



CHILDREN SAFEGUARDING POLICY - ANNEXES

First Children's Embassy in the World Megjashi

ABSTRACT

All children, wherever they live and whatever their circumstances, have the right to be protected, nurtured and free from all forms of violence, abuse, neglect, maltreatment and exploitation as set out in the Convention on the Rights of the Child. Respecting and supporting this right is the essence of child safeguarding.

Contents

Annex 1. Character references	2
ANNEX 2. Flowchart for raising concern.....	3
Annex 3 Reporting forms	4
ANNEX 4. STATEMENT OF ACCEPTANCE.....	7
ANNEX 5 – ACCOUNTABILITY IN THE ORGANISATION.....	8
ANNEX 6. CONSENT FORMS.....	10

Annex 1. Character references

Please provide the name, address and contact details of two character references you have known for no less than 2 years, excluding family members:

Name:	Name:
Address:	Address:
Contact number:	Contact number:
Email:	Email:

Declaration of Criminal Convictions

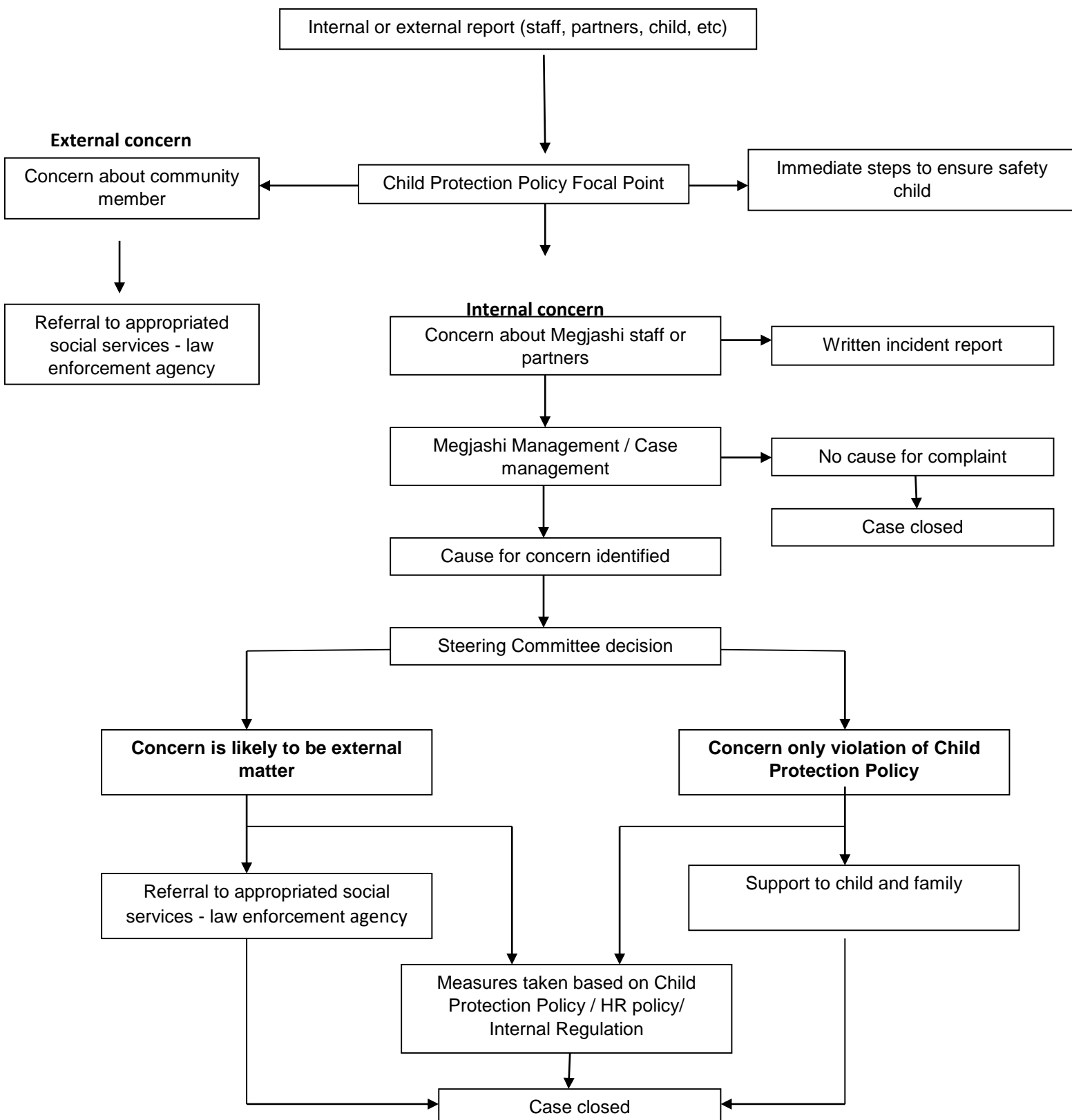
Have you ever been convicted of a crime? **Yes**____ **No** _____

If yes, please provide details of all criminal convictions, including those considered 'spent', and declare any previous investigations or allegations made against you. These will be kept confidential by the designated Child Protection Focal Person in organization, who will assess whether they pose any risk or are not in conformity with Organization's Child Protection Policy.

ANNEX 2. Flowchart for raising concern

*Confidentiality will be respected all along the process.

Child protection concern **IDENTIFIED**



Annex 3 Reporting forms

Child Protection Incident Report Form			
Email this form to ...@childresembassy.org.mk within 24 hours of making a verbal report.			
Date of report:			
Reported by:			
Your name:		Your position:	
Your phone number(s):		Your email address:	
Person being protected (the victim)			
Family name:		First name:	
Date of birth:	Gender:	Nationality/ethnicity:	
Address and contact details:			
Who does the child live with?			
Are any other children involved?			
Person who caused the problem (the offender)			
Family name:		First name:	
Date of birth:	Gender:	Date of birth:	
Address and contact details:			
Does this person works with Megjashi?			
What is this person's relationship with the child?			
If there are two or more people who caused the problem, please add details at the end of this report.			
Facts (details of the incident/report)			
Date of incident:	Time of incident:	Location of incident:	
How did you become aware of the incident?			
<input type="checkbox"/> I witnessed it <input type="checkbox"/> Other staff told me <input type="checkbox"/> Victim told me <input type="checkbox"/> Other (please specify)			
Were there any other witnesses to the incident? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide name, position and contact details:			
Please describe the specific child abuse incident:			
Protection			
What immediate action has been taken to protect the child?			

REPORTING FORM FOR NEAR MISS REPORTING

Near miss reporting is an important part of ensuring that operations are safe and secure for children but also an important element in continuously strengthening and improving our own operations and our procedures. Reporting must be carried out irrespective of the level of risk; anything that increases the risk of harm to children must be reported.

- You must submit a near miss report if you discover failings in our operations that could have breached the Child Safeguarding policy but where no child has come to harm as yet.
- Near miss reporting is a means of continuously improving our operations and reducing the risk of incidents.

About the risk or shortcoming in our operations <i>(A separate sheet must be completed for each risk to ensure follow-up and corrective action.)</i>
Describe the risk <i>(What is the shortcoming, in what way our programmes failing, how was the shortcoming discovered?)</i>
Where/Affiliation: <i>(Describe relevant affiliation: Activity / Local association / Project / Programme / Region / Section / Department.)</i>
When did the near miss occur?
Who is responsible for the programmes?
Are any other organisations affected? <i>(State other organisations working on this operation.)</i>
Any proposed corrective action:
Other relevant information:
Have you reported to other staff within FCEW Megjashi or another organisation? <i>(Enter the name of the organisation and the person to whom the report was made, date and time.)</i>
Advice from the other organisation: Corrective actions taken by FCEW Megjashi and time frame for response: <i>(What actions have you taken locally, referrals, reports, to whom and when.)</i>
Your name and your role within FCEW Megjashi: Signature and position of person making the report:

Date and place:

Name of contact person or manager to whom the report has been sent, and date:

FOLLOW-UP

To be completed by responsible contact person in consultation with the person responsible for the operation in question

Describe the corrective action decided on:

Time plan for corrective action *(date by when the failing shall be remedied)*

Shortcoming/risk remedied: *(date)*

ANNEX 4. STATEMENT OF ACCEPTANCE

FOR CHILD SAFEGUARDING REPORTING

Signed declaration for all staff and all representatives¹ of FCEW Megjashi and our partner organisations

I hereby certify that I have read and understood FCEW Megjashi's Children Safeguarding Policy.

I undertake to abide by all aspects of FCEW Megjashi's Children Safeguarding Policy, including the personal and professional obligations it entails.

I understand that a serious breach of FCEW Megjashi's Children Safeguarding Policy may be grounds for FCEW Megjashi to terminate my employment and/or any connection with FCEW Megjashi.

I also understand that certain behaviours that breach FCEW Megjashi's Children Safeguarding Policy may have consequences under criminal law.

As part of the appointment process, I undertake to provide an extract from the police records registry, if such a request is permitted by law, before taking up employment/an engagement/position of trust.

Signature _____

Print name _____

Date _____

¹ All active members, volunteers and employees, including Assembly members, ambassadors

ANNEX 5 – ACCOUNTABILITY IN THE ORGANISATION

FOR CHILD SAFEGUARDING REPORTING

Area of responsibility	Person responsible
1. Ensuring that the vulnerable child is protected from any further irregularities and has received medical attention if required.	Child Safeguarding Focal Person
2. Deciding whether the matter shall be subject to further investigation internally or be referred to an external organisation, or whether the case is of a criminal nature and shall be reported to the police.	Responsible section manager
3. Ensuring that Child Safeguarding becomes a clear part of the recruitment process for new staff and volunteers from the advertising stage, through interview and taking up references, and until a contract of employment is signed. Both the Child Safeguarding Policy and Code of Conduct represent part of the contract of employment and must be signed separately.	HR partner/Recruiting manager (employee)/Chair of local association (volunteer)
4. Ensuring that all staff and volunteers within FCEW Megjashi will reflect FCEW Megjashi commitment to creating safe and secure operations for children by having appropriate control procedures in place for new appointments to flag up warning signs in persons who are unsuitable to work with children: o An extract from the police's criminal records registry (Sweden) or another relevant authority (foreign postings) is requested in connection with a new appointment. Extracts shall be updated every two years. o Highlight Child Safeguarding in introductory training and in follow-up seminars. o Complete relevant online training in Child Safeguarding.	Recruiting manager (employee)/Chair of local association (volunteer)
5. Ensuring that all partner organisations or organisations that have a formal/contractual relationship with FCEW Megjashi, and whose staff have contact with children, have included the following requirement in the contract: o That staff shall act in accordance with the present policy or in accordance with the partner organisation's own policy/Code of Conduct that is/are of an equivalent standard	Responsible manager (partnership)/Chair of local association
6. Ensuring that a risk assessment has been carried out for activities/programmes involving direct or indirect contact with children.	Responsible section manager/ Chair of local association or district
7. Designating contact persons for head office/regional office/coordinator for member organisation.	Responsible section manager/ Chair of local association or district
8. Ensuring that contraventions of the policy are investigated in accordance with established reporting paths.	Contact person

9. <i>Monitoring application of the policy</i>	Contact person
10. <i>Ensuring that everyone who visits FCEW Megjashi operations is informed of and follows the policy.</i>	Person responsible for the operation
11. <i>Ensuring that local procedures are established.</i>	Contact person
12. <i>Ensuring that the policy is translated into the most widely used languages as required.</i>	HR Director
13. <i>Ensuring that all managers and board members are provided with the policy and kept up to date with any changes.</i>	HR Director
14. <i>Reviewing and updating the policy as required.</i>	HR Director
15. <i>Reporting to the Board of Trustees and managers on a regular basis.</i>	HR Director
16. <i>Maintaining a confidential central archive of all reported notifications.</i>	HR Director

ANNEX 6. CONSENT FORMS

PERSONAL INFORMATION AND INFORMATION IN CASES OF EMERGENCY

Your name and age:	
You address:	
Your phone/cellphone number:	
Email:	

Are you happy to take part in (e.g. meeting/event/etc)?

Please tick Yes or No:

Yes

No

WE WANT TO MAKE SURE YOU FEEL WELCOME AND COMFORTABLE TO TAKE PART

Do you have any allergies we should know about?

Yes

No

Details:

Do you have any additional support needs you'd like us to know about (physical or learning disability, mental health issues, low confidence, difficulties with communication, things you find it hard to talk about)?

Yes

No

Details:

Is there anything extra we can do to make sure that you can come along and participate fully?

Yes

No

Details:

Are you taking any medication we should know about?

Yes

No

Details:

Do you have any dietary requirements?

Yes

No

Details:

If you practice a religion, please tell us if there's anything connected to taking part in the event that we should know about?

Details:

IN THE EVENT OF EMERGENCY

Contact persons in case of EMERGENCY. It is very important you fill in this section fully

Name 1:	Name 2:
Relationship to you:	Relationship to you:
Phone/cellphone number:	Phone/cellphone number:
In the event of emergency, do you agree that you can receive hospital or dental treatment, including an anaesthetic?	Details:
Yes No	

<p>My Consent Signature:</p> <p>Location (where you live):</p> <p>Today's date:</p>	<p>Parent/Legal Guardian Consent (if under 18) This child/young person under 18:</p> <ul style="list-style-type: none">• is allowed to participate in(event).• is allowed to take part in media activities at (event).• has been informed about the (event) goals, the voluntary nature of participation and anonymity in an age-appropriate way.• has been informed that they can refuse to participate at any time with no consequences.• is allowed to receive appropriate medical attention from a registered practitioner if at any time my child requires urgent medical attention. <p>Full name:</p> <p>Relationship to child/young person:</p> <p>Location:</p> <p>Date:</p>
---	--

MEDIA CONSENT FORM

WE WANT TO MAKE SURE YOU FEEL COMFORTABLE TO TAKE PART IN MEDIA ACTIVITIES

Organization and its Communications Team are actively promoting
(e.g. activities/ events/etc). We publish photos and or statements of participants. In this way we inform the public and decision makers about (event)

If you or your parents/carers are interested in following the social media, you can do this by following the Facebook page and the website.

Is it okay for you participate in visual documentation during the organization..... (event)? If you say it is ok, we might share photos, film, audio, writing on our website or social media; in our reports or leaflets; at our events; and/or in the promotion work we do to promote children's rights and support children.

Please tick Yes or No:

Yes

No

Is it ok for us to capture your voice in film, photos, audio, writing and/or art and to share this content in the ways listed above?

Please tick Yes or No:

Yes

No

Is it ok if we tell people your first name when we share this content? (you can still take part in (event) even if you don't want us to tell people your name).

Please tick Yes or No:

Yes you can share my first name

No you cannot share my first name

Is it ok for you to talk to the press during(event) (including photos, television/video/camera coverage)? All media interviews will be conducted in consultation with and in the presence of your accompanying adult and a Organization staff member. You have a right not to respond to any questions that you do not want to answer.

Please tick Yes or No:

Yes

No