

Policy Name:	Safeguarding Children Policy and Procedure (Scotland)
Purpose	<p>The purpose of this policy is:</p> <p>The MS Society is committed to safeguarding and promoting the welfare of all who use its services and come into contact with the Charity, regardless of gender, race, disability, sexual orientation, religion/beliefs, whether pregnant or undergoing gender reassignment. We recognise that we have a particular responsibility to ensure that children are protected.</p>
Region	Scotland
Scope	MS Society staff and volunteers
Lead Officer	Safeguarding Lead
Responsible Directors	Executive Director of Services and Support
Key Consultation	<p>Executive Director Services and Support</p> <p>Safeguarding Oversight Group (SOG)</p>
Approver	Board of Trustees
Last Approval Date	December 2022
Review Cycle	Every three years unless circumstances dictate an earlier review is required
Next Approval Date	2025
Key Words	<p>Safeguarding</p> <p>Vulnerable</p> <p>Harm</p> <p>Abuse</p>

MS Society Safeguarding children policy and procedure (Scotland)

Safeguarding children policy

1 Purpose and scope

1.1 Context

The MS Society is committed to safeguarding and promoting the welfare of all who use its services and come into contact with the Charity. We recognise that children may come into contact with our services and that we have a responsibility to ensure that they are properly protected.

1.2 The objectives of this policy and procedure are to:

- ensure children in contact with the Society are protected effectively from abuse/harm.
- ensure the Societies beneficiaries are protected from harm.
- provide a clear framework for action whenever abuse is disclosed or suspected.
- ensure staff and volunteers undertaking regulated or controlled activities with children are vetted appropriately and that the Society complies with the Protection of Vulnerable Groups (PVG) scheme.
- ensure all MS Society staff and volunteers are clear about their responsibilities
- contribute to the successful achievement of the Society's aims and excellent standards of service for people affected by MS.

1.3 This policy and procedure applies to all MS Society trustees, staff and volunteers in **Scotland** not just those working directly with service users. This policy which has been approved and endorsed by the board of trustees, is for staff, trustees and volunteers in Scotland. For England, Wales and Northern Ireland please see our "Safeguarding children policy and procedure (England, Wales and Northern Ireland)".

1.4 Some of the ways the Society may encounter children is through our work as employees, volunteers, clients and supporters. Some examples of the range of activities covered are:

- Involving children in fundraising events
- Educating children through the MS Society website and literature
- Children working in MS Society shops and offices
- Interacting with children online or via the telephone
- Having contact with emotional or distressed clients

2 Definitions

2.1 Child

In Scotland the majority of the legislation defines a child, for child protection purposes, as a person under the age of 18. Due to there being some variations, for simplicity and the purposes of this policy the Society:

- defines a child in Scotland as a person who has not yet reached their 18th birthday

- uses the terms 'child' or 'children' to describe all children under the age of 18.

2.2 Child abuse and neglect

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child. Children may be abused in a family or in an institutional setting, by those known to them or, more rarely, by a stranger.

2.3 Child abuse may be deliberate or a result of negligence, indifference or a failure to protect. Abuse can take a number of forms such as:

- physical
- sexual
- emotional
- neglect.

Abuse can also take place in a virtual environment, such as an online discussion board or chat room. For more detail and guidance on recognising abuse see Appendix 1.

2.3 Regulated work

Regulated work is defined by the following basic principles:

- it has to be work (i.e. not personal relationships).
- it has to be with either children or protected adults.
- it has to be part of the member of staff's or volunteer's normal duties.
- the activities or service is offered specifically to children (i.e. not to the general public who might include a protected person).
- the employee or volunteer has the possibility for unsupervised contact with a child.
- the employee or volunteer is responsible for the welfare and wellbeing of children, or where there is a level of trust between the employee or volunteer and the child.

2.4 It is intended to exclude positions where there is no possibility for contact or trust, or where contact is only fleeting.

2.5 Regulated work with children may involve any of the following activities:

- caring for children.
- teaching, instructing, training or supervising children.
- being in sole charge of children.
- unsupervised contact with children in the absence of their responsible person.
- providing assistance, advice or guidance to children or particular children which relates to physical or emotional wellbeing, education or training.
- moderating certain interactive communication services.
- provision of care homes services.
- provision of independent health care services.
- work on day care services.
- day-to-day supervision or management of employees or volunteers doing regulated work.

3 Policy principles

The following principles underpin this policy and accompanying procedure:

- The welfare of the child is paramount.
- All children, whatever their age, culture, disability, gender, language, racial origin, religious beliefs and/or sexual identity have the right to protection from abuse or harm.
- Working in partnership with children and their parents/guardians/carers is essential for their protect.
- All trustees, staff and volunteers will be aware of the policy and procedures for protecting children.
- All suspicions and allegations of abuse will be taken seriously and will be recorded and responded to swiftly and appropriately.
- Within the Society, information will be shared on a need to know basis only.
- Staff and volunteers undertaking regulated work will be subject to PVG checks in accordance with the vetting and barring scheme.
- Staff and volunteers working closely with children will have the appropriate training to ensure they are able to recognise and act on the suspicion or disclosure of abuse/harm.
- Where other procedures apply to a disclosure of abuse/harm (e.g. grievance, complaints, disciplinary) the welfare and safety of the child remains paramount.

4. Responsibilities

- 4.1 All staff and volunteers have a duty to report any concerns about actual or suspected abuse to the Safeguarding Responders Group (SRG). Staff and volunteers are assured by the Society's board of trustees and executive group that there will be no retribution for reports or allegations of abuse made in good faith.
- 4.2 The Executive Director of Services and Support has overall responsibility UK wide to:
- ensure the regular review and effective working of this policy
 - report annually to the Audit, Risk and Finance Committee on the number and nature of safeguarding incidents, making recommendations for improvements in policy and practice.

The Executive Director of Services and Support will be assisted in this duty by the Safeguarding Oversight Group and Safeguarding Lead. See Appendix 2 for details of the Safeguarding Oversight Group.

- 4.3 The Safeguarding Oversight Group will have responsibility for:
- reviewing, on a regular basis, volume and pattern of reported safeguarding concerns
 - agreeing the Society's policies, approach, procedures and risk management relating to safeguarding.
- 4.4 The MS Society's Safeguarding Responders Group (SRG) is made up of a number of designated managers and staff. Safeguarding responders make all decisions about safeguarding issues, including questions of mental capacity and consent, making referrals and liaising with local authority children's social care teams. Details of the Safeguarding Responders Group can be obtained from the Society's Safeguarding Lead

- 4.5 Safeguarding Responders Group members have a responsibility to:
- respond to internal safeguarding reports in a timely manner
 - consider all the issues carefully
 - consult with colleagues on the Safeguarding Responders Group
 - ensure all records are kept as agreed and the monitoring log is completed
 - where appropriate, make a referral to the relevant authorities.

4.7 Confidentiality

Normally the Society offers callers and users of services confidentiality. In the case of allegations, disclosure or suspicions of child abuse, confidentiality is not guaranteed to service users who disclose their personal details, as the Society wants to safeguard children in the public interest.

4.8 Advice and procedural support

The Safeguarding Lead is available to provide support and procedural guidance throughout this process. However, any safeguarding allegations in respect of a staff member or volunteer should be referred to the HR team for which the decision of the Head of HR will be final.

4.9 Timescales

All timescales in this policy and procedure refer to calendar days. All timescales will be met as far as is reasonably practicable. Timescales may only be varied where this has been agreed in advance by the Executive Director of Services and Support.

Safeguarding children procedure

1. Recruitment

- 1.1 Staff, volunteers and candidates who will be involved in regulated activity with children will be subject to appropriate PVG checks, as will their line managers to ensure they are not barred under the PVG vetting and barring scheme
- 1.2 At least one member of staff selection interview panels needs to have successfully completed the Safer Recruitment Training before the start of the recruitment process.
- 1.3 Staff appointments are all subject to two references, as set out in the MS Society Recruitment and Selection Policy.
- 1.4 Staff and volunteers engaged in regulated work at the MS Society include, but may not be restricted to:
 - web staff involved in the moderation of discussion boards
 - Helpline roles
 - volunteers in branches who work closely with children.
- 1.5 Any new roles which are developed will be risk assessed, by the authorised person from the Volunteering Team (for volunteer and individual service provider roles) and authorised person from the HR team (for staff roles), to check whether they are involved in regulated work and/or require a PVG check.
- 1.6 Induction for all staff will include an awareness of the Society's policies to protect children and the Code of Conduct, with particular reference to their responsibilities.
- 1.7 Staff and volunteers engaged in regulated work will have appropriate training.

2. Boundaries

- 2.1 Working with children needs to occur in a positive, respectful and safe environment where children aren't put at risk and adults are protected from accusations of abuse. All staff and volunteers are expected to be committed and reliable in their role(s) in line with the Societies Code of Conduct and not use their position to pursue inappropriate personal relationships with beneficiaries of the Society's services.

3. Overview of the reporting procedure

- 3.1 Although rare, no suspicion of abuse or harm should be ignored. Staff or volunteers may become aware of possible abuse when they:
 - witness an abusive act or potentially dangerous incident
 - recognise potential abuse, see Appendix 1
 - are told about abuse by the child
 - are told about abuse by a visitor, carer, relative or friend
 - observe online abuse on forums and discussion boards
 - receive a complaint.
- 3.2 Children may disclose abuse or harm to any member of staff or volunteer. This may be face-to-face, by phone or online.
- 3.3 If there is imminent risk of harm to a child or the emergency services should be

called immediately.

- 3.4 All MS Society staff and volunteers have a duty to report any disclosure, reports or suspicions of abuse or harm without delay by completing a 'Record of Safeguarding Concerns and Actions' form and emailing it to safeguarding@mssociety.org.uk. If a member of staff is affected by what they have heard or seen they should contact the Employee Wellbeing Programme on 0800 0727072. Any volunteer affected by what they have seen or heard should call the Society's helpline on 0808 8008000. Remember the role of all staff members and volunteers is to recognise, reassure, record and report internally.
- 3.5 The lead safeguarding responder will be responsible for making any referral to the relevant local authority children's social care team. Enquiries or investigations are undertaken only by the local authority children's social care team; the Police will investigate if there is deemed to be criminal activity. No MS Society staff or volunteer should undertake any kind of investigation.

4 Responding to disclosure or suspicion

- 4.1 Where a child discloses abuse or harm the staff member or volunteer should:
- **Recognise**: identify that the child may be describing abuse, even when they may not be explicit.
 - **Reassure**: stay calm, listen and show empathy. Reassure them that it will be taken seriously and explain that there is a duty to report the issues internally and what may happen next.
 - **Record**: write up notes of the conversation clearly and factually as soon as possible using the 'Record of Safeguarding Concerns and Actions' form. Try to capture as much of the conversation verbatim as possible. It is important not to ask leading questions to shape any responses but keep to the facts only.
 - **Report**: email the 'Record of Safeguarding Concerns and Actions' form to safeguarding@mssociety.org.uk.
- 4.2 Confidentiality must be maintained. Details giving rise to concerns or suspicions of abuse will only be shared with the limited number of individuals who need them in order to make decisions about next steps and referrals. Beyond this, all details will remain confidential.
- 4.3 No staff or volunteer should start any investigation or confront or contact the alleged perpetrator.
- 4.4 **Deciding to refer**
On receiving an internal report, the lead safeguarding responder will confer with colleagues on the Safeguarding Responders Group (and possibly seek informal advice from the appropriate local authority children's social care team).
- 4.5 The Safeguarding Responders Group will confirm whether this is a safeguarding issue and requires referral to the local authority children's social care team or if a crime and therefore requires the Police.
- 4.6 **Making a referral**
All referrals will be made by the lead safeguarding responder within two working days of receiving the disclosure. There may be exceptional circumstances that extend this time.

- 4.7 The referral should be made by phone and the lead safeguarding responder should ensure it has been received by someone able to act on the information (e.g., a social worker).
- 4.8 If the local authority will not accept a safeguarding referral by telephone, then it should be made in the manner requested, be as comprehensive as possible and a copy retained in the individual file relating to the concern. The local authority and/or the Police will carry out the enquiries or investigation. Under no circumstances should a volunteer or staff member attempt to investigate any suspicions or disclosures of abuse.

4.9 Out of hours

The Safeguarding Responders operate Monday to Friday 9am – 5pm (excluding bank holidays). Unlike adults, children do not have the right to choose to stay in an abusive situation. If, at any time, you believe that a child is being harmed or is likely to be and the situation is too serious to wait until the next working day you should refer immediately to the local authority children's social care team (details can be found on the local authority's website) or the Police, by calling 999 if there is an immediate danger.

4.10 Support for staff and volunteers

Staff should be reminded of the Employee Wellbeing Programme that offers counselling support. Volunteers can access the MS Society Helpline for similar support.

5. **Concerns about employees or volunteers**

- 5.1 All staff and volunteers have a duty to report any concerns they have about colleagues (volunteers or staff) and the Society's beneficiaries who may be involved in abuse or harm to the Safeguarding Responders Group via safeguarding@mssociety.org.uk
- 5.2 The lead safeguarding responder will report the concerns to the Safeguarding Lead who will consult with the Head of HR or in their absence a senior member of the HR department who will decide what action to take. This may include: the suspension of the member of staff or volunteer
- a referral of the allegations to the local authority social services department Designated Officer or Social Care Direct department,
 - a referral to the Police for investigation.

5.3

5.4 Referral to Disclosure Scotland

Following investigations it is a legal requirement that a referral must be made to Disclosure Scotland when:

- the Society has withdrawn permission for an individual to work with children (or would have done so had that individual not resigned, retired, been made redundant or been transferred into another position)
- the Society believes the individual has engaged in activity that causes concern for the safeguarding of children (*relevant conduct*)
- there is harm or risk of harm to children (*the harm test*) or
- an individual has received a caution or a conviction for a relevant offence.

5.5 Staff and volunteers who are barred

Staff and volunteers under investigation or reported to DBS will cease undertaking regulated activities. If possible, they should be moved to other duties, if this is not possible, they will be suspended from work pending the outcome of the investigation. Please see the MS Society Disclosure Policy for more details

- 5.6 When a member of staff or a volunteer is barred by Disclosure Scotland they may no longer be involved in any regulated work. It is an offence for the Society to allow them to continue working in such a role. In such a situation the Society may consider redeployment to an alternative role. If this is not possible staff may be dismissed and volunteers de-selected.

6. Monitoring and reporting

- 6.1 Safeguarding Responder Group members will ensure that all records are kept electronically and stored safely in the safeguarding casework drive.
- 6.2 Monitoring information which is anonymous will be kept indefinitely. Individual records which include sensitive personal data will be kept securely indefinitely.
- 6.3 The Safeguarding Oversight Group will carry out regular reviews of safeguarding incident reports; looking at the number of reports, their source and the outcomes from each with regular reports made to the Audit, Risk and Finance Committee.
- 6.4 The Society will report any serious incident(s) as per the Charity Commission definition promptly to the Charity Commission and as a matter of courtesy the Director of Scotland will also inform the Office of the Scottish Charity Regulator.
- 6.5 This policy will be reviewed annually and after any safeguarding incident of actual or suspected abuse perpetrated between our staff, volunteers and beneficiaries.

Other relevant policies:

- Disclosure Policy and Procedures
- Resolving Volunteer Issues and Concerns Policy
- Recruitment and Selection Policy
- Dignity at Work Policy
- Whistleblowing Policy
- Safeguarding Adults Policy and Procedure

Relevant legislation and Guidance:

- Adoption and Children (Scotland) Act 2007
- Children (Scotland) Act 1995
- Children (Scotland) Act 2014
- Children's Hearings (Scotland) Act 2011
- Protection of Vulnerable Groups (Scotland) Act 2007
- UN Convention on the Rights of Persons with Disabilities (ratified by UK Govt 2009)
- Getting it right for every child (Scottish Government 2018)
- National Guidance for Child Protection in Scotland 2021.
- The Scottish Charity Regulator (OSCR) Safeguarding Guidance: Keeping vulnerable beneficiaries safe (2018)
- <https://www.oscr.org.uk/guidance-and-forms/safeguarding-guidance-keeping->

[vulnerable-beneficiaries-safe/introduction/](#)

Appendix 1: Recognising Abuse

What is child abuse and child neglect?

Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by inflicting, or by failing to act to prevent, significant harm to the child. Children may be abused in a family or in an institutional setting, by those known to them or, more rarely, by a stranger. The definitions below are taken from National Guidance for Child Protection in Scotland 2021.

Physical abuse

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

Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child they are looking after.

Emotional abuse

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

Sexual abuse

Sexual abuse is any act that involves the child in any activity for the sexual gratification of another person, whether or not it is claimed that the child either consented or assented.

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of indecent images or in watching sexual activities, using sexual language towards a child or encouraging children to behave in sexually inappropriate ways.

Neglect

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

Appendix 2

Safeguarding Oversight Group

Executive Director of Services and Support
Country Director of Northern Ireland
Country Director of Scotland
Country Director of Wales
Head of HR
Heads of Helpline
Volunteering and Community Networks
Policy and Performance Manager
Safeguarding Lead