



Safeguarding Policy Supplement

Children (aged 0 –11)

GRACE CHURCH GREENWICH

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Safeguarding policy aims

As a church, we desire to bring glory to God by knowing Jesus and making him known.

To that end, the aims of our safeguarding policy are:

- To uphold the honour of God's name.
- To keep the gospel from disrepute.

We do this by:

- Protecting the children, young people, and vulnerable adults in our care.
- Protecting the caregivers who serve in this ministry.

Safeguarding is an important part of our service in the gospel and one which we take seriously, aiming for a standard of excellence as we implement this policy.

Our church is committed to:

- promoting a safer environment and culture.
- safely recruiting and supporting all those with any responsibility related to children, young people and vulnerable adults within the church.
- responding promptly to every safeguarding concern or allegation.
- caring pastorally for victims/survivors of abuse and other affected persons.
- caring pastorally for those who are the subject of concerns or allegations of abuse and other affected persons.
- responding to those that may pose a present risk to others.

Grace Church Greenwich will:

- create a safe and caring place for all.
- have a named Church Safeguarding Officer (CSO) to work with the Grace Church Greenwich Trustees ('the Trustees') to implement policy and procedures.
- safely recruit, train and support all those with any responsibility for children, young people and adults to have the confidence and skills to recognise and respond to abuse.
- ensure that there is appropriate insurance cover for all activities involving children and adults undertaken in the name of Grace Church Greenwich.
- display on the Grace Church Greenwich website the details of who to contact if there are safeguarding concerns or support needs.
- listen to and take seriously all those who disclose abuse.
- take steps to protect children and adults when a safeguarding concern of any kind arises, including notifying the Diocesan Safeguarding Adviser (DSA) and statutory agencies immediately.
- offer support to victims/survivors of abuse regardless of the type of abuse, when or where it occurred.
- care for and monitor any member of the Grace Church community who may pose a risk to children and adults whilst maintaining appropriate confidentiality and the safety of all parties.
- ensure that health and safety policy, procedures and risk assessments are in place and that these are reviewed annually.
- review the implementation of the safeguarding policy, procedures and practices at least annually.
- every employee and volunteer who serves within this church community will agree to abide by this policy and the guidelines established by this church.

Key safeguarding roles

Church Safeguarding Officer (CSO)

The CSO is appointed by the Grace Church Greenwich Trustees and given responsibility for safeguarding within the church family and all its various ministries.

Given the size of our church and the diversity of our ministries, it is necessary for the CSO to delegate their responsibilities to ministry area leaders. The CSO will assist and advise the ministry area leaders if a safeguarding issue or risk arises and needs to be addressed.

The CSO will also be included in decisions about whether to permit someone to be involved in ministry with children where their Disclosure and Barring Service (DBS) certificate is blemished or information is provided about them on their DBS certificate.

Ministry area leaders

The ministry area leaders are responsible for safeguarding within their ministry area. This includes:

- Ensuring all caregivers within their area are recruited in accordance with this safeguarding policy.
- Ensuring all caregivers within their area undertake safeguarding training annually (format and content to be agreed in conjunction with the CSO)
- Escalating any safeguarding matters within their ministry area to the CSO.

Caregivers

A caregiver is anyone serving in any role within church which involves any oversight of children, young people or vulnerable adults.

All caregivers share a particular responsibility for:

- Loving the person as Christ loves them.
- Setting an example of proper Christian conduct.
- Praying for those in their care and pointing them to God's word.

Every applicant who wishes to serve in any ministry area involving children or young people must complete a screening process prior to serving. Full information on the screening process can be found in the full Grace Church Greenwich Safeguarding policy.

If an existing caregiver moves to serve in a different ministry area they must read the relevant safeguarding supplement for the new area before commencing their role e.g. moving from serving in Sunday School to serving in creche.

All caregivers will be required to complete safeguarding training annually.

Important

- All caregivers must read **Section A** of this policy.
- They must then read any additional information from **Section B** that is relevant to the area of ministry they are serving in.
- A list of key **contact details** can be found on the last two pages of this policy.

SECTION A

Guidelines for recognising and responding to potential child abuse

Child abuse is serious. All caregivers need to know how to respond to signs of abuse or allegations of abuse. The following guidelines are in place to meet that need.

1. Definitions

Who is a child?

Any person under the age of 18 years.

What is abuse?

'Working together to safeguard children'¹ states that 'somebody may abuse or neglect a child by inflicting harm, or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger.' It recognises four areas of potential abuse for children: physical, sexual, emotional and neglect. Abuse can be described under any one of these four categories or a combination of categories, and can be carried out by an adult or another child.

Physical abuse: may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child.

Emotional abuse: including conveying to a child that they are inadequate, humiliation, blaming, controlling, intimidation, verbal abuse, isolation, seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying).

Sexual abuse: involvement of children or adolescents in sexual activity that they do not fully comprehend, or to which they are unable to give informed consent, or which violates the social taboos of family roles.

Neglect: including failure to meet the basic essential needs of a child, to protect a child from physical and emotional harm or danger, to provide adequate supervision and / or access to appropriate medical care or treatment.

Bullying and cyberbullying

Bullying is behaviour that hurts someone else – such as name calling, hitting, pushing, spreading rumours, threatening or undermining someone. It can happen anywhere – at school, at home or online. It is usually repeated over a long period of time and can hurt a child both physically and emotionally. Bullying that happens online, using social networks, games and mobile phones, is often called cyberbullying. A child can feel like there is no escape because it can happen wherever they are, at any time of day or night.

2. Recognising signs of abuse

Warning signs: these are not necessarily proof of abuse, but they should signal a warning.

¹ Published by HM Government, 2013, quoted in Policy for safeguarding in the Diocese of London, 2015.

Abuse type	Physical signs	Behavioural signs
Physical abuse	<ul style="list-style-type: none"> • Bruises, black eyes, broken bones • Injuries that the child cannot explain or explains unconvincingly • Untreated or inadequately treated injuries • Injuries to parts of the body where accidents are unlikely, such as thighs, back, abdomen • Bruising which looks like hand or finger marks • Cigarette burns, human bites, scalds and burns 	<ul style="list-style-type: none"> • Becoming sad, withdrawn or depressed • Having trouble sleeping • Behaving aggressively or being disruptive • Showing fear of certain adults • Showing lack of confidence and low self-esteem • Using drugs or alcohol
Sexual abuse	<ul style="list-style-type: none"> • Pain, itching, bruising or bleeding in the genital or anal areas • Genital discharge or urinary tract infections • Stomach pains or discomfort walking or sitting • Sexually transmitted infections 	<ul style="list-style-type: none"> • A marked change in the child's general behaviour. For example, they may become unusually quiet and withdrawn, or unusually aggressive. Or they may start suffering from what may seem to be physical ailments, but which can't be explained medically • A young person may refuse to attend school or starts to have difficulty concentrating so their schoolwork is affected • They may show unexpected fear or distrust of a particular adult or refuse to continue with their usual social activities • They may start using sexually explicit behaviour or language, particularly if the behaviour or language is not appropriate for their age • The child may describe receiving special attention from a particular adult, or refer to a new, "secret" friendship with an adult or young person
Neglect	<ul style="list-style-type: none"> • Abandonment • Unattended medical needs • Consistent lack of supervision • Consistent hunger, inappropriate dress, poor hygiene • Lice, distended stomach, emaciated • Inadequate nutrition 	<ul style="list-style-type: none"> • Regularly displays fatigue or listlessness, falls asleep during activities • Steals food, begs from classmates • Reports that there is no carer at home • Frequently absent or late • Self-destructive • School dropout (adolescents) • Extreme loneliness and need for affection
Emotional abuse	<ul style="list-style-type: none"> • Delayed physical development • Substance abuse • Ulcers, severe allergies • Speech disorders 	<ul style="list-style-type: none"> • Habit disorder (sucking, rocking, biting), antisocial, disruptive • Neurotic traits (sleep disorders, inhibition of play) • Passive and aggressive – behavioural extremes • Delinquent behaviour (especially adolescents) • Developmentally delayed

Many symptoms of distress in a child can point to abuse, but there are other explanations too. This has sometimes been the reason for falsely accusing parents of abuse.

It is important that the above signs are not taken as indicating that abuse has taken place, but that the possibility should be seriously considered. They should make us stop and think—not jump to conclusions inappropriately.

3. Guidelines for when a child tells us they have been abused

It is not easy to give precise guidance but the following general points may be of help:

- Above all else, listen, listen, and listen.
- Keep calm, and show acceptance of what the child says, however unlikely it seems.
- Let them know you will need to tell someone else - don't promise confidentiality.
- Be aware the child may have been threatened.
- Never push for information. If the child decides not to tell you after all, then accept that and let the child know that you are always ready to listen.
- Avoid leading the child and ask only what is necessary to ensure a clear understanding of what has been said - you might put something into their mind that was not there. If the case were to end up in court, the case could be thrown out if it is thought that the child had been led.

Helpful things you might say or convey:

- I am glad you have told me
- It's not your fault
- I will help you

In conclusion:

- Reassure the child that they were right to tell you and that you believe them.
- Let the child know what you are going to do next and that you will let them know what happens (you might have to consider referring to social services or the police to prevent the child returning home if you consider them to be seriously at risk of further abuse).
- Make notes as soon as possible (preferably within one hour of the child talking to you, but always within 24 hours), writing down exactly what the child said and when they said it, what you said in reply and what was happening immediately beforehand (e.g. a description of the activity). Record dates and times, including when you made the record. Keep all handwritten notes even if subsequently typed. Such records should be kept for an indefinite period in a secure place. A copy of these notes must be passed onto the relevant ministry area leader.

4. Responding to concerns of abuse

If you suspect or witness abuse, or someone discloses information about a safeguarding concern or allegation:

- If a child is in immediate danger or emergency medical attention is necessary then this should, of course, be sought immediately, informing the doctors of any suspicions you may have.
- You must contact the ministry area leader or CSO immediately. Please refer to the end of this policy for email addresses. If the allegation is against your ministry area leader, please contact the CSO.
- At all stages in the reporting process, you retain the right to report serious matters directly to Social Services or the police. Even so, as soon as possible (and within 24 hours), you must also contact the CSO. (For contact numbers see the section at the end of this policy.)
- Under no circumstances should a church volunteer or employee investigate concerns of abuse themselves. Our responsibility is, in consultation with the Diocesan Safeguarding Team (DST), to refer concerns to statutory authorities who will do the investigating required.
- Apart from telling your ministry area leader/CSO, this information must be treated as confidential. Do not inform/confront any alleged perpetrator under any circumstances.
- You should also consider your own feelings and ask your ministry area leader for pastoral support if needed.

Even if you may feel the child's story is unlikely, this must not prevent appropriate action being taken. For example, a child may say that they have been abused by a younger person. In reality, the perpetrator could be a parent or a close relative but naming another person may be the only way in which this child can seek help.

5. Procedures for responding to abuse—outcomes

When a safeguarding concern is reported to the Diocesan safeguarding officer (DSO) by a ministry area leader/CSO:

If the DSO advises **further action**, the ministry area leader/CSO must act upon all directions given by the Diocese in the timescale given.

If the DSO advises **no further action** required, this is not the end of the process. The CSO or the relevant ministry area leader must arrange a further meeting in the parish to discuss whether alternative action should be taken or whether to accept that no further action is required.

This meeting should include the CSO and the GCG Ministers (unless any are conflicted), and they can involve others as necessary, including churchwardens, the Operations Manager, and the relevant ministry area leader.

Guidelines for responding to a disclosure of historic abuse

In the course of their work, ministers and those offering pastoral support may hear disclosures from adults regarding abuse that happened to them when they were children, or from children regarding abuse that happened to them when they were younger. Historical abuse must be treated as seriously as recent abuse, and each individual must be treated with great pastoral sensitivity.

The church is required to take advice from the diocese and may need to report allegations or disclosures of criminal acts to the police.

When someone tells you they have been abused, or have committed abuse, whether recently or many years ago:

General points:

- Above all else, listen.
- Keep calm, and show understanding/acceptance of what is said, however unlikely it seems. Reassure the individual that they were right to tell you.
- Never push for information. Avoid leading questions and ask only what is necessary to ensure a clear understanding of what has been said.
- Let the individual know what you are going to do next and that you will keep them informed. Let them know that you will need to tell someone else—don't promise confidentiality.

Action you must then take:

- You must contact your ministry area leader and tell them what you know (you do not need to disclose any names at this stage unless told otherwise). If the allegation is against your ministry area leader, contact the CSO.
- You retain the right to report serious matters directly to Social Services or the police. Even so, as soon as possible (and within 24 hours), you must also contact either your ministry area leader or the CSOs.
- Apart from telling your ministry area leader/CSO, the information must be treated as confidential and not shared with co-leaders, Bible study leaders or other church members.
- Under no circumstances should you investigate concerns of abuse yourself.
- The contact details for your ministry area leader and the CSO can be found on the back page of this document.
- Make notes as soon as possible (preferably within one hour, but always within 24 hours), writing down exactly what was said and when, what you said in reply and what was happening immediately beforehand (eg a description of the activity/situation). Record dates and times of these events and when you made the record.

Keep all handwritten notes, even if subsequently typed. Such records should be kept for an indefinite period in a secure place. A copy of these notes must be passed onto your ministry area leader.

- Consider your own feelings and ask your ministry area leader for pastoral support if needed, and consider with your ministry area leader what pastoral support is needed for the individual involved.

SECTION B

Supplementary information for specific ministry areas

1. Sunday crèche and Sunday school

Safeguarding children as they arrive and depart

Transfer of responsibility for a child from the parents/guardians to the caregivers

The Grace Church Greenwich Safeguarding policy is applied during the time period a child is in the care of the leaders of the advertised activity. This time period is clearly marked at the beginning and end by a formal system of handover between parents/guardians and the caregivers. Parents/guardians are responsible for their children once they have been collected from their groups or returned to them by caregivers.

Registers

All children and caregivers present in each group must be registered by using the Grace Church Greenwich Children's Ministry app. Online registers will be filed and kept secure for an indefinite period. If any allegation of abuse is made in years to come then the church can immediately find who was present on any given date.

Separately, a child registration form must be filed for each newcomer in crèche/ Sunday School. These forms should be filled out at 'sign in' using Roll Call. The Sunday School leader/ helper and the parent/ guardian should complete the form together. The form is attached to the Roll Call page. The form requires the following information to be provided: parental names/ contact information/ child's name/ child's date of birth and any allergy information.

Safeguarding children whilst they are in our care

Caregiver ratios

Two caregiver rule: two caregivers must be present in each room at all times with the exception of the situation when a caregiver has signed out in roll call to escort children to the toilet.

It is not necessary for the two caregivers to be of opposite genders. In an emergency setting the emergency takes priority over the ratios. However, children should not be left unattended in a room. At other times with some planning this scenario need not occur.

In addition to always having two caregivers present, we have adopted the Church of England's **minimum** requirements which are:

Age of children	Number of adults	Number of children
0–2 years old	1	3
2–3	1	4
4–8	1	6
9–12	1	8

13–18	1	10
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Each group should have at least two workers, even for smaller groups, and if possible one male and one female. Staff ratios for all groups should always be based on a risk assessment. For example, staffing numbers would need to be increased for outdoor activities and more so if that activity is considered higher risk, potentially dangerous or when children with disabilities or special needs are involved. Where more than one group meet in the same venue, and the groups can be seen by others, the total number of adults to children within the room should be within the ratio suggested but the individual group may have fewer adults.

If there are not enough caregivers turning up on the day, the caregivers must either:

- recruit another DBS-screened individual to help or;
- meet in the same venue as other screened caregivers, in full view of those caregivers.

For all groups and activities:

- Undertake a health and safety risk assessment.
- A registration form must be completed for every new child that attends Sunday School activities. This should include up-to-date information on parents' contact numbers, medical information (e.g. allergies)
- An attendance register must be kept using the Grace Church Greenwich Children's Ministry app (or suitable hardcopy alternative) and be available at all group meetings.
- A first aid kit must be available on any premises that are used by children.
- Any significant incidents must be recorded (e.g. a fight between children). Incidents should be recorded on Roll Call using the 'Record an incident' function.
- Parents or Guardians must sign a consent form before children are transported in a private car and before any photography or images are taken except where parents / guardians assemble children for the express purpose of a photo, for example at the weekend away,

In addition, when taking children offsite:

- The church leadership must be informed and agree to the activity.
- Details of the activity and any itinerary must be given in advance to parent/s and consent forms received in advance of the activity taking place.
- Details of the activity and a list of contacts must be left with someone in the church.
- Details of the activity and arrangements must be given to the incumbent and/or CSO.
- A risk assessment must be undertaken, and confirmation obtained that the activity is covered by PCC insurance.
- A leader must be designated to take responsibility for first aid.

Discipline

All caregivers are responsible for providing a loving, respectful, and orderly atmosphere in which children can learn, play and interact with others. This atmosphere should be maintained by preparing beforehand, proactively directing children towards acceptable activities, verbally encouraging positive behaviour and, when necessary, correcting or redirecting inappropriate behaviour.

Acceptable means of redirecting inappropriate behaviour include correcting the child verbally, withholding a certain privilege or activity for a brief time, or separating them from the group for a brief time (particularly if their behaviour is endangering or upsetting other children).

Caregivers should never use any form of physical punishment. If behaviour is uncontrollable or the child does not respond to the discipline measures above, the parents/guardians will be contacted. Caregivers should never yell at a young person except in circumstances where the young person is in danger or is at risk of causing danger to others.

Acceptable touch – Sunday school

Sympathetic attention, humour, encouragement and appropriate physical contact are needed by children and adults. Some physical contact with children, particularly younger children, is wholly appropriate. The following guidelines regarding touching are suggested:

- Always ask permission.

- Be mindful of your body position.
- Keep everything public. A hug in the context of a group is very different from a hug behind closed doors.
- Touch should be in response to a child's needs and not related to the worker's needs. It should be age appropriate, welcome and generally initiated by the child, not the church helper.
- Avoid any physical contact that is or could be construed as sexual and/or abusive/offensive.
- Allow the child to determine the degree of physical contact with others except in exceptional circumstances (eg when they need medical attention).

In addition:

- You can allow people you support to give you brief hugs if you feel comfortable with this.
- You can allow people you support to hold hands or link arms with you to help with travel and stability.
- You should discourage people you support from touching your face. You can offer your hand instead.
- You should discourage people you support from sitting on your lap. You can offer to sit side by side.
- You should avoid using touch if the person you support is very distressed and is unlikely to tolerate it.

Acceptable touch - Creche

Sympathetic attention, humour, encouragement and appropriate physical contact are needed by children and adults. Some physical contact with children, particularly younger children, is wholly appropriate. The following guidelines regarding touching are suggested:

- Be mindful of your body position.
- Keep everything public. A hug in the context of a group is very different from a hug behind closed doors.
- Touch should be in response to a child's needs and not related to the worker's needs. It should be to care for a distressed child at his/her carers leaving and to distract him/her until they return.
- Avoid any physical contact that is or could be construed as sexual and/or abusive/offensive.
- Allow the child to determine the degree of physical contact with others except in exceptional circumstances (eg when they need medical attention).

In addition:

- You can allow people you support to give you brief hugs if you feel comfortable with this.
- You can allow people you support to hold hands or link arms with you to help with travel and stability.
- You can encourage a toddler to sit next to you rather than on you but it is anticipated that a small child will prefer to sit in a lap (eg to read a story) and many children may not be yet able to fully support themselves and will need holding.

Can I have a child sit on my lap when we're all sitting on the floor?

You should discourage children you support from sitting on your lap. You can offer to sit side by side.

Can I play rough and tumble games with children?

Yes you may—as long as you are in public and there is no way your actions could be misconstrued by a third party. Bear in mind that the chummier you are with children in this way, the less likely you are to have any authority in their eyes. Remember too that they are not as strong as you.

Can I hold hands with a child?

Yes you may if there is a clear reason to do so—as long as you are in public and there is no way your actions could be misconstrued by a third party. Reason could include walking a child across a road, or to the bathroom, when walking downstairs, a game requiring hands held. For younger children this might happen frequently. For older children there will be very few occasions when this is ever appropriate.

Can I ever hug a child?

Yes you may if a child is clearly distressed—as long as you are in public and there is no way your actions could be misconstrued by a third party. There may be other occasions when this might be appropriate, like congratulating them. Bear in mind your normal character—if you rarely hug anyone you should probably not ever hug a child in your care. If hugging is one way you interact with all kinds of people you might need to rein yourself in a bit but not necessarily completely. Touch should be related to the child's needs, not the caregiver's, and should be age-appropriate and

generally initiated by the child rather than the caregiver. Avoid any physical activity that is, or may be thought to be, sexually stimulating to the adult or the child

Can I ever tickle a child?

It is difficult to see why a child would need to be tickled by a caregiver. It is best avoided when acting as a caregiver. This is not to say that a child should not be tickled but there is a time and a place.

Can I ever physically restrain a child?

Yes. If a child is being a danger to themselves or to another person restraint, used in proportion to the situation, may be necessary. Outside these scenarios physical restraint should be required rarely.

Can I take a picture of a child in my care?

No. Caregivers must never take any pictures of children they are caring for unless they have received explicit permission from the child's parents/guardians. For the avoidance of doubt, caregivers must also never post any pictures of the children in their care on social media platforms including but not limited to Instagram, Facebook, WhatsApp and Snapchat.

Toileting

A caregiver may change the nappy for any baby if required.

If a preschool or school-aged child requires assistance in going to the toilet, it is best for assistance to be given by a caregiver of the same gender where possible. The caregiver should wait outside the closed cubicle door unless the child requires assistance. The cubical door must not be closed with the caregiver and child inside. The child and caregiver must wash their hands with soap before returning to the class group.

Food

The only foods caregivers can give to children are:

- Biscuits, plain crackers and popcorn provided by the church
- Food provided by a parent/guardian for a specific child

No other food is given. Food for a specific child must not be shared with any other child. Some children in our care have severe allergies to certain foods and giving them the wrong food could be serious.

Risk management/illness/accidents

Caregivers should consider the health and safety of all children and caregivers when organising activities or planning games.

Children with infectious illnesses must be kept at home and not join the children's groups. If a young person appears ill while in the church's care, caregivers will use their discretion to determine whether the young person should be isolated from other young people by a caregiver (who will remain with them), and whether parents/guardians should be contacted to collect their child.

A basic first aid kit must be readily available at all times. All caregivers should be familiar with its location. In the event of a life-threatening illness or injury, emergency medical services will be called first and the parents will be located and informed immediately. Caregivers will report all injuries, whether major or minor to the CSO.

Caregivers should be familiar with evacuation procedures, including where the fire exits are located and where the meeting point is, should the fire alarm sound.

Safeguarding children with special education needs and disabilities

Safeguards for children with special education needs and disabilities (SEND) are essentially the same as for all children. Children with SEND have exactly the same human rights to be safe from abuse and neglect, and to be protected from harm as other children.

However, research suggests that children with SEND may be generally more vulnerable to significant harm through physical, sexual, emotional abuse and / or neglect than other children. Children with SEND can be abused and neglected in ways that other children cannot, and the early indicators suggestive of abuse and neglect can be more complicated than. They face an increased risk of abuse and neglect, including bullying, for a variety of reasons including:

- Greater dependency on parents/ carers for practical assistance in their day to day lives, such as feeding or personal care;
- Impaired capacity to recognise, resist or avoid abuse, or feeling too scared to report abuse/ bullying;
- Speech, language and communication needs/ barriers which can make it more difficult to tell other adults what is happening and get them to understand;
- Increased likelihood of social isolation, with fewer outside contacts than non-disabled children, resulting in less access to someone they trust to disclose abuse to;
- An embedded cultural/ societal assumption that abuse and neglect does not happen to disabled children, leading to a lack of vigilance, spotting of the signs of abuse and reporting of concerns;
- Empathy on the part of professionals/ practitioners with parents/ carers, who are felt to be under considerable stress, leading to certain behaviour/ treatment being accepted by other adults rather than concerns being raised;
- Behavioural/ physical indicators, such as (self-)injury or withdrawal, can be interpreted as part of the child's disability or condition rather than as the result of abuse/ neglect (or vice versa), and therefore abuse/ neglect can be missed and go unreported;
- Being perceived as physically or behaviourally different from others, and therefore more likely to be the victim of bullying or intimidation.

Where the participants in a group/ activity at GCG includes a child with SEND, caregivers must be especially vigilant to the potential increased risk of abuse and neglect, and the additional action that will be needed to ensure this policy and procedure is enacted for that child as it would be for any other child.

Caregivers must be additionally aware of the following possible indicators of abuse or neglect for a child with SEND:

- A bruise in a site that might not be of concern on a non-disabled child, such as the shin, might be of concern on a non-mobile child;
- Malnourishment, potentially due to not getting enough help with feeding;
- Force feeding;
- Unjustified/ excessive use of restraint;
- Rough handling/ extreme approaches to behaviour modification (e.g. withholding of liquid, food, medication, clothing);
- Poor grasp of a child's means of communication;
- Ill-fitting equipment, e.g. calipers, sleep boards, inappropriate splinting;
- Misappropriation of a child's finances;
- Invasive procedures that are unnecessary or carried out against the child's will;
- Misuse of medication, or deliberate failure to follow medication or therapeutic programmes;
- Age or culturally inappropriate care and support

Even subtle changes in behaviour may be a child communicating that something is wrong and/ or that they are being abused.

It is vital caregivers for children with SEND are aware of changing patterns of behaviour and potential causes.

Where there are concerns about the welfare of a child with SEND, caregivers should act upon them in accordance with this policy as they would for any other child. Where a child with SEND has communication needs, special attention should be paid to gaining a clear understanding of the child's perception of events, wishes and feelings. This may require the involvement of children's social care or speech and language clinicians for non-verbal children.

Specific guidelines for different services

1. Crèche

Parents/guardians should take their crèche-aged children there at the point indicated in the service (either Greenwich or Eltham). Upon arrival each child will be signed in by the parent/carer using the Grace Church Greenwich Children's Ministry app

The children are registered at this point and this marks the official start of the caregiver's responsibilities.

At the end of the service, a parent/guardian must pick up their child from crèche. The child should be signed out by the parent/carer using the Grace Church Greenwich Children's Ministry app. This marks the official end to the caregivers' responsibility for the child.

2. Sunday school

Parents/guardians should take their Sunday School aged children to the sign in point as indicated in the service (Eltham or Greenwich). At this point each child will be signed in by the parent/carer using the Grace Church Greenwich Children's Ministry app. The children are registered at this point and this marks the official start of the caregiver's responsibilities. The caregivers will then accompany the children downstairs to the Sunday School classroom (Greenwich). At the end of the service, a parent/guardian must pick up their child from the door of the Sunday School classroom directly.

This marks the official end to the caregivers' responsibility for the child.

2. Weekends away

Weekends away

If any weekend away advertises childcare, or if provision is made for volunteers to help in addition to parents or designated guardians, the childcare for that weekend must be treated in the same way as other weekends that provide childcare. It comes under our Safeguarding Policy and must be run accordingly, following the same procedures as Sunday crèche and Sunday school as detailed in this policy. All caregivers must be screened as outlined in the main policy, and the same regulations concerning ratios, registration, discipline, toileting, food and accidents must be followed as in Sunday crèche/Sunday school.

Contact names and details

CHURCH SAFEGUARDING CONTACTS

Senior Minister

Revd Dr Andrew Latimer

andrew.latimer@gracechurchgreenwich.org.uk

Senior Minister

Revd Dr Andrew Sach

andrew.sach@gracechurchgreenwich.org.uk

Church Safeguarding Officer (CSO)

Sarah Wilde

safeguarding@greenwich.church

Children's and Youth Worker

Clare Stevenson

clare.stevenson@gracechurchgreenwich.org.uk

DIOCESE OF SOUTHWARK SAFEGUARDING

ADVISER (DSA)

Pamela Chisholm or the Assistant Safeguarding Advisers

Marie Daly or Louise Vernon

Tel: 020 7939 9423

NATIONAL CONTACTS

ChildLine

Freepost 1111, London N1 0BR

Tel. 0800 1111

(full number is just these 8 digits)

NSPCC

Child Protection Helpline

0808 800 5000

Family Lives (previously Parentline) 0808 800 222

Domestic Violence Helpline (for females) 0808 2000 247

Mankind (for males) 01823 334244

FURTHER RESOURCES

'Protecting all God's children: The Child Protection Policy of the Church of England', 2010

'The Care Act 2014, and the Care and Support Statutory Guidance 2016' (Chapter 14)

London Multi Agency Safeguarding Adults Policy and Procedures 2015