



Kaveri Kala Manram

Safeguarding Policy &code of conduct

Revise 2020 August

Introduction



Purpose of the Policy

KKM & NOPLA has developed and will implement this Safeguarding Policy and associated procedures to:

- Provide guidance for KKM & NOPLA staff, members of board and volunteers on safeguarding issues, policy and procedures.
- Articulate minimum safeguarding standards when KKM & NOPLA works in partnership with other organization to provide activities for children, young people and vulnerable adults.
- Provide guidance on safeguarding in specific relationship to sport and physical activity
- Exist as an example of good practice to sport and physical activity organization operating in the Sri Lanka.

Setting the Context

Kaveri Kala Manram is a registered (**Reg No: KR/DS/SS/NGO/2015/38**) **Reg No A 00212537 non-governmental organization (NGO)** based and working mainly in the North & Eastern Region of Sri Lanka. That main office located Ananthapuram Kilinochchci. It is a community empowerment organization that is actively involved not only in protecting and promoting traditional arts and culture but also using these to foster social and environmental justice in the community.

In 1998, Rev T S Joshua originated and led a community based relief and rehabilitation programme, supported by the Leprosy Mission, for a displaced and neglected leprosy community is a village called Kattupulam in Northern Sri Lanka. KKM was formed by the youngsters from this village who benefited from this rehabilitation programme. Street drama (*Theru Koothu*) was used by this talented group of youngsters to raise awareness about leprosy and other neglected health issues. Some of these actors still work with the KKM.

From these humble beginnings KKM has grown to be a dynamic organization that is working in almost all the Districts of the Northern Province. The major area of KKM"s activity is still Leprosy – raising awareness and supporting leprosy affected individuals and families. Theatre activities of KKM have expanded and now include theatre techniques such as "playback theatre",

"forum theatre" and "dream theatre". Dream Theatre is a technique created by KKM from its experience in the community. The leprosy project being implemented by KKM is supported and funded by the Leprosy Mission of England and Wales. (TLMEW).

Since the end of the ethnic war in Sri Lanka, KKM is working in the Vanni region and thanks to support of a number of Diaspora groups - especially the Vanni Hope Project group from Sydney, Vulnerable and disadvantaged families are being helped in crucial areas such as education, health and sustainable livelihood. KKM uses Theatre and Art as the main modalities for reaching and engaging with the local communities.

KKM has a robust administrative structure and its projects and accounts are regularly audited by independent external auditors. It is a community organization working with the communities towards sustainable development

Part 1 - Policy



1.1 Key Principles of this Policy

- People who participate in sport and physical activity do so for the enjoyment and sense of achievement that it brings. Everyone who participates is entitled to experience a safe and supportive environment. Children, young people, and vulnerable adults are entitled to expect activity organizers to fulfill their duty of care, and to be nurtured and protected from abuse and poor practice.
- The welfare and safety of those participating in any activities organized by, or in association with, KKM & NOPLA is paramount.
- Vulnerable children, young people and adults, whatever their age, culture, disability, gender, language, racial origin, religious belief, and/or sexual orientation have the right to protection from abuse and the right to be treated with dignity and respect.
- It is the responsibility of the relevant professionals to determine whether or not abuse has taken place, however, it is the responsibility of everyone to take action to respond to and report any concerns
- Partners can expect that all suspicions and allegations of abuse or poor practice will be taken seriously by KKM & NOPLA and responded to swiftly and appropriately
- All staff & board members shall have recourse against any allegation made against them and be supported if they report a concern
- This policy will be promoted to all relevant parties and be freely available from the KKM website.

1.2 Policy Statement

KKM & NOPLA believes that all people have the right to take part in sport and related physical activities free from harm and abuse. KKM & NOPLA recognizes that children and vulnerable adults are at increased risk of harm and that their protection is of paramount importance.

This Policy and the related procedures will be reviewed on an annual basis, or earlier in response to any significant changes to the organizational structure, role or to relevant legislation.

1.3 Adoption of this Policy

The KKM & NOPLA Safeguarding Policy has been through a consultation process with relevant partners for comment and endorsement. These partners include:

- 1) District child protection committee
- 2) Provincial social service department

The KKM & NOPLA Safeguarding Policy was formally approved and adopted by the KKM & NOPLA Board of Management on 15th December 2019.

1.4 Review

The KKM & NOPLA Safeguarding Policy and associated procedures will be reviewed annually. The KKM & NOPLA Safeguarding Action Plan will also be reviewed on an annual basis at the start of each calendar year. The review will be signed-off by the KKM Director. The review will include, but not be limited to:

- Ensuring that documentation reflects the organizational role, current legislation and government guidance
- Progress made against the targets within the Action Plan
- Compliance with the recruitment, induction and training processes
- Currency of any relevant training checks required
- Examination of reported and recorded cases
- Efficiency of communication about the policy to all partners and staff

1.5 Roles and Responsibilities

1.5.1 General responsibilities of KKM & NOPLA

KKM & NOPLA is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults whilst they are engaged in any activity provided by, or through, KKM & NOPLA.

KKM & NOPLA will endeavor to do this by:

- Leading on the production, implementation, monitoring and review of this safeguarding policy and the accompanying procedures
- Ensuring that all staff are clear in their role in safeguarding and promoting the welfare of children, young people and vulnerable adults
- Ensuring that all staff are appropriately selected, trained and supervised
- Ensuring that the inclusion of adequate safeguarding arrangements is a key element of all commissioning, funding or partnership agreements
- Providing help and guidance to partners in regard to safeguarding in sport issues

1.5.2 Role and responsibilities of the KKM & NOPLA Board of Management

The Board of Management, as the strategic steering body for KKM & NOPLA, will:

- ensure that safeguarding remains a central principle of the operations and development of the organization:
- have strategic accountability for the development of policies for safeguarding and promoting the welfare of children, young people and vulnerable adults in sport
- have strategic accountability for effective implementation of organizational policies and procedures to safeguard children, young people and vulnerable adults including those related to safe recruitment
- Represent the organizational approach to safeguarding and protecting children, young people and vulnerable adults and communicate this approach to other organization, as appropriate.

1.5.3 Role and responsibilities of the Management Team

The Management Team will:

- Oversee arrangements to ensure the organization fulfills its duty of care towards children, young people and vulnerable adults in line with this Policy
- Contribute to the development and implementation of policies for the safeguarding and protection of vulnerable children, young people and vulnerable adults in sport
- Develop, maintain and review other organizational policies and procedures which contribute to safeguarding, including those related to safer recruitment, complaints and disciplinary procedures
- Work collaboratively with external agencies on cases of poor practice or abuse
- Implement an organizational culture of listening to children, young people and vulnerable adults as reflected in organizational plans and practices
- Ensure partner organization have adequate safeguarding policies and procedures in respect of safeguarding
- Ensure that the inclusion of adequate safeguarding arrangements is a key element of all commissioning, funding and partnership agreements
- Represent the organizational approach to safeguarding children, young people and vulnerable adults and communicate this approach to other organization, as appropriate.

1.5.4 Role and responsibilities of the Designated Safeguarding Officer



KKM & NOPLA will maintain both a Lead and a Deputy Designated Safeguarding Officer.

- Lead the development and implementation of the KKM & NOPLA approach to safeguarding vulnerable people
- Provide the first point of contact for and respond to any communications and/or concerns regarding safeguarding
- Work with partners to maintain, develop and review policies and procedures to safeguard vulnerable people in line with national guidance
- Advise staff and volunteers on implementation of KKM & NOPLA safeguarding policies and procedures
- · Advise on development of and implementation of staff and volunteer training
- Implement reporting procedures and maintain relevant records in line with organizational procedure, maintaining confidentiality as appropriate
- Represent the organizational approach to safeguarding and protecting vulnerable people
- Advise on adequate safeguarding arrangements as a key part of all commissioning, funding and partnership agreements
- Co-ordinate dissemination of policy, procedures and resources as appropriate
- Provide advice and support to lead safeguarding officers within partner organization in the county
- Signpost individuals to sources of support during and following an incident, allegation of abuse or complaint.

The Designated Safeguarding Lead is

- Drawing up and enforcing the KKM's safeguarding policy.
- Being alert to and recognizing welfare issues, being sure to challenge poor practice.
- Sharing appropriate information with relevant people.
- Checking the List of staff, & Beneficiaries to see who is subject to a Child Protection Plan.
- Gathering any other relevant information and evidence
- Consulting local safeguarding KKM Executive procedures for additional information and guidance if needed.
- Making referrals to social services when appropriate.
- Continue working with the family, sharing information and contributing to plans if the concern is investigated.
- Ensuring that all staff having contact with children, vulnerable adults and/or their families have received
- Appropriate training on safeguarding issues.
- Being the first point-of-call for all staff who have safeguarding concerns

1.5.5 Role and responsibilities of staff and volunteers

All staff will:

- Be aware of what is meant by safeguarding children, young people and vulnerable adults in KKM & NOPLA project area.
- Be alert to the risks which individual abusers, or potential abusers may pose to children, young people and vulnerable adults, particularly in relation to sport
- Demonstrate knowledge of KKM & NOPLA policies and procedures and how to apply these in practice
- Report all concerns in line with the organizational procedures
- Ensure that the inclusion of adequate safeguarding arrangements is a key element of commissioning, funding and partnership agreements, where these are relevant
- Represent the organizational approach to safeguarding and protecting children, young people and vulnerable adults and communicate this approach to partners

Part 2 - Procedures



2.1 Recruitment, Deployment and training of Staff and Volunteers

Introduction

It is vital that all reasonable steps are taken to prevent unsuitable people from working with children, young people and vulnerable adults, having access to significant personal data, or being placed in a position of trust over such.

2.1.1 Staff recruitment

Recruitment procedures for KKM & NOPLA staff will fall in-line with SGP policy and include:

- For eligible and/or required posts, an appropriate level Disclosure. Should these not be completed before employment commences a risk assessment will be undertaken and the necessary safeguards put in place.*
- A risk assessment undertaken on any positive disclosure or reference information.
- Two confidential references should be obtained, once permanent contracts are confirmed, including last employer, and at least one commenting on any previous work with children/vulnerable groups
- References MUST be taken up and confirmed through telephone contact.
- Personal identification should be requested e.g. valid passport or driving license with photo.

Note: It is an offense for an employer to employ a person to work with children and/or vulnerable people who has been barred from doing so.

2.1.2 Pre- employment interview

Potential employees will be required to undertake an interview carried out to acceptable protocol and recommendations of KKM & NOPLA, including:

- A check that the application form has been completed in full, including sections on criminal records and self-disclosures. Any gaps or inconsistencies in employment history should be identified
- Qualifications should be substantiated
- The job requirements and responsibilities should be clarified to the candidate.

2.1.3 Induction and training

It should be clearly recognized that pre-employment checks are only a part of the process. It is important that the recruitment and selection process is followed by a needs analysis as part of the induction process and then provision of appropriate training.

All staff will undergo an induction process a part of which will familiarize them with the safeguarding policy, associated procedures and their specific responsibilities.

All staff are to be provided with opportunities to learn about how to recognize and respond to safeguarding concerns. Assistance will be provided to ensure that individuals can access appropriate basic awareness courses.

Staff with designated responsibilities in relation to safeguarding will have a written job description for that role, and will be provided with relevant training to enable them to develop the necessary skills and knowledge, and to have regular opportunities to update their knowledge and understanding.

Any members of staff whose role specifically requires working with children or vulnerable adults should also be provided with relevant training.



Specific training will be provided for those responsible for dealing with complaints and disciplinary processes in relation to safeguarding and inappropriate behaviour towards children, young people and vulnerable adults.

Training and/or written guidance on safer recruitment practice will be provided for those responsible for recruiting, selecting and deploying staff and volunteers. Training should also include guidance and help for staff and volunteers to recognize additional vulnerability of some children, young people and vulnerable adults and the extra barriers they face to getting help. Barriers may include:

- Race
- Gender
- Age
- Religion
- Disability
- Sexual orientation
- Social background
- Culture
- Mental Health

2.1.4 Monitoring and review

A record will be kept of relevant staff training. This will be reviewed as part of the safeguarding annual review. Any training or checking needs that are identified will be reported to the individual's line manager for implementation.

2.2 Recognition of Abuse and Poor Practice Introduction

The term 'abuse' generally covers physical, emotional or sexual abuse and neglect. For vulnerable adults abuse can additionally be financial, discriminatory or institutional. Even for those experienced in working with abuse, it is still not always easy to recognize a situation where abuse may be occurring. Staff and volunteers working within sporting activities or events are not expected to be experts at recognizing abuse. They do, however, still have a responsibility to report any concerns about the safety and welfare of vulnerable people, or about or any individuals who may pose a threat to vulnerable people.

Poor practice is behavior that fails to follow codes of conduct and ethics. Often this may not be a deliberate action and/or constitute abuse, as such, but it is still an issue that needs to be addressed as it could have a detrimental effect on a vulnerable person. Concerns about poor practice should be reported in the same way as abuse.

2.2.1 Abuse

The dictionary definition of abuse refers to the use or treatment of something (a person, item, substance, concept, idea or vocabulary) that is harmful. It can be classed by the target of the abuse or the type of abuse.

Abuse is a serious word and often conjures up images of physical harm and physical evidence like bruising, cuts, abrasions, fractures etc. But harm can be caused in many different, often quite subtle ways eg:

- Using stereotypes and degrading language
- Using over familiar or inappropriate terms
- Undermining someone's confidence
- Ignoring their wishes
- Poking fun at the conditions some people live with
- Treating people by their condition and not as individuals living with a condition

Individuals may be abused by the infliction of harm or the failure to act to prevent harm. Abuse can occur within the family, community or an institutional setting. Abuse can also take place through communication mediums. Victims of abuse are more commonly abused by people they know. The abuser can be an adult or a child and can occur within any social group. Victims of abuse frequently suffer more than one category of abuse.

2.2.2 Neglect



For children, neglect can be described as: The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of health or development.

Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve:

- Not providing adequate food, clothing and shelter (including exclusion from home or abandonment)
- Not protecting from physical and emotional harm or danger
- Not ensuring adequate supervision (including the use of inadequate care-givers)
- Not ensuring access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

For adults, neglect can be described as: Ignoring medical or physical care needs, failure to provide access to appropriate health, social care or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating.

2.2.3 Physical abuse

Physical abuse is the non-accidental infliction of physical force that results (or could result) in bodily injury, pain or impairment. Examples include:

- An inflicted physical injury, which is not satisfactorily explained
- An injury where there is knowledge or suspicion that it was inflicted intentionally or through lack of care
- Assaults on the body including hitting, slapping, pushing, kicking resulting in injuries such as burns, abrasions, fractures, dislocation, welts, wounds or marks of physical restraint
- Misuse of medication or medical process
- Inappropriate restraint or inappropriate actions or in actions

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child or vulnerable person.

Within sport, physical abuse can potentially occur where the nature and intensity of training and competition exceeds the capacity of the individual's ability to positively adapt and where drugs are used to delay puberty or enhance performance.

Some possible indicators of physical abuse are:

- Multiple bruising that is inconsistent with the explanation given
- Bruising in uncommon areas, such as back of legs, mouth, cheeks, stomach, chest, under the arm.
- Abrasions, especially to neck, wrists and/or ankles
- Grasp, hand or finger marks
- Unexplained burns or scalds
- Hair loss in one area, scalp sore to touch
- Frequent 'minor accidents' without seeking medical help
- Unusually sleepy or docile
- Unexplained fractures
- Cowering and flinching
- Self-harm, emotional distress, low self esteem



2.2.4 Sexual abuse

Direct or indirect involvement in sexual activity without consent. This could also be through inability to consent, or by pressurization/inducement to consent or take part.

Examples include:

- Rape
- Indecent assault
- Indecent exposure
- Exposure to inappropriate sexual behavior or images/material
- Inducement to take part in inappropriate sexual behavior.

Sport often places individuals in positions of authority and influence over others. A significant potential exists for abuse of these positions of trust. It is known that abusers gravitate towards roles that provide opportunities over vulnerable people and sport has often been a conduit for abuse. Awareness of the threat and appropriate action to ensure the safety of vulnerable people in sports settings is inherent on all individuals and agencies within sport.

2.2.5 Emotional abuse

Acts or behavior which impinges on the emotional health of, or which causes distress or anguish to, individuals. This may also be present in other forms of abuse:

Examples include:

- Threats of harm or abandonment
- Humiliation, shaming or ridicule
- Harassment, bullying, intimidation
- Control or coercion
- Deprivation of choice or privacy
- Deliberate social isolation
- Infantilization treating an adult like a child

2.2.6 Discriminatory abuse

Discriminatory abuse exists when values, beliefs or culture result in a misuse of power that denies mainstream opportunities to some groups or individuals. It includes discrimination on the basis of race, gender, age, sexuality, disability or religion.

Examples include:

- Unequal treatment
- Verbal abuse
- Inappropriate use of language
- Harassment
- Exclusion

2.2.7 Institutional abuse

Abuse by an organization imposing rigid and insensitive routines; poor practices embedded in systems, unskilled, intrusive or invasive interventions; or any environment allowing inadequate privacy or physical comfort.

2.2.8 Financial abuse

The unauthorized, fraudulent obtaining and improper use of funds, property or any resources of a vulnerable person.



2.2.9 Bullying

In some cases of abuse it may not be an adult that is the abuser. It could be that the abuser is another child, young person or vulnerable adult, for example in common cases of bullying. Bullying may be seen as deliberately hurtful behavior, usually repeated over a period of time, where it is difficult for those being bullied to defend themselves.

Although anyone can be the target of bullying, victims are often shy, sensitive and perhaps anxious or insecure. Sometimes they are singled-out for physical reasons – being overweight, physically small, having a disability or belonging to a different race, faith or culture.

Research shows that bullying can and does occur where there is inadequate supervision – on the way to and from activities, at sporting events and in changing rooms etc.

2.3 Responding to Concerns

Introduction

It is not the responsibility of those working or volunteering in sport to individually decide whether abuse or poor practice is occurring. However, it is the responsibility of all to report any concerns to the appropriate agencies.

The extremely sensitive nature of issues regarding abuse should be understood by all along with the need for appropriate confidentiality.

Concerns about possible abuse can arise through:

- A direct **disclosure** by a vulnerable person of poor practice/abuse
- An **allegation** of poor practice/abuse by a third party
- A **suspicion** that poor practice/abuse may have taken place based on other signs Or indicators.

If a vulnerable person indicates that he/she is being abused or information is obtained or observations made which give rise to concerns, the response should be immediate. The procedures which have been developed to deal with allegations of suspicions about abuse are based on the fundamental principle that the welfare of children and vulnerable people is paramount. See flowchart located in Appendix Two for dealing with concerns.

2.3.1 General response

Immediate action should be taken if concerns arise about the safety and welfare of a vulnerable person within their family or the community (e.g. At home, project field & office). If the child, young person or vulnerable adult reports (discloses) this directly, the person receiving the information should:

- React calmly so as not to frighten or deter the informer
- Listen carefully to all the information that is disclosed
- Reassure the discloser that they are not to blame and were right to tell, but that the disclosure cannot be kept secret (by law) and must be reported to the proper people.
- Where appropriate, ask open questions to establish clarity of what is being said whilst taking great care not to ask leading questions and not pry into intimate details, ensuring the discloser does not feel they are being interrogated
- Ensure the safety of the person if they need immediate medical treatment, call an ambulance and inform that a child or vulnerable adult protection issue is suspected. Professional medical services should know how to respond appropriately
- Reassure the child, young person or vulnerable adult but not make promises of confidentiality which might not be feasible in the light of any subsequent developments
- Not contact parents or carers until professional advice is sought from Social Care Services.



The following should be avoided by the recipient of a disclosure:

- Do not panic or try to resolve the issue yourself
- Do not allow shock or distaste to show
- Do not probe for more information than is freely offered to open questions
- Do not speculate or make assumptions about what may have happened
- Do not make any comments about the alleged abuser
- Do not make any approach or comment to the alleged abuser
- Do not make promises or agree to keep secrets.

2.3.2 Sharing concerns with parents or carers

There are some circumstances where a child, young person or vulnerable adult may be placed at even greater risk if concerns are shared (e.g. where a parent or carer may be responsible for the abuse or not able to respond to the situation appropriately). If unsure whether to discuss concerns or an incident with the parent/carer then contact KKM & NOPLA Care (see appendix one).

Any suspicion, allegation or incident of abuse must be reported as soon as possible at which point the procedures detailed within this policy will be followed.

2.3.3 KKM & NOPLA staff response to a disclosure, complaint or concern

Any staff member who receives a disclosure, complaint, or concern should report to an KKM & NOPLA Designated Safeguarding Officer (DSO) as soon as possible:

The DSO will take action to forward the details to the relevant professional body.

If a DSO cannot be contacted and there is immediate concern, contact should be made directly with Essex Social Care Direct (see appendix one), or where immediate risk of harm is suspected, contact the police.

The next steps are as follows:

- 1) A Report Form should be completed either with the DSO or passed to the DSO as soon as possible
- 2) The DSO will contact the appropriate professional body (Police, Social Care or other sports organization)
- 3) The DSO will record the details of the response
- 4) Where a report has been made, written or verbal, to a professional body, the DSO will followup to confirm that the information has been received
- 5) Where advice is given to a third party to contact statutory services, the DSO should also follow-up to confirm what action has been taken by the third party.

2.3.4 Confidentiality and storage of information

Any confidential information must be stored in a secure location within the KKM & NOPLA office. Confidentiality should be maintained for all concerned and access limited to designated people. The people designated to receive information are:

- KKM & NOPLA Designated Safeguarding Officers
- Appropriate social care personnel
- The Police
- The parents of any child who is alleged to have been abused
- The person making the allegation
- The alleged abuser (and parents if the alleged abuser is a child)*

2.3.5 Responding to suspicions about staff

Staff, for this purpose, includes anyone working on behalf of KKM & NOPLA in a paid or voluntary capacity.

Having reviewed the situation the DSO will discuss with the Deputy DSO (and if required with statutory agencies) and will make a decision as to whether the matter should be referred for external investigation to Social Services or if the incident can be dealt with internally e.g. failure to observe good practice.



2.3.6 Responding to allegations against staff

The following steps should be followed when an allegation is made against an KKM & NOPLA member of staff:

- Concerns should be reported to the DSO and an Incident Report Form completed
- Any allegation which may be related to a staff member **must** be reported immediately by the DSO KKM & NOPLA Directors. If the allegation concerns a child or young person.
- Where the concern is about an individual who is a volunteer and not employee, the SDO should refer to the statutory services
- The staff member may need to be suspended from work whilst the matter is investigated according to the existing disciplinary procedures operated by KKM & NOPLA. Any action will be taken in consultation with statutory agencies. Where this is deemed necessary, consideration should be given as to whether the accused is allowed to access potentially incriminating evidence, or devices which may contain this
- Suspension will not be automatic and the decision will take into account the relevant circumstances and advice from statutory agencies
- The reinstatement of an individual will follow procedures operated by KKM & NOPLA following the conclusion of any investigations (both internal and external) and an assessment of all available relevant information.

2.3.7 Support for the reporter of suspected abuse

A variety of feelings and concerns may be generated by the discovery that a member of staff or a volunteer is, or may be, abusing a vulnerable person and this may raise concerns amongst other staff and volunteers.

KKM & NOPLA will fully support all staff and protect anyone who, in good faith and without malicious intent, reports his or her concern about a colleague's practice or the possibility that a person may be being abused.

Details of disciplinary and grievance procedures

2.3.8 Types of Investigation

When there is a complaint of abuse against a member of staff or volunteer, the following types of investigation may occur:

- Criminal; Police
- Child Protection; Social Services/Police

It is also a possibility that civil proceedings could be initiated by the alleged victim, or by their family, or indeed the person who has been accused.

2.3.9 Allegations of previous abuse

There are situations that may arise where an allegation of abuse is made some time after the event has happened, this may be months or on occasion even years. Where an allegation such as this is made, the allegation should still be investigated as other vulnerable people could potentially be at risk from the accused.



Appendix One – Useful Contacts

Active Essex Safeguarding Contacts

Deputy Designated Safeguarding Officer:

Miss K Deborah

Telephone: 0771644052 Email :depore.86@gmail.com

Reporting updater

Mrs Nalini Navaratnam

Telephone 0760191056

Email; sairamnalini@yahoo.com.au

KKM address: KKM, 566, Nagathambiran Road, Ananthapuram East Kilinochchi

National Social Care protection unit

1929 Child-line Sri Lanka

National Child Protection Authority, No. 330, Thalawathugoda Road, Madiwela, Sri Jayawardenapura, Sri

Leading Designated Safeguarding Officer:

Mrs K Subajini

Telephone: 0767493437

Email: nsuba1985@gmail.com

Lanka.

Tele: +94 11 2 778 911 - 12 - 14

Fax: +94 11 2 778 915

Email: ncpa@childprotection.gov.lk Web: www.childprotection.gov.lk

KKM & NOPLA Safeguarding Policy

Appendix Three - Dealing with Safeguarding Calls or Messages for KKM & NOPLA Staff

Received by telephone or verbally

The call should be passed immediately to a DSO. Do not transfer the call, you may inadvertently cut-off the caller. If no DSO is available use the form below to record details:

Time of call/report:	Date of call/report:	Taken by:	
Caller/reporter's details:			
Name			
Contact number			
Relationship to person(s) at risk			
Person(s) at risks details:			
Name			
Address			
Contact number			
Are they aware of your concern?			
Person suspected of committing the	he		
poor practice or abuse:			
Name			
Address/Location			
Relationship to person(s) at risk			
Are they aware of your concern?			
Details of concerns/incident:			
Questions to ask -			
What has happened?			
Why are you concerned?			
When did this happen?			
Where did this happen?			
Has anyone else been informed?	(who?):		
Is there any immediate danger?		If yes, advise to call emergency services (1929)	
Signature			