Gemma Haycock

Debden park high school

Child Protection Policy

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| **DESIGNATED CHILD PROTECTION LEAD:** |  **MRS GEMMA HAYCOCK****0208 4181225** |
| **DEPUTY DESIGNATED CHILD PROTECTION LEAD:** | **MRS BERNICE GOODY****0208 4181229** |
| **OTHER DESIGNAED STAFF** | **MRS CLAIRE PORTER****MS MERYS REES****MS ZOE WALKER** |
| **DESIGNATED CHILD PROTECTION GOVERNOR:** | **MR JAMES LILLINGSTON**  |

1. **PURPOSE**

Everyone who comes into contact with children and their families has a role to play in safeguarding children. School and college staff are particularly important as they are in a position to identify concerns early and provide help for children to prevent concerns from escalating. Schools and colleges and their staff form part of the wider safeguarding system for children. Schools should work with Social Care, the police, health services and other services to promote the welfare of children and protect them from harm.

*(Keeping Children Safe in Education – DfE, July 2015)*

The document ‘Keeping Children Safe in Education (DfE, July 2015) **MUST** be read in conjunction with this policy and should be kept as an appendix to the school’s child protection policy.

The following documents are also used to support the schools safeguarding and child protection procedures;

* [What to do if you’re worried a child is being abused](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf) – DfE, 2015
* [Children missing education](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/395138/Children_missing_education_Statutory_guidance_for_local_authorities.pdf) – DfE, 2015
* [Information Sharing](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419628/Information_sharing_advice_safeguarding_practitioners.pdf) – DfE, 2015

**2.** ​**INTRODUCTION**

2.1 Debden Park High school takes seriously its responsibility to protect and safeguard the welfare of children and young people in its care.  “The welfare of the child is paramount” (Children Act 1989).

2.2 Section 175 of the Education Act 2002 *(Section 157 for Independent schools)* places a statutory responsibility on the governing body to have policies and procedures in place that safeguard and promote the welfare of children who are pupils of the school.

2.3 There are three main elements to our Child Protection policy:

* **Prevention** through the creation of a positive school atmosphere and the teaching, and pastoral support offered to pupils.
* **Protection** by following agreed procedures and ensuring all staff are trained and supported to respond appropriately and sensitively to child protection concerns.
* **Support** to pupils who may have been abused.

2.4 This policy applies to all pupils, staff, parents, governors, volunteers, students and visitors to our school.

2.5 This school recognises it is an agent of referral and not of investigation.

**3. SCHOOL ETHOS**

Our school is committed to keeping children safe and aims to:

* Create a culture of vigilance where the welfare of our pupils is promoted and where timely and appropriate safeguarding action is taken
* Establish and maintain an environment where pupils feel safe and secure, are encouraged to talk and are listened to
* Ensure that pupils know that there are adults within the school they can approach if they are worried or are in difficulty
* Ensure pupils receive the right help at the right time to address risks and prevent issues escalating
* Include in the curriculum activities and opportunities which equip pupils with the skills they need to stay safe from abuse and to develop healthy and safe relationships
* Include in the curriculum material which will help pupils develop realistic attitudes to the responsibilities of adult life, particularly with regard to childcare and parenting skills
* Protect children from harm and to ensure that they are taught in a way that is consistent with the law and our values and to promote respect for all others
* Facilitate understanding of wider issues within the context of learning about the values on which our society is founded and our system of democratic government
* Provide a curriculum which actively promotes the fundamental British values of democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs
* promote tolerance of and respect for people of all faiths (or those of no faith), races, genders, ages, disability and sexual orientations
* Make parents/carers aware of the school policies and practice for safeguarding and ensure that, wherever possible, every effort will be made to establish open and honest effective working relationships with parents and colleagues from partner agencies

**4. LEGISLATIVE FRAMEWORK**

4.1 Child protection is the responsibility of all adults and especially those working with children.  The development of appropriate procedures and the monitoring of good practice are the responsibilities of the [Essex Safeguarding Children Board](http://www.escb.co.uk/Home.aspx) (ESCB)

4.2 In Essex, all professionals must work in accordance with the [SET Procedures](http://www.escb.co.uk/Portals/15/Documents/Local%20Practices/SET%20Procedures%202015%20-%20Version%202%20August%202015.pdf) (ESCB, August 2015)

4.3 Our school also works in accordance with the statutory guidance 'Keeping Children Safe in Education' (DfE, July 2015), ‘[Working Together’](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf) (DfE, 2015) and ‘[Effective Support for Children and Families in Essex](http://www.escb.co.uk/Portals/15/Documents/Local%20Practices/Effective%20Support%20for%20Children%20and%20Families%20in%20Essex%20April%202013.pdf) (ESCB, 2013).

4.4 As of July 2015, the [Counter-Terrorism and Security Act (HMG, 2015)](http://www.legislation.gov.uk/ukpga/2015/6/contents) placed a new duty on schools and other education providers. Under section 26 of the Act, schools are required, in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”. This duty is known as the Prevent duty.

It requires schools to:

* teach a broad and balanced curriculum which promotes spiritual, moral, cultural, mental and physical development of pupils and prepares them for the opportunities, responsibilities and experiences of life and must promote community cohesion
* be safe spaces in which children / young people can understand and discuss sensitive topics, including terrorism and the extremist ideas that are part of terrorist ideology, and learn how to challenge these ideas
* be mindful of their existing duties to forbid political indoctrination and secure a balanced presentation of political issues

Our school works in accordance with the PREVENT Duty and approaches this issue in the same way as any other child protection matter. Any concerns that one of our pupils is at risk in this respect, will be referred to Children’s Social Care in line with the SET procedures.

4.5 As of October 2015, the [Serious Crime Act 2015](https://www.gov.uk/government/collections/serious-crime-bill) (Home Office, 2015) introduced a duty on teachers (and other professionals) to notify the police of known cases of female genital mutilation where it appears to have been carried out on a girl under the age of 18. Our school will operate in accordance with the statutory requirements relating to this issue, and in line with existing local safeguarding procedures.

**5. ROLES AND RESPONSIBILITIES**

5.1 All adults working with or on behalf of children have a responsibility to protect them and to provide a safe environment in which they can learn and achieve their full potential.  However, there are key people within schools and the Local Authority who have specific responsibilities under child protection procedures.  The names of those in our school with these specific responsibilities (the Designated Safeguarding Lead and Deputy Designated Safeguarding Lead) are shown on the cover sheet of this document.

5.2 The Designated Safeguarding Lead in school has responsibility for managing child protection referrals, safeguarding training and raising awareness of all child protection policies and procedures. They must ensure that everyone in school (including temporary staff, volunteers and contractors) are aware of these procedures and that they are followed at all times. They should be a source of advice and support for other staff (on child protection matters) and ensure that timely referrals to Essex Children’s Social Care (Family Operations Hub) are made in accordance with current SET procedures.  If for any reason the Designated Safeguarding Lead is unavailable, the Deputy Designated Safeguarding Lead will act in their absence*.*

5.3 The Governing Body and school leadership team are responsible for ensuring that the school follows recruitment procedures that help to deter, reject or identify people who might abuse children *(see the school’s ‘Safer Recruitment’ policy for further information)*

5.4 The link governor for safeguarding ensures there is an effective child protection policy in place and that this is updated annually. Governors will not be given details relating to individual child protection cases or situations to ensure confidentiality is not breached.

5.5 The Headteacher and / or the Designated Safeguarding Lead provide an annual report for the governing body detailing any changes to the policy and procedures; training undertaken by all staff and governors and other relevant issues.

5.6 The Headteacher / Designated Safeguarding Lead and link Governor undertakes annually the ESCB School Safeguarding Audit in line with their responsibilities under S.175 *(S.157 for Independent schools)* of the Education Act 2002.

5.7 The school publishes its Child Protection policy on the school website alongside ‘Keeping Children Safe in Education’ (DfE, 2015).’

5.8 The school actively promotes online safety on its website and signposts stakeholders to information that will help keep children safe online.

**6. PROCEDURES**

6.1 All action is taken in accordance with the following guidance;

* Essex Safeguarding Children Board guidelines - the SET (Southend, Essex and Thurrock) Child Protection Procedures (ESCB, August 2015)
* Keeping Children Safe in Education (DfE, July 2015)
* Working Together to Safeguard Children (DfE, 2015)
* ‘Effective Support for Children and Families in Essex’ (ESCB, 2013)
* PREVENT Duty - Counter-Terrorism and Security Act (HMG, 2015)

6.2 When new staff, volunteers or regular visitors join our school they are informed of the safeguarding arrangements in place. They are given a copy of our school’s Child Protection policy and Staff Code of Conduct, told who our Designated Safeguarding Lead (and Deputy) is and are informed how to share concerns with them.

6.3 All staff are kept informed about child protection responsibilities and procedures through induction, briefings and regular awareness training.

6.4 Any member of staff, volunteer or visitor to the school who receives a disclosure or allegation of abuse, or suspects that abuse may have occurred **must** report it immediately to the Designated Safeguarding Lead (or, in their absence, the Deputy Designated Safeguarding Lead).  In the absence of either of the above, the matter should be brought to the attention of the most senior member of staff.

6.5 The Designated Safeguarding Lead or the Deputy will immediately refer cases of suspected abuse or allegations to the Family Operations Hub by telephone and in accordance with the procedures outlined in the SET procedures (ESCB, 2015) and in ‘Effective Support for Children and Families in Essex’ (ESCB, 2013).

6.6 The telephone referral to Essex Social Care Direct will be confirmed in writing within 48 hours on the [ECC999](http://www.escb.co.uk/Portals/15/Documents/ECC999.docx) form. Essential information will include the pupil’s name, address, date of birth, family composition, the reason for the referral, whether the child’s parents are aware of the referral, the name of person who initially received the disclosure plus any advice given.

 6.7 The school will always undertake to share an intention to refer a child to Children’s Social Care with the parents or carers, unless to do so could place the child at greater risk of harm or impede a criminal investigation. On these occasions advice will be taken from the Family Operations Hub and / or Essex Police.

6.8 If a member of staff continues to have concerns about a child and feels the situation is not being addressed or does not appear to be improving, the staff member concerned should press for re-consideration.

6.9 Safeguarding contact details are displayed in the school to ensure that all staff have unfettered access to safeguarding support.

**7. TRAINING AND SUPPORT**

7.1 The Designated Safeguarding Lead (and Deputy) undergo updated Level 3 child protection training at least every two years. The Headteacher, all staff members and governors undergo child protection training which is updated regularly, in line with advice from the Essex Safeguarding Children Board (ESCB). All Child Protection training is recorded.

7.2 The school ensures that the Designated Safeguarding Lead (and Deputy) also undertakes training in inter-agency working and other matters as appropriate.

7.3 All staff are made aware of the boundaries of appropriate behaviour and conduct. These matters form part of staff induction and are outlined in the Staff Code of Conduct.

7.4 We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting. We will support such staff by providing an opportunity to talk through their anxieties with the DSLs and to seek further support as appropriate.

**8. PROFESSIONAL CONFIDENTIALITY**

8.1 Confidentiality is an issue which needs to be discussed and fully understood by all those working with children, particularly in the context of child protection.  The only purpose of confidentiality in this respect is to benefit the child.  A member of staff must never guarantee confidentiality to a pupil and will not agree with a pupil to keep a secret as, where there is a child protection concern, this must be reported to the Designated Safeguarding Lead and may require further investigation by appropriate authorities.

8.2 Staff are informed of relevant information in respect of individual cases regarding child protection on a ‘need to know basis’ only.  Any information shared with a member of staff in this way is treated confidentially.

**9. RECORDS AND MONITORING**

9.1 Well-kept records are essential to good child protection practice.  Our school is clear about the need to record any concern held about a child or children within our school, the status of such records and when these records should be passed over to other agencies.

9.2 Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse, will make an accurate record as soon as possible noting what was said or seen (if appropriate using a body map to record), putting the event in context, and giving the date, time and location.  All records will be dated and signed and will include the action taken. This is then presented to the Designated Safeguarding Lead (or Deputy) who will decide on appropriate action.

9.3 Any file notes are kept in a confidential child protection file (which is separate to the pupil file) in chronological order. All child protection records are stored securely and confidentially and will be retained for 35 years after the last entry (in line with ECC policy).

9.4 If a pupil transfers from our school to another, their child protection records will be forwarded to the new educational setting. These will be marked ‘Confidential’ and for the attention of the receiving school’s Designated Safeguarding Lead, with a return address on the envelope so it can be returned to the originating school if it goes astray. Copies of this paperwork will be retained by our school, should it be required at a future date.

 **10. ATTENDANCE AT CHILD PROTECTION CONFERENCES, CORE GROUP MEETINGS OR CHILD IN NEED MEETINGS**

10.1 It is the responsibility of the Designated Safeguarding Lead to ensure that the school is represented at and that a report is submitted to any child protection conference called for children on the school roll or previously known to them. Where appropriate, any report will be shared in advance with the parent(s) / carer. Whoever attends will be fully briefed on any issues or concerns the school has and be prepared to contribute to the discussions at the conference.

10.2 If a child is made subject to a Child Protection or a Child in Need plan, the Designated Safeguarding Lead will ensure the child is monitored regarding their school attendance, progress, welfare and presentation. If the school are part of the core group, the Designated Safeguarding Lead will ensure the school is represented, provides appropriate information and contributes to the plan at these meetings. Any concerns about the Child Protection plan and / or the child’s welfare will be discussed and recorded at the core group meeting, unless to do so would place the child at further risk of significant harm. In this case the Designated Safeguarding Lead will inform the child’s key worker immediately and then record that they have done so and the actions agreed.

**11.   SUPPORTING PUPILS AT RISK**

11.1​ Our school is committed to ensuring that our pupils receive the right help at the right time

11.2​ Our school may be the only stable, secure and safe element in the lives of children at risk of, or who have suffered harm.  Nevertheless, whilst at school, their behaviour may be challenging and defiant, or they may instead be withdrawn, or display abusive behaviours towards other children.

11.3​ Our school will endeavour to support all pupils through:

* The PSHE curriculum, assemblies and enrichment days to encourage our pupils to stay safe, develop healthy relationships, self-esteem and self-motivation
* The school ethos which promotes a positive, supportive and secure environment and which gives all pupils and adults a sense of being respected and valued
* The implementation of the school’s behaviour management policies
* A consistent approach from all staff which will endeavour to ensure our pupils know that some behaviour is unacceptable but that they are valued
* Regular liaison with other professionals and agencies who support the pupils and their families
* A commitment to develop open and honest and supportive relationships with parents, always with the child’s best interest as paramount
* The development and support of a responsive and knowledgeable staff group, trained to respond appropriately in all matters of child protection
* Recognition that children with behavioural difficulties and disabilities are most vulnerable to abuse and that staff working in any capacity with children with profound and multiple disabilities, sensory impairment and / or emotional and behavioural problems must be particularly sensitive to signs of abuse
* Recognition that in a home environment where there is domestic violence, drug or alcohol abuse, children are vulnerable and may be in need of support or protection

**12. PHYSICAL INTERVENTION**

12.1 We acknowledge that staff must only ever use physical intervention as a last resort, when a child is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person.

Such events should be recorded and signed by a witness.

We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.

**13.**  **ANTI-BULLYING**

13.1 Our school policy on anti-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms .g. cyber, racist, homophobic and gender related bullying. We keep a record of known bullying incidents. All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse. We keep a record of bullying incidents.

**14. RADICALISATION AND EXTREMEISM**

14.1 Since 2010, when the Government published the Prevent Strategy, there has been an awareness of the specific need to safeguard children, young people and families from violent extremism. There have been several occasions both locally and nationally in which extremist groups have attempted to radicalise vulnerable children and young people to hold extreme views including views justifying political, religious, sexist or racist violence, or to steer them into a rigid and narrow ideology that is intolerant of diversity and leaves them vulnerable to future radicalisation.

14.2 King Harold Academy values freedom of speech and the expression of beliefs / ideology as fundamental rights underpinning our society’s values. Both pupils/students and teachers have the right to speak freely and voice their opinions. However, freedom comes with responsibility and free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion.

14.3 The current threat from terrorism in the United Kingdom may include the exploitation of vulnerable people, to involve them in terrorism or in activity in support of terrorism. The normalisation of extreme views may also make children and young people vulnerable to future manipulation and exploitation. King Harold Academy is clear that this exploitation and radicalisation should be viewed as a safeguarding concern.

14.4 Definitions of radicalisation and extremism, and indicators of vulnerability to radicalisation can be found in the appendices.

14.5 King Harold Academy seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.

14.6 The school governors, the Head Teacher and the Designated Safeguarding Lead (DSL) will assess the level of risk within the school and put actions in place to reduce that risk.

**Response**

14.7 When any member of staff has concerns that a pupil may be at risk of radicalisation or involvement in terrorism, they should speak with the DSL and/or Headteacher. They should then follow normal safeguarding procedures. If the matter is urgent then Essex Police must be contacted by dialling 999. In non-urgent cases where police advice is sought then dial 101. The Department of Education has also set up a dedicated telephone helpline for staff and governors to raise concerns around Prevent (020 7340 7264).

14.8 Numerous factors can contribute to and influence the range of behaviours that are defined as violent extremism, but most young people do not become involved in extremist action. For this reason the appropriate interventions in any particular case may not have any specific connection to the threat of radicalisation, for example they may address mental health, relationship or drug/alcohol issues.

**15. DOMESTIC ABUSE**

15.1 Domestic abuse represents one quarter of all violent crime. It is actual or threatened physical, emotional, psychological or sexual abuse. It involves the use of power and control by one person over another. It occurs regardless of race, ethnicity, gender, class, sexuality, age, and religion, mental or physical ability. Domestic abuse can also involve other types of abuse.

15.2 We use the term domestic abuse to reflect that a number of abusive and controlling behaviours are involved beyond violence.

15.3 Slapping, punching, kicking, bruising, rape, ridicule, constant criticism, threats, manipulation, sleep deprivation, social isolation, and other controlling behaviours all count as abuse.

15.4 The signs and symptoms of a child suffering or witnessing domestic abuse are similar to other forms of abuse or neglect. (See Appendices)

**16.**​ **ALLEGATIONS INVOLVING A MEMBER OF STAFF**

16.1 All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults.

16.2 The school works in accordance with statutory guidance and the SET procedures (ESCB, 2015) in respect of allegations against an adult working with children (in a paid or voluntary capacity). Section 7 of the current SET procedures provides detailed information on this.

16.3​ The school has processes in place for reporting any concerns about a member of staff (or any adult working with children). Any concerns about the conduct of a member of staff will be referred to the Head of School. This role is distinct from the Designated Child Protection Lead as the named person should have sufficient status and authority in the school to manage employment procedures. Staffing matters are confidential and the school must operate within statutory guidance around Data Protection.

Where the concern involves the Head of School, it should be reported directly to the Executive Head teacher. Where the allegation made involves the Executive Head teacher this should be reported directly to the Chair of Governors.

SET procedures (ESCB, 2015) require that, where an allegation against a member of staff is received, the Head of School, Executive Head teacher or the Chair of Governors must inform the duty Local Authority Designated Officer (LADO) in the Children’s Workforce Allegations Management Team on **03330 139 797** within one working day. However, wherever possible, contact with the LADO should be made immediately as they will then advise on how to proceed and whether the matter requires Police involvement. This will include advice on speaking to pupils and parents and HR. The school does not carry out any investigation before speaking to the LADO.

**17.**​ **WHISTLEBLOWING**

All staff must be aware of their duty to raise concerns about the attitude or actions of colleagues in line with the school’s Code of Conduct / Whistleblowing policy.

**18. MONITORING AND EVALUATION**

 Our Child Protection Policy and Procedures will be monitored and evaluated by:

* Governing Body visits to the school
* SLT ‘drop ins’ and discussions with children and staff
* Pupil surveys and questionnaires
* Scrutiny of Attendance data
* Scrutiny of range of risk assessments
* Scrutiny of GB minutes
* Logs of bullying/racist/behaviour incidents for SLT and GB to monitor
* Review of parental concerns and parent questionnaires

**Appendix 1**

**Recognising signs of child abuse**

**Categories of Abuse:**

* Physical Abuse
* Emotional Abuse (including Domestic Abuse)
* Sexual Abuse
* Neglect

**Signs of Abuse in Children:**

The following non-specific signs may indicate something is wrong:

* + Significant change in behaviour
	+ Extreme anger or sadness
	+ Aggressive and attention-seeking behaviour
	+ Suspicious bruises with unsatisfactory explanations
	+ Lack of self-esteem
	+ Self-injury
	+ Depression
	+ Age inappropriate sexual behaviour
	+ Child Sexual Exploitation.

**Risk Indicators**

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

* Must be regarded as indicators of the possibility of significant harm
* Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
* May require consultation with and / or referral to Children’s Services

The absence of such indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the child may:

* Appear frightened of the parent/s
* Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:

* Persistently avoid child health promotion services and treatment of the child’s episodic illnesses
* Have unrealistic expectations of the child
* Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
* Be absent or misusing substances
* Persistently refuse to allow access on home visits
* Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

**Recognising Physical Abuse**

The following are often regarded as indicators of concern:

* An explanation which is inconsistent with an injury
* Several different explanations provided for an injury
* Unexplained delay in seeking treatment
* The parents/carers are uninterested or undisturbed by an accident or injury
* Parents are absent without good reason when their child is presented for treatment
* Repeated presentation of minor injuries (which may represent a “cry for help” and if ignored could lead to a more serious injury)
* Family use of different doctors and A&E departments
* Reluctance to give information or mention previous injuries

**Bruising**

Children can have accidental bruising, but the following must be considered as non accidental unless there is evidence or an adequate explanation provided:

* Any bruising to a pre-crawling or pre-walking baby
* Bruising in or around the mouth, particularly in small babies which may indicate force feeding
* Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
* Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
* Variation in colour possibly indicating injuries caused at different times
* The outline of an object used e.g. belt marks, hand prints or a hair brush
* Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
* Bruising around the face
* Grasp marks on small children
* Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

**Bite Marks**

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

**Burns and Scalds**

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

* Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
* Linear burns from hot metal rods or electrical fire elements
* Burns of uniform depth over a large area
* Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
* Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

**Fractures**

Fractures may cause pain, swelling and discolouration over a bone or joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

* The history provided is vague, non-existent or inconsistent with the fracture type
* There are associated old fractures
* Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
* There is an unexplained fracture in the first year of life
* **Scars**

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

**Recognising Emotional Abuse**

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

* Developmental delay
* Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
* Indiscriminate attachment or failure to attach
* Aggressive behaviour towards others
* Scape-goated within the family
* Frozen watchfulness, particularly in pre-school children
* Low self-esteem and lack of confidence
* Withdrawn or seen as a “loner” – difficulty relating to others

**Recognising Signs of Sexual Abuse**

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

Some behavioural indicators associated with this form of abuse are:

* Inappropriate sexualised conduct
* Sexually explicit behaviour, play or conversation, inappropriate to the child’s age
* Continual and inappropriate or excessive masturbation
* Self-harm (including eating disorder), self-mutilation and suicide attempts
* Involvement in prostitution or indiscriminate choice of sexual partners
* An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

* Pain or itching of genital area
* Blood on underclothes
* Pregnancy in a younger girl where the identity of the father is not disclosed
* Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

**Sexual Abuse by Young People**

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

**Developmental Sexual Activity** encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

**Inappropriate Sexual Behaviour** can be inappropriate socially, in appropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. it may also be that the behaviour is “acting out” which may derive from other sexual situations to which the child or young person has been exposed.

If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base.

**Assessment**

In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

* **Equality** – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies
* **Consent** – agreement including all the following:
	+ Understanding that is proposed based on age, maturity, development level, functioning and experience
	+ Knowledge of society’s standards for what is being proposed
	+ Awareness of potential consequences and alternatives
	+ Assumption that agreements or disagreements will be respected equally
	+ Voluntary decision
	+ Mental competence
* **Coercion –** the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

**Recognising Neglect**

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

* Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
* A child seen to be listless, apathetic and irresponsive with no apparent medical cause failure of child to grow within normal expected pattern, with accompanying weight loss
* Child thrives away from home environment
* Child frequently absent from school
* Child left with adults who are intoxicated or violent
* Child abandoned or left alone for excessive periods

**Child Sexual Exploitation**

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

* underage sexual activity
* inappropriate sexual or sexualised behaviour
* sexually risky behaviour, 'swapping' sex
* repeat sexually transmitted infections
* in girls, repeat pregnancy, abortions, miscarriage
* receiving unexplained gifts or gifts from unknown sources
* having multiple mobile phones and worrying about losing contact via mobile
* having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
* changes in the way they dress
* going to hotels or other unusual locations to meet friends
* seen at known places of concern
* moving around the country, appearing in new towns or cities, not knowing where they are
* getting in/out of different cars driven by unknown adults
* having older boyfriends or girlfriends
* contact with known perpetrators
* involved in abusive relationships, intimidated and fearful of certain people or situations
* hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
* associating with other young people involved in sexual exploitation
* recruiting other young people to exploitative situations
* truancy, exclusion, disengagement with school, opting out of education altogether
* unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
* mood swings, volatile behaviour, emotional distress
* self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
* drug or alcohol misuse
* getting involved in crime
* police involvement, police records
* involved in gangs, gang fights, gang membership
* injuries from physical assault, physical restraint, sexual assault.

**Appendix 2**

**Forced Marriage(FM)**

This is an entirely separate issue from arranged marriage. It is a human rights abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. Never attempt to intervene directly as a school or through a third party. Always call either the Contact Centre or the Forced Marriage Unit 020 7008 0151.

**Female Genital Mutilation (FGM)**

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM.

**What is FGM?**

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

* FGM brings status/respect to the girl – social acceptance for marriage
* Preserves a girl’s virginity
* Part of being a woman / rite of passage
* Upholds family honour
* Cleanses and purifies the girl
* Gives a sense of belonging to the community
* Fulfils a religious requirement
* Perpetuates a custom/tradition
* Helps girls be clean / hygienic
* Is cosmetically desirable
* Mistakenly believed to make childbirth easier

**Is FGM legal?**

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** in most countries including the UK.

**Circumstances and occurrences that may point to FGM happening are:**

* Child talking about getting ready for a special ceremony
* Family taking a long trip abroad
* Child’s family being from one of the ‘at risk’ communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
* Knowledge that the child’s sibling has undergone FGM
* Child talks about going abroad to be ‘cut’ or to prepare for marriage

Signs that may indicate a child has undergone FGM:

* Prolonged absence from school and other activities
* Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
* Bladder or menstrual problems
* Finding it difficult to sit still and looking uncomfortable
* Complaining about pain between the legs
* Mentioning something somebody did to them that they are not allowed to talk about
* Secretive behaviour, including isolating themselves from the group
* Reluctance to take part in physical activity
* Repeated urinal tract infection
* Disclosure

**The ‘One Chance’ rule**

As with Forced Marriage there is the ‘One Chance’ rule. It is essential that settings /schools/colleges take action **without delay** and make a referral to children’s services.

**Domestic Abuse**

How does it affect children?

Children can be traumatised by seeing and hearing violence and abuse. They may also be directly targeted by the abuser or take on a protective role and get caught in the middle. In the long term this can lead to mental health issues such as depression, self-harm and anxiety.

**What are the signs to look out for?**

Children affected by domestic abuse reflect their distress in a variety of ways. They may change their usual behaviour and become withdrawn, tired, start to wet the bed and have behavioural difficulties. They may not want to leave their house or may become reluctant to return. Others will excel, using their time in your care as a way to escape from their home life. None of these signs are exclusive to domestic abuse so when you are considering changes in behaviours and concerns about a child, think about whether domestic abuse may be a factor.

**What should I do if I suspect a family is affected by domestic abuse?**

To talk through your concerns call the National Domestic Violence Helpline – 0808 2000 247

**Appendix 3**

**INDICATORS OF VULNERABILITY TO RADICALISATION**

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.

2. Extremism is defined by the Government in the Prevent Strategy as:

Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

3. Extremism is defined by the Crown Prosecution Service as:

The demonstration of unacceptable behaviour by using any means or medium to express views which:

* Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
* Seek to provoke others to terrorist acts;
* Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or
* Foster hatred which might lead to inter-community violence in the UK.

4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

5. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.

6. Indicators of vulnerability include:

* Identity Crisis – the student / pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
* Personal Crisis – the student / pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
* Personal Circumstances – migration; local community tensions; and events affecting the student / pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
* Unmet Aspirations – the student / pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
* Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
* Special Educational Need – students / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.

8. More critical risk factors could include:

* Being in contact with extremist recruiters;
* Accessing violent extremist websites, especially those with a social networking element;
* Possessing or accessing violent extremist literature;
* Using extremist narratives and a global ideology to explain personal disadvantage;
* Justifying the use of violence to solve societal issues;
* Joining or seeking to join extremist organisations; and
* Significant changes to appearance and / or behaviour;
* Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.

The Department of Education guidance [The Prevent Duty](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/439598/prevent-duty-departmental-advice-v6.pdf) can be accessed via this link.