

Appendix 1

to Safeguarding Children Policy 16th September, 2016

Definitions and possible indicators and signs of abuse

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Abuse: 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. They may be abused by an adult or adults or another child or children. It should be noted that abuse can be carried out by both men, women and children.

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

Signs that MAY INDICATE Sexual Abuse

Sudden changes in behaviour and school performance

Displays of affection which are sexual and age inappropriate

Self harm, self mutilation or attempts at suicide

Alluding to secrets which they cannot reveal

Tendency to cling or need constant reassurance

Regression to younger behaviour for example thumb sucking, playing with discarded toys, acting like a baby

Distrust of familiar adults. Anxiety of being left with relatives, a child minder or lodger

Unexplained gifts or money

Depression and withdrawal

Fear of undressing for PE

Sexually transmitted disease

Fire setting

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical

harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Signs that MAY INDICATE physical abuse

Bruises and abrasions around the face

Damage or injury around the mouth

Bi-lateral injuries such as two bruised eyes

Bruising to soft area of the face such as the cheeks

Fingertip bruising to the front or back of torso

Bite marks

Burns or scalds (unusual patterns and spread of injuries)

Deep contact burns such as cigarette burns

Injuries suggesting beatings (strap marks, welts)

Covering arms and legs even when hot

Aggressive behaviour or severe temper outbursts.

Injuries need to be accounted for. Inadequate, inconsistent or excessively plausible explanations, or a delay in seeking treatment should signal concern.

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

Signs that MAY INDICATE emotional abuse

Over reaction to mistakes

Lack of self confidence/esteem

Sudden speech disorders

Self harming

Extremes of passivity and/or aggression

Compulsive stealing

Drug, alcohol, solvent abuse

Fear of parents being contacted

Unwillingness or inability to play

Excessive need for approval, attention and affection

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Signs that MAY INDICATE neglect.

Constant hunger

Poor personal hygiene

Constant tiredness

Inadequate clothing

Frequent lateness

Untreated medical problems

Poor relationship with peers

Compulsive stealing and scavenging

Rocking, hair twisting and thumb sucking

Running away

Loss of weight or being constantly underweight

Low self esteem

Further information on Child Sexual Exploitation Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyber bullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse. Further information on CSE is kept in the safeguarding file in the office or is available at www.kscb.org.uk/guidance/sexual-abuse-and-exploitation

Further information on Female Genital Mutilation (FGM): professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 16-17 of the Multi-Agency Practice Guidelines referred to above. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

Further information on Preventing Radicalisation under The Counter-Terrorism and Security Act: Identifying cases of pupils at risk of involvement in extremist behaviour

Exposure of children to extremist ideology can hinder their social development and educational attainment alongside posing a very real risk that they could support or partake in an act of violence. Radicalisation of young people can be compared to grooming for sexual exploitation.

Every member of staff at Lollipops recognises that children exposed to radicalisation and extremism is no different to safeguarding against any other vulnerability and should be approached in the same way as protecting children from other risks.

All staff should complete an e-learning training package developed by The National Counter Terrorism Policing Headquarters (NCTPHQ), in conjunction with the College of Policing which includes guidance on how to identify people who may be vulnerable to being drawn into terrorism, and how to refer them into the Channel process. The Designated Safeguarding Lead should also attend additional training which includes further information on the Prevent Duty.

Children Missing from Education (CME)

Government statutory guidance issued by the Department for Education states that Children missing education (CME) are at significant risk of underachieving, being victims of abuse, and becoming NEET (not in education, employment or training) later on in life.

Where a child is registered with us but fails to attend or notify us of the reason for non-attendance, we will endeavour to contact them as soon as possible to ascertain the reason for absence. Further action such as contacting Early Help will be dependent on outcome of investigations.