



SAFEGUARDING/CHILD PROTECTION POLICY

March 2019

Passmores Academy

Part of the Passmores Co-operative Learning Community

'SAFEGUARDING CHILDREN' **CHILD PROTECTION POLICY**

'The Welfare of a Child is Paramount' – Children's Act 1989

STATEMENT TO PARENTS/CARERS

"Our first priority is your child's welfare and therefore there may be occasions when our concern about your child means that we have to consult other agencies. The procedures we follow have been laid down by the Essex Safeguarding Children Board. If you wish to know more about this procedure, please speak directly to the Principal(s) or designated person for child protection".

Principles

- 1.0 'Safeguarding and promoting the welfare of children is **everyone's** responsibility. **Everyone** who comes into contact with children and their families and carers has a role to play. In order to fulfil this responsibility effectively, all professionals should make sure their approach is child centred. This means that they should consider, at all times, what is in the **best interests** of the child.'

(Keeping Children Safe in Education – DfE, September 2018)

- 1.1 As part of the ethos of the Academy the staff and governors are committed to:

- Maintaining a safe learning environment for all students.
- Listening to and valuing the students.
- Developing children's understanding, awareness and resilience.
- Encouraging and supporting parents/carers and working in partnership with them.
- Ensuring all adults in the school community are aware of signs and symptoms of abuse, know the correct procedure for referring concerns or allegations and receive appropriate training to enable them to carry out these requirements..
- Working in partnership with other agencies and to share information with them.
- Identifying any welfare concerns and taking action to address them.

- Ensuring a safe recruitment process for all adults working with the school.

- 1.2 The Academy recognizes that staff, because of their contact with and knowledge of the students in their care, are well placed to identify and offer support to children in need.

- 1.3 The Academy recognizes it is an agent of referral and not of investigation.
- 1.4 Specific safeguarding issues and procedures are detailed in this policy. These should be considered in a broader context of safeguarding children alongside the following policies.
- Administration of medication policy
 - Anti-bullying policy
 - Attendance policy
 - E-safety policy
 - Health and Safety policy
 - Recruitment and selection policy (including safeguarding elements)
 - Staff Code of Conduct
 - Whistle-blowing procedure
 - Management of Information Systems and Social Media Policy
- 1.5 At Passmores Academy, students are taught about safeguarding, including online, through various teaching and learning opportunities.

Procedures for Referral

2.0 All action is taken in line with the following:

- Essex Safeguarding Children Board guidelines - the SET (Southend, Essex and Thurrock) Child Protection Procedures (ESCB, 2018)
- Keeping Children Safe in Education (DfE KCSI 2018)
- Working Together to Safeguard Children (HMG, 2018)
- Effective Support for Children and Families in Essex (ESCB, 2017) (www.essexeffectivesupport.org.uk)
- PREVENT Duty - Counter-Terrorism and Security Act (HMG, 2015)
- 'Children missing in education' (2016)
- 'Sexting in schools and colleges, responding to incidents and safeguarding young people' (UKCCIS – 2016).
- Multi-agency statutory guidance on FGM (2016)
- Serious Crime Act 2015 (Home Office 2015)
- Sexual Offences Act (2003)
- General Data Protection Regulation 2018
- Education (Pupil Registration) Regulations 2006
- Sexual Violence and Sexual Harassment between children in schools and colleges (DfE, 2018).
- What to do if you are worried a child is being abused (DfE 2015)
- Promoting positive emotional wellbeing and reducing the risk of suicide (ESCB 2018)
- Sexual violence and sexual harassment between children in schools and colleges (DfE 2018).

2.1 Dealing with a Disclosure

If a child discloses that he or she has been abused in some way, the member of staff / volunteer should:

- Reassure the child that they are doing the right thing in talking to you.
- Listen carefully to the child without displaying shock or disbelief.
- Accept what the child is saying.
- Let the child speak freely rather than asking direct questions.
- Reassure the child but do not promise confidentiality as a referral may have to be made.
- Explain what will happen next and who you have to inform.
- Go to 'My Concerns' database and complete a 'report a concern' form. If urgent, go directly to a member of the safeguarding team and then complete the concern.
- In the event of an IT failure, record the disclosure on the Safeguarding Children Form (yellow sheet). These are available in the staff room or from the Inclusion Office. Place the yellow form into the locked pink box in Y238 or pass to the designated person (Lucy Goddard) or deputy designated person (Jo Connolly / Angie Roberts/ Nicola Wilkins/ Roxy Ahmad). This should be done as soon as possible.

2.2 The designated person (or a deputy) will meet with the student concerned and will make a decision whether to inform or consult with the Family Operations Hub at Social Care. Before making a referral to Family Operations Hub (03456037627) the designated person will inform the students' parents/carers that a referral is being made

unless they feel that notifying the parent/carer will put the child at greater risk. See flow chart – appendix 2.

- 2.3 The online referral form will be completed (www.essexeffectivesupport.org.uk).
- 2.4 Confidentiality must be maintained and information relating to individual students/families shared with staff on a strictly need to know basis.

Record Keeping

- 3.0 Any member of staff receiving a disclosure of abuse or noticing possible abuse, must make an accurate record on the 'My Concern' database (or 'Safeguarding Children' yellow form in the event of an IT failure), noting what was seen or said giving date, time and location. The record must be signed.
- 3.1 All records will be retained by the designated person for Child Protection/Safeguarding on 'My Concern'.
- 3.2 All records relating to safeguarding children do not form part of the child's educational records. They will be kept as separate records filed in the safeguarding filing cabinets or on the 'My Concern' system. The school is not required to disclose these records to parents/carers except by agreement.
- 3.3 Files will be stored for until the child is twenty-five years old.

Parental Involvement

- 4.0 Passmores Academy is committed to helping parents/carers understand it's responsibilities for the welfare of all students.
- 4.1 Parents/Carers will be made aware of the school's Safeguarding Policy via the Academy's website.
- 4.2 Where possible, concerns will be discussed with parents/carers and the designated person will endeavour to seek agreement before making a referral unless to do so would place the child at increased risk of significant harm.
- 4.3 Parents/Carers must provide at least two emergency contact telephone numbers that can be used in the event of school staff needing to contact them.

Training

- 5.0 All staff working at the Academy are required to have DBS clearance. Supply staff are required to provide identification and DBS clearance and also use the signing in system.
- 5.1 The Principal(s) and all other staff who work with children will undertake appropriate child protection awareness training to equip them to carry out their responsibilities of child protection effectively.
- 5.2 The designated person and deputies will attend appropriate related level 3 training, provided by the Essex Safeguarding Children's Board, every two years to keep knowledge and skills up to date.
- 5.3 All staff, both teaching & support have access to training on a regular basis. All training is recorded. There will be general training (KCSIE) and topic specific training (including CSE, FGM, HBV, Prevent, and Forced Marriage).
- 5.4 All new staff will receive Child Protection training as part of their Induction Programme.
- 5.5 Any adult in contact with a student without having relevant safeguarding authorisation will be chaperoned by a DBS cleared member of staff.
- 5.6 Staff involved with recruitment will have the relevant safer recruitment training.
- 5.7 Staff receive training on professional confidentiality. All staff members are made aware of the boundaries of appropriate behavior and conduct. These matters form part of staff induction and are outlined in the Staff Handbook/ Code of Conduct. The school works in accordance with statutory guidance and SET procedures (ESCB, 2018) in respect of allegations against adults working with children (in a paid or voluntary capacity). Section 7 of the current SET procedures provides detailed information on this.

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 Principal(s) (or Vice-Principal in their absence). This role is distinct from the designated safeguarding 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 operates within statutory guidance around Data Protection.

Where the concern involves the Principal(s), it should be reported direct to the Chair of the Local Governing Body.

SET procedures (ESCB, 2018) require that, when an allegation against a member of staff is received, the Principal(s), senior named person or the Chair of the Local Governing Body must inform the duty Local Authority Designated Officer (LADO) in the Children's Workforce Allegations Management Team on 03330 139 797. Wherever possible, contact with the LADO will 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 investigations before speaking to the LADO.

Case Conferences/Core Group Meetings

- 6.0 The designated person will ensure, where possible, that the school is represented at child protection conferences and core group meetings and that any recommendations made by the conference which involve school staff, are carried out as agreed at the conference.
- 6.1 The designated person will ensure that the Academy works closely with Social Care and keeps Social Care updated of any incidents or change in circumstances relating to students on the child protection or child in need plans.

The Role of The Local Governing Body

- 7.0 The Local Governing Body will receive regular reports on changes to the Safeguarding Children, Child Protection Policy or procedures; training undertaken by the designated team, other staff and governors, the number of child protection incidents/cases (no details given).
- 7.1 The designated governor for child protection, in liaison with the safeguarding lead, will ensure that the school has a child protection policy, procedures are in place and that these are known to all members of staff.

Allegations Involving Academy Staff / Volunteers

8.0 Whenever it is alleged that a member of staff / volunteer has:

- Behaved in a way that has, or may have harmed a child
- Possibly committed a criminal offence against / related to a child
- Behaved toward a child in a way which indicates s/he is unsuitable to work with children

The person receiving the allegation must take it seriously and immediately inform the Principal(s).

If any member of staff / volunteer has reason to suspect that another member of staff / volunteer may have abused a child at the school, or elsewhere, they must immediately inform the Principal(s). They should also make a written record of the allegation using the informant's words – including time, date and place where the alleged incident took place, what was said and anyone else present. This record should be signed and dated and immediately passed on to the Principal(s).

If the concerns are about the Principal(s), then the Chair of the Local Governing Body should be contacted. The Chair of the Local Governing Body at Passmores Academy is;

Contact Name: **Mrs. S. Walker**

In the absence of the Chair of the Local Governing Body, the Vice Chair should be contacted. The Vice Chair of the Local Governing Body at Passmores Academy is;

Contact Name: **Mr. C. Guyton**

When An Allegation Against A Member Of Staff is Made

8.1 The Principal(s) will not investigate the allegation itself, or take written or detailed statements but will contact The Children Safeguarding Service (LADO). Through discussion and consultation a decision will be made whether to make a referral to Essex Children's Social Care. Where the allegation is against the Principal(s), the Chair of the Local Governing Body will take this action.

8.2 If for any reason it is decided that a referral to Essex Social Care Service is not appropriate it will be necessary to address matters in accordance with the Academy's disciplinary procedures.

When an Allegation Against a Child is Made by a Child

9.0 Peer-on-peer abuse can manifest itself in many ways, including bullying, online abuse, sexting, gender-based abuse etc. We are proactive in educating our students about this but will deal with incidents swiftly as they occur.

If a child discloses that he or she has been abused in some way by another child (including online), the member of staff/ volunteer should:

- Reassure the child that they are doing the right thing in talking to you.
- Listen carefully to the child without displaying shock or disbelief.
- Accept what the child is saying.
- Let the child speak freely rather than asking direct questions.
- Reassure the child but do not promise confidentiality as a referral may have to be made.
- Explain what will happen next and who you have to inform.
- Record the disclosure on the 'My Concern' database or in event of an IT failure, complete a 'Safeguarding Children' yellow form. These are available in the staff room or from the Inclusion Office
- If a yellow form has been used, place the yellow form into the locked pink box in Y238 or pass to the designated person (Lucy Goddard) or deputy designated person (Jo Connolly / Angie Roberts / Nicola Wilkins / Roxy Ahmad).

9.1 In cases of Youth Produced Sexual Imagery, we follow guidance given to schools by the UK Council for Child Internet Safety (UKCCIS) – 'Sexting in schools and colleges, responding to incidents and safeguarding young people' (2016). See Appendix 3 for flowchart regarding what to do in the case of Youth Produced Sexual Imagery.

9.2 In cases of bullying, please refer to our anti-bullying policy.

9.3 In cases of sexual violence and sexual harassment, staff should read the guidance document, 'Sexual Violence and Sexual Harassment Between Children in Schools and Colleges' (DfE, 2018).

When a Child Discloses That He/She Has Abused Another Child

10.0 If a child discloses that he or she has abused another child, the member of staff/volunteer should:

- Reassure the child that they are doing the right thing in telling someone.
- Listen carefully to the child without displaying shock or disbelief.
- Accept what the child is saying.
- Let the child speak freely rather than asking direct questions.
- Reassure the child but do not promise confidentiality as a referral may have to be made.
- Explain what will happen next and who you have to inform in order to keep him / her and the child who has been abused safe.
- Record the disclosure on the 'My Concern' database or in event of an IT failure, complete a 'Safeguarding Children' yellow form. These are available in the staff room or from the Inclusion Office
- If a yellow form has been used, place the yellow form into the locked pink box in Y238 or pass to the designated person (Lucy Goddard) or deputy designated person (Jo Connolly / Angie Roberts / Nicola Wilkins / Roxy Ahmad).

Action to be Taken When a Student Transfers to Another Educational Provision

11.0 In the event of a student who is / has been dealt with under the Academy's safeguarding procedures, on transferring to another provision, the Academy will:

- Find out who the receiving provider is.
- Contact the relevant member of staff to discuss the transfer.
- Send all information relating to the student to the receiver, with a transfer form. If this information is being sent in the post, it should be sent securely. It should be copied prior to sending in case it is mislaid.
- Check with the receiver that the child has arrived on the expected day.
- Inform all relevant agencies of the transfer.
- Once the child has shared and receipt of files has been received, the copies may be destroyed.

11.1 In the event of a new student arriving at the Academy, a letter should be sent to the previous educational provision requesting any information.

11.2 In the event of a child using an alternative provision, Passmores must ensure they have a written statement from the provider that all vetting and barring checks that are necessary have been completed for all staff.

Missing students

- 12.0 Occasionally students may go 'missing' for a variety of reasons. The Academy will determine appropriate procedures for responding to these situations, in conjunction with 'Children Missing in Education' (2010). Refer to Attendance policy.

Prevention of Extremism and Radicalisation / Honour Based Violence

- 13.0 Passmores Academy recognises the possibility that exposure to extremist influences and materials can lead to safeguarding concerns.
The accepted Government definition of extremism is ' Vocal or active opposition to fundamental British Values, including democracy, the rule of law, individual liberty, mutual respect and tolerance of different faiths and beliefs: and or calls for the death of members of our armed forces whether in this country or overseas.'
- 13.1 Under section 26 of the Counter-Terrorism and Security Act (HMG, 2015), 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.
- 13.2 At Passmores Academy, we will:
- teach a broad and balanced curriculum which promotes spiritual, moral, cultural, mental and physical development of students and prepares them for the opportunities, responsibilities and experiences of life and must promote community cohesion
 - provide 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
- 13.3 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 students is at risk in this respect, should be passed on using the standard safeguarding procedures ('My Concern' or in the event of an IT failure, yellow forms). Any member of staff can contact the police with their concerns.
- 13.4 Staff should be vigilant about honour based violence (HBV). If there are concerns about this, staff should follow standard safeguarding procedures ('My Concern' or in the event of an IT failure, yellow forms).
- 13.5 The PREVENT referral flowchart is Appendix 4.

Female Genital Mutilation (FGM)

14.0 As of October 2015, the Serious Crime Act 2015 (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. At Passmores Academy, we will operate in accordance with the statutory requirements relating to this issue. Any concerns that one of our students is at risk in this respect, should be passed on using the standard safeguarding procedures ('My Concern' or in the event of an IT failure, yellow forms). Individual staff will be expected to contact the police in person.

Child Sexual Exploitation

- 15.0 Child sexual exploitation is a form of child sexual abuse, which can happen to boys and girls from any background or community. In Essex, the definition of Child Sexual Exploitation (CSE) from the Department of Education (DfE, 2017) has been adopted:

‘Child Sexual Exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.’

It is understood that a significant number of children who are victims of CSE go missing from home, care and education at some point. Our school is alert to the signs and indicators that of a child becoming at risk of, or subject to, CSE and will take appropriate action to respond to any concerns. The designated safeguarding lead is the named CSE Lead in school on these issues and will work with other agencies as appropriate.

Private Fostering

16.0 If we become aware that a child is living with a different family we have a mandatory duty to inform the local authority of this. The definition of private fostering is when a child under 16 (or under 18 if disabled) is cared for by someone who is not their parent or close relative. This is a private arrangement made between a parent and a carer for 28 days or more. School staff should notify the safeguarding lead if they are aware of an arrangement like this. This should be done using 'My Concern', or in the event of an IT failure, yellow forms.

Policy Review

17.0 The Trustees of the Passmores Co-operative Learning Community have delegated the responsibility for ensuring the annual review of this policy to the Local Governing Body.

17.1 This policy was approved on by the Local Governing Body on 10th July and ratified by the Trust Board on 12th July 2018.

The guidance referred to in this policy was updated in March 2019.

17.2 This policy will be reviewed at least annually.

For guidance and information on recognising the signs of child abuse, please see appendices.

PASSMORES ACADEMY
SAFEGUARDING CHILDREN / CHILD PROTECTION POLICY

KEY CONTACTS WITHIN THE SCHOOL (SEPTEMBER 2018)

DESIGNATED SAFEGUARDING OFFICER

NAME: MRS L GODDARD

l.goddard@passmoresacademy.com 01279770800

DEPUTY DESIGNATED SAFEGUARDING OFFICERS

NAME: MISS J CONNOLLY j.connolly@passmoresacademy.com 01279 770800

NAME: MRS A ROBERTS a.roberts@passmoresacademy.com 01279 770800

NAME: MRS N WILKINS n.wilkins@passmoresacademy.com 01279 770800

NOMINATED GOVERNOR FOR SAFEGUARDING – Contact Passmores Academy

Tel: 01279 770800

NAME: MRS. P BURRELL

KEY CONTACTS

The **Family Operations Hub** is available for advice and consultation on Child Protection matters: **0345 603 7627** www.essexeffectivesupport.org.uk

The **CHILDREN'S SAFEGUARDING SERVICE (LADO)** is also able to provide advice and consultancy to educational settings and must be consulted within 24 hours whenever complaints, concerns or allegations of a child protection nature are made against staff or volunteers linked to the Academy: **01245 436744 / 03330139797**

ChildLine **08001111**

Anti-terrorist hotline – **0800 789321**

Forced Marriage Unit – 0207 008 0151

NSPCC Helpline – 0800 028 3550

NSPCC Whistleblowing Helpline – 0800 028 0285

REFERRAL INTO FAMILY OPERATIONS (FORMALLY CHILDREN'S SOCIAL CARE)

Where schools have URGENT and IMMEDIATE concerns for the safety and welfare

of a child or young person during office hours telephone 0345 603 7627

To make URGENT referrals OUT OF HOURS telephone 0345 606 1212

For all NON-URGENT referrals and enquires telephone 0345 603 7627

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.
- Anti-social /criminal behaviour.
- Extreme anger or sadness.
- Aggressive and attention-seeking behaviour.
- 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 a 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 a full account needs to be taken of different patterns of development and different ethnic groups).

The parent or carer may:

- Fail to attend health appointments and not engage with support in how to treat 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:

- 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.
- Variations in colour possibly indicating injuries are caused at different times.
- The outline of an object used e.g. belt marks, hand prints or a hair brush.
- Bruising around the face.
- Grasp marks – cluster of bruises on the upper arm and outside of thigh or body.
- 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 of 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.

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.

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 a 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 disorders), 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 the 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.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate 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 including 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.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

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 irresponsible with no apparent medical cause.
- Failure of the child to grow within the normal expected pattern, with accompanying weight loss.
- Child thrives away from the 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.
- Repeated sexually transmitted infection.
- 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 disorder.
- 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.

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. A separate law came into force in June 2013 outlining detail of this new offence of forced marriage.

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.

Four 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:

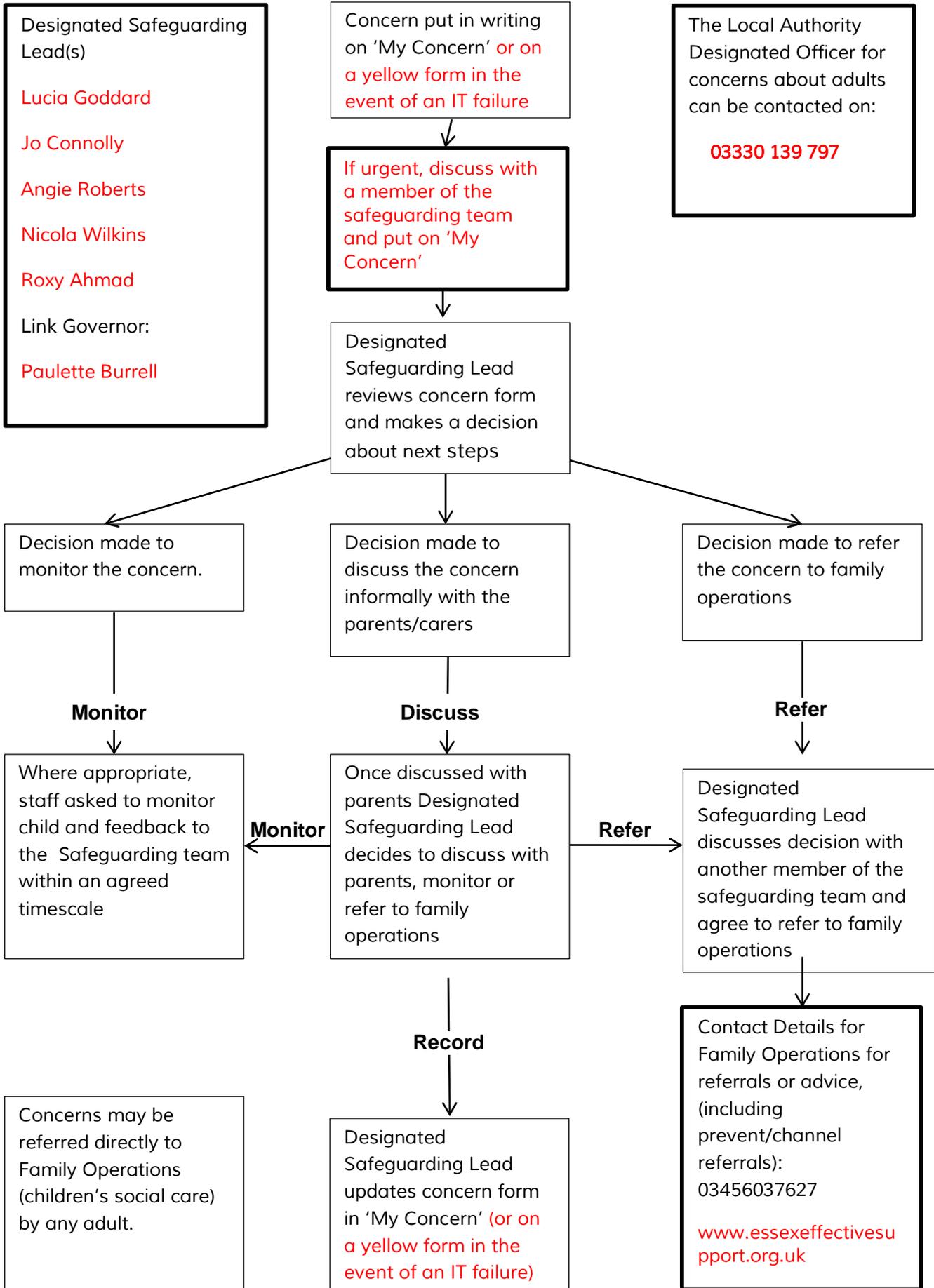
- Child talking about getting ready for a special ceremony.
- Family taking a long trip abroad.
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia 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.

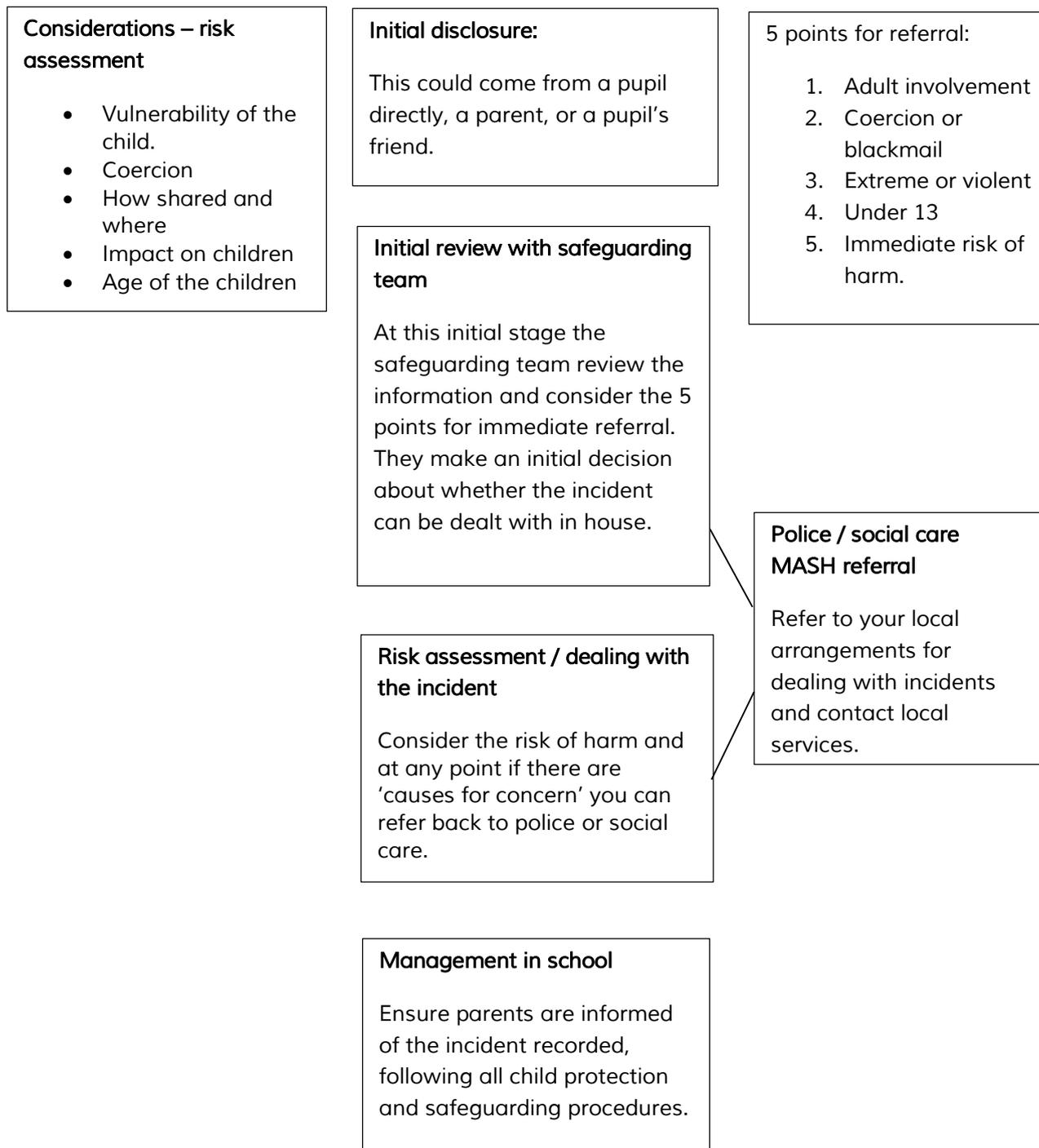
Appendix 2

FLOW CHART FOR RAISING SAFEGUARDING CONCERNS ABOUT A CHILD



Appendix 3

FLOW CHART FOR RESPONDING TO INCIDENTS OF YOUTH PRODUCED SEXUAL IMAGERY



Appendix 4: PREVENT Referral Flowchart

