

## **Healthwatch Cambridgeshire and Peterborough**

### **Safeguarding Children Policy**

#### **1. Purpose of this document**

The aim of this policy is to outline the practice and procedures for employees, board members and volunteers of Healthwatch Cambridgeshire and Peterborough concerning direct and in direct responsibility to the safety of children and young people. It will contribute to the prevention of abuse of children through raising awareness and providing a clear framework for action when abuse is suspected.

#### **2. Guiding principles**

2.1.

In developing this policy Healthwatch Cambridgeshire and Peterborough has followed closely the principles, values and requirements of the Cambridgeshire and Peterborough Local Safeguarding Children Board (LSCB).

2.2

Healthwatch Cambridgeshire and Peterborough will work within the framework of LSCB protocols and procedures and play an appropriate part in ensuring that children and young people in need of protection or support have services that will protect them from harm, promote their health and welfare, and minimise any adverse consequences of abuse.

2.3

We are committed to supporting a high degree of co-operation and collaboration between agencies and professional disciplines together with the promotion of partnership-working to achieve the safeguarding of children. Healthwatch Cambridgeshire and Peterborough believes that the welfare of children is of paramount concern and that their individual needs must be identified and their rights respected.

2.4

Our employees and volunteers must be sensitive to the diversity of children's circumstances and backgrounds in respect of their age, gender, physical and mental ability, ethnicity, culture, religion, language, sexual orientation and socio-economic status. Children have a right to be protected from avoidable harm, neglect, abuse and exploitation.

## 2.5

Healthwatch Cambridgeshire and Peterborough believe that children and young people need to live in safe and secure caring environments which offer them consistency and continuity of care and affection.

### **3. What is abuse?**

#### 3.1

It is not possible to list all the circumstances that may result in the likelihood of significant harm. However, the following circumstances would normally indicate the need for a referral to the appropriate named lead for child protection or directly to a local agency with child protection responsibilities:

- a) Any allegation of sexual abuse
- b) Physical injury caused by assault or neglect which requires medical attention, especially any injury to a baby under the age of one year
- c) Repeated incidents of physical harm that are unlikely to constitute significant harm in themselves but collectively may do so
- d) Children who suffer from persistent neglect
- e) Contact with a person assessed as presenting a risk to children
- f) Children who live in a low warmth, high criticism environment which is likely to have an adverse impact on their emotional development
- g) Children living in a household where there is domestic violence likely to be occurring / has occurred
- h) Children at risk of or victims of Child Sexual Exploitation
- i) A child living in a household or having significant contact with a person deemed to pose a risk to children
- j) Other circumstances where professional judgement and/or evidence suggests that a child's health, development or welfare may be significantly harmed.

#### **4. Lead for Safeguarding Children**

4.1

The Healthwatch Cambridgeshire and Peterborough lead for safeguarding children is the Chief Executive Officer.

The lead is responsible for:

- a) Ensuring that the policy and procedures are reviewed on a regular basis to ensure good practice and according to the auditing process
- b) Ensuring that a safeguarding vulnerable group's action plan is implemented including the monitoring of this policy and any associated procedures
- c) Ensure this policy links closely with the Cambridgeshire and Peterborough Safeguarding Children Board
- d) Ensuring, by means of training, supervision and information, that employees and volunteers have sufficient knowledge and understanding of this policy and associated procedures
- e) Managing the interface between responsible child protection agencies and Healthwatch Cambridgeshire and Peterborough employees, including seeking advice from professionals in the child protection field at every appropriate point
- f) Supporting employees, volunteers or individuals in instances of suspected abuse
- g) Ensuring employees, volunteers and individuals are up-to-date with the relevant legislation regarding safeguarding children and have the skills required to carry out these responsibilities
- h) Ensuring their staff and volunteers undertake regular and appropriate training, are supported in adhering to the policy and procedures and that experience is shared through supervision and team meetings.

#### **5. Safeguarding Vulnerable Children Procedures**

5.1

Procedures have been developed in accordance with the requirements of the Cambridgeshire and Peterborough Safeguarding Children Board.

5.2

If any employee or volunteer requires more information or has a query regarding this policy they should contact the named lead identified above.

### 5.3

All employees and volunteers of Healthwatch Cambridgeshire and Peterborough should read and sign these procedures to confirm they have understood them and had an opportunity to discuss and will act accordingly. All individuals working for Healthwatch Cambridgeshire and Peterborough have a public duty in relation to the safeguarding of children and failure to act may result in disciplinary action being taken.

## **6. Alerting**

### 6.1

The Healthwatch Cambridgeshire and Peterborough lead for Safeguarding Children is identified above. Employees and volunteers should take any concerns about abuse to this named lead, unless it is an emergency in which case they should not delay and should immediately call 999.

### 6.2

All professionals have a duty of confidentiality. However, in certain circumstances the law permits the disclosure of confidential information necessary to safeguard a child. In normal circumstances, employees / volunteers should take any concerns about a possible child protection issue to the named lead within the same working day.

### 6.3

Anyone who believes that a child or young person is suffering or may be at risk of suffering significant harm can also make a direct referral at any time to the Cambridgeshire and Peterborough Safeguarding Teams. Referrals can be made using the link below.

Online: [Professionals – Reporting a Concern | Cambridgeshire and Peterborough Safeguarding Partnership Board \(safeguardingcambspeterborough.org.uk\)](#)

During office hours (Monday to Friday 8am to 6pm):  
0345 045 5203

Outside of these hours telephone the Emergency Duty Team:  
01733 234 724.

If there is any immediate danger to anyone ring 999.

#### 6.4

The Local Authority will send the information to a specialist team to investigate. This team may then need to call you to follow up on details if you have agreed to be contacted.

#### 6.5

Healthwatch Cambridgeshire and Peterborough employees and volunteers must be mindful to:

- a) never delay emergency action to protect a child
- b) it is essential staff or volunteers declare that any disclosure may lead to the information discussed being shared with a third party. In any circumstance a 'no disclosure' conversation will be required.
- c) always record in writing concerns about a child's welfare whether or not further action is taken and record the reasons for following a particular course of action. As soon as possible, record what happened and what was said. This record must use the exact words of the alleged victim and any firsthand observation of fact. It is important to remember that such records may later form part of any evidence base, whether or not a criminal case is brought; the record must be signed and dated. Suspicions of abuse must be recorded in a similar factual manner.

6.6

**The employee or volunteer must then alert the named lead about the event/disclosure/suspicions within the same working day.** The named lead will then record and agree a plan and take any appropriate action.

6.7

Employees and volunteers must not discuss individual cases with any other person, including any member of that individual's family or the alleged abuser. There should also be no discussion about individual's cases with other employees or volunteers, where this is not necessary. However, in some cases parents have to be made aware and this should be advised by the named lead.

6.8

The responsibility for the investigation of allegations and concerns of abuse lies with Children's Services and the Police. Therefore, employees and volunteers should not carry out investigations or questioning.

## **7. Reporting**

7.1

The named lead is responsible for recording the alert, asking for advice from LSCB agencies and / or making a referral to children's services. The named lead is then responsible for passing on advice and information to the concerned employee or volunteer and coordinating any subsequent actions.

7.2

It is the responsibility of the named lead, when making a referral for concerns about a child's welfare, to clarify the nature of the concerns. This will include defining:

- a) how and why concerns have arisen
- b) whether the child may need urgent action to make him/her safe from harm
- c) the needs of the child and family
- d) whether there are concerns about abuse or neglect
- e) the evidence for these concerns

7.3

The named lead will record information and actions relating to concerns of abuse. Information relating to concerns should not be stored where other employees and volunteers can access them, for reasons of data protection. Instead such information should be stored securely for the named lead to access as necessary.

## **8. Investigating**

8.1

Under no circumstances does the named lead, any employee or volunteer have a responsibility for investigating any allegation or suspicion of abuse.

8.2

After reporting it, the named lead will usually be Healthwatch Cambridgeshire and Peterborough representative in any inter-agency investigation.

8.3

If an employee or volunteer of Healthwatch Cambridgeshire and Peterborough has been implicated in any allegation of abuse, Healthwatch Cambridgeshire and Peterborough has the power, subject to the terms of the grievance and disciplinary policy, to suspend that person until such time as the allegation has been investigated.

8.4

Suspension can be effective immediately upon any report being made. It is also possible to suspend an employee from a range of duties while retaining them in some limited capacity.

8.5

Decisions regarding suspension should only take place after discussions with Children's Services and/or the Police as informing them of the allegation prior to that may interfere with any subsequent investigation.

## **9. Monitoring and Review**

9.1

Monitoring and review of individual cases reported out are taken forward under joint agency child protection arrangements. Depending on the

circumstances of the service user and the individual case, the named lead may remain the interface with those processes.

### **10. Further Information**

Further advice and guidance can be found on the Cambridgeshire and Peterborough Local Safeguarding Children's Board website :

[Cambridgeshire & Peterborough Safeguarding Board  
\(safeguardingcambspeterborough.org.uk\)](https://safeguardingcambspeterborough.org.uk)

**Approved by Healthwatch Cambridgeshire and Peterborough Board of Directors**

Date: March 2026

For review: March 2027

### **Responsible Officer**

Chief Executive Officer of Healthwatch Cambridgeshire and Peterborough

# SAFEGUARDING CHILDREN – PROCEDURES

For Staff & Volunteers



**!** See a concern? **Act quickly** – Every child has the right to be safe.

**1. IDENTIFY CONCERN**  
Notice signs, suspicion or disclosure

**2. RECORD DETAILS**  
• Facts, words, date, time, person

**3. REPORT TO SAFEGUARDING LEAD**  
**Same working day** – Don't delay!

**4. FOLLOW NEXT STEPS**  
• Referral to Children's Services  
• Monitoring or support

**5. RECORD & STORE SECURELY**  
Keep all information confidential

**✓** Safeguarding is everyone's responsibility.

## **EMERGENCY?**

Child is in immediate danger?

**Call 999**

**immediately**

Then inform the Safeguarding Lead

## KEY PRINCIPLES

**Do not investigate**

**Do not promise confidentiality**

**Always record concerns**

**Report the same day**

## Remember:

  
Listen & Observe

  
Record Facts

  
Report Concerns

  
Protect the Child

If unsure – always speak to the Safeguarding Lead

## **Appendix A:**

### **Some Definitions of child abuse**

#### 1. Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

#### 2. Emotional abuse

##### 2.1

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

##### 2.2

It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

#### 3. Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching

sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

#### 4. 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. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- a) Provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- b) Protect a child from physical and emotional harm or danger;
- c) ensure adequate supervision (including the use of inadequate caregivers); or
- d) Ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

#### 5. Domestic Abuse

- a) Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality, (English government definition) or
- b) Any violent or abusive behaviour (whether physical, sexual, psychological, emotional, verbal, financial etc) that is used by one person to control and dominate another with whom they have or have had a relationship (Hester et al, 2007).

#### 6. Child Sexual Exploitation

The sexual exploitation of children and young people (CSE) under-18 is defined as that which: 'involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can

occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability'

#### 7. Extremism and radicalisation

Signs to look out for include: Being drawn into to strong principles and ideologies held by others, as a means to control, social network involvement in extremism, being at a transitional time in life, having a need for identity, meaning and belonging, being influenced or controlled by a groups, feelings of grievance and injustice, feeling under threat , displaying mental health concerns, a desire for status, a desire for excitement or adventure and/or a need to dominate and control others.