BRIGHTON WATERSPORTS SAFEGUARDING POLICY STATEMENT AND PROCEDURES

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Introduction

For the purposes of this policy anyone under the age of 18 should be considered as a child. All members of the Centre should be aware of the policy. Every member of staff at Brighton Watersports has a duty of care to minimise as far as reasonable any risk to the safety of children.

Safeguarding Officer The Child Protection Officer is:	Safeguarding Officer Senior Child Protection Officer is:
Alysha Hutchings	Rhian Howells
Contact details:	Contact details:
Mobile: 07443870281	Mobile:07947522059

You should contact the Senior Child Protection Officer in the first instance. If the allegation relates to the Child Protection Officer or they are unavailable (on holiday etc) then the Deputy Child Protection Officer should be contacted.

Employees

All Centre employees & volunteers whose role brings them into contact with young people will be asked to provide references. The management team and those instructing, coaching or supervising young people will also be asked to apply for an Enhanced DBS check. Any employee failing to comply with the Child Protection policy may be subject to disciplinary action.

Good Practice (All employees should follow the good practice set out below.)

Those working with young people should be aware of the guidance on recognising abuse.

Brighton Watersports will seek written consent from the child and their parents/carers before taking photos or video during a session or publishing such images. Parents and spectators should be prepared to identify themselves if requested and state their purpose for photography/filming. If Brighton Watersports publishes images of children, no identifying information will be included. Any concerns about inappropriate or intrusive photography or the inappropriate use of images should be reported to the Child Protection Officer.

Concerns

Anyone who is concerned about a child's welfare, either outside the sport or within the Centre, should inform the Child Protection Officer immediately, in strict confidence. The Child Protection Officer will follow the attached procedures.

Useful Numbers:

- NSPCC Helpline Tel: 0808 800 5000 www.nspcc.org.uk (For those with a hearing difficulty, there is a text phone telephone number: 0800 056 0566)
- Childline Tel: 0800 1111 www.childline.org.uk
- British Canoeing Designated Safeguarding Lead Urvasi Naidoo Tel: 0115 8968842
 Email: safeguarding@britishcanoeing.org.uk

Child Protection - Good Practice

- Avoid spending any significant amount of time working alone with children in isolation
- Never take children alone in a car
- Where the above are unavoidable make sure they are done with the knowledge and permission of the duty manager and the parents/ guardians of the child/ children
- Design and deliver sessions that are suitable for the child / children and within their capabilities
- Adults should not enter the showers and changing rooms at times when children are changing. If this is unavoidable it is advised that they are accompanied by another adult. (Staff present outside the changing doors while occupied by children)
- Never engage in rough, physical, or sexually provocative games
- Never allow or engage in any inappropriate touching of any form
- Do not allow children to use inappropriate language unchallenged
- Do not use inappropriate language around children
- Do not make sexually suggestive comments to a child, even as a joke
- You must <u>always</u> respond to any allegations made by a child
- Do not do anything of a personal nature for a child that they can do themselves
- Where it is necessary to touch a child (you may need to assist a child who is very young or disabled) it should be done with the permission of the child (where possible) and the parents / guardians of the children and wherever possible in front of another adult.
- If you accidentally hurt a child You should report such an incident immediately to the Duty Manager and make a written note of it. The parents / guardians of the child must be informed.

Contact as part of coaching.

Some areas of training are more likely to require staff to come into physical contact with children and young people from time to time in the course of their duties, for example, showing a novice how to put on their buoyancy aid. Employees should be aware of the limits within which such contact should properly take place, and of the possibility of such contact being misinterpreted. If a coaching technique would benefit from physical contact or support then first asks the paddler's permission (e.g. would you mind if I held your shoulders to show you what I mean?). Touching can be OK and appropriate as long as it is neither intrusive nor disturbing or for the wrong reason.

Responding to distress and success

There may be occasions where a distressed young person needs comfort and reassurance which may include physical comforting such as a caring parent would give. Physical contact may also be required to prevent an accident or injury and this would be wholly appropriate. A young person may also want to mark a success or achievement with a hug or other gesture. Instructors should use their discretion in such cases to ensure that what is (and what is seen by others present) normal and natural does not become unnecessary and unjustified contact.

Recognising signs of abuse

It's generally acknowledged that there are five main types of abuse in relation to children - Physical, Sexual, Emotional, Neglect and Bullying.

Physical Abuse

Physical abuse is just what the term implies - hurting or injuring a child e.g. by hitting, shaking, squeezing, burning or biting them. In sport this might result if the nature or intensity of training is inappropriate for the capacity of the performer or where drugs are tolerated or advocated. Bullying is likely to come into this category - see below.

Sexual Abuse

Where young people are used by adults to meet their own sexual needs. It could range from sexually suggestive comments to full intercourse and includes the use of pornographic material.

Emotional Abuse

Emotional abuse occurs when a child is not given love, help and encouragement and is constantly derided or ridiculed e.g. racial or sexual remarks. It can also occur if a child is over protected. Abuse can occur where a parent or coach has unrealistic expectations over what a child can achieve.

Neglect

Failing to meet children's basic needs such as food, warmth, adequate clothing, and medical attention or constantly leaving them alone. It could also mean failing to ensure they are safe or exposing them to harm or injury.

Bullying

The bully can be an adult - the parent/carer who pushes too hard, the coach who adopts a winat-all-costs philosophy or adults who attempt to assert unacceptable behaviour on younger paddlers to make them unwelcome or prevent them using equipment. Bullying can also occur between young people.

Contacting the Single Point of Advice (SPoA)

The SPoA advises:

• If you have concerns or enquiries relating to a child/ren who are already open to a Social Worker, please contact the Social Worker directly. If you are unsure who their worker is, you can find details by accessing Single View. Please do not contact SPOA regarding families who already have a Social Worker, unless you are making a CAMHS referral.

If you have immediate safeguarding concerns relating to a child that does not already have a Social Worker and is at risk of harm, or if a child has sustained an injury, please call SPoA on 01323 464222.

Lead Contact:

Donna Davis and Susan Giles. (East Sussex County Council)

- practitioners with concerns reaching Level 3 or 4 (targeted and child protection services)
- when a practitioner and safeguarding lead manager assess that the child is at immediate risk of significant harm. Phone SPoA immediately and say your concern is about immediate risk
- when the safeguarding lead is not available
- practitioners with concerns about a child with emotional, wellbeing or mental health issues.
 SPOA is now the contact point for referrals to Child and Adolescent Mental Health Services (CAMHS)

What SPoA will ask you

 have you checked SingleView to see if an East Sussex County Council service is already supporting the child? If so, have you spoken to that service?

(www.eastsussex.gov.uk/social-care/providers/singleview)

- who else you have spoken to?
- details of child and family
- a summary of your concerns
- have you referred to the Continuum of Need?
- Do you need to report a child protection concern? (forms below)

Reporting a child protection concern using a form

You can report a child protection on the Children's Portal to report your concerns to SPOA.

- Register for the Children's Portal and submit the form online
- (www.eastsussex.gov.uk/children-families/professional-resources/spoa)
- <u>Download a paper form</u> and email it to the <u>Single Point of Advice team</u> (webspoa@eastsussex.gov.uk)

(Page 6 is the paper form as described above)

If a child is at risk of immediate harm, or has sustained an injury, please call SPOA directly on **01323 464 222** before completing your referral.

Contacting the SPoA

Telephone: 01323 464 222 Monday to Thursday 8.30am to 5pm and Friday 8.30am to 4.30pm.

Out of hours, with serious concerns that cannot wait until the next working day, contact our Emergency Duty Service.

Telephone: **01273 335 906** or **01273 335 905** Monday to Thursday 5pm to 8.30am and Fridays, weekends and bank holidays after 4.30pm to 8.30am

Emai: webspoa@eastsussex.gov.uk

Local

The Council doesn't normally offer advice about Level 1 and 2 needs – instead see <u>Organisations</u> that help families:

www.eastsussex.gov.uk/children-families/family-support

To make a referral you need to contact the countywide SPOA service 01323 464222 or _0-19.SPOA@eastsussex.gov.uk /

You should have discussed with your agency Safeguarding lead with reference to the East Sussex Continuum of Need prior to sending the SOR in with an assessment of where on the CON the concerns sit at. The referral should be discussed in this way first unless there is a significant immediate risk of harm in which case SPOA should be contacted by telephone.

For more information on the Continuum of Need please go to https://czone.eastsussex.gov.uk/Continuum

- If handwritten, please complete in BLOCK CAPITALS
- If you run out of space please attach a separate sheet

To: (if applicabl	(e)						Т	Foday' date		
Please attach any relevant additional information e.g. Chronology, Early Help Plan, CAF										
(information from attached documents does not have to be repeated on this form)										
Please tell us what documents you have attached:										
1. Child / youn	a nerson v	ou are	e concerned a	bout						
Full name	g porcon y	oa ar	<u> </u>	bout	Gende	er				
Date of Birth							l setting			
Address					Family		ne			
					numb	3 1				
2. All other chi	ldren & yo	ung p								
Full name			Date of birth	Gen	der	Rela	ationship t	o abov	ve	Educational setting
2a. Ethnicity	of children	& you	ing people in	the ho	ouseho	ld				
White		Mixe	d		Asian	/Asiar	n British		Black	/Black British
British		O Wr	nite & Black		C Indi	an			C Ca	rribean
Clrish		O W	nite & Black Africa	n	C Pak	istani			C Afri	can
☐ Gypsy Roma		C W	nite & Asian		C Bar	ıglade	shi			
C Irish traveller		C Ara	ab		C Chi	nese				
Other*		Otl	her*							
Other ethnic grou	p (please state	е):					C Prefer	not to s	tate	

	rers or adults you are a			
full name		Gender	Relationship	Parental responsibility? Y/N
	r significant adults, chil			
ull name		Gender	Relationship	Parental responsibility? Y/N
Has the parent	/carer been offered any paren	ting support gro	ups? 🗌 Yes 🖺	No
Has the parent	/carer attended any parenting	support groups?	Yes 🗆	No
eferral ch	ecklist – CAMHS refer	rals only - p	lease indicate presenting	problems.
	T			
Anxiety	Obsessive symptoms	Fears & Ph	obias Social anxiety	Somatic complaints
	Separation issues	Anxious ge	enerally Panics	
Mood	Depression/low mood	Self-harm	Loss of appetit	te Extremes of mood
	Suicidal thinking	Withdraw	n 🔲 Sleep disruptio	on
Experiences	Suicidal thinking Hallucinations	☐ Withdrawi		Delusions
Experiences Eating		☐ Hearing vo	pices Bizarre ideas	Delusions
Eating	☐ Hallucinations	☐ Hearing vo	pices Bizarre ideas	☐ Delusions
	Hallucinations Preoccupation with food	☐ Hearing vo ☐ BMI less t	bices Bizarre ideas han 18 Sudden weigh	Delusions at change estricting)
Eating	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise	☐ Hearing vo ☐ BMI less t	bices Bizarre ideas han 18 Sudden weigh l eating pattern (bingeing/re	Delusions at change estricting)
Eating Relationships	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsless Difficulty sitting	Delusions at change estricting) hip difficulties
Eating Relationships Drug/alcohol	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsless Difficulty sitting	Delusions at change estricting) hip difficulties ng still or concentrating
Eating Relationships Drug/alcohol	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted ☐ Drug or alcohol misue -	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsles Difficulty sittin Domestic abus	Delusions at change estricting) hip difficulties ng still or concentrating
Eating Relationships Drug/alcohol	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted ☐ Drug or alcohol misue - ☐ Emotional abuse	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsles Difficulty sittin Domestic abus	Delusions at change estricting) hip difficulties ng still or concentrating
Eating Relationships Drug/alcohol Safeguarding	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted ☐ Drug or alcohol misue - ☐ Emotional abuse ☐ Physical/sexual abuse	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsles Difficulty sittin Domestic abus	Delusions at change estricting) hip difficulties ng still or concentrating
Eating Relationships Drug/alcohol Safeguarding Risk to others	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted ☐ Drug or alcohol misue - ☐ Emotional abuse ☐ Physical/sexual abuse ☐ Child sexual exploitation	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsles Difficulty sittin Domestic abuse	Delusions at change estricting) hip difficulties ng still or concentrating
Eating	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted ☐ Drug or alcohol misue - ☐ Emotional abuse ☐ Physical/sexual abuse ☐ Child sexual exploitation ☐ Sexually harmful behavior	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsles Difficulty sittin Domestic abuse	Delusions at change estricting) hip difficulties ng still or concentrating
Eating Relationships Drug/alcohol Safeguarding Risk to others Physical health	☐ Hallucinations ☐ Preoccupation with food ☐ Excessive use of exercise ☐ Family relationship diffi ☐ Easily distracted ☐ Drug or alcohol misue - ☐ Emotional abuse ☐ Physical/sexual abuse ☐ Child sexual exploitation ☐ Sexually harmful behavious ☐ Adjustment to health iss	Hearing vo	bices Bizarre ideas han 18 Sudden weigh leating pattern (bingeing/re Peer relationsles Difficulty sittin Domestic abuse	Delusions at change estricting) hip difficulties ng still or concentrating

4. Why are you worried about this child / family Please include a chronology if not already attached	? What is your risk assessment for them?
5. Do you know what has already been tried to s (include attachments as appropriate)	support this family and the outcome of that support?
6. What help do you think Early Help, Social Car	re or CAMHs can give in this case?
7. What is the young person's view of the difficulties?	What are the parent/carers views of the difficulties?
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reason that Please note: MASH if the re Social Care,	roung person or parent/carer been information the young person or parent/carer has it is possible that this referral and its content eferral is passed through to that service. MAS Police and other key early help services, information of the concerns. We use the principles of information of the concerns.	not been informats will be discussion. H is a multi-agenormation will be s	rmed. sed within the SPOA team and also within by team and consists of staff from Children's shared in order to work out the best way to
9. Please lis i.e. education	st any organisations or services you thon, health	nink are workir	ng with any members of the family
10Referrer Name Service Signature		I Role Contact details	
11. GP info	ormation: for CAMHS referrals only	Contact details:	

BRIGHTON WARES ROSTE USE LIFE GOODO THE SQUELAN

Parental Consent form (under18's)

Thank you for choosing to take part in activities with Brighton Watersports.

As part of **Adventure Activities Licensing Regulations (AALA) 2004/ Royal Yachting Association** (to whom we are regulated by) we do need you to sign the below form.

Brighton Watersports thrives on being as inclusive as possible. Knowing a child's background means that we can be as prepared as possible to ensure their experience is amazing!

Please note there are two pages to this document.

l,	(Name of paren	t/guardian) agree that:
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- I understand that Brighton watersports and its representatives, whilst taking all reasonable care, can accept no responsibility for any loss of, or damage to property, or for any personal injury during or out of the activity, unless they are deemed to be negligent.
- I understand that Brighton Watersports staff may cancel participation if my child does not obey the guidance given.
- My child is suitably fit to undertake the activity. Please list below any medical conditions that we should be aware of e.g asthma, heart condition, epilepsy, diabetes, any medical condition that might be aggravated/affected by the activities.
- Please advise of any disabilities that may affect your child ability to take part.(list below)
- Please advise of any Mental health issues i.e anxiety (even if mild) that may affect your child during the activity. (list below)
- Please advise if your child has any allergies (please provide medication), especially nut, stings, dairy, and add to the space below. (list below)
- Please advise of any gender references and preferences.

Can Your Child swim: (Please circle one)

- Yes, and is confident in water.
- No, but is confident in water.
- No, is not confident in water and will require assistance.

Medical consent:

- I give permission to the organisers of activities i.e., Brighton watersports, to administer any relevant treatment/First aid or medication to the below-named participant when or if necessary.
- In an emergency, I authorise the organisers (if no response from Primary or Secondary contact) to take my child to hospital and give my full permission for any treatment required to be carried out in accordance with the hospital's diagnosis. I understand that I shall be notified, as soon as possible, of the hospital visit and any treatment given by the hospital.

Covid-19 adjustments

- I understand that Brighton Watersports may have to make last minute adjustments to activities, or the way activities are run in line with latest Government Covid updates.
- I understand that my child will adhere to Covid guidelines that are in place at Brighton Watersports sites.
- Please do not visit any of our sites if you have COVID-19 symptoms or have been in contact with anyone who has contracted the illness or told to self-isolate.

<u>What to Bring</u>: Footwear suitable for the water, suntan lotion, towel, water bottle, any food required, (there are no shops nearby) change of clothes. Wetsuits and Buoyancy aids will be provided.

Previous experiences

Please list below any experience your child may have of watersports and any qualifications they may have.

Please list below details of any Medical, Allergies, Mental Health, or disabilities.

(The Senior instructor may discuss with you or your child directly and in confidence if required)

	<u>Previous watersports experience</u>	Any qualifications	<u>Date taken</u>
	Any medical conditions	symptoms	treatment
	Allergies	Symptoms	Treatment
	Mental health	Symptoms	Treatment
	disabilities	Condex Deferences and preferences	
	<u>disabilities</u>	Gender References and preferences	
oc	tor and contact Number:		
	nature and name of parent/ ardian:		DATE:
Na	me of child/children:		
	nergency contact Preferred:		
Na	me/relationship contact number	:	
En	nergency contact Back up:		

Information on this form will be held in accordance with Data Protection 1998 and not be shared with any third party except in an emergency.

Name/relationship contact number:

Key Points for Child Activities

- 1. Age group will be 6 years plus. (8 yrs for Non-Parent Present)
- 2. Parental consent forms detailing allergies/medical/welfare concerns/Emergency contact.

See parental consent form, all forms need to be signed and follow up telephone call for anyone with medical/allergies/welfare boxes as yes.

- 3. List of Equipment needed: We can provide most equipment if they can't, old trainers would be suitable as footwear.
- 4. Provide their own food Request if their kids are normally part of the free school food program.
- 5. All staff DBS checked.
- 6. Allocated trained welfare officer on site for minor problems like sickness.
 - All instructors trained to be on the lookout for any signs of abuse.
 - Appointed site first aid officer
- 7. Senior Company Welfare officer within 30mins travel for 121 care.
- 8. Procedures in place where a situation is raised from course officer to Senior officer.

(See welfare operating procedures)

- 9. Images / photography / social media No Imagery will be taken without prior written consent.
- Changing room guidance adults and children, and children of different groups will use changing rooms at different times.
 - Staff present outside changing rooms.
 - o Use of wrist bands if needed.
 - o Signs outside changing rooms

11. Code of conduct for children and parents: Parents and children will be expected to adhere to all the instructions and rules of the facility and instructors. As per Company Terms and Conditions:

C. <u>Unruly Behaviour (all parties)</u>

- We reserve the right in our absolute discretion to terminate without further notice the booking arrangements of any Customer who refuses to comply with the instructions or orders of All BWS authorized staff or volunteers.
- 2) The Customer is required to have consideration for other people. If, in the Centre's reasonable opinion, the Customer behaves in such a way as to cause or be likely to cause danger, upset or distress to any third party or damage to property or disruption or behaves in any other unruly or anti-social manner ("Unruly Behavior"), the Centre is entitled, without prior written notice, to terminate the Customer's stay/use of facilities or other Services. Such people will be required promptly to leave the Centre's property and no refunds will be made and the Centre will not pay any expenses or costs incurred by the Customer.
- 3) The Customer will not participate in any activities whilst ability is impaired by alcohol, medication, or illegal substances.
- 4) The Centre operates a zero-tolerance policy towards the use or possession of illegal substances and so called "legal highs". Use or possession of any of them by a customer is regarded as Unruly Behavior under this condition.
- 5) The Customer shall be liable for any injury, damage or loss suffered caused by the Customer's own negligence.

Additional operating procedures for non-school or groups where "Parents not present"

Upon arrival

- Ensure all parents have completed "Parental consent form".
- Ensure all children have the right kit, and enough food and drink.
- Briefly chat to parents about how their kids are feeling about the day:
 - Any concerns the parents may have about the activity or how their children are feeling on the day.
 - Ask if the children have any bruising or cuts/injuries we should know about, that may affect or be affected by taking part.
 - Use "body map" form if required.
- Introduce the staff and outline activities.
- Outline all the changing room rules and toilet break and fire drill procedures.
- Discuss use of safe box.

During Activities

- If any children open up about abuse during activities, it is important to listen.
- You can use TED questions T-tell me, E-explain, D-Describe and fully reassure that they are not in trouble for sharing the information and that you are there to help and may need to pass information on to other services.
- Staff should be observant of any bruising or cuts present.
- Child abuse can be physical or mental. It is important for staff to be aware of both.
- Tell the child that you will need to write it down.

Do:

- Staff or volunteers who are concerned about the safety or welfare of a child should always:
 - o seek appropriate advice and support immediately.
 - discuss their concerns with a designated person or with their manager as soon as possible (within 24 hours)
 - o make a record must write down accurately (do not add words or change to make sense)
 - o read and be familiar with the settings safeguarding children policy.

REMEMBER: not to ask leading/closed questions allow the child to tell their own story.

Don't:

Staff and Volunteers should never:

- investigate or seek to prove or disprove possible abuse.
- do nothing.
- assume that someone else knows or will act.
- attempt to resolve the matter themselves.
- confront the suspected abuser.

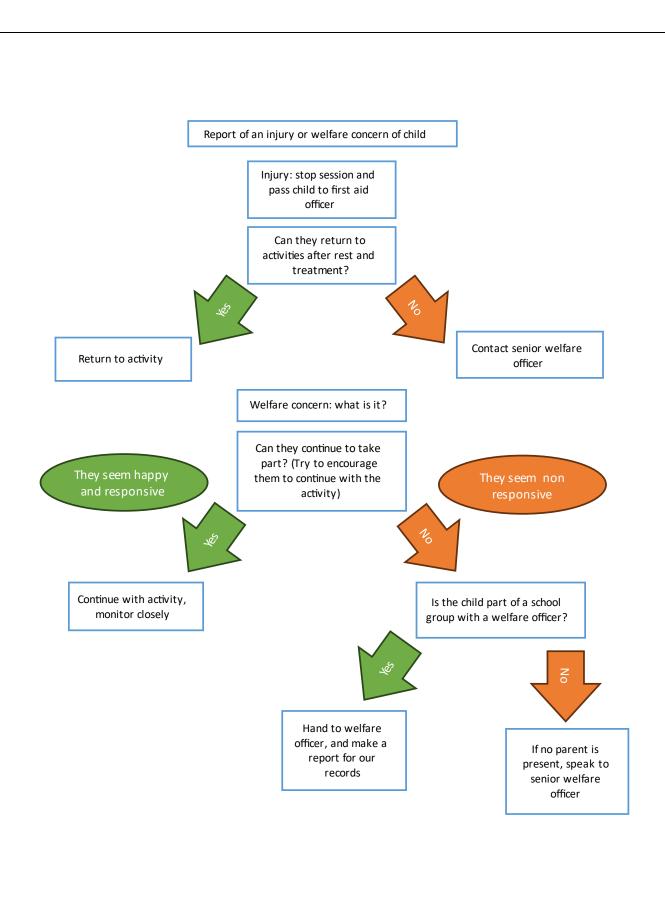
Never promise you won't tell anyone or promise to fix everything.

When to report an issue to the senior Welfare officer?

If it looks like a report or injury will take more than a normal break time to resolve, then pass to land staff for them to call the Senior Welfare officer. The welfare officer can then look after the child on a 1 to 1 basis.

Is it urgent or will the child benefit from taking part in the activity?

Give the group a break, exit the water and brief land staff of the report, it could be that you can then continue with the activity with the child while the welfare officer looks into the report.



CHILD PROTECTION BODY M. Name of child: Observations: Date recorded: Staff member raising concern: Date of birth:

Supervisor's signature:Date:	Description of how the accident occurred: Condition following the accident: Name of contact: How contact was contacted: Phone Time: Email Text Other Comments:	Name of witnesses / adults present: Place accident occurred:	Date and time of accident:	Name: Date of Birth:	Accident Record Form
Front			Ç		Body Map Form
Back		\ \	\supset		ap Form