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Version:	6

Document Information: This policy is in line with 'Keeping Children Safe in Education 2023' Statutory guidance for schools and colleges updated 1 st September 2023.
Scope: Safeguarding and child protection is everyone's responsibility. This policy applies to all staff, volunteers and Trustees and is consistent with the procedures of the Local Safeguarding Board.
Key Objectives: Preston Vocational Centre aims to ensure that appropriate action is taken in a timely manner to safeguard and promote children's welfare.
Outcomes: To provide a safe, secure, caring, positive and stimulating environment that promotes the social, physical, and moral development of the individual child free from discrimination or bullying where children can learn and develop happily.

1. PURPOSE OF POLICY AND GUIDING PRINCIPLES

This policy applies to any concerns, allegations or evidence received in respect of a child/young person/adult in Preston Vocational Centre's care, or concerns regarding an adult who may be a risk to children. For the purposes of this policy the terms child/children have been used throughout. It refers to every child/young person/adult educated at the Centre.

Safeguarding children from abuse or neglect is everybody's business. At Preston Vocational Centre (PVC), the welfare of the children that we have contact with through our work with schools, other establishments and organisations is paramount and we fully recognise our responsibilities to protect and safeguard the welfare of those children. We are committed to working together with other agencies to ensure adequate arrangements within the organisation to identify, assess, and support those children who are suffering or likely to suffer harm.

At PVC we recognise that all children have the right to protection from abuse, regardless of age, gender, ethnicity, race or religion, disability, sexual orientation, or socio-economic background. We understand that child abuse takes many forms and can affect any child regardless of their life circumstances. All staff have a responsibility to report at the first available opportunity any concerns that they have that a child is suffering, or is likely to suffer, from abuse or neglect. The concerns should be shared with the designated safeguarding staff identified by this policy, who will ensure that all allegations and concerns are taken seriously and will share the concerns with the child's school. The designated safeguarding staff member will also consider sharing the concern with the appropriate service such as the local children's social care directorate, the Police, Ofsted, the Local Authority Designated Officer (LADO), or the NSPCC.

Action on safeguarding concerns does not necessarily mean that the child will be subject to child protection processes. Early intervention in such circumstances may result in the child and their carers being provided with necessary support to prevent the situation from worsening, and therefore improving the child's outcomes. The procedures below are compulsory and apply to all our staff and any other persons working with the organisation whether on a paid, voluntary, or temporary basis. Any failure to comply with them will be addressed through the appropriate disciplinary procedures.

PVC's Commitment to Safeguarding Includes:

- Ensuring that members of the board of trustees, the centre manager, staff, and all stakeholders understand their responsibilities under safeguarding legislation and statutory guidance, are alert to the signs of child abuse, and know to refer concerns to the Designated Safeguarding Lead (DSL). In addition, to ensure that staff are aware that ANYONE can make a referral.
- Teaching learners how to keep safe and recognise behaviour that is unacceptable.

- Identifying and making provision for any learner that has been subject to, or is at risk of, abuse, neglect, or exploitation.
- Creating a culture of safer recruitment by adopting procedures that help deter, reject, or identify people who might pose a risk to children.
- Endeavour to provide a safe and welcoming environment where children and young people are respected and valued; where the voice of the child/adult is listened to and is paramount.
- Where it is believed that a child is at risk of or is suffering significant harm, the school will follow the procedures set out by our local Safeguarding Children Partnership arrangements.
- Appointing a DSL and two Deputy DSL's and ensuring that they undergo the appropriate face to face DSL training every 2 years.
- Training and raising awareness of our staff, the need to safeguard children and their responsibilities in safeguarding and the relevant policies and procedures. This training will be reviewed and refreshed every year and we will ensure that all new staff complete the training at induction. This includes online safety which includes an understanding of the expectations, roles and responsibilities in relation to filtering and monitoring.
- Developing and implementing all relevant policies and procedures and ensuring annually that staff are aware of them and how to access them.
- The Trustees have agreed that this policy will be reviewed every year. This review will take into consideration all aspects of applicable legislation and advice current at the time. The next review will be September 2024.

2. RELEVANT GUIDANCE

In drafting this policy, we have taken into consideration the following legislation and guidance:

[Working Together to Safeguard Children 2018 \(HM Government\)](#)

[Keeping Children Safe in Education 2023 \(Department for Education\)](#)

[What to do if you're Worried a Child is being Abused: Advice for Practitioners \(Department for Education\) 2015](#)

[Children Act 1989](#)

[Children Act 2004](#)

[Guidance for Safer Working Practice for Adults Who Work with Children and Young People \(2020\)](#)

[Information Sharing: Guidance for practitioners and managers. HM Government \(2018\)](#)

3. SAFEGUARDING AND CHILD PROTECTION RESPONSIBILITIES

In ensuring that our organisation is prepared for and able to discharge its safeguarding responsibilities we will ensure that we have a DSL (and deputies to act in their absence) and that staff are aware of the named persons and process for reporting concerns. The name of the DSL and deputies and their contact details are included at **Appendix 2** of this policy.

The role of the DSL includes:

- Recording concerns.
- Giving advice to staff.
- Being an identifiable point of contact both inside and outside of the organisation.
- Liaising with other agencies such as schools and the Local Authority Designated Officer (LADO).
- Making referrals to the Local Authority Children’s Services and the Police.
- Taking lead responsibility for understanding and ensuring that effective systems for filtering and monitoring are in place on the centre networks and devices.
- Arranging training for staff.
- Drafting, implementing, and reviewing policies and procedures.
- Ensuring safer recruitment practices are followed including informing shortlisted candidates that online searches may be completed as part of the pre-recruitment process.
- Liaising with the Board of Trustees Safeguarding Lead regarding safeguarding issues and allegations against staff.

We will also ensure that:

- We have procedures for reporting, recording, and reviewing cases where suspected abuse or neglect has been identified.
- All staff have a clear understanding of our Code of Conduct.
- At least one Trustee has Designated Safeguarding responsibility as part of their role, including governance and scrutiny of policies and procedures, day to day management of safeguarding concerns, information sharing and recording, handling allegations made against staff, and generally supporting the work of the DSL.
- Where there is a safeguarding concern, the DSL liaises with the child’s school, local children’s social care, Police, and the Local Safeguarding Partner Arrangements (LSPA) as necessary, and ensures that all local inter-agency procedures relevant to the area in which the child is living are followed and documented.
- Where there are safeguarding concerns, written records are created. Such records will be kept in a secure manner and in accordance with retention policies.

4. **DEFINING CHILD ABUSE AND NEGLECT**

What is Abuse and Neglect?

Abuse and neglect are forms of maltreatment of a child. A child is defined by the Children Act 1989 as anyone who has not yet reached their 18th birthday. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. All staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to, bullying (including cyber-bullying), gender-based violence / sexual assaults and sexting. It is important that this is recognised as and responded to as a safeguarding issue.

Someone might become concerned for a child because of:

- comments made by the child, parent, school staff or others.
- changes in a child's behaviour or mood which may indicate abuse or neglect.
- by a series of events, which, may not be thought to be of concern individually, but when they are viewed together can be considered as significant.

Who Abuses Children?

Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger (for example, via the internet). They may be abused by an individual adult or a group, or another child/children. Children who are living away from their families are especially vulnerable to being abused. Children may be also experience abuse when attending clubs or associations and at leisure or sporting facilities, events, or activities.

Categories of Abuse and Neglect

There are four defined categories of child abuse which are forms of significant harm.

These are:

- neglect;
- physical abuse;
- emotional abuse;
- sexual abuse.

Neglect

Neglect is the persistent failure of a parent or carer to meet a child's basic physical and/or psychological needs, which is likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy because of a

mother's drug or alcohol misuse, parental mental ill health, learning difficulties, or because of a combination of these factors. Where a parent or carer is suffering domestic abuse or violence, the needs of the child may be neglected. Once a child is born, neglect may involve a parent/carer failing to:

- provide adequate food, clothing, and shelter (including excluding the child from the home or abandoning them elsewhere);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision, including using inappropriate people to care for the child;
- ensure access to appropriate medical care or treatment, as required.

It may also include neglecting, or being unresponsive to, a child's basic emotional, social, and educational needs.

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 makes up symptoms, or deliberately makes a child ill (also known as fabricated or induced illness).

Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. It may not necessarily involve violence. Sexual abuse may involve physical contact, including assault by penetration (vaginal, anal, or oral); or non-penetrative acts such as masturbation, kissing and rubbing, including touching the child's body outside of their clothing. Sexual abuse includes non-contact actions, such as involving children in looking at or in the production of pornographic materials, watching sexual activities, or encouraging them to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse can take place via the internet and mobile phone technology. It is not just perpetrated by adult males; women can also sexually abuse, as can other children. Sexual abuse includes children being abused through organised networks of perpetrators or peers via gang membership or association.

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child, which can have significant and long-standing effects on their emotional development. This may include:

- telling children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.
- imposing age or developmentally inappropriate expectations on children. These may include interactions beyond the child's developmental capability, as well as overprotection, limiting exploration and learning or preventing the child participating in normal social interaction.
- seeing or hearing the ill-treatment of another for example where there is domestic violence and abuse.
- serious bullying, causing children frequently to feel frightened or in danger.
- exploiting and corrupting children.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may also occur alone. A list of possible indicators of abuse and neglect is included at Appendix 3.

Children in Specific Circumstances

PVC will, where appropriate, have due regard to the government guidance for children in specific circumstances as outlined below:

- child sexual exploitation (CSE).
- child criminal exploitation (county lines).
- bullying including cyber-bullying.
- domestic violence including so called 'honour' abuse such as female genital mutilation (FGM) and forced marriage.
- gangs and youth violence.
- preventing radicalisation.
- 'sexting' and online safety.
- teenage relationship abuse.
- Trafficking.

Further information on some of these issues is contained at **Appendix 4**. The Government guidance can be found at www.gov.uk

5. ACTING ON CONCERNS: INFORMATION AND GUIDANCE FOR STAFF

As a member of staff at PVC you need to be vigilant and mindful of safeguarding concerns when working in environments where there are children. This section of the policy tells you what action to take when you have concerns about a child. You should never assume that someone else will pass on information which may be critical to the safety and wellbeing of the child. Everyone has a duty of care to pass on their concerns. You do not need to be certain that a child is being harmed, only that you

are concerned that this might be the case. Do not worry about getting it wrong – it is better to pass on a concern that might protect a child from harm, than do nothing and the child experience abuse.

When you are working in an environment where there are children from different schools

Your DSL should make themselves familiar with the policies at each school that you work with and find out who the DSL's at each school are and how to contact them if you have a concern. (The names of the DSL's at each school are in the shared Y drive).

When you are concerned about a child

If you are concerned that a child may be suffering, or is at risk of experiencing, abuse or neglect you should act immediately. The PVC DSL must report this to the appropriate school staff (the DSL where possible). It is not your job to investigate the concern or obtain proof, but to pass your concerns on promptly so that the relevant staff can take action to ensure the safety and wellbeing of the child and/or others. Although you should do what you can to ensure the immediate safety of a child, you must not put yourself in risky or dangerous situations. Where you are unsure of what action to take, or your concerns arise out of working hours you should seek advice from one of the PVC DSL's on what to do next. If you raise a concern to a school DSL, you should also inform one of PVC's DSLs. You may be required to make a written record using PVC's CPOMS 'Safeguarding Report Form'. If you have concerns about any other children (for example those you have encountered in your personal life, or children of work colleagues) you should seek advice from PVC's DSL.

Preserving Evidence

The police are responsible for the gathering and preservation of evidence to pursue criminal allegations against people causing harm. Where it is likely that a criminal act has been committed against a child, the relevant DSL will contact the police immediately. The first concern is always to ensure the safety and wellbeing of the alleged victim. However, in situations where there has been or may have been a crime and the Police have been called it is important that forensic and other evidence is collected and preserved. The Police will attend the scene, and agencies and individuals can ensure evidence is not contaminated by:

- disturbing a 'scene' as little as possible by sealing off areas where possible.
- discouraging washing / bathing / eating / drinking / smoking and use of the toilet in cases of sexual assault.
- not cleaning or allowing further use by others of a toilet used by the victim since the alleged incident in cases of sexual assault.

- not handling items which may have DNA evidence on them.
- putting any clothing which has been removed, or any significant items given to them (weapons etc) in a safe, dry place in bags (for example bin liners or paper bag).

You should be aware of this and not interfere with a potential crime scene or evidence of a crime. You can also contribute to evidence by recording anything that may be of relevance such as your observations in relation to what a child has said, the appearance and behaviour of the child, anyone else involved, and any actions taken by them or others. You should not however record or preserve images of evidence (such as photos of a child or a screenshot of something you have seen or that someone has shown you) on your personal or work device. This may result in contamination of potential evidence in a police investigation and will almost certainly result in the device in question being confiscated and retained by the police.

Responding to Disclosures of Abuse by a Child

Research tells us that children often disclose abuse to those that they feel they can trust, and sometimes this includes those working in centres who are not regarded by children as being in positions of authority. How you respond to anything that a child tells you is very important as it may form the basis of a police investigation. Disclosures by the child should be listened to and recorded carefully as soon as possible, using their own words where possible. You should also:

- give assurances that you are taking the concerns seriously;
- listen carefully to what the child is saying, staying calm, getting as clear a picture as possible, and avoid asking leading questions (questions which suggest an answer to the child) or speculating about what has happened to the child or who has harmed them;
- not give promises of confidentiality (i.e. promise to keep what a child tells you a secret)
- tell the DSL at PVC immediately.

You do not need to question any child in detail – you only need to have some certainty that the child is telling you that they have been or may be harmed by someone. Questioning can risk the contamination of evidence in subsequent police investigations, particularly if something is suggested to a child. You should ask questions to establish basic facts but no more than that. It is vital that you make a written record of any incident, concern, or allegation as soon as possible. Written records must reflect as accurately as possible what was said and done by those initially involved in the incident either as a victim, suspect or potential witness. The notes must be kept safe as it may be necessary to make records available as evidence and to disclose them to the Police and/or a court.

The record should include:

- date and time of the incident.
- exactly what the child said, using their own words (their account), where possible, about the abuse and how it occurred or exactly what has been reported.
- appearance and behaviour of the child including any changes noticed. any injuries observed.
- any actions taken.
- your name and signature and the date/time you made the record.

You should only include facts and not speculate. You should make the record as clear as possible and remember that a number of people may have access to it and will need to understand what happened without coming to you for clarification.

What will happen next?

When concerns are raised, the DSL/deputy DSL at PVC should:

- ascertain whether the situation might fall within the definitions of abuse outlined in this policy.
- ascertain any immediate action required.
- inform the child's school.
- ascertain whether an internal investigation is necessary (for example if an allegation has been made against a member of staff) and ensure that the procedures set out in the relevant policy are followed, and that the LADO are informed.
- where abuse is suspected, make a referral to the appropriate agency (such as Children's Social Care or the Police).
- consider how to preserve any evidence.
- consider how best to support the child (where appropriate) and any staff involved.
- where needed seek advice (for example from the NSPCC).

Where the PVC DSL makes a referral to Children's Social Care the following should be taken into consideration:

- Whether the consent of the parent is necessary and possible to obtain (although this should never be a barrier to sharing information where there are concerns about a child). Consent should not be sought where doing so would place a child at further risk of harm, cause delay, impede a criminal investigation or place any other person at risk of harm.
- The Local Authority area operates a 'thresholds' procedure to prioritise cases in order of need. Further information can be obtained from the relevant Local Safeguarding Partner Arrangements website, and advice obtained where there is uncertainty.

- Any information shared over the telephone needs to be followed up in writing in accordance with LSPA procedures (usually within 24 hours).
- Any relevant services involved with the child or family may need to be informed of the concerns and action taken.
- Where feedback concerning the referral is not received, this should be sought from children’s social care no later than 1 working day after referral.
- Where the DSL is not satisfied by the response of the relevant authority, the local complaint or escalation policies should be followed.
- The DSL may be invited to attend multi agency meetings following the LSPA (which should be consulted when the referral is made).

Feedback for staff who have shared concerns

Whether information is shared with the DSL in school or PVC’s DSL, you can ask for feedback on the outcome of the information that you shared. This may be important for you to be reassured that action is being taken to protect a child, or confirmation that you did the right thing. You should not expect detailed feedback and may only receive confirmation that your concerns have been heard and acted upon. You can however ask what you could have done differently (for example, whether the information you passed on was clear and sufficiently detailed).

6. SUPPORTING STAFF

Here at PVC we appreciate that having contact with children who have suffered abuse or who report safeguarding concerns can be stressful or upsetting for you. To this end we will support any staff by providing you with a safe space and opportunity to discuss concerns or anxieties with the DSL, Trustee with responsibility for safeguarding or a representative of a professional body as appropriate. This support is also made available to the DSL and Trustee with responsibility for safeguarding.

7. ALLEGATIONS AGAINST STAFF

Where allegations of abuse are made against a member of staff or concerns are expressed, this must be taken seriously and investigated. If such a concern or allegation is made about a child, the member of staff receiving the allegation will immediately report the matter to the Centre’s DSL. If the DSL is not available, or if the person who is the subject of the concern, the matter must be reported to the most senior manager not implicated. It will be their responsibility to inform the LADO immediately and discuss the nature of the allegation with the LADO to decide on the appropriate course of action.

This process is outlined by the flowchart in **Appendix 5**.

The member of staff about whom the complaint is made will immediately be placed on special leave pending an investigation (so that the alleged abuse cannot reoccur, and that the investigation cannot be interfered with). They must leave the premises, not contact anyone related to the service and not return until requested. A letter will be sent to the staff member informing them of this decision. A designated manager will become a point of contact and support for the staff member. The staff member will not be permitted to enter PVC until all parties are satisfied and a letter to confirm this has been obtained from the placing authority/investigating authority. PVC recognises that it is important to support staff throughout the investigation, particularly where a malicious comment/allegation has been made. Once the external investigation has been concluded PVC may instigate disciplinary procedures if the staff member may have committed misconduct in the course of his/her duties as an employee.

8. WHISTLEBLOWING

At PVC we aim to have an open and honest culture where safeguarding is responded to effectively and staff feel safe, supported, and able to voice any concerns that they have in the knowledge that they will be responded to. We understand that staff may find it difficult to raise concerns about colleagues, managers or how safeguarding concerns are responded to within a setting. PVC has a specific Whistleblowing Policy which encourages staff to raise concerns and provides details of outside organisations that staff can approach for support and advice.

9. LEARNING LESSONS

At PVC, we understand that safeguarding children is a complex practice area and that it is likely that practice can be improved and further developed. Reviewing our involvement in safeguarding cases can be an opportunity for us to learn and improve. The results of the review, which should be undertaken as soon as our involvement in the case has ended, should be overseen by the DSL. Any learning should be communicated to the Board and all staff as appropriate.

APPENDIX 1: Key Terms

A Child

A child is defined by the Children Act 1989 as anyone who has not yet reached their 18th birthday.

Safeguarding and Promoting the Welfare of Children

Safeguarding and promoting the welfare of children is defined as:

- protecting children from maltreatment.
- preventing impairment of children's health or development.
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- undertaking that role to enable those children to have optimum life chances and to enter adulthood successfully.

Child in Need

Under the Children Act 1989, a child is defined as a child in need if:

- they are unlikely to achieve or maintain, or have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision of services by a Local Authority.
- their health or development is likely to be significantly impaired, or further impaired, without the provision for him/her of such services; or
- they are disabled.

Child Protection

Child protection is a part of the overall concept of safeguarding and promoting the welfare of children. This refers to professional action that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Significant Harm

The Children Act 1989 introduced significant harm as the threshold that justifies compulsory intervention in family life by specific professionals, in the best interests of children. Harm is defined as the ill treatment or impairment of health and development. This definition was clarified in the Adoption and Children Act 2002 to include, "impairment suffered from seeing or hearing the ill treatment of another". Suspicions or allegations that a child is suffering or likely to suffer significant harm

should result in an assessment by the Local Authority in which the child is living. This may include a Section 47 enquiry. Physical abuse, sexual abuse, emotional abuse, and neglect are all categories of significant harm. There are no absolute criteria which can be applied when deciding what constitutes significant harm. Sometimes it can be a single episode, but it is more likely to be an accumulation of significant events, both acute and longer term, which can interrupt, damage, or alter the child's development.

Definition of an Adult

An adult in this context means a person aged 18 years or over. Safeguarding Adults Principles as defined by the Care Act 2014 are as follows:

- Empowerment – presumption of person led decisions and informed consent.
- Prevention – It is better to act before harm occurs.
- Proportionality – Proportionate and least intrusive response appropriate to the risk presented.
- Protection – Support and representation for those in greatest need.
- Partnership – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.
- Accountability – Accountability and transparency in delivering safeguarding.

The Care Act 2014 sets out new guidance regarding adult safeguarding definitions and criteria. The safeguarding duties apply to an adult who:

- has needs for care and support (whether or not the Local Authority is meeting any of those needs); and
- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

They may include for example, people with:

- a mental health problem or mental disorder including dementia, or people on the autistic spectrum.
- a physical disability.
- a sensory impairment.
- a learning disability.
- who are frail and who are experiencing a temporary illness.

APPENDIX 2: Useful Contact Numbers

Preston Vocational Centre:
01772 880 680
info@prestionalvocationalcentre.co.uk

Senior Designated Safeguarding Lead:
Martin Grayston 07976 863 842
martin.grayston@prestonvocationalcentre.co.uk

Designated Safeguarding Lead:
Dan Whalley 01772 880 680
daniel.whalley@prestonvocationalcentre.co.uk

Deputy Safeguarding Lead:
Maria Aziz 01772 880 680
maria.aziz@prestonvocationalcentre.co.uk

Trustee Designated Safeguarding Lead:
Sian Elcomb
07828 144 774
sianelcomb@hotmail.com

NSPCC 0808 800 5000

LCC Local Authority Designated Officer (LADO) 01772 536694
Social Services 0300 123 6720

Whistleblowing Advice line: For anyone concerned about how workplace child protection issues are being handled: 0800 028 0285 – 8:00 AM to 8:00 PM, Monday to Friday

Childline 0800 1111

APPENDIX 3: Indicators of Abuse

Indicators of Physical Abuse

- Injuries in unexpected places or injuries that look like something (i.e. a cigarette burn, finger mark etc.). Unexplained recurrent injuries.
- Improbable explanations or inability to explain injuries.
- Wearing clothes to cover injuries, even in hot weather.
- Fear of medical help or examination.
- Aggression towards others or self.
- Fear of physical contact – shrinking back if touched.
- Admitting that they are punished.
- Fear of suspected abuser being contacted.

Indicators of Sexual Abuse

- Sexual health issues such as urinary tract infections, STIs, repeated pregnancy tests or termination of pregnancies.
- Other reactions, such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia or eating disorder.
- Age inappropriate sexual knowledge/behaviour.
- Displaying inappropriate sexual behaviour towards others.
- Behaving in a sexually provocative way.
- Learning problems, poor concentration.
- Wetting/soiling.
- Sleeplessness, nightmares, fatigue.
- Psychosomatic symptoms like abdominal pain.
- Multiple sexual partners.
- Obsessive cleanliness.
- Compulsive vomiting.
- Unwillingness to undress in front of others.
- Lack of trust or fear of someone they know well, such as not wanting to be alone with an individual.

Indicators of Neglect

- Constant hunger.
- Poor personal hygiene.
- Constant tiredness.
- Poor state of clothing or general appearance.
- Emaciation.
- Untreated medical problems.
- No social relationships.
- Compulsive scavenging.
- Destructive tendencies.

In Younger Children:

- Short stature and underweight.
- Red/purple mottled skin or poor skin.
- Swollen limbs with sores that are slow to heal.
- Constant tiredness.
- Dry sparse hair.
- General physical apathy.
- Unresponsiveness or indiscriminate in relationships with adults..
- Poor dental health.
- Medical needs not attended to.
- Poor or inappropriate diet leading to diarrhea, or abnormally voracious appetite indicating hunger.
- Poor personal hygiene.
- Severe nappy rash.
- Emaciation.
- Compulsive stealing.
- Scavenging for food or clothes.
- Inappropriate drinking patterns, e.g. from drains.
- Not reaching developmental milestones.
- Disordered behaviour.
- Low self-esteem.
- No social relationships.
- Poor intellectual development and underachieving.
- Repeated accidents or ingestion of harmful substances arising from inadequate supervision.
- Failure to thrive, without an organic reason.

Indicators of Emotional Abuse

- Sudden speech disorders.
- Continual self-deprecation.
- Overreaction to mistakes.
- Extreme fear of any new situation.
- Inappropriate response to pain ('I deserve this').
- Neurotic behaviour (rocking, hair twisting).
- Extremes of passivity or aggression.
- Fear of parents being contacted.
- Self-harm.
- Wetting/soiling.
- Substance misuse.
- Chronic running away.
- Inability to play.
- Compulsive stealing.
- Low self esteem.
- Apathy.
- Excessively clingy or attention seeking behaviour.

- Poor growth.
- Distractibility and delayed language development.

Carers' Responses to the Child or Adult May also Give Cause For Concern

- Scapegoating.
- Ostracising from activities.
- Indifference to the person's needs.
- Hostility towards the victim.
- Ridicule, sarcasm, deliberate frightening, threatening.
- Cruelty, like being locked up in cold, dark surroundings or deprived of something.
- Encouraging others to respond to the victim in any of these ways.

APPENDIX 4: Specific Safeguarding Concerns

Child Sexual Exploitation

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.

Child Criminal Exploitation (County Lines)

Gang members are moving into drugs markets outside the major cities, to the counties where they are unknown to the local police, there is less competition locally from rival gangs, and non- metropolitan police forces tend to have less experience of addressing this type of activity. The exploitation of vulnerable children is central to county lines. For example, children are groomed and/or coerced into moving and selling drugs, and the homes of adults who are vulnerable can be taken over as a base from which drugs are sold. There is evidence that young people involved in drug dealing can be targeted often by older members of their own gang who steal drugs/money to make them owe a debt which must be repaid. This can lead to further coercion and exploitation including violence.

Radicalisation and Extremist Behaviour

Radicalisation can be defined as the action or process of causing someone to adopt radical positions on political or social issues. Signs that may indicate a child is being radicalised include:

- isolating themselves from family and friends.
- talking as if from a scripted speech.
- unwillingness or inability to discuss their views.
- a sudden disrespectful attitude towards others.
- increased levels of anger.
- increased secretiveness, especially around internet use.

Children who are at risk of radicalisation may have low self-esteem or be victims of bullying or discrimination. Extremists might target them and tell them they can be part of something special, later brainwashing them into cutting themselves off from their friends and family.

Peer on Peer Abuse

Peer-on-peer abuse can be manifested in many ways, including:

- Bullying, including cyberbullying and prejudice-based or discriminatory bullying.
- Abuse in intimate personal relationships between peers.
- Physical abuse – this may include an online element which facilitates, threatens, and/or encourages physical abuse.
- Sexual violence – this may include an online element which facilitates, threatens, and/or encourages sexual violence.
- Sexual harassment, including online sexual harassment, which may be standalone or part of a broader pattern of abuse.
- Causing someone to engage in sexual activity without consent.
- The consensual and non-consensual sharing of nude and semi-nude images and/or videos.
- Upskirting.
- Initiation- and hazing-type violence and rituals, which can include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element.

All staff will be clear as to the centre policy and procedures regarding peer-on-peer abuse and the role they have to play in preventing it and responding where they believe a child may be at risk from it.

All staff will be made aware of the heightened vulnerability of children with SEND, who evidence suggests are more likely to be abused than their peers. Staff will not assume that possible indicators of abuse relate to the child's SEND and will always explore indicators further.

All staff will be made aware of the heightened vulnerability of LGBTQ+ children, who evidence suggests are also more likely to be targeted by their peers. In some cases, children who are perceived to be LGBTQ+, regardless of whether they are LGBTQ+, can be just as vulnerable to abuse as LGBTQ+ children. The centre's response to sexual violence and sexual harassment between children of the same sex will be equally as robust as it is for incidents between children of the opposite sex.

Children will be made aware of how to raise concerns or make a report and how any reports will be handled. This includes the process for reporting concerns about friends or peers. Children will also be reassured that they will be taken seriously, be supported, and kept safe.

Peer on peer abuse is a defined safeguarding issue and will be responded to in the same way as any other concern about a child.

Children Missing from Home and Education

Children are best protected by regularly attending school or an educational centre where they will be safe from harm and where there are professionals to monitor their well-being. Any absence by a child from their guardian family or school/centre could be indicative of other safeguarding issues such as bullying, peer on peer abuse, emotional abuse, child sexual exploitation and radicalisation, and should be responded to by following the LSPA procedures for the area in which the child lives.

Female Genital Mutilation (FGM)

Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.

Section 5B of the Female Genital Mutilation Act 2003 places a statutory duty upon certain professionals to report to the Police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. In addition, it is illegal for someone to arrange for a child to have this procedure. Therefore, if concerns are raised about the possibility of this taking place Children's Social Care and/or the Police will be notified.

Refer to the Home Office guidance - Mandatory Reporting of Female Genital Mutilation – procedural information, October 2015.

Forced Marriages

A forced marriage is a marriage in which one or both spouses do not (or, in the case of children and some adults at risk, cannot) consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual, and emotional pressure. Staff may encounter situations where a child is expressing worry or unhappiness over a forthcoming family trip, celebration, or meeting and any concerns regarding this should be raised with the DSO immediately so that any necessary action to protect the child can be undertaken.

Sexual Harassment and Sexual Violence

Sexual violence and sexual harassment can occur between two children of any age and gender. It can also occur through a group of children sexually assaulting or harassing a single child or group of children.

Sexual harassment is defined as 'unwanted conduct of a sexual nature' that can occur online and offline. Sexual harassment is likely to violate a child's dignity and/or make

them feel intimidated, degraded, or humiliated and/or create a hostile, offensive or sexualised environment. Sexual harassment includes, but is not limited to sexual comments, stories, remarks or names, sexual 'jokes' or 'taunting'. Physical behaviour such as deliberately brushing against someone or interfering with someone's clothes, online sexual harassment, including sexualised online bullying and non-consensual sharing of sexual images and videos and sexual exploitation. Sexual violence is a sexual offence under the Sexual Offences Act 2003 such as rape, assault by penetration or sexual assault. Sexual harassment and sexual violence are not acceptable and should not be tolerated or dismissed as 'banter' just 'having a laugh' or 'part of growing up'.

Serious Violence

Through training (face to face or on the Educare training portal), all staff will be made aware of the indicators which may signal a child is at risk from, or is involved with, serious violent crime. These indicators include, but are not limited to:

- Increased absence from the centre.
- A change in friendships.
- Relationships with older individuals or groups.
- A significant decline in performance.
- Signs of self-harm.
- A significant change in wellbeing.
- Signs of assault.
- Unexplained injuries.
- Unexplained gifts or new possessions.

Staff will be made aware of some of the most significant risk factors that could increase a child's vulnerability to becoming involved in serious violence. These risk factors include, but are not limited to:

- Being male.
- Having been frequently absent from school/the centre.
- Having been permanently excluded from school/centre.
- Having experienced child maltreatment or trauma.
- Having been involved in offending, such as theft or robbery.

Staff members who suspect a child may be vulnerable to, or involved in, serious violent crime will immediately report their concerns to the DSL.

APPENDIX 5: Allegations Against Staff Flowchart.

