



SAFEGUARDING

POLICY & PROCEDURES

and

GUIDELINES FOR SAFE WORKING

*For staff and volunteers
working with adults at risk,
children and youth within
KBC.*

This policy is in accordance with and incorporates the Baptist Union of Scotland Safeguarding Policy and Appendices.

Details of the place of worship

Name of Place of Worship: Kirkintilloch Baptist Church

Address: 52 Townhead, Kirkintilloch, G66 1NL

Tel No: 0141 578 6006 **Email address:** info@kirkiebaptist.com

Website: www.kirkiebaptist.com

Membership of Denomination: Baptist Union of Scotland

Other affiliations: Evangelical Alliance, thirtyone:eight

Charity Number: SCO 13909

Volunteer Scotland: code: AA1044

Insurance Company: Ansvar Insurance

Policy updated November 2025

CONTENTS

Page number

General Introduction

SECTION 1 Policy and procedures

1:1	Introduction	7
1:2	Background	7
1:3	Standards	8
1:4	Who will use this document?	9
1.5	Purpose of the Policy	10
1.6	Members of the Safeguarding Group	10

SECTION 2 Recognising and responding appropriately to an allegation or suspicion of abuse of a child (children)

2:1	Definition of “child”	11
2:2	Understanding abuse and neglect	11
2:3	Definition of child abuse	12
2:4	Categories of abuse	12
2:5	Signs of possible abuse	15
2:6	How to respond to a child wishing to disclose abuse	16
2:7	Flow chart for action	18

SECTION 3 Recognising and responding appropriately to an allegation or suspicion of abuse of an adult

3:1	Definition of Abuse – Adults	19
3:2	Categories of abuse - Adults	20
3:3	Signs of possible abuse in adults	21

SECTION 4 Responding to allegations of abuse

4:1	Procedures	24
4:2	Detailed procedures where there is concern about a child	25
4:3	Detailed procedures where there is concern about an adult	26
4:4	Allegations of abuse against a person who works with children or adults at risk	26
4:5	Good practice guidelines when information has been received	27

SECTION 5 Practice guidelines

5:1	Introduction	28
5:2	Position of trust	28
5:3	Taking care of touching	28
5:4	Guidelines for discipline	29
5:5	Ratios of adults to children and young people	30
5:6	Responsibilities of younger and trainee leaders	30
5:7	Intimate Care instructions	31

5:8	Praying with children and young people	32
5:9	Organising an outing	35
5:10	Transporting children in vehicles	36
5:11	Social Media Guidelines	37

SECTION 6 Pastoral care

6:1	Supporting those affected by abuse	38
6:2	Working with offenders	38
6:3	Pastoral care: Offenders	39

SECTION 7 Residential holidays

7:1	Appointment and supervision of workers	41
7:2	Responding to allegations	41
7:3	General safety	42
7:4	Electrical equipment	42
7:5	Fire safety	42
7:6	First aid	43
7:7	Adventurous holidays	43
7:8	Food health and hygiene	43
7:9	Sleeping arrangements	44
7:10	Insurance	44
7:11	Checklist for sleepovers	44
7:12	Emergency contacts	45

SECTION 8 Health and Safety

8:1	Reporting accidents and incidents	46
8:2	Food hygiene	47
8:3	Health and Safety policy	49
8:4	Fire safety policy	48
8:5	Emergency escape procedures	48
8:6	Infection Prevention and Control	48

Brief description of our place of worship and the type of work / activities we undertake with children / adults:

We meet in a modern purpose-built building with the main auditorium seating approximately 350 people. In addition, we have a large hall, coffee lounge and a number of smaller rooms and offices. We normally hold morning and evening services and an afternoon Café Church on a Sunday catering for approximately 450 people of all ages and social backgrounds.

Our main work with **children**, including young people up to the age of sixteen years, is indicated below with the approximate numbers of attendees in brackets:

- **Sunday Groups** – a learning programme for children from 3-11yrs (50–60)
- **Crèche** - during Sunday Services for Children 0-3 (10)
- **Townhead Toddlers** - Babies and Toddlers aged 0-3 (60)
- **L2J** – Boys' and Girls' discipleship groups P4 – P7 (12- 14 in each)
- **Summer Holiday Club** for Children from P1 until they leave P7 (120)
- **Connect Hillhead / Meet and Eat** – in collaboration with Hillhead St Columba's C of S – children and families – Bible story, games etc
- **Friday Lighthouse** – a youth club for young people from P6-S3 (130)
- **Equip (Bible Class held during morning services)** for children from 11-17yrs
- **Youth Home Groups** for children aged from 11-18 yrs (different groups for different ages)

Our main work with **adults** is indicated below:

- **Second Tuesday** – a lunch club / service for the over 50's (approx. attendance 60)
- **Senior Coffee morning** – a coffee afternoon for the over 50's (approx. attendance 25)
- **Pastoral Visiting** – most of the elderly people in our congregation receive a 'pastoral visit' approximately once every three months. This may become more regular during times of illness or bereavement. Other people who may receive a pastoral visit are those who are experiencing difficulties within their lives, such as physical illness including admission to hospital, mental health illness, family relationship difficulties, people who have experienced loss and bereavement and those coping with financial difficulties or unemployment.
- **Christians Against Poverty** – offers debt counselling and a very small percentage could be adults at risk. As part of CAP's ministry, we also run a CAP Job Club.

- **East Dunbartonshire Food Bank** – this operates in several locations and offers food and ‘signposting’ to other agencies; those attending could include some adults at risk.
- **Greenhouse Cafe** – this is a coffee shop open Monday to Friday and occasionally informal support can be offered.
- **Prayer Drop In** – the main sanctuary of the church can be open when people are free to come into the church for a time of prayer. People may pray on their own or if they so request to have someone to pray for them, then volunteers are available to do this.
- **Refresh-** Refresh is an opportunity to build relationships and attend to inner well being through crafts whilst exploring the simple rhythms of prayer. It offers support to anyone who needs it.
- **Warm Space** – in the sanctuary of the church when people can come in to a welcoming environment and have a cup of tea and light refreshment and meet people from the church.
- **Cultivate** – a lunch time space with an opportunity to explore faith.

SECTION 1

Policy and Procedures

1:1 Introduction

The purpose of this policy is to protect children and adults who may be vulnerable or at risk of harm, and to protect staff and volunteers who are involved within the organisations of KBC. By implementing this policy all staff and volunteers will have clear guidance and the necessary knowledge and information to perform their role in a way that will enhance the wellbeing of those who are part of the work at KBC.

It is recognised that there can be variation in practice when it comes to safeguarding children and adults who may be vulnerable and that this may happen for various reasons, such as because of cultural traditions, beliefs and religious practices or understanding, or because of a lack of insight or understanding of what actually constitutes abuse. The guidelines in this policy reflect the need for greater recognition of what constitutes abuse, and how this is recognised and responded to in the work of KBC. Adherence to the policy should ensure consistency and clarity across different groupings and agencies and also promote good practice irrespective of race, ethnicity or religious belief.

This policy sets out clear guidelines with regard to our expectations of those with whom we work in partnership, whether in the UK or elsewhere. We will discuss with all partners our safeguarding expectations and have partnerships agreements for safeguarding. It is a requirement that any organisation using our premises where children, young people or adults who may be vulnerable are in attendance will as part of the letting agreement have their own policy that meets *Thirtyone:eight's* safeguarding standards.

Good communication is essential in promoting safeguarding, both with those whom we wish to protect, to everyone involved in working with children and adults who may be vulnerable and for all those with whom we work in partnership. KBC is committed to ensuring that the human rights of everyone we work with are adhered to and will ensure that all volunteers and workers go through an appropriate recruitment process which is detailed in the [leader's toolkit](#) and are then provided with appropriate support, information and guidance to enable them to carry out their role responsibly and effectively.

1:2 Background

KBC has a growing children's and young people's ministry. There is contact, most weeks, with over two hundred children and young people and we take seriously our responsibility to protect and safeguard the welfare of those entrusted to our care. In addition we have a significant number of adults who may be at risk linked to the church and we are committed to having procedures in place that will ensure their protection and support. In particular the leadership of the church acknowledges its responsibility to care for and protect the welfare of children, young people and adults and for that reason has drawn up this document.

We want to encourage best practice in our dealings with vulnerable people of whatever age in the life of our church to enable them to develop and grow in the security of a community that has learnt how to offer appropriate care, and to ensure their safety and well-being. This is necessary because children, young people and adults are sometimes harmed by people who are in positions of trust and are called to care for them, and also more rarely by strangers. The harm can be intentional or unintentional. It can be malicious or caused through thoughtlessness or inadequacy. We need to be open and honest about the reality of what actually goes on in the world in which we live, and also need to acknowledge that this impinges on church communities.

We recognise that:

- Best practice will serve the needs of all our children at each stage of their development.
- Some of the children we welcome into our church community may be children who are harmed at home.
- Some people who are looking for opportunities to harm children will establish relationships with children through church communities.
- Thoughtless or careless attitudes and behaviour on the part of volunteers and paid workers within the church setting can be harmful to young people.
- People sometimes unnecessarily place themselves in situations in which they are open to accusation or suspicion.
- Survivors of abuse may be members of our congregation and attend different groups and activities organised through the church – they, in particular, will want to be confident that the church has the correct procedures in place to ensure that everything possible is being done to prevent others in the present and in the future experiencing the pain they have endured.

1:3 Standards

This document forms the Safeguarding Policy for Kirkintilloch Baptist Church. The policy and attached practice guidelines are based on the ten Safe and Secure safeguarding standards published by *Thirtyone:eight* (formerly CCPAS)

Standard 1

Organisations should adopt a formal, working safeguarding policy.

Standard 2

Organisations must develop safeguarding awareness and provide training.

Standard 3

Organisations should adopt a formal recruitment policy for both paid and voluntary workers.

Standard 4

Workers, paid and voluntary, should be appropriately managed, supervised and supported.

Standard 5

Organisations must ensure they adopt safe working practice.

Standard 6

Organisations should ensure that workers know how to talk with, listen and relate to children with whom they come in contact.

Standard 7

Workers must develop awareness of the issues surrounding abuse, be able to recognise possible signs and symptoms and respond appropriately.

Standard 8

Organisations should ensure pastoral care and support is available to all those affected by abuse.

Standard 9

Organisations must supervise and manage those who pose a risk to children.

Standard 10

Organisations working in specialised areas, culturally diverse settings or through partner organisations or agencies must ensure appropriate safeguarding policies and procedures are in place.

1:4 Who will use this document?

The constituency for this Safeguarding Policy is:

- Those who work with children, young people so that they are fully aware of what is expected and required of them in relation to Child Protection.
- Those who work with adults who are vulnerable and may be at risk so that they are fully aware of what is expected and required of them in relation to Safeguarding.
- Those involved in monitoring adherence to the Safeguarding Policy, to ensure they have clear guidelines about what is required in relation to safeguarding legislation and best practice, including: West of Scotland Inter-Agency Child Protection Procedures; East Dunbartonshire Council Multi Agency Adult Protection Procedures; Children (Scotland) Act 2005; UN Convention on the Rights of the Child; Adult Support & Protection (Scotland) Act (2007); and the Regulation of Care (Scotland) Act 2001.

- Volunteer Scotland or other Government or Local Authority Agency for scrutiny and inspection purposes.
- Parents, carers and indeed anyone who has an interest in or is concerned about our policy and practice.

1:5 Purpose of the policy

The document outlines:

- An Introduction and Background to KBC's Safeguarding Policy and Procedures
- A Set of Standards which KBC adheres to
- A Code of Conduct which details the standards of behaviour KBC expects of its staff and volunteers when working with all children and adults
- A Framework for Action which provides a clear process by which concerns regarding actual or allegations of abuse may be raised
- A Leadership Safeguarding Statement

1:6 Safeguarding Group

The safeguarding group meets quarterly and the current members are

Gillian Allan

Catherine Davison

Matt Holden

Anne Healy

Jon Pritchard

Lesley Don

SECTION 2

Recognising and responding appropriately to an allegation or suspicion of abuse of a child (children)

2:1 Definition of “Child”

Usually a child is under sixteen or under eighteen years. In Part 1 of the Children Scotland Act a child can be under eighteen, however all parental rights and responsibilities except that to provide guidance relate only to those under sixteen. Within Parts 2 and 3 of the Act (Hearing and Child Protection) a child is usually under sixteen. As per the Protection of Vulnerable Groups (Scotland) Act 2007 children with additional support needs or children subject to supervision requirements, the upper limit for protecting from abuse may be extended.

2:2 Understanding abuse and neglect

Defining child abuse or abuse against an adult is a difficult and complex issue. A person may abuse by inflicting harm, or failing to prevent harm. Children and adults in need of protection may be abused within a family, an institution or a community setting. Very often the abuser is known or in a trusted relationship with the child or adult.

In order to safeguard those in our places of worship and organisations we adhere to the UN Convention on the Rights of the Child and have as our starting point as a definition of abuse, Article 19 which states:

1. Parties shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child.

2. Such protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement.

Also for adults the UN Universal Declaration of Human Rights with particular reference to Article 5 which states:

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

2:3 Definition of Child Abuse

Statutory Definitions of Abuse (Children) Scotland

Child protection is the protection of children from violence, exploitation, abuse and neglect. Article 19 of the UN Convention on the Rights of the Child provides for the protection of children in and out of the home. The Scottish Government have produced National Guidance for Child Protection in Scotland 2014 (The Scottish Government, 2014) along with the Children and Young People (Scotland) Act 2014. This guidance replaces the previous version published in 2010 and Protecting Children – A Shared Responsibility: Guidance on Inter-agency Co-operation, which was published in 1998 and incorporates the Scottish Government guidance, Protecting Children and Young People: Child Protection Committees (2005).

What is child abuse and child neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child. Children may be abused in a family or in an institutional setting, by those known to them or, more rarely, by a stranger. Assessments will need to consider whether abuse has occurred or is likely to occur. While it is not necessary to identify specific areas of concern when adding a child's name to the Child Protection Register, it is still helpful to consider and understand the different ways in which children can be abused. The following definitions show some of the ways in which abuse may be experienced by a child but are not exhaustive, as the individual circumstances of abuse will vary from child to child.

2:4 Categories of Abuse

Physical abuse

Physical abuse is the causing of physical harm to a child or young person. Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

Emotional abuse

Emotional abuse is persistent emotional neglect or ill treatment that has severe and persistent adverse effects on a child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may involve the imposition of age - or developmentally - inappropriate expectations on a child. It may involve causing children to feel frightened or in danger, or exploiting or corrupting children.

Some level of emotional abuse is present in all types of ill treatment of a child; it can also occur independently of other forms of abuse.

Sexual abuse

Sexual abuse is any act that involves the child in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented. Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts.

They may include non-contact activities, such as involving children in looking at, or in the production of indecent images or in watching sexual activities, using sexual language towards a child or encouraging children to behave in sexually inappropriate ways.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. It may involve a parent or carer failing to provide adequate food, shelter and clothing, to protect a child from physical harm or danger, or to ensure access to appropriate medical care or treatment. It may also include neglect of, or failure to respond to, a child's basic emotional needs. Neglect may also result in the child being diagnosed as suffering from, non-organic failure to thrive, where they have significantly failed to reach normal weight and growth or development milestones and where physical and genetic reasons have been medically eliminated. In its extreme form children can be at serious risk from the effects of malnutrition, lack of nurturing and stimulation. This can lead to serious long-term effects such as greater susceptibility to serious childhood illnesses and reduction in potential stature. With young children in particular, the consequences may be life-threatening within a relatively short period of time.

Physical Injury

Actual or attempted physical injury to a child, including the administration of toxic substances, where there is knowledge, or reasonable suspicion that the injury was inflicted or knowingly not prevented.

Online abuse

The sexual exploitation of children and young people is an often hidden form of child sexual abuse, with distinctive elements of exploitation and exchange. CSE can begin with grooming online or even stay wholly online, but can also lead to a meeting in person with a perpetrator, putting the child or young person at further risk. Grooming online is the befriending and establishing an emotional connection with a child or vulnerable adult and sometimes with the family to lower the child or vulnerable adult's inhibitions with the objective of sexual abuse.

Specific areas of concern

Domestic Abuse is any form of physical, verbal, sexual, psychological or financial abuse which might amount to criminal conduct and which takes place within the context of a relationship. The relationship may be between partners (married, cohabiting, in a civil partnership or otherwise), or ex-partners.

The abuse may be committed in the home or elsewhere, including online. Domestic abuse includes degrading, threatening and humiliating behaviour predominantly by men and predominantly towards women.

There is significant evidence of links between domestic abuse and emotional, physical and sexual abuse of children, and children themselves can experience domestic abuse as 'coercive control' of the whole family environment, not just of their mother.

Child sexual exploitation (CSE) is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a person under 18 into sexual activity in exchange for something the victim needs or wants, and/or for the financial advantage or increased status of the perpetrator or facilitator

Female Genital Mutilation comprises all procedures or rituals that involve partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons.

Human Trafficking and Exploitation Modern Slavery is an umbrella term often used to refer to crimes of human trafficking, slavery, servitude and forced or compulsory labour. A serious and often hidden crime in which people are exploited for criminal gain.

The aim of Prevent is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. Delivery of Prevent is grounded in early intervention and safeguarding.

Child trafficking involves the recruitment, transportation, transfer, harbouring or receipt, exchange or transfer of control of a child under the age of 18 years for the purposes of exploitation. Transfer or movement can be within an area and does not have to be across borders. Examples of and reasons for trafficking can include sexual, criminal and financial exploitation, forced labour, removal of organs, illegal adoption, and forced or illegal marriage.

The common factors are a victim is, or is intended to be, used or exploited for someone else's (usually financial) gain, without respect for their human rights.

Radicalisation This can happen when someone is befriended, groomed or manipulated into believing that it is right to use harmful behaviour and language to express their views about things like politics, ethnicity or faith.

Extremism When someone becomes radicalised in this way, and uses harmful behaviour like this, it is known as extremism. When someone also uses violence to express their beliefs, extremism becomes terrorism.

2:5 Signs of Possible Abuse (children & young people)

The following signs could be indicators that abuse has taken place but should be considered in context of the child's whole life.

Physical

- Injuries not consistent with the explanation given for them
- Injuries that occur in places not normally exposed to falls, rough games, etc
- Injuries that have not received medical attention
- Reluctance to change for, or participate in, games or swimming
- Repeated urinary infections or unexplained tummy pains
- Bruises, bites, burns, fractures etc which do not have an accidental explanation*
- Cuts/scratches/substance abuse*

Sexual

- Any allegations made concerning sexual abuse
- Excessive preoccupation with sexual matters and detailed knowledge of adult sexual behaviour
- Age-inappropriate sexual activity through words, play or drawing
- Child who is sexually provocative or seductive with adults
- Inappropriate bed-sharing arrangements at home
- Severe sleep disturbances with fears, phobias, vivid dreams or nightmares, sometimes with overt or veiled sexual connotations
- Eating disorders - anorexia, bulimia*

Emotional

- Changes or regression in mood or behaviour, particularly where a child withdraws or becomes clinging.
- Depression, aggression, extreme anxiety.
- Nervousness, frozen watchfulness
- Obsessions or phobias
- Sudden under-achievement or lack of concentration

- Inappropriate relationships with peers and/or adults
- Attention-seeking behaviour
- Persistent tiredness
- Running away/stealing/lying

Neglect

- Under nourishment, failure to grow, constant hunger, stealing or gorging food, untreated illnesses.
- Inadequate care including the failure to meet basic physical care needs as evidenced by dirty or ill-fitting clothes.

*These are indicators that a child or young person may be self-harming. Approximately 20,000 are treated in accident and emergency departments in the UK each year.

2:6 How to respond to a child wishing to disclose abuse

Effective Listening

Ensure the physical environment is welcoming, giving opportunity for the child or vulnerable adult to talk in private but making sure others are aware the conversation is taking place.

- There is a need to explain from the outset that you may have to share some aspects of the conversation with someone else
- It is especially important to allow time and space for the person to talk
- Above everything else listen without interrupting
- Be attentive and look at them whilst they are speaking
- Show acceptance of what they say (however unlikely the story may sound) by reflecting back words or short phrases they have used
- Try to remain calm, even if on the inside you are feeling something different
- Be honest and don't make promises you can't keep regarding confidentiality
- If they decide not to tell you after all, accept their decision but let them know that you are always ready to listen.
- Use language that is age appropriate and, for those with disabilities, ensure there is someone available who understands sign language, Braille etc.

HELPFUL RESPONSES

Reassure the child:

- You have done the right thing in telling

- I am glad you have told me
- I will try to help you

DON'T SAY

Be careful not to start 'investigating' – encourage the child to do the talking:

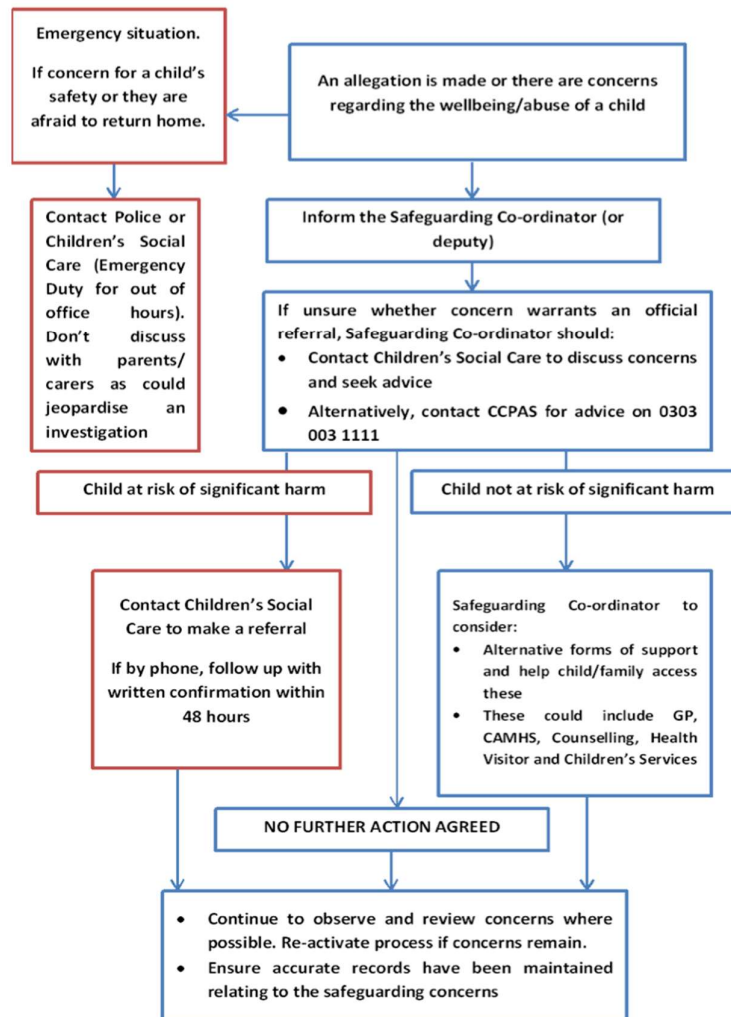
- Why didn't you tell anyone before?
- I can't believe it!
- Are you sure this is true?
- Why? How? When? Who? Where?
- I am shocked, don't tell anyone else

2:7 Flow Chart for Action (children & young people)

Flowchart for Action Children and Young People



This flow chart provides an overview of action to be taken when concerned about the welfare of a child. It is to be used in conjunction with written procedures.



Working Together to Safeguard Children defines significant harm as:

“... any Physical, Sexual, or Emotional Abuse, Neglect, accident or injury that is sufficiently serious to adversely affect progress and enjoyment of life. Harm is defined as the ill treatment or impairment of health and development.”

SECTION 3

Recognising and responding appropriately to an allegation or suspicion of abuse of an adult

3:1 Definitions of Abuse - Adults

The legal framework in Scotland for protecting Adults who may be at risk of harm or in need of protection includes the following main pieces of legislation:

The Adult Support and Protection (Scotland) Act 2007

The Act, defines 'adults at risk' as individuals, aged 16 years or over, who:

- are unable to safeguard themselves, their property, rights or other interests;
- are at risk of **harm**; and
- because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than others who are not so affected.

The presence of a particular condition does not automatically mean an adult is an "adult at risk". Someone could have a disability but be able to safeguard their well-being etc. It is important to stress that all three elements of this definition must be met. It is the whole of an adult's particular circumstances which can combine to make them more susceptible to harm than others.

The Adults with Incapacity (Scotland) Act 2000

The Act introduced a system for safeguarding the welfare and managing the finances and property of adults (age 16 and over) who lack capacity to act or make some or all decisions for themselves because of mental disorder or inability to communicate due to a physical condition. It allows other people to make decisions on behalf of these adults, subject to safeguards. The main groups to benefit include people with dementia, people with a learning disability, people with an acquired brain injury or severe and chronic mental illness, and people with a severe sensory impairment.

The Mental Health Care & Treatment (Scotland) Act 2003

The Mental Health (Scotland) Act 2003, which came into effect on 5 October 2005, is an Act of the Scottish Parliament which enables medical professionals to detain and treat people against their will on grounds of mental disorder, with the Mental Health Tribunal for Scotland and the Mental Welfare Commission for Scotland providing safeguards against mistreatment.

The Regulation of Care (Scotland) Act 2001

The Act establishes a new independent body to regulate care services in Scotland to be known as the Scottish Commission for the Regulation of Care (“The Care Inspectorate”). It also establishes a system of care regulation, encompassing the registration and inspection of care services against a set of national care standards and the taking of any enforcement action. A new independent body was also established, to be known as the Scottish Social Services Council (SSSC) to regulate social service workers and to promote and regulate their education and training.

The Protection of Vulnerable Groups (Scotland) Act 2007

The PVG Act creates the legislative framework for a strengthened, robust and streamlined vetting and barring scheme for those working with children and protected adults in Scotland.

3:2 Categories of Abuse - Adults

The following section considers the different types and patterns of abuse and harm and the different circumstances in which they may take place. This is not intended to be an exhaustive list but an illustrative guide as to the sort of behaviour which could give rise to a safeguarding concern.

The Adult Support and Protection (Scotland) Act defines harm as, “harm” includes all harmful conduct and includes:

- a. conduct which causes physical harm,
- b. conduct which causes psychological harm (for example: by causing fear, alarm or distress),
- c. unlawful conduct which appropriates or adversely affects property, rights or interests (for example: theft, fraud, embezzlement or extortion),
- d. conduct which causes self-harm”.

Physical abuse – including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.

Domestic violence – including psychological, physical, sexual, financial, emotional abuse; so called ‘honour’ based violence.

Sexual abuse – including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.

Psychological abuse – including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation,

coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.

Spiritual abuse – the use of religious or spiritual beliefs to control, manipulate or harm another person. It involves coercive and controlling behaviour within a faith context, which can include using Scripture to justify harmful actions.

Financial or material abuse – including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.

Modern slavery – encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.

Discriminatory abuse – including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.

Organisational abuse – including neglect and poor care practice within an Institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.

Neglect and acts of omission – including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

Self-neglect – this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding. Incidents of abuse may be one-off or multiple and affect one person or more.

Grooming/Online abuse – this is the befriending and establishing an emotional connection with a child or vulnerable adult and sometimes with the family to lower the child or vulnerable adult's inhibitions with the objective of sexual abuse (Protection of Children and Prevention of Sexual Offences (Scotland) Act 2005)

3:3 Signs of Possible Abuse in Adults

Physical abuse

- History of unexplained falls, fractures, bruises, burns, minor injuries.
- Signs of under or overuse of medication and/or medical problems left unattended.
- Any injuries not consistent with the explanation given for them

- Bruising and discolouration - particularly if there is a lot of bruising of different ages and in places not normally exposed to falls, rough games etc.
- Recurring injuries without plausible explanation
- Loss of hair, loss of weight and change of appetite
- Person flinches at physical contact &/or keeps fully covered, even in hot weather;
- Person appears frightened or subdued in the presence of a particular person or people

Domestic violence

- Unexplained injuries or 'excuses' for marks or scars
- Coercion and controlling and/or threatening relationship including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence and Female Genital Mutilation.

Sexual abuse

- Pregnancy in a woman who lacks mental capacity or is unable to consent to sexual intercourse
- Unexplained change in behaviour or sexually explicit behaviour
- Torn, stained or bloody underwear and/or unusual difficulty in walking or sitting
- Infections or sexually transmitted diseases
- Full or partial disclosures or hints of sexual abuse
- Self-harming
- Emotional distress
- Mood changes
- Disturbed sleep patterns

Psychological abuse

- Alteration in psychological state e.g. withdrawn, agitated, anxious, tearful
- Intimidated or subdued in the presence of a carer
- Fearful, flinching or frightened of making choices or expressing wishes
- Unexplained paranoia
- Changes in mood, attitude and behaviour, excessive fear or anxiety
- Changes in sleep pattern or persistent tiredness
- Loss of appetite
- Helplessness or passivity
- Confusion or disorientation
- Implausible stories and attention seeking behaviour
- Low self-esteem

Financial or material abuse

- Disparity between assets and living conditions
- Unexplained withdrawals from accounts or disappearance of financial documents or loss of money
- Sudden inability to pay bills, getting into debt
- Carers or professionals fail to account for expenses incurred on a person's behalf

- Recent changes of deeds or title to property
- Missing personal belongings
- Inappropriate granting and / or use of Power of Attorney

Modern slavery

- Physical appearance; unkempt, inappropriate clothing, malnourished
- Movement monitored, rarely alone, travel early or late at night to facilitate working hours.
- Few personal possessions or ID documents.
- Fear of seeking help or trusting people.
- Discriminatory abuse
- Inappropriate remarks, comments or lack of respect
- Poor quality or avoidance care
- Low self-esteem
- Withdrawn
- Anger
- Person puts themselves down in terms of their gender or sexuality
- Abuse may be observed in conversations or reports by the person of how they perceive themselves

Institutional Abuse

- Low self-esteem
- Withdrawn
- Anger
- Person puts themselves down in terms of their gender or sexuality
- Abuse may be observed in conversations or reports by the person of how they perceive themselves
- No confidence in complaints procedures for staff or service users.
- Neglectful or poor professional practice.

Neglect and acts of omission

- Deteriorating despite apparent care
- Poor home conditions, clothing or care and support.
- Lack of medication or medical intervention
- Self-neglect
- Hoarding inside or outside a property
- Neglecting personal hygiene or medical needs
- Person looking unkempt or dirty and has poor personal hygiene
- Person is malnourished, has sudden or continuous weight loss and is dehydrated – constant hunger, stealing or gorging on food
- Person is dressed inappropriately for the weather conditions
- Dirt, urine or faecal smells in a person's environment
- Home environment does not meet basic needs (for example not heating or lighting)
- Depression

SECTION 4

Responding to allegations of abuse

4:1 Procedures

Under no circumstances should a worker carry out their own investigation into an allegation or suspicion of abuse. They must **always** follow the procedures outlined below:

The person in receipt of allegations or suspicions of abuse must report concerns as soon as possible to one of those listed below. ***If a child is at risk then the police or social work department must be contacted immediately!***

- Gillian Allan if concerned about a child; gillian.allan@kirkiebaptist.com 0141 578 6006
- Matt Holden, Youth Pastor, if concerned about a young person; matt.holden@kirkiebaptist.com 0141 578 6006
- Gillian Allan, if concerned about an adult at risk; gillian.allan@kirkiebaptist.com 0141 578 6006
- Catherine Davison, if concerned under any category

(hereafter the "Safeguarding Co-ordinators") who are nominated by the Leadership and approved by the Church to act on their behalf in dealing with the allegation or suspicion of neglect or abuse.

The response to an allegation or suspicion of abuse or neglect will normally be agreed by three of the Safeguarding Co-ordinators, namely Catherine Davison, Gillian Allan and one of the other three co-ordinators as appropriate. The lack of availability of any Safeguarding Co-ordinator must never be a reason for inaction!

If the suspicions in any way involve a Safeguarding Co-ordinator, then the report should be made to one of the other named Co-ordinators.

Where the concern is about a child the Safeguarding Co-ordinator should contact Children's Social Services. (Where the concern is regarding an adult in need of protection contact Adult Social Services or take advice from Thirtyone:eight as above.)

The telephone number of the local Children & Families' Social Work Department, based at Southbank House, Southbank Business Park, Kirkintilloch, is 0141 777 3000 (office hours). The out-of-hours emergency number is 0800 811505.

The telephone number of the local Social Work Department including the Adult Intake Team based at Kirkintilloch Health and Care Centre is 0141 355 2200 The out of hours emergency number is 0800 811505.

The Police Child Protection Team (based at Saracen St.) telephone number is 0141 532 3900

When an allegation of abuse is reported to Social Work the Safeguarding Co-ordinator should then immediately inform the insurance company, Ansvar Insurance, 0345 60 20 999

Suspicions must not be discussed with anyone other than those nominated above. A written record of the concerns must be made in accordance with these procedures and kept in a secure place. A fireproof locked cabinet has been provided to which only the Safeguarding Co-ordinators have access.

Whilst allegations or suspicions of abuse will normally be reported to a Safeguarding Co-ordinator, the absence of any Safeguarding Co-ordinator must not delay referral to Social Services, the Police or taking advice from *Thirtyone:eight*.

The Leadership will support the Safeguarding Co-ordinators in their role, and accept that any information they may have in their possession will be shared in a strictly limited way on a need to know basis. In some situations it may be appropriate for the Trustees to be made aware in accordance with the above principle. In general terms, such information should only be shared if there is agreement between three of the Safeguarding Co-ordinators that a child (or an adult) is thought to be at risk of harm.

It is the right of any individual as a citizen to make a direct referral to the safeguarding agencies or seek advice from *Thirtyone:eight*, although the Leadership hope that members of this congregation will use this procedure. If, however, the individual with the concern feels that the Safeguarding Co-ordinator has not responded appropriately, or where they have a disagreement with the Safeguarding Co-ordinator(s) as to the appropriateness of a referral they are free to contact an outside agency direct. We hope by making this statement that the Leadership demonstrate its commitment to effective safeguarding and the protection of everyone; children and adults who may be at risk of harm or abuse.

The role of the safeguarding co-ordinators is to collate and clarify the precise details of the allegation or suspicion and pass this information on to statutory agencies which have a legal duty to investigate.

4:2 Detailed procedures where there is a concern about a child

ALLEGATIONS OF PHYSICAL INJURY, NEGLECT OR EMOTIONAL/PSYCHOLOGICAL ABUSE

If a child has a physical injury, a symptom of neglect or where there are concerns about emotional abuse, the Safeguarding Co-ordinator will:

- Contact Children's Social Services (or *Thirtyone:eight*) for advice in cases of deliberate injury, if concerned about a child's safety or if a child is afraid to return home.
- Not tell the parents or carers unless advised to do so by Children's Social Services.
- Seek medical help if needed urgently, informing the doctor of any suspicions.

- For lesser concerns, (e.g. poor parenting), encourage parent/carer to seek assistance; i.e. from Social Work, Health Visitor or GP. If however a child or adult is believed to be at risk of harm, then this response would be insufficient.
- Where the parent/carer is unwilling to seek help, offer to accompany them. In cases of real concern, if they still fail to act, contact Children's Social Services direct for advice.
- Seek and follow advice given by *Thirtyone:eight* (who will confirm their advice in writing) if unsure whether or not to refer a case to Children's Social Services.

ALLEGATIONS OF SEXUAL ABUSE

In the event of allegations or suspicions of sexual abuse, the Safeguarding Co-ordinator will:

- Contact the Children's Social Services Department Duty Social Worker for children and families or the Police Child Protection Team direct. They must NOT speak to the parent/carer or anyone else.
- Seek and follow the advice given by *Thirtyone:eight* if, for any reason, they are unsure whether or not to contact Children's Social Services or the Police. *Thirtyone:eight* will confirm its advice in writing for future reference.

4:3 Detailed procedures where there is concern about an adult

SUSPICIONS OR ALLEGATIONS OF PHYSICAL OR SEXUAL ABUSE

If an adult at risk has a physical injury or symptom of sexual abuse the Safeguarding Co-ordinator will:

- Discuss any concerns with the individual themselves giving due regard to their autonomy, privacy and rights to lead an independent life.
- If the vulnerable adult is in immediate danger or has sustained a serious injury contact the Emergency Services, informing them of any suspicions.
- Contact Social Services and if required seek advice from *Thirtyone:eight*.

4:4 Allegations of abuse against a person who works with children or adults at risk

If a worker (whether a volunteer or paid member of staff) is accused of abuse they will be advised by a Safeguarding Co-ordinator that they will need to withdraw from their responsibilities while an investigation is carried out. There will also need to be liaison with the Social Work Department or other statutory agencies as appropriate.

Where there are concerns about harmful behaviour towards a child or vulnerable adult, the safeguarding co-ordinators will decide whether a referral should be made

to the Social Work Department and to Disclosure Scotland. It is recognised that this can be very hurtful and damaging, particularly in the early stages of an investigation, and it is important that pastoral care is provided. Where pastoral care is being offered to an alleged victim and to the accused person this needs to be carried out by different people. Those involved in such pastoral care will not be given details of the disclosure. Care should also be taken that information gained in the course of such pastoral care remains confidential within the terms of the Safeguarding Policy in order to safeguard any on-going investigation.

4:5 Good Practice Guidelines when information has been received

If there is a concern that a child or adult may have been abused (see definitions of abuse / signs of abuse) or a direct allegation of abuse has been made it is important that the person receiving the information does the following;

- Make notes as soon as possible (preferably within one hour of the person talking) including a description of any injury, its size, when s/he said it happened, what was said in reply and what was happening immediately beforehand eg a description of an activity)
- Write down dates and times of events and when the record was made
- Write down any action and keep all handwritten notes even if subsequently typed up
- These notes should be passed to the safeguarding co-ordinator to assist them should the matter be referred to the Adult or Children's services or the Police. Any referral should be confirmed in writing within 48 hours and the person reporting should expect an acknowledgement of their written referral within one working day of it's receipt.
- All documents should be signed, dated and kept for an indefinite period in a secure place. Consideration should be given to any procedures that have already been adopted by the organisation and it is important that the conditions laid down by the insurers are followed to ensure that there is appropriate cover against any claims.

Thirtyone:eight can also offer independent advice that will be followed by written confirmation of the advice given.

See Leaders Toolkit for information on secure handling, use, storage and retention of Disclosure information

SECTION 5

Practice guidelines

5:1 Introduction

The purpose of this section is to provide volunteers and paid workers who are involved within the organisations of KBC with clear guidelines about the standard of practice which is expected of them within their role. The document provides guidance in relation to many different activities which take place as part of the work of KBC, as well to general requirements such as Health and Safety and Fire Procedures. It is the overall aim of the leadership of KBC to ensure that everyone who is involved in any activity is safe and that the environment the activity takes place meets the safety regulations.

This document should be read in conjunction with the KBC Safeguarding Policy and Procedures contained in Section 1.

5.2 Position of Trust

As a church working with children, young people and adults who may be vulnerable or at risk we wish to operate and promote good working practice. This will enable workers to run activities safely, develop good relationships and minimise the risk of false accusation. It will also help to safeguard children, young people and adults not only when they are participating in activities run by the organisation but also in their day to day lives.

As well as a general code of conduct for workers we also have specific good practice guidelines for every activity we are involved in. Some of these are attached and others are in the process of being developed.

All workers with children, young people and adults are in positions of trust. It is therefore vital that all workers ensure they do not, even unwittingly, use their position of power and authority inappropriately. Workers should always maintain appropriate boundaries and avoid behaviour which may be misinterpreted. Any kind of sexual relationship between an adult worker and a child is never acceptable and if concerns arise in this area, this should be recorded and reported to the safeguarding co-ordinator.

5:3 Taking Care of Touching

The following guidelines should always be followed:-

- Keep everything public. A hug in the context of a group is very different from a hug behind closed doors.
- Touch should be related to the child, young person or adults at risk needs, not the worker's.

- Touch should be age-appropriate and generally initiated by the child, young person or vulnerable adult, rather than the worker.
- Avoid any physical activity that may be sexually stimulating.
- All children, young people and adults at risk are entitled to personal privacy and the right to decide how much physical contact they have with others, except in circumstances such as a medical emergency.
- When giving first aid (or applying sun cream etc), encourage the child, young person or vulnerable adult to do what they can themselves but, in their best interests give appropriate help where necessary.
- Team members should monitor one another in the area of physical contact. They should be free to help each other by constructively challenging anything which could be misunderstood or misconstrued.

5:4 Guidelines for discipline

The following guidelines should always be followed:-

- All children and young people should be aware of the rules and of the consequences of breaking such rules.
- Parents/carers should also be made aware of the rules and the possible consequences.
- Do not compare a child, young person or adult with another in the group; rather encourage and affirm and, if possible, give them responsibility for appropriate tasks.
- Build healthy relationships and be a good role model by setting an example. You can't expect others to observe the ground rules if you break them yourself.
- Take care to give the quieter and/or well behaved attention and resist allowing the demanding individuals to take all your time and energy.
- Be consistent in what you say and ensure that other team members know what you have said. This avoids manipulation.
- If children and young people in particular are bored they often misbehave, so review your programme regularly.
- Call on support from other leaders if you feel so angry you may deal with the situation unwisely.
- Lay down ground rules e.g. no swearing, racism or calling each other names, respect for property, and make sure everyone understands what action will be taken if not adhered to.
- Every person is unique and will respond in different ways to different forms of discipline. It follows therefore each child should be dealt with on an individual basis.
- For those who are continuously disruptive:
 - ✓ Have them sit right in front of you or get a helper to sit next to them.

- ✓ Encourage helpers to be pro-active rather than waiting to be told to deal with a situation.
- ✓ Challenge them to change their behaviour whilst encouraging their strengths.
- ✓ Warn them you may speak to their parents/carers about their behaviour, they may be sent outside the room (under supervision), be banned from attending the group for a period of time.

5:5 Ratios of adults to children and young people

We will, under normal circumstances, endeavour to maintain the following ratios of adults to children and young people in order to ensure the maintenance of a safe environment.

Indoor Activities:

0-24 months - 1 adult to 3 children;

25-36 months - 1 adult to 5 children;

37 months – 7 years 11 months - 1 adult to 8 children;

For children over 8, there is no official guidance but we will aim for 2 adults (preferably one of each gender) for up to 24 children / young people with an additional leader for every 12 children / young people.

Outdoor Activities:

0-24 months - 1 adult to 3 children;

25-36 months - 1 adult to 5 children;

37 months – 7 years 11 months - 1 adult to 6 children;

For children over 8, there is no official guidance but we will aim for 2 adults (preferably one of each gender) for up to 20 children / young people with an additional leader for every 10 children / young people.

A leader must be age 16 or over; any young people helping who are below this age should be counted in the overall total and supervised accordingly.

We will, under normal circumstances, endeavour to ensure that two leaders are present, and that they remain with the children until they are picked up.

Some activities are governed by national bodies and their guidelines should be adhered to at all times. If in doubt the leader should seek the advice of the East Dunbartonshire Community Learning and Development Team or *Thirtyone:eight*.

5:6 Responsibilities of younger and trainee leaders

At KBC the number of young people who are involved in helping with our children's and youth work encourages us.

We want to emphasise that adult leaders are responsible at all times for the various groups and that young people under the age of 16 should always be considered as children in line with our Church Safeguarding Policy.

This means that they should not be in sole charge of children at any time.

In terms of our expectations for these young people at our various groups, it is the leaders, not these young people, who will be ultimately responsible for and will oversee the following activities:

- Teaching, instructing, training or supervising children.
- Providing advice or guidance to children, which relates to physical or emotional well-being, education or training.
- Caring for Children.

Therefore, the role of our young leaders under 16 is mainly to provide assistance to the adult leaders.

Young leaders aged 16 and over should be put through the full application process and must become members of the PVG Scheme. Those younger than 16, who have maturity and ability, may merit being put through the process earlier.

5:7 Intimate Care Guidelines

Treat everyone with dignity and respect and ensure privacy appropriate to age and situation.

The issue of privacy is an important one and everyone has a right to it. Some aspects of intimate care, of necessity, are carried out by a single adult. Having an adult working alone does increase the opportunity for possible abuse, but this has to be balanced by the loss of privacy and lack of trust implied if two people have to be present at all times.

As far as possible, involve the child or adult in their own intimate care.

Always avoid doing things for the child or adult if they are able to do it alone or for themselves. If they are able to help, encourage them to do so. If the person is dependent on you for help, talk to them about what you are doing and offer choices where this is possible.

Be aware and responsive to the person's reactions.

Wherever possible, check that the person is happy for you to carry out their care. Always check what you are doing by involving the person. Ask questions such as 'Can you wash there?', 'How do you normally do that?', 'Is it all right to do it like this?' If the person expresses dislike, or shows concern at a certain person carrying out their intimate care, try and find out why and share this with a leader. If the person you are providing intimate care to has a 'grudge' against you, or dislikes you for some reason, ensure that another leader is aware of this. Parents / carers should where possible have given their consent.

Team practice in intimate care should be as consistent as possible.

Ensure that as a team you have a consistent approach to the intimate care of children and adults. This does not mean that everything should be done in an identical fashion, but it is important that approaches are not markedly different between different adults.

Never do something unless you are sure you know how to do it.

Intimate medical care procedures may be carried out only by nursing or medical staff unless workers have been trained and assessed as competent to carry out such procedures. If you are not sure about something, ask; if you are still unsure or need to be shown something again, ask again. Never put children, adults or yourself at risk through lack of knowledge.

Reporting incidents

If whilst attending to the intimate care of a child or adult you accidentally hurt them, or notice that they are sore or tender in the genital area, report this at once. If the child or adult becomes sexually aroused because of your actions, misunderstands or misrepresents something or has an emotional reaction without apparent cause, report it immediately by speaking to your manager or safeguarding coordinator. Make a report of the incident as soon as possible.

Seek to encourage children to have a positive image of their bodies.

The way we respond to the handling of intimate care procedures will convey lots of messages to the child or adult. We want them to value themselves and their bodies. Children and all with disabilities who are confident and feel their bodies belong to them are less vulnerable to sexual abuse.

The attitude of an adult when performing intimate care is important. Bearing in mind the person's age and understanding care should be as pleasant an experience as possible.

A person's right to object or say 'no' must always be fully respected.

5:8 Praying with children and young people**Introduction**

Some of the main principles that underpin any effective ministry to children and young people, including prayer, are:

Acceptance; respect; non-judgemental listening; sensitivity; discernment; patience;

In applying these values in the area of prayer, not only will you build trust and respect, but you will also be providing a good 'prayer' model so that children and young people can learn how to pray for others in a sensitive and responsible way.

Although it may seem obvious, it is important parents/carers are aware that prayer is an integral part of church life (particularly if they don't attend church themselves), and that on occasions a leader may pray with their child either corporately or individually at the child's request.

You can reassure any concerned parent/carer with the principles contained in these guidelines, or if a child is part of a club or Sunday school within the church this could be mentioned, for example, on the information leaflet given to parents/carers when the child joins the group.

In the unlikely event of a parent/carer requesting that their child does not participate in individual prayer, this must always be respected. Prayer should be the initiative of the child!

Praying

Prior to praying, always make sure you have the child's permission and always pray in an open area where other leaders and/or children are around. If there is a general invitation to come forward for prayer in or after a family service then it will be helpful to have children's workers available to pray with the children/young people rather than relying on other leaders who may be used to dealing with adults. Only those authorised by the church leadership should be involved in this ministry.

The child should be asked if there is anything specific they are requesting prayer for and listen to their reply. Speak quietly and calmly, never shout or raise your voice. Don't laugh at or dismiss out of hand if they want to pray for something you consider trite or irrelevant (e.g. my cat's poorly). If they do not have specific needs or requests then simply ask God to bless them.

Those praying with children and young people should always be alert to child protection issues and other concerns such as bullying. In these circumstances do not forget about or delay taking appropriate action because you are caught up with praying!

If you have prayed about a specific issue it may be helpful to write it down afterwards and give it to the child so that, if they want, they can let their parents/carers know and remember it themselves.

If a child/young person becomes distressed, stop praying. Stay calm and gently ask them if they would like to say what has caused their distress. Depending on the child's response you could consider whether there are any gender issues or whether they would feel more comfortable with someone else

If unsure or the child/young person remains distressed do not continue praying but stay with them until they are calm, offering them reassurance and complete acceptance. Then talk to the child's parents/carers, assuming you have no child protection concerns.

Practicalities

When it comes to praying, consider your body language, particularly in relation to things like your height and the height of the child/young person. Try to ensure you are on their level rather than towering over them perhaps by both of you sitting down; but do avoid crowding.

Refrain from placing your hands on a child/young person's head as they may find this frightening or threatening. If you think they may appreciate something like an arm round a shoulder or their hand being held always ask them if this is what they would like before doing it.

Some churches use substances such as oil on the forehead when praying for healing. Bear in mind that a child/young person may be uncomfortable with the use of anointing oil so it is important to only go ahead with the child and parents' agreement.

Remember also that a child/young person may not, for example, understand things like 'speaking in tongues' and it is important therefore not to do anything that may cause confusion or distress.

Language

Use clear uncomplicated language. Reflect back what the child has said to you, to show you have understood their prayer request. If a child says they are feeling tired, you could reply "let us pray for you as you are feeling tired" not "I think you are depressed, let's pray about that". Keep the prayers simple and short so you can then be confident your prayers have been understood by the child.

Giving Advice

Avoid giving specific advice about problems involving decisions. A child or young person could be very susceptible to suggestion, particularly if they are distressed. Even if you believe you have heard from God about their situation, it would be far wiser to pray this through on your own or with another leader. Never advise a child/young person to stop taking medication or cease seeing professionals involved in their care or welfare.

Confidentiality

Never promise total confidentiality. Should a child/young person wish to disclose to you a situation such as abuse within a prayer ministry context, you have a duty to pass this on to your church's child safeguarding coordinator and possibly Children's Social Services or the police. You may need to gently give clear boundaries but reassure the child that if you share anything about their situation with someone else it will be on a 'need to know' basis only and you will make sure they are supported and cared for.

Praying with children should therefore always be carried out using the guidelines above.

5:9 Organising an Outing

When organising an outing or visit it is important to consider carefully who will be present and what will be their needs and requirements.

- Visit proposed venue beforehand if possible to assess any risks
- Consider the individual needs of the children or adults.
- Ensure Parent/carer signs consent forms before major outings and are informed of the itinerary.
- Ensure parent/carer completes and signs a medical form and provides emergency contact numbers.
- Ensure the supervision ratios are adequate for the size of the group, the age of the children and the activities planned.
- Ensure children are appropriately supervised so that no child gets lost and there is no unauthorised access to children.
- Records are kept of the vehicles used to transport children, with named drivers and appropriate insurance cover
- If a minibus is used for transport, ensure that the Approved Minibus Policy of the agency it is hired from is adhered to and it is roadworthy.
- If a coach is hired for the outing, ensure: the coach company has appropriate public liability insurance and is willing to work to safeguarding standards.
- the coach driver is suitable
- the coach has appropriate seatbelts fitted and that children wear them for the duration of the journey.
- gangways, aisles and emergency exits are kept clear.
- Carry out a Risk assessment paying particular attention to:
 - potential dangers posed by strangers (adults and children)
 - A child's eye view of the outing in terms of possible dangers
 - Risks that may occur as a result of a special activity
 - additional help required for a particular activity (e.g. lifeguard for swimming)

5:10 Transporting children in vehicles

When transporting children in a car or minibus, the following guidelines should always be applied:-

Transporting children in a car

- Drivers should hold a current full driving licence, and where possible, be experienced drivers.
- Insurance covers voluntary work (domestic, pleasure and business)
- Parental agreement obtained.
- Pick-up and drop-off times arranged.
- Agreement as to how many adults in the car. Best practice is to ensure that all vehicles have one person (driver or passenger) who has a PVG. It would be helpful to draw up a list of volunteers who have a PVG, and are willing to be called upon at short notice to drive or to be an accompanying passenger.
- There may be from time to time situations where someone is required to help at the last minute, and this is acceptable
- Agreement as to where children are seated – (front or rear of car, only transport for the recommended number of passengers.)
- Seatbelts used.
- Risk assessment completed if journey is part of an organised trip.
- Correct child seat restraints used for under 12s or children under the height of 135cm.

Transporting children in a minibus

- Driver is over 25 years of age, has current full driving licence and is entitled to drive a minibus. (check their driving licence).
- Driver has completed any approved training (may be a condition of hire from Local Authorities)
- Minibus log book is available to record the journey.
- Trained passenger escort is accompanying the driver.
- Accompanying adults are distributed throughout the minibus
- Passenger list completed.
- No children sitting in the front.
- All passengers using seatbelts.
- Every passenger has access to two emergency exits.
- All luggage stowed away securely without blocking any gangways or exits or luggage transported separately.

- Mobile phone available for emergency contact
- Any defects or incidents recorded.

5:11 Social Media Guidelines

- KBC endeavours to communicate with young people and children responsibly and as such has Social Media Guidelines in place.

Please see the full Social Media Guidelines by clicking [here](#).

SECTION 6

Pastoral Care

6:1 Supporting those affected by abuse

The Leadership is committed to offering pastoral care, working with statutory agencies as appropriate, and supporting all those who have been affected by abuse that have contact with or are part of the place of worship / organisation.

Such pastoral care will generally be provided through the pastoral care team of the church, **all of whom have had a successful Disclosure completed**

Where we are unable to provide the necessary pastoral support or counselling required, or where the person seeking such support or counselling would prefer, we are willing to refer to other agencies out with the church. It may be possible in some situations to help financially with the cost of such support or counselling if this is required. **This would be decided by the Minister and Team Leader, the decision being based on the particular circumstances of the case.**

6:2 Working with offenders

When someone attending KBC is known to have abused children, or is known to be a risk to adults at risk the Leadership will supervise the individual concerned and offer pastoral care, but in its safeguarding commitment to the protection of children and adults at risk, set boundaries for that person which they will be expected to keep. Under no circumstances will such a person be permitted to work with vulnerable groups within the church. This will help protect the vulnerable and lessen the possibility of the person being wrongly suspected of abuse in the future.

In developing a Contract for a Sex Offender the following clauses are examples of what may need to be taken into account but this list is not intended to be conclusive.

Boundaries

- I will never allow myself to be in a situation where I am alone with children, young people or adults at risk
- I will attend meetings and activities as directed by the leadership
- I will sit where directed at activities and services and will not place myself near children, young people and adults at risk
- I will not enter certain parts of the building designated by the leadership, nor any area where activities for children, young people and adults at risk are in progress
- I will decline invitations of hospitality where there are children, young people or adults at risk in the home

- I accept that "x" and "y" will sit with me during activities and services and accompany me when I need to use other facilities. They will know I am a sex offender.
- I accept there are certain people who will need to be told of my circumstances in order for them to protect the children, young people or adults at risk for whom they care
- I accept that contact will need to be made with my probation officer, who will meet with leaders as and when necessary (where appropriate)
- I accept that "z" will provide me with pastoral care.
- I understand that if I do not keep to these conditions, I may be barred from attending activities. In such circumstances the leadership may choose to inform the statutory agencies (e.g. police, probation, Adult Services, Children's Social Services), and any other relevant organizations.
- I understand that any other concerns will be taken seriously and reported
- I understand that this contract will be reviewed regularly every three months and will remain for an indefinite period

6:3 Pastoral care: Offenders

As well as outlining the boundaries a sex offender would be expected to keep, it is also helpful to outline the types of pastoral care and support the person providing support is able to offer. Examples of the type of pastoral care and support being offered may include one or more of one of the following examples:

- Support you in finding suitable employment opportunity which will not bring you into contact with children or adults at risk.
- Support you in seeking any specialist help e.g. attendance on any Sex Offender Treatment Programs, drug or alcohol or psychiatric rehabilitation or any counselling appointments.
- Liaise with any previous Places of Worship you have attended, with the Prison Chaplaincy Team, or any other organisation you have worked with prior to joining us.
- Work closely with any statutory authorities with responsibility for you, such as your probation officer, police public protection team or children's social services, cooperating with them in helping and supporting you.
- Where appropriate, a risk assessment will be conducted by the Lead Safeguarding Coordinator and two other Safeguarding Coordinators in order to determine how best we can meet your needs while protecting children and adults at risk. This same group will also be responsible for monitoring and supervision on an ongoing basis.
- Assist you to meet any practical needs you may have, including assisting with options for accommodation.
- Support you in joining Circles of Support or any other similar program.

- Provide pastoral care and support to anyone with whom you are living with. We recognise that partners of known sex offenders need pastoral care, and 'space' to share without judgement.
- Be there for you and support you.

SECTION 7

Residential Holidays

7:1 Appointment and Supervision of Workers

Where holidays are being planned with workers from different organisations, it is important that they all use the same appointment process, forms and procedures. This can be achieved by one of the organisations assuming responsibility for this (with the agreement of the others) and checked by the Safeguarding Coordinator.

Workers should be given an opportunity of meeting together before the holiday to discuss the programme/activities. It is also essential that workers receive supervision, to ensure a consistent approach to all work, particularly where a number of different groups have come together.

7:2 Responding to Allegations

Workers should respond to allegations of abuse in accordance with the agreed safeguarding policy and procedures.

If there is an allegation against a worker, this should be reported to the police local to the holiday location. If it is possible the worker should not be informed of the allegation. The reason for not informing the worker of the allegation is to prevent him/her, if guilty, covering their tracks (e.g. by silencing their victim) before police arrive, or if innocent, false assumptions being made. Until the worker is seen by the police they should not be in contact with the child or young person and should be supervised as carefully as possible to prevent any possibility of further abuse or allegation.

Once the worker has been interviewed by the police, they may well need to be asked to leave the holiday location until the matter has been fully investigated. They should only return to the holiday location or other activity if the police are satisfied that there is no case to answer.

The above guidelines should be followed whether or not a child is willing to make a statement to police. It is the responsibility of police to organise an Appropriate Adult to support the child should they be willing to make a statement. The child should be offered support from other leaders within the team and be offered the opportunity to return home if he/she wishes. Leaders within the team should not interview the child with regard to the allegations as this is the responsibility of social work.

If the allegation is proven to be untrue, the leaders will require to make a decision as to whether the child should remain at the camp. The child's parents or guardians should be informed as soon as possible of the incident. No leader should be alone with the child in order to minimise the risk of further allegations being made.

Where a child discloses that he/she has been harmed or abused by someone who is not connected with the camp, he/she should be advised that this information cannot remain confidential and will require to be passed to social work or police. Again, the child should be supported until it is decided what action is to be taken by statutory services.

Either way, this action will help to safeguard all those on the holiday and/or an innocent worker.

It is the expectation that all workers and helpers accept the camp policy and act according to it.

7:3 General Safety

It is the responsibility of the workers to know the whereabouts of every child, young person or vulnerable adult at all times, including monitoring access on and off the site.

Safety rules should be applied as appropriate (e.g. keeping clear of guy lines). All workers should keep a daily Log of holiday activities and any significant incidents recorded in the logbook.

All those going on the holiday must complete a Health Information and Consent form and all those below 18 years of age and not be allowed to participate in any activity without the written consent of the parent/carer.

7:4 Electrical Equipment

Holiday organisers should ensure all equipment has been PAT approved. (PAT stands for Portable Appliance Inspection). Any appliance with a mains electrical plug attached to it is classed as a portable appliance. A PAT test minimises the risk of potential fire and/or electric shock and the Health and Safety Executive recommends that tests be carried out every 2-3 years. If this is not done there is a risk of invalidating any insurance policy and it also runs the risk of a claim for damages/compensation as a result of accident or injury.

If young people wish to bring electrical equipment with them such as a Smart Phone and they will be running it off mains electricity, measures should be in place to PAT test the equipment, in conjunction with the policies of the residential establishment (e.g. Youth Hostel) where they are staying. Better still, encourage the use of battery operated equipment.

7:5 Fire Safety

The organisers should have a fire safety procedure, which should include the following:

For a camp especially, everyone should be warned of the danger of fire. If the holiday is in a building then everyone must be made aware of the fire exits. Ideally a fire drill should be practised on the first day of the camp/holiday.

When using a building as a residential facility, ensure that the fire alarm is audible throughout the accommodation and that all signs and exits are clearly visible. It should also comply with fire regulations.

In the case of an emergency, ensure measures are in place to alert children, young people, and adults at risk taking into account those with disabilities (e.g. a child who is hard of hearing).

7:6 First Aid

There should be at least one worker who holds a recognised and valid First Aid Certificate. The First Aider should ensure that on the site of the holiday camp:

First Aid boxes are available and their location known.

The First Aid kit contains those items recommended by St. John Ambulance.

Written records are made of all accidents and injuries.

They have the name and telephone number of the local GP practice to hand, and the distance and location of the nearest hospital with an Accident and Emergency (A&E) Department.

They have access to medical consent forms for all those on a camp.

Any medication being stored on a child's behalf is kept securely and is always available to the child. (e.g. don't arrange a trip away from the camp without taking the child's inhaler if they have asthma.)

7:7 Adventurous Activities

No child should participate in adventurous activities without the written consent of the parent /carer. The organisers should ensure that workers engaging in such activities are properly trained and qualified and that the correct ratio of staff to children is met. At an activity centre or for an organisation whose own staff undertake such activities, if the activities come within the scope of the Adventure Activities Licensing Regulations 1996, the Camp Organisers need to ensure that the premises are licensed.

The Adventure Activities Licensing Scheme is a Government sponsored scheme, which was introduced in 1996 under the Adventure Activities Licensing Regulations. The scheme ensures that those who provide certain adventure activities to young people under the age of 18 years will have their safety management systems inspected. Where appropriate, a licence is then issued.

On 1st April 2007, and as a result of widespread government regulatory reorganisation, the responsibility for implementing the regulations was transferred to the Health and Safety Executive (HSE). The organisation that carries out inspections and issues licences on the HSE's behalf is the Adventure Activities Licensing Service.

7:8 Food Health and Hygiene

The Food Safety (General Food Hygiene) Regulations 1995 states that anyone who handles food or whose actions could affect its safety must comply with the

regulations. It follows therefore that those with responsibility for food should possess the Basic Food Hygiene Certificate and be aware of food safety (preparation, handling and storage, disposal of waste, etc).

7:9 Sleeping Arrangements

Arrangements for residential holidays should be considered carefully. It would be unwise for a worker to share sleeping accommodation with 1 or 2 children. In a large dormitory, adults sharing sleeping accommodation with children might be acceptable or on an activity such as youth hostelling where it is customary practice. In such situations it is always advisable that there should be more than one adult per room / dormitory. Look at arrangements which are age-appropriate and provide security for the child and that would be considered safe for children and workers. Ensure parents are aware of the arrangements.

7:10 Insurance

It is important for the organisers to ensure there is adequate insurance cover for all eventualities such as personal accident (e.g. death or disablement), lost or stolen property and personal liability. If the trip is at a centre it is also important to establish that there is appropriate Public Liability Insurance.

7:11 Checklist for Sleepovers

Building

- Insurance cover adequate.
- At least two means of exit.
- Fire extinguishers in place and evacuation procedures known.

Planning ahead

- Separate sleeping areas for boys and girls and adults.
- Out of bounds areas clearly marked (ie. Kitchen) and unused rooms locked.
- Appropriate hygiene arrangements made for boys and girls/children and adults.

Staffing

- Adequate number of workers for number of children.
- Adequate number of male and female workers.
- Workers have undertaken safeguarding training and hold criminal records disclosure clearance.

- Responsibilities designated to leader/worker (ie. Cook, first-aider, activity leaders, putting to bed, night patrol, etc.).
- First-aider adequately qualified.
- Chief caterer holds Basic Food Hygiene certificate.

Parents and children

- Given written information about the plans for the event.
- Completed medical consent forms and activity consent forms.
- Children informed on the night of ground rules for the event.

7:12 Emergency contacts

- Collect relevant contact numbers prior to the event.
- Make sure the organiser knows the contact numbers of the nearest emergency services are - including the nearest hospital.
- Parents given an emergency contact number (mobile of the worker in charge).

SECTION 8

Health and Safety – Accidents and Incidents

8:1 Reporting Accidents and Incidents

First Aid Kits are provided by the Church and are wall mounted at the following locations:

- ✓ in each kitchen
- ✓ at the top of the main stairwell
- ✓ in the Upper Room

These are maintained by Maureen Young, Church Administrator.

A designated person within each organisation should be identified who is prepared to carry out an initial assessment of any injury and, where appropriate, administer simple emergency first aid.

Protective gloves should be used when dealing with all first aid situations which involve bodily fluids.

If there is any doubt as to the severity of the injury sustained, qualified medical advice should be sought as soon as possible.

If the child or young person is taken to hospital, they should be accompanied by another person as well as the driver. A copy of the child/young person's registration and consent form(s) should also be taken to the hospital/doctor as these contain permission for emergency treatment as well as important medical information.

Parents/guardians should be informed immediately if a child/young person has been involved in an accident or is taken to the doctor/hospital.

An Accident and Incident Report Form should be filled in as soon as possible and filed in the cabinet in the main church office as a permanent record may be required in any subsequent enquiry or complaint. In the event of an accident at other premises, the accident procedures at those premises should be adhered to.

All accidents, however minor should be recorded (sample form at the back of this document) and the parent/carer of a child should be asked to read and sign the Accident Book, one of these being held by each organisation who uses the premises of KBC, or is an organisation under the auspices of KBC. If the child is not collected at the end of a session, a letter should be sent to the parent/carer explaining what has happened.

Any unusual events or conversations that are witnessed by leaders within an organisation should be mentioned to a Member of the Safeguarding Group.

8:2 Food Hygiene

Food Hygiene is extremely important, especially in planning events and activities which involve the preparation, serving or consumption of food. Proper food handling can prevent or minimize the potential of food poisoning which can have serious implications, especially for young children and the elderly.

Any food that is made and/or consumed on the premises should meet food safety regulations. It follows therefore that there should be someone within the organisation who has responsibility for this. They should possess a Basic Food Hygiene Certificate or equivalent and be knowledgeable in areas such as food preparation, handling, storage, disposal of waste etc. This is relevant to all organisations and especially to those running camps and other residential activities.

If food and drink are provided during an activity, the following should be considered:

- Is there someone with the appropriate qualification especially if pre-cooked food is present
- Workers should follow good personal hygiene
- Basic health and hygiene regulations should be adhered to.
- All food and drink must be stored appropriately
- Hot drinks should not be carried through an activity area and not placed within the reach of young children
- Snacks and mealtimes should be appropriately supervised
- Fresh drinking water should be available at all times

Systems should be in place to ensure that children, young people or adults at risk do not have access to food/drinks to which they are allergic. Typically this can be peanuts, nuts, milk, eggs, fish, shell fish and gluten - found in wheat, barley, oats.

The Church's Food Hygiene policy should be adhered to at all times. A copy of the policy is available in the office.

8:2 Health and Safety Policy

Taking care of children, young people and adults at risk involves taking responsibility for their well-being at all times, being prepared for unforeseen eventualities, anticipating situations where they could be harmed and taking steps to minimise the risks.

Organisations have a responsibility to assess the risk involved in the activities that are provided. This can include an informal check before the start of an activity that the building is safe and that the planned activities have been assessed for any risks.

It is advisable to appoint someone specifically for carrying out risk assessments. An easy and effective way of doing this is to compile a checklist for the activity,

identifying any risks that could be encountered, the action required, and the person responsible to carry this out and when any action has been completed.

The following are some areas that should be considered:

- Identification of hazards.
- Consider who might be harmed and how this might happen.
- Assess the risks and take action to remove or reduce them as far as possible.
- Record details of the action taken.
- In a building the following may be considered hazardous: loose-fitting carpets, uneven floors, over-filled cupboards, very high shelves, blocked fire exits, glass doors, missing light bulbs, overloaded power points, trailing electrical cables, loose window fastenings.

The Church's Health and Safety Policy should be adhered to at all times. It can be found; KBC-AD-documents>Central Documentation>Health and safety and Fire> Health & Safety Policy.

8:3 Fire Safety Policy

The Church's Fire Safety policy should be adhered to at all times.

- At the beginning of all events involving children and/or young people, a register must be taken. The register will be used to confirm the safe evacuation of the building in the event of an emergency.
- All Children's/Youth Workers should be aware of the location of each of the emergency exits and also the location of fire extinguishers.
- Please refer to our most recent Fire Safety Policy by clicking [here](#).

8:4 Emergency Escape Procedures

The procedures listed in the KBC Fire Safety Policy should always be followed in the event of the fire alarm sounding, or a fire being discovered.

8:5 Infection Prevention and Control

KBC will follow Infection Prevention and Control guidelines and standards set out by the Scottish Government and Public Health Scotland including having hand wash and sanitisation facilities in place and appropriate cleaning schedules and routines.