

Child Protection and Safeguarding Policy

Beecroft Academy & The Beehive SureStart Children's Centre

Child Protection and Safeguarding Policy

Lead Designated Officer for Child Protection: James Hughes (Headteacher)

Assistant Designated Officers: Rachael Clark (Well-Being Liaison Officer) Michelle Hart (Children's Centre Coordinator)

Purpose

At Beecroft Academy and The Beehive SureStart Children's Centre we recognise:

- Our statutory duty under Section 175 of the Education Act 2002 to ensure that arrangements are in place for safeguarding and promoting the welfare of children.
- Our duty under the Children Act 2004 to work together with other organisations and partners in order to achieve this, and
- Our Common Law duty to protect and keep children safe whilst in our care.

We fully acknowledge our responsibilities for child protection and recognise that through our day to day contact with children, our staffs are well placed to identify signs of risk and harm.

We recognise that for children high self-esteem, confidence, risk awareness and good lines of communication help to reduce risks. We recognise that for some of our children our organisation may be the only stable, secure and consistent environment in their lives.

We will make all parents/carers aware of the role and responsibilities of the organisation with regards to safeguarding and promoting welfare and of the existence of the school's Child Protection and Safeguarding Policy by including related information in the school's prospectus and displaying related information on a notice board in the Children's Centre. A copy of this policy will be made available to parents/carers and service users upon request.

Aim

We aim to provide a safe, secure, inclusive and consistent environment for all our children regardless of age, race, religion/belief, disability, gender, pregnancy/maternity, transgender or sexual orientation; one in which they feel safe, supported, valued, respected and listened to. We will do this by:

- Establishing an environment in which children are and feel safe and can learn, develop and have a voice.
- Adopting safe recruitment practices to check the suitability of both staff and regular volunteers and visitors. We will also ensure that procedures are in place to prevent the unsupervised access to children of adults who have not undergone such a checking process.
- Raising the awareness of children and equipping them with the skills and knowledge needed to keep safe.
- Having in place procedures for the identification and reporting of cases where harm or risk of harm to a child is suspected and ensuring that all staff are aware of such procedures.

- Supporting those who have suffered abuse or neglect or who are otherwise vulnerable (for example, children living away from home), where appropriate, in accordance with their agreed child protection/care plan.
- Having measures in place to facilitate and promote the safe use of technology (in line with the Local Authority Guidance: ***Keeping Children Safe in Education, July 2015***. Monitoring and reviewing our safeguarding and child protection practices and procedures.

Roles and Responsibilities

We recognise that all staff, regardless of their role, have a duty to safeguard children and promote their welfare. Our policy applies to the whole school community, including the Children's Centre: all teaching and non-teaching staff, governors, volunteers and visitors. The Board of Governors and Designated Person for Child Protection have particular responsibility for safeguarding and child protection.

Establish an environment in which children are and feel safe and can learn, develop and have a voice by:

- Ensuring that our buildings and site are secure and that all visitors are properly checked and supervised.
- Having a Health & Safety Policy and procedures and ensuring that they are understood by all staff.
- Adhering to the guidance detailed in the ***Keeping Children Safe in Education, July 2015*** document when considering issues related to intimate and personal care.
- Ensuring that the Physical Intervention Policy is understood by all staff.
- Ensuring that all staff are risk aware and routinely conduct risk assessments, as appropriate to their individual role and responsibilities and activities undertaken. For example, when children are going on a trip or visit, or when an activity involving potentially harmful equipment is being planned.
- Having policies for dealing with behaviour, bullying and racist and other discriminatory incidents and ensuring that staff adhere to these policies and promote the principles of value, respect, tolerance and acceptable behaviour amongst our children. (see Appendix 3 for issues relating to safeguarding and discrimination).
- Ensuring that all staff, governors, regular visitors and volunteers have been made aware of ***Keeping Children Safe in Education, July 2015*** document and work to the guidance contained therein. All staff are provided with a copy of the document and are asked to sign to say they have received and read it.
- Following Bedfordshire's LSCB procedures (*LSCB Procedures for Managing Allegations and Concerns Regarding Staff, Carers and Volunteers Working with Children and Young People: 2011*) for dealing with allegations and concerns about staff (paid or unpaid, temporary or permanent). Where such an allegation or concern arises, the Headteacher/Children's Centre Manager should be notified. He/she will notify the authority's Allegations Manager (also known as the Local Authority Designated Officer or 'LADO'). Where such an allegation is made against the Headteacher/Children's Centre Manager, the matter will be referred to the Chair of Governors who will likewise notify the Authority's Allegations Manager.
- Ensuring that all staff and volunteers feel able to raise concerns about poor or unsafe practice with regard to children's deficiencies or weaknesses will be brought to the notice of the Governing Body and steps taken to remedy these without delay. The Headteacher/Children's Centre Manager will have responsibility for this.
- Having a whistle-blowing and complaints procedure which is communicated to stake holders (as appropriate).
- Maintaining an environment where children feel safe, equal and valued, and are encouraged to talk and are listened to.

Adopt safe recruitment practices to check the suitability of both staff and regular volunteers and visitors to the school. We will also ensure that procedures are in place to prevent the unsupervised access to children of adults who have not undergone such a checking process. We will do this by:

- Following Department for Children, Schools and Families (DCSF) guidance as set out in Part 3 of *Keeping Children Safe in Education, July 2015* to ensure that safe recruitment and selection practices are carried out. Enhanced Criminal Record Bureau (CRB / DBS) checks will be completed and references and identification verified for all staff. Regular volunteers, visitors and contractors will be vetted.
- Ensuring that all staff are aware that where occasional or one-off visitors, contractors or volunteers have not undergone such a process, they will not have unsupervised access to children and as appropriate formal risk assessment processes will be undertaken.
- Maintaining a regularly updated Single Central Record (SCR) that accurately records vetting check data for all employees, volunteers and contractors which will be scrutinised as part of an Ofsted Inspection – this will include the ‘Prohibition Check’.
- Ensuring that at least one member of the Board of Governors and the Headteacher/Children’s Centre Manager have received training on safer recruitment practices.
- Ensuring that all interviews for staff have at least one person on the panel who has completed safer recruitment training.
- Ensuring that during the process of advertising and recruiting for staff vacancies, the organisation’s commitment to safeguarding and safer recruitment practices will be made explicit.
- Referring concerns about the suitability of staff to work with children and young people to the Independent Safeguarding Authority in cases where that individual is believed to have harmed or to pose a risk of harm children or vulnerable adults.
- Ensuring that adults involved in the provision to children of extended services and school activities outside of normal school hours are subjected to the same level of vetting and or security arrangements as other staff and volunteers.
- Ensuring that where School/Centre premises are used by other bodies both during and outside school hours, the Governing Body will be responsible for seeking assurance that the body concerned has appropriate policies and procedures in place with regard to safeguarding children and child protection (In accordance with *Keeping Children Safe in Education, July 2015*)

Raise the awareness of children and equip them with the skills and knowledge needed to keep safe by:

- Including opportunities through the PSHCE curriculum and the Children’s Centre provision for children to develop the skills they need to recognise and stay safe from abuse.
- Ensuring that children know that there are adults in the school whom they can approach if they are worried.

Have procedures for the identification and reporting of cases where harm or risk of harm to a child is suspected and ensure that all staff are aware of such procedures. We will do this (in adherence with the guidance set down in *Keeping Children Safe in Education, July 2015 and What to do if You’re Worried a Child is Being Abused (March 2015)* and by:

- Allocating a member of the school’s leadership team to the role of lead ‘Designated Person’ for child protection. This role is currently carried out by the Head Teacher (Mr. J Hughes) /Children’s Centre Manager.
- Having at least one named member of staff to deputise in the absence the main designated person. This role is currently carried out by the Well-Being Liaison Officer (Miss. R. Clark)

Providing time and support for these roles through the Children's Centre Coordinator Well-Being Liaison Officer.

- Ensuring that appropriate training for staff performing this role is enabled and updated as necessary or in any case, every 2 years as a **minimum**.
- Having a nominated governor responsible for child protection/safeguarding who will review our safeguarding and child protection policies, procedures and practices regularly and be the link person between the designated member of staff for child protection and the Governing Body. This role is currently carried out by **Mrs. S. Dutnall**
- Having processes in place to ensure that all new staff receive safeguarding training appropriate to their role, as part of their induction and thereafter have access to refresher training as required, or in any case, every 2 years as a minimum. **Level 1 Safeguarding for all staff (was undertaken at the INSET training on September 3rd 2015, Governors training December 2015). KCSIE and Prevent training for all staff 2nd November 2015.**
- Ensuring that every member of staff (employed directly or indirectly via another organisation; permanent and temporary), volunteer and governor is aware of this policy together with other relevant safeguarding policies or guidance and that they are also aware of their own role in safeguarding/ promoting welfare and of the identity and role of the designated person/s.
- Requiring **all** staff and volunteers, to report **any** safeguarding concerns, **in writing** (using the appropriate 'record of concerns' form located in the Office and Finance Manager's Office and/or the Children's Centre Coordinator's Office), to the Designated Person for Child Protection, regardless of whether or not they feel that the concern is either serious or substantiated. This expectation will be communicated through regular training, staff briefings and induction training (**updated with all staff September 2015**). **Any new staff from 2014 will be immediately placed on Level 1 Safeguarding.**
- Ensuring that staff are aware of the signs and indicators that may suggest a child is at risk of extremism. Staff must be aware of the escalation process and contact details in order to report any concerns. The Department for Education has launched a helpline for anyone concerned about a child who may be at risk of extremism, or about extremism within an organisation working with children and young people. Contact details are by telephone on 0207 340 7264 or email counter.extremism@education.gsi.gov.uk.
- Enabling the Designated person for Child Protection to make decisions regarding the action to be taken following a concern being brought to his/her attention. Where appropriate, this may follow consultation with other organisations, such as Children's Social Care.
- Ensuring that where there is a suspicion that a child might have suffered or be at risk of suffering significant harm, the matter will be referred to Children's Social Care or the Police Service in accordance with **Keeping Children Safe in Education, April 2015**). This will normally be done via the Designated Person for Child Protection or their Deputy; unless they are not available and to wait for them to become available would pose a delay which would be unacceptable given the individual circumstances of the case.
- Sharing information (*in line with the LSCB Information Sharing Protocol*) with relevant professionals in order to monitor, support and protect children thought to be at risk of harm.
- Ensuring that where the Designated Person believes that a decision made by another professional exposes a child to risk/continuing risk of significant harm, they will ensure that the fact that they disagree with that decision is recorded; both by them and where possible on relevant minutes and case papers held by other professionals involved. They will also escalate the matter, as per the Local Authority Protocol (Appendix 1).
- Making the Designated Person/s for Child Protection responsible for creating and maintaining written records in respect of all children for whom child protection concerns have been identified, regardless of whether there is a need to make an immediate referral. These confidential records, which will be kept securely and separate from the main pupil file, will include a chronology of events (see below for the chronology template).

| Date | Issue/Concern | Action | Signature |
|------|---------------|--------|-----------|
| | | | |

NB In school, the pupil's main file will indicate the existence of a separate safeguarding/child protection file using a pink form.

- Providing and, as appropriate, soliciting additional support from other professionals, for all vulnerable pupils/students including those with disabilities, minority status and those with a history of abuse. Where a child is believed to be a 'child in need' of additional support/services and the threshold for significant harm or Children's Services Social Care intervention is not met, the Designated Person will seek the consent of parents/carers/child/young person (as appropriate) to assess the needs and solicit support as appropriate. Needs may sometimes be met within the School/Centre community or by making a single agency referral or through multi-agency collaboration via the 'Early Help Assessment' (EHA) and Team around the Child (TAC) process as appropriate.
- Ensuring that issues of confidentiality are understood by all staff, including the need not to offer confidentiality in certain situations. This will be communicated through training.
- Developing effective links with agencies which provide support to our vulnerable pupils and co-operate as required with their enquiries regarding child protection matters.
- Providing advice and support for all staff members who are dealing with a pupil for whom their concerns are stressful and upsetting.
- Supporting the Authority's policies on school attendance and children missing education and in particular by adhering to the missing children procedures (for additional information related to school attendance, see the School's 'Attendance Policy').
- Ensuring that staff are aware of and work to LSCB procedures with regards to sexually active young people (*Protocol & Guidance; Working with Sexually Active Young People, 2011*).

Support pupils who have suffered abuse or who are otherwise vulnerable (for example, children living away from home), where appropriate, in accordance with their agreed child protection/care plan by:

- Maintaining close communication between the School/Centre and allocated Social Worker and ensuring that the Social Worker will be informed of any issue that gives cause for concern.
- Providing sufficient resources and time with regards to safeguarding and releasing staff in order that they can participate in safeguarding/child protection processes, core groups and meetings (especially child protection conferences and child in need meetings).
- Closely monitoring any child subject to a child protection plan, or otherwise believed to be at risk of harm.
- Completing activities as required in accordance with a child protection/care plan.
- Ensuring that the attendance of any child subject to a child protection plan, or otherwise believed to be at risk of harm, is closely monitored.
- Ensuring that where there are concerns about the absence from school of a child for whom there are child protection concerns, the identified staff will bring the absence to the immediate attention of the Access and Inclusion Service. In these circumstances, a Local Authority School Attendance Officer will prioritise a visit to the child's home. Where the child is an open case to Children's Services Social Care, they should also be notified. In the Children's Centre where there is a child or children about whom there are child protection

concerns, and they have not been seen for some time in the Centre, contact will be made with the family's Social Worker to report this.

- Notifying the Fostering Duty Desk when children come to our attention as being cared for in 'private fostering arrangements' (see appendix 2 for definition of 'private fostering') in accordance with LSCB *Inter agency Safeguarding Policy on Private Fostering* (2007).
- Making the Designated Person/s for Child Protection responsible for arrangements to ensure that a **copy** of each child protection file (where one exists) is securely transferred in a timely fashion to the Designated Person at the receiving school/college when a pupil/student transfers. This file will be transferred separately from the main pupil record and a written acknowledgement of receipt will be obtained. The original file is retained by this school. In the Children's Centre, information from each child's file is shared with the appropriate bodies and a copy is sent to a child's school once they are old enough to attend if this is deemed appropriate (originals are retained securely).
- Ensuring that, where a child has an allocated Social Worker, they are informed of any change in that child's circumstances.

Having measures in place to facilitate and promote the safe use of technology (in line with the Local Authority Guidance *e-Safeguarding: Creating Working Procedures in Schools* (2009)) by:

- E-security: keeping the electronic data we hold about pupils and families secure (see the organisation's 'E-Safety and Acceptable Use Policy for further details).
- Ensuring that all staff are appropriately trained in E-safety.
- E-safety: promoting e-safety awareness amongst children and their parents/carers and ensuring all members of the school community know their access rights and responsibilities in using ICT (see the organisation's 'E-Safety and Acceptable Use Policy for further details)..
- Having an Acceptable Use Policy in relation to the use of technology (including mobile phones and photographic equipment) in the School/Centre and which contains the detail of how we will achieve e-security and promote e-safety.
- Conducting, through the Governing Body, an annual review of the School/Centre's Acceptable Use Policy.
- Ensuring that the School/Centre's internet connection and any system connected to it, is filtered using a filtering system which is accredited to current approved standards thus ensuring inappropriate content of whatever nature is blocked (including racist, discriminatory and hate material, material which promotes violence or attacks on individuals or institutions on the basis of disability, race, religion/belief, gender, gender reassignment or sexual orientation grounds).
- Ensuring that all members of staff with access to ICT systems are responsible for taking the appropriate steps to select and secure their passwords.
- Making staff, children, parents/carers and service users aware that all of the organisation's ICT activity and on-line communications may be monitored, including any personal and private communications made via the network.
- Conducting an annual assessment of information risks, which will be reported to the Governing Body.
- Making all staff, children, parents/carers and service users aware that they have a responsibility to report e-safety or e-security incidents.
- Establishing an incident reporting procedure and recording reported incidents in an Incident Log (in Line with Local Authority Guidance *e-Safeguarding: Creating Working procedures in Schools* 2009). The Incident Log shall be formally reviewed and any outstanding actions delegated, by the Senior Leadership Team at a minimum frequency of once per term. Through this review process, management shall update the risk assessment in light of new incidents as appropriate.

- Carrying out, through The Governing Body, an annual review of this Incident Log and accompanying action plans.

We will monitor and review our safeguarding and child protection practices and procedures in line with this policy by:

- Ensuring accountability by placing ultimate responsibility for safeguarding, child protection and this policy with the Governing Body and responsibility for the implementation of this policy with the Head Teacher/Children's Centre Manager.
- Ensuring that the Designated Governor for Safeguarding and Child Protection has regular meetings with the Designated Member of Staff for Child Protection, in order to monitor and assess the effectiveness of the school's response to safeguarding and promoting welfare, in line with this policy. As necessary, action plans will be formulated to address areas for development. This will happen as required or in any case, as a minimum, once every term.
- Identifying and responding to new/revised guidance issued by government bodies, the Local Safeguarding Children Board and the Local Authority.
- Reviewing this policy on an annual basis.

James Hughes + Rachael Clark
(Headteacher)
December 2015

Appendix 1

Local Authority Escalation Procedure

A formal Local Authority Escalation Procedure ***Resolution of professional disagreements relating to the safeguarding of children & the escalation of professional concerns (2010)*** is available on the LSCB website and should be consulted in the event of professional disagreements. However, some general principles are shown below.

If you feel that a decision made by another professional leaves a child at risk of harm:

- Articulate your views.
- Ensure that the fact that you do disagree with the decision is recorded in writing; both by you and where possible on relevant case papers held by other professionals involved.
- Ask for the other professional to provide written confirmation of their decision and their reasons for it.
- Discuss the case with a fellow safeguarding professional, (whilst taking care to observe the bounds of confidentiality) this may help to clarify matters and identify the best way forward.
- Don't be afraid to challenge the decision but be ready to justify your reasons and where possible support with evidence. (Record details in writing.)
- Where the threshold for significant harm has either not been met or is no longer being met, continue to refer new information around risks or concerns which come to light. New information may alter the level of identifiable risk and tip the balance in favour of intervention.
- If you believe that a decision made by another professional exposes a child to risk/continuing risk of significant harm **NEVER DO NOTHING!** That you should challenge is not just 'ok'; it's expected.

In line with *Resolution of professional disagreements relating to the safeguarding of children & the escalation of professional concerns (2010)*, the usual protocol is that where matters are escalated, discussions take place between individuals of similar levels of seniority. Therefore it

might be that representations are made by a more senior member of staff on behalf of the Designated Person, for example, the Head Teacher.

Appendix 2

Definition of Private Fostering

A private fostering arrangement is one that is made privately (that is to say without the involvement of the LA) for the care of a child:

- Under the age of 16 (under 18 if disabled)
- By someone other than a close relative
- With the intention that it should last for 28 days or more.
- Private foster carers may be from the extended family such as a cousin or great aunt. However a person who is a relative under the Children Act 1989 i.e. a grandparent, brother, sister, uncle or aunt (whether full or half blood or by marriage) or a step parent will not be a private foster carer.

A private foster carer may be a friend of the family, the parent of a friend of the child or someone previously unknown to the child's family who is willing to privately foster a child.

The period for which the child is cared for and accommodated by the foster carer should be continuous – but that continuity is not broken by the occasional short break. A break in the period e.g. for a child to visit his/her parents at the weekend would not affect the nature of the placement as a private foster placement. For a break to restart in calculating the period it must result from the ending of one arrangement prior to the start of a new arrangement.

Where a child is under 16 years old and is a pupil at an independent school and lives at the school during the school holidays for a period of more than 2 weeks, he/she will be subject to private fostering regulations unless one of the exemptions below applies.

Where a child under 16 is studying at a language school for more than 28 days and stays with a host family he/she will be subject to private fostering regulations.

Exemptions

These are covered in Schedule 8 of the Children Act 1989 but the main exemptions are covered below.

Children will not be privately fostered:

- Where the arrangements last for less than 28 days and are not intended to extend beyond that period
- Where the child is looked after by a LA
- Where the child is living in a children's home or accommodation provided by/on behalf of a voluntary organisation
- A school in which he/ she is receiving full time education (either during term time or residing there less than 2 weeks of any school holiday)

- Where the child is placed by an adoption agency in the care of a person who proposes to adopt him/her or s/he is a protected child under the Adoption Act 1976 (section 32).

Taken from LSCB *Inter agency Safeguarding Policy on Private Fostering* (2007)

http://www.bedfordshirelscb.org.uk/pro_files/microsoftword-privatefosteringpolicy-finaloct07agreed.pdf

Appendix 3

Equality & Diversity Issues in Safeguarding & Child Protection

This appendix highlights how equality and diversity issues and characteristics can impact on the safety and well being of pupils.

General/Factors to consider

- Communication difficulties may exist as a result of language barriers, physical & learning disability or age. Children and young people with communication difficulties may not easily be able to let someone know that they are being abused.
- Some Ethnic Minority families are less likely to understand the role of Social Services, often because of language or cultural differences.
- The personal care or behaviour management of a child with disabilities may leave some families more vulnerable to accusations of abuse. Some practices, such as personal care, medical interventions, or restraint may be seen to be abusive.
- Parents and carers with a disability / health issue (including learning disabilities, mental health and addiction problems) may be unfairly viewed as less able to care for their children.
- Parents in same – sex relationships may have concerns that their sexual orientation will be seen as a risk factor for their child.
- An Ofsted evaluation of serious case reviews April 2008 to March 2009 concluded that issues of disability often masked child protection concerns and that in half of cases involving children with disabilities, there was a failure to recognise the increased vulnerability of disabled children, for example to child sex abuse.
- Children who grow up in poverty are less likely to get qualifications or go on to higher education, and are more likely to become young parents. People with low levels of educational achievement can expect to be less employable, therefore poorer, therefore less healthy and probably less likely to participate in civic activity. The kinds of people who are less likely to be employed are also more likely to be involved in crime, to have shorter life-spans and to have less fulfilling family lives. Whole families can be locked into cycles of deprivation.
- Racial harassment is often not seen as a child protection issue or as a factor in neighbours maliciously reporting concerns.
- Women are more likely to report, consult for and be diagnosed with depression and anxiety.
- Boys are four times as likely as girls to be identified as having a behavioural, emotional and social difficulty (BESD).
- It is possible that depression and anxiety are under-diagnosed in men. Suicide is more common in men.
- All forms of substance abuse are more common in men.
- Alcohol disorders are twice as common in men, although binge drinking is increasing at a faster rate among young women.
- Incidence rates of most sexually transmitted infections are rising, with the increase being greater in women than men.

- An estimated 66,000 women living in the UK have undergone female genital mutilation and 21,000 girls under 16 are currently at risk. (HO & WRC)
- In 2008 the Forced Marriage Unit received over 1600 calls to its helpline on suspected incidences of forced marriage. (HO)

Bullying & Discrimination

- Studies claim that at least **16 children commit suicide as a direct result of bullying** in the UK **every year**.
- In an Ofsted analysis of serious case reviews (April 2008 – March 2009) **10 out of the 25** children who died in the 11+ age group, committed suicide.
- There is a need to **educate children** about diversity from lower school level and to **teach young children not to stereotype and to respect differences**.
- Eight out of ten children with learning disabilities have been bullied at school and six out of ten have been physically hurt.
- Disabled children and those with visible medical conditions can be twice as likely as their peers to become targets for bullying behaviour.
- Over 75% of 11-12 year old boys think it is acceptable that women get hit if they make men angry. More boys than girls of all ages believe that some women deserve to be hit.
- Close to 10,000 women are sexually assaulted and 2,000 women are raped every week. (British Crime Survey 2008)
- At least 32% of children, mostly girls, experience some form of child sexual abuse. (HO)
- Gypsy and Traveller children experience racist abuse on a daily basis at school and in other settings, from children and adults in the settled community, making them reluctant to attend.
- 98% of young gay people hear the frequent use of homophobic language (“that’s so gay”, “poof”, “dyke”, “queer” “bender”)
- 50% of teachers fail to respond to the use of homophobic language.
- 30% of lesbian and gay pupils report that adults are responsible for homophobic incidents in their schools
- One third of young lesbian, gay, bisexual or Transgender young people have self harmed
- 6/10 lesbian and gay school children experience homophobic bullying and half of those contemplate killing themselves as a result
- Over three in five young lesbian and gay people feel that there is neither an adult at home nor at school who they can talk to about being gay
- In any school of 1,000 pupils there are likely to be 6 who will have transgender experience at some point in their lives. Such people are susceptible to depression and at risk of suicide. 33% of Trans Adults in the UK attempt suicide at least once. This is considerably higher than the risk in many other groups and should serve to underline that Trans people would not subject themselves to such experiences unless, for them, there was no better option.

Appendix 4

Types of Abuse (Taken from ‘The Child Protection Factsheet – The Definitions and Signs of Child Abuse’ June 2010, NSPCC)

Definitions of Abuse

There are four types of child abuse. They are defined in the UK Government guidance ***Keeping Children Safe in Education (2014)*** as follows:

1. Physical abuse
2. Emotional abuse

3. Sexual abuse

4. Neglect

Bullying is not defined as a form of abuse in Working Together but there is clear evidence that it is abusive and will include at least one, if not two, three or all four, of the defined categories of abuse. For this reason it has been included in this factsheet.

Physical abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- *f* protect a child from physical and emotional harm or danger;
- *f* ensure adequate supervision (including the use of inadequate care-givers); or

- f ensure access to appropriate medical care or treatment.
It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Bullying

Bullying may be defined as deliberately hurtful behaviour, usually repeated over a period of time, where it is difficult for those bullied to defend themselves. It can take many forms, but the three main types are physical (e.g. hitting, kicking, theft), verbal (e.g. racist or homophobic remarks, threats, name calling) and emotional (e.g. isolating an individual from the activities and social acceptance of their peer group). The damage inflicted by bullying can frequently be underestimated. It can cause considerable distress to children to the extent that it affects their health and development or, at the extreme, cause them significant harm (including self-harm). All settings in which children are provided with services or are living away from home should have in place rigorously enforced anti-bullying strategies.

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Appendix 5

Signs of Abuse (Taken from 'The Child Protection Factsheet – The Definitions and Signs of Child Abuse' June 2010m, NSPCC)

Signs of abuse

Recognising child abuse is not easy. It is not your responsibility to decide whether or not child abuse has taken place or if a child is at significant risk of harm from someone. You do however, have both a responsibility and duty, as set out in your organisation's child protection procedures, to act in order that the appropriate agencies can investigate and take any necessary action to protect a child. The following information should help you to be more alert to the signs of possible abuse.

Physical Abuse

Most children will collect cuts and bruises as part of the rough-and-tumble of daily life. Injuries should always be interpreted in light of the child's medical and social history, developmental stage and the explanation given. Most accidental bruises are seen over bony parts of the body, e.g. elbows, knees, shins, and are often on the front of the body. Some children, however, will have bruising that is more than likely inflicted rather than accidental.

Important indicators of physical abuse are bruises or injuries that are either unexplained or inconsistent with the explanation given, or visible on the 'soft' parts of the body where accidental injuries are unlikely, e.g. cheeks, abdomen, back and buttocks. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern, although this can be more complicated with burns, as these are often delayed in presentation due to blistering taking place sometime later.

The physical signs of abuse may include:

- unexplained bruising, marks or injuries on any part of the body
- multiple bruises- in clusters, often on the upper arm, outside of the thigh
- cigarette burns
- human bite marks
- broken bones
- scalds, with upward splash marks,
- multiple burns with a clearly demarcated edge.

Changes in behaviour that can also indicate physical abuse:

- fear of parents being approached for an explanation
- aggressive behaviour or severe temper outbursts
- flinching when approached or touched
- reluctance to get changed, for example in hot weather
- depression
- withdrawn behaviour
- running away from home.

Emotional Abuse

Emotional abuse can be difficult to measure, as there are often no outward physical signs. There may be a developmental delay due to a failure to thrive and grow, although this will usually only be evident if the child puts on weight in other circumstances, for example when

hospitalised or away from their parents' care. Even so, children who appear well-cared for may nevertheless be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of children not being allowed to mix or play with other children. Child protection fact sheet Definitions and signs of child abuse

Changes in behaviour which can indicate emotional abuse include:

- neurotic behaviour e.g. sulking, hair twisting, rocking
- being unable to play
- fear of making mistakes
- sudden speech disorders
- self-harm
- fear of parent being approached regarding their behaviour
- developmental delay in terms of emotional progress

Sexual Abuse

Adults who use children to meet their own sexual needs abuse both girls and boys of all ages, including infants and toddlers. Usually, in cases of sexual abuse it is the child's behaviour that may cause you to become concerned, although physical signs can also be present. In all cases,

children who tell about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously. It is also important to remember that it is not just adult men who sexually abuse children – there are increasing numbers of allegations of sexual abuse of children against women and sexual abuse can also be perpetrated by other children or young people.

The physical signs of sexual abuse may include:

- pain or itching in the genital area
- bruising or bleeding near genital area
- sexually transmitted disease
- vaginal discharge or infection
- stomach pains

- discomfort when walking or sitting down
- pregnancy

Changes in behaviour which can also indicate sexual abuse include:

- sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn
- fear of being left with a specific person or group of people
- having nightmares
- running away from home
- sexual knowledge which is beyond their age, or developmental level
- sexual drawings or language
- bedwetting
- eating problems such as overeating or anorexia
- self-harm or mutilation, sometimes leading to suicide attempts
- saying they have secrets they cannot tell anyone about
- substance or drug abuse
- suddenly having unexplained sources of money
- not allowed to have friends (particularly in adolescence)
- acting in a sexually explicit way towards adults

Neglect

Neglect can be a difficult form of abuse to recognise, yet have some of the most lasting and damaging effects on children.

The physical signs of neglect may include:

- constant hunger, sometimes stealing food from other children
- constantly dirty or 'smelly'
- loss of weight, or being constantly underweight
- inappropriate clothing for the conditions.

Changes in behaviour which can also indicate neglect may include:

- complaining of being tired all the time
- not requesting medical assistance and/or failing to attend appointments
- having few friends
- mentioning being left alone or unsupervised.

Anti-Radicalisation

Radicalisation is defined as the act or process of making a person more radical or favouring of extreme or fundamental changes in political, economic or social conditions, institutions or habits of the mind. Extremism is defined as the holding of extreme political or religious views.

- spending increasing time in the company of other suspected extremists;
- changing their style of dress or personal appearance to accord with the group; day-to-day behaviour becoming increasingly
- centred around an extremist ideology, group or cause;
- loss of interest in other friends and activities not associated with the extremist ideology, group or cause;
- possession of material or symbols associated with an extremist cause (e.g. the swastika for far right groups);
- attempts to recruit others to the group/cause/ ideology; or communications with others that suggest
- identification with a group/cause/ideology

Bullying

Bullying is not always easy to recognise as it can take a number of forms. A child may encounter bullying attacks that are:

- physical: pushing, kicking, hitting, pinching and other forms of violence or threats
- verbal: name-calling, sarcasm, spreading rumours, persistent teasing
- emotional: excluding (sending to Coventry), tormenting, ridiculing, humiliating.

Persistent bullying can result in:

- depression
- low self-esteem
- shyness
- poor academic achievement
- isolation
- threatened or attempted suicide

Signs that a child may be being bullied can be:

- coming home with cuts and bruises
- torn clothes
- asking for stolen possessions to be replaced
- losing dinner money
- falling out with previously good friends
- being moody and bad tempered
- wanting to avoid leaving their home
- aggression with younger brothers and sisters
- doing less well at school
- sleep problems
- anxiety
- becoming quiet and withdrawn

These definitions and indicators are not meant to be definitive, but only serve as a guide to assist you. It is important too, to remember that many children may exhibit some of these indicators at some time, and that the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour such as a death or the birth of a new baby in the family or relationship problems between parents/carers. In assessing whether indicators are related to abuse or not, the authorities will always want to understand them in relation to the child's development and context.

Sources of Reference

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groups) <http://www.schools.bedfordshire.gov.uk/im/ims/Attendance/index.htm>

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The following have been involved in the quality assurance & validation of this policy:

- Bedfordshire LSCB
- E-Safety Strategy Team
- Anti-bullying Co-ordinator
- Health & Safety Team
- PSHE Advisor
- Social Care; Head of Quality Assurance CRS
- Education Welfare Service
- Children Missing Education Officer
- Human Resources
- School Improvement Partners
- Corporate Policy Advisor (Equality & Diversity)

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