Forms

I. Parish child protection policy statement

| 1. I arish child protection policy statement |
|--|
| Parish of |
| The following policy was agreed at the PCC meeting held on |
| As members of this PCC, we are committed to the safeguarding, care and nurture of all our members, particularly the children and young people. We recognise that our work with children and young people is the responsibility of the whole church community. We are committed to implementing the House of Bishops' Child Protection Policy 'Protecting All God's Children 2004', and the Diocesan procedures, which are based on the Children Act 1989, and Government guidance "Working together to Safeguard Children 2006". We will carefully select and train ordained and lay ministers; volunteers and paid workers with children and young people using the Criminal Records Bureau, amongst other tools, to check the background of each person. We will respond, without delay, to every complaint made that a child or young person, for whom we are responsible, may have been harmed. We will co-operate fully with statutory agencies during any investigation concerning a member of the church community. We will seek to offer informed pastoral care to any child or children, young person or adult who has suffered abuse. We will care for and supervise any member of our church community known to have offended against a child. We will review this policy annually and as part of this process will ensure that all our procedures, particularly in relation to the Criminal Record Bureau, are up to date. Our Parish Child Protection Co-ordinator is: |
| Name |
| Address |
| Telephone number Email Address |
| Signed : Parish Priest/Incumbent |
| Signed : Churchwarden |

Diocese of Chichester 2009

Adviser for Safeguarding Children and Adults.

2. Progress chart for the appointment of a worker or volunteer in youth or children's work

| Name: | | |
|---------------------------|---------------------|-----------------|
| Group: | | |
| Date of application : | | |
| Letter to referee I | Sent : | Reply received: |
| Letter to referee 2 | Sent: | Reply received: |
| Declaration form | Issued: | Returned: |
| | Details accepted | |
| Candidate interviewed | Date: | |
| Names of people on inter | viewing panel: | |
| | | |
| CRB disclosure/ISA Regist | tration applied for | Date: |
| Appointment advice recei | | Date: |
| "Keeping Children and Yo | • | |
| in Church" Pocket Guide | and any extra | _ |
| parish instructions given | | Date: |
| Job role provided and chi | ld protection | 5 |
| undertaking signed | | Date: |
| Probation period agreed | | Date: |
| Candidate accepted | | Date: |
| Probation period and revi | iew completed | Date: |
| Procedure completed | | Date: |
| Incumbent: | | |
| Signed: | | |
| Date: | | |

3. Introductory recruitment information for clergy, those who hold the Bishop's licence, paid employees and volunteers who will have contact with children

The Church takes its responsibilities for the care and protection of children very seriously. We believe that we should provide our children with the highest standard of care and that the experience of growing up within the church community should be enriching.

Your position, employment, or task within the church includes, or could include, the care and nurture of children. This is a responsible but very fulfilling job and you will be trained and supported to fulfil this responsibility as appropriate for your task.

To ensure that our children are looked after as well as possible and that you are not put in a vulnerable position, the Diocese has drawn up procedures and recommended good practice to be followed. You are asked to read the Diocesan Pocket Guide "Keeping Children and Young People Safe in Church" and abide by its contents, together with any special requirements from the parish or organisation to which you belong. You will be asked to sign that you agree to do your best to follow good practice.

In accordance with the House of Bishops' Policy on Child Protection, Protecting all God's Children 2004, and the Criminal Records Bureau Code of Practice, you are asked to sign a confidential declaration form stating whether you have been convicted of a criminal offence or certain other matters. If for any reason you are unsure about making the declaration, please discuss this with your parish priest or the person appointing you, who will decide what will be done, following advice from the Diocesan Safeguarding Adviser. It will be the case that people with convictions of sexual abuse against children will not be able to work with children or have contact with them in mixed age church activities where parents are not present. The completed form will be kept indefinitely, but securely, by the incumbent or appointer.

Two references will be taken up for everyone and a further check on this information made by asking you to apply for a Criminal Records Bureau disclosure. As part of the recruitment process you will be told what your responsibilities will be and your experience of working with children will be explored. The Church is keen to use everybody's talents. The following criteria are a guide:

- Previous experience of looking after or working with children or young people
- The ability to provide warm and consistent care
- A willingness to accept the differing background and culture of children
- A commitment to treat all children as individuals and with equal concern
- Reasonable physical health, mental stability, integrity and flexibility.

4. Parish information and application form for all paid and voluntary workers with children and young people

The post or task for which you are applying will require a disclosure from the Criminal Records Bureau at the standard/enhanced level before the position can be confirmed. The possession of a criminal conviction will not necessarily be a bar to taking up the post. All information received during the recruitment process will be carefully assessed for its relevance. The Diocese has policies on the recruitment of ex-offenders and on the secure storage of sensitive information. These policies may be obtained from your parish child protection representative.

| Name |
|---|
| Maiden or former name |
| Address |
| Any previous address in the last 5 years |
| |
| Previous church in the past 5 years |
| |
| Telephone (Home) (Work) |
| May we telephone you at work if necessary? |
| Group with which you hope to work |
| Age range |
| Describe any educational qualifications or training courses which are relevant to this position |
| |
| |

| position |
|---|
| |
| Describe any employment, volunteer positions or experience which are relevant to this position |
| |
| |
| Name and address of two referees who know you well, but who are not related to you, one of which can comment on your abilities and attitudes to children and young people |
| Referee I |
| Name |
| Address |
| |
| Referee 2 |
| Name |
| Address |
| |
| I agree to complete a confidential declaration form and apply for a disclosure from the Criminal Records Bureau at the standard/enhanced level. |
| |
| Signed Date |

5. Confidential self-declaration form (to also be completed for those wishing to work with children or vulnerable people)

The self-declaration form applies to beneficed clergy, those who hold the Bishop's licence or permission to officiate, employees, ordinands, and volunteers who are likely to be in regular contact with children or vulnerable people. This form is strictly confidential and, except under compulsion of law, will be seen only by those responsible for the appointment and, when appropriate, the Diocesan Safeguarding Adviser. All forms will be kept securely under the terms of the Data Protection Act 1998. If you answer yes to any question, please give details, on a separate sheet if necessary, giving the number of the question you are answering.

| I. | Have you ever been convicted of a criminal offence (including any spent conviction under the Rehabilitation of Offenders Act 1974)? YES □ NO □ |
|----|---|
| | Note: Declare all convictions, cautions, warnings or reprimands, however old, or whether you are of present under investigation by the Police. Motoring offences that cannot be dealt with by a prison sentence need not be declared. Posts where the person is working or coming into regular contact with children or vulnerable adults are exempt from the "Rehabilitation Act 1974". Convictions obtained abroad must be declared as well as those from the UK. |
| 2. | Have you ever been cautioned by the Police, given a reprimand or warning, or boun over to keep the peace? |
| | YES NO |
| 3. | Are you at present under investigation by the Police or an employer for any offence? YES □ NO □ |
| 4. | Has your name been placed on the Protection of Children Act (POCA), List 99, or the Protection of Vulnerable Adults List (POVA), barring you from work with children of vulnerable people? |
| | YES \(\Boxed{\omega} \mathbb{NO} \(\Boxed{\omega} \) |
| 5. | Have you ever been found by a court exercising civil jurisdiction (including matrimonia or family jurisdiction) to have caused significant harm* to a child or young person under the age of 18 years, or has any such court made an order against you on the basis of an finding or allegation that any child or young person was at risk of significant harm from you? |
| | YES NO |
| | Note: Declare any finding of fact by a civil court that your actions have significantly harmed a child of |

vulnerable adult. Declare any court orders made on this basis.

| 6. | Has your conduct ever caused or been likely to cause significant harm to a child or vulnerable adult, or put a child or vulnerable adult at risk of significant harm? YES \square NO \square |
|----|---|
| | Note: Make any statement you wish regarding any incident you wish to declare. |
| 7. | To your knowledge, has it ever been alleged that your conduct has resulted in any of those things? YES \square NO \square |
| | If YES, please give detail including the date(s) and nature of the conduct, or alleged conduct, and whether you were dismissed, disciplined, moved to other work, or resigned from any paid or voluntary work as a result. |
| | Note: Declare any complaints or allegations made against you, however long ago, that you have significantly harmed a child, young person or vulnerable adult. Any allegation or complaint investigated by the Police, Children's Services, an employer or voluntary body must be declared. Checks will be made with the relevant authorities. |
| 8. | Has a child in your care or for whom you have or had parental responsibility ever been removed from your care, been placed on the Child Protection Register, or been the subject of a care order, a supervision order, a child assessment order or an emergency protection order under the Children Act 1989, or a similar order under other legislation? |
| | YES \(\Boxed{\omega} \text{NO} \(\Boxed{\omega} \) |
| | Note: All these matters will be checked with the relevant authorities. |
| 9. | Have you any health problem(s), which might affect your work with children or vulnerable adults? YES \square NO \square |
| | Note: Declare in confidence any health issues that may affect your ability to work with children or adults. This question is primarily intended to help you if you subsequently need to withdraw from work e.g. because of a recurring health issue. |
| | Significant harm involves serious ill treatment of any kind including neglect, nysical, emotional, or sexual abuse, or impairment of physical or mental health |

development. It will also include matters such as a sexual relationship with a

young person or adult for whom you had pastoral responsibility.

Declaration

| l | declare | that | the | above | inform | ation | (and | that | on | the | attached | sheets**) | is | accurate | and |
|---|---------|-------|------|---------|---------|--------|------|------|----|-----|----------|-----------|----|----------|-----|
| c | omplete | to th | e be | st of m | ny knov | vledge | | | | | | | | | |

| Signed |
|-----------------------------------|
| Full name |
| Date of birth |
| Address |
| |
| Date |
| |
| **Please delete if not applicable |
| Please return completed form to |
| |

Before an appointment can be confirmed, applicants may be required to provide an enhanced/standard disclosure from the Criminal Records Bureau (see incumbent or parish co-ordinator for details).

All information declared on this form will be carefully assessed to decide whether it is relevant to the post applied for and will only be used for the purpose of safeguarding children, young people or vulnerable adults.

6. Pro forma letter for referees

| | Diocese |
|---|---|
| | Parish |
| | Address |
| ••••••••••••••••••••••••••••••••••••••• | |
| •••••• | |
| | Date |
| Dear | |
| (Name) has volunteered to help with response to our Child Protection Policy has provouch for his/her suitability to work with child complete the questionnaire provided and return information given will be treated in confidence and or to the applicant with your foreknowledge. | ovided your name as a referee who can ren. I should be grateful if you would noit to me at the above address. Any |
| (Name) will be working mainly with (ag of task). | ge group) as (give brief description |
| In completing the questionnaire please bear in me protect the children for whom it is responsible from or sexual nature. Each volunteer signs a declaration Diocesan Child Protection Policy. | om harm, whether of a physical, emotional, |
| Thank you for your help. Yours sincerely | |

7. Reference questionnaire

Private and confidential (please state if there is anything you write that you do not wish the applicant to see)

| Name of volunt | eer | |
|-------------------|--------------------|---|
| Your relationshi | p to the volunteer | (please circle)? |
| Relative | Friend | Employer |
| Other (please sp | pecify) | |
| How long have y | you known the volu | unteer? |
| ls the volunteer | suitable to work w | rith children? |
| honesty, reliabil | • | xperience of the volunteer, please comment on his/h |
| | | |
| ••••• | | |
| Do you know o | | it would be unwise to ask the volunteer to work wi |
| | | |
| | | |
| Do you have an | y other comments 1 | to make about the volunteer? |
| ••••• | | |
| | | |
| Signed | | Date |

8. SAMPLE Job role for volunteers / workers with children and young people

This form should be completed for all workers with children and young people. If the role changes substantially a new form should be completed. Copies should be retained by the volunteer, the Secretary to the PCC and the person to whom the volunteer is responsible.

| Name of worker A N Other | Name of group |
|-----------------------------|--------------------------------|
| Where/when they meet | (Example) Junior Church |
| Church Hall and Lounge | Person to whom responsible |
| Age range (Example) 8 to 11 | (Example) Junior Church Leader |

Volunteer Work to be undertaken

(Example)

- To prepare appropriate activities for the group (using material provided)
- To lead the 8-11 group according to the Rota
- To attend Junior Church meetings (once a quarter)
- To help organise special events, e.g. Christmas Services.
- To work with others to ensure that junior church is conducted in accordance with the Diocesan Child Protection procedures and Health and Safety policy and procedures.
- To work with others to monitor good practice and implement changes when necessary to enhance quality and safety.

In order to sign the declaration below you are expected:

- To attend the next Safeguarding Training
- To attend any further training as directed by the PCC
- To attend any other relevant training

| Group to whom responsible (PCC) |
|---------------------------------|
| |
| Signed (on behalf of the PCC) |

To be completed by the worker with children/young people

I have understood the nature of the volunteer work I am to do with children and young people. I have read the guidelines produced by the church for safeguarding children and young people. I understand that it is my duty to protect the children and young people with whom I come into contact.

| Signed | Date |
|--------|------|
| - 6 - | |

| rvame of organisation | | |
|--|------------------|----------------------------------|
| Name of visitor | Self declaration | CRB disclosure |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| I declare that to the best o with children and young pe | | reason why the above may not wor |
| Signed | | |
| Date | | |
| Position | | |

10. Annual appraisal for volunteers

| Name of Church | |
|--|-----|
| You have been invited to discuss your role as (state job role) over the past ye and consider realistic plans for the next year: | ar |
| On | ••• |
| At | ••• |

To help you gain the most from this opportunity, you are asked to consider the following points in conjunction with your role description prior to the meeting (two hours maximum).

I. lob Role

- Are you clear what are your key duties and responsibilities?
- Do you feel your job description needs amendment?

2. Personal

- What is your role in the team/what is your relationship with the others in the team?
- Have you any skills or abilities which you feel are not being used to advantage within your sphere of work?
- What do you feel your strengths are?
- Where and from whom do you receive effective support? Do you need additional support?

3. Review of the past 12 months

- Evaluation of your work
- What obstacles have you encountered, if any? Have you any suggestions as to how these might be overcome?
- Which aspects of your work have you most enjoyed or which have given you the greatest satisfaction?
- Which tasks do you feel you have done least well or have given least satisfaction?

4. Training

- Is there any area of your work in which you think that extra training or experience would improve your present performance?
- When did you last receive child protection training?

5. Action plan for the next 12 months

• What plans would you like to achieve in your work during the coming year?

| Annual appraisal notes | | |
|--|---------|---------|
| Name of volunteer | | |
| Name of church group | | |
| Date | | |
| Main Points of Discussion | | |
| Action plan for next 12 months | By whom | By when |
| Signed | | |
| Copy to be given to volunteer, original to be retained by Supervisor | | |

Name of church.....

II. Registration Form

To be completed annually for all children and young people attending church groups

| Child's Details |
|--|
| Full name |
| |
| Address |
| |
| |
| TelephoneEmail |
| Date of birth |
| |
| School |
| Calcard and a second |
| School year group |
| Church group |
| |
| This group meets between and |
| On |
| |
| For the following activities |
| Whilst your child is in our care, it would be helpful for us to know whether he/she suffers |
| from any allergies or phobias or is on any medication. Is there anything else you would like |
| us to know so that we can care for your child as well as possible? Any special needs? |
| |
| |
| |
| |
| Family doctor's name |
| Address |
| |
| |

Date.....

12. Parental consent form

To be filled in for any activity not specified in the registration form Name of child..... Address of child..... Name of group..... Activity/event (give details here or on a separate sheet)..... Departure date..... Departure time..... Return date..... Return time..... Name of leader..... Name and contact details in the parish during the event..... I give consent to my child taking part in this event as detailed above (or on a separate information sheet). I agree to any emergency medical treatment to be given as considered necessary by the medical authorities if I cannot be contacted (NB: The medical profession takes the view that a parent's consent to medical treatment cannot be delegated. Medical consent forms have no legal status and a doctor has the right to insist on parental consent before treating a child. We have found however, that medical staff find this type of general consent helpful). Parent's name and contact details during the event.....

| If not available please contact |
|--|
| Details of any medical condition, allergies, phobias or disabilities which your child may have |
| |
| |
| Details of any medication (please ensure an adequate supply is brought to the event). |
| |
| |
| Date of last tetanus injection |
| Details of any dietary requirements |
| |
| Doctor's name |
| Address |
| |
| Telephone number |
| Any other information you think the organisers should know? |
| |
| Details of any dietary requirements |

13. Suggested agreements for use with outside groups

a) For those groups with no Child Protection Policy of their own

| The PCC of | has a child protection policy and |
|---|---|
| | ed. Your booking agreement is conditional upon youn this document. Any concerns or allegations, which |
| | our activities, should be communicated to our Child |
| Protection Co-ordinator. | |
| Name | |
| Telephone number | |
| practice ofParish Child Protection Co-ordinate | y the child protection policy, procedures, and good |
| Signed | |
| Designation | |
| Organisation | |
| Date | |
| Please sign two copies of the documer organisation. | nt, one to be retained by the church and one by the |

Suggested agreements for use with outside groups b) For organisations with their own child protection policy

| We | . (organisation) follow our own child |
|--|--|
| protection procedures based on the government Children 2006". | guidance "Working Together to Safeguard |
| We understand that this booking agreement procedures and that the agreement can be terminated | |
| We will show evidence of our compliance to t | |
| We will inform the Child Protection Co-ordinate arising about children in the course of our activities | , |
| Name | |
| Telephone number | |
| Signed | |
| Designation | |
| Organisation | ······································ |
| Date | |
| Please sign two copies of the document, one to | be retained by the church and one by the |

organisation.

14. Checklist for referrals

| | Action | Notes |
|--|--------|-------|
| Information gathered and | | |
| checked for accuracy | | |
| | | |
| Incumbent and CP co-ordinator | | |
| agreed on action | | |
| agreed on action | | |
| | | |
| Diocesan Adviser consulted | | |
| | | |
| | | |
| Referral made by either parish or | | |
| DSA | | |
| | | |
| | | |
| People in the parish who are | | |
| aware of the referral | | |
| | | |
| Suspension from duties | | |
| considered | | |
| | | |
| M. P. S. | | |
| Media interest prepared for | | |
| | | |
| | | |
| Support for all concerned in place | | |
| | | |
| If we formal a country land | | |
| If referral accepted – insurers notified | | |
| nouned | | |
| | | |
| 1 | | |

15. Session recording sheet

| Session Recording Sheet for (insert details of activity): |
|---|
| |
| |
| Held on (date): |
| Tield off (date). |
| Children/young people in attendance (list names): |
| |
| |
| |
| Adults in attendance (list names): |
| |
| |
| |
| Focus of activity: |
| |
| |
| |
| |
| Incidents of significance (if any including concerns): |
| |
| |
| |
| Action taken: |
| |
| |
| |
| |
| Signed Date |

16. Incident report form

| Details of event and event leader | |
|--|----------|
| Contact details | |
| Name of child/young person involved | |
| Date of birth of child/young person involved | |
| Date and time of incident | |
| Place of incident | |
| Circumstances of incident | |
| | |
| Names of those present | |
| | |
| Nature of harm and treatment given | |
| | |
| Reported to whom | |
| | |
| Other action taken | |
| | |
| | |
| Signed | Date |
| Print name | Position |

17. Anti-bullying policy for children and young people involved in church activities

Statement of intent

What Is Bullying?

Bullying is the use of aggression with the intention of hurting another person. Bullying results in pain and distress to the victim.

Bullying can be:

| • | Emotional | Being unfriendly, excluding, tormenting (e.g. hi | ding |
|---|-----------|--|------|
|---|-----------|--|------|

books, threatening gestures)

Physical Pushing, kicking, hitting, punching or any use of

violence

Racist
 Racial taunts, graffiti, gestures

Sexual Unwanted physical contact or sexually abusive

comments

Homophobic Because of, or focussing on the issue of sexuality
 Verbal Name-calling, sarcasm, spreading rumours, teasing
 Cyber All areas of internet, such as email & internet chat

room misuse. Mobile threats by text messaging and calls.

Misuse of associated technology, i.e. camera and video facilities.

Why is it important to respond to bullying?

Bullying hurts. No one deserves to be a victim of bullying. Everybody has the right to be treated with respect. Children and young people who are bullying need to learn different ways of behaving.

We have a responsibility to respond promptly and effectively to issues of bullying.

Objectives of this policy

- Bullying will not be tolerated
- All adults involved in working with children, as well as children and young people, should have an understanding of what bullying is

- All adults involved in working with children must know what the policy is on bullying, and follow it when bullying is reported
- All children/young people and parents should know what the policy is on bullying, and what they should do if bullying arises

We take bullying seriously. Children, young people and parents should be assured that they will be supported when bullying is reported.

Signs and symptoms

A child may indicate by signs or behaviour that he or she is being bullied. Adults should be aware of these possible signs and that they should investigate if a child:

- Is frightened of walking to or from school
- Doesn't want to go on the school/public bus
- Begs to be driven to school
- Changes their usual routine
- Is unwilling to go to school (school phobic)
- Begins to truant
- Becomes withdrawn, anxious, or lacking in confidence
- Starts stammering
- Attempts or threatens suicide or runs away
- Cries themselves to sleep at night or has nightmares
- Feels ill in the morning
- Begins to do poorly in school work
- Comes home with clothes torn or books damaged
- Has possessions which are damaged or "go missing"
- Asks for money or starts stealing money (to pay bully)
- Has dinner or other monies continually "lost"
- Has unexplained cuts or bruises
- Comes home starving (money / lunch has been stolen)
- Becomes aggressive, disruptive or unreasonable
- Is bullying other children or siblings
- Stops eating
- Is frightened to say what's wrong
- Gives improbable excuses for any of the above
- Is afraid to use the internet or mobile phone
- Is nervous and jumpy when a cyber message is received.

These signs and behaviours could indicate other problems, but bullying should be considered a possibility and should be investigated.

Prevention

Strategies can be adopted to prevent bullying. As and when appropriate, these may include:

- Writing a set of group rules
- Signing a behaviour contract
- Writing stories or poems or drawing pictures about bullying
- Reading stories about bullying or having them read to the group
- Making up role plays
- Having discussions about bullying and why it matters

Procedures

- I. Report bullying incident to staff
- 2. In cases of serious or persistent bullying, the incidents will be recorded by staff
- 3. In serious or persistent cases parents will be informed and asked to come in to a meeting to discuss the problem
- 4. If it is thought that an offence has been committed, contact the Police
- 5. The bullying behaviour or threats of bullying must be investigated and all bullying stopped quickly
- 6. An attempt will be made to help the bullies change their behaviour.

Outcomes

- In serious cases, suspension or even exclusion from the group/activity will be considered
- If possible, the children/young people will be reconciled
- After the incident/incidents have been investigated and dealt with, each case will be monitored to ensure repeated bullying does not take place
- After the incident/incidents have been investigated parents/carers should be informed of the action taken.

Help Organisations

Kidscape

(Parent Helpline, Monday-Friday 10.00 am -4.00 pm) 020 7730 3300

Parentline Plus 080 88 00 22 22

Youth Access 020 8772 99 00

For a copy of Kidscape's free booklets "Stop Bullying", "Preventing Bullying" and "You Can Beat Bullying", send a large (A4) self-addressed envelope with two 1st class stamps to: Kidscape, 2 Grosvenor Gardens, London SW1W 0DH

Grateful thanks to Kidscape

18. Identifying hazards in youth and children's work (Risk Assessment)

Risk assessments should be completed well before the event/activity and should be approved by the event leader or, if completed by the event leader, by a suitably qualified individual.

A risk assessment for an event/activity need not be complex but it should be comprehensive.

A formal assessment of the risks that might be met during an event/activity should have the aim of identifying the potential hazards and then reducing them. Children and young people must not be placed in situations which expose them to an unacceptable level of risk. Safety must always be the prime consideration. If the risks cannot be managed safely then the event/activity must not take place.

The risk assessment should be based on the following considerations:

- I. What are the hazards?
- 2. Who might be affected by them?
- 3. What safety measures need to be in place to reduce risks to an acceptable level?
- 4. Can the event leader put the safety measures in place?
- 5. What steps will be taken in an emergency?

A **HAZARD** is <u>anything</u> or <u>anyone</u> that <u>could cause harm</u> e.g. high stacks of chairs, uneven floors, unsafe electrical equipment, blocked fire exits, lack of fire escape signs, missing light bulbs, overfilled cupboards, high shelves, loose carpets, toxic paints, chemicals etc. horseplay, unknown workers (paid or volunteers), working in unsupervised situations, lifts in cars, challenging behaviour, smoking and drinking etc.

A **RISK** is the chance, great or small, that someone will be harmed by the hazard.

The following factors should be taken into consideration when assessing the risks:

- The type of event/activity and the level at which it is being undertaken
- The location, routes and modes of transport
- The competence, experience and qualifications of adult helpers
- The ratio and gender of adults to children
- The group members' ages, competence, fitness and temperament and the suitability of the activity
- The specific or medical needs of children/young people
- Seasonal conditions, weather and timing emergency procedures
- How to cope when a child/young person becomes unable or unwilling to continue
- The need to monitor the risks throughout the event/activity
- The person carrying out the risk assessment should record and give copies to all leaders
 prior to the event/activity, with details of the measures they should take to avoid or
 reduce the risks.

The PCC should also be given a copy so that approval, as necessary, can be given with a clear understanding that effective planning has taken place.

Frequent visits to local venues, such as a swimming centre, may not need a risk assessment every time. Nevertheless, it is essential not to become complacent. A generic assessment of the risks of such visits should be made at regular intervals and careful monitoring should take place.

The event leader and other leaders should monitor the risks throughout the event and take appropriate action as necessary.

Before booking a day/residential trip, the event leader should obtain a written or documentary assurance that providers, such as children's activity centres or tour operators, have assessed the risks and have appropriate safety measures in place, including:

- Safe recruitment procedures
- Adequate public liability insurance
- A license to operate (where required)
- Clearly defined roles and responsibilities for its staff
- Child protection policy

Risk assessment template

| Risk assessment completed by (print name) | | | | | |
|---|------|--|--|--|--|
| Review date | | | | | |
| Signed | Date | | | | |

| Activity | Potential hazards | List groups of people who are especially at risk from the significant hazards you have identified | List what controls are already in place to reduce or minimise the risks or note where information may be found | How will you cope with the hazards which are not currently or fully controlled | Continual monitoring of hazards throughout visit |
|------------|---|---|--|--|--|
| Youth Camp | Environmental e.g. weather, terrain Health e.g. food poisoning Human and behavioural e.g. drugs/alcohol Activity e.g. swimming Travel e.g. driving Accommodation e.g. safe sleeping arrangements/fire safety | Children Young people Event leaders/ helpers Parent helpers Impact of age/stamina/ability | Sufficient adult leaders/helpers to ensure an adequate level of supervision Clear guidance to young people exploratory visit or research – this will allow for unforeseen or unknown hazards to be identified | Removal of hazard Modifying the design of an activity Supervising an activity more closely Training Emergency procedures | Share plans with leaders prior to the event During the event, on-going assessment of risk and remedial action as required |

19. Consent to use of images Parish of..... We would like to take a photograph/make a video or webcam recording of you. These images may appear on the church notice board, in printed material or on our website. To comply with Data Protection Act 1998, we need your permission to do this and would ask that you sign and date the form where shown. We will not use the images for any other purpose. Please return the completed form to..... I hereby give consent to allowing an image of (name of child/young person/adult)..... To be displayed in (location)..... For the period of..... After which it will be (delete as appropriate): Destroyed Returned to me Kept in the church album I have read and agreed to the conditions of use on the back of this form Signed (parent's signature).....

Signed (child's signature).....

Date.....

Conditions of use

- I. This form is valid for (length of time in weeks, months, or years) from the date of signing. Your consent will automatically expire after this date.
- 2. We will not reuse any images after this time.
- 3. We will not include details or names of any person without good reason and only with your expressed permission.
- 4. We will not include personal email, postal addresses, telephone or fax numbers.
- 5. We may use group images with very general labels e.g. 'making Easter eggs'.
- 6. We will only use images of people who are suitably dressed to reduce the risk of such images being used inappropriately.

20. Implementation checklist

Checked & signed

| | | Checked & signed |
|--|--------------|------------------|
| Child Protection Co- | Provide name | |
| ordinator appointed | | |
| Copy of "Protecting all | | |
| God's Children" | | |
| DSA notified of any known | | |
| offenders against children | | |
| Agreements in place for all | | |
| known offenders | | |
| List of outside groups using | Append list | |
| premises | | |
| | | |
| | | |
| | | |
| | | |
| Child protection policies of | | |
| outside groups seen | | |
| List of all children's, young | Append list | |
| people's and mixed age | | |
| groups for whom the PCC is | | |
| responsible | | |
| | | |
| | | |
| | | |
| Ofsted notified of any under | | |
| 8's groups that need to be | | |
| registered | A 110 | |
| List all leaders, helpers, and | Append list | |
| adults in mixed age activities | | |
| who have regular contact | | |
| with children when the | | |
| parents are not present | | |
| List any others in positions | Append list | |
| List any others in positions of trust who may have | Abbeng list | |
| unsupervised contact with | | |
| children e.g. readers, | | |
| caretakers, drivers | | |
| Car Cancer 5, di ITCI 5 | | |
| | | |

| All the above have | | |
|----------------------------------|---------------------------------------|--|
| completed a confidential | | |
| declaration form | | |
| All the above have a CRB | | |
| disclosure appropriate for | | |
| the position held and are | | |
| registered with the | | |
| Independent Safeguarding | | |
| Authority | | |
| The parish has agreed | | |
| arrangements for appointing | | |
| new workers | | |
| Name of person trained to | | |
| validate CRB applications | | |
| Check that insurance cover | | |
| is adequate for both | | |
| activities and workers | | |
| Check that each activity has | | |
| sufficient adult help and that | | |
| if possible there is a gender | | |
| balance | | |
| All premises checked | | |
| regularly for health and | | |
| safety | | |
| All groups have an | | |
| attendance register and up | | |
| to date registration forms | | |
| Strategy agreed to publicise | | |
| the child protection policy to | | |
| the congregation | | |
| Training for clergy and Co- | Give dates of last training attended | |
| ordinator | Cive duces or last a aliming accorded | |
| | | |
| Training for volunteers | Give date of last training event | |
| | provided by the parish | |
| | provided by the parish | |
| List of local support facilities | | |
| available for survivors | | |
| aranabic 101 301 111 013 | | |
| Drink and drugs policy | | |
| agreed | | |
| agreed | | |

21. Contact List

Diocesan Safeguarding Adviser

Shirley Hosgood - Direct tel - 01903 889823, mobile - 07810 724222

Correspondence should be marked Addressee Only, C/O Diocesan Church House, 211 New Church Road, Hove, East Sussex BN3 4ED

Children's Services

Brighton & Hove Unitary Authority

Out of office hours (in an emergency) via the Police

East Team - Hodshrove Lane, Brighton BN2 4SB. Tel - 01273 295920

This team covers Moulsecoomb, Whitehawk, Queens Park, Kemptown, Bevendean, Coldean, Woodingdean, Rottingdean, Saltdean and Ovingdean

Central Team – Ground Floor, Bartholomew House, Bartholomew Square, Brighton BNI IJP. Tel - 01273 294470

This team covers central Brighton, Preston Park, Withdean, Fiveways, Hanover, Hollingdean, Hollingbury and Patcham

West Team - 6 Locks Hill, Portslade BN41 2LB. Tel (01273) 296527

This team covers Hangleton, Knoll, Portslade, Stanford and Hove

West Sussex County Council

Child Protection Referrals tel – 0845 075 1007 Out of hours emergency team tel – 01903 694422

Locality Offices

Bognor Regis - Durban House, Durban Road, Bognor Regis PO22 9RE Telephone - 01243 642400, Fax - 01243 642437

Chichester - Ia East Row, Chichester PO19 IPD

Telephone - 01243 752999, Fax - 01243 752644

Crawley - Centenary House, County Buildings, Woodfield Road, Crawley RH10 8GN Telephone – 01293 895100, Fax – 01293 895114

Haywards Heath - Oaklands, Oaklands Road, Haywards Heath RH16 ISU

Telephone - 01444 446100, Fax - 01444 446144

Horsham - St John's House, Springfield Road, Horsham RH12 2PJ

Telephone - 01403 213100, Fax - 01403 320311

Littlehampton - 44 High Street, Littlehampton BN17 5ED

Telephone - 01903 738900, Fax - 01903 738989

Shoreham - Glebelands, Middle Road, Shoreham BN43 6GA Telephone - 01273 268800, Fax - 01273 268801

Worthing - Centenary House, Durrington Lane, Worthing BN13 2QB Telephone - 01903 839100, Fax - 01903 839248

East Sussex County Council

If the child lives in the **east** of the county, including Hastings and Rother, and is 11 years old and under, contact the Duty and Assessment Team (tel -01424724144). If they are 12 years old and over, contact the Youth Support Team (tel -01424724130).

If the child lives in the **west** of the county, including Eastbourne, Hailsham and Seaford, and is 11 years old and under, contact the Duty and Assessment Team (tel -01323747373). If they are 12 years old and over, contact the Youth Support Team (tel -01323747094).

Out of hours emergency tel – (07699) 391462.

Ofsted

West Sussex - 01243 777807 East Sussex, Brighton and Hove - 01323 747490

Sussex Police

County wide local number – 0845 60 70 999 Minicom number – 01273 483435

Probation Service

West Sussex – 01273 788299 East Sussex – 01273 695327

Other Agencies

NSPCC Helpline – (free) 0808 800 5000
ChildLine - (free) 0800 1111
Christian Survivors of Sexual Abuse – BM-CSSA London WC1N 3XX (enclose sae)
Brighton Rape Crisis – 01273 203773
NSPCC (East Sussex) – 01424 722117 (counselling for adult survivors)
Diocesan Children and Youth Team – 01273 421021