The Bytes Project

Child Protection

Policy & Procedures

For Staff

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THE BYTES PROJECT

1. INTRODUCTION

1.1 The Bytes Project is committed to a delivery of service that promotes good practice and which protects children from harm.

1.2 Members and staff within the Bytes Project accept and recognise our responsibilities to develop awareness of the issues that may cause children harm.

1.3 The Bytes Project will seek to protect the safety of children, young people and vulnerable adults, and provide a safe environment by, employing people who are suitable for working with or have contact with children and young people, and by vetting the background of persons who are recommended for appointment to posts, which have substantial access to children. See Appendix 1 for Recruitment and Selection guidelines on the employment of staff that have substantial access to children.

1.4 The Bytes Project will ensure that suitable and appropriate training is provided to all staff, including volunteers, to raise awareness of their role in recognising child abuse, including familiarity with the Bytes Project's Child Protection policy.

2. LEGAL BACKGROUND

Obligations to safeguard children and young people and promote their welfare are contained in both international and domestic law. It is for each organisation and/or individual to be aware of the legislation and how it applies to them, or can be used by them in their work to safeguard children and young people.

2.1 The United Nations Convention on the Rights of the Child is an international human rights treaty setting out the civil, political, economic, social and cultural rights of the child. It provides the overarching framework to guide the development of local laws, policies and services so that all children and young people are nurtured, protected and empowered. Each of the 41 Articles in the Convention detail a different type of right, all of which interact to form one integrated set of rights for children and young people. All Articles of the Convention are important and inter-relate to each other: those Articles with relevance for this policy include:

Article 3 Best Interests of the Child the best interests of the child must be a primary consideration for all actions concerning children taken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies. This includes ensuring the child is given the protection and care necessary for their well-being, taking into account the rights and duties of others towards them. Organisations, services and facilities responsible for the care or protection of children must conform to appropriately set standards.

Article 4 Protection of rights Governments have a responsibility to take all available measures to make sure children's rights are respected, protected and fulfilled. This involves assessing their social services, legal, health and educational systems, as well as funding for these services. Governments must help families protect children's rights and create an environment where they can grow and reach their potential.

Article 12 Voice of the Child A child who is capable of forming his or her own views has the right to express those views freely in all matters which affect them, those views being given due weight in accordance with their age and maturity. This is particularly the case for any judicial and administrative proceedings affecting them. A child can either give their views directly, or have their views represented appropriately on their behalf.

Article 19 Protection from all forms of violence: Governments should ensure that children are properly cared for and their right to be protected from harm and mistreatment is upheld.

Article 20 (Children deprived of family environment): Children who cannot be looked after by their own family have a right to be looked after properly by people who respect their ethnic group, religion, culture and language.

Articles 34 and 36 Exploitation Governments should protect children from all forms of exploitation.

Article 39 Rehabilitation of child victims Children who have been harmed should receive help to recover and reintegrate into society.

2.2 The Children (Northern Ireland) Order 1995 (the Children Order) is the principal statute governing the care, upbringing and protection of children in Northern Ireland. It applies to all those who work with and care for children, whether parents, paid carers or volunteers. The Children Order provides the legislative framework within which this policy operates. It covers the full range of safeguarding activity contained in Figure 1 above, including the promotion of a child's welfare, assessment of a child's needs, provision of support for children and families, protection of children, and powers to assume or secure parental responsibility for children when required. Each of these duties and powers is discussed more fully within this policy.

2.3 The Human Rights Act (1998) incorporates the European Convention on Human Rights (ECHR) into UK legislation. State authorities must use their powers reasonably and proportionately to protect children and young people, and the ECHR holds them responsible for inhuman or degrading treatment inflicted within their jurisdiction. Professionals across all public authorities, including government departments, local councils, hospitals, schools and the police must respect the ECHR, as must private bodies in specific circumstances.

2.4 The Safeguarding Vulnerable Groups (Northern Ireland) Order 2007 as amended by the Protection of Freedoms Act 2012 provides the legislative framework for the establishment of a Disclosure and Barring Service and requirements relating to individuals who work with children and vulnerable adults. This legislation defines 'regulated activity' with children and prevents persons on barred lists from engaging in regulated activity.

2.5 The Children's Services Co-operation Act (Northern Ireland) 2015 places a requirement on individuals and organisations providing children's services to children to co-operate with each other to devise and implement cross cutting strategies. The Act is key to ensuring improved outcomes for children by supporting, enhancing and encouraging co-operation so that services are integrated from the point of view of the child or young person.

3. AIMS OF THE POLICY

3.1 The aim of the Bytes Project's policy on Child Protection is two-fold, in that, it aims to demonstrate the Bytes Project's commitment to providing and maintaining a service that protects children, young people and vulnerable adults from harm, as well as protecting the organisation and our workers.

3.2 Embed a culture which recognises the child's or young person's fundamental right to be safe and promote their general welfare.

3.3 Establish clearly defined processes of reporting risk of harm toward children and young people which are well-understood and put in place.

3.4 Ensure responses to risks of harm are proportionate, timely, professional, legal and ethical.

3.5 A further aim is to ensure that our staff and volunteers are carefully selected trained and supervised and are familiar with the Bytes Project's Child Protection Policy.

3.5 To ensure that hirers of the Bytes Project's services are familiar with the Bytes Projects' Child Protection Policies and Procedures. See appendix 2 regarding Guidelines for hirers/volunteers of The Bytes Project Services.

3.6 Promote continuous learning and improvement by identifying and applying learning and assessing the effectiveness of its application.

4. POLICY STATEMENT ON CHILD PROTECTION

4.1 The Bytes Project confirms its commitment to making sure that children, young people and vulnerable adults are protected and kept safe from harm while they are with staff and volunteers in this organisation. To this end we will endeavour to safeguard children, young people and vulnerable adults by: -

- adopting child protection guidelines through a code of behaviour for staff. (see appendix 3 for guidelines)
- sharing information about child protection and good practice.
- sharing information about concerns with agencies who need to know and involve parents, carers and children appropriately.
- providing effective management for staff through supervision, support and training.
- taking appropriate action to respond to issues of child protection which occur on the Bytes Project's premises or involve its workforce. (see appendix 7 & 8)
- appoint Designated Members of Staff to co-ordinate the implementation of the Child Protection Policy.
- Child Protection Designated Officer for the reporting of concerns is Charlene Cowan

5. Principles

5.1 The following principles are reflected in the Children Order and should underpin all strategies, policies, procedures, practice and services relating to safeguarding children and young people.

- The child or young person's welfare is paramount – The welfare of the child is the paramount consideration for the courts and in childcare practice. An appropriate balance should be struck between the child's rights and parent's rights. All efforts should be made to work co-operatively with parents, unless doing so is inconsistent with ensuring the child's safety.
- The voice of the child or young person should be heard – Children and young people have a right to be heard, to be listened to and to be taken seriously, taking account of their age and understanding. They should be consulted and involved in all matters and decisions which may affect their lives and be provided with appropriate support to do so where that is required. Where feasible and appropriate, activity should be undertaken with the consent of the child or young person and, where possible, to achieve their preferred outcome.
- Parents are supported to exercise parental responsibility and families helped to stay together – Parents have responsibility for their children rather than rights over them. In some circumstances, parents will share parental responsibility with others such as other carers or the statutory authorities. Actions taken by organisations should, where it is in the best interests of the child, provide appropriate support to help families stay together as this is often the best way to improve the life chances of children and young people and provide them with the best outcomes for their future.
- Partnership – Safeguarding is a shared responsibility and the most effective way of ensuring that a child's needs are met is through working in partnership. Sound decision-making depends on the fullest possible understanding of the child or young person's circumstances and their needs. This involves effective information sharing, strong organisational governance and leadership, collaboration and understanding between families, agencies, individuals and professionals.
- Prevention – The importance of preventing problems occurring or worsening through the introduction of timely supportive measures.
- Responses should be proportionate to the circumstances – Where a child's needs can be met through the provision of support services, these should be provided. Both organisations and individual practitioners must respond proportionately to the needs of a child in accordance with their duties and the powers available to them.
- Protection – Children should be safe from harm and in circumstances where a parent or carer is not meeting their needs, they should be protected by the State.
- Evidence-based and informed decision making – Decisions and actions taken by organisations and agencies must be considered, well informed and based on outcomes that are sensitive to, and take account of, the child or young person's specific circumstances, the risks to which they are exposed, and their assessed needs.

6. DEFINITIONS

This section provides definitions used within this policy document.

6.1 Safeguarding and Child Protection
As outlined in section 1, safeguarding is more than child protection. Safeguarding begins with promotion and preventative activity which enables children and young people to grow up safely and securely in circumstances where their development and wellbeing is not adversely affected. It includes support to families and early intervention to meet the needs of children and continues through to child protection. Child protection refers specifically to the activity that is undertaken to protect individual children or young people who are suffering or are likely to suffer significant harm.

6.2 Child in Need
Article 17 imposes a general duty on HSCTs to provide a range of services for children in need within their area and states a child shall be considered to be 'in need' if:

- he is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services
- his health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services; or he is disabled.

'Family', in relation to such a child in need, includes any person who has parental responsibility for the child and any other person with whom he has been living.

In determining whether a child or young person is in need, consideration must be given to:

- what will happen to a child or young person's development and health without services being provided
- the likely effect the services will have on the child or young person's standard of health and development.

Article 18 of the Children Order requires HSCTs:

- to safeguard and promote the welfare of children within its area who are in need; and
- so far as is consistent with that duty, to promote the upbringing of such children by their families,

by providing a range and level of care appropriate to those children's needs. Fulfilling this duty is a key part of preventative safeguarding.

6.3 The Concepts of Harm and Significant Harm
The Children Order defines 'harm' as ill-treatment or the impairment of health or development. The Order states that 'ill-treatment' includes sexual abuse, forms of ill-treatment which are physical and forms of ill-treatment which are not physical; 'health' means physical and / or mental health; and 'development' means physical, intellectual, emotional, social or behavioural development.

There is no absolute definition of 'significant harm', as this will be assessed on a case by case basis. Article 50(3) of the Children Order states that "where the question of whether harm suffered by a child is significant turns on the child's health or development, his health or development shall be compared with that which could reasonably be expected of a similar child".

Where a HSCT suspects that a child is suffering, or likely to suffer significant harm, the HSCT has a duty under Article 66 of the Children Order to make enquiries, or cause enquiries to be made, to enable it to decide whether it should take any action to safeguard or promote the child's welfare. Section 6.3 provides further information on the determination of significant harm.

6.4 Child in Need of Protection

A child in need of protection is a child who is at risk of, or likely to suffer, significant harm which can be attributed to a person or persons or organisation, either by an act of commission or omission; or a child who has suffered or is suffering significant harm as defined in Article 50 of the Children Order.

6.5 Types of Abuse

Harm can be suffered by a child or young person by acts of abuse perpetrated upon them by others. Abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health, or if they live in a home where domestic abuse happens. Abuse can also occur outside of the family environment. Evidence shows that babies and children with disabilities can be more vulnerable to suffering abuse.

Although the harm from the abuse might take a long time to be recognisable in the child or young person, professionals may be in a position to observe its indicators earlier, for example, in the way that a parent interacts with their child. Effective and ongoing information sharing is key between professionals.

Harm from abuse is not always straightforward to identify and a child or young person may experience more than one type of harm or significant harm. Harm can be caused by:

- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect
- Exploitation

Physical Abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, biting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.

Sexual Abuse occurs when others use and exploit children sexually for their own gratification or gain or the gratification of others. Sexual abuse 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 clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via e-technology). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Emotional Abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child's emotional development. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child the opportunity to express their views, deliberately silencing them, or 'making fun' of what they say or how they communicate. Emotional abuse may involve bullying – including online bullying through social networks, online games or mobile phones – by a child's peers.

Neglect is the failure to provide for a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter that is likely to result in the serious impairment of a child's health or development. Children who are neglected often also suffer from other types of abuse

Bullying – although not defined as abuse within the Children (NI) Order 1995, a child or young person who is bullied may be suffering any type of abuse as defined. The UK Government[1] defines bullying as behaviour that is repeated, intended to hurt someone either physically or emotionally and often aimed at certain groups, e.g. because of race, religion, gender or sexual orientation. See Appendix 12 for further information on online bullying.

6.6 The definitions of abuse outlined above also apply to young people, and also to vulnerable adults where there has been a reduction in physical or mental capacity which has led to a reduced ability to protect themselves from assault, abuse neglect or bullying.

6.7 It is not always easy to recognise a situation where abuse may occur or where it has already taken place. It is unlikely that staff will be experts and it should be stressed that in accordance with the Children (N.I.) Order 1995, the Health and Social Services have a statutory duty to ensure the welfare of a child.

7. DESIGNATED OFFICER

7.1 The Bytes Project has appointed staff members as Child Protection Designated Officers who have been trained in the area of Child Protection and are acutely committed to the principle of confidentiality. (See appendix 5 for Duties of Designated Officer). These are:

- Charlene Cowan (Belfast office)
- Hannah Wylie, Edel Saunders and Aidan Quigley (Derry office)

8. TRAINING IN CHILD PROTECTION

8.1 All staff will receive awareness training in child protection, including familiarity with the Bytes Project's Child Protection policy: this is to include all paid staff and volunteers.

8.2 Training will be provided, further details of which are provided at Appendix 6.

8.3 Volunteer groups who use the premises are required to have a Child Protection Policy within their organisation as a condition of use. Hirers who use the Bytes Project's facilities or provide a service on behalf of the Bytes Project will be asked if they have a Child Protection Policy and if they provide training.

8.4 The Bytes Project will provide advice to these groups above that do not provide training in Child Protection should they wish to avail themselves of this service. This would include familiarisation of The Bytes Project's Child Protection Policy.

8.5 All staff, volunteers and board members are required to complete relevant Child Protection training every 3 years.

8.6 Those working directly with children and young people must hold a valid certificate in a minimum of 6 hours Child Protection Training.

9. PROCEDURE FOR DEALING WITH COMPLAINTS OF CHILD ABUSE

9.1 There are two elements under this section, those where allegations of child abuse have been made against staff or volunteers, and those where workers become aware of or suspect a case of child abuse.

9.2 Appendix 7 deals with Procedures relating to allegations made against staff.

9.3 Appendix 8 deals with guidance on disclosure of abuse or where a member of staff is aware of or suspects a case of child abuse

10. USEFUL CONTACT DETAILS

10.1 Health and Social Service Trusts

All reports of a child protection nature in Northern Ireland are dealt with by either PSNI or by a local Gateway Team located within the Health & Social Service Trusts, who provide integrated health and social care services across Northern Ireland.

Health and Social Care in Northern Ireland website www.n-i.nhs.uk.

BELFAST TRUST
Belfast HSC Trust, Trust Headquarters, Tel: (028) 9504 0100
Belfast HSC Trust, Gateway Services/Child Protection, Tel: (028) 9050 7000

NORTHERN TRUST
Northern HSC Trust, Trust Headquarters, Tel: 028 9442 4000
Northern HSC Trust, Gateway to Children's Social Work Service, Tel: 0300 1234 333

SOUTH EASTERN TRUST
South Eastern HSC Trust, Trust Headquarters, Tel: (028) 9055 3100
South Eastern HSC Trust, Family Resource Centre, Tel: (028) 9181 8518
South Eastern HSC Trust, Gateway Service, Tel: 0300 100 0300

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SOUTHERN TRUST

Southern HSC Trust, Trust Headquarters, Tel: 028 3833 4444
Southern HSC Trust, Child Protection/Gateway Service, Tel: 028 3741 5285 / 0800 783 7745

WESTERN TRUST

Western HSC Trust, Trust Headquarters, Tel: 028 7134 5171
Western HSC Trust, Gateway Social Work Teams/Child Protection, Tel: 7131 4090

9.2 EMERGENCY OUT OF HOURS NUMBERS

BELFAST HSC TRUST

Belfast HSC Trust, Gateway Services/Child Protection, Tel: (028) 9504 9999
Belfast HSC Trust, GP out of Hours Service, South & East Belfast areas:
Tel: 028 90796220 / North & West Belfast areas: Tel: 028 9074 4447
Belfast HSC Trust, Social Work Service, Tel: 028 9504 9999
Belfast HSC Trust, Mental Health Emergencies, Tel: 028 9056 5444

NORTHERN HSC TRUST

Northern HSC Trust, Regional Emergency Social Work Service, Tel: 028 9504 9999
Northern Area Dalriada Doctor on Call Scheme, Tel: 028 2566 3500

SOUTH EASTERN HSC TRUST

South Eastern HSC Trust, Emergency Duty Service, Tel: (028) 9056 5444
South Eastern HSC Trust, GP out of Hours, North Down & Ards areas: Tel: (028) 9182 2344
/ Down & Lisburn areas: Tel: (028) 9260 2204

SOUTHERN HSC TRUST

Craigavon Area Hospital, Tel: (028) 3833 4444
Daisy Hill Hospital, Tel: (028) 3083 5000
South Tyrone Hospital, Tel: (028) 8772 2821
St Luke's Hospital, Tel: (028) 3752 2381
GP out of Hours Service, Telephone 028 3839 9201
Social Work out of Hours Service, Telephone 028 9504 9999
Mental Health Service Emergencies, Telephone 028 3833 4444/028 3083 5000

WESTERN HSC TRUST

Altnagelvin Area Hospital, Tel: (028) 7134 5171
South West Acute Hospital, Tel: (028) 6638 2000
Tyrone & Fermanagh Hospital, Tel: (028) 8283 3100

9.3 Police Service Northern Ireland (PSNI)

Within the PSNI, it is the Child Abuse Investigation Units (CAIU) that deals with issues relating to children, young people and vulnerable adults. They are part of the overarching Public Protection Unit; there is one CAIU in each of the 8 policing districts. They are made up of male and female detectives who work in plain clothes and are specially trained to investigate all alleged and suspected cases of child abuse.

Contact the non-emergency number on 101, or in the event of an emergency phone 999.

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9.4 OTHER USEFUL CONTACTS
Stop It Now! 0808 1000 900
NSPCC 0808 8005 000

Parents Advice Centre 0808 8010 722 www.parentsadvicecentre.org
Child line 0800 1111
Child Exploitation Online Protection **0870 000 3344** www.ceop.police.uk

11. GENERAL SAFETY AND MANAGEMENT OF ACTIVITES

Centre activities, events and residential:

11.1 The primary responsibility for the child, young person or vulnerable adult rests with the parent/legal careers/Bytes staff.

11.2 A register should be kept of all those who attend on any given day:

Name _____

Address _____

Emergency contact numbers _____

11.3. An accident report form should be in completed to record any untoward event or incident. See Appendix 13.1 for an Accident Report Form

11.4 Please refer to Appendix 11 regarding guidelines on taking photographs or other media.

12. DATA PROTECTION

Under the Data Protection Act (1998) registered organisations should be aware that they must be careful when handling personal data belonging to children and leaders e.g. names, phone numbers, addresses and medical information.

12.1 Personal Information of children, young people and vulnerable adults should be handled confidentially and kept secure.

12.2 Bytes must only hold data which is adequate, relevant and not excessive in relation to the purpose for which it is held.

12.3 Staff must ensure that client's personal data is accurate and where necessary, kept up to date.

12.4 Staff must do what they can to prevent unauthorised or accidental access to personal data. Appropriate password systems should be in place in relation to data storage to increase security.

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APPENDIX 1
RECRUITMENT AND SELECTION GUIDELINES ON THE EMPLOYMENT OF STAFF AND PARTNER ORGANISATIONS WHO HAVE SUBSTANTIAL ACCESS TO CHILDREN.

1. INTRODUCTION

1.1 All job vacancies are advertised and all applicant's complete application forms with references sought for successful applicants. Arrangements are in place for all new staff to have a pre-employment check carried out by Access NI, at the Department of Justice.

1.2 The recruitment of all posts in the Bytes Project is centralised at Head Office, which administers all recruitment exercises.

- Applicants for posts with substantial access to children, young people or vulnerable adults - whether permanent, temporary, full-time or part-time, are required to have a Pre-employment check carried out which will be administrated by Head Office.

1.3 On completion of the interview's pre-employment checks are requested after applicants have been recommended for appointment but before they are appointed to the post.

1.4 The Bytes Project Director and the Project Administrator are authorised to request and receive such information, and any results are returned to them. The information provided by the Police and Access NI is confidential.

1.5 The Project Director will decide with assistance when necessary from the Bytes Board of Trustees, as to the candidate's, suitability for working with children taking into account only those offences which may be relevant to the post.

1.6 A regulated activity provider (Employer of volunteers or staff in regulated activity), the Bytes Project has a legal duty to notify the Independent Safeguarding Authority (ISA). If they have withdrawn permission for a person to engage in regulated activity because the person has:

- Received a caution or conviction for a relevant offence;
- The harm test is satisfied

2. AGENCY STAFF

1.1 The Bytes Project ensures that any Employment Agency supplying temporary staff to cover posts with substantial access to children is required to carry out the necessary Police and Access NI checks on the Bytes Project's behalf to ensure the suitability of the Agency Staff for working with children.

3. VOLUNTEERS

Where individuals volunteer to work in an unpaid capacity in The Bytes Project premises where there is substantial access to children or young people The Bytes Project is responsible for ensuring that the appropriate consent is obtained from the volunteers, and the necessary Police and Access NI checks are undertaken.

APPENDIX 1

4. External facilitators, contracted organisations, and delivery partners

The Bytes Project Child Protection Policy does not apply to partner organisations as we expect all partners to have their own safeguarding policies and procedures which reflect the local context and legal framework.
We do however expect partners to be aware of our policy and to collaborate closely with it in all aspects of safeguarding while working in partnership with us.
In addition, all external facilitators, contracted organisations, and delivery partners will be asked to provide The Bytes Project with copies of their latest Child Protection Policies.
organisations and individuals must work both in partnership to ensure children and young people are safeguarded as effectively as possible

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APPENDIX 2

GUIDANCE NOTES FOR HIRERS /VOLUNTEERS OF THE BYTES PROJECT SERVICES AND PROPERTY

1. INTRODUCTION

The Bytes Project wants to ensure that children, young people and vulnerable adults are protected from harm while on site in any of its properties. In addition to its responsibilities The Bytes Project asks that Hirers / Volunteers exercise their own responsibilities and abide by the Bytes Project's Child Protection policy.

1.1 In particular all Hirers/Volunteers shall:

- Make sure they have adequate staff supervision using the ratios as laid down by the Education and Library Boards.
- Ensure that they supervise the children/young people at all times.
- Refrain from either verbally or physically abusing a child/young person ensure adequate insurance cover for the group and leaders.
- Inform their group of behavioural expectations while using the Bytes Project's facilities.
- Adhere to the Bytes Project's Child Protection policy.

The Bytes Project wishes to remind all Hirers/Volunteers that the primary responsibility for the welfare of the children and young people rests with them at all times.

1.2 Group behavioural expectations while using The Bytes Project facilities

The Bytes Project always expects that its visitors/users of its services display courtesy and respect for others and The Bytes Project property .

Hirers/Volunteers should therefore not allow members of their group to:

- Make any sectarian, sexist, racist or other offensive remarks toward any person or other group.
- Vandalise The Bytes Project property.
- Leave litter in or around The Bytes Project property.
- Bad language.
- Smoke.
- Drink alcohol.
- Bully (verbally or physically).
- Use of threatening, abusive or violent behaviour.

If any of the above is not followed the Bytes Project reserves the right to refuse future requests to hire or use its facilities and/or ask the group to leave.

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APPENDIX 3

CODE OF BEHAVIOUR ON CHILD PROTECTION FOR THE BYTES PROJECT STAFF

1. INTRODUCTION

1.1 The Bytes Project recognises that it is not practical to provide definitive instructions that would always apply to all situations whereby staff come into contact with children and to guarantee the protection of children and staff.

1.2 However, below are the standards of behaviour required of staff in order to fulfil their roles within The Bytes Project. This code should assist in the protection of both children and members of staff.

1.3 Staff must: implement the Child Protection Policy and procedures at all times.

1.4 Staff must never:

- engage in rough, physical games including horseplay with children or young people.
- allow or engage in inappropriate touching of any kind.
    - The main principles of touch are:
        - touch should always be in response to the individual's need.
        - touch should always be appropriate to the age and stage of development of the individual.
        - touch should always be with an individual's permission.
- Physically restrain a child/young person unless the restraint is to:-
    - prevent physical injury of the child/other children/visitors or staff/yourself
    - prevent damage to any property
    - prevent or stop the commission of a criminal offence

In all circumstances physical restraint must be appropriate and reasonable, otherwise your action can be defined as assault. Staff must never:

- make sexually suggestive comments to or within earshot of a child, young person or vulnerable adult.
- make sexually suggestive comments about a child, young person or vulnerable adult – even if there are no children or vulnerable adults in sight or earshot.
- do things of a personal nature for children or vulnerable adults that they can do for themselves or that their parent/leader can do for them.

1.5 Staff do not, except in emergency situations:

- have children/young people on their own in a vehicle. In the event of an extreme circumstance (e.g. medical emergency) parents must be notified and extreme caution taken. Parents should be notified of departure time and estimated time of arrival. A line manager or another member of staff will also be notified and the child/young person

- Should travel in the back seat. It is important that adequate business insurance is in place to cover the vehicle for transporting children or young people.

- Take a child or vulnerable adult to the toilet unless another adult is present or has been made aware (this may include a parent, group leader)

- Spend time alone with a child or vulnerable adult on his/her own. If you find you are in a situation where you are alone with a child or vulnerable adult, make sure that you can be clearly observed or seen by others.

1.6 Implications for staff

Staff who breach any of the above will be subject to the disciplinary procedure.

If an allegation against a member of staff has occurred, then an investigation will be carried out in accordance with the procedure for dealing with allegations against staff (See Appendix 7). A Designated Officer for Child Protection is to clarify if she/he has any relevant records of any other child protection information in relation to the individual.

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APPENDIX 4

INDICATORS AND EFFECTS OF ABUSE

1. INTRODUCTION

1.1 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. It is unlikely that staff will be experts and it should be stressed that in accordance with the Children (NI) Order 1995, the Health and Social Services have a statutory duty to ensure the welfare of a child.

1.2 The onus of The Bytes Project is to provide a safe environment by employing people who are suitable for working with or to have contact with children, young people and vulnerable adults, by having effective and clear procedures for reporting any suspicions through their own structures to the relevant Health and Social Services Board and by working with hirers who will be required to produce evidence of their own Child Protection Policy and Procedures and also adhere to The Bytes Project's Child Protection Policy.

2. INDICATIONS THAT A CHILD MAY BE ABUSED INCLUDE:

- unexplained or suspicious injuries such as bruising, cuts or burns, particularly if situated on part of the body not normally prone to such injuries
- an injury for which the explanation seems inconsistent
- the child, young person or vulnerable adult describes what appears to be an abusive act involving him/her
- someone else – a child or adult, expresses concern about the welfare of another child, young person or vulnerable adult
- unexplained changes in behaviour over time e.g. becoming very quiet, withdrawn or displaying sudden outbursts of temper
- inappropriate sexual awareness
- engagement in sexually explicit behaviour in games or activities
- distrust of adults, particularly those with whom a close relationship will normally be expected
- difficulty in making friends
- prevented from socialising with other children
- Displays variations in eating patterns including overeating or loss of appetite
- loss of weight for no apparent reason
- Increasingly dirty or unkempt appearance.

This list is not exhaustive and the presence of one or more of the indicators is not proof that abuse is taking place. It is stressed, however, that it is not the responsibility of managers to prove that abuse is taking place but is their responsibility to act upon any concerns, by reporting these to the Designated Officer.

3. EFFECTS OF ABUSE

3.1 Abused children, young people and vulnerable adults can suffer changes in normal behaviour and can suffer long-term damage that may follow them into later life.

3.2 The main effects of abuse on children, young people or vulnerable adults are as follows:

- Potential increased risk of death.
- Pain and distress.
- Behavioural difficulties, like becoming angry and aggressive.
- School related problems.
- Developmental delay -physically, emotionally and mentally.
- Low self-esteem.
- Depression, self -harm -sometimes leading to suicide.
- Difficulty in forming relationships as adults.
- Sometimes, if untreated, abusive relationships with others.
- Permanent or temporary injury.

3.3 Factors that might increase the likelihood of risk:

- Children, young people or vulnerable adults who might have difficulty telling others.
- Disabled children or adults who might have difficulty communicating or accessing people to tell.
- Children or vulnerable adults who are already experiencing some form of discrimination (e.g. racial harassment) as they are more isolated from other adults / children.
- They may also perceive the abuse as a part of the ongoing discrimination.
- Poor relationship between a child, young person ro vulnerable adult and parents/carers.
- High levels of stress.
- History of violence in the family.

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APPENDIX 5

DUTIES OF DESIGNATED OFFICER FOR CHILD PROTECTION

5.1 To record a disclosure of abuse made by a child to a member of The Bytes Project's Staff. The alleged abuse could involve either an external person or The Bytes Project Staff or volunteers.

5.2 To record The Bytes Project Staff's suspicions of a child, young person or vulnerable adult being abused.

5.3 In 1 or 2 above, to seek advice from the relevant agencies and report, if appropriate. If the
Disclosure/suspicions relate to The Bytes Project Staff or volunteers, to advice and liaise with the Project Director, if appropriate.

If a member of The Bytes Project staff has concerns about a colleague not fulfilling The Bytes Project's Policy and Procedures on Child Protection, such concerns are to be taken to the relevant Line Manager in the first instance. When the matter is examined by the Line Manager, she/he may need to involve the Designated Officer; if it becomes apparent there is a Child Protection issue.

Where the incident relates to a line manager not fulfilling The Bytes Project's Policy and Procedures on Child Protection, such concerns are to be taken to the next relevant Line Manager in the first instance, or a Designated Officer.

5.4 To record all action taken and advise the relevant Line Manager, other Designated Officers and Director, where appropriate.

5.5 To ensure that if Designated Officers are not on site that:-

a) Either a contactable phone number is always left with head office; or
b) The Line Manager on duty is contactable.

5.6 To ensure all written records in relation to Child Protection issues are securely and confidentiality filed.

5.7 To establish contact with child protection and vulnerable adult teams within the relevant Health and Social Services Trusts if:-

a) Allegations of abuse against a child, young person or vulnerable adult have been made against a member of staff or,
b) A member of staff has been made aware of alleged abuse against a child, young person or vulnerable adult by an external person

5.8 To keep up to date with relevant Child Protection legislation, good practice and developments.

5.9 To liaise on an ongoing basis with staff to ensure the ongoing implementation and review of The Bytes Project's Child Protection Policies and Procedures.

5.10 To fulfil any other relevant duties, which may become apparent as the role of Designated Officer develops.

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APPENDIX 6

TRAINING FOR STAFF IN CHILD PROTECTION

5.1 The content of this course is based upon the "Keeping Safe" manual developed by the Volunteer Development Agency and Away from Home and Safe.

5.2 The training is provided through Youthnet, CiNI, Health & Social Care Trusts or City Councils

5.3 The aim of the course is to increase the awareness and explore issues around the protection of children, staff and The Bytes Project.

5.4 The content of the training course will be as follows: -

FULL LEVEL COURSE

Who for: All Staff

Content:
Awareness of Child Protection issues:

- What is abuse?
- Who abuses?
- Signs and Symptoms
- Dealing with Disclosure

Recruitment and Selection of Staff and Volunteers

Supervision, Support and Training

Code of Behaviour (see appendix 3)

- Why a code of behaviour
- Protecting children and workers
- The use of a code of behaviour

Awareness of residential issues

Policy and procedures:

- The Bytes Project's Policy
- Reporting procedures
- Development of a Policy
- Dealing with concerns

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APPENDIX 7

PROCEDURES FOR DEALING WITH ALLEGATIONS OF CHILD ABUSE AGAINST A MEMBER OF STAFF

1. INTRODUCTION

1.1 Allegations of child abuse can potentially be made about any member of staff (especially those in contact with the public, children, young people and vulnerable adults).

1.2 Abuse does occur outside the family setting and although a very sensitive and difficult issue, abuse has occurred within institutions and organisations that support children, young people and/or vulnerable adults.

1.3 It is critical that all relevant staff are aware of such issues and how to deal with any allegations appropriately. Allegations may come from another member of staff or a member of the public.

1.4 In all circumstances, an allegation should be reported to the relevant line manager. If however, the allegation involves the manger a report should be made to either the next level of line management or The Bytes Project's Designated Officer.

2. DEALING WITH CONCERNS

2.1 As a result of any allegation being received the matter will immediately be subject to a preliminary investigation.

2.2 Following the preliminary investigation consideration will be given to:-

(i) Seek legal advice to as to whether or not the employee/s should be suspended from work while a full investigation are carried out.

(ii) Whether or not there is a need to fully investigate concerns into the allegation/s.

(iii) Whether or not social services and/or police should be informed.

2.3 Should there be no innocent explanation in respect any allegations, and these constitute possible acts of gross misconduct the employee/s will be suspended from work pending an enquiry.

2.4 The Bytes Project will seek advice from social services and/or police in respect of the allegation/s and whether to appoint independent investigating officers to complete a full, formal investigation. A report will be given to the Board of Trustees on completion of any investigations carried out and as to whether or not any allegation/s has been substantiated.

3. DISCIPLINARY PROCEDURE

3.1 On the basis of the investigating report, and, in accordance with The Bytes Project's disciplinary procedure, disciplinary action may take place, which may include dismissal.

3.2 In addition to the Bytes Project's disciplinary investigation the police may be informed of the concerns pertaining to the employee/s concerned immediately following the alleged incident being reported.

3.3 Should a police investigation, or a social services investigation take place the Bytes Project will seek information from these parties. Any information provided to the Bytes Project will be checked with the employee contract and advice will be sought from the Bytes Project Legal Advisors before any disciplinary action is taken against the employee.

3.4 Where staff are disciplined or dismissed as a result of inappropriate behaviour in regard to children or vulnerable adults, information will be passed onto the Department of Health and Social Services.

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APPENDIX 8

GUIDANCE ON DISCLOSURE OF ABUSE OR WHERE A MEMBER OF STAFF IS AWARE OF OR SUSPECTS A CASE OF CHILD ABUSE.

1. INTRODUCTION

1.1 Anyone who knows or suspects that a child has or is being harmed or is at risk of harm has a duty to record the suspected incident and convey this concern to his or her line manager or a Designated Officer within The Bytes Project.

1.2 Managers who have been informed of an alleged incident then have a duty to report the incidence directly to The Bytes Project's Designated Officer rather than to continue through line management as this would delay proceedings and lead to loss of confidentiality. For reasons of confidentiality, the level of information passed to the line manager will depend on his or her direct involvement in the workplace and will be at the discretion of the Designated Officer.

1.3 It is essential that suspicions be reported to the line manager or Designated Officer. The consequences of failing to report an allegation or suspicion could far outweigh the risk of being wrong and might even be fatal for the child concerned. It is essential that the welfare of the child must always be the first priority.

1.4 There is a legal responsibility to report the allegation or suspicion as withholding evidence regarding a criminal action is an offence.

1.5 Concerns should be discussed in the first instance with the Designated Officer, either through the employee involved or via their line manager. The Health and Social Services should be contacted to discuss the suspected abuse with the parents as they have the expertise to deal with the situation.

1.6 The Designated Officer will advise regarding discussion of the suspected abuse with parents/carers. In situations where the parent/carer is potentially responsible for the abuse, the child, young person or vulnerable adult might be placed at greater risk were such suspicions discussed. In these cases it may be better suited for the Health and Social Services to discuss the suspected abuse with the parents/carers as they will have the expertise required to deal with the situation.

1.7 Once a worker becomes aware or suspects a case of abuse s/he should ensure in so far as possible that the child, young person or vulnerable adult is protected from the situation of danger. The worker has no power to intervene directly where the alleged abuser is the Parent or carer of the child unless advised by the Designated Officer. In this latter case it is imperative that the next step is taken as quickly as possible.

1.8 The worker should discuss the case as early as possible with their line manager or a Designated Officer. In certain situations, where the line manager is the suspected to be the abuser, contact should be made directly with a Designated Officer. Sharing in this matter means that the worker has an opportunity to discuss and assess their concerns in a responsible way as well as sharing some of the load with someone outside the situation.

1.9 Once reported, the line manager should report the matter to a Designated Officer, who in return will report the alleged incident to Social Services. The Designated Officer will have

Received relevant training and have guidelines as to reporting to the appropriate authorities.

1.10 Discussion should not take place with anyone else within the line management structure as this impedes investigation and affects the confidentiality of the situation. It is up to the discretion of the Designated Officer, as to who else is to be informed of the situation, including incidents where a member of staff may be the alleged abuser.

1.11 Staff should not initiate an investigation, including discussion of the potential abuse with other professionals (e.g. schools, health workers, community workers), as this is assuming the responsibility of the Social Services. By doing so s/he could complicate an already sensitive situation and perhaps contaminate evidence, which could have negative consequence for subsequent legal proceedings.

A flow chart relating to reporting procedures is included at Appendix 8.1.

1.12 Once a worker becomes aware of or suspects a case of abuse it is important that they make a record of observations, happenings and discussions that are relevant. This record should be factual and not include opinions or personal interpretations of the facts presented.

1.13 The record should be made within 24 hours of the suspicion arising, with each recording dated, signed and stored in a secure place. Records are to be made on the relevant form as provided in Appendix 8.2

1.14 To assist members of staff on how to deal with a situation where a child, young person or vulnerable adult has made a disclosure of Child Abuse -Appendix 8.3 provides guidance on some of the Do's and Don'ts on how to react.

1.15 Where a member of staff or a volunteer observes possible signs of abuse, this should be reported to their line manager to observe and verify the signs and/or symptoms. Extreme discretion must be taken so as not alarm the individual concerned. Where an observation takes place, this should be recorded in a Disclosure of Abuse form (Appendix 8.2) and filed confidentially.

1.16 Where a child, young person or vulnerable adult discloses possible abuse, it is unlikely to be appropriate to involve another staff member or the line manager in the conversation as the disclosure itself will likely already be a traumatic experience for the individual concerned. Notes of the discussion should be made after the conversation has taken place. If a member of staff has observed, this should be reported in a Disclosure of Abuse Form (Appendix 8.2) to be submitted to the line manager and filed confidentially.

1.17 Decisions to refer to the Social Services will be taken by the Designated Officer, who will report the alleged incident directly.

1.18 Issues of Self Harm and Suicide are also a concern with children, young people and vulnerable adults. Appendix 8.4 contains further guidance in this area.

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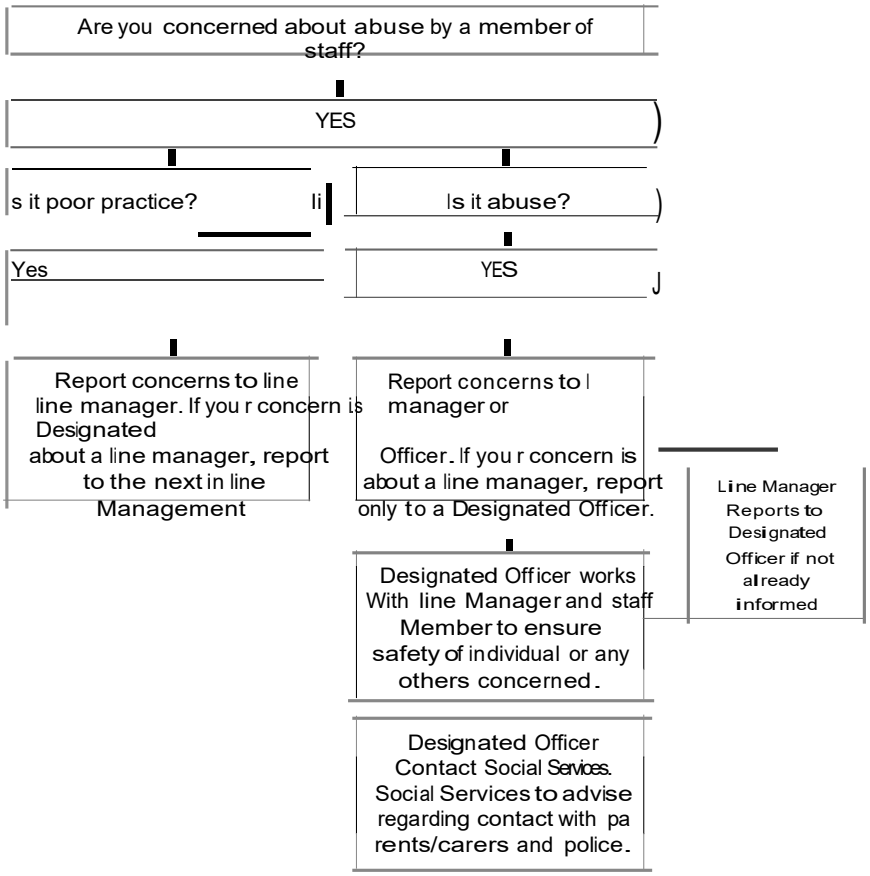
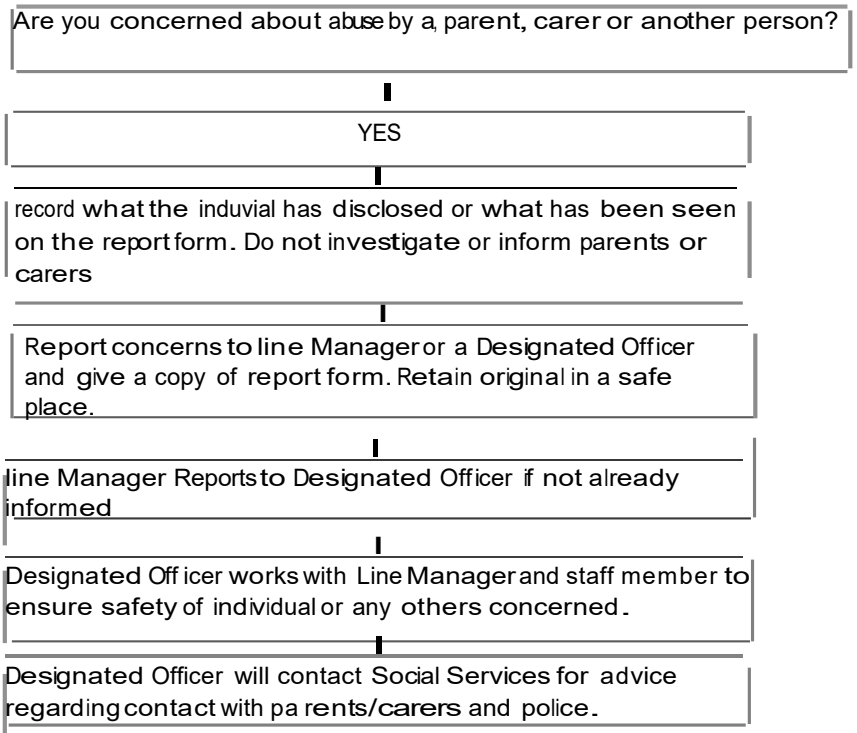
APPENDIX 8.1
ACTION TO TAKE IF YOU SUSPECT CHILD ABUSE

8.1



8.1.2



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APPENDIX 8.2 – Page 1 of 3

REPORT FORM **DISCLOSURE OF ABUSE**

PRIVATE AND CONFIDENTIAL **Please ensure questions are fully answered** **This form must be kept in a secure place**
Centre:
Address:

Name of individual concerned:
Age and DOB:
Parent/ Carer Name(s):
Home Address:
Home Number:
Mobile Number:

REPORT FORM
DISCLOSURE OF ABUSE

Please complete the box below if a child has disclosed to you about the abuse. If the child has not provided any information please state NOT APPLICABLE.
When was the disclosure made (dates and times)?
Where was the disclosure made?
What were the immediate circumstances leading to the disclosure?
Who was the disclosure made to?
Were there others present at the time of disclosure?

YES ☐	**NO ☐**	**DON'T KNOW ☐**

If <u>YES</u>, please state who (name and position) and what role did they play?
Please detail your specific concerns:
What feelings were expressed by the young person before, during and immediately after the disclosure?

REPORT FORM DISCLOSURE OF ABUSE

SIGNS	
Describe any signs of physical injury evident on the individual:	
Describe any signs of behaviour changes of the individual:	
Has anyone been alleged to be the abuser? (if so, please record details)	
Did you and the individual agree to any future course of action?	
Any additional information:	
Signed:	**Date:**
Referred to Line Manager:	**Date:**
Referred to Designated Officer:	**Date:**

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APPENDIX 8.3

GUIDANCE ON DISCLOSURE OF ABUSE AND HOW TO DEAL WITH IT

1 INTRODUCTION

The following information is a guide as to some of the do's and don'ts on how to react when a disclosure of abuse has been made.

DO

- Stay calm
- Recognise your own feelings
- Receive the information
- Reassure
- Listen
- Record immediately after the conversation
- Report to Designated Officer
- Get support for yourself

  (The Designated Officer will be able to direct staff to suitably qualified external agencies.)

DON'T

- Promise confidentiality
- Probe for more information/investigate
- Panic
- Make the child repeat the story unnecessarily
- Use leading questions

Remember:- how you react may mean the child/young person/vulnerable adult telling or not telling his/her story. It may be the beginning of the healing journey for the individual.

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APPENDIX 8.4

SUICIDE AND SELF HARM GUIDELINES

1. INTRODUCTION

In 2004 the Royal College of Psychiatrists observed, 'Deliberate self-harm is a term used when someone injures or harms themselves on purpose. Common examples include "overdosing" (self-poisoning), hitting, cutting, or burning oneself, pulling hair, or picking skin, or self-strangulation. It can also include taking illegal drugs and excessive amounts of alcohol. Self-harm is always a sign of something being seriously wrong."[2] Disclosure of any self-harm should never be ignored; it is a clear sign that someone needs help and that self-esteem is low. Care should always be taken in how this problem is managed and advice should be sought at all times.

1.1 Suicide

Whilst self-harm does not always lead to suicide, nor do those who attempt suicide self-harm, suicide can at times be seen as the ultimate act of self-harm.

If a young person does disclose that they have suicidal thoughts then this should be treated as a child protection issue and thus the reporting process followed.

1.2 Signs of potential suicide risk

- Withdrawing from friends and family
- Loss of interest in usual activities
- Signs of sadness, hopelessness and irritability
- Making negative remarks about themselves
- Talking or writing about suicide
- Putting their affairs in order
- Giving away personal items
- A sudden change from extreme depression to appearing to cope and being calm

These signs are not definitive but are possibly some of the signs displayed by someone who is suicidal. Others may show no sign of their pain at all. The only way to address our concern is to ask.

1.3 What to do if you think or know that a young person is suicidal?

- Listen to how they feel
- Take them seriously
- Offer your support
- Encourage them to seek further help ie a doctor, professional counsellor, family member or friend
- Follow the reporting process (See Appendix 8.1)
- If they appear acutely suicidal and unable to talk, it may be necessary to seek immediate help through hospital casualty department in consultation with a Line
    - Manager or Designated Officer

~~APPENDIX 8.4~~

[2] Royal College of Psychiatrists Self Harm factsheet 26, 2004

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APPENDIX 9 TRIPS AND RESIDENTIALS

9.1 DAY TRIP/RESIDENTIAL PLANNING CHECKLIST
Page 1 of 2

Centres Involved: _____

Date/Dates of Visit: _____

Venue: _____

Staff member responsible: _____

Other staff members involved: _____

	YES	NO
Centre cover has been arranged by management		
The nature of the visit has been established		
The target group has been identified		
All the relevant information regarding the proposed visit has been presented to management e.g. destination, itinerary, timescales etc		
Management has approved the proposed visit		
A risk assessment has been undertaken for all aspects of the visit(s) and appropriate control measures have been put in place and recorded: Full health and safety (first aid, fire safety, recording and consent etc)		
• Hazards have been identified		
• People who may be at risk have been identified		
• Evaluation of the risk has been identified		
• Additional safety and/or control measures have been established		
• Information has been disseminated to all relevant persons and Appropriate records maintained.		
Where residual risks (inherent in all visits) still prevail an appropriate Contingency/emergency plan has been put in place and disseminated to all relevant persons		
The number of leaders has been agreed:		
• A group leader has been identified		
• Accompanying staff have been identified		
• ACCESS NI checks have been undertaken		
• Correct gender and ratios have been organised		

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APPENDIX 9.1 DAY TRIP/RESIDENTIAL PLANNING CHECKLIST
Page 2 of 2

	YES	NO
Leaders are fully aware of:		
• Their roles and responsibilities		
• The standard of conduct required of them during the visits		
Young people and parents (as appropriate) have been informed/briefed and understand the implications of their participation in the visit		
Parents/guardians have given written consent for under 18s to participate		
List of contact details for young people and parents has be given to line manager for emergency purposes		
All relevant information (medical, dietary and contact details) pertaining to the young people participating in the visit (s) has been obtained, recorded and appropriate action taken where necessary.		
The transport arrangements for the group are appropriate for the nature or type of journey planned		
Adequate insurance is in place to cover all aspects of the visit, including transport		
Where a residential visit is planned, the overnight accommodation has been assessed as appropriate in terms of:		
• Its suitability for the group		
• Its compatibility with the objectives of the visit		
• Child protection reporting procedures		
Where the visit involved outdoor or adventurous activities, management and group leader are satisfied that:		
• Appropriate management structures and systems are in place in relation to child protection/health and safety		
• Staff are competent to provide the activities		
• All relevant checks have been undertaken to ensure the above are In Place		
Management has approved the operational arrangements for the visits		

Signed (staff member): **Date:**	**Signed (line manager):** **Date:**

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9.2 CONSENT FORM FOR RESIDENTIALS AND OUTINGS

Anything written on this form will be held in confidence. The leaders need to know these details in order to meet the specific needs of your child.

THE BYTES PROJECT	CENTRE
Location of Trip	
Dates of Trip	
Cost of Trip	
Contact Name & Number for Trip	
Other useful trip information	

I give permission for my child to attend the organisations which I have marked above at their usual meeting places and participate in all their activities

Young Person's Name			
Name usually known by			
Date of Birth		Age on date of trip	
Address			
Postcode			
Phone number			

Emergency Contact Information

Name of Emergency Contact	
Relationship to Young Person	
Mobile Phone Number	
Home Phone Number	
If unavailable contact:	
Home/Mobile Phone Number	
Please indicate any known medical conditions, special needs, allergies or dietary Requirements .	

In the event of illness or accident, having parental responsibility for the above named young person, I give permission for first aid to be administered where considered necessary by a first aider, if available, or medical treatment to be administered by a suitably qualified medical practitioner. In the event of a medical emergency, leaders will endeavour to contact you as soon as possible using the contact telephone numbers given.

During the trip, photographs or video may be taken for general Bytes Project purposes and publicity and for this we need your permission. On signing this form we will assume that you have given permission for your child's photograph to be taken unless otherwise informed.

I confirm the above details are accurate to the best of my knowledge

Signed		Date	

9.3 CONTACT INFORMATION FORM FOR RESIDENTIALS AND OUTINGS

To be completed prior to a residential or outing with a Designated Officer.

Trip Details			
Contact Staff Member		**Phone Number**	

Name	Emergency Contact	Relationship	Mobile	Home Phone	Alternative Contact	Contact number

APPENDIX 10

VOLUNTEER REFERENCE FORM

_____Has expressed an interest in becoming a volunteer and has given your name as a referee.

We would appreciate you being extremely candid in your evaluation of this person:

1. How long have you known this person?_____

2. In what capacity?_____

3. What attributes does this person have that would make them a suitable volunteer?

_____

_____

_____

_____

4. How would you describe their personality?

_____

_____

_____

5. Please rate this person on the following? (Please tick one)

	Poor	Average	Good	V/Good	Excellent
Responsibility					
Maturity					
Self-Motivation					
Can Motive Others					
Commitment					
Energy					

As an organisation committed to the welfare and protection of children, we are anxious to know if you have any reason at all to be concerned about this applicant being in contact with children or young people.

Yes ☐ No ☐ Don't know ☐ (please tick)

If you have answered 'yes' we will contact you in confidence.

Signed: _____ **Date:** _____

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APPENDIX 11

GUIDELINES ON TAKING PHOTOGRAPHS

11.1 Since the introduction of the Data Protection Act in 1998, organisations must be very careful if they use photographs, videos and webcams of clearly identifiable people. The following guidelines should be adhered to

- Permission (verbal or written) should be obtained of all the people (children and adults) who will appear in a photograph, video or webcam image before the
    - Photograph is taken or footage recorded.
- It should be made clear why that person's image is being used, what use you will
    - Make of it, and who might want to look at the pictures.
- Children and young people should not be identified by name or other personal details. These details include email, phone, social media tags or postal addresses.
- When using photographs of children and young people, it is preferable to use group pictures.
- Carefully consider location and pose.
- Do not insist that an individual participates.
- Establish the type of images that appropriately represent the organisation.
- Think about the level of consideration you give to the use of images of young people in publications, for example, the processes involved in choosing appropriate images
    - For the Bytes Project website or publications.

11.2 Rules to Remember

- If the young person is named, avoid using their photograph.
- If a photograph is used, avoid naming the young person.
- Seek parental consent for under 18s for the use of all images for any medium before obtaining photograph.

11.3 Guidelines for the Use of Photographic Filming Equipment

- Provide a clear brief about what is considered appropriate in terms of content and behaviour
- Issue the photographer with identification, which must be worn at all times.
- Inform young people and parents that photographer will be in attendance at an event and ensure they, or their parent if individual is under 18, consent to both the taking and publication of films or photographs.
- Do not allow unsupervised access to young people or one to one photo sessions at events.
- Do not approve/allow photo sessions outside the events or at a young person's home.
- If parents or other spectators are intending to photograph or video at an event they should also be made aware of your expectations.

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APPENDIX 11

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APPENDIX 12

TECHNOLOGY, SOCIAL MEDIA AND CHILD PROTECTION

1. INTRODUCTION

In an increasingly complex world, the opportunities for child abuse are growing. Those who work with children, young people and vulnerable adults need to be aware of the opportunities for abuse through the misuse of the internet, text messaging, video and other media. While good use of such media can be beneficial, we must be vigilant and alert to the possibilities of misuse and the consequent harm to young people that can result. An Acceptable Use of Bytes ICT facilities Policy is in place and should be adhered to. It is Important that guidelines are followed in order to ensure that it is used for its correct purpose and that it is looked after properly.

2. USING COMPUTERS

Computers need to be secure with up to date virus checkers and appropriate filtering applied.

3. THE INTERNET AND SOCIAL MEDIA

Whilst the development of the internet has revolutionised communication systems throughout the world and when appropriately used is an excellent resource, care in its application needs to be exercised so that the safety of a child, young person or vulnerable adult is not compromised.

As well as the prevalence of online grooming, children can often be the victims of cyber bullying. Bullying through the use of social media can be more intense and more difficult to escape than bullying children experience within the playground or school. Further Information on issues pertaining to child protection and the internet can be accessed through CEOP (Child Exploitation Online Protection), www.ceop.police.uk.
CEOP: 0870 000 3344

3.1 Staff must not be 'friends' to, or communicate with, students/clients on 'Facebook', 'Twitter' and other social network or similar websites from personal sites. Any social networking communication to students/clients must be done through an approved Byes site. This site will be subject to all Bytes polices and will be reviewed for content during regular and ad hoc audit checks.

3.2 It is worth noting that everything posted on the internet – comments, opinions and photos – can potentially be seen and copied by anyone else using the internet. Social networking sites have privacy settings for this reason and these limits what any other person, whom you have not accepted as a friend, can view.

3.3 Comments made on the internet should be considered the same as if they were made in a public place. If a child, young person or vulnerable adult discloses something via a social networking site, a chat room or any other public domain publishing method, then the disclosure must be dealt with by following the normal reporting process (see Appendix 8). If A staff member is concerned about something that a young person communicates to him or her via the internet, he or she should encourage them to talk to a suitable adult about it or Arrange to meet with them (within the usual child protection parameters).

3.4 Obscenities/Pornography is not to be written, published, and searched for, bookmarked, accessed or downloaded by anyone using a Bytes device.

3.5 The accessing of inappropriate and indecent materials from the internet or via e-mail may result in disciplinary action being taken.

3.6 Illegal downloading of material may contravene copyright law. Bytes has a legal responsibility to ensure that all material and software used must comply with licensing regulations

3.7 Instant Messaging Services, such as MSN/Yahoo/ICQ/Facebook Messenger are permitted for occasional use and you are trusted to make reasonable personal use of them as long as this does not:

- interfere with job performance;
- give rise to additional cost;
- interfere with the activities of other users;
- support any work other than that of Bytes;
- breach any rules relating to content.

4. MOBILE PHONES

4.1 Staff need to be aware of the opportunities for abuse through the misuse of mobile phone and text messaging. While good use of such media can be beneficial, staff must be vigilant and alert to the possibilities of misuse and consequent harm that can result to young people.

4.2 Staff must also take care to protect themselves and should not have phone numbers for Bytes clients on their personal mobile phone.

4.3 Staff should not give out their personal phone numbers to Bytes clients.

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APPENDIX 13

FORMS AND INFORMATION

This section includes some useful and essential forms to be used as required.

A risk assessment form is an important tool in child protection. This can be found in the Bytes Health and Safety Policy. Appendix 13.4 Provides information on low, medium and high risk activities to support completion of a risk assessment.

13.1 Accident Report Form
13.2 Personal Care Plan for Special Needs Clients
13.3 Useful Websites for Working with Special Needs Clients
13.4 High Risk, Medium Risk and Low Risk Activities

13.1 ACCIDENT REPORT FORMPAGE 1 OF 2

This form should be completed immediately after any accident or significant incident. Once completed, a copy should be forwarded to the line manager and stored confidentially indefinitely.

Day:	Date:	Time:
Name, contact details and ages of those involved in the accident/incident:		
Where did the accident/incident take place?		
Who was responsible for the group? (Name, address and telephone number)		
Who witnessed the accident/incident? (Names, addresses, telephone numbers and ages if under 16). Normally only two witnesses would be needed.		
1.	2.	
Describe the accident/incident. (Include injuries received and any first aid or medical treatment given)		

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Concerning equipment involved:						
Have you retained any defective equipment?	Yes		No		N/A	
If so, where is it being kept?						
What action has been taken to prevent a recurrence of the accident?						

Is the site or premises still safe for use?	Yes		No	
Is the equipment still safe for use?	Yes		No	
Have parents/carers been informed?	Yes		No	
Has the Line Manager been informed?	Yes		No	
Has a Designated Officer been informed?	Yes		No	

Signature of person in charge of group at time of incident/accident		
Signed:	Print Name:	Date:
Signature of Designated Person		
Signed:	Print Name:	Date:

13.2 PERSONAL CARE PLAN FOR SPECIAL NEEDS CLIENTS

Everyone should be treated with respect and dignity. It is important to consider how best to support the special needs of clients.

13.2.1 Planning your programme

- Focus on what the individual can do, rather than what they can't do.
- Aim to be inclusive, think about how the activities can be amended to include a person who has special needs within the group.
- Try teaching to different learning styles e.g. a drama or DVD instead of reading.
- Individuals who have special needs may interact well with music, instruments, visual and audio stimuli, textures.
- Be age appropriate.

13.2.2 Extra help

- Ask the individual's parents or carers to find out how their needs are best met at home or school. For example, do they use pictures or Makaton to communicate?
- Research conditions/circumstances to find out about how you can best support the individual in the group.
- Check if there are any triggers for behaviour problems e.g. loud noises or eating/drinking problems.

13.2.3 Personal Care

- Try to have the same staff member involved in helping them.
- Draw up a personal care plan.

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13.2.4 PERSONAL CARE PLAN FORM

INFORMATION FOR STAFF ONLY	**CONFIDENTIAL**
NAME OF INDIVIDUAL:	
DATE:	
Eating/Drinking e.g. needs reminded to eat or drink, needs food intake monitored, Allergies	
Medical e.g. medication, inhalers, treatment	
Behaviour e.g. reacts to loud noises, difficulty holding attention	
Mobility e.g. difficulty in some movements	
Likes/Dislikes e.g. bright or flashing light, repetitive actions, particular tasks	
Any other relevant information:	

13.3 USEFUL WEBSITES FOR WORKING WITH SPECIAL NEEDS CLIENTS

General www.cafamily.org.uk
www.disabilityaction.org
www.healthpromotionagency.org.uk
www.prospects.org.uk
www.throughtheroof.org

Allergies
www.allergyni.co.uk
www.epipen.co.uk
www.kidsallergies.co.uk

Asthma
www.asthma.org.uk

Asperger's Syndrome
www.nas.org.uk
www.aspennj.org

Attention Deficit Hyperactivity Disorder (ADHD)
www.addnet.uk

Autism
www.autism.org
www.nas.org.uk

Brain Injury
www.headway.org.uk
www. braininjurymatters.org.uk

Cerebral Palsy
www.kidshealth.org/kid/health_problems
www.ninds.nih.gov/health

Crohns & Ulcerative Colitis
www.crohns.org.uk

Diabetes
www.diabetes.org.uk

Down's Syndrome
www.downs-syndrome.org.uk
www.sdsa.org.uk

Dyslexia
www.bda-dyslexia.org.uk
www.dyslexia-inst.org.uk

Dyspraxia
www.emmbrook.demon.co.uk/dysprax/homepage. htm

Epilepsy
www.epilepsy.org.uk
www.epilepsynse.org.uk

Expressive Language Difficulties
www.afasic.org.uk
www.ican.org.uk
www.hanen.org.uk
www.specialed.about.com

Hearing Impairment
www.batod.org.uk
www.ndcs.org.uk
www.actiononhearingloss.org.uk

Moderate Learning Difficulties
www.dfes.gov.uk

Muscular Dystrophy
www.muscular-dystrophy.org

Visual Impairment
www.rnib.org.uk

Wheelchair User
www.wheelchairnet.org

13.4 HIGH RISK, MEDIUM RISK AND LOW RISK ACTIVITIES

HIGH RISK ACTIVITIES	
Water sports	Rafting
Potholing	Racing other than on foot
Flying	Bonfires
Hang Gliding	Hot air ballooning
Physical contact sports (e.g. boxing, fencing, martial arts)	Use of firearms (Inc clay pigeon shooting, airsoft, paintballing)
Parachuting	Use of power driven machinery
Winter sports	Fireworks
Motor vehicles, Go-Karting, Quad Bikes	Mountain Biking
Mountaineering	Cliff or rock climbing
Abseiling	Skateboarding
Rugby	American Football

MEDIUM RISK ACTIVITIES	
Bouncy Castles, Inflatable Slides/Runs	Tractor Rides
BBQs	Community Events e.g. 'Party in the Park'
Pony rides	Rodeo Bull
Archery/Darts	Ice Skating
Mini assault courses	'It's a Knockout' Competitions
Football competitions	Sports camps
Trampolining	Bowling

LOW RISK ACTIVITIES	
Sponsored Walk	Fun Run
Art Exhibition	Coffee Morning
Cinema Trip	Table Quiz

Appendix 13.5

Priorities for Youth, The Marshall Report on tackling Child Exploitation in Northern Ireland covering Child sex trafficking.

Guidelines as set down by the Department for Education NI. 2015

1) Introduction:

This section explores what is meant by child sexual exploitation and the need for a shared understanding. It refers to types of CSE identified in research and what the Inquiry has learned about what is currently happening in Northern Ireland. It also identifies the conditions and predisposing factors that may increase the risk of CSE occurring. Whilst media attention has focused on victims within the care system, this chapter discusses how children and young people from any background can be affected.

This report has been supported by the following.
The Regional and Quality Improvement Authority (RQIA)
The Education and Training Inspectorate (ETI)
The Criminal Justice Inspection for Northern Ireland (CJI)

Linking documents to this covers:

2) Priorities for Youth:

In Oct 13 the DE launched a new initiative known as Priorities for Youth, with the vision of Improving Young People's Lives through Youth Work. The new policy looked at the following points as key to be addressed:

- Raising Standards for All
- Closing the Performance Gaps
- Increasing Access and Equality

These are achieved through enabling goals of:

- Developing the Educated Workforce
- Improving the Learning Environment
- Transforming Governance and Management of Education

In line with the Priorities for Youth expansion of the themes has been sought to cover key aspects of CSE Child Sexual Exploitation, direction for this has been provided in the form of an independent report known as "The Marshall Report". Nov 14

3) The Marshall report covers Cross Sectorial Child Safeguarding

The Inquiry received accounts of organised gangs linked with trafficking and drug dealing. Trafficking into, out of, or within Northern Ireland, can be a form of CSE, and drug dealing is often associated with CSE. Northern Ireland does not have the type of street gang culture identified with some forms of CSE.

The particular Northern Ireland dimension reported to the Inquiry was the involvement of powerful individuals with purported links to paramilitary organisations. No-one suggested that CSE was a targeted activity of paramilitary groups.

It was a case of individuals using the authority of their paramilitary links and the fear it engendered, to exploit children and young people. The Inquiry was told that there were bars dominated by members of paramilitary groups, where there were lock-ins after hours and sexual exploitation took place.

4) The Party House Scenario

The party house scenario featured highly in discussions with agencies and young people. It is difficult to estimate the extent to which these are occasions for CSE because young people do not consider themselves as victims, even when they can acknowledge the vulnerabilities of friends and peers.

Parties are sometimes attended by, or organised by, adults. These were described as being mostly individuals or groups, rather than organised gangs, who coalesce around vulnerable children.

Alcohol and drugs render the young people vulnerable. Many adults reported their concerns about the extent of underage drinking and their experience that licensing laws were not routinely enforced. There was repeated reference to the increasing problem of legal highs. These are substances that produce effects similar to other drugs, but they are not subject to the same regulation. Their composition changes frequently to avoid them falling into restricted categories.

5) Technology

Developments in communication technology, while bringing many benefits, have increased the vulnerability of children. Even very young children have accessed pornography and tried to act it out. Young people's views about what is normal are affected by this and by other messages from the media. This has helped shape what some refer to as a new normality amongst young people, involving an expectation of multiple sexual partners, and sexual activity in circumstances where the existence of consent is often questionable.

Social media allows young people to extend their networks very easily and communicate with a wide range of people unknown to their parents. This vulnerability can be exploited by adults with malicious intent. Sexting is reported to be widespread in schools. Often these images will remain private to the sender and recipient, but they can be easily shared, with serious consequences for the young victim. Children with disabilities can be particularly affected by exploitation involving social media as many rely on this as a central and valuable tool for social engagement. Lesbian, gay, bisexual and transgender (LGBT) young people report deficiencies in relevant sex education. This, together with the limited opportunities for associating with other LGBT young people, due to cultural attitudes, renders them vulnerable to exploitation both online and in city venues.

6) Operation Owl

PSNI advised that Operation Owl arose as a result of the internal review of public protection arrangements. When examining the particular area of missing persons, it was noted that a small number of children were going missing a significant number of times. In particular, 13 children accounted for 10% of all missing persons' reports, while 40 children had been reported missing more than 25 times in 16 months.

As a consequence, a senior investigating officer was appointed to scrutinise these particular missing children's cases. This resulted in the establishment of Operation Owl in May 2013, to further examine these issues, reduce harm and give assurances of the policing response.

Operation Owl was subject to joint protocol arrangements between the police and HSC sectors and an operational group was established, involving a range of disciplines and agencies.

The Inquiry was advised that the risk of CSE had already been identified as a key issue for most of the young people involved in Operation Owl. The significance of Operation Owl was that it allowed a fresh look at cases where young people had gone missing, to reconsider the issues raised, map any patterns relating to offenders and seek to ensure that appropriate action had been taken.

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Appendix 14

General and Parental Complaints

The Bytes Project is committed to taking general/parental complaints and concerns seriously, at the earliest stage, in the hope of keeping the number of formal complaints to a minimum and without needing formal procedures. However, depending on the nature of the complaint, you may wish or be asked to follow the organisations formal complaints procedure.

Policy Statement

The Bytes Project promises that it will pursue actively any complaints received in connection with its services, staff conduct or organised activities. This procedure sets out what will be done to make sure this happens.

Employees and volunteers will take responsibility to own “problems” and deal with them through the complaints procedure. An important test of good service is that whoever the complainant happens to contact first must ensure that they are sympathetic and listen to the concerns with the aim of resolving the complaint at this first opportunity. Dealing with complaints is the responsibility of everyone. Staff will be trained, where appropriate, in appropriate skills and behaviours. This is to make sure the approach to complaints is consistent, of a high standard, and always addressed with a “client first” ethos.

Aims of the General and Parental Complaint Policy/Procedure

To enable all employees and volunteers to understand the importance of a speedy and effective response to a complaint.

To ensure a consistent approach to all complaints.

To help identify recurring problem areas so that improvements can be made.

Responsibility

The Head of Projects is responsible for the development and monitoring of this policy and making sure all employees/volunteers know and understand their responsibilities. He/she will also make sure that complaints are recorded, monitored, and satisfactorily resolved and reported.

Definition

A complaint is any expression of dissatisfaction with a service or the organisation or its employees or volunteers that needs a response.

Procedures

All complaints are logged and recorded by the employee or volunteer who receives the complaint. This will show the following:

- Date and time of complaint
- Name of staff member completing the record
- Short description of complaint #
- Action taken
- Outcomes

Complaints can be received by:

- Letter
- Email
- Telephone
- Face to face

The Youth Worker/Staff Member who logs the complaint is responsible for informing the Head of Projects this has happened and making sure the information is accurate and logged as soon as possible.

This recording is vital in making sure the parent/complainant is not repeatedly asked for information again, should the complaint be escalated.

Outcomes are recorded when the complaint has been resolved to the satisfaction of the complainant.

The aim is to resolve all complaints as swiftly as possible. All complaints will be acknowledged via letter/email within 5 working days of receipt. Complainants will be advised in this communication of the complaints procedure and details of who they can speak to about it. This will be supplied at all stages.

Procedure

There are three stages to the complaints procedure:

Stage 1 - Resolve at the first point of contact – Youth Worker

All attempts should be made to resolve the complaint immediately by the person who receives the complaint, at this first point of contact. It is envisaged that the majority of complaints will be resolved at this stage.

If the complainant decides they are not satisfied, or the member of staff is unable to resolve the issue, then the complaint moves to Stage Two.

Stage 2 - Head of Projects

It is envisaged that all complaints should be resolved and dealt with satisfactorily from the viewpoint of the complainant at this stage. The complaint will be reviewed by the Head of Projects who will investigate and respond to the complainant within 10 working days.

If the complainant is not satisfied, they have the right for their complaint to be dealt with by the CEO/Deputy CEO.

Stage 3 - Escalated Complaint to CEO/Deputy CEO

Complaints at this stage are considered to be very serious. The complaint is passed to the CEO/Deputy CEP to deal with. He/she will investigate the complaint and after gathering all evidence will give an appropriate written response to the complainant within 5 working days. If this is not possible the complainant will be kept updated regularly on progress whilst the complaint is being investigated.

It is the intention that all complaints will be resolved at this point.

Complaints about the CEO/Deputy CEO

If the general/parental complaint is about the CEO or Deputy CEO, complainants will be invited to complain to the other Trustees. In these instances, it is the responsibility of the Board of Trustees to resolve the issue. A representative from the Board will send the Complainant/Parent a full written response within two days of its meeting.

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Appendix 15

PREVENTATIVE PRACTICE

Many children, young people are unable to recognise abusive or unsafe behaviour or identify who/what poses a threat to them and they may not know how and where to seek help.

Preventative education can give children the knowledge and skills they need to keep themselves safe and it can also help to disclose safeguarding issues earlier.

The Bytes Project delivers preventative and early intervention work to support children, young people and vulnerable adults to take steps to safeguard themselves from harm or risk of harm.

Preventative work that The Bytes Project Delivers to Children, Young People and Vulnerable Adults include, but are not limited to:

- Positive Relationships
- Mental and Emotional Well-being
- Child Sexual Exploitation (CSE)
- Cyber Bullying
- Keeping Safe Online
- Drugs and Alcohol Awareness
- Young People and Youth Justice
- Anti-Social Behaviour Awareness
- Physical and Mental Health Awareness
- Promoting Resilience in Children and Young People

Bytes Preventative Practice and Early Intervention Work is bespoke; designed and delivered to meet the needs of the target group. Parental consent is sought before Awareness Raising and Keeping Safe workshops are delivered, and background information on the participants to establish individual needs of each individual.

The Bytes Project delivery staff and/or external facilitators deliver a full brief prior to each session to make participants aware of the content and delivery materials, to avoid any triggers in young people who are victims of abuse, CSE, or addictions.