

Child Protection and Safeguarding Policy and Procedure

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1. Introduction

This policy applies to all staff including senior managers and the board of trustees, paid staff, volunteers and sessional workers, agency staff, students or anyone working on behalf of Learning Disability Network London (LDN London) and Kids Can Achieve (KCA) for people with learning disabilities

The purpose of the policy is to

- Protect Children and young people who use our services
- Provide information on what is defined as abuse, the signs that can suggest abuse and the actions that are required to be taken
- Provide links to information which supports this policy

LDN London and KCA believe that **all children** have the right to be free from experiencing abuse of any kind.

We follow the principles that **Safeguarding is everyone's responsibility**

We will promote the welfare of all children and young people and provide safe, secure, and welcoming support for the children and their families and ensure our work practice protects children and young people from abuse at all times. All staff **must** read at least Part 1 of the statutory guidance and sign it to show that they have read and understood their duties and responsibilities to effectively carry out their role.

We will achieve this this by thoroughly implementing this child protection and safeguarding policy, and ensuring all staff and volunteers are following the guidelines and procedures as outlined below.

Under the Children's Act 1989, all staff employed by LDN London and KCA have a legal obligation to report any child abuse they may witness, suspect, or are informed of by other team members. This includes visitors in any of our services and activities delivered to the children and young people that take place within building based settings or within the family home or community.

Staff employed by LDN London and KCA, volunteers and sessional workers also have a legal obligation to assist in any investigation that may take place. **All staff** should be prepared to identify children who may benefit from early help (see Appendix 8). **Any staff member** who has a concern about a child's welfare should follow the referral processes.

This policy has been drawn up on the basis of law and guidance that seeks to protect children, namely:

- Children Act 1989
- United Nations Convention of the Rights of the Child 1991
- Data Protection Act 1998
- Human Rights Act 1998
- Sexual Offences Act 2003
- Children Act 2004

- Safeguarding Vulnerable Groups Act 2006
- Protection of Freedoms Act 2012
- Children and Families Act 2014
- Special Educational Needs and Disability (SEND) code of practice: 0 25 years – Statutory guidance for organisations which work with and support children and young people
- Working Together to Safeguard Children 2018

2. What is safeguarding?

Safeguarding children and young people is **everyone's** responsibility. **Everyone** who comes into contact with children and their families has a role to play. We operate a child centred co-ordinated approach to safeguarding. We will work with children, parents, professionals and the community to ensure the rights and safety of children are paramount and to give the very best start in life to all children. No single practitioner can have a full picture of a child's needs and circumstances.

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

Effective child protection is essential as part of our wider work to safeguard and promote the welfare of children. However, we aim to proactively safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced.

It might be difficult to accept, but every child can be hurt, put at risk of harm or abused, regardless of their age, gender, religion or ethnicity. Safeguarding legislation and government guidance says that safeguarding means:

- 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
- taking action to enable all children and young people to have the best outcomes.

and

"the action we take to promote the welfare of children and protect them from harm is everyone's responsibility. Everyone who comes into contact with children and families has a role to play." (*Ref Working together to safeguard children (HM Government March 2015)*)

All staff should be aware of safeguarding issues that can put children at risk of harm.

All staff have a responsibility to provide a safe environment in which children can thrive and learn.

All staff should be prepared to identify children who may benefit from early help.

Any staff member who has a concern about a child's welfare should follow the referral processes of the organisation.

All staff should be aware of systems which support safeguarding and these should be explained on their induction.

All staff should know what to do if a child tells them he/she is being abused or neglected. Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the best interest of the child.

The staff handbook clearly sets out where staff can access policies on:

- Child protection
- Behaviour policy
- Staff behaviour policy or code of conduct
- The role of the designated safeguarding lead.

LDN London and KCA are committed to reducing the risk of and increasing the detection of safeguarding through:

- Effective staff and volunteer recruitment which ensures full pre-employment checks including references, right to work, Disclosure and Barring, fit for work and clarification of gaps in employment
- Robust values based selection and monitoring procedures
- The provision of training, raising awareness and enabling team members to use proactive approaches in the delivery of safe, respectful and responsive services
- The development of robust policies and procedures which outline good practice, adhere to the law and are commensurate with our mission and values
- Effective implementation of multi-disciplinary practice

Where abuse is suspected LDN London and KCA will provide a service, which is:

Prompt

In situations where there is any doubt about the child or young person immediate health, emotional wellbeing, mental health and safety.

<u>Sensitive</u>

To children and young people and their parents and families.

Effective

In reporting, communicating and providing solutions which aim to prevent the risk of further abuse and the abuse recurring, working within a strengthening families multiagency frame work

Balanced

Team members must exercise responsibilities and duties appropriately, avoiding unwarranted intervention into family's lives.

Aware

Does not discriminate against a child/young person or family member because of their religion, cultural beliefs, age, disability, gender, race, or sexuality.

We will support children, young people and their families to have access to sources of relevant information such as our Abuse is Wrong document, what to do if you are worried about a child or young person, complaints procedure and to make available in all services information on who to contact and their role if they have any concerns.

3. **Definition of Abuse**

Child abuse happens when a person – adult or child – harms a child. It can be physical, sexual or emotional, but can also involve a lack of love, care and attention. Nealect can be just as damaging to a child as physical or sexual abuse.

Children may be abused by:

- family members
- friends
- people working or volunteering in organisational or community settings
- people they know
- or, much less commonly, by strangers.

Children suffering abuse often experience more than 1 type of abuse. The abuse usually happens over a period time, rather than being a single, isolated incident. Increasingly, abuse can happen online

NSPCC https://www.nspcc.org.uk/globalassets/documents/informationservice/definitions-signs-child-abuse.pdf

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children.

(Harrow http://www.harrowlscb.co.uk/wp-content/uploads/2018/01/The-Green-Book <u>2017.pdf</u>)

A person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children & young people may be abused in a family, institutional or community setting; by those known to them or, more rarely, by a stranger.

(Westminster https://www.rbkc.gov.uk/lscb/information-professionals-andvolunteers/what-abuse-and-neglect)



Specific explanations of what abuse is and what the signs of abuse are at Appendix 1. All staff must read these.

4. Statement on safeguarding disabled children

Any child with a disability is by definition a 'child in need' under s17 of the Children Act 1989. Disabled children are more vulnerable to significant harm through physical, sexual, emotional abuse and / or neglect than children who do not have a disability.

The presence of multiple disabilities increases the risk of abuse and neglect.

Safeguards for disabled children are essentially the same as for non-disabled children. Particular attention should be paid to promoting a high level of awareness of the risks of harm, high standards of practice, and awareness of barriers to communication, which may make it difficult to tell others what is happening.

Where there are concerns about the welfare of a disabled child, they should be acted upon in accordance with the guidance, in the same way as with any other child.

The national guidance, 'Safeguarding Disabled Children' – Practice Guidance, provides a framework of collaborative multi-agency responses to safeguard disabled children.

Our Child Protection and Safeguarding Policy reflects that additional barriers can exist when recognising abuse and neglect. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration.
- Being prone to more peer group isolation than other children.
- The potential for children with SEN and disabilities being disproportionally impacted by behaviours such as bullying, without showing any signs; and
- Communication barriers and difficulties in overcoming these barriers.

Where there are concerns about the welfare of a disabled child, they should be acted upon in accordance with the guidance, in the same way as with any other child.

5. Safer Recruitment

LDN London and KCA will implement robust recruitment and selection procedures, deliver training and supervision, promote safe working practices, and work within the law. All staff and volunteers employed by LDN London and KCA and either based in any of our building based services and / or within the community will be subject to a criminal record check through the Disclosure & Barring Service (DBS) prior to starting work. This is in addition to references and interview information for working with children. A DBS Enhanced Certificate will be required.

A copy of this Child Protection and Safeguarding Policy will be given to each staff member during their induction process. They will be asked to sign it and hand it back to their manager, once they have read and understood the policy. All staff are also required to attend child protection / safeguarding training as soon as possible after starting work with LDN London and KCA. Each staff member will also receive yearly refresher briefings. **All staff** will also be required to complete the NSPCC training on Safeguarding before working with children or young adults.

We are committed to the NSPCC Safeguarding Standards which replaces the Safe Network and refer to these new standards as a source of specialist information and resources.

Single Central Record

Held by HR it will indicate that the following checks have been carried out:

- An identity check
- A barred list check
- An enhanced DBS
- Checks on those who have lived outside the UK
- A professional qualifications check
- A right to work

All this information will be logged on the HR database.

6. Reporting suspect child abuse / whistleblowing / incident reporting

All staff or volunteers must report any concerns to the Designated Safeguarding officer (Appendix 3 Safeguarding Poster - Our Commitment to Safeguarding Children) in the first instance and keep their line manager informed. If they are not available, **do not wait;** contact the On Call manager for Children, Youth and Families directly (Appendix 5 Who to Contact)

As a MINIMUM In the event of suspected, alleged or observed abuse staff must follow the Accident Incident procedure of following the 5Rs



- You have witnessed any form of child abuse towards a child who attends any Children, Youth and Family Service or LDN London and KCA led activity or building based service or within the family home or community.
- You were informed of any form of abuse by another team member, a visitor to LDN London and KCA led activity or building based service or within the family home or community or by any other professional having contact with Children, Youth and Family Services
- You have witnessed something that worries you while undertaking your role as an employee of LDN London and KCA about any chid or young person.
- You have any concerns about abuse towards a child based on the Definitions of Abuse (Appendix 1 Definitions of Abuse)
- A child/young person has disclosed to you. You will not make any promises to keep secrets for a child or young person who has disclosed information to you. This disclosure must be reported immediately.

All staff, Trustees, and volunteers have an individual responsibility to safeguard children from harm or suspected harm, by making known their concerns about abuse in order that full consideration can be given to whether or not further action is needed.

Failing to raise a concern about the possibility of abuse

- Means that nothing is done to improve or change the situation.
- Places the child at further risk.
- Allows the alleged perpetrator to carry on unchallenged.
- Increases the possibility of abuse happening to others.
- Could be seen as condoning the action.
- Means that the alleged perpetrator does not receive the help they need.

Should a team member suspect that abuse is occurring, it is important to discuss this with your line manager immediately. Discussing a suspicion is often difficult, however being open to the possibility of abuse allows for an examination into the factors causing the concern, and will initiate further enquiries.

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If the concerns are about another team member and you are unable to raise your concerns directly with a manager you should refer to LDN London and KCA's "Whistleblowing Policy".

Staff failing to report concerns may find themselves facing disciplinary action.

7. Designated Lead for Safeguarding

The designated lead for safeguarding takes the lead responsibility for child protection, acts as a source of support, advice, and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies and be able to keep detailed, accurate, secure written records of concerns and referral. They are there to support staff in making referrals to the Local Authority, to refer cases of radicalisation, refer to the Channel programme and act as a point of contact with 3 safeguarding partners.

Sanchia Lyon – Associate Director of Children Youth and Family Services is the designated lead for safeguarding and children protection concerns within LDN London and KCA

Gabby Machell - Chief Executive Officer for LDN London will deputise for the designated lead for safeguarding as required.

8. Managing referrals

Refer all cases of suspected abuse to the relevant local authority children's social care.

Refer to the relevant local authority designated officer (LADO) for child protection concerns (all cases that concern a staff member) following an 'allegation against a member of staff'. If because of consulting the LADO a child protection investigation is undertaken, LDN London and KCA disciplinary procedures will be followed <u>only</u> when these investigations and any resulting actions are completed.

Referral (in discussion with the human resources department) to Disclosure and Barring Service (cases where a person is dismissed or left due to risk / harm to a child) and/or Police (cases where a crime may have been committed).

All concerns must be passed on to Sanchia Lyon. In Sanchia Lyon's absence, contact Gabby Machell promptly and within 12 hours.

If for some reason both Sanchia Lyon and Gabby Machell and the CYF Service Managers are unavailable, the team member will need to report to any other of LDN London and KCA's Senior Managers.

The Out of Hours on-call support phone number must be used if a report needs to be made outside of normal working hours (9am – 5pm Monday to Friday) and none of the above people are available. **The on call number is 020 8968 2680**

The relevant manager will ask the staff member to document all face to face or telephone conversations regarding the child; what they witnessed, observed or were told and the steps that were taken. The documentation will be recorded on the incident form marked confidential, stating the facts of what was seen, observed, or heard, and should not contain any interpretation or speculation of the events and circumstances. It should be dated and signed and copies held in the child/young person's personal file and a copy sent to the designated Lead (all under password protected communication)

9. Training for Safeguarding Leads

The designated safeguarding lead will receive appropriate training carried out every two years in order that they understand the assessment process for providing early help and intervention in the relevant Local Authority, for example through locally agreed common and shared assessment processes such as early help assessments and submission of MARF (Multi-agency assessment and referral form).

Designated Safeguarding leads have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so.

Only the Designated Safeguarding Lead mentioned above or the Designated Deputy will take action if a safeguarding concern is suspected. The relevant service manager will take the following steps:

- Look at/read and listen to all information from the staff member who has brought forth their concerns.
- Discuss with their line manager if appropriate, and make a decision as to whether the case should be reported to the relevant Social Services department. It is important that the manager handling the situation feels they are being supported by his/her line manager. The line manager will offer support at all times during the process, and will take responsibility for checking in with the manager handling the situation.
- Where practicable, in consultation with the social services department when they are involved, the concerns should be discussed with the child's parents, UNLESS this may either place the child at risk of significant harm.
- The manager can at any point consult with the relevant Local Authority Social Services safeguarding team about the concerns.
- If the manager decides to report the case to Social Services, they should do so as soon as possible and within 12 hours
- The manager must also document all of his/her conversations, steps taken and when and any further information gathered/observed.

The manager will at all times follow the procedures outlined in the London Child Protection Procedures and should refer back to these procedures at any stage if needed.

10. If the allegation is against a member of staff:

At LDN London and KCA we have a duty of care to our employees, and we will ensure that we provide effective support from our HR department. We will try to deal with the allegation guickly and in a fair and consistent way that provides effective protection for the child and, at the same time, supports the person who is the subject of the allegation. The following definitions will be used when determining the outcome of the allegation:

- Substantiated
- Malicious •
- False
- Unsubstantiated
- Unfounded •

The individual will be advised to contact their union, if they have one, or a colleague for support. They will also be given access to employee assist for welfare counselling.

If an allegation is made against a member of staff within the children, youth and family services, after seeking advice a course of action will be agreed with the relevant Local Authority's Designated Officer (LADO) (or child protection advisor acting as LADO). The member of staff will initially be suspended by the Designated Safeguarding Lead or deputy, in consultation with the Director of Human Resources pending an investigation.

It is important for all staff to understand that ANY member of staff may be subject to this procedure including senior managers and trustees.

The Disabled Children's Team or the relevant social work team will be notified and the manager handling the situation will discuss their concerns based on the information recorded.

The parents or carers should also be kept informed and they will be contacted and a meeting held with the parents to discuss the concerns, and subsequent actions. However where a strategy discussion is required, or police or social care need to be involved the agencies will agree what the parents are told. Parents will also be made aware of the requirements about any allegation to maintain confidentiality.

All these steps will be undertaken in close liaison with the relevant LADO. All decisions and actions will be made in close liaison with the Director of Human Resources and the agreement of the LADO.

Any subsequent investigation action and will be conducted in accordance with the Disciplinary Procedure.

11. If the allegation is against a member of a child's family

The safety of children is paramount in all decisions relating to their welfare. If there is an allegation made against a member of the child's family, the manager should seek immediate advice from the relevant Local Authority Social Services department as to what to do with the child. It may be necessary for the child to stay within the service setting after the other children have gone home, until a decision has been made by Social Services, staff should be prepared for this. The child should not be released into anyone's care until advised by Social Services. This is of particular importance when there is a serious threat to the child's safety and/or the need to protect the child from further abuse and to avoid the child being pressured by family members to not cooperate with an investigation.

Copies of all documents written by the manager, concerned staff member and any other witnesses/ involved parties will be kept on the child's record under confidential section. Further copies will be made available to Social Services, Health Services, the General Practitioner or Health Visitor and parents if required. Staff reporting this type of incident may need to be available to attend strategy meetings or a child protection conference.

It is important to remember that allegations could be made against anyone; staff, volunteers, other children, other adults, and parents/carers.

12. Where a Child is thought to be in immediate danger

The person who suspects a child may be in immediate danger should inform the On Call manager immediately who should always report through to the Designated Lead and then follow their protocol accordingly.

If an adult is in the Service and an allegation has been made, call the On Call manager immediately who will always report this to the Designated Lead and then follow their protocol accordingly.

If the staff member thinks that child may be at further risk of abuse on leaving the Service, they should inform the On Call manager who will always report this to the Designated Lead and then follow their protocol accordingly.

All systems should operate with the **best** interests of the child at heart.

13. Mobile Phones / Cameras and Social Media

Personal mobile phones and cameras must not be used at any time to take photographs or to make recordings of children at work either within building based, family home or in community settings. All personal phones and cameras must be put away in a separate secure place and not be carried or available for use by a worker during a session.

While at work no mobile phones should be carried on a worker's person unless they are phones designated for specific use as part of the service.

There are no circumstances that will justify adults: making, downloading, possessing or distributing indecent images of children.

All staff, sessional and volunteers are not to befriend a child/young person on their own Facebook, WhatsApp or any other social media communication.

14. Confidentiality and GDPR

In all cases Safeguarding has a priority over confidentiality and keeping secrets/ confidentiality cannot be given to children, adults or family members.

However all staff must agree to keep all information that they receive, confidential to those that need to know. This means they act accordingly, e.g. following the General Data Protection Regulations and Child Protection guidelines, Confidentiality Policy, and informing other team members only if instructed to do so by the manager. The relevant manager / Director of Services must be informed of any information that is seen as confidential to the Service, before any further actions or decisions are made.

Any electronic communication must use appropriate password protected or encrypted systems to maintain confidentiality on a need to know basis.

Staff should have regard to Data Protection Act 2018 and the GDPR to keep information safe and secure. However **The Data Protection and GDPR do not prevent the sharing of information for the purposes of keeping children safe**. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children

15. Appendices

- Appendix 1 Definitions of Abuse
- Appendix 2 Typical Abusive Injuries
- Appendix 3 Guidance on how to respond to a child/young person who has disclosed
- Appendix 4 Our Commitment to Safeguarding
- Appendix 5 What to do if you have concerns about a child
- Appendix 6 Who to contact in the Westminster Society and Kids Can Achieve
- Appendix 7- Useful Links
- Appendix 8 Contact details by area for Local Area Designated Officers
- Appendix 9 Actions where there are concerns about a child

Appendix 1 Definitions of abuse

The following examples cover the types of abuse and what this can look like.

This is predominantly taken from the NSPCC with some additions based on our own services.

https://www.nspcc.org.uk/globalassets/documents/information-service/definitionssigns-child-abuse.pdf

It is important within all of the observations being made to be mindful of the diagnosed needs of the children we support and that an indicator of abuse on a child without disabilities may be a communication process, behaviour or diagnosed health related issue for that particular child. A reminder for all staff is that we ask that we are open to the possibility that abuse may have occurred but not to see abuse in every situation.

a) Physical abuse:

Physical abuse happens when a child is deliberately hurt, causing injuries such as cuts, bruises, burns and broken bones. It can involve hitting, kicking, shaking, throwing, poisoning, burning or suffocating.

It is also physical abuse if a parent or carer makes up or causes the symptoms of illness in children. For example, they may give them medicine they don't need, making them unwell. This is known as fabricated or induced illness (FII).

Signs of physical abuse

All children have trips, falls and accidents which may cause cuts, bumps and bruises. These injuries tend to affect bony areas of their body such as elbows, knees and shins and are not usually a cause for concern.

Injuries that are more likely to indicate physical abuse include: Bruising

- bruises on babies who are not yet crawling or walking
- bruises on the cheeks, ears, palms, arms and feet
- bruises on the back, buttocks, tummy, hips and backs of legs
- multiple bruises in clusters, usually on the upper arms or outer thighs
- bruising which looks like it has been caused by fingers, a hand or an object,
- like a belt or shoe
- large oval-shaped bite marks.

Burns or scalds

- any burns which have a clear shape of an object, for example cigarette burns
- burns to the backs of hands, feet, legs, genitals or buttocks.

Other signs of physical abuse include multiple injuries (such as bruising, fractures) inflicted at different times.

If a child is frequently injured, and if the bruises or injuries are unexplained or the explanation doesn't match the injury, this should be investigated. It's also concerning if there is a delay in seeking medical help for a child who has been injured.

b) Neglect

Neglect is persistently failing to meet a child's basic physical and/or psychological needs usually resulting in serious damage to their health and development.

Neglect may involve a parent's or carer's failure to:

- provide adequate food, clothing or shelter
- supervise a child (including leaving them with unsuitable carers) or keep them
- safe from harm or danger
- make sure the child receives appropriate health and/or dental care
- make sure the child receives a suitable education
- meet the child's basic emotional needs parents may ignore their children
- when they are distressed or even when they are happy or excited. This is
- known as emotional neglect.

Neglect is the most common type of child abuse. It often happens at the same time as other types of abuse.

Signs of neglect

Neglect can be difficult to identify. Isolated signs may not mean that a child is suffering neglect, but multiple and persistent signs over time could indicate a serious problem.

Some of these signs include:

- children who appear hungry they may come without lunch money or even try to steal food
- children who appear dirty or smelly and whose clothes are unwashed or inadequate for the weather conditions
- children who are left alone or unsupervised
- children who fail to thrive or who have untreated injuries, health or dental
- problems
- children with poor language, communication or social skills for their stage of
- Development and level of known disability
- children who live in an unsuitable home environment, for example the house
- is very dirty and unsafe, perhaps with evidence of substance misuse or
- violence
- children who have taken on the role of carer for other family members.
- Children who are consistently not collected or and absent family carer when returned to the family home

c) Sexual abuse

Sexual abuse is forcing or enticing a child to take part in sexual activities. It doesn't necessarily involve violence and the child may not be aware that what is happening

Child sexual abuse can involve contact abuse and/or non-contact abuse.

Contact abuse happens when the abuser makes physical contact with the child. It includes:

- sexual touching of any part of the body whether the child is wearing clothes or not.
- rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
- forcing or encouraging a child to take part in sexual activity
- making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves non-touching activities. It can happen online or in person and includes:

- encouraging a child to watch or hear sexual acts
- not taking proper measures to prevent a child being exposed to sexual activities by others
- showing pornography to a child
- making, viewing or distributing child abuse images
- allowing someone else to make, view or distribute child abuse images.

Online sexual abuse includes:

- persuading or forcing a child to send or post sexually explicit images of themselves, this is sometimes referred to as sexting
- persuading or forcing a child to take part in sexual activities via a webcam or smartphone
- having sexual conversations with a child by text or online
- meeting a child following online sexual grooming with the intent of abusing them.

Abusers may threaten to send sexually explicit images, video or copies of sexual conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the abuse has stopped.

Abusers will often try to build an emotional connection with a child in order to gain their trust for the purposes of sexual abuse. This is known as grooming.

Signs of sexual abuse

There may be physical signs that a child has suffered sexual abuse. These include:

- anal or vaginal soreness or itching
- bruising or bleeding near the genital area
- discomfort when walking or sitting down
- an unusual discharge
- sexually transmitted infections (STI)
- pregnancy.
- Changes in the child's mood or behaviour may also cause concern. They may want to avoid spending time with specific people. In particular, the child may show sexual behaviour that is inappropriate for their age. For example:

- they could use sexual language or know things about sex that you wouldn't
- expect them to
- a child might become sexually active at a young age
- they might be promiscuous.

d) Child sexual exploitation

Child sexual exploitation (CSE) is a type of sexual abuse. Young people in exploitative situations and relationships receive things such as gifts, money, drugs, alcohol, status or affection in exchange for taking part in sexual activities.

Young people may be tricked into believing they're in a loving, consensual relationship. They often trust their abuser and don't understand that they're being abused. They may depend on their abuser or be too scared to tell anyone what's happening. They might be invited to parties and given drugs and alcohol before being sexually exploited. They can also be groomed and exploited online.

Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs (Berelowitz et al, 2013).

Child sexual exploitation can involve violent, humiliating and degrading sexual assaults and involve multiple perpetrators.

Spotting the signs of child sexual exploitation

Sexual exploitation can be very difficult to identify. Warning signs can easily be mistaken for 'normal' teenage behaviour.

Young people who are being sexually exploited may:

- go missing from home, care or education
- be involved in abusive relationships, appearing intimidated and fearful of certain people or situations
- hang out with groups of older people, or anti-social groups, or with other vulnerable peers
- get involved in gangs, gang fights, gang membership
- have older boyfriends or girlfriends
- spend time at places of concern, such as hotels or known brothels
- not know where they are, because they have been moved around the country
- be involved in petty crime such as shoplifting
- have access to drugs and alcohol
- have new things such as clothes and mobile phones which they can't or won't explain
- have unexplained physical injuries.

e) Harmful sexual behaviour

Children and young people who develop harmful sexual behaviour (HSB) harm themselves and others.

HSB can include:

- using sexually explicit words and phrases
- inappropriate touching
- using sexual violence or threats
- full penetrative sex with other children or adults.

Sexual behaviour between children is also considered harmful if one of the children is much older – particularly if there is more than 2 years' difference in age or if one of the children is pre-pubescent and the other isn't (Davies, 2012).

However, a younger child can abuse an older child, particularly if they have power over them – for example, if the older child is disabled (Rich, 2011).

Signs of harmful sexual behaviour

It's normal for children to show signs of sexual behaviour at each stage in their development. Children also develop at different rates and some may be slightly more or less advanced than other children in their age group. Behaviours which might be concerning depend on the child's age and the situation.

If you're unsure whether a child's sexual behaviour is healthy, Brook provide a helpful, easy-to-use traffic light tool. The traffic light system is used to describe healthy (green) sexual behaviours, potentially unhealthy (amber) sexual behaviours and unhealthy (red) sexual behaviours.

f) Emotional abuse

Emotional abuse is persistent and, over time, it severely damages a child's emotional health and development.

It involves:

- humiliating, putting down or constantly criticising a child
- shouting at or threatening a child or calling them names
- mocking a child or making them perform degrading acts
- constantly blaming or scapegoating a child for things which are not their fault
- trying to control a child's life and not recognising their individuality
- not allowing them to have friends or develop socially
- pushing a child too hard or not recognising their limitations
- manipulating a child
- exposing a child to distressing events or interactions such as drug taking,
- heavy drinking or domestic abuse
- persistently ignoring them
- being cold and emotionally unavailable during interactions with a child
- never saying anything kind, positive or encouraging to a child and failing to praise their achievements and successes.

Signs of emotional abuse

There aren't usually any obvious physical signs of emotional abuse but you may spot signs in a child's actions or emotions.

It's important to remember that some children are naturally quiet and self-contained whilst others are more open and affectionate. Mood swings and challenging behaviour are also a normal part of growing up for teenagers and children going

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through puberty. Be alert to behaviours which appear to be out of character for the individual child or are particularly unusual for their stage of development and level of need.

Babies and pre-school children who are being emotionally abused may:

- be overly-affectionate towards strangers or people they haven't known for
- very long
- not appear to have a close relationship with their parent, for example when
- being taken to or collected from nursery
- lack confidence or become wary or anxious
- be unable to play
- be aggressive or nasty towards other children and animals.

Older children may:

- use language, act in a way or know about things that you wouldn't expect for their age
- struggle to control strong emotions or have extreme outbursts
- seem isolated from their parents
- lack social skills or have few, if any, friends
- fear making mistakes
- fear their parent being approached regarding their behaviour
- self-harm.

g) Domestic abuse

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people who are or were in an intimate relationship. There are many different types of abusive behaviours that can occur within intimate relationships, including emotional, sexual, financial, psychological and physical abuse.

Domestic abuse can be underpinned by an on-going pattern of psychologically abusive behaviour (coercive control) that is used by one partner to control or intimidate the other partner.

In situations of domestic abuse, both males and females can be abused or be abusers. Domestic abuse can happen in any relationship regardless of age, sexuality, gender identity, race or religious identity.

Research by the NSPCC has indicated that many young people experience domestic abuse in their own intimate relationships (Barter, 2009). The UK's cross-government definition of domestic abuse also covers relationships between young people aged 16 and 17 (Home Office, 2013).

Children's exposure to domestic abuse between parents and carers is child abuse. Children can be directly involved in incidents of domestic abuse or they may be harmed by seeing or hearing abuse happening. The developmental and behavioural impact of witnessing domestic abuse is similar to experiencing direct abuse. Children in homes where there is domestic abuse are also at risk of other types of abuse or neglect.

Signs of domestic abuse

It can be difficult to tell if domestic abuse is happening, because it usually takes place in the family home and abusers can act very differently when other people are around.

Children who witness domestic abuse may:

- become aggressive
- display anti-social behaviour
- suffer from depression or anxiety
- not do as well at school due to difficulties at home or disruption of moving to and from refuges.

h) Bullying and cyberbullying (please also see Bullying policy)

Bullying is behaviour that hurts someone else. It usually happens over a lengthy period of time and can harm a child both physically and emotionally. Bullying includes:

- verbal abuse, such as name calling
- non-verbal abuse, such as hand signs or glaring
- emotional abuse, such as threatening, intimidating or humiliating someone
- exclusion, such as ignoring or isolating someone •
- undermining, by constant criticism or spreading rumours
- controlling or manipulating someone
- racial, sexual or homophobic bullying
- physical assaults, such as hitting and pushing
- making silent, hoax or abusive calls.

Bullying can happen anywhere - at school, at home or online. When bullying happens online it can involve social networks, games and mobile devices. Online bullying can also be known as cyberbullying.

Cyberbullying includes:

- sending threatening or abusive text messages
- creating and sharing embarrassing images or videos •
- 'trolling' sending menacing or upsetting messages on social networks, chat
- rooms or online games
- excluding children from online games, activities or friendship groups •
- setting up hate sites or groups about a particular child •
- encouraging young people to self-harm
- voting for or against someone in an abusive poll •
- creating fake accounts, hijacking or stealing online identities to embarrass a • young person or cause trouble using their name.

Signs of bullying and cyberbullying

It can be hard to know whether or not a child is being bullied. They might not tell anyone because they're scared the bullying will get worse. They might also think that the bullying is their fault.

No one sign indicates for certain that a child's being bullied, but you should look out for:

belongings getting 'lost' or damaged

- physical injuries such as unexplained bruises
- being afraid to go to school or services, being mysteriously 'ill' each morning, or skipping school and sessions
- not doing as well at school or in sessions
- asking for, or stealing, money (to give to a bully)
- being nervous, losing confidence or becoming distressed and withdrawn
- problems with eating or sleeping
- bullying others

Indicators that signal that children are at risk from or are involved with, serious violent crime:

- Unexplained gifts/new possessions
- Increased absence
- Changes in friendships, relationships
- Significant decline in academic performance
- Signs of self-harm / significant change in well-being
- Signs of assault /unexplained injuries

i) Child trafficking

Child trafficking is child abuse. It involves recruiting and moving children who are then exploited. Many children are trafficked into the UK from overseas, but children can also be trafficked from one part of the UK to another.

Children are trafficked for:

- child sexual exploitation
- benefit fraud
- forced marriage
- domestic servitude such as cleaning, childcare, cooking
- forced labour in factories or agriculture
- criminal exploitation such as cannabis cultivation, pickpocketing, begging, transporting drugs, selling pirated DVDs and bag theft.

Children who are trafficked experience many forms of abuse and neglect. Physical, sexual and emotional abuse is often used to control them and they're also likely to suffer physical and emotional neglect.

Child trafficking can require a network of organised criminals who recruit, transport and exploit children and young people. Some people in the network might not be directly involved in trafficking a child but play a part in other ways, such as falsifying documents, bribery, owning or renting premises or money laundering (Europol, 2011).

Child trafficking can also be organised by individuals and the children's own families.

Traffickers trick, force or persuade children to leave their homes. They use grooming techniques to gain the trust of a child, family or community. Although these are methods used by traffickers, coercion, violence or threats don't need to be proven in cases of child trafficking - a child cannot legally consent to their exploitation so child trafficking only requires evidence of movement and exploitation.

Modern slavery is another term which may be used in relation to child trafficking. Modern slavery encompasses slavery, servitude, forced and compulsory labour and human trafficking (HM Government, 2014).

The Modern Slavery Act passed in 2015 in England and Wales categorises offences of slavery, servitude, forced or compulsory labour and human trafficking (NCA, 2017).

Signs of child trafficking

Signs that a child has been trafficked may not be obvious but you might notice unusual behaviour or events.

These include a child who:

- spends a lot of time doing household chores
- rarely leaves their house, has no freedom of movement and no time for playing
- is orphaned or living apart from their family, often in unregulated private foster care
- lives in substandard accommodation
- isn't sure which country, city or town they're in
- is unable or reluctant to give details of accommodation or personal details
- might not be registered with a school or a GP practice
- has no documents or has falsified documents
- has no access to their parents or guardians
- is seen in inappropriate places such as brothels or factories
- possesses unaccounted for money or goods
- is permanently deprived of a large part of their earnings, required to earn a minimum amount of money every day or pay off an exorbitant debt
- has injuries from workplace accidents
- gives a prepared story which is very similar to stories given by other children.

There are also signs that an adult is involved in child trafficking, such as:

- making multiple visa applications for different children
- acting as a guarantor for multiple visa applications for children
- travelling with different children who they're not related to or responsible for
- insisting on remaining with and speaking for the child
- living with unrelated or newly arrived children
- abandoning a child or claiming not to know a child they were previously with.

j) Female genital mutilation

Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting.

The age at which FGM is carried out varies. It may be carried out when a girl is newborn, during childhood or adolescence, just before marriage or during pregnancy (Home Office et al, 2016).

Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence.

There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It's used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health.

Signs of female genital mutilation

A girl at immediate risk of FGM may not know what's going to happen. But she might talk about or you may become aware of:

- a long holiday abroad or going 'home' to visit family
- relative or cutter visiting from abroad
- a special occasion or ceremony to 'become a woman' or get ready for marriage
- a female relative being cut a sister, cousin or an older female relative such as a mother or aunt
- missing school or sessions repeatedly or running away from home.

A girl who has had FGM may:

- have difficulty walking, standing or sitting
- spend longer in the bathroom or toilet
- appear withdrawn, anxious or depressed
- have unusual behaviour after an absence from school or college
- be particularly reluctant to undergo normal medical examinations
- ask for help, but may not be explicit about the problem due to embarrassment or fear.

Reporting requirements

Regulated health and social care professionals and teachers in England and Wales must report 'known' cases of FGM in under-18s to the police (Home Office, 2016).

k) Information on preventing radicalisation

Protecting children from the risk of radicalisation should be seen as wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The internet and the use of social media in particular has become a major factor in the radicalisation of young people.

As with other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help and protection. Staff should use their judgement in identifying children who may be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme.

Prevent

From 1st July 2015, specified authorities, are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 to have due regard to the need to prevent people from being drawn into terrorism. This duty is known as the Prevent duty. The Prevent duty builds on existing local partnership arrangements. Safeguarding arrangements must take into account the policies and procedures of the Local Safeguarding Children Board. Effective engagement with parents and families should also be considered as they are in a key position to spot signs of radicalisation. The Prevent guidance refers to the importance of Prevent awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extreme ideas.

Please go to <u>https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty</u> for further information.

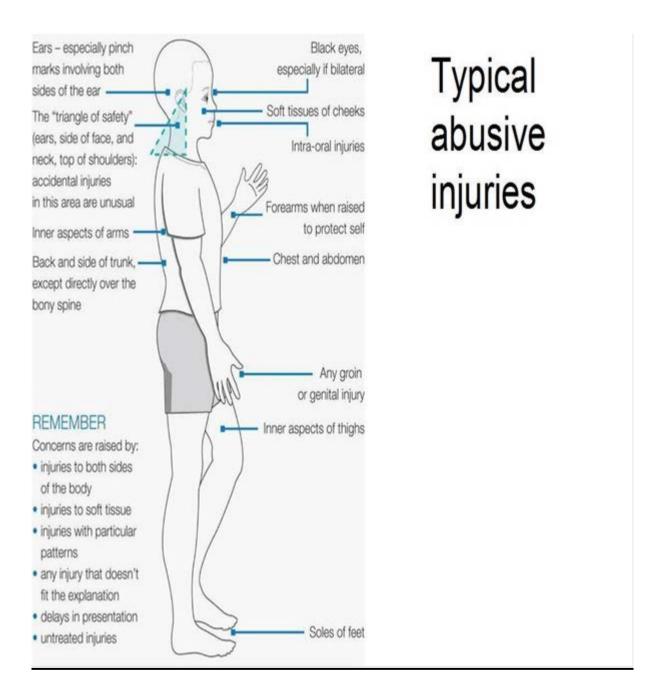
We have a duty to ensure that children are safe from terrorist and extremist material when accessing the internet.

Channel

Staff should understand when it is appropriate to make a referral to the Channel programme. This is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools and services to make referrals if they are concerned that an individual might be vulnerable to radicalisation. The engagement with this programme is voluntary and they may be asked to attend a Channel panel to discuss the individual referred to determine whether support is required.

Please go to <u>https://www.gov.uk/government/publications/channel-guidance</u> for more information.

Appendix 2



Appendix 3 Guidance on how to respond to a child / young person who has disclosed

<u>DO NOT</u>
X Make promises you can't keep e.g. don't promise that the child will never have to see the alleged person again. This is not always possible;
<i>X</i> Interrogate the child – it is not your job to carry out an
investigation. This is the job of the police and social services. If you do have to ask a question,
make sure it is an open-ended question;
 X Interrupt the child or change the subject when the child starts talking to you;
X Cast doubt on what the child has
told you. It is important that the child feels you believe them, as it has probably been very difficult for the child to tell you;
X Make the child feel responsible for the abuse;
X Do nothing – make sure you tell your nominated child protection person immediately.

Appendix 4 - Our Commitment to Safeguarding Children

We are committed to safeguarding and promoting the welfare of each child and work within the framework of the Children Act 1989, the Children Act 2004 and Every Child Matters, Working Together to Safeguard Children which promotes inter-agency working to safeguard and promote the welfare of children as paramount.

If you are concerned about the wellbeing of any child or suspect that a child is being, or is at risk of being, neglected or abused physically, emotionally or sexually:

Do not keep these concerns to yourself

- Discuss them with the lead person for Safeguarding or the deputy who will advise on what further action to take.
- If we are concerned about your child we will talk to you as soon as possible unless it could affect a criminal investigation.

Your designated officer for Safeguarding is:

Name	Job title	Contact numbers
Gabby Machell	Chief Executive Officer LDN London	07951 601 598
Sanchia Lyon	Associate Director for Children Youth and Families	0208 4202300 07940 790 641

For Services Based in Westminster

Access to children's services team **020 7641 4000.** This number gets through to the Emergency Duty Team.

E-mail is : <u>accesstochildrensservices@westminstergov.uk</u>

Weekends the Emergency duty number is: 0207 641 2388

For case consultations or follow up enquires contact the Duty Child Protection Adviser on 0208 641 7668

In the event of needing advice or guidance or to raise a concern please contact: KCA on-call 07415228423

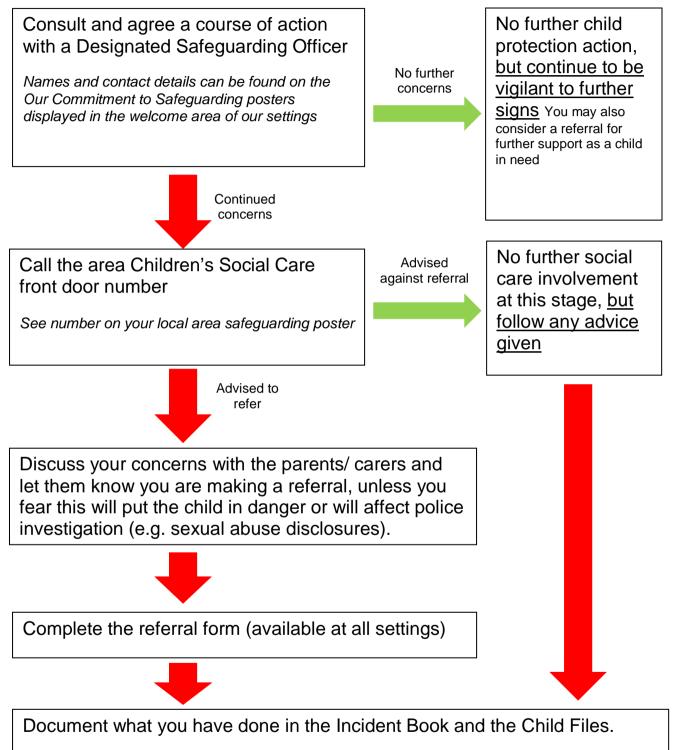
Harrow Children's Access Team (CAT)– Golden Number : 020 8901 2690 (Out of hours EDT – 020 8424 0999) Email: Duty&Assess@harrow.gov.uk

All referrals should be made by phone call and email only for back up

For Ofsted: 0300 123 1231

Appendix 5 – Flow Chart

What to do if you have concerns about a child:



Appendix 6 - WSPLD and KCA Contacts

Who to contact at LDN London and KCA

Always go directly to the Designated Lead Officer for Safeguarding for any safeguarding concern

Gabby Machell Chief Executive Officer

Sanchia Lyon Associate Director of CYF

gmachell@wspld.org 07951 601 598

slyon@wspld.org 07940 790 641

Other Key Managers

Mandy Crowford Director of Services

mcrowford@wspld.org 07947614881

Ilias Kostalas Service Development Manager Play and Youth Services- Westminster and Harrow

ikostalas@wspld.org 07739627514

Anna Kalinowska Early Years Service Manager akalinowska@wspld.org 07985 230 929

Appendix 7 - Useful Links

Harrow Safeguarding Childrens Board	http://www.harrowlscb.co.uk/guidance-for- practitioners/concerns-about-a-member-of-staff-or- volunteer-who-works-with-childrenyoung-people/
Westminster, Kensington and Chelsea and Hammersmith and Fulham Local Safeguarding Children's Board	https://www.rbkc.gov.uk/sharedservices/lscb/professionals/ wccsafeguardingcontacts.aspx
Islington Safeguarding Childrens Board	http://www.islingtonscb.org.uk/key-practice- guidance/Pages/Local-Authority-Designated-Officer- (LADO).aspx
NSPCC	https://www.nspcc.org.uk/what-we-do/
London Child Protection Procedures	http://www.londoncp.co.uk/chapters/A_contents.html London Safeguarding Children's Board

Appendix 8 - Contact details by area for Local Area Designated Safeguarding Officer

London Borough of Harrow

- Children's Access Team Golden number 020 8901 2690
- Local Authority Designated Officer (LADO) Janice Miller
- Email : Janice.Miller@harrow.gov.uk
- Contact on 020 8736 6435 (Monday, Tuesday and Fridays only, otherwise ring Golden number)
- Emergency duty out of Hours 020 8424 0999

http://www.harrowlscb.co.uk/guidance-for-practitioners/concerns-about-a-member-of-staff-or-volunteer-who-works-with-childrenyoung-people/

London Borough of Westminster

- Access to Children's Services Team number 020 7641 4000
- Local Authority Designated Officer (LADO
- All LADO referrals go through Westminster Child Protection Advisors team first phone:
 020 7641 7668
- Email: LADO@westminster.gov.uk
- Emergency duty out of Hours 020 7641 6000

https://www.rbkc.gov.uk/lscb/information-professionals-and-volunteers/contacts-safeguardingwestminster

London Borough Of Brent

- ALL REFERRALS SHOULD BE SENT TO THE BRENT FAMILY FRONT DOOR: Telephone: 020 8937 4300 - Option 1
- Email family.frontdoor@brent.gov.uk
- Local Authority Designated Officer (LADO) can be contacted through the above procedure.

http://www.brentlscb.org.uk/article.php?id=468&menu=4&sub_menu=32

London Borough Of Islington

- Children's Services contact team 020 7527 7400
- Local Authority Designated Officer (LADO) Laura Eden and Timur Djavit
- Email: LADO@islington.gov.uk
- Or call **020 7527 8102**
- Emergency duty out of hours **020 7226 0992**

http://www.islingtonscb.org.uk/key-practice-guidance/Pages/Local-Authority-Designated-Officer-(LADO).aspx

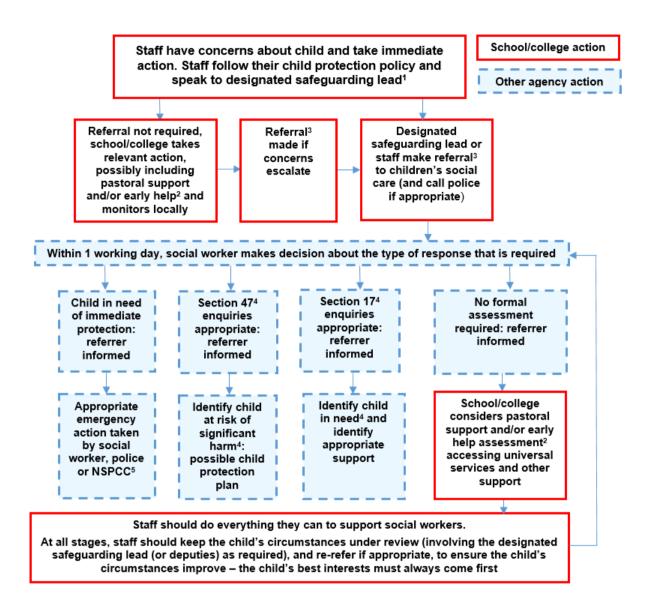
COVID 19 has meant that the way we are operating in response to coronavirus continues to be different to business as usual. However a number of important safeguarding principles remain the same:

- The best interests of the child must always continue come first.
- If anyone has a safeguarding concern they should act on it immediately
- A DSL or deputy should be available
- It is essential that unsuitable people are not allowed to enter the children's workforce and / or gain access to children.
- Children should continue to be protected at all times.

This will come into effect if there is another outbreak and lockdown.

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Appendix 9 Actions where there are concerns about a child



STAFF MUST NOT DISCLOSE INFORMATION TO ANY OTHER MEMBER OF STAFF.

CONFIDENTIALITY IS PARAMOUNT.

Please sign below once you have read and understood these guidelines.

I (name) agree to follow the guidelines outlined in this child protection/safeguarding policy at all times when working for LDN London and KCA.

I agree to maintain confidentiality.

Signed: Date.....

Print Name:

Review of policy

Date of last review	August 2020
Date of next review	August 2021
Date it was first implemented	August 2008
Author(s)	Director of Services
Audience	All employees, trustees and volunteers