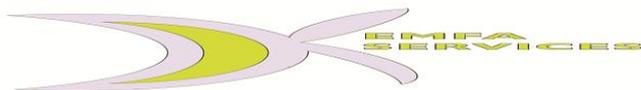




KEMFA CARE SERVICES
CHILD PROTECTION POLICY



1 Child Protection Policy

1.1 Introduction

Everyone who participates in KEMFA CARE is entitled to do so in an enjoyable and safe environment. KEMFA CARE have a moral and legal obligation to ensure that, when given responsibility for young people, coaches and volunteers provide them with the highest possible standard of care.

The KEMFA CARE is committed to devising and implementing policies so that everyone in sport accepts their responsibilities to safeguard children from harm and abuse. This means to follow procedures to protect children and report any concerns about their welfare to appropriate authorities.

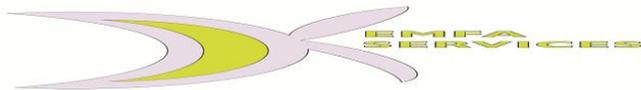
The aim of the policy is to promote good practice, providing children and young people with appropriate safety/protection whilst in the care of KEMFA CARE and to allow staff and volunteers to make informed and confident responses to specific child protection issues.

A child/young person is defined as a person under the age of 18 (Children's Act 1989)

1.1 Policy Statement

The KEMFA CARE is committed to the following:

- the welfare of the child is paramount
- all children, whatever their age, culture, ability, gender, language, racial origin, religious belief and/or sexual identity should be able to participate in (your sport) in a fun and safe environment
- taking all reasonable steps to protect children from harm, discrimination and degrading treatment and to respect their rights, wishes and feelings
- all suspicions and allegations of poor practice or abuse will be taken seriously and responded to swiftly and appropriately
- all KEMFA CARE employees who work with children will be recruited with regard to their suitability for that responsibility, and will be provided with guidance and/or training in good practice and child protection procedures
- working in partnership with parents and children is essential for the protection of children



1.2 Monitor and review the policy and procedures

The implementation of procedures should be regularly monitored and reviewed. The welfare officer should regularly report progress, challenges, difficulties, achievements gaps and areas where changes are required to the management committee.

The policy should be reviewed every 3 years or whenever there is a major change in the organisation or in relevant legislation.

2 Promoting Good Practice

2.1 Introduction

To provide children with the best possible experience and opportunities in (your sport) everyone must operate within an accepted ethical framework such as The Coaches Code of Conduct.

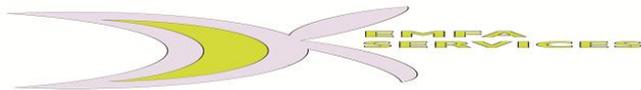
It is not always easy to distinguish poor practice from abuse. It is therefore NOT the responsibility of employees or participants in (your sport) to make judgements about whether or not abuse is taking place. It is however their responsibility to identify poor practice and possible abuse and act if they have concerns about the welfare of the child, as explained in section 4.

This section will help you identify what is meant by good practice and poor practice.

2.2 Good Practice

All personnel should adhere to the following principles and action:

- always work in an open environment (e.g. avoiding private or unobserved situations and encouraging open communication with no secrets)
- make the experience of (your sport) fun and enjoyable: promote fairness, confront and deal with bullying
- treat all young people equally and with respect and dignity
- always put the welfare of the young person first, before winning
- maintain a safe and appropriate distance with players (e.g. it is not appropriate for staff or volunteers to have an intimate relationship with a child or to share a room with them)
- Avoid unnecessary physical contact with young people. Where any form of manual/physical support is required it should be provided openly and with the consent of the young person. Physical contact can be appropriate so long as it is neither intrusive nor disturbing and the young person's consent has been given
- Involve parents/cares wherever possible, e.g. where young people need to be supervised in changing rooms, encourage parents to take responsibility for their own child. If groups have to be supervised in changing rooms always ensure parents, coaches etc work in pairs

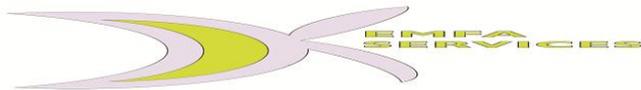


- request written parental consent if club officials are required to transport young people in their cars
- gain written parental consent for any significant travel arrangements e.g. overnight stays
- ensure that if mixed teams are taken away, they should always be accompanied by a male and female member of staff
- ensure that at away events adults should not enter a young person's room or invite young people to their rooms
- be an excellent role model, this includes not smoking or drinking alcohol in the company of young people
- always give enthusiastic and constructive feedback rather than negative criticism
- recognising the developmental needs and capacity of the young person and do not risk sacrificing welfare in a desire for club or personal achievements. This means avoiding excessive training or competition and not pushing them against their will
- secure written parental consent for the club to act in loco parentis, to give permission for the administration of emergency first aid or other medical treatment if the need arises
- keep a written record of any injury that occurs, along with details of any treatment given

2.3 Poor Practice

The following are regarded as poor practice and should be avoided by all personnel:

- unnecessarily spending excessive amounts of time alone with young people away from others
- taking young people alone in a car on journeys, however short
- taking young people to your home where they will be alone with you
- sharing a room with a young person
- engaging in rough, physical or sexually provocative games, including horseplay
- allow or engage in inappropriate touching of any form
- allowing young people to use inappropriate language unchallenged
- making sexually suggestive comments to a young person, even in fun
- reducing a young person to tears as a form of control



- allow allegations made by a young person to go unchallenged, unrecorded or not acted upon
- do things of a personal nature that the young person can do for themselves

When a case arises where it is impractical/impossible to avoid certain situation e.g. transporting a young person on your car, the tasks should only be carried out with the full understanding and consent of the parent/care and the young person involved.

If during your care you accidentally hurt a young person, the young person seems distressed in any manner, appears to be sexually aroused by your actions and/or if the young person misunderstands or misinterprets something you have done, report any such incidents as soon as possible to another colleague and make a written note of it. Parents should also be informed of the incident.

3 Defining Child Abuse

3.1 Introduction

Child abuse is any form of physical, emotional or sexual mistreatment or lack of care that leads to injury or harm, it commonly occurs within a relationship of trust or responsibility and is an abuse of power or a breach of trust. Abuse can happen to a young person regardless of their age, gender, race or ability.

There are four main types of abuse: **physical abuse, sexual abuse, emotional abuse and neglect**. The abuser may be a family member, someone the young person encounters in residential care or in the community, including sports and leisure activities. Any individual may abuse or neglect a young person directly, or may be responsible for abuse because they fail to prevent another person harming the young person.

Abuse in all of its forms can affect a young person at any age. The effects can be so damaging that if not treated may follow the individual into adulthood

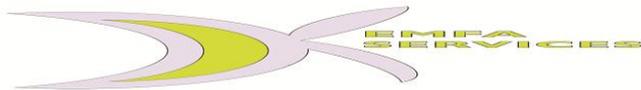
Young people with disabilities may be at increased risk of abuse through various factors such as stereotyping, prejudice, discrimination, isolation and a powerlessness to protect themselves or adequately communicate that abuse had occurred.

3.2 Types of Abuse

- **Physical Abuse:** where adults physically hurt or injure a young person e.g. hitting, shaking, throwing, poisoning, burning, biting, scalding, suffocating, drowning. Giving young people alcohol or inappropriate drugs would also constitute child abuse.

This category of abuse can also include when a parent/carer reports non-existent symptoms or illness deliberately causes ill health in a young person they are looking after. This is called Münchausen's syndrome by proxy.

In a sports situation, physical abuse may occur when the nature and intensity of training disregard the capacity of the child's immature and growing body



- **Emotional Abuse:** the persistent emotional ill treatment of a young person, likely to cause severe and lasting adverse effects on the child's emotional development. It may involve telling a young person they are useless, worthless, unloved, and inadequate or valued in terms of only meeting the needs of another person. It may feature expectations of young people that are not appropriate to their age or development. It may cause a young person to be frightened or in danger by being constantly shouted at, threatened or taunted which may make the young person frightened or withdrawn.

Ill treatment of children, whatever form it takes, will always feature a degree of emotional abuse.

Emotional abuse in sport may occur when the young person is constant criticised, given negative feedback, expected to perform at levels that are above their capability. Other forms of emotional abuse could take the form of name calling and bullying.

- **Bullying** may come from another young person or an adult. Bullying is defined as deliberate hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. There are three main types of bullying.

It may be physical (e.g. hitting, kicking, slapping), verbal (e.g. racist or homophobic remarks, name calling, graffiti, threats, abusive text messages), emotional (e.g. tormenting, ridiculing, humiliating, ignoring, isolating from the group), or sexual (e.g. unwanted physical contact or abusive comments).

In sport bullying may arise when a parent or coach pushes the young person too hard to succeed, or a rival athlete or official uses bullying behaviour.

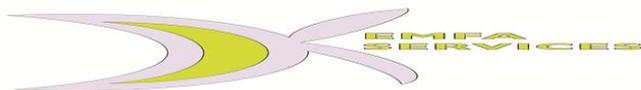
- **Neglect** occurs when an adult fails to meet the young person's basic physical and/or psychological needs, to an extent that is likely to result in serious impairment of the child's health or development. For example, failing to provide adequate food, shelter and clothing, failing to protect from physical harm or danger, or failing to ensure access to appropriate medical care or treatment.

Refusal to give love, affection and attention can also be a form of neglect.

Neglect in sport could occur when a coach does not keep the young person safe, or exposing them to undue cold/heat or unnecessary risk of injury.

- **Sexual Abuse** occurs when adults (male and female) use children to meet their own sexual needs. This could include full sexual intercourse, masturbation, oral sex, anal intercourse and fondling. Showing young people pornography or talking to them in a sexually explicit manner are also forms of sexual abuse.

In sport, activities which might involve physical contact with young people could potentially create situations where sexual abuse may go unnoticed. Also the power of the coach over young athletes, if misused, may lead to abusive situations developing.



3.3 Indicators of Abuse

Even for those experienced in working with child abuse, it is not always easy to recognise a situation where abuse may occur or has already taken place. Most people are not experts in such recognition, but indications that a child is being abused may include one or more of the following:

- unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on a part of the body not normally prone to such injuries
- an injury for which an explanation seems inconsistent
- the young person describes what appears to be an abusive act involving them
- another young person or adult expresses concern about the welfare of a young person
- unexplained changes in a young person's behavior e.g. becoming very upset, quiet, withdrawn or displaying sudden outbursts of temper
- inappropriate sexual awareness
- engaging in sexually explicit behaviour
- distrust of adult's, particularly those whom a close relationship would normally be expected
- difficulty in making friends
- being prevented from socialising with others
- displaying variations in eating patterns including over eating or loss of appetite
- losing weight for no apparent reason
- becoming increasingly dirty or unkempt

Signs of bullying include:

- behavioural changes such as reduced concentration and/or becoming withdrawn, clingy, depressed, tearful, emotionally up and down, reluctance to go training or competitions
- an unexplained drop off in performance
- physical signs such as stomach aches, headaches, difficulty in sleeping, bed wetting, scratching and bruising, damaged clothes, bingeing e.g. on food, alcohol or cigarettes
- a shortage of money or frequents loss of possessions

It must be recognised that the above list is not exhaustive, but also that the presence of one or more of the indications is not proof that abuse is taking place. It is **NOT** the responsibility of those working in KEMFA CARE to decide that child abuse is occurring. It **IS** their responsibility to act on any concerns.



3.4 Use of Photographic/Filming Equipment at Sporting Events

There is evidence that some people have used sporting events as an opportunity to take inappropriate photographs or film footage of young people. All clubs should be vigilant and any concerns should be reported to the Club welfare officer.

All parents and performers should be made aware when coaches use video equipment as a coaching aid.

4 Responding to Suspicions and Allegations

4.1 Introduction

It is not the responsibility of anyone working in MOUNTAIN CARE in a paid or unpaid capacity to decide whether or not child abuse has taken place. However there is a responsibility to act on any concerns through contact with the appropriate authorities so that they can then make inquiries and take necessary action to protect the young person. This applies **BOTH** to allegations/suspicions of abuse occurring within KEMFA CARE and to allegations/suspicions that abuse is taking place elsewhere.

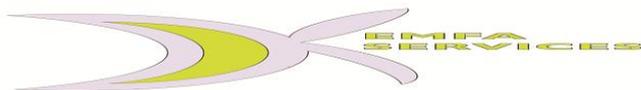
This section explains how to respond to allegations/suspicions.

4.2 Receiving Evidence of Possible Abuse

We may become aware of possible abuse in various ways. We may see it happening, we may suspect it happening because of signs such as those listed in section 3 of this document, it may be reported to us by someone else or directly by the young person affected.

In the last of these cases, it is particularly important to respond appropriately. If a young person says or indicates that they are being abused, you should:

- **stay calm** so as not to frighten the young person
- **reassure** the child that they are not to blame and that it was right to tell
- **listen** to the child, showing that you are taking them seriously
- **keep questions to a minimum** so that there is a clear and accurate understanding of what has been said. The law is very strict and child abuse cases have been dismissed where it is felt that the child has been led or words and ideas have been suggested during questioning. Only ask questions to clarify
- **inform** the child that you have to inform other people about what they have told you. Tell the child this is to help stop the abuse continuing.



- **safety of the child** is paramount. If the child needs urgent medical attention call an ambulance, inform the doctors of the concern and ensure they are made aware that this is a child protection issue
- **record** all information
- **report** the incident to the club/welfare officer

In all cases if you are not sure what to do you can gain help from NSPCC Tel No 24 hour help line Tel No: 0800800500

4.3 Recording Information

To ensure that information is as helpful as possible, a detailed record should always be made at the time of the disclosure/concern. In recording you should confine yourself to the facts and distinguish what is your personal knowledge and what others have told you. Do not include your own opinions.

Information should include the following:

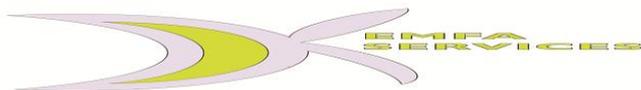
- the child's name, age and date of birth
- the child's home address and telephone number
- whether or not the person making the report is expressing their concern or someone else's
- the nature of the allegation, including dates, times and any other relevant information
- a description of any visible bruising or injury, location, size etc. Also any indirect signs, such as behavioural changes
- details of witnesses to the incidents
- the child's account, if it can be given, of what has happened and how any bruising/injuries occurred
- have the parents been contacted? If so what has been said?
- has anyone else been consulted? If so record details
- has anyone been alleged to be the abuser? Record detail

4.4 Reporting the Concern

All suspicions and allegations **MUST** be reported appropriately. It is recognised that strong emotions can be aroused particularly in cases where sexual abuse is suspected or where there is misplaced loyalty to a colleague. It is important to understand these feelings but not allow them to interfere with your judgement about any action to take.

The (Organisation/Club) expects it's members and staff to discuss any concerns they may have about the welfare of a child **immediately with the person in charge** and subsequently to check that appropriate action has been taken.

If the nominated club welfare officer is not available you should take responsibility and seek advice from the NSPCC helpline, the duty officer at your local social services department or the police. Telephone numbers can be found in your local directory.



A summary of reporting procedures is provided in **Appendix 2**. Where there is a complaint against an employee or volunteer, there may be three types of investigation.

- **Criminal** in which case the police are immediately involved
- **Child protection** in which case the social services (and possibly) the police will be involved
- **Disciplinary or misconduct** in which case KEMFA CARE will be involved

As mentioned previously in this document the KEMFA CARE are not child protection experts and it is not their responsibility to determine whether or not abuse has taken place. All suspicions and allegations must be shared with professional agencies that are responsible for child protection. **(SEE APPENDIX 3 & 4)**

Social services have a legal responsibility under The Children Act 1989 to investigate all child protection referrals by talking to the child and family (where appropriate), gathering information from other people who know the child and making inquiries jointly with the police.

NB: If there is any doubt, you must report the incident: it may be just one of a series of other incidences which together cause concern

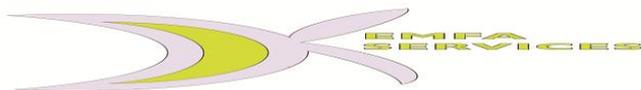
Any suspicion that a child has been abused by an employee or a volunteer should be reported to the KEMFA CARE who will take appropriate steps to ensure the safety of the child in question and any other child who may be at risk. This will include the following:

- KEMFA CARE will refer the matter to social services department
- the parent/carer of the child will be contacted as soon as possible following advice from the social services department
- the chair person of your organisation should be notified to decide who will deal with any media inquiries and implement any immediate disciplinary proceedings
- the club welfare officer should also notify the relevant sport governing body
- if the Club welfare officer is the subject of the suspicion/allegation the report must be made to the appropriate manager who will refer the matter to social services

Allegations of abuse are sometimes made sometime after the event. Where such allegation is made, you should follow the same procedures and have the matter reported to social services. This is because other children in the sport or outside it may be at risk from the alleged abuser. Anyone who has a previous conviction for offences related to abuse against children is automatically excluded from working with children.

4.5 Concerns outside the immediate Sporting Environment (e.g. a parent or carer)

- Report your concerns to the Club welfare officer
- If the Club welfare officer is not available, the person being told or discovering the abuse should contact their local social services department or the police immediately
- Social Services and the Club welfare officer will decide how to inform the parents/carers
- The Club welfare officer should also report the incident to the KEMFA CARE Governing Body. The Governing Body should ascertain whether or not the person/s involved in the incident play a role in the organisation and act accordingly



- Maintain confidentiality on a need to know basis

4.6 Confidentiality

Every effort should be made to ensure that confidentiality is maintained for all concerned. Information should be handled and disseminated on a need to know basis only. This includes the following people:

- The Club Welfare Officer
- The parents of the child
- The person making the allegation
- Social Services/police
- The KEMFA CARE Regional Development Manager and your Sport Governing Body Club welfare officer
- The alleged abuser (and parents if the alleged abuser is a child)

Seek social services advice on who should approach the alleged abuser.

All information should be stored in a secure place with limited access to designated people, in line with data protection laws.

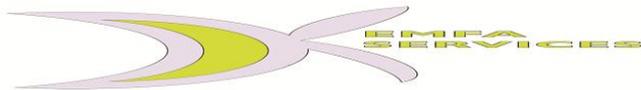
4.7 Internal Inquiries and Suspension

- The KEMFA CARE Club welfare officer will make an immediate decision about whether any individual accused of abuse should be temporarily suspended pending further police and social services inquiries
- Irrespective of the findings of the social services or police inquiries the KEMFA CARE Disciplinary Committee will assess all individual cases to decide whether a member of staff or volunteer can be reinstated and how this can be sensitively handled. This may be a difficult decision; especially where there is insufficient evidence to uphold any action by the police. In such cases the KEMFA CARE Disciplinary Committee must reach a decision based upon the available information which could suggest that on the balance of probability, it is more likely than not that the allegation is true. The welfare of the child should remain of paramount importance throughout.

5 Recruiting and Selecting Personnel with Children

5.1 Introduction

It is important that all reasonable steps are taken to prevent unsuitable people from working with children. This applies equally to paid staff and volunteers, both full and part time. To ensure unsuitable people are prevented from working with children the following steps should be taken when recruiting.



5.2 Controlling Access to Children

- All staff and volunteers should complete an application form. The application form will elicit information about the applicants past and a self disclosure about any criminal record.
- Consent should be obtained from the applicant to seek information from the Criminal Records Bureau.
- Two confidential references, including one regarding previous work with children should be obtained. These references MUST be taken up and confirmed through telephone contact.
- Evidence of identity (passport or driving licence with photo)

5.3 Interview and Induction

All employees and volunteers will be required to undertake an interview carried out to acceptable protocol and recommendations. All employees and volunteers should receive formal or informal induction during which:

- A check should be made that the application form has been completed in full, including sections on criminal records and self disclosures
- Their qualifications should be substantiated
- The job requirements and responsibilities should be clarified
- They should sign up to the organization's Code of Ethics and Conduct
- Child Protection Procedures are explained and training needs identified e.g. basic child protection awareness

5.4 Training

In addition to pre-selection checks, the safeguarding process includes training after recruitment to help staff and volunteers to:

- Analyse their own practice against what is deemed good practice, and to ensure their practice is likely to protect them from false allegations
- Recognise their responsibilities and report any concerns about suspected poor practice and/or abuse
- Respond to concerns expressed by a child
- Work safely and effectively with children

(KEMFA CARE) requires:

- All staff and volunteers who have access to children to undergo a CRB check
- All employees, volunteers, coaches, welfare officers and team managers to undertake relevant child protection training or undertake a form of home study, to ensure their practice is exemplary and to facilitate the development of positive culture towards good practice and child protection
- All staff and volunteers to receive advisory information outlining good/bad practice and informing them what to do if they have concerns about the behaviour of an adult towards a young person
- All coaches, trainee coaches and leaders should have an up to date first aid qualification



Declaration

On behalf of [**Kemfa care**] we, the undersigned, will oversee the implementation of the Child Protection Policy and take all necessary steps to ensure it is adhered to.

Signed:

(n.b. One of the signatories should be the Welfare Officer)

Name:

Name:



Position within [Kemfa care]:

Position within [Kemfa care]:

Date:

Date:
