



Safeguarding and Child Protection Policies and Procedures

January 2025

Date of next review: 1st February 2027

1. SAFEGUARDING POLICY

I_AM abides by the duty of care to safeguard and promote the welfare of children and young people and is committed to safeguarding practice that reflects statutory responsibilities, government guidance and complies with best practice requirements.

- We recognise the welfare of children is paramount in all the work we do and in all the decisions we take
- All children, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation has an equal right to protection from all types of harm or abuse
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues

Working in partnership with children, young people, their parents, carers and other agencies is essential in promoting young people's welfare.

The purpose and scope of this policy

I_AM supports students in secondary schools to practice for medical school interviews. The purpose of this policy statement is:

- **to protect children and young people who participate in the I_AM programme from harm.**
- **to provide I_AM volunteers, as well as children and young people and their families, with the overarching principles that guide our approach to child protection.**

This policy applies to anyone working on behalf of I_AM, including administrative staff and volunteers.

Note: where I_AM's work is carried out in schools, our volunteer doctor-mentors must follow the safeguarding policy of the relevant school as well as our policy. In the event of any conflict between the policies, the school's policy and procedures will take precedence.

We will endeavour to safeguard students by:

- Adopting safeguarding guidelines through a code of behaviour for staff and volunteers.
- Working in partnership with children and young people, their parents/carers and other agencies is essential in promoting children's welfare.
- Sharing information about safeguarding and good practice with students, parents and carers, staff, freelancers and volunteers.
- Sharing information about concerns with schools and agencies who need to know and involving individuals and parents/guardians appropriately.
- Following carefully the procedures for safe recruitment and selection of volunteers.

- Providing effective management for staff and volunteer doctor-mentors through supervision, support, and mandatory safeguarding training, including regular updates to this training.
- Having a student behavioural code of conduct.
- Committing to reviewing our policy and good practice at regular intervals.

Confidentiality

Our confidentiality policy has been developed with reference to the [Department for Education's Information Sharing advice](#).

- We will keep children's information confidential under the Data Protection Act 2018 unless there are safeguarding concerns that need to be shared. Protecting a child from abuse or neglect takes precedence over their privacy, or the privacy of the person(s) failing to protect them.
- Whenever there is a safeguarding concern, where practical and safe we will engage with the child and/or their parent/carer(s) and explain who we intend to share information with, the information we will be sharing, and why.
- We will only share relevant and accurate information with individuals or agencies/organisations that have a role in safeguarding the child and/or providing their family with support, and only share the information they need to support the provision of their services.
- We will record the reasons for our information sharing decision, irrespective of whether or not we decide to share information.

Designated Safeguarding Lead (DSL)

The DSL's role includes receiving and responding to all safeguarding concerns, whether from volunteer doctor-mentors, parents/carers, or students themselves.

I_AM DESIGNATED SAFEGUARDING LEAD: Clare Turnbull clare.turnbull@icr.ac.uk

I_AM leadership: Lead: Clare Turnbull, Deputy Leads: Katie Snape, Aileen O'Brien

2. Code Of Behaviour

Statement of Intent

It is the policy of I_AM to safeguard the welfare of all students by protecting them from all forms of abuse, including physical, emotional, and sexual harm.

This organisation is committed to creating a safe environment in which individuals can feel comfortable and secure while engaged in any of I_AM's mentoring interview practice sessions. Volunteer doctor-mentors should always show respect and understanding for students' rights, safety and welfare and conduct themselves in a way that reflects the ethos and principles of I_AM.

This Code of Behaviour has been developed in reference to the *Guidance for Safer Working Practice for Adults who Work with Children and Young People*.

Code of Practice for I_AM volunteer doctor mentors:

Attitudes

Volunteer doctor-mentors should lead by example and be committed to:

- Providing a safe, welcoming and engaging learning environment
- Treating all students with respect and dignity
- Always listening to what a student is saying
- Valuing each student
- Recognising the unique contribution each student can make
- Encouraging and praising each student
- Using appropriate language and challenging any inappropriate language used by a student
- Ensuring their behaviour outside of I_AM, including online, maintains the confidence and respect of the students, parents/carers, the school community and the public in general.

Confidentiality

Volunteer doctor-mentors should:

- Treat information they receive about students in a discreet and confidential manner
- Seek advice from an I_AM lead/co-lead if they are in any doubt about sharing information they hold or which has been requested of them.

Contact with students

Volunteer doctor-mentors should:

- Conduct all sessions online. Any in-person sessions should occur on school grounds.

- Record online sessions and store the recording for at least 3 months.
- Conduct online sessions with two or more students present where possible
- Only conduct online sessions with a single student if the session is recorded in full. On these occasions,
 - (i) the student's parent/carer should be asked to join the online session temporarily and give verbal consent (which should be recorded) for the session to proceed OR
 - (ii) the session should be conducted in the same room at the parent/carer.
- Volunteer doctor-mentors should not communicate with students via text, phone or social media. All contact should be via the students' school email address. Where post-Y13 students (over 18) are participating in sessions, use of a personal email is acceptable.

Physical Contact

Volunteer doctor-mentors undertaking in person sessions at schools should:

- Avoid unnecessary or inappropriate physical contact with individuals.
- If a student initiates inappropriate physical contact with an adult, this should be dealt with sensitively with the student and immediately reported to the school

Gifts, rewards, favouritism and infatuation

Volunteer doctor-mentors should:

- Only accept small tokens of appreciation from students, parents or carers and always declare them to I_AM leadership
- Not give any gifts or rewards to students
- Ensure all selection processes which concern students are fair
- Report and record any incidents or indications (verbal, written or physical) that suggest a student may have developed an infatuation with volunteer-doctor.

Reporting concerns

Volunteer doctor-mentors should promptly report to the I_AM leadership any concerns they have about any student or interaction with a student, however insignificant they may seem.

Adherence

All volunteer doctor-mentors are expected to adhere to the Code of Practice. In some cases, a reminder about the correct behaviour will be sufficient but more serious breaches or continual breaches could involve dismissal from the Programme. Any breaches which constitute harm to a child will be investigated and referred to the school in the first instance, who may then choose to involve the local borough's Local Authority Designated Officer (LADO).

3. Recruitment and training

Safer Recruitment

Safe recruitment and selection practice is vital in safeguarding and protecting children and young people. I_AM recognise and take seriously our responsibility to adopt practice which minimises risk to children and young people by ensuring that measures are in place through this practice to deter, reject or identify people who might abuse children and young people or who are unsuitable to work with them.

We ensure that:

- Volunteer doctor-mentors working with I_AM must be practicing doctors, who (i) are on the GMC register with no active investigations, (ii) are employed by an NHS organisation, and (iii) have had a full Disclosure and Barring Service (DBS) check performed by their employer for their medical role.

Training

- All volunteer doctor-mentors must read and familiarise themselves with I_AM's safeguarding policy.
- The Designated Safeguarding Lead will receive specialised training with a refresher course every 2 years

4. SAFEGUARDING PROCEDURES

Types of abuse

There are four categories of abuse (as defined under the Children Act 1989):

- **Physical abuse.** Includes physical chastisement; deliberate, malicious injuries; inappropriate restraint; lack of supervision resulting in accidents causing harm
- **Neglect.** Persistent failure to meet a young person's needs – physical and psychological. Includes the failure to protect a child from exposure to any kind of danger resulting in the significant impairment of a child's health or development
- **Emotional abuse.** Includes; persistent ridicule, rejection, humiliation an atmosphere of fear and intimidation, inappropriate expectations; bullying and scapegoating, low warmth and high criticism
- **Sexual abuse.** Includes; giving a child access to pornographic materials, involving them in sexual activity of adults; touching or talking in sexually explicit ways; speaking to the child about sex in ways that are inappropriate for the child and which seek to gratify the needs of someone else.

Identifying Safeguarding Concerns

All trustees, employees, freelancers and volunteer doctor-mentors should be vigilant to the behaviours of young people and should be concerned if they exhibit unusual behaviours.

Some of the things to look out for are if a young person:

- Shows changes in behaviour
- Has an injury which is not typical of a young person's bumps and scrapes, regularly has unexplained injuries, or frequently has injuries and/or gives confused or conflicting explanations of how injuries were sustained
- Exhibits significant changes in performance or attitude
- Exhibits extremist beliefs that may infer the young person has been 'radicalised'
- Indulges in sexualised behaviour which is unusually explicit / inappropriate for their age
- Discloses an experience in which they may have been harmed.

What to do if a disclosure is made to you

If a young person discloses to you information that gives you cause to be concerned for their well-being you should follow the guidance below:

- **RECEIVE.** Listen actively to what is said without displaying shock, disbelief or other emotional responses. Do not ask direct or leading questions, simply encourage and allow the young person to continue to talk to you.
- **REASSURE.** Reassure the young person that they have done the right thing in talking to you. Do not make any promises about an outcome, nor that you are able to keep the disclosure a secret.

- RESPOND. Inform the young person of your next steps which will be to share the information with the DSL. Check that they are safe before you leave them.
- REPORT. Report the disclosure to the DSL as soon as possible. Do not share the information with anyone else.
- RECORD. If appropriate and possible, record in writing what has been disclosed with facts and no opinions. Make some brief notes at the time and write them up as soon as possible. Accurately record the date, time, place, and words used by the young person. Be specific.

Reporting Concerns

If any volunteer-doctor has a safeguarding concern, they must promptly report it to I_AM's DSL who will make a written record of the safeguarding concern (Safeguarding Concern Report - SCR) and then conduct a review. The DSL will then review the SCR, and will liaise with the student's school what the appropriate response should be. This may or may not include referral to the Local Authority Multi Agency Safeguarding Hub local to the school, seeking and sharing support from the relevant statutory services.

5. Allegations made by students against volunteers

- Students, parents and carers who have a complaint to make about an I_AM volunteer doctor-mentor should contact Lead Clare Turnbull (i_am_medical_mentoring@icr.ac.uk). If the complaint involves Clare Turnbull, they should contact a deputy lead, Aileen O'Brien or Dr Katie Snape (aobrien@sgul.ac.uk Katie.Snape@stgeorges.nhs.uk)
- If the complaint is of a level of concern which involves or may involve harm to a child, I_AM will liaise with the relevant school and follow the local Safeguarding Children Partnership guidelines, which may include notification of the Local Authority Designated Officer (LADO).
- If the level of complaint does not involve harm to a child, but instead raises concerns about a volunteer's professional behaviour, I_AM will deal with the complaint under its own procedures.
- Details of the allegation will be recorded in writing including the concern, when and where it occurred, the context, and any action taken.
- The volunteer doctor-mentor and the student will be treated with respect and supported throughout the process.
- Reference will be made to the I_AM Code of Behaviour.
- If the investigation shows that on a balance of probabilities the allegation is not justified, then student disciplinary or pastoral procedures will be invoked as appropriate by the school.
- If the investigation shows that on a balance of probabilities the allegation is justified, then I_AM's disciplinary procedure will be invoked as appropriate.

6. Student Behavioural Policy and Code of Conduct

I_AM is committed to providing a safe, respectful, and supportive environment for all students participating in our mentoring activities. This Behavioural Policy and Code of Conduct applies to all students.

Participation: Students participate fully in all activities with cameras turned on for online sessions.

Punctuality and communication: As part of taking a place on the programme, students should commit to attending all sessions. If unable to attend a session, the student should notify the volunteer doctor-mentor by noon that day. Students should arrive on time for sessions.

Respect for Others: All students are expected to show respect and kindness towards their fellow students and volunteer doctor-mentors. Constructive criticism and feedback should be given in a positive, respectful manner. Derogatory language, bullying, harassment, and any form of disrespectful behaviour will not be tolerated.

Privacy and Confidentiality Students should respect the privacy of others and maintain confidentiality of any personal information shared within I_AM activities, unless disclosure is required by law or for the safety of oneself or others.

Failure to adhere to this Behavioural Policy and Code of Conduct may lead to suspension or withdrawal of the student's participation in our programmes, pending a thorough and fair investigation.

If you have a safeguarding or behaviour concern, or for any help or guidance on any of the points listed above, please contact our Designated Safeguarding Lead, whose details can be found above.