



**Durham Women FC
FA Girls' Regional Talent
Club
Child Safeguarding Policy**

Child Safeguarding Policy

Durham Women FC recognises that because staff are in regular and frequent contact with children they are particularly well placed to observe signs of abuse. Durham Women FC is therefore aware of the responsibilities which the Regional Talent Club and staff have with regard to the safeguarding of children from abuse and from inappropriate and inadequate care.

The Regional Talent Club has designated the Child Welfare Officer to be the main point of contact responsible for managing any Child Safeguarding issues. The Child Welfare Officer is **Dawn Hepple** and all staff have been made aware of this role. Her responsibilities are:

- To be responsible for ensuring that effective communication and liaison with Social Services and with other agencies takes place as appropriate in the event of staff having child safeguarding concerns about a player from the Regional Talent Club.
- To ensure that all staff have an understanding of child abuse and its main indicators and are aware of the Regional Talent Club's and their own child safeguarding responsibilities.
- To support and advise staff within the Regional Talent Club in their child safeguarding work.
- To maintain their knowledge and awareness of the issues, policy and practice of child safeguarding through appropriate training.

In the event of a member of staff having a child safeguarding concern about a player, they will immediately inform the Child Welfare Officer and record accurately the event(s) giving rise to concern.

Where staff see signs which cause them to have a concern they should seek information from the player with tact and sympathy. It is not, however, the responsibility of the staff to investigate suspected abuse.

All full and part-time staff at the Regional Talent Club will be subjected to Enhanced DBS Checks.

Child Safeguarding Principles

Principles on which local procedures are based:

1. Children have the right to safeguarding
2. Everyone working or in contact with children have a responsibility for their safeguarding.
3. Responsibility relating to concern for a child's safety must be shared.
4. Child safeguarding depends on all staff and all agencies working together.

Procedures have therefore been agreed by all agencies.

5. Child safeguarding over-rides:
 - Confidentiality
 - Relationship with the family
 - Agency hierarchy and objectives

Local procedures are based on these principles.

Durham Women FC's responsibilities and those of the Football Association are determined by the following legislation:

- Police Act 1997
- Sex Offenders Act 1997
- Human Rights Act 1998
- Crime and Disorder Act 1998
- Children Act amended 1990
- Protection of Children Act 1999
- Sexual Offenders Act revised 2000
- Youth Evidence and Crime Evidence Act 1999

Child Safeguarding Procedures

Points to remember:

1. The procedures apply to ALL children and to abuse by anyone responsible for their care (i.e. parents, baby-sitters, professionals, care staff, teachers, coaches).
2. Procedures MUST be followed in response to child abuse or suspicion of child abuse.
3. Do not guarantee confidentiality to the child.
4. Take what the child says very seriously.
5. Typical signs of abuse include:
 - Unexplained bruising or injuries
 - Sexually explicit language/actions
 - Sudden changes in behaviour (e.g. withdrawn)
 - Something a child has said
 - A change observed over a long period of time
 - Loss of weight for no apparent reason.

These signs may not constitute abuse.

Look for behaviour changes or for a cluster of signs.

Share your concerns with the designated person - the Child Welfare Officer.

Categories of Abuse

Physical Abuse

Actual or likely physical injury to a child, or failure to prevent physical injury (or suffering) to a child including deliberate poisoning, suffocation and Munchausen's Syndrome by proxy.

Emotional Abuse

Actual or likely severe adverse effect on the emotional and behavioural development of a child caused by persistent or severe emotional ill-treatment or rejection. All abuse involves some emotional ill-treatment. This category should be used where it is the main or sole form of abuse.

Sexual Abuse

Actual or likely sexual exploitation of a child or adolescent. The child may be dependent and/or developmentally immature.

Neglect

The persistent or severe neglect of a child, or failure to protect a child from exposure to any kind of danger, including cold or starvation, or extreme failure to carry out important aspects of care resulting in the significant impairment of a child's health or development including no-organic failure to thrive.

Bullying

The persecution or oppression by force or threats. The use of strength or power to pressure or coerce others by fear.

Physical Abuse

“Physical abuse implies physically harmful action directed against a child. It is usually defined as any inflicted injury such as bruises, burns, head injuries, fractures, abdominal injuries or poisoning.” - C H Kempe

Possible signs of physical abuse:

- Unexplained injuries or burns, particularly if they are recurring
- Improbable excuses given to explain injuries
- Refusal to discuss injuries
- Untreated injuries
- Fear of parents being contacted
- Arms and legs covered
- Fear of returning home
- Fear of medical help
- Aggression towards others

Possible physical abuse in football:

- Inappropriate training methods
- Overtraining/overplaying
- Knowingly playing players who are already injured

Emotional Abuse

“Emotional abuse includes a child being continually terrorised, berated or rejected.” - C H Kempe

Possible signs of emotional abuse:

- Physical, mental and emotional development lags
- Over-reaction to mistakes
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Self-mutilation
- Drug/Solvent abuse
- Compulsive stealing
- Fear of parents being contacted
- Constant overprotection preventing young children from socialising

Possible emotional abuse in football:

- Frequently taunting, criticising, bullying or pressuring children to attain standards that they are clearly not able to reach
- Continuous criticism and lack of praise from the coach/parent
- Pressure from the parent for their child to play football against the child's wishes

Sexual Abuse

“Sexual abuse is defined as the involvement of dependent developmentally immature children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent, or that violate the social taboos of family roles.” - C H Kempe

Possible signs of sexual abuse:

- Saying that a friend has a problem
- Begin lying, stealing, blatantly cheating in the hope of being caught
- Have unexplained sources of money
- Start wetting themselves
- Act in a sexual way inappropriate to their age
- Develop eating disorders such as anorexia or bulimia
- Have a poor self-image, self-mutilate
- Act in a sexually inappropriate way towards adults
- Have soreness/bleeding in the genital or anal areas or in the throat
- Be chronically depressed
- Be fearful about certain people like relatives or friends
- Sexually abuse a child, sibling or friend
- Exhibit a sudden change in school-work/habits, becoming truant

Possible sexual abuse in football:

- Inappropriate physical contact (e.g. supporting, touching, or inappropriate treatment)
- Showing young people pornographic books, photography or videos

Neglect

“Neglect can be a very insidious form of maltreatment, which can go on for a long time. It implies failure of the parent(s) to act properly in safeguarding the health, safety and well-being of the child. It includes nutritional neglect, failure to provide medical care or to protect a child from physical and social danger.”

- C H Kempe

Possible signs of neglect:

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Untreated medical problems
- Destructive tendencies
- Low self-esteem
- Neurotic behaviour (e.g. rocking, hair-twisting, thumb sucking)
- No social relationships
- Compulsive stealing

Possible neglect in football:

- Failure to ensure that the child is safe or expose them to undue extremes of weather or risk of injury
- Fail to meet the child's basic physical needs for food and warm clothing
- To consistently leave children alone or unsupervised

Bullying

Three main types of bullying:

- **Physical** - hitting, kicking, theft
- **Verbal** - racist or homophobic remark, threats and name-calling
- **Emotional** - isolating an individual from activities

Possible bullying in football:

- Players ganging up against one individual and threatening them verbally or physically
- A coach wanting to 'win-at-all-costs' forcing players to the limits
- Young players threatening and stealing from teammates

Emotional and verbal bullying are more common than physical violence in football.

Responding to Bullying

It is all too easy to ignore an instance of bullying and assume it is a one-off or that the children will sort out their differences. All too often, this is not the case and there have been too many tragic instances where children bullied have tried to take their own lives.

Bullying will not be tolerated.

Action must be taken. This might include:

- Getting an apology from the bullies to the victim
- Letting the parents know
- Insisting on 'borrowed' or stolen property being returned
- Insisting that the victim receives compensation
- Holding club discussions about bullying and how to get rid of it from the club
- Providing support for those who coach and work with the victim
- Encouraging the bully to change her behaviour
- Punishing the bully (including the possibility of deregistration)
- Maintaining contact with the parents and providing regular updates
- Letting club members know about the incident and the action taken
- Keeping a written record of the incident and the action taken

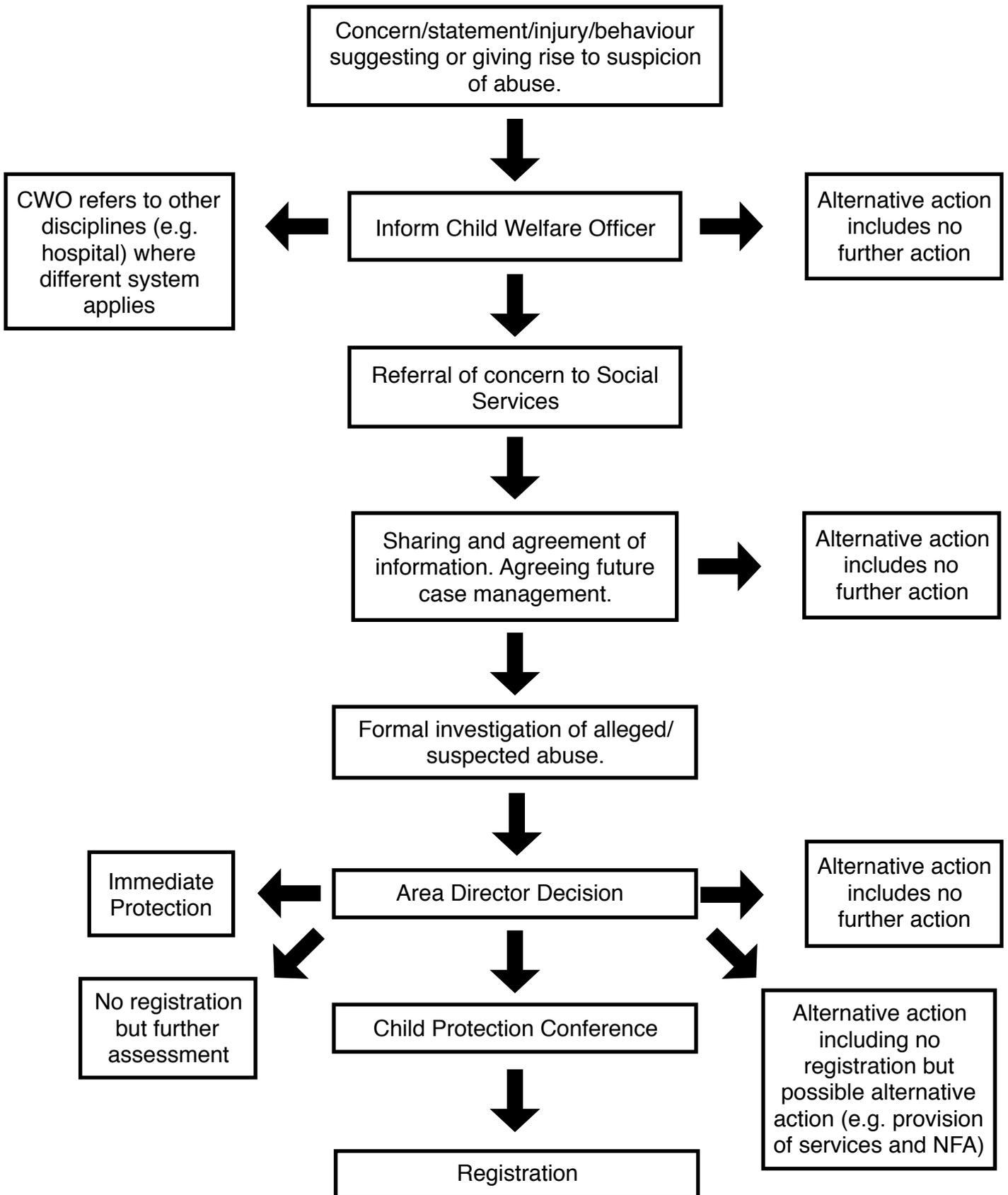
How To Report Your Concerns

It is one thing to know what you should do. It is quite another to do it and to do it in the right way.

The following basic guidelines will help you:

- Record what you heard or saw as soon after the event as possible. Remember it is not your job to interrogate or try to find out as much information as possible. You are not qualified to do so, and thus you may cause greater upset to the victim and may put a legal case at risk. Write down the facts - exactly what the person said or precisely what you saw. Do not add any opinions about what you saw or heard.
- Use these notes when you are reporting your concerns verbally. Try to stay calm and unemotional and use simple and clear language.
- Follow the reporting procedures.
- Do not share the information with anyone else - parents, colleagues and so on. However, you may need some support yourself and you should discuss this with the person to whom you report your concerns.
- If your concerns have not been dealt with satisfactorily, you should follow-up by contacting the FA/NSPCC Helpline yourself.
- If you report through the County FA Child Protection Officer or directly to the FA, you will be asked to give factual details on an official referral form.

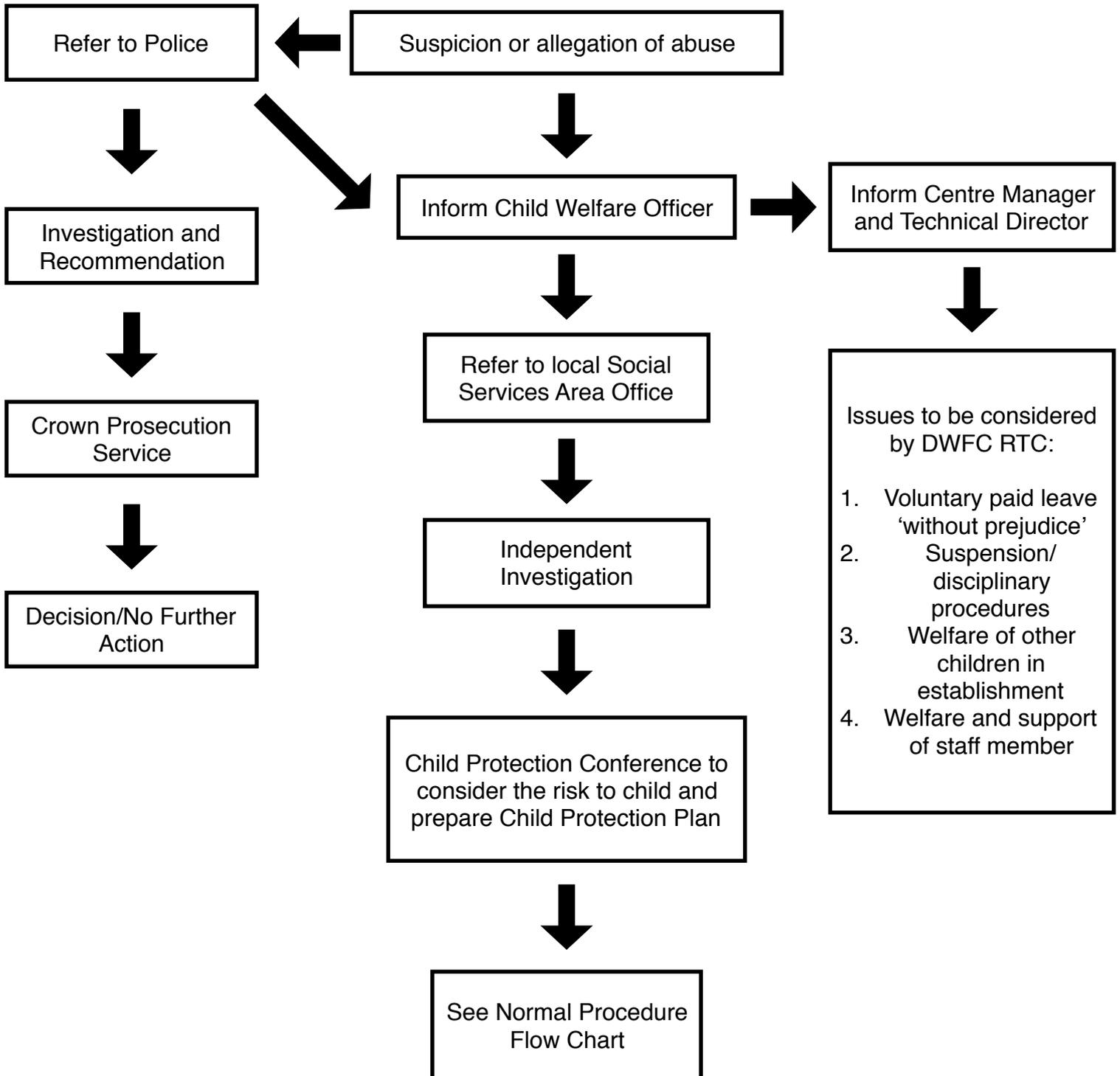
Normal Procedure



Abuse By Staff - Process of Investigation

Possible Police Action

DWFC RTC



Durham Women FC - FA Girls' Regional Talent Club

Child Protection Recording Sheet

NOTES from a meeting
 phone call
 conversation

with on..... at.....

concerning

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FOR information advice

Advice/further action

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The Responsible Football Coach Code Of Conduct

1. Coaches must respect the rights, dignity and worth of each and every person and treat each equally within the context of the sport.
2. Coaches must place the well-being and safety of each player above all other considerations, including the development of performance.
3. Coaches must adhere to all guidelines laid down by the Rules of the Football Association.
4. Coaches must develop an appropriate working relationship with each player, based on mutual trust and respect.
5. Coaches must not exert undue influence to obtain personal benefit or reward.
6. Coaches must encourage and guide players to accept responsibility for their own behaviour and performance.
7. Coaches must ensure that the activities they direct or advocate are appropriate for the age, maturity, experience and ability of players.
8. Coaches should, at the outset, clarify with players (and where appropriate, their parents) exactly what is expected of them and also what they are entitled to expect from the coach.
9. Coaches must co-operate fully with other specialists (e.g. other coaches, officials, sports scientists, doctors and physiotherapists) in the best interests of the player.
10. Coaches must always promote the positive aspects of the sport (e.g. fair play) and never condone violations of the Laws of the Game, behaviour contrary to the spirit of the Laws of the Game and relevant rules and regulations or the use of prohibited substances or techniques.
11. Coaches must consistently display high standards of behaviour and appearance.

Any breach of any provision(s) of the Code of Conduct by a member of the FA Coaches Association shall constitute a breach of the Rules of the Football Association and will be dealt with under the procedures as set out in the rules of the Football Association.

Recommendations For Persons Involved With The Treatment of Young Players

The following provides a set of best practice guidelines for any person involved with the treatment (first aide, physiotherapy, rehabilitation and management and treatment of injuries generally) of children in football.

- It is recommended that no child or young person should be treated in anyway in a situation where the child or young person is on her own in a treatment room with the door closed.
- It is strongly recommended that all treatment procedures should be open (i.e. the door remains open, parents/guardians invited to observe treatment procedures). Where strict medical confidentiality is to be observed the parents or guardians of the child or young person should be invited to attend.
- It is recommended that if treating an area of the body that is potentially embarrassing to a child or young person, a suitable adult acting as chaperone should be present.
- It is important to maintain any medical confidentiality and patient dignity at all times.
- Prior to medical treatment being carried out on a child or young person, parental/ guardian consent in the written form must be sourced where appropriate.
- It is recommended that all treatment procedures are explained fully to the child or young person and verbal consent is given before they are carried out.

Best Practice For Adults to Protect Themselves

All adults involved in the FA Regional Talent Club should:

- Avoid spending too much time alone with one young person away from the others
- Avoid taking young people to their home where they will be alone with the young person
- Never take part in rough, physical or sexually-provocative games, including horseplay
- Never share a room with a young person
- Never allow or take part in any form of inappropriate touching
- Never allow young people to use inappropriate language: always challenge this behaviour
- Never make sexually-suggestive comments to a young person, even in fun
- Never reduce a young person to tears as a form of control
- Never allow allegations made by a young person to go unchallenged, unrecorded or not acted upon
- Never do things of a personal nature for young people or vulnerable adults that they can do for themselves
- Never invite or allow young people to stay with them at their home unsupervised
- Never accept bullying, rule violations or the use of prohibited substances

Best Practice When Travelling

When planning an event away from home or the club, you need to consider the following:

- Has every member of staff involved in the trip successfully completed their DBS check and Safeguarding workshop?
- Has a risk assessment for the trip been carried out? No amount of planning can guarantee a safe and incident-free trip, but good planning and attention to safety measures can reduce the likelihood of serious incidents. Check travel, venue, staffing, weather and environment and sleeping and catering arrangements (if applicable) for possible dangers and put in place safety and emergency procedures.
- What staffing is needed? The staff-to-player ratio will depend on:
 - the risk assessment
 - the age of the players: one staff member to 10 players is recommended for players over 11. More staff are recommended with groups of younger children
 - any special needs - you may need more staff if there are players with special needs or disabilities
- Are the roles and responsibilities of staff members clear? Who has ultimate responsibility? The coach often has ultimate responsibility, the team manager is normally responsible for supervision and the driver should not have any other duties while travelling.
- Is there a club or FA home contact? This person should hold copies of the travel plan, all players' home addresses, venue contacts, medical and consent forms.
- Have you drawn up ground rules for the players? You will need to agree some rules during travelling, at the venue and particularly when your supervision is not face-to-face. A credit card size 'Safe Away' card that each player can carry at all times is strongly recommended.

Photographs - Code of Practice

Clubs should:

- Communicate as widely as possible the club's approach to the recording of images, saying that its policy is designed to encourage best practice in the safeguarding of children and to prevent abuse if possible.
- Make sure parents, carers and children are told about the club's images policy before the child participates in a club activity.
- Get parents' or carers' consent to take images of the child for the purposes of the club.
- Report any instances of inappropriate images to the Child Welfare Officer.

Clubs should not:

- Publish images with the full name(s) and details of the individual child(ren) in the club programme or place images containing that information either on the club website or in the press.
- Use an image for something other than that which it was initially agreed (e.g. published in the press when initially produced for a personal commemorative picture).
- Allow images to be taken by anyone in changing rooms, showers and toilets or anywhere else where children might be undressed.

Clubs should remember:

- It is not an offence for someone to take appropriate photographs on public property, even if asked not to do so.
- Clubs cannot decide who can and can't take images on public property.
- Clubs can decide who can and can't take images on private property. If photographers do not comply with the club's requirements then they may be asked to leave.