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# VLUK Child Protection Policy 2020-2021



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#### 1. PURPOSE

Virtual Learning UK (VLUK) has a responsibility to protect and safeguard the welfare of children and young people they come into contact with. The need for guidelines and procedures is important to ensure that this is done with understanding and clarity.

The person with lead responsibility for safeguarding within the VLUK organisation is: Neil Ouldridge, Designated Safeguard Lead (DSL), and he is assisted by two other DSL's who hold full time positions within the organisation. Other key designated staff from our Educational Funding Partners (EFP) are also available when necessary.

The three VLUK Designated Safeguarding Leads for safeguarding on VLUK education programmes have completed training to fulfil these roles.

All staff and Performance Mentors are made aware of this policy and the process for reporting concerns. Staff receive a copy of the VLUK code of conduct which details the process for reporting concerns annually.

All staff have access to the Child Protection policy and are informed of the process for reporting concerns. Staff acknowledge awareness of systems and policies within VLUK which support safeguarding, when they sign that they have read and understood Part One of the Keeping Children Safe in Education 2020 statutory guidance. The Child Protection Policy is also placed on the organisation website for staff reference.

All staff at VLUK are required to wear an identity badge which includes a photograph. On display at each site and on VLUK's Learning Platform is information, including contact numbers for the relevant DSL

Supply staff are given a copy of VLUK's code of conduct which references where to find this policy and has information on how to report concerns. All visitors to site will also receive a visitors badge with these details, including contact numbers on the reverse.

# 2. Safeguarding and promoting the welfare of children

Defined for the purposes of this guidance as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- taking action to enable all children to have the best life chances.

## 3. Child protection

Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.



# 4. Children/Young adult

Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.

**Adult at risk:** The purpose of adult safeguarding is to prevent harm and reduce the risk of abuse or neglect to adults with care and support needs. The statutory framework introduced under the Care Act applies to any person aged 18 or above who:

- Has needs for care and support (regardless of the level of need and whether or not the local authority is meeting any of those needs),
- Is experiencing, or is at risk of abuse or neglect, and
- As a result of those needs, is unable to protect themselves against the abuse or neglect or the risk of it.

# 5. **Definitions of harm**

## 5.1 Abuse

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children.

## 5.2 Physical abuse

A form of abuse which 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.

#### 5.3 Emotional abuse

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 a child 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 a 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.



#### 5.4 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.

## 5.5 **Neglect**

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.

This is not an exhaustive list and it must be recognised that it is not the role of staff / volunteers to make an assessment of whether children or young people have suffered harm. VLUK Staff, volunteers and partner organisation staff do have a duty to report any concerns about harm in accordance with the relevant Local Safeguarding Children Board, Guidelines and Procedures.

## 6. Recognition of harm

The harm or possible harm of a child may come to your attention in a number of possible ways;

- Information given by the child, his/ her friends, a family member or close associate.
- The child's behaviour may become different from the usual, be significantly different from the behaviour of their peers, be bizarre or unusual or may involve 'acting out' a harmful situation in play.
- An injury which arouses suspicion because;
  - o It does not make sense when compared with the explanation given.
  - The explanations differ depending on who is giving them (*e.g.*, differing explanations from the parent / carer and child).
  - o The child appears anxious and evasive when asked about the injury.
- Suspicion being raised when a number of factors occur over time, for example, the child fails to progress and thrive in contrast to his/her peers.
- Contact with individuals who pose a 'risk to children' ('Guidance on Offences Against Children', Home Office Circular 16/2005). This replaces the term 'Schedule One Offender' and relates to an individual that has been identified as presenting a risk or potential risk of harm to children. This can be someone who has been convicted of an offence listed in Schedule One of the Children and Young Persons Act 1933 (Sexual Offences Act 2003), or someone who has been identified as continuing to present a risk to children.



• The parent's behaviour before the birth of a child may indicate the likelihood of significant harm to an unborn child, for example substance misuse, or, previous children removed from their carers.

# 6.1 Young carers

Children and young people under 18 who provide or intend to provide care assistance or support to another family member are called young carers. They carry out on a regular basis, significant or substantial caring tasks and assume a level of responsibility, which would usually be associated with an adult. The person receiving care is often a parent but can be a sibling, grandparent or other relative who is disabled, has some chronic illness, mental health problem or other condition connected with a need for care support or supervision. Young carers can be particularly vulnerable.

# 7. Acting on concerns

No professional should assume that someone else will pass on information which they think may be critical to keeping a child safe. If a professional has concerns about a child's welfare and believes they are suffering or likely to suffer harm, then they should share the information with the relevant local authority children's social care. (Working Together 2018) (For more information about information sharing and effective communication see appendices 1 and 2)

Concerns must be recorded electronically on <u>CPOMS</u>, which is the chosen safeguarding, pastoral and wellbeing solution that VLUK have adopted. When recording a concern, this will immediately alert the Safeguarding team. Upon consideration of the information, alerts and actions will then be given to the relevant member/s of staff to ensure the appropriate action is taken.

## 7.1 **Seeking Medical Attention**

If a child has a physical injury and there are concerns about abuse;

If medical attention is required then this should be sought immediately by phoning for an ambulance, attending the Emergency Department or Minor Injury Unit depending on the severity of the injury. You should then follow the procedures for referring a child protection concern to the relevant Local Authority Children's Social Care.

Any safeguarding concerns should be shared with the Ambulance staff/ Medical and Nursing staff in order that they can appropriately assess and treat the child, and share relevant information.

# 7.2 Managing a disclosure

- Listen to what the child has to say with an open mind.
- Do not ask probing or leading questions designed to get the child to reveal more.
- Never stop a child who is freely recalling significant events.
- Make note of the discussion, taking care to record the timing, setting and people present, as well as what was said.
- Do not ask children to write a statement.



- Never promise the child that what they have told you can be kept secret. Explain that you have responsibility to report what the child has said to someone else.
- The designated lead for child protection within your organisation must be informed immediately, through the use of CPOMS.

# 8. Referring concerns about a child

The DSL's will act on behalf of VLUK, in referring concerns or allegations of harm to the correct Local Authority Access and Assessment Team or the Police Public Protection Unit. In the case of it being out of hours the Immediate Help Team should be contacted.

If the DSL/s are in any doubt about making a referral it is important to note that advice can be sought from the Local Authority, or if applicable, the Education Funding Partner's Designated Safeguarding Officer. The name of the child and family should be kept confidential at this stage and will be requested if the enquiry proceeds to a referral.

It is not the role of the DSL to undertake an investigation into the concerns or allegations of harm. It is the role of the DSL to collate and clarify details of the concern or allegation and to provide this information to the relevant Local Authority Access and Assessment Team, or Locality Team if Children's Social Care is already involved, whose duty it is to make enquiries in accordance with Section 47 of the Children Act 1989.

#### 8.1 Consent

Professional's should seek to discuss any concerns with the family (including the child where appropriate) and where possible seek their agreement to make referrals to social services. This should only be done where such discussion and agreement seeking will not place the child at an increased risk of significant harm.

It should be noted that parents, carers or the child may not agree to information being shared, but this should not prevent referrals where child protection concerns persist. The reasons for dispensing with consent from the parents, carer or child should be clearly recorded and communicated with social services.

In cases where an allegation has been made against a family member living in the same household as the child and it is your view that discussing the matter with the parent would place the child at risk of harm, or where discussing it may place a member of staff / volunteer at risk, consent does not have to be sought prior to the referral being made.

## 8.2 Preparing to Discuss Concerns about a Child with Children's Social Care

Try to sort out in your mind why you are worried, is it based on:

- What you have seen;
- What you have heard from others;
- What has been said to you directly.

Try to be as clear as you can about why you are worried and what you need to do next:

- This is what I have done;
- What more do I need to do?
- Are there any other children in the family?
- Is the child in immediate danger?



In the conversation that takes place the duty Social Worker will seek to clarify:

- The nature of the concerns;
- How and why they have arisen;
- What appear to be the needs of the child and family; and
- What involvement they are having or have had with the child and / or family.

# 8.3 Questions Children's Social Care may ask at Initial Contact

- Agency (i.e., VLUK site, etc) address and contact details of referrer;
- Has consent to make the referral been gained? Information regarding parents' knowledge and views on the referral;
- Where consent has not been sought to make a referral you will be asked to explain what informed your decision making;
- Full names, dates of birth and gender of children;
- Family address and, where relevant, school/nursery attended;
- · Previous addresses;
- Identity of those with Parental Responsibility;
- Names and dates of birth of all members of the household;
- Ethnicity, first language and religion of children and parents;
- Any special needs of the children or of the parents and carers;
- Any significant recent or past events;
- Cause for concern including details of allegations, their sources, timing and location;
- The child's' current location and emotional and physical condition;
- Whether the child needs immediate protection;
- Details of any alleged perpetrator (name, date of birth, address, contact with other children);
- Referrer's relationship with and knowledge of the child and his or her family;
- Known involvement of other agencies;
- Details of any significant others;
- Gain consent for further information sharing / seeking;
- The referrer should be asked specifically if they hold any information about difficulties being experienced by the family/household due to domestic violence, mental illness, substance misuse and/or learning difficulties.

All telephone referrals made by professionals should be followed, within 48 hours by a written referral giving specific and detailed information emailed to the relevant contact at the relevant Local Authority.

## 8.4 Expectation of feedback

Children's Social Care should acknowledge a written referral within one working day of receiving it. If the referrer has not received an acknowledgement within 3 working days, they should contact Children's Social Care again.

## 9. Allegations against staff members / volunteers

If any member of staff or volunteer has concerns about the behaviour or conduct of another individual working within the group or organisation including:

- Behaving in a way that has harmed, or may have harmed a child;
- Possibly committed a criminal offence against, or related to, a child or
- Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children.



The nature of the allegation or concern should be reported to the relevant. Designated Safeguard Lead (DSL) for dealing with allegations within the organisation immediately.

The member of staff who has a concern or to whom an allegation or concern is reported should not question the child or investigate the matter further.

A Designated Safeguard Lead Officer for the organisation will report the matter to the Local Authority Designated Officer (LADO).

## 10. Recruitment and selection

It is important when recruiting paid staff and volunteers to adhere to VLUK's recruitment policy. This will ensure potential staff and volunteers are screened for their suitability to work with children and young people.

VLUK's recruitment and Vetting policy should be read in conjunction with this policy.

The Disclosure and Barring Service (DBS) can help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority(ISA).

https://www.gov.uk/government/organisations/disclosure-and-barring-service/about

A person who is barred from working with children or vulnerable adults will be breaking the law if they work or volunteer, or try to work or volunteer with those groups. If VLUK knowingly employs someone who is barred to work with those groups they will also be breaking the law. If there is an incident where a member of staff or volunteer has to be dismissed because they have harmed a child or vulnerable adult, or would have been if they had not left, VLUK will notify the DBS.



# Appendix 1

## Seven Golden Rules of Information Sharing

Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers (2018) is aimed at supporting good practice in information sharing by offering clarity on when and how information can be shared legally and professionally in order to achieve improved outcomes. It can be especially useful in supporting early intervention and preventative work where decisions about information sharing may be less clear than in safeguarding or child protection situations. Below are the 7 golden rules of information sharing that this guidance recommends.

- Remember that the Data Protection Act is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
- 2. From the outset be open and honest with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
- 3. Seek advice if you are in any doubt, without disclosing the identity of the person where possible.
- 4. Share with consent where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgements on the facts of the case.
- 5. Consider safety and well being: Base your information sharing decisions on considerations of the safety and well being of the person and others who may be affected by their actions.
- 6. Necessary, proportionate, relevant, accurate, timely and secure: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up to date, is shared in a timely fashion, and is shared securely.
- 7. Keep a record of your decision and the reason for it whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.



# Appendix 2 Considerations when Contacting another Agency/Service

# 1. Effective Communication between Agencies

Effective communication requires a culture of listening to and engaging in, dialogue within and across agencies. It is essential that all communication is as accurate and complete as possible and clearly recorded.

Accuracy is key, for without it effective decisions cannot be made and equally, inaccurate accounts can lead to children remaining unsafe, or to the possibility of wrongful actions being taken that affect children and adults. Before contacting another agency, think about why you are doing it, is it to:

#### Share Information

To share information is the term used to describe the situation where practitioners use their professional judgement and experience on a case by case basis to decide whether and what personal information to share with other practitioners in order to meet the needs of a child or young person (CWDC 2009)

## Signpost to Another Service

The definition to signpost is to indicate direction towards. It is an informal process whereby a professional or a family is shown in the direction of a service. If someone is signposted to a service it is because accessing the service may enhance the family's quality of life, but there would be no increased risk to the child or young person should the service not be accessed.

No agency is responsible for the monitoring or recording of signposting.

## Get Advice and Guidance

Seeking advice and guidance at any time, making a general query or perhaps consulting with a specialist colleague within your own organisation (or from another agency) may enhance the work that you are doing with a child, young person or family at any stage. It could be that you want further information about services available or that you want some specialist advice or perhaps need to consult about a particular issue or query for instance to ask if making a referral is appropriate.

The name of the child and family should be anonymised at this stage unless agreement to share the information has already been obtained. It is vital that you record that you have sought information and advice in your own records. The agency you are contacting may not record this information, particularly if the case is not open or active with them. It should be agreed between agencies in this situation as to who records what information.

## Facilitate Access to a Service

If you think that a family may benefit from a service then directing, signposting or facilitating is appropriate. For example, a family approaches your service and asks for some advice about leisure activities in the local area. You give them the information and directions to the nearest open access Leisure Centre.



## • Refer a Child or Family

If you think that by not accessing a particular service, a child's situation could deteriorate then a referral is appropriate. However, a referral is only the start of the process. You as the referrer have a responsibility to monitor that the service has been taken up and the child's situation has improved.

Sometimes you may need to draw on other support services, for example when an intervention has not achieved the desired outcomes and the child/young person requires more specialist or sustained support.

A specific gap in services to meet a need or any level of concern warrants follow up and monitoring to ensure there is no risk to children. At the end of the conversation both parties must be clear about the outcome and the next course of action.

#### 2. Professional Differences

Where there are any professional differences about a particular decision, course of action or lack of action you should consult with a Senior Manager within your own organisation about next steps.

# 3. Recording

Well-kept records about work with a child and his or her family provide an essential underpinning to good professional practice. Safeguarding and promoting the welfare of children requires information to be brought together from a number of sources and careful professional judgements to be made on the basis of this information. These records should be clear, accessible and comprehensive, with judgements made and decisions and interventions carefully recorded. Where decisions have been taken jointly across agencies, or endorsed by a manager, this should be made clear. (Working Together 2018)

CPOMS, is the chosen method to record information, allowing staff to quickly, easily and above all else securely record all of the information on a child in one place. The chronology around a learner is built automatically and trends are much easier to spot. Members of staff from across VLUK can add information to CPOMS allowing the Safeguard Team to take appropriate follow up action thereafter.

On CPOMS, staff should record your decision and the reasons for it, whether or not you decide to share information. If the decision is to share, staff should record what information was shared and with whom, selecting the appropriate colleagues, along with actions and alerts..

Staff should work within VLUK agency's arrangements for recording information and within any local information sharing procedures in place. These arrangements and procedures must be in accordance with the **General Data Protection Regulation** (GDPR) that came into effect from May 2018.



Appendix 3 Code of Conduct

## For employees and volunteers working with learners

#### Introduction

This code describes the standards of conduct and practice that VLUK employees and volunteers should follow when working with children. It has been developed from Allegations Management Advisers (AMA) guidance, who were commissioned to undertake the work for the Department for Children, Schools and Families (DCSF). It is designed to work with other advice or codes of conduct produced by employers or national bodies, not to replace or take priority over them.

Whilst this document covers a wide range of situations, it is recognised that it cannot cover every eventuality, however the principles contained within it must apply in every circumstance.

It should be read and cross referenced to the following related policies: child protection, safeguarding, diversity and associated policies, lone working, confidentiality, Online e-safety, behaviour and physical intervention, health and safety including medicines and educational visits.

## Glossary

As a Training Provider, VLUK tend to refer to 'children' as' Learners' within the organisation. Therefore in our Code of Conduct the word Learner is used to replace children

Term	Meaning
Learner	Anyone who has not yet reached their 18 <sup>th</sup> birthday or anyone currently being educated at VLUK.
Welfare	Well-being in relation to the five outcomes defined in the Children Act 2004: stay safe, be healthy, enjoy and achieve, make a positive contribution and achieve economic wellbeing.
Worker	Employee, self-employed person, contractor or volunteer.
Allegation	An allegation made by anyone, child or adult, where there is or believed to be a risk of harm to a learner.
Parent	Adult with parental responsibility.

#### **Purpose**

The purpose of the code is to protect and promote the interests of workers and the learner they work with. All adults who come into contact with children and young people in their work have a legal and moral duty to keep learners and young people safe and to protect them from sexual,



physical and/or emotional harm. The duty that rests on an individual is to ensure that all reasonable steps are taken to ensure the welfare of a child or young person is paramount.

#### The code aims to:

- > Keep learners safe by clarifying which behaviours constitute safe practice and which behaviours should be avoided;
- Assist adults working with learners to work safely and responsibly and to monitor their own standards and practice;
- > Support managers in setting clear expectations of behaviour and/or codes of practice relevant to the services being provided;
- ➤ Give a clear message that unlawful or unsafe behaviour is unacceptable and that, where appropriate, disciplinary or legal action will be taken;
- Support safer recruitment practice;
- Minimise the risk of misplaced or malicious allegations made against adults who work with learners:
- > Reduce the incidence of positions of trust being abused or misused.

# **Diversity**

At all times consideration needs to be given to the diversity needs of workers and learners. Aspects of gender, culture or religion may be relevant when considering the nature of allegations or appropriateness of communications or physical interventions.

# Reporting incidents

Any incidents of concern should always be reported to a Senior Leader and recorded or in cases where there is an allegation or risk of harm to a child, to the senior designated officer for the service area or the relevant local authority's designated officer (LADO). Contact details are listed at Appendix 1.

Procedures are in place adopted through the Local Safeguarding Board for dealing with allegations against staff, and whistleblowing, child protection and safeguarding policies are in place.

#### **VLUK's Commitment**

VLUK has a duty of care to workers and as part of this duty it will ensure:

- Appropriate safeguarding and child protection policies and procedures are in place in all areas that undertake work with learners, that they are continually monitored and reviewed and made easily accessible to all workers;
- > Workers are treated fairly and reasonably in all circumstances and if subject to an allegation will be supported and the principles of natural justice applied;
- > The safe practice of workers is continually promoted through supervision and training;
- > Workers have readily available access to senior management or other emergency contact person:
- > Guidance is readily available to both adults and learners;
- > Where services or activities are provided by another body, they have appropriate safeguarding policies and procedures in place;



- > A culture of openness and support is fostered;
- > Readily known systems are in place for situations and concerns, from either party, to be raised and recorded and for their outcomes to be analysed in order to review procedures and working practices;
- Workers are not placed in situations which may render them vulnerable without appropriate safeguards and risk assessments being in place, this is particularly relevant where physical intervention may be required or lone-working;
- > Agreed care plans are in place when work involves intimate care;
- Clear e-safety policies are in place;
- > A clear and easily accessible whistle blowing policy is in place.

## **Personal Conduct**

## Confidentiality

#### Staff must:

- > Keep private and sensitive information confidential at all times and only share it with relevant people when it is in the interests of the child to do so;
- > Not use information to intimidate, humiliate or embarrass the child;
- > Be aware of the need to listen and support learners whilst understanding the importance of not promising to keep secrets;
- > Never request a child to keep secrets.

# Making a professional judgement

#### Workers must:

- Make judgements about their behaviour in order to secure the best interests and welfare of the child;
- > Record judgements taken and share them with a senior leader;
- > Ensure actions taken are warranted, proportionate, safe and applied equitably;
- > Discuss any misunderstandings, accidents or threats with a senior leader;
- ➤ Be aware of their position of trust and ensure an unequal balance of power is not used for their own or others personal advantage or gratification;
- Not use their position to intimidate, bully, humiliate, threaten, coerce or undermine learners;
- Maintain appropriate professional boundaries and avoid behaviour which might be misinterpreted by others;
- > Not promote relationships which create a personal friendship or are of a sexual nature, or which may become so.

# Personal/living space

- Not invite a child into their home or any home or domestic setting frequented by them, unless the reason for this has been firmly established and agreed with parents and senior leaders or the home has been designated as a work place e.g. childminders, foster carers;
- > Be vigilant in maintaining their own privacy and mindful of the need to avoid placing themselves in vulnerable situations;



- > Not ask learners to undertake personal jobs or errands;
- Maintain professional boundaries.

#### Gifts, rewards and favouritism

#### Workers must:

- > Be aware of their organisation's policy on the giving and receiving of gifts;
- > Ensure that gifts received or given in situations that may be misconstrued are declared;
- > Only give gifts to an individual child as part of an agreed reward system;
- > Ensure that when operating reward systems methods and criteria for selection of learners for awards are fair and transparent.

#### **Infatuations**

#### Workers must:

- Deal with infatuations sensitively and appropriately to maintain the dignity and safety of all concerned;
- > Make sure their own behaviour is beyond reproach;
- ➤ If they become aware of an infatuation developing or any indications that it may, record it and discuss it with a senior manager so that action can be taken to avoid any hurt, distress or embarrassment.

# Communication (including the use of technology)

- ➤ Ensure communication takes place within clear and explicit professional boundaries, this includes the wider use of technology such as mobile phones text messaging, e-mails, digital cameras, videos, web-cams, websites and blogs;
- > Not share any personal information with a child;
- > Not request, or respond to, any personal information from a child, other than that which may be appropriate as part of their professional role;
- > Not give their personal contact details to learners, including their mobile number, home phone or personal email address, unless the need to do so is agreed with senior leadership and parents;
- Only use equipment e.g. mobile phones, provided by their organisation to communicate with learners, making sure that parents/carers have given permission for this form of communication to be used;
- Only make contact with learners for professional reasons and in accordance with organisational policy;
- Only use text messaging as a last resort when no other forms of communication are possible;
- Only use approved and secure internet or web-based communication channels to send messages;
- > Use internal email systems in accordance with the organisation's policy.



## **Social Contact**

#### Workers must:

- > Not have social contact with learners unless the reason for this has been firmly established and agreed with senior managers;
- > Not have secret social contact with learners and/or their parent(s);
- > Always approve any planned social contact with learners with senior colleagues;
- > Advise senior management of any social contact that has occurred which may give rise to concern;
- > Report and record any situation which may place a child at risk or which may compromise the organisation or their own professional standing.

## **Sexual Contact**

#### Workers must:

- Not engage in sexual activity with or in the presence of a child, or cause or incite a child to engage in or watch sexual activity, to do so would be considered a criminal offence;
- Not have any form of communication which could be interpreted as sexually suggestive or provocative or make sexual remarks to, or about a child either verbally, written or electronically;
- > Not discuss their own sexual relationships with or in the presence of learners;
- > Ensure relationships take place within boundaries of respect and professionalism;
- > Ensure language, attitudes and demeanour do not give rise to comment or speculation;
- ➤ Be aware that consistently conferring inappropriate special attention and favour upon a child might be construed as part of a grooming process, and as such will give rise to concerns about behaviour.

# **Physical Contact**

- > Be aware that even well intentioned physical contact may be misconstrued by the child, an observer or by anyone to whom this action is described;
- Only have physical contact with a child when it is necessary and in ways which are appropriate to their professional or agreed role and responsibilities, never touch a child in a way which may be considered indecent;
- ➤ Be aware of the child's reactions or feelings and, as far as possible, only use a level of contact which is acceptable to the child and for the minimum time necessary;
- > Seek permission from the child or the parent, if the child is very young, before physical contact is made and agree what contact is acceptable;
- > Not assume that when a child is distressed they seek physical comfort;
- > Always be prepared to report and explain actions and accept that all physical contact is open to scrutiny;
- Not indulge in horse play;
- > Always encourage learners, where possible, to undertake self-care tasks independently;



- > Be aware of cultural or religious views about touching and sensitive to issues of gender;
- > Where there is regular physical contact needed, the nature of this must be agreed with senior leadership and the parent as part of a formally agreed plan;
- > Where a child initiates inappropriate physical contact, you must sensitively deter them and help them understand the importance of personal boundaries.

## Behaviour management

#### Workers must:

- Not use any form of degrading treatment to punish a child;
- > Not use sarcasm, demeaning or insensitive comments;
- > Ensure any sanctions and rewards are part of an agreed behaviour management policy;
- > Try to defuse situations before they escalate;
- Never use corporal punishment;
- Follow the behaviour policy and only use physical intervention in exceptional circumstances and as a last resort, when other behaviour management strategies have failed and where there is a risk of physical injury or serious damage to property;
- > When using physical intervention, use the minimum force necessary and techniques in-line with recommended policy and practice and always report and document the incident;
- > Be mindful of other factors which may be impacting on a child's behaviour, i.e. bullying, changes in home circumstances.

Note: the use of unwarranted physical force is likely to constitute a criminal offence.

#### **Personal/Intimate Care**

### Workers must:

- > Adhere to the organisation's intimate care guidelines or code of practice;
- > Make other staff aware of the task being undertaken;
- > Explain to the child what is happening;
- ➤ Carefully and sensitively observe the emotional responses of the child, and record and report any concerns to senior management and parents, if appropriate;
- > Respect learner's privacy at all times;
- > Avoid any physical contact when learners are in a state of undress, other than as part of an agreed care plan;
- > Not change in the same place as learners;
- > Not shower or bathe with learners;
- > Not assist with any personal care task which a child can undertake themselves.

## First Aid and the administration of medicine

- > Be suitably trained and qualified before administering first aid and/or any agreed medication;
- > Ensure arrangements are in place to obtain parental consent for the administration of first aid or medication; wherever reasonably practicable to do so;
- Adhere to VLUK's policy;



- > Make adults aware of the task being undertaken;
- > Explain to the child what is happening;
- > Ensure an appropriate health/risk assessment is undertaken prior to undertaking certain activities.

#### One to one situations/home visits

#### Workers must:

- ➤ Ensure that, when lone working is an integral part of their role, full and appropriate risk assessments have been agreed;
- > Avoid meetings with a child in secluded areas;
- ➤ Always inform colleagues and/or parents about one to one contact beforehand, assessing the need to have them present or close by;
- > Avoid the use of engaged or equivalent signs, wherever possible, these create an opportunity for secrecy or the interpretation of secrecy;
- > Carefully consider the needs of the child when in a one to one situation and always report any situation where the child becomes distressed or angry towards you;
- > Agree the purpose for any home visit with senior leadership unless it is an acknowledged and integral part of your role;
- > Never put yourself into one to one situations when little or no information is available about the child.

# **Transporting**

#### Workers must:

- > Ensure requirements around seat belts and car seats are adhered to;
- > Not offer lifts outside normal working duties unless this has been brought to the attention of senior leadership and been agreed with parents;
- > Ensure they are fit to drive and free from any drugs, alcohol or medicine that is likely to impair judgement or ability to drive;
- > Record details of the journey in accordance with agreed procedures;
- ➤ Ensure that there are proper procedures in place for vehicle, passenger and driver safety, including appropriate insurance;
- > Ensure that any impromptu or emergency lifts are recorded and can be justified if questioned.

# **Trips and Outings**

- > Recognise that they are in a position of trust and ensure that their behaviour remains professional at all times and stays clearly within defined boundaries;
- > Ensure staff/child ratios and where possible gender mix are appropriate;
- > Always have another adult present in out of work activities, unless otherwise agreed with a senior leader;
- > Ensure risk assessments are undertaken;
- Have parental consent to the activity;



- > Never share beds with learners:
- > Not share bedrooms unless it is a dormitory situation and the arrangements have been agreed with a Chief Operations Officer, Senior Leader, DSL, parents and learners.

# **Photography and Videos**

#### Workers must:

- > Be clear about the purpose of any activity involving photography and what will happen to the images when the activity is concluded;
- > Be able to justify the reason for having images of learners in their possession;
- > Avoid making images in one to one situations or situations that may be construed as secretive or which show a single child with no surrounding context;
- > Only use equipment provided or authorised by VLUK;
- > Immediately report any concerns if any inappropriate or intrusive images are found;
- > Have parental consent to take, display and/or distribute any images of learners;
- > Not use images that may cause distress or offence;
- > Not use mobile phones to take images of learners.

# Access to inappropriate images and internet usage

- > Not access, make or store indecent images of learners on the internet, to do so would be illegal and lead to a criminal investigation;
- > Not make or store images of learners, gathered as a result of their work, on personal equipment;
- > Follow their organisation's guidance on the use of IT equipment;
- > Ensure that learners are not exposed to unsuitable material through ICT;
- > Ensure that any materials shown to learners are age appropriate;
- > Immediately report any concerns, if any inappropriate or intrusive images are found, to the LADO.