

COWES TOWN COUNCIL

CHILD, YOUNG PERSON AND VULNERABLE ADULT PROTECTION POLICY

COWES TOWN COUNCIL is concerned to safeguard the wholeness and the well —being of every person in our community, of whatever age. It is the responsibility of each member/officer to prevent the physical, sexual or emotional abuse or every member of our community, and particularly the abuse of those most vulnerable among us, including children, young people and vulnerable adults.

It is the duty of all those who work with children, young people and vulnerable adults to prevent harm and abuse of every kind, and to report any abuse discovered or suspected.

It is the policy of COWES TOWN COUNCIL that no-one shall work or volunteer to work with children, young people and vulnerable adults within or on behalf of COWES TOWN COUNCIL who:

- Has been convicted of or has received a formal police caution concerning an offence against children as listed in the First Schedule of the Children and Young Person's Act 1933; or
- Has been convicted of or has received a formal police caution concerning sexual offences against children, young people and vulnerable adults.

This means that:

- All who work or volunteer to work with children, young people and vulnerable adults under the
 auspices of COWES TOWN COUNCIL could be required to be checked through the Disclosure and
 Barring Services (DBS), and are expected at all times to conform with good practice in their work
- Those responsible for the appointment of such workers and volunteers must take all reasonable steps, including obtaining a DBS to ensure that persons who have been convicted or have received a formal police caution concerning sexual offenses against children, young people and vulnerable adults shall not undertake work with young people under the auspices of COWES TOWN COUNCIL; and

Furthermore, COWES TOWN COUNCIL will:

- Plan the work of the organisation so as to minimise situations where the abuse of children, young people or vulnerable adults may occur.
- Treat all would-be paid staff and volunteers as job applicants for any position involving contact with children.
- When considering any officer application, obtain at least one reference from a person who has experience of the applicant's paid work or volunteering with children.
- Explore all officer applicants' experience of working or contact with children in an interview before appointment.
- Issue guidelines on how to deal with the disclosure or discovery of abuse.

ROUTINE PRECAUTIONARY PROCEDURE IF YOU HAVE ANY CONCERNS

| WHAT YOU SHOULD DO: | Record what you saw and heard. | | | |
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| If you have any concern that a child might be | Report the incident to the Town Clerk, or | | | |
| being subject to abuse or poor practice by a | the Deputy Town Clerk, in the absence of | | | |
| member of the Council staff, a Councillor, a sub- | the Town Clerk. | | | |
| contractor a volunteer or accompanying parent. | Due to the sensitive nature and confidential nature of the incident you should not discuss the matter with other members of staff or the public. | | | |
| WHAT COWES TOWN COUNCIL WILL DO: | Take a report from whoever reported the | | | |
| | matter and complete the Child Protection | | | |
| | Report Form. | | | |
| If it appears to be a case of poor practice. | Interview the reported person immediately and | | | |
| | record the details on the Child Protection Report | | | |
| | Form. Identify areas for improvement and monitor | | | |
| | the situation. | | | |
| If it appears to be a case of abuse. | Do not interview the reported person immediately. | | | |
| | The Council will contact IW Council's Social | | | |
| | Services on 01983 823435 or 999 if there are | | | |
| | immediate concerns. Cowes Town Council will | | | |
| | suspend the employee / Councillor pending | | | |
| | inquiry. The Council will co-operate with IW | | | |
| | Council's Social Services. The Town Clerk will be | | | |
| | kept informed of the investigation and outcomes | | | |
| | and will be responsible for complying with inquiry | | | |
| | findings. If the complaint relates to the Town Clerk, | | | |
| | the Town Mayor will be the point of contact for the | | | |
| | outcomes and complying with the inquiry findings. | | | |
| If not an employee of the Council or a Councillor, | The Council will report the matter to the company | | | |
| but a sub-contractor being used by the Council or | / organisation concerned, verbally and in writing. | | | |
| a volunteer. | The Council will contact IW Council's Social | | | |
| | Services on 01983 823435 or 999 if there are | | | |
| | immediate concerns. | | | |

Town Council Notification of Incident Form/Referral Form for Suspicions or Allegations of Abuse of a Child or Vulnerable Adult.

This form must be completed where there are concerns about an incident involving a child or vulnerable adult. This form must be completed as soon as possible, after the incident that causes concern, in conjunction with the Town Clerk.

Adopted 2010 - Amended September 2015 – Reviewed October 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024

Note: Confidentiality must be maintained at all times. Information must only be shared on a need to know basis i.e. only if it will protect the child / vulnerable adult. Do not discuss this incident with anyone other than those who need to know.

Continue on a separate sheet of paper if necessary and attach securely to this form.

Cowes Town Council Disclosure Report Child and Vulnerable Adult Protection Policy

| Name. | | | | | |
|---|--|--|--|--|--|
| Position: | | | | | |
| Contact telephone number: | | | | | |
| | | | | | |
| Details of Child/Vulnerable Adult | | | | | |
| Name: | | | | | |
| Date of Birth: | | | | | |
| Address: | | | | | |
| Contact telephone number: | | | | | |
| Name and address of parent/guardians/carers: | | | | | |
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| If you are reporting concerns of behalf of someone else, please provide details of that person. | | | | | |
| Name: | | | | | |
| Position: | | | | | |
| Address: | | | | | |
| Contact telephone number: | | | | | |
| Date this person advised you of their concerns/incident: | | | | | |
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| Details of the incident /concern: | | | | | |
| Date of incident /concern arose: | | | | | |
| Time: | | | | | |
| Place: | | | | | |
| Names and addresses of other people who may have information about the incident / concern: | | | | | |
| The state of the people and may have meaning about the molecule, contents | | | | | |
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Details of person making report:

| Describe in detail what happened: | | | | | |
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| Describe in detail any visible injuries/bruises and / or concerning behaviour of the child/vulnerable adult, | | | | | |
| if any (use diagrams if this helps you to describe): | | | | | |
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| Was the child/vulnerable adult asked about the incident: / concern: YES/NO | | | | | |
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| If yes, record exactly what the child / vulnerable adult said in their own words and any questions asked if | | | | | |
| the situation needed clarification: | | | | | |
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| Details of any action taken | | | | | |
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| Detail what action, if any, has been taken following receipt of this information: | | | | | |
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| Other Information | | | | | |
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| Record any other information you have about the matter (it is important that all information is passed | | | | | |
| on even that which you think is not important or helpful). | | | | | |
| on even that which you think is not important of helpfull. | | | | | |
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| Signatures: | | |
|--------------|--|--|
| Print Names: | | |
| | | |
| Date: | | |
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