open and initiated by the child's needs, e.g. for a hug when upset.
13. Do talk explicitly to children and young people about their right to be kept safe from harm.
14. Do listen to children and young people and take every opportunity to raise their self-esteem.
15. Do work as a team with your co-workers/volunteers. Agree with them what behaviour you expect from young people and be consistent in enforcing it.
16. If you have to speak to a child/young person about their behaviour remember you are challenging 'what they did' not 'who they are'.
17. Do make sure you have read the Child Protection Procedure and that you feel confident that you know how to recognise when a child may be suffering harm, how to handle any disclosure and how to report any concerns.
18. Do seek advice and support from, the leader of DBC, and other helpers, management and your designated person for child protection.
19. Remember to enjoy yourself!

Appendix D

Information for Parents

We want this organisation to be a safe place for children. We have a child protection policy and procedure. You can ask for a full copy of this. Below is a brief summary of the key points.

We aim to keep children safe by:

- Having a designated person for child protection who is Elaine Blaby
- Please contact Elaine Blaby if you have any concerns about any child or the behaviour of any staff or volunteers at DBC
- Ensuring all staff and volunteers are properly checked
- Making proper arrangements for all activities.
- Having a code of conduct for staff/volunteers and making sure that all staff and volunteers know what to do if they have concerns about a child.
- Following National and Local Child Protection Procedures and particularly do this by reporting any serious concerns to First Response or the Police as appropriate.

We would ask you to support us in keeping children safe by:

- Following the code of conduct and treating people with respect
- Providing basic details when requested in parental consent forms with contact details so we can contact you if there is an emergency.
- Talking to the designated person for child protection if you have concerns about any child using DBC or the behaviour of any adult in DBC

Appendix E

Complaints Procedure Notes

1. The person responsible for complaints is leader of DBC
2. In the event of the complaint being against them complaints should be made to Chairperson of DBC
3. If the complaint leads to any suspicion that a criminal offence may have been committed against a child the complaint should be referred to First Response (Staffordshire) / Advice and Referral Team (Stoke) and the police.
4. Similarly a complaint that leads to a suspicion of abuse of a child that does not seem to be a criminal offence should be referred to First Response (Staffordshire) / Advice and Referral Team (Stoke); they will refer to the Police if needed.
5. Other matters may need to be referred to the local police station, e.g. theft.
6. Once the complaint has been investigated, the complaints office will meet with the complainant to tell them the outcome of the complaint and what action if any is open to them if they do not agree with the outcome.

Chairman Signature: *N. Dean*

Date: 02/07/2026