



St. Noa's Primary School, Nansana, Uganda

# **Volunteer Mission Movement (VMM)**

## **Child and Vulnerable Persons Safeguarding Policy**

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## Policy Statement

The Volunteer Mission Movement's (VMM) child and vulnerable persons safeguarding policy is based on national guidelines, international standards and the United Nations Convention on the Rights of the Child. This policy has adapted from safeguarding standards developed by and recommendations from the Irish National Board for Safeguarding Children in the Catholic Church and Keeping Children Safe. VMM also commits to uphold national legislation and follow national policy in the countries where we work, including:

### Ireland

- Protections For Persons Reporting Child Abuse Act 1998
- Criminal Justice Act 2006, Section 176 – This makes it an offence to recklessly endanger the welfare of a child.
- Criminal Justice (Withholding of Information on Offences against Children & Vulnerable Persons) Act 2012
- National Vetting Bureau Acts (Children & Vulnerable Persons) 2012 – 2016
- The Children First Act 2015
- Criminal Law (Sexual Offences) Act 2017
- Children First: National Guidance for the Protection and Welfare of Children (2017)

### UK / England

- The Children's Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children (2015)

### Kenya

- The Children's Act 2001
- The Penal Code (amended 2003) (Cap. 63)
- The Sexual Offences Act (No. 3 of 2006)
- The National Plan of Action for Children in Kenya 2015

## VMM's Commitment to Safeguarding

VMM is committed to safeguarding children, young people and vulnerable adults, and promoting their wellbeing and safety. Safeguarding is the responsibility of all VMM staff, volunteers, interns, Board members, consultants, and VMM partner organisations.

A child is any person/s aged from birth to 18 years, as defined in the United Nations Convention on the Rights of the Child.

A vulnerable adult is a person aged 18 years or older who is unable to protect him or herself from abuse or exploitation, or who is in need of extra care, due to a learning or physical disability, a physical illness, mental health difficulties, or because of status or power deferential. Such persons include but are not limited to refugees, internally displaced persons (IDPs), persons with disabilities, trafficked persons, frail, isolated and other non-independent or institutionalized adults.

VMM is committed to safeguarding all children irrespective of ability, ethnicity, faith, age, gender, sexuality, or cultural background. We recognise that many children are at greater risk of abuse or face greater difficulties in getting help because of their disability, gender or other factors. We must be sensitive to this and in some cases may need to adapt our safeguarding procedures to ensure inclusion and access.

All organisations have a duty of care to children and vulnerable people that they work with, are in contact with, or who are affected by their work and operations. This policy has been written to ensure that VMM takes every possible measure to prevent abuse. VMM aims to minimise the risk of any of our staff, volunteers, associates or partners engaging in behaviour that allows abuse to occur or acting in a way that could be misinterpreted by children, their families or other adults as abuse, or as leading to abuse.

#### **This purpose of this policy is to:**

- ensure VMM identifies and manages risks to children and vulnerable persons in our operations and projects
- ensure best practice in the recruitment of staff and volunteers, which includes police vetting, reference checks, good human resource practices in interviewing, induction training and ongoing supervision and management;
- ensure that staff members and volunteers are aware of how to recognise signs of child abuse or neglect;
- develop procedures for staff and volunteers who may have concerns about the safety and welfare of children associated with the organisation in Ireland/UK & internationally;
- identify Designated Officers to act as a liaison with outside agencies and resource persons to any staff member or volunteer who has child safeguarding concerns. The Designated Officers are responsible for receiving allegations or suspicions of child abuse and taking appropriate action.

**This policy applies to all people who have a current agreement or contract with VMM in all countries where we work, at all times, whilst at work and outside of work. This includes VMM staff, volunteers, interns, Board members, consultants and associates.** In relation to partner organisations, the VMM Child and Vulnerable Persons Safeguarding Policy should be read in conjunction with the policy of the partner organisation.

All VMM partner organisations and other third parties must have either have their own child safeguarding policy or must abide by and sign up to the VMM Child and Vulnerable Persons Safeguarding Policy for the duration of our partnership. VMM will assist our partners to develop and implement their own safeguarding policy.

#### **Preventing Harm to Children**

VMM are committed to building a culture of safety in our organisation and preventing harm to children and vulnerable persons. Because of this child and vulnerable person safeguarding measures are integrated into our organisational systems and processes.

#### **VMM safeguarding risk assessment and mitigation**

VMM commits to assessing potential safeguarding risks in our operations, projects and where we work so that we can plan how to prevent and reduce the risk of harm to children and vulnerable persons.

VMM will continue to carry out mapping for each country where we work. This mapping will include the legal context, common child rights violations, and the national child protection system. Please find a link to a mapping and assessment toolkit here:

[https://www.unicef.org/protection/files/Mapping\\_and\\_Assessment\\_users\\_guide\\_Toolkit\\_En.pdf](https://www.unicef.org/protection/files/Mapping_and_Assessment_users_guide_Toolkit_En.pdf)

VMM must also carry out documented safeguarding risk assessments for all VMM programmes, projects, operations, and activities involving children. Safeguarding risk assessments will be part of VMM's due diligence with future and existing partner organisations, and in planning and evaluation of projects and programmes, if deemed necessary. VMM managers must ensure this risk assessment is carried out for their respective projects, programmes, partnership or area of operation.

VMM will adapt and use risk assessment tools in Appendix 5.

Risk assessment will also include:

- Establishing the context, scope and setting of VMM's work e.g. Is child abuse prevalent where we work or where our partners work?, Are laws and authorities weak in responding to child abuse where we work or where our partners work?
- Identifying VMM's potential impact on or contact with children e.g. Do we work with children? Do we bring staff and associates into contact with children? Do our partners work with children? What impact do we have on communities and children?
- Identifying and analysing the potential risks of that impact or contact.
- Evaluating the likelihood of risks and the seriousness of the impact on children.
- Implementing strategies to minimise and prevent risk.

### **VMM employee and volunteer recruitment and selection<sup>1</sup>**

You should consider the impact of your decisions on children and vulnerable persons and consult children on any issues that affect them. It is important that you act in a way that considers child safety at all times, such as keeping doors open when meeting children, ensuring privacy and personal space and an appropriate level of physical contact. Please see Child Protection Code of Conduct, Appendix 5.

#### **VMM safe recruitment and selection procedures include:**

1. Always apply thorough standard selection procedures, no matter who the applicant is.
2. VMM must provide a clear **job description** to employees and volunteers and consider what level and type of contact with children the post requires, if the post holder will have unsupervised access to children, or hold a position of trust?
3. All **advertised vacancies** must refer to VMM's safeguarding policy and the relevant experience needed if the post involves working directly with children.
4. Employees or volunteers must sign a declaration stating that there is no reason why they would be unsuitable to work with children, young people or vulnerable adults.
5. A **Garda or Police clearance** must be received in writing and kept on record for all international posts or if the post requires contact with children in the UK or

<sup>1</sup> In this context, employees and volunteers are defined as any person who has signed an agreement form with VMM.

Ireland. **NOTE:** All VMM international volunteers will come into contact inside or outside of work as they live in communities with children. Therefore, all VMM international volunteers must be vetted.

6. At minimum, **interviews** must be well-planned and include a discussion on child safeguarding, the candidate's understanding of this and the VMM's commitment. Interviews should include specific questions about relevant experience and knowledge of child safeguarding, as well as attitudes to the protection of children. Can they give examples of where they have acted to protect a child, what they learnt from this, what impact it has had their current practice?
7. Get **at least two references**, including some from previous employees or others who can give verbal references if requested. References should ask if there are any issues or concerns in relation to the person working with children, young people or vulnerable adults. Verify the identity of the referees.
8. Each employee/ volunteer must provide **proof of identification** before starting work.
9. Safeguarding policy and procedures must be included in **orientation and induction training** so that all staff, volunteers etc. understand child safeguarding standards and their role in implementation.
10. VMM staff must update their police clearance and vetting through their relevant Designated Officer every two years. If a VMM volunteer is applying for another VMM post, he/she must also update their police clearance/vetting.
11. VMM international volunteers must obtain a letter from their relevant police stations in their country of assignment, indicating if the police are aware of any misconduct in regard to safeguarding children and vulnerable persons. The letter will be considered when assessing a VMM volunteer for extension or a new assignment.

### **Training and Education for Keeping Children Safe**

It is the responsibility of all employees and volunteers to ensure they are familiar with the VMM Child and Vulnerable Persons Safeguarding Policy. It is included as part of the orientation and induction of all new employees and volunteers.

The VMM Designated Officers are required to attend child safeguarding training. If any employee feels they do not have adequate knowledge or skills in child safeguarding, it is their responsibility to approach their line manager. VMM will then endeavour to support them to undertake such education or training.

VMM partner organisations must agree to review their Child Safeguarding Policies against Irish National Board for Safeguarding Children in the Catholic Church and Keeping Children Safe standards. Partner organisations must attend VMM Child Safeguarding workshops and co-operate with VMM on safeguarding self-audits and safeguarding monitoring visits. Partner organisations must inform the VMM Africa Designated Officer and/or the VMM Safeguarding & Protection Programme Manager of any amendments or changes to the Child Safeguarding Policies they submitted to VMM, including any updates to Partner Designated Officers.

### **Making Information Available**

The VMM Safeguarding Policy must be available and visible in all VMM Offices, on the website and upon request. It is included as part of the orientation and induction of all new employees and volunteers. Our Commitment to Safeguarding statement and the VMM reporting procedure



flowchart must be laminated and displayed in all VMM offices with contact details of the Designated Officer.

In addition, child safeguarding emergency contact details must be made visible within all VMM Offices.

If working directly with children, VMM should develop child-friendly materials to clearly communicate VMM's safeguarding procedures, especially the reporting procedure and how staff and volunteers are expected to behave i.e. code of conduct. Information should be age-appropriate and communicated to children in simple language and through the use of visual aids and pictures so all levels of understanding are met.

It is essential to minimise the risk of inappropriate use of information, stories and images (photographs, video or social media) of children and other vulnerable people. VMM have signed and require all staff, volunteers and other associates to adhere to the Dóchas Code of Conduct on Images and Messages in our publicity materials. We strongly recommend our partners also adhere to the code. Please see <http://www.dochas.ie/images-and-messages> for further information.

#### Tips for good practice when using media:

- Don't publish a child's name with their photo.
- Images of children must not show them in states of undress or in inappropriate poses.
- Details attached to images and included in stories must not allow that child to be traced to his or her home or community.
- Geotagging of images should be disabled when taking photos.
- Ensure the photographer/journalist/translator you have employed has been properly vetted and reference checked.
- Make sure you have been given permission by children and their parents/carers to take their image and use their information.

Additional information in relation to children's rights and child safeguarding is available at <http://www.tusla.ie/services/child-protection-welfare/> and <http://www.unicef.org/crc/>. There are copies of 'Children First: National Guidance for the Protection and Welfare of Children' and 'Our Duty to Care' in the VMM offices.

## Participation

VMM recognises the importance of the participation of children, young people and vulnerable adults. We are committed to increase children's participation in all areas of our work, in so far as we are able to do so **safely and effectively**, given that not all our staff or partner staff are trained to worked directly with children. Meaningful child participation will be part of VMM's planned Child Rights and Responsibilities Clubs.

VMM should ensure that child participation:

- Is useful and not tokenistic;
- Helps to skill up and empower young people as citizens;

- Is safe for children in the widest sense of the word – run sensitively with the option of support for children and young people should the discussions raise issues of abuse and trauma.
- Is run in child-friendly ways that help focus children on the task and get the best out of them.

### **Recognition of child abuse**

Child abuse is any form of physical and/or emotional ill-treatment, sexual abuse, neglect or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power. A child may be subjected to one or more forms of abuse at any given time. Abuse and neglect can occur within the family, in the community or in an institutional setting. Child abuse occurs in all socio-economic groups, genders and cultures. The abuser may be someone known to the child or a stranger, and can be an adult or another child. See Appendix 1 for definitions of abuse.

Child abuse can often be difficult to identify and may present in many forms. There are three stages in the identification of child abuse:

#### 1. Considering the possibility

The ability to recognise child abuse can depend on a person's willingness to accept the possibility of its existence. The possibility of abuse should be considered if:

- a child has suffered an injury that cannot be reasonably explained;
- a child appears distressed without reason;
- a child displays persistent or new behavioural problems;
- a child displays unusual or fearful responses to certain people such as parents or siblings.

All signs and symptoms should be considered in the context of the child's situation and family circumstance.

#### 2. Looking out for signs of abuse

Signs of abuse can be physical, behavioural or developmental. They include:

- disclosure of abuse by a child or young person;
- inappropriate age or abnormal sexual play or knowledge;
- specific injuries or patterns of injuries;
- absconding from home or care situation;
- self-harm or attempted suicide.

A cluster or pattern of signs is more likely to be indicative of neglect or abuse. It is important to reassure the child and ensure they feel they have been listening to and believed without being questioned in depth.

#### 3. Recording of information

If neglect or abuse is suspected, it is important to obtain as much information as possible. However, the child should not be questioned in detail about the abuse without consulting with



the National Children and Family Services<sup>2</sup>. Observations in relation to the concern should be accurately recorded and include specific details.

It is not the role of the Designated Officers to investigate concerns or allegations. This is the role of the national agency, who have a statutory responsibility to undertake such assessments and investigations.

Other points to remember for recognising child abuse:

- A child or vulnerable person's challenging behaviour is never an excuse for abuse, including physical punishment.
- The severity of a sign does not necessarily equate with the severity of the abuse.
- Experiencing reoccurring low-level abuse may cause serious and long-term harm.
- Exposure to domestic violence is detrimental to children's physical, emotional and psychological well-being.
- It can be difficult to distinguish between signs of child abuse and other difficulties suffered by children and families. However, **the child's welfare should always be the first concern and if you suspect abuse you have a duty to report.**

### **Allegations and Suspicions of Abuse**

All members of the public have an obligation to report any concerns in relation to child abuse or welfare. Ignoring signs of abuse / neglect or failing to act may result in ongoing or further harm to the child and criminal prosecution.

1) Reporting procedures for all VMM volunteers, staff members, board members, consultants and associates

- a) If you have a concern, suspicion or allegation about **external abuse** i.e. abuse in the community or the home, outside of VMM or VMM partner projects

If any person associated with VMM has a concern that a child may have been, is being, or is at risk of being abused or neglected, they should contact the appropriate Designated Officer in VMM.

If working with a VMM partner organisation, concerns should be raised with the Partner Designated Officer.

If the Designated Officer is not available, you should contact the Deputy Designated Officer. If the Deputy Designated Officer is also unavailable and you have an immediate concern, contact the National Children and Family Services for advice and guidance.

If you think a child is in immediate danger and you cannot contact the National Children and Family Service, you should contact the Police.

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<sup>2</sup> The term 'National Children and Family Services' refers to the national organisation in each country that has responsibility for child safeguarding and child protection.

It is important to ensure that **confidentiality** is maintained at all times. This means that only those that need to know should be told of the suspicion / allegation / disclosure of abuse and the number that need to be kept informed should be kept to a minimum.

- b) If you have a concern, suspicion or allegation about **internal abuse** i.e. related to behaviour of a VMM staff member, volunteer, consultant or associate OR a VMM partner staff member, partner volunteer, consultant or associate.

If working with a VMM partner organisation and your concerns relate to a VMM partner staff member, partner volunteer, consultant or associate, concerns should be raised with the Partner Designated Officer.

If working with a VMM partner organisation and your concerns relate to a VMM staff member, volunteer, consultant or associate, concerns should be raised with the Partner Designated Officer **and** the VMM Designated Officer, who will address the concern collaboratively.

### VMM Designated Officers Contact Details

#### Designated Officer for VMM International

Name: Fiona Duignan

Address: VMM International, 68 Abbey Street Middle, Dublin 1, Ireland.

Tel: (+353) 1 8734562 / (+353) 892523285

Email: fiona@vmminternational.org

#### Designated Officer in VMM for the Africa Office

Name: Tim Flynn

Address: VMM Africa Office, c/o PO Box 4656, Kitale 30200, Kenya

Tel: (+254) 735 583799 / (+254) 714 254790

#### Designated Officer for VMM in the UK

Name: Van Garber

Address: VMM England and Wales, Hope University College, Hope Park, Liverpool L16 9JD, UK

Tel: (+44) 151 291 3438 / (+44) 79 775 13337

Email: van@vmminternational.org

### National Child and Family Services Contact Details

Ireland		
	<u>Túsla Children &amp; Family Agency</u>	<u>An Gardaí Síochána</u>
National:	01 7718500	01 6660000
Local:	01 9213400	01 6666700 - (Rathgar Rd)
	↓	↓
	(To discuss/report a concern, Dublin South City)	

Kenya	
<u>Director for Children's Office, Kitale</u> Mr. Maungu Tel: (+254) 729873802	<u>Police, Kitale</u> Tel: (+254) 722714323
<u>Gender Recovery Centre, Kitale District Hospital</u> Sr. Sarah Tel: (+254) 720866463	

UK – National and Liverpool		
	<u>Department of Health</u>	<u>Police (local)</u>
National:	Tel: 0207 210 4850	999
Local:	Children Services Tel: 0151 285 4661	Merseyside Police, Canning Place, Liverpool, L1 8JX. Tel: 0151 709 6010
Social Care Team Tel: 015 1233 370		
<b>Get advice:</b>		
Contact the NSPCC if you want to discuss your concerns and get advice. NSPCC (for adults) Telephone: 0808 800 5000		
ChildLine (for children and young people) Telephone: 0800 1111 (free) The ChildLine number won't show up on your phone bill if you call from a landline or from most mobile networks.		

Africa and Asia
Please refer to partner child safeguarding policies for national social services and police contacts. If working directly for VMM, please ask the VMM Designated Officer.

In addition, a concern about a potential risk to children posed by a specific person should be communicated to the National Children and Family Services without delay, even if it is not possible to identify particular children. This may arise in cases where adults disclose historical abuse.

### **Historical Abuse**

If you receive a disclosure from an adult that they were abused as a child you should report this information to the National Children and Family Services, as the alleged abuser may pose a current or future threat to children.

## 2) Additional Reporting Procedures for VMM Designated Officers / Safeguarding Focal Points

### **VMM Designated Officers for Safeguarding**

VMM has Designated Officer for Safeguarding in each of its offices. The Designated Officers have specific responsibility for ensuring effective safeguarding procedures are followed within VMM.

If VMM establishes a new VMM-managed project outside the range of these VMM offices, the VMM project manager of the new project will be appointed as the Safeguarding Focal Point for the project. The Safeguarding Focal Point must ensure compliance with this policy in their area of responsibility.

The Designated Officers have the following responsibilities:

- Be a resource person to any staff member or volunteer who has child safeguarding concerns;
- Ensure that the standard reporting procedure is followed so that concerns are appropriately responded to;
- Have up-to-date knowledge about child protection and safeguarding;
- Undertake any training necessary on new developments;
- Co-operate with outside agencies as necessary;
- Ensure a written record of any child safeguarding or protection issues is maintained and stored securely;
- Appoint a Deputy Designated Officer to cover for periods of approved leave.

*Note: where an allegation or suspicion is made against the Designated Officer, the information must be passed to the Deputy Designated Officer and the process as outlined should be carried out by the Deputy Designated Officer.*

### The role of the Designated Officer

1. Receive information about a concern or allegation.
2. Ensure the procedure about how to respond to concerns, suspicions, allegations and disclosures of abuse involving staff and volunteers is followed and that a referral has been made to the statutory authority if appropriate.
3. Create a child protection case file for every case received and ensure a referral is made, if needed. Entries should be made as soon as possible after the event. They must be timed, dated and signed by the author.
4. Take possession of any written records made by any person in connection with the case and place them on the Child Protection Case File.

5. After receiving a report, conduct an initial assessment, considering the following points:

- Source of the complaint
- Nature and context of allegations e.g. is it a case of traditional cultural practice?
- Time span and when incident/s are alleged to have taken place
- How many victims?
- How many perpetrators?
- Who else might be involved or have relevant information?
- What risks need to be considered when taking further action? e.g. Could a child/children be put at further risk by informing the alleged perpetrator of the allegation?
- Does it involve a partner organisation, associate or NGO?

6. Explain the procedures for addressing the concern to the person who has raised the concern and discuss issue of confidentiality and data protection with them.

6. Contact emergency or appropriate services where a child appears to be at immediate and serious risk of harm. An immediate referral should be made to the National Children and Family Services. If it is not possible to contact the National Children and Family Services, the Police should be contacted to ensure that a child is not left in a dangerous situation.

7. Inform relevant VMM staff member/s that a concern has been raised/allegation has been made and recommend action(s) that may need to be taken in order to ensure the safety of children.

8. Make discrete enquiries to identify the present and previous appointments of the person involved in order to establish whether there are any previous concerns about his/her practice, or any current grounds for concern in relation to the safety and well-being of children.

10. Conduct an initial interview with the person against who the allegation was made as soon as possible. The purpose of the interview is to inform the respondent of the existence of the allegation and of the process being followed. The respondent shall be given information about his or her entitlement to seek legal advice and about the child protection process. The respondent should be informed that he/she is not obliged to respond or to give evidence, but that any statement provided will be taken into account in the investigation. The Designated Officer should then inform the respondent of the nature and detail of the allegation/concern. The respondent needs to be given enough detail about the disclosure/allegation/concern to be able to offer a response. A written record of the interview must be prepared, agreed with the respondent, signed and dated.

It is essential that any such interview should be conducted in cooperation with any statutory investigation. The timing of this interview should not impede any external enquiries.

11. Complete the relevant reporting forms. See templates in appendix section.

**12. If a Designated Officer has a concern about a child but is not sure what to do, he or she should seek advice from the Child and Family Services or the Police.** The Designated Officer must keep a written record of the outcome of the consultation with the Child and Family Services / Police on the Child Protection Case File.

13. Follow the advice of Child and Family Services / Police where a child protection concern has been referred to them. Allow the Child and Family Services / Police to conduct their enquiries unimpeded. Do not visit the family or contact family members without prior discussion with investigators.

14. Maintain a dialogue with the Investigating Officer or Social Worker to monitor the progress of the case and act on any advice given. Details of contacts made should be recorded chronologically on the Child Protection Case File.

15. Request for a written account of the outcome of investigation from the Child and Family Services / Police.

16. In cases where the Designated Officer decides not to report concerns to the National Children and Family Services or the Police, the individual staff, volunteer or member of the public who raised the concern should be given a clear written statement of the reasons why it is not being reported. They should be advised that if they remain concerned about the situation, they are free to contact the National Children and Family Services or the Police themselves.

17. Conduct an internal investigation if an external investigation does not take place for some reason. Any internal investigation will take place if child protection concerns remain or disciplinary action needs to be considered. Such an investigation will gather and assess available information from all sources and witnesses. In cases where there is a delay, and particularly where a volunteer or staff is suspended from duties, it is important to keep everyone informed of the progress of the investigation and to maintain records of such communications.

Ignoring the signs or failing to act may result in ongoing or further harm to the child and criminal prosecution.

#### **Procedure if an allegation is made against a VMM volunteer, staff member, board member or consultant**

*Note: This procedure applies to anyone on signed contract or Agreement with VMM. The allegation should be assessed promptly and carefully by the VMM Designated Officer as soon as possible after it is received. It is important that confidentiality is maintained. This means that only those that need to know should be told of the suspicion / allegation / disclosure of abuse and the number that need to be kept informed should be kept to a minimum. Any action taken should be guided by standard procedures set out in this policy.*

1. **The first priority is to ensure that no child is exposed to unnecessary risk.** VMM will take any protective measures necessary as soon as possible. Such measures should be proportionate to the level of risk.
2. The VMM CEO should be informed about the allegation as soon as possible. If an allegation from outside the UK or Ireland is made against a VMM staff member, volunteer or consultant while working with a VMM partner organisation, the Partner Designated Officer must inform the VMM Africa Designated Officer at the earliest opportunity, who will then inform the CEO.
3. The VMM Designated Officer should inform the VMM staff member, volunteer etc. that an allegation has been made against them and the nature of the allegation. **Note:** It is essential that such contact should be conducted in cooperation with any statutory investigation and should not impede any external enquiries.
4. The VMM staff member, volunteer etc. should be given the opportunity to respond. This response should be noted and passed to the National Children and Family Services if a report is made.
5. It will be necessary to decide if a formal report should be made to the National Children and Family Services.
6. The named individual may be suspended pending the outcome of the investigation by Children and Family Services and the police. The alleged abuser may be suspended pending the

outcome of an investigation by the social services, police and / or findings from the VMM and Partner Designated Officers.

7. The CEO should be informed of the outcome of an investigation and / or assessment.

### **Access to Advice and Support**

The Designated Officer must be available to offer safeguarding support and advice to any person who has an agreement or contract with VMM, or any beneficiary of a VMM project.

The VMM Designated Officers will be supported appropriately by VMM in terms of guidance and counselling if dealing directly with an issue of child abuse.

The National Children and Family Services can provide advice, guidance and support to any person in relation to child and vulnerable person safeguarding or abuse.

#### **Ireland**

For general support/someone to listen contact:

- Childline Tel: 1800 666 666
- Cari Foundation (Children At Risk in Ireland) Tel: 1890 924 567
- Rape Crisis Centre Tel: 1800 77 88 88
- Samaritans Tel: 1850 60 90 90
- Stop It Now! Tel: +44 808 1000 900

For Survivors of Child Sexual Abuse contact:

- One in Four Tel: 01 622 4070
- Faoiseamh Tel: 1800 331 234
- Connect Tel: 1800 477 477 from Republic of Ireland  
Tel: 00800 477 477 77 from Northern Ireland

For Parents and carers of children who have been sexually abused contact:

- ISPCC Tel: 01 6767960
- Barnardos Tel: 1850 222 300
- HSE: 1850 241 850
- Female Genital Mutilation Treatment Service offers specialised medical care and counselling (phone or text, confidential line).  
Tel: +353 1 872 7088, 085 8771342

Túsla employs Children First Information and Advice Officers, who provide organisations with advice and guidance. The contact details for the Officer responsible for Dublin North City, where the VMM office is located, are:

Children First Information and Advice Officer,  
Child and Family Agency,  
180 - 189 Lakeshore Drive,  
Airside Business Park,  
Swords,  
Co Dublin  
Tel: (01) 8708000

The HSE National Counselling Service for Adult Survivors of Childhood Abuse contacts contacts in your area can be found using the following link:  
[http://www.hse.ie/eng/services/list/4/Mental\\_Health\\_Services/National\\_Counselling\\_Service/nationalcounsellingservicebranches.pdf](http://www.hse.ie/eng/services/list/4/Mental_Health_Services/National_Counselling_Service/nationalcounsellingservicebranches.pdf).



**UK**

For safeguarding training:

Barnados UK Tel: 01514881174

Email: kathy.franey@barnardos.org.uk

For general support/someone to listen contact:

National Society for the Prevention of Cruelty to Children (NSPCC) Advice line:  
0808 800 5000.

NSPCC FGM Helpline: 0800 028 3550

Stop It Now Freephone: 0808 1000 900

It is the responsibility of the CEO to ensure VMM Designated Officers are appointed.

It is the responsibility of the VMM Designated Officers to ensure a Deputy Designated Officer is appointed for periods of approved leave and the CEO is informed in advance of leave.

All people who have an agreement or contract with VMM are responsible for ensuring the VMM Safeguarding Policy is implemented

The VMM Designated Officers and VMM managers – CEO, International Programmes Manager, Africa Office Manager, UK Regional Manager, VMM Project Managers – are responsible for promoting the VMM Safeguarding Policy.

Senior managers have specific responsibility for overseeing the implementation of the policy in VMM. Safeguarding should be on the agenda in all the VMM board meetings and senior management involvements in order to ensure regular strategic planning for the implementation of the child and vulnerable person safeguarding measures.

### **Policy review**

A regular monitoring of safeguarding policies and procedures is necessary to ensure implementation and efficiency. This enables VMM to make any amendments and ensures VMM is continuously striving to make the organisation as child-safe as possible.

The review and monitoring system includes the following components:

- Formulating a 3 year safeguarding work plan for VMM to roll out the safeguarding policy. This work plan will be reviewed quarterly by the VMM Africa Safeguarding Committee and a summary report will be written for the CEO.
- Learning from any cases if they arise.
- Personnel records kept up-to-date.
- Job descriptions for new positions contain reference to safeguarding policies.
- Checking that training has been provided and attended.

- Monitor changes in the area of child and vulnerable person safeguarding at local and national level such as comparing policies with similar organisations, changes in legislation, new guidelines.
- VMM will review the Child and Vulnerable Persons Safeguarding Policy and any associated documents and practices at regular intervals.
- Staff and volunteers are essential stakeholders in the policy review process and will be encouraged to be actively involved.
- The VMM Designated Officers must conduct a self-audit every year and submit it to the CEO (see appendix 5).

**Policy revised date**            Dec 2017

**Policy review date**            Dec 2020

**Signatures**

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VMM Chairman

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VMM Chief Executive Officer

## Appendix 1

### Definitions of Abuse

**Physical abuse** is when someone deliberately hurts a child physically or puts them at risk of being physically hurt. There may be single or repeated incidents.

Physical abuse can involve physical punishment, beating, slapping, hitting, kicking, punching, pinching, biting, choking, hair-pulling, pushing, shaking, throwing, burning, use of excessive force in handling, deliberate poisoning, fabricated/induced illnesses, and female genital mutilation.



**Emotional abuse** occurs when a person in a position of power, authority or trust (parent, carer, teacher etc.) **repeatedly attacks a child's self-esteem verbally or non-verbally**. Emotional abuse can occur directly (in person) or indirectly (using technology), e.g. on-line bullying.

Examples may include persistent criticism, belittling, taunting, degrading, humiliation, blaming, isolation, intimidation, bullying, harassment, or exposure to domestic violence.

A child may show signs of emotional abuse through their actions or emotions in several ways. Examples include insecure attachment, unhappiness, low self-esteem, educational and developmental underachievement, risk taking and aggressive behaviour. Children who are physically and sexually abused and neglected also suffer from emotional abuse.

**Neglect** is the failure to provide for a child's basic needs. The child suffers significant harm or impairment of development because she/he is deprived of, clothing, shelter, intellectual stimulation, education, hygiene, medical and dental care, adequate rest, supervision and safety, moral guidance and discipline, attachment to and affection from adults etc.



### Child Neglect can include:

**Physical neglect** – failure to adequately meet the child's needs for nutrition, clothing, health care, and protection from harm

**Emotional neglect** – failure to satisfy the developmental needs of a child by denying the child an appropriate level of affection, care and security.

A distinction can be made between 'wilful' neglect and 'circumstantial' neglect. Wilful neglect is a deliberate deprivation by a parent/carer of a child's most basic needs. Circumstantial neglect may be due to stress or inability to cope by parents or carers.

Neglect generally becomes apparent in different ways *over a period of time* rather than at one specific point. For example, a child who suffers a series of minor injuries may not be having his or her needs met in terms of supervision and safety. A child whose height or weight is significantly below average may be deprived of adequate nutrition. A child who consistently misses school may be deprived of intellectual stimulation.

**Sexual abuse** when a child is used by another person for his or her gratification or arousal, or for that of others. The child is unable to give informed consent to the sexual activity or may not fully comprehend it, or the child is not developmentally prepared and cannot give consent, or it violates the laws and social taboos of society.



### Child Sexual Abuse can include:

- Any sexual act intentionally performed in the presence of a child
- Sexual intercourse with a child - oral, vaginal or anal
- Invitation to sexual touching or intentional touching or molesting of a child's body
- Masturbation in the presence of a child or the involvement of a child in an act of masturbation
- Exposing a child to pornography or any other to inappropriate or abusive material through information and communication technology
- Sexually intrusive questions or comments
- Consensual sexual activity involving an adult and an underage person

Child sexual abuse can be perpetrated by an older child, adolescent or an adult.

In relation to child sexual abuse, it should be noted that the age of consent to sexual intercourse is 17 years in Ireland. It is the assumption of VMM that this age of consent will apply to all countries in which VMM work, unless the national legislation has an older age of consent.

**Child Exploitation** is when child is treated as an object to be used, bought or sold for the profit or gain of another person/s.

**Child Exploitation Includes:**

- **Sexual exploitation** – using a child sexually for profit or gain. This includes inviting, inducing or coercing a child to engage in prostitution or the production of child pornography.
- **Physical or commercial exploitation** – using a child's labour for profit or gain

## Appendix 2

To be completed by VMM staff member reporting to VMM Designated Officer

### REPORTING FORM FOR SUSPECTED ABUSE/NEGLECT CHILD PROTECTION REPORT FORM

<b>1. Date of Report</b>	
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#### 2. DETAILS OF CHILD OR ALLEGED VICTIM

<b>First Name</b>		<b>Surname</b>	
<b>Male</b>	<input type="checkbox"/>	<b>Female</b>	<input type="checkbox"/>
<b>Address</b>		<b>Date of Birth</b>	
		<b>Estimated Age</b>	
		<b>School Name</b>	
<b>Telephone Number</b>		<b>School Address</b>	
<b>Language spoken (Interpreter needed?)</b>		<b>Any disability or special needs?</b>	

#### 3. DETAILS OF CONCERN (Please include the parents and child's view, if known. Please attach additional sheets if necessary.)

<b>Date of incident</b>	
<b>Location of incident</b>	
<b>Were there any witnesses? (Who? How many? Etc.)</b>	
<b>Details of the incident</b>	
<b>Does the child/victim know the referral is being made? (Be clear that you cannot promise confidentiality, particularly to the child)</b>	

#### 4. TYPE OF CONCERN

<b>Child Welfare Concern</b>	<input type="checkbox"/>	<b>Physical Abuse</b>	<input type="checkbox"/>
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Emotional Abuse	<input type="checkbox"/>	Sexual Abuse	<input type="checkbox"/>
Neglect	<input type="checkbox"/>	Exploitation	<input type="checkbox"/>

#### 5. PARENTS/GUARDIANS AWARE OF THE REPORT DETAILS

Are the parent/parents aware that a concern has been reported?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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#### 6. PARTNER/GUARDIAN DETAILS (Where appropriate)

<b>Details of Mother</b>			
First Name		Surname	
Address (if different from above)		Phone Number	

<b>Details of Father</b>			
First Name		Surname	
Address (if different from above)		Phone Number	

#### 7. DETAILS OF PERSON(S) ALLEGEDLY CAUSING HARM

First Name		Surname	
If name unknown, please indicate reason			
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Address	Date of Birth		
	Estimated Age		
	Telephone No.		
Job Title		Organisation/ Congregation	
Relationship to Child/Victim			
Address at time of alleged incident(s)			
Current contact with children if known (e.g. sit on board of governors of school, teaches children, runs youth groups etc.)			
Any additional information			

#### 7. ACTION TAKEN

Has the matter been referred to the relevant authorities?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If Yes, Date of Referral				
If No, explain why				
Who was it referred to? (Give name and position held)				



Address				
Phone Number				
Email (if available)				
Has the matter been referred to a member of VMM or partner organisation?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If Yes, Date and Referral				
If No, explain why				
Who was it referred to? (Give name and position held)				
Address				
Phone number				
Email (if available)				

**8. NEXT STEPS**

What actions were agreed upon and by whom when the concern was referred to the relevant authorities/VMM/partner organisation?	
Are there any immediate child protection concerns? If so, please record what they are and state what actions have been taken and by whom.	

**8. DESIGNATED OFFICER DETAILS (Details of person completing the form)**

First Name		Surname	
Address		Phone Number	
		Email	
Position in VMM (Staff/Volunteer etc.)			
Date of form completion			
Signature			

**NB: A copy of the completed form must be filed in a secure location and a copy must be sent to the designated officer and civil/statutory authorities**

### Appendix 3

To be completed by the VMM volunteer reporting to VMM Designated Officer

Note: This report is to be completed if a case has been reported by the alleged victim directly to the VMM volunteer. This report is in addition to the process which must be followed in accordance with the Project/Partner Child Safeguarding Policy. This report does not replace processes within the Project/Partner Child Safeguarding Policy.

<b>1. Date of Report</b>	
--------------------------	--

#### 2. DETAILS OF CHILD OR ALLEGED VICTIM

<b>First Name</b>		<b>Surname</b>	
<b>Male</b>	<input type="checkbox"/>	<b>Female</b>	<input type="checkbox"/>
<b>Address</b>		<b>Date of Birth</b>	
		<b>Estimated Age</b>	
		<b>School Name</b>	
<b>Telephone Number</b>		<b>School Address</b>	
<b>Language spoken (Interpreter needed?)</b>		<b>Any disability or special needs?</b>	

#### 3. DETAILS OF CONCERN (Please include the parents and child's view, if known. Please attach additional sheets if necessary.)

<b>Date of incident</b>	
<b>Location of incident</b>	
<b>Were there any witnesses? (Who? How many? Etc.)</b>	
<b>Details of the incident</b>	
<b>Does the child/victim know the referral is being made? (Be clear that you cannot promise confidentiality, particularly to the child)</b>	

**4. TYPE OF CONCERN**

Child Welfare Concern	<input type="checkbox"/>	Physical Abuse	<input type="checkbox"/>
Emotional Abuse	<input type="checkbox"/>	Sexual Abuse	<input type="checkbox"/>
Neglect	<input type="checkbox"/>	Exploitation	<input type="checkbox"/>

**5. DETAILS OF PERSON MAKING DISCLOSURE / RAISING CONCERN DIRECTLY TO YOU**

First Name		Surname	
Address		Organisation/ Congregation	
		Position Held	
		Phone Number	
		Email	
Relationship to child or alleged victim?			

**6. PARENTS/GUARDIANS AWARE OF THE REPORT DETAILS**

Are the parent/parents aware that a concern has been reported?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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**7. PARTNER/GUARDIAN DETAILS (Where appropriate)**

<b>Details of Mother</b>			
First Name		Surname	
Address (if different from above)		Phone Number	

<b>Details of Father</b>			
First Name		Surname	
Address (if different from above)		Telephone Number	

**8. DETAILS OF PERSON(S) ALLEGEDLY CAUSING HARM**

First Name		Surname	
If name unknown, please indicate reason			
Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Address		Date of Birth	
		Estimated Age	
		Telephone No.	
Job Title		Organisation/ Congregation	
Relationship to Child/Victim			
Address at time of alleged incident(s)			

Current contact with children if known (e.g. sit on board of governors of school, teaches children, runs youth groups etc.)	
Any additional information	

**9. ACTION TAKEN**

Has the concern been referred to the relevant authorities?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If Yes, Date of Referral				
If No, explain why				
Who was it referred to? (Give name and position held)				
Address				
Phone Number				
Email (if available)				
Has the concern been referred to the Safeguarding Designated Officer of the project/partner?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If Yes, please give details:				
Name of Partner Safeguarding Officer		Other Job Title		
Project		Phone Number		
Address		Email		
If No, explain why				
Has the concern been referred to anyone else? (Give name, position held and organisation)				
Address				
Phone number				
Email				

**10. NEXT STEPS**

What actions were agreed upon and by whom when the concern was referred to the relevant authorities/VMM/partner organisation?	
Are there any immediate child protection concerns? If so, please record what they are and state what	

actions have been taken and by whom.	
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**11. VMM Volunteer Details (Details of person completing the form)**

First Name		Surname	
Address		Phone Number	
		Email	
Partner Organisation		Project within Partner Organisation (if relevant):	
Date of form completion			
Date form sent to VMM			
Signature			

*(A copy must be retained by the recipient and filed in a secure location, and a copy must be sent to the designed officer of VMM)*

## Appendix 4

### VMM Child and Vulnerable Persons Safeguarding Code of Conduct

#### Acceptable behaviour and conduct

- Foster a culture of openness and mutual accountability so concerns can be raised and discussed, and abusive behaviour can be challenged.
- Managers at all levels have a particular responsibility to support and develop systems that safeguard children, young people and vulnerable adults.
- Be aware of situations that may present risks for children in the project and take action to minimise risks identified.
- All contact with children and young people (whether by phone, email or direct contact) should be supervised or at least be in sight of other adults. We know that situations may arise where this cannot be the case for urgent or practical reasons. Where there is a lone adult working with one or more children, the line manager should be informed as soon as possible.
- Empower children by informing them of what is acceptable and unacceptable behaviour.
- Be aware of what type of physical contact is appropriate and what is inappropriate with children. Respect each child's boundaries and ensure physical contact with children is not an invasion of their privacy.
- Refrain from using or condoning corporal punishment (even where this is culturally acceptable). Instead, use non-violent methods to manage children's behaviour (both within and outside the workplace).
- Always challenge bullying and child-to-child abuse in all its forms
- Where possible, encourage record keeping in projects working directly with children (schools, centres etc.) such as accident/incident book, and attendance records, etc. Accident/Incident books are used in schools for teacher/parents discipline issues, legal issues and accountability about what happens within the school. An Accident/Incident book should record:
  - Date of accident or incident e.g. any injury on school grounds, on the journey to or from school, or on school time; misbehaviour; bullying incidents etc.
  - A short account of the accident/incident.
  - Names of those involved.
  - Names of the witnesses.
  - The outcome.
  - Name and signature of recorder.

A line should be drawn underneath so nobody can add or falsify the information recorded.
- Avoid using children as 'tokens' or 'decorations' within the project during public ceremonies or visits from external persons; rather encourage genuine participation on children within activities.
- Promote children's participation in decision-making activities. For example, when planning a project that will affect children don't just talk to the adult decision makers. You could also consult a sample of the children who the project hopes to benefit to find out their priorities and problems. This may uncover obstacles to achieving the project aims e.g. a project promoting girls' attendance in school through reusable sanitary pads may be unsuccessful because the project planners fail to recognise that there are no suitable segregated girls' toilets and running water on school grounds.
- Raise any concerns of inappropriate behaviour immediately.
- The welfare of the child should always be the paramount consideration when working with children.

### Unacceptable behaviour

Within and outside their work environments at all times, VMM staff and volunteers must never:

- develop relationships with children that could in any way be deemed exploitative or abusive
  - act in ways that may be abusive or may place a child at risk of abuse
  - behave physically in a manner which is inappropriate or sexually provocative towards a child
  - use language, make suggestions or offer advice which is inappropriate, offensive or abusive
  - employ children to work to the detriment of their education
  - condone, or participate in, behaviour with children which is illegal, abusive or exposes the child to danger
  - act in ways intended to shame, humiliate, belittle or degrade children
  - show favouritism to particular children to the exclusion of others, or apply the rules inconsistently, or discrimination against certain children.
  - hit or otherwise physically assault or physically abuse children
  - spend excessive time alone with children, away from others
  - take children to your home, especially where they will be alone with you
  - have a child or children to stay overnight at your home unsupervised
  - sleep in the same room or bed as a child
  - do things for children of a personal nature that they can do for themselves such as toileting, bathing and dressing
- Never engage in any type of sexual relationships with any person under the age of 18 regardless of the age of majority or age of consent locally. Mistaken belief in the age of a child is not a defence.
  - Never enter into a sexual relationship with any beneficiary of assistance since such relationships are based on inherently unequal power dynamics and undermine the credibility and integrity of the work of VMM and our partners.
  - Never exchange money, employment, goods or services for sex, including sexual favours or other forms of humiliating, degrading or exploitative behaviour. This includes any exchange of assistance that is due to beneficiaries of assistance.

### **Use of IT, computers, phones, internet, social media and cameras:**

- Never use the organisation's computers or other equipment to view, download, create or distribute inappropriate material, including but not limited to pornography. Never access exploitative images of minors either within or outside of work;
- Always ask permission from children (in the case of children under 14, their parent or guardian also) before taking images (e.g. photographs, videos) of them. Respect their decision to say no.
- Ensure that any images taken of children are decent (for example: children should have adequate clothing that covers up the sexual organs. Images of children in sexually suggestive poses or that in any way have a negative impact on their dignity or privacy are not acceptable) and do not show a child in extreme distress. Stories and images of children should be based on the child's best interest.

**The guiding principle is that the protection of the child is always the overriding consideration. Please note that all countries where VMM works subscribe to the United Nations definition of a child as up to the age of 18. If a country qualifies the age of a child as higher than 18, VMM supports that national definition and asks staff and volunteers to respect it.**



### Appendix 5

Statement of Commitment for VMM Staff, Volunteers, Consultants and Board Members

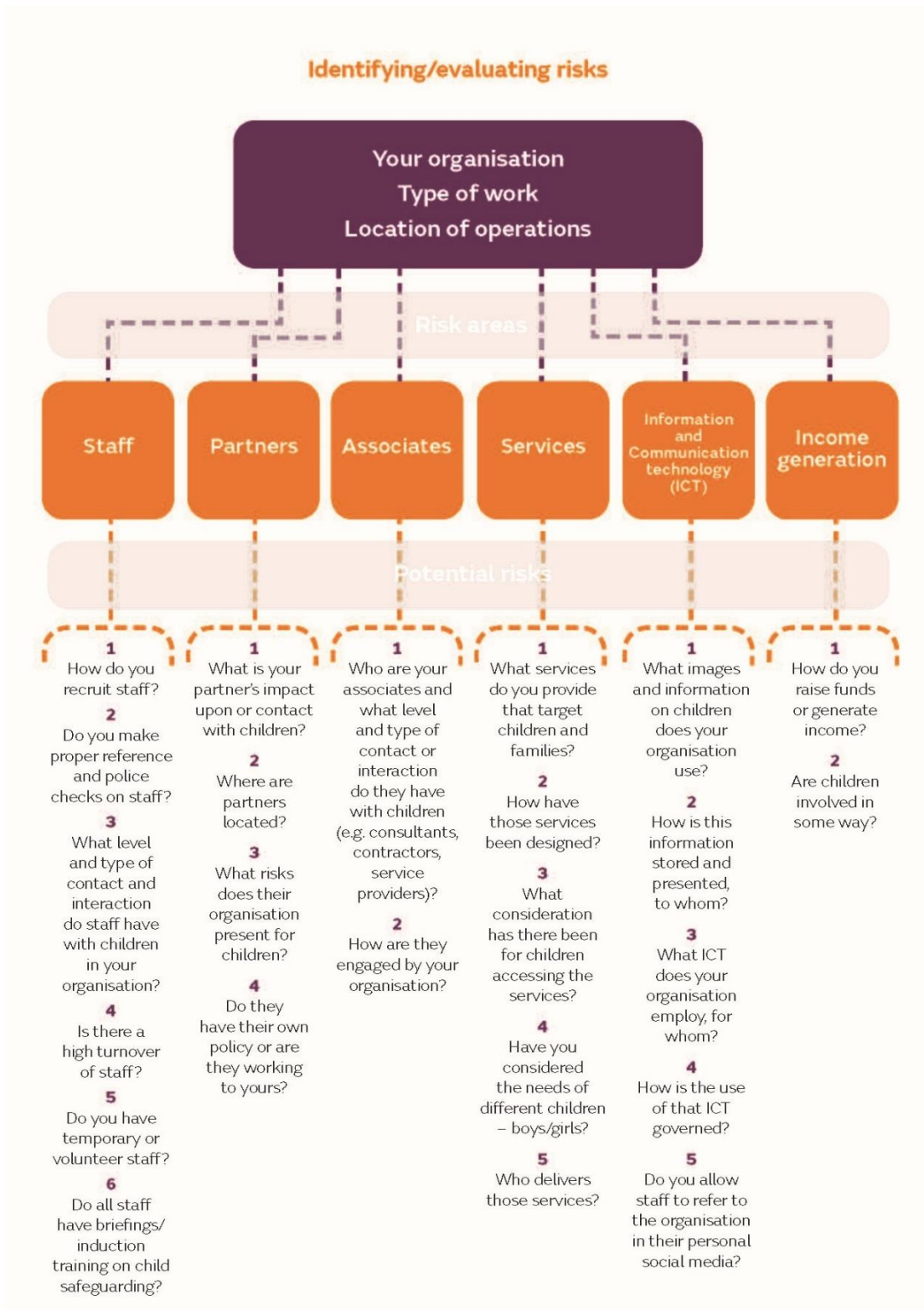
1. I understand I have a responsibility not to ignore concerns I have about the welfare of children I come into contact with.
2. I understand broadly what constitutes abuse and neglect of children and understand the standard of behaviour expected of me and others associated with VMM in regard to protection of children, youth and other vulnerable people.
3. I understand where I have any concern about the welfare of any child or a vulnerable adult during my assignment, my role is not to investigate, probe or condemn, but to report my concerns as quickly as possible to the Designated Officer(s) within my Project or Partner Organisation.
4. I will adhere to the VMM Child and Vulnerable Persons Safeguarding Policy and its Code of Conduct. I am prepared to participate in any required training provided in this area.
5. I have never been investigated by any police force or statutory health authority or a previous employer in relation to complaints made concerning my treatment of children. I declare to VMM that I have not been the subject of any investigation, prosecution or conviction relating to neglect, exploitation or physical, emotional or sexual abuse of children.

**Name:**

**Signature:**

**Date:**

Appendix 6



**PROJECT RISK ASSESSMENT: Creating & Maintaining Safe Environments**

AREA OF RISK	RISK DESCRIPTION	MITIGATING ACTIONS	RESPONSIBILITY Name of Person	TIMEFRAME DATE
1. Unsafe environment within the project for Children & Staff	Having environments where children are at risk to harm, abuse and exploitation.	Developing and Implementing a Safeguarding Children Policy. A policy provides clear guidance and demonstrates how you will ensure children are protected from harm, abuse and exploitation.		
2. Staff & Volunteers - Screen - Training - Behaviour	Levels of contact/interaction staff have with children, is there a possibility that this staff member/volunteer could harm a child/young person?  What background knowledge do you have on this person?	Child-safe recruitment and screening processes are essential to enable you to choose the most appropriate person for a position that involves contact with children  a) Recruitment of staff/volunteers- Interview plan, documented reference and criminal record checks on staff and volunteers  b) Staff have briefing/induction training on child safeguarding  c) Staff aware of the code of behaviour and signed up to it  d) Supervision Ratios		

		d) Staff aware of how to report a concern re child protection		
AREA OF RISK	RISK DESCRIPTION	MITIGATING ACTIONS	RESPONSIBILITY Name of Person	TIMEFRAME DATE
<p>3. Place &amp; Physical Environment</p> <p>- Fire exits</p> <p>-First Aid</p> <p>- Accommodation</p> <p>- Behaviour within the accommodation</p>	<p>Fire Hazard</p> <p>Accident requiring assistance/medical care</p> <p>Unsuitable/Unsafe accommodation resulting in accidents, ill-health and harm</p> <p>Inappropriate Behaviour/Abusive situation arising between male/female or older/younger child</p>	<p>a) Access to Fire Exits/Fire Prevention training, All staff/volunteers aware of how to deal with fire hazards</p> <p>b) First Aid supplies, personnel trained in first aid, access to medical care</p> <p>c) Meet criteria for safe, accessible accommodation</p> <p>d) Separate supervised accommodation for males and females.</p> <p>e) Separate, supervised accommodation for older youths and young children.</p> <p>f) Develop Codes of Behaviour for the Children with the children.</p>		

AREA OF RISK	RISK DESCRIPTION	MITIGATING ACTIONS	RESPONSIBILITY Name of Person	TIMEFRAME DATE
<p>4. Service &amp; Programmes</p> <ul style="list-style-type: none"> <li>- Supervision</li> <li>- Consent</li> <li>- Awareness/Education</li> <li>- Health</li> <li>- Organised activities; trips away</li> </ul>	<p>Harm to children because of lack of adult supervision</p> <p>Parents/Guardians unaware of whereabouts of children.</p> <p>Children unaware of their rights and their right to protection</p> <p>Parents/Guardians/Community unaware of children's rights</p> <p>Illness/Accident/Child on Medication</p>	<p>a) Adequate supervision of children during all activities (2 adults present)</p> <p>b) Consent from Parents/Guardians for child to attend services &amp; activities.</p> <p>c) Information communicated with children/young people re rights and safeguards. Codes of Conduct for Children</p> <p>d) Education/Awareness raising for Parents/Guardians/Community</p> <p>e) First Aid supplies/access to medical personnel and care</p> <p>f) Trips away: safe transport, insurance appropriate sleeping arrangements</p>		

	Harm to Children as a result of traveling away from home.			
AREAS OF RISK	RISK DESCRIPTION	MITIGATING ACTIONS	RESPONSIBILITY Name of Person	TIMEFRAME DATE
<p>5. Information/Communication</p> <ul style="list-style-type: none"> <li>- Storage of personal information</li> <li>- Images of children</li> <li>- Social Media</li> </ul>	<p>Confidentiality Breaches</p> <p>Inappropriate images of children</p> <p>Misuse of images of children</p> <p>Misuse of Social Media</p>	<p>a) Adequate, protected storage of all personal data.</p> <p>b) Use of images with consent for the purpose specified (Dochas Code)</p> <p>c) Provide appropriate information on use of technology for staff/children</p> <p>d) Information for staff/volunteers on the use of images/information for personal social media</p>		
<p>6. Partners</p>	<p>Contact with Children on project.</p> <p>Safety of Children on Project</p>	<p>a) Understanding of Safeguarding Policy</p> <p>b) Communication with Partners</p>		
AREAS OF RISK	RISK DESCRIPTION	MITIGATING ACTIONS	RESPONSIBILITY Name of Person	TIMEFRAME DATE

<p>7. Associates</p> <ul style="list-style-type: none"><li>- Consultants</li><li>- Contractors</li><li>- Service Providers</li></ul>	<p>Contact with Children on Project.</p>	<p>a) Induction of Safeguarding Policy</p>		
<p>8. Harm to Children/Abuse of Children</p>	<p>Children are vulnerable and at risk of harm.</p>	<p>a) Safeguarding Policy/Poster</p> <p>b) Named Child Protection Person/Safeguarding Person</p> <p>c) Reporting Procedures</p> <p>d) Support services</p> <p>e) Awareness raising for Staff/Children/Parents/Guardians/Community</p>		

## Appendix 7

To be completed by VMM Designated Officers annually and returned to the CEO

### The self-audit tool

Take this online self-audit to determine your organisations strengths and weaknesses in keeping children safe. By completing this self-audit tool you can measure how far (or near!) your organisation is from meeting the standards on making children safe, and where you need to improve. This tool can be used at different stages during your implementation and monitoring of child safeguarding to check that you are making the necessary improvements.

Before you start, take a copy of the questionnaire, date the copy and then follow the steps outlined below. You can then keep a record in order to review your progress at a later date.

The self-audit tool asks you to think about four different areas of your organisation. Each area is based on a Keeping Children Safe standard:

1. Policy
2. People
3. Procedures
4. Accountability

Read the following statements and decide whether, for your organisation, each statement is:

- A. in place
- B. partially done
- C. not in place

Tick the A, B or C box as appropriate.

<b>Organisation name:</b>				
<b>Date:</b>				
	<b>Standard 1: Policy</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>1.a</b>	The organisation has a written child safeguarding policy, approved by the relevant management body, to which all staff and associates (including partners) are required to adhere.			
<b>1.b</b>	The UN Convention on the Rights of the Child and other Conventions and Guidelines pertaining to children informs the policy of the organisation.			
<b>1.c</b>	The policy is written in a way that is clear and easily understandable and is publicised, promoted and distributed widely to all relevant stakeholders, including children.			



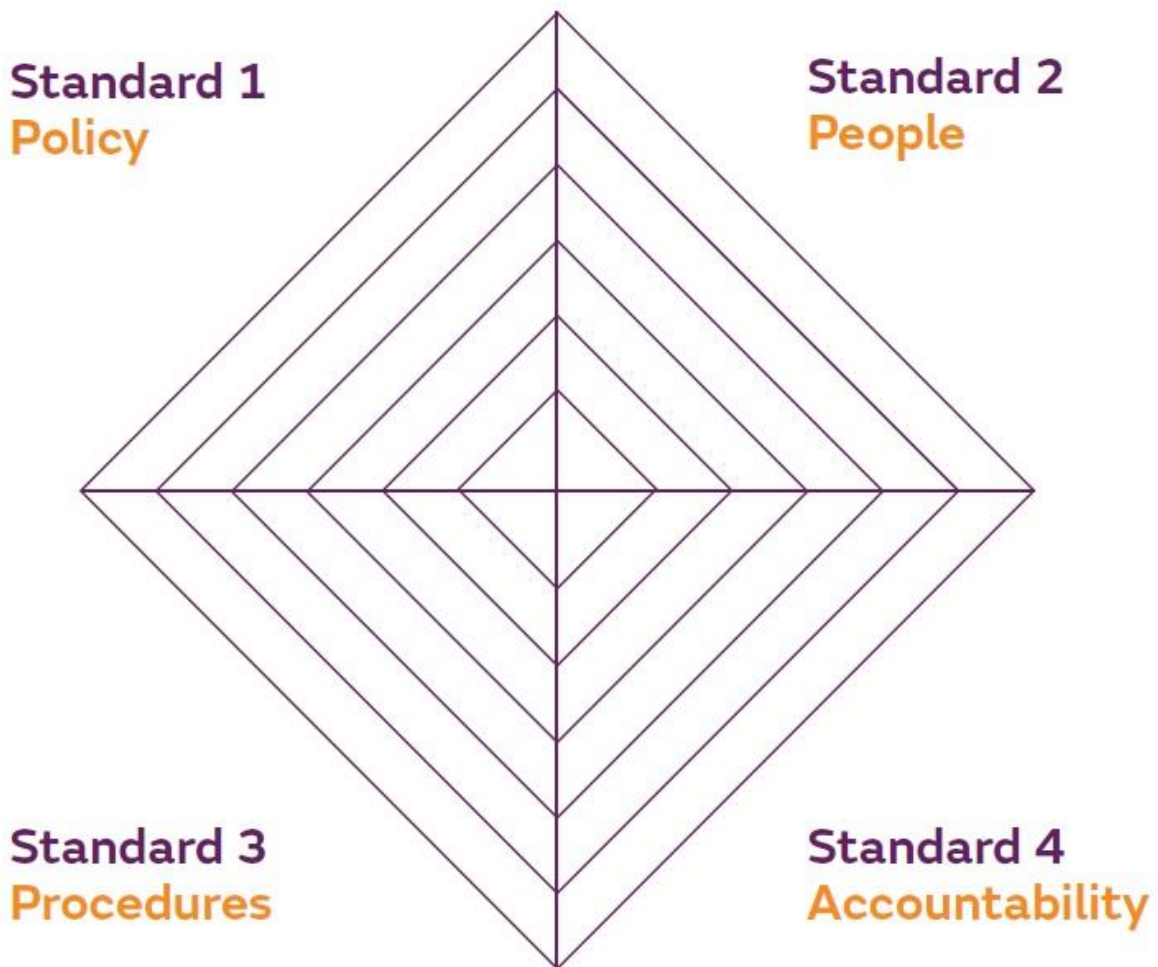
1.d	The policy is clear that all children have equal rights to protection and that some children face particular risks and difficulties in getting help, because of their ethnicity, gender, age, religion or disability, sexual orientation.			
1.e	The policy addresses safeguarding children from harm through misconduct by staff, associates and others, from poor practice, and from its operational activities where these may harm children or put them at risk due to poor design and/or delivery, for example.			
1.f	The organisation makes clear that ultimate responsibility for ensuring the safety of children rests with senior executives (CEO and Directors) and managers.			
<b>Standard 2: People</b>		<b>A</b>	<b>B</b>	<b>C</b>
2.a	There are written guidelines for behaviour (Code of Conduct) that provides guidance on appropriate/expected standards of behaviour towards children and of children towards other children.			
2.b	Recruitment processes have strong child safeguarding checks in place. Recruitment adverts, interviews and contracts all outline a commitment to child safeguarding.			
2.c	The organisation is open and aware when it comes to child safeguarding matters such that issues can be easily identified, raised and discussed. All members of staff, volunteers and associates have training on child safeguarding.			
2.d	Children are made aware of their right to be safe from abuse and provided with advice and support on keeping themselves safe including information for children, parents/carers about where to go for help.			
2.e	The organisation designates key people at different levels (including Director level) as “focal points” with clear defined responsibilities, to champion, support and communicate on child safeguarding and for effective operation of the child safeguarding policy.			
2.f	Partner organisations are required and supported to develop minimum child safeguarding measures appropriate to their organisation.			
<b>Standard 3: Procedures</b>		<b>A</b>	<b>B</b>	<b>C</b>
3.a	The organisation requires local mapping exercises to be carried out that analyse the legal, social welfare and child protection arrangements in the context in which it works.			
3.b	There is an appropriate process for reporting and responding to child protection incidents and concerns that fits with the local systems for dealing with incidents of child abuse (as identified in the mapping exercise).			

<b>3.c</b>	The identification and mitigation of child safeguarding risk is incorporated into risk assessment processes at all levels, i.e. from identification of corporate risks through to planning an activity involving or impacting on children.			
<b>3.d</b>	Adequate human and financial resources are made available to support development and implementation of child safeguarding measures.			
<b>3.e</b>	There are clear procedures in place that provide step-by-step guidance on how to report safely which are linked to the organisations disciplinary policy and procedures.			
<b>3.f</b>	Child safeguards are integrated with and actively managed into existing business processes and systems (strategic planning, budgeting, recruitment, programme cycle management, performance management, procurement, etc.) to ensure safeguarding children is a feature of all key aspects of operations.			
<b>Standard 4: Accountability</b>		<b>A</b>	<b>B</b>	<b>C</b>
<b>4.a</b>	Arrangements are in place to monitor compliance with and implementation of child safeguarding policies and procedures through specific measures and/or integration into existing systems for quality assurance, risk management, audit, monitoring and review.			
<b>4.b</b>	There is a system of regular reporting to key management forums, including Director level, to track progress and performance on child safeguarding, including information on safeguarding issues and child protection cases.			
<b>4.c</b>	External or independent bodies such as Board of Trustees, oversight committees are used to monitor performance in this area and hold senior executives to account in relation to child safeguarding.			
<b>4.e</b>	Opportunities exist for learning from practical case experience to be fed back into organisational development.			
<b>4.f</b>	Policies and practices are reviewed at regular intervals and formally evaluated every three years.			
<b>4.g</b>	Progress, performance and lessons learnt are reported to key stakeholders (management forums and external or independent bodies where relevant) and included in organisations' annual reports.			

### The self-audit web

When you have finished the self-audit tool, transfer your answers to the web using different coloured pens or three different kinds of shading. The self-audit web lets you make a diagram of your organisation, showing how well your organisation is doing in keeping children safe, and where you need to take further action. Use a different colour, or different kind of shading for A, B and C.

The web illustrates visually the stage reached by the organisation in safeguarding children and highlights where further action needs to be taken. Please note that there is no intended hierarchical progression from 1 – 6, the aim of this exercise is to reveal any gaps.



In place



Partially done



Not in place

## Appendix 8

### Good Practice Principles for Working with Vulnerable Adults

All activities which support an individual deemed vulnerable / at risk should follow these five principles:

1. Presume capacity – that people are capable of making decisions, unless there is evidence otherwise.
2. Support individuals to make their own decisions – giving all practicable help before considering making any decisions on their behalf.
3. Distinguish unwise decisions – recognize that the person retains the right to make seemingly eccentric or unwise decisions.
4. Act in their best interests – in all decisions or activities on their behalf.
5. Take the least restrictive option – in any action that might affect their basic rights and freedoms