

# **ETAL SHOW**

## **Safeguarding Policy**

**Safeguarding policy first adopted at 21<sup>st</sup> March 2019 committee meeting.**

**To be reviewed each year at the January meeting.**

**Next review January 2020**

### **Definitions and principles:**

Etal Show Ground lies 10 miles north of Wooler and 10 miles south of Berwick upon Tweed. It's a large field on the Ford & Etal Estates, that is used on the 1<sup>st</sup> Sunday in September. We use two fields, one being the main show ground and the other, used as a large car park. We also use the Walled Gardens for the Dog Show.

All Etal Show, Committee members, volunteers, and any staff the show might in future employ, have a duty to safeguard vulnerable users of the Showground on the show weekend (see above definition) and those who may come into contact with vulnerable users.

They should respond to any concerns they may have regarding the physical, sexual, emotional or psychological safety of a vulnerable person or concerns relating to discriminatory or financial violation or exploitation of a vulnerable person.

This policy is in place to protect all vulnerable persons regardless of gender, ethnicity, disability, sexuality, religion or faith.

The welfare of the child, young person or vulnerable adult is paramount and is the responsibility of everyone. All children and vulnerable adults, without exception, have the right to protection from abuse, whether physical, verbal, sexual, bullying, exclusion or neglect. Bullying, shouting, physical violence, sexism and racism will not be permitted or tolerated.

For these purposes children includes anyone below the age of 18.

A vulnerable adult is defined as: - 'a person aged 18 years or over, who is in receipt of or may be in need of community care services by reason of 'mental or other disability, age or illness and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'.

## **Policy Statement**

1. No member of the committee, helpers or other volunteers or staff will have unsupervised access to children or vulnerable adults unless they have been through the safe recruitment procedure (see box below) and introductory Child Protection or Vulnerable Adults Protection training.
2. All suspicions or allegations of abuse against a child/vulnerable adult will be taken seriously and dealt with speedily and appropriately by the nominated safeguarding person. (see guidance in Appendix B)
3. All members of the committee and volunteers need to be aware of this policy, and aware of how to spot signs of possible abuse – information on this is contained in Appendix A. A copy of the appendices will be provided to all members.
4. The committee will endeavour to keep the Showground safe for use by children and vulnerable adults. The committee recognises that a higher standard of safety is required where use is made by small children, those who cannot read safety notices and physically disabled adults.
5. This policy will be reviewed annually and updated as necessary in the interim periods.

### **Safe Recruitment :**

Volunteers working for the committee, and having unsupervised access to children, young people or vulnerable adults may need to be registered with the Disclosure and Barring Service (DBS). They will need to be registered if they are undertaking Regulated Activity but only if it is done regularly. 'Regularly' means carried out by the same person frequently (once a week or more) or on four or more days in a 30-day period (or in some cases overnight). For more information see:

<https://www.gov.uk/government/organisations/disclosure-and-barring-service>

## **Useful Procedures**

1. All Committee members and volunteers will be given information about safeguarding (See Appendix A) and should have the opportunity to attend introductory level Child Protection training and Protection of Vulnerable Adults training where relevant.
2. A copy of the policy will be made available to all on the Management Committee and it will be displayed on our website.

3. The committee will report any damage, breakages or safety issues needing attention to the chairperson, who will inform the appropriate people. These will be dealt with as soon as practicable, in the light of the circumstances, with provision to prevent access by children and vulnerable adults pending repair where appropriate.
4. Contractors engaged to carry out work at the showground must not be allowed unsupervised access to children or vulnerable adults. Appropriate supervision will be arranged if necessary.

## **Guide to Appendices:**

**Appendix A – Forms and signs of abuse – how to recognise it.**

**Appendix B - Guidelines for dealing with disclosure or signs of abuse. How to respond and what to do. Contact details of nominated person on Etal Show committee. Contact details (Northumberland county) for making a referral or discussing concerns.**

## **Appendix A**

### **Forms and signs of abuse**

#### **Ways to recognise child abuse and neglect**

#### **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 feigns the symptoms of, or deliberately causes ill health to, a child whom they are looking after. A person might do this because they enjoy or need the attention they get through having a sick child. Physical abuse can be caused through omission or the failure to act to protect.

#### **Visible Signs:**

- Injuries to any part of the body
- Children who find it painful to walk, sit down, to move their jaws or are in some other kind of pain

- Injuries which are not typical of the bumps and scrapes associated with children's activities
- The regular occurrence of unexplained injuries
- The child who is frequently injured, where even apparently reasonable explanations are given

### **Behavioural Signs:**

- Furtive, secretive behaviour
- Uncharacteristic aggression or withdrawn behaviour
- Compulsive eating or sudden loss of appetite
- The child who suddenly becomes ill co-ordinated
- The child who finds it difficult to stay awake
- The child who is repeatedly absent

### **What to listen for:**

- Listen for confused or conflicting explanations of how the injuries were sustained
- Evaluate carefully what is said and preferably document it ad verbatim
- Consider if the explanation is in keeping with the nature, age and site of injury

### **Consider:**

- What do you know about the family?
- Is there a history of known or suspected abuse?
- Has the family been under stress recently?
- Do you have concerns about the family?

### **Emotional abuse**

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve making a child feel or believe that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person. It may also include seeing or hearing the ill-treatment of another, serious bullying and the exploitation or corruption of children.

The recognition of emotional abuse is based on observations over time of the quality of relationships between parent/carer and the child.

### **Watch for parent/carer behaviours**

- Poor attachment relationship with the child
- Unresponsive or neglectful behaviour towards child's emotional or psychological needs
- Persistent negative comments about the child
- Inappropriate or inconsistent developmental expectations of the child
- Parental problems that supersede the needs of the child
- Dysfunctional family relationships including domestic violence

**Watch for child behaviours:**

- Emotional indicators such as low self esteem, unhappiness, fear, distress, anxiety
- Behavioural indicators such as attention seeking, withdrawn, insecure
- Physical indicators such as failure to thrive/faltering growth, delay in achieving developmental, cognitive or educational milestones

**Sexual abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of, or consents to, what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex or non-penetrative acts such as fondling. Sexual abuse may also include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Boys and girls can be sexually abused by males and/or females, by adults and by other young people. This includes people from all different walks of life.

There may be no recognisable signs of sexual abuse but the following indicators may be signs that a child is or has been sexually abused:

**Physical signs**

- Signs of blood or other discharge on the child's under clothes
- Awkwardness in walking or sitting down
- Tummy pains
- Regression into enuresis (bed or clothes wetting)
- Tiredness

**Behavioural signs:**

- Extreme variations in behaviour (e.g., anxiety, aggression, or withdrawal)
- Sexually provocative or inappropriate behaviour, or knowledge that is incompatible with the child's age and understanding
- Drawings and/or written work which are sexually explicit (indirect disclosure)
- Direct disclosure; It is important to recognise that children have neither the experience nor the understanding to be able to make up stories about sexual assault.

**Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators of neglect are recognisable in the child, in the parent/carers' behaviours and within the home environment.

**Physical signs**

- Abnormal growth including failure to thrive
- Underweight or obesity
- Recurrent infection
- Unkempt dirty appearance
- Smelly
- Inadequate/unwashed clothes
- Hunger
- Listlessness

**Behavioural signs:**

- Attachment disorders
- Indiscriminate friendliness
- Poor social relationships
- Poor concentration
- Developmental delays
- Low self esteem

**Environmental signs:**

- Insufficient food, heating and ventilation in the home
- Risk from animals in the household
- Inappropriate sleeping arrangements and inadequate bedding
- Dangerous or hazardous environment

## Categories and predisposing factors of adult abuse

**Predisposing factors:** Some examples of factors which may place people at risk of abuse are listed below. Adult abuse often occurs when a vulnerable adult is faced with a set of circumstances where there is potential for harm. The presence of one, or more, of these factors does not automatically imply that abuse will follow, but may increase the likelihood:

### **The Individual:**

- Poor communication or communication difficulties
- History of falls and/or minor injuries
- Physical and/or emotional dependence on others
- Mental health needs, especially moderate or severe dementia
- Rejection of help
- Aggression
- Self-injurious behaviour
- History of repeatedly making allegations of abuse
- High level dependency on others to meet their care needs
- Substance misuse
- Previous history of violent relationships within the family or social networks

### **The Environment:**

- Overcrowding
- Poor or insecure living conditions
- Geographical isolation
- Poor management and/or high staff turnover

### **Relationships (in particular with carers):**

- Unequal power relationships
- Increased dependency of vulnerable adult
- Multiple dependency within the family or social networks
- Multigenerational family structure where conflicts of personal interests and loyalties may exist
- Role reversal or significant change in the relationship between the vulnerable adult and carer
- History of abuse within the family
- Significant levels of stress on the carer
- Isolation of the carer, due to the demands of caring, leading to a lack of practical and emotional support
- Lack of understanding about the vulnerable adults condition, resulting in inappropriate care
- Dependency on the vulnerable adult
- Difficult or challenging behaviour by the vulnerable adult which the carer finds intolerable or stressful

- History of the carer being abused or being a perpetrator
- The carer feels exploited, resentful, angry or guilty
- Financial difficulties
- Illness or disability of the carer
- Significant and long term stress of the carer

**Discriminatory abuse:** Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals. It is the exploitation of a person's vulnerability, resulting in repeated or pervasive treatment of an individual, which excludes them from opportunities in society, for example, education, health, justice, civic status and protection. It includes discrimination on the basis of race, gender, age, sexuality, disability or religion.

**Potential indicators:**

- Lack of respect shown to an individual
- Signs of a sub-standard service offered to an individual
- Repeated exclusion from rights afforded to citizens such as health, education, employment, criminal justice and civic status

**Physical abuse:** The non-accidental infliction of physical force that results in bodily injury, pain, or impairment. Examples include the inappropriate application of treatments, involuntary isolation or confinement, misuse of medication.

**Potential indicators:**

- Any injury not fully explained by the history given
- Injuries inconsistent with the lifestyle of the vulnerable adult
- Bruises and/or welts on face, lips, mouth, torso, arms, back, buttocks, thighs
- Clusters of injuries forming regular patterns or reflecting the shape of an object
- Burns, especially on the soles, palms or back; immersion in hot water, friction burns, rope or electrical appliance burns
- Multiply fractures
- Lacerations or abrasions to mouth, lips, gums, eyes, external genitalia
- Marks on body, including slap marks, finger marks
- Injuries at different stages of healing
- Medication misuse

**Sexual abuse:** Direct or indirect involvement in sexual activity without consent. Consent to a particular activity may not be given because:

- A person has capacity but does not want to give consent
- A person lacks capacity and is therefore unable to give consent
- A person feels coerced into activity because the other person is in a position of trust, power, or authority

**Potential indicators:**

- Significant change in sexual behaviour or attitude

- Pregnancy in a women who is unable to consent to sexual intercourse
- Wetting or soiling
- Poor concentration
- Vulnerable adult appears withdrawn, depressed or stressed
- Unusual difficulty in walking or sitting
- Torn, stained or bloody underclothing
- Bruises, bleeding, pain or itching in genital area
- Sexually transmitted diseases, urinary tract or vaginal infection, love bites
- Bruising to thighs or upper arms

**Psychological abuse:** The use of threats, humiliation, bullying, swearing and other verbal conduct, or any other form of mental cruelty, that results in mental or physical distress. It includes the denial of basic human and civil rights, such as choice, self-expression, privacy and dignity.

**Potential indicators:**

- Change in appetite
- Low self-esteem, deference, passivity, and resignation
- Unexplained fear, defensiveness, ambivalence
- Emotional withdrawal
- Sleep disturbance

**Financial abuse:** The unauthorised and improper use of funds, property, or any resources belonging to an individual. Examples include forcing changes to a will, preventing access to money, property, possessions or inheritance, and theft.

**Potential indicators:**

- Unexplained sudden inability to pay bills or maintain lifestyle
- Unusual or inappropriate bank account activity
- Power of attorney or enduring power of attorney obtained when vulnerable adult is unable to comprehend and give consent
- Withholding money
- Recent change of deeds or title of property
- Unusual interest shown by family or others in the vulnerable adult's assets
- Person managing financial affairs is evasive or uncooperative

**Neglect and Acts of Omission:** The repeated deprivation of assistance that the vulnerable adult needs for important activities of daily living, including the failure to intervene in behaviour which is dangerous to the vulnerable adult or others.

**Potential indicators:**

- Poor physical condition, e.g. bed sores, unwashed, ulcers
- Clothing in poor condition, e.g. unclean, wet, ragged
- Inadequate physical environment
- Inadequate diet
- Untreated injuries or medical problems
- Inconsistent or reluctant contact with health or social care agencies

- Failure to engage in social interaction
- Malnutrition when not living alone
- Inadequate heating
- Failure to give prescribed medication
- Poor personal hygiene

**Institutional Abuse:** When rules and regimes of the home are seen as more important than the individual needs of the people who live in the home.

- Poor standards
- Inflexible regimes
- Lack of personal choice for food, bed and meal times, etc.

## Appendix B

Guidelines for responding to the disclosure of, or to observed evidence of abuse or neglect:

DO	DON'T
<p><i>Do treat any allegations extremely seriously and act at all times towards them as if you believe what they are saying.</i></p>	<p><i>Don't make promises you can't keep such as promising to keep it secret.</i></p>
<p><i>Do tell them they are right to tell you.</i></p>	<p><i>Don't interrogate them – it is not your job to carry out an investigation – this will be up to the police and social services.</i></p>
<p><i>Do reassure them that they are not to blame.</i></p>	<p><i>Don't say anything that makes them feel responsible for the abuse.</i></p>
<p><i>Do be honest about your own position, who you have to tell and why. Keep them informed of what is going to happen.</i></p>	<p><i>Don't ask leading questions as you may be accused of putting words into their mouth and this could jeopardize an investigation. Just use simple questions (where, who, what, when...) and gather the facts as impartially as possible.</i></p>
<p><i>Do take further action – tell your nominated person* immediately.</i></p>	
<p><i>Do write down everything said and what was done. Use the victim's own words and clearly record what you see. All written records must be dated, stored safely and kept confidential.</i></p>	<p><i>Don't cast doubt on what they have told you, don't interrupt or change the subject.</i></p>
<p><i>Do seek medical attention if necessary.</i></p>	<p><i>Don't Do Nothing – make sure you tell your nominated safeguarding person* immediately – they will know how to follow this up and where to go for further advice.</i></p>
<p><i>Do inform parents/carers unless you feel that doing so would place the victim in danger.</i></p>	

**\* Nominated person on Etal Show Committee is:**

**Rob O'Rourke**

**rob@northumberlandnurseries.co.uk**

- *Any concerns you have must be passed on to this person, along with written records of what has been seen and/or said. They will then pass this on to the relevant authorities.*
- *You must keep the above information confidential i.e. do not speak to anyone else about it other than those directly involved in keeping the child/vulnerable person safe.*
- *Only if the nominated person fails to act should you then directly contact the relevant authorities yourself.*

- *The child/vulnerable person's welfare is paramount.*

**EMERGENCY CONTACTS NORTHUMBERLAND FOR REPORTING CONCERNS/DISCLOSURES**  
*(responsibility of nominated safeguarding person)*

For children and young people referrals:	Tel: 01670 536000
For adult referrals:	Tel: 01670 536400
Written referrals	<a href="mailto:childrenstriage@northumberland.gov.uk">childrenstriage@northumberland.gov.uk</a>
Emergency Duty Team, (Out of Hours Team),	Tel: 0345 6005252 onecall@northumbria-healthcare.nhs.uk