



SAFEGUARDING CHILDREN POLICY & PROCEDURE

Responsible Director: Director of Homes and Wellbeing

Responsible Manager: Head of Homes and Wellbeing

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1. Policy Statement

1.1 NCHA is committed to ensuring the safety of the people who use our services. All persons have the right to live their lives free from violence and abuse. This includes children who live with our customers or have contact with our customers. These procedures apply to all children and young people under 18, as well as to unborn children when there is a concern that they may be at risk of harm after birth.

All children and young people have:

- The right to protection and freedom from all types of abuse
- The right to express views on any issues or decisions affecting them
- The right to a happy, healthy and secure childhood

A child/young person is never to blame for any abuse he/she may suffer.

Our procedures have been designed in line with the Safeguarding Children Boards of the local authorities we work with.

1.2 All staff have a duty to report suspicions or disclosures of abuse, and failure to do so is a failure in their duty of care. It should also be noted that when the death of a child is caused by suspected abuse or neglect, safeguarding procedures should be followed alongside any other relevant procedures.

1.3.1 No Smacking Statement

1.3.1 Whilst the vast majority of parents who use physical chastisement do not go on to seriously abuse their children, there have been tragic cases where punishments escalated from smacking children to hitting them with implements, punching and kicking them.

1.3.2 Physically punishing children demonstrates to children that violence is acceptable. Many research studies have shown that 'use of physical punishment in the family during childhood can lead to an increased probability of anti-social and violent behaviour in adolescence'.

1.3.3 As part of the sometimes difficult and challenging developmental progress of a child's integration into society and the need to establish what constitutes acceptable behaviour NCHA firmly believes in a No Smacking approach to the disciplining and teaching of children. This includes both the physical smacking act and the threat of smacking.

1.3.4 Staff must challenge the physical punishment of children. Other forms of punishment and discipline should be used instead of physical punishment. This may include taking away privileges e.g. toys and sweets.

1.3.5 Other agencies such as Health Visitors, Parent Line, Sure Start and Children's Services are available to offer support to parents/ carers who need support in managing their child(ren)'s behaviour.

1.4 All staff have a duty to:

- Familiarise themselves with the policy and procedures
- Attend child protection training if working with children/young people
- Be aware of the forms of abuse and the signs / indicators of abuse
- Raise any concerns on the safety of children
- Know how to deal with a disclosure
- Always take any child protection matters seriously and follow the correct procedures

2. Definitions

2.1.1 Recognising Abuse

2.1.1 Child abuse occurs to children of both sexes and all ages, in all cultures, religions and social classes and to children with and without disabilities. All staff should be alert to signs that a child may be at risk of significant harm.

2.1.2 Other factors which may be present for parents or carers such as drug or alcohol misuse, learning disability, disability or chronic ill health, mental ill health, acute family stress such as domestic violence, homelessness, racial harassment or other discrimination can all seriously impact on a child's well being.

2.1.3 General considerations:

- Identification of child abuse may be difficult, it normally requires both medical and social assessment
- Several different types of child abuse may be present at the same time, e.g. a child who is being sexually abused may also be suffering physical abuse. When enquiring into one type of abuse staff need to be alert for signs of other potential abuse
- Always listen carefully to the child – pay particular attention to any spontaneous statement. In the case of children without speech or with limited language, pay attention to their signing or other means of expression, including behaviour and play
- Any delay in seeking medical assistance or none being sought at all could be an indicator of abuse
- Beware if explanation of an accident is vague, lacking detail, is inconsistent with the injury or what you know, or varies in version
- Take note of inappropriate responses from parents or carers
- Observe the child's interaction with parent – particularly wariness, fear or watchfulness
- E-safety should be an important consideration, this is defined as ensuring children and young people are safe whilst using all fixed and mobile technologies that children and young people may encounter, now and in the future, which allows them access to content and communications that could raise e-safety issues or pose risks to their wellbeing and safety.

2.2 Definitions of Abuse

2.2.1 There is no clear legal definition of 'child abuse' but there are laws to protect children from harm. For example local authorities and certain other agencies or organisations that come into contact with children have a legal duty to protect them if they are: under 18, and suffering, or are likely to suffer, significant harm. Harm to a child means ill treatment or damage to their health or development.

2.2.2 According to the The National Society for the Prevention of Cruelty to Children (NSPCC), Child abuse is any action by another person – adult or child – that causes significant harm to a child. It can be physical, sexual or emotional, but can just as often be about a lack of love, care and attention.

Specifically these include:

2.2.3 Physical Abuse

Physical abuse occurs when somebody inflicts injuries on a child or knowingly does not prevent them. Examples of physical abuse include, hitting, shaking, kicking, smacking, punching, burning, scalding, hair pulling, biting, choking, poisoning, mutilating and attempted suffocation or drowning. Giving children alcohol and/ or inappropriate drugs would also constitute physical abuse. Abuse can also result from physical punishment or excessive discipline.

2.2.4 Sexual Abuse

This is defined as the sexual exploitation of children. It can include sexual intercourse, rape, buggery, digital penetration, penetration with a foreign object, child pornography, genital stimulation, touching, stroking, oral sex and forcing a child to witness sexual acts. Forms of abuse that appear to be less severe such as fondling may be used to groom a child for future sexual exploitation or may indicate that other forms of sexual abuse are already occurring. Sexual abuse typically involves a misuse of power that may be based on differences in ages, intellect, physical strength or understanding and may involve bribery and threats.

Sexual abuse includes non-contact activities, such as involving children in looking at, including online and with mobile phones, or in the production of, pornographic materials, watching sexual activities or 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.

2.2.5 Psychological Abuse

This occurs when persistent or severe emotional ill treatment or rejection affects a child's emotional or behavioural development. Examples include terrorising a child by threatening physical injury or abandonment, forcing the child to witness domestic violence, chronic deprivation of access to social contact, exclusion, malicious taunting, racial abuse, humiliation (such as repeatedly telling the child that he/she is no good) continuous shouting, swearing, threats or verbal abuse and failing to provide any positive parental attention. Other forms of abuse always involve an element of emotional abuse, particularly threats. There is a tendency to assume that emotional

abuse is less serious but the long term effects of emotional abuse on a child can be very serious.

2.2.6 Cyber bullying

Cyber bullying can be defined as 'the use of Information and Communications Technology (ICT), particularly mobile phones and the internet, deliberately to upset and intimidate someone else'. It can be an extension of face-to-face bullying, with technology providing the bully with another route to harass their target. However, it differs in several significant ways from other kinds of bullying: the invasion of home and personal space; the difficulty in controlling electronically circulated messages, the size of the audience, perceived anonymity, and even the profile of the person doing the bullying and their target. Research into the extent of cyber bullying indicates that it is a feature of many young people's lives.

Cyber bullying takes different forms: threats and intimidation, harassment or 'cyber-stalking' (e.g. repeatedly sending unwanted texts or instant messages) vilification/defamation; exclusion or peer rejection, impersonation, unauthorised publication of private information or images (for example, images that have been misleadingly referred to as 'happy slapping'), and manipulation.

2.2.7 Financial or Material

Including theft, fraud, exploitation, pressure in connection with wills, property or inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits. In the cases of potential financial abuse, the issue of capacity under the Mental Capacity Act 2005 should be considered (see section 4 Role of Referrer).

2.2.8 Neglect and Acts of Omission

Neglect is the severe or persistent failure to meet the essential needs of a child or to protect the child from danger. It includes the repeated failure to attend to the physical and developmental needs of the child and may include failing to provide warmth, clothing, food or consistent care or failing to meet the educational or medical needs of the child. A lack of supervision may expose the child to danger (such as a fall or traffic). Severe neglect can result in the significant impairment of the child's health or development, including failure to thrive. Self-neglect is not in itself a safeguarding incident. If however a provider of support (NCHA or another provider) fails to support a child (including working with their parent on the same issue) around their self harm or signpost them to appropriate services then it is possible that a safeguarding alert and referral could take place with the alleged perpetrator being the provider.

2.2.9 Organisational Abuse (formerly Institutional Abuse)

Is the mistreatment of people brought about by poor or inadequate care or support or systematic poor practice that affects the whole care setting. It occurs when the individual's wishes and needs are sacrificed for the smooth running of a group, service or organisation.

- 2.2.10 Discriminatory
Including abuse that is racist, sexist, based on a persons disability or culture and other forms of harassment. Slurs or similar treatment.
- 2.2.11 Modern Slavery
Encompasses slavery, human trafficking; forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- 2.2.12 Self Neglect
This covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding.
- 2.2.13 Domestic Violence
Domestic Violence and Abuse is defined as any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) which forms a pattern of coercive and controlling behaviour by persons who have been intimate partners or family members regardless of sexuality or gender. This can include forced marriages and 'honour crimes'.

2.3 Potential Indicators of Abuse

2.3.1 The following define the signs or indicators of different types of abuse. They are an indication of common signs, however, children are all individual and may behave in quite unique ways. Always consider if the child is behaving unusually and seems out of character or comes into the project already showing certain indicators.

2.3.2 Potential Indicators of Physical Abuse:

- Unexplained injuries, bruises, burns, bites and scars
- Bruises to the eyes, mouth or ears
- Bruises of different ages in the same place
- Outline bruises (prints of hands, belts, shoes etc.)
- Bruises to non mobile babies, particularly trunk/ arms/ face
- Refusal to discuss injuries
- Untreated injuries and scars that indicate the child did not receive medical attention
- Teeth marks (more than 3cm across are unlikely to have been made by another child)
- Admission of punishment which appears excessive
- Fear of parents being contacted or of returning home
- Bald patches
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather
- Fear of medical help
- Self-destructive tendencies
- Aggression towards others
- Chronic running away

2.3.3 Potential Indicators of Sexual Abuse:

- Become insecure or cling to parent in a fearful way
- Show extreme fear of a particular person
- Cry hysterically when their nappy is changed
- Become hysterical when clothing is removed, particularly underclothes
- Have some physical signs in the genital or anal areas e.g. smell of semen
- Having soreness or bleeding in the throat, anal or genital areas
- Regress to a much younger behaviour pattern
- Behave in a way sexually inappropriate to their age, being obsessed with sexual matters as opposed to normal exploration
- Stare blankly, seem unhappy, confused or sad
- Become withdrawn, stop eating, have chronic nightmares, begin wetting again when previously dry
- Playing out sexual acts in a too knowledgeable way with dolls or other children
- Produce drawings of sex organs such as erect penises
- Stop enjoying activities with other children, such as stories and games
- Seem to be bothered or worried, but won't say why as if keeping a secret
- Change from being happy and active to being withdrawn and fearful
- Repeat obscene words or phrases said by the abuser
- Say repeatedly that they are bad, dirty or wicked
- Become aggressive and hurtful
- Act in a sexually inappropriate way towards adults

2.3.4 Potential Indicators of Emotional Abuse:

- Physical, mental and emotional development lags
- Admission of punishment which appears excessive
- Over-reaction to mistakes
- Sudden speech disorders
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour e.g. rocking, hair twisting, thumb sucking
- Self mutilation
- Fear of parents being contacted
- Extreme of passivity or aggression
- Drug/solvent abuse
- Chronic running away
- Compulsive stealing

2.3.5 Potential Indicators of Neglect and Acts of Omission:

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Frequent lateness or non-attendance at school
- Untreated medical problems
- Destructive tendencies

- Low self-esteem
- Neurotic behaviour e.g. rocking, hair twisting, thumb sucking
- No social relationships
- Chronic running away
- Compulsive stealing
- Scavenging for food and clothes

2.3.6 Potential Indicators of Discriminatory Abuse

- Lack of respect shown to an individual
- Signs of a sub-standard service offered to an individual
- Repeated exclusion from rights afforded to citizens such as health, education, employment, criminal justice and civic status

2.3.7 Potential Indicators of Modern Slavery

- Show signs of consistent abuse or have untreated health issues.
- Have no identification documents in their personal possession, and little or no finances of their own.
- Be unwilling to talk without a more 'senior', controlling person around who may act as their translator.
- Sleep in a cramped, unhygienic room in a building that they are unable to freely leave.
- Be unable to leave their place of work to find different employment, and fear that bad things may happen if they do.
- Be charged for accommodation or transport by their employers as a condition of their employment at an unrealistic and inflated cost which is deducted from their wages.

2.3.8 Potential Indicators of Self Neglect

- Hoarding, neglect of personal hygiene and surroundings

2.3.9 Potential Indicator of Domestic Violence

- Physical injuries
- Depression
- Withdrawn
- Fearful

2.4 Child Sexual Exploitation

2.4.1 Definition of Child Sexual Exploitation (a form of child abuse)

"The sexual exploitation of children and young people under 18 involves exploitative contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of performing, and/or others performing on them, sexual activities.

Child sexual exploitation can occur through use of technology without the child's immediate recognition, for example the persuasion to post sexual images on the internet/mobile phones without immediate payment or gain. In all cases those exploiting the child/young person have power over them by virtue of their age, gender, intellect,

physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young persons limited availability of choice resulting from their social/economic and/or emotional vulnerability” (Source: Department for Education 2012).

2.4.2 The Barnados ‘Puppet on a String’ report (January 2011) identified three broad categories of child sexual exploitation described as:

- Inappropriate relationships (e.g. a 14 year old in a sexual relationship with a 20 year old partner)
- ‘Boyfriend’ model of exploitation and peer exploitation (e.g. an older boyfriend introducing a younger partner to his peers (often fellow gang members) in return for sexual favours in return for money, drugs, alcohol or ‘gifts’)
- Organised / networked sexual exploitation or trafficking (e.g. established groups of older males targeting and grooming children at risk from troubled backgrounds, often by digital communication in order to exploit them sexually, often using the victims to recruit other young people in return for money, drugs, alcohol or ‘gifts’)

The fact that a young person is 16 or 17 years old should not be taken as a sign they are no longer at risk of sexual exploitation.

2.4.3 The factors below are recognised as factors linked to sexual exploitation. It is not an exhaustive list and each indicator is not in itself proof of involvement in child sexual exploitation. Concerns should increase the more indicators which are present although one single indicator alone may in itself be significant. Staff should use their judgment when considering these factors. They are:

- Health – physical symptoms e.g. bruising, chronic fatigue, recurring or multiple sexually transmitted infections; pregnancy and/or seeking a termination of pregnancy; evidence of drug, alcohol or substance misuse; sexually risky behaviour
- Education – truancy; disengagement with education; considerable change in performance at school
- Emotional and behavioural development – volatile behaviour exhibiting extreme array of mood swings or use of abusive language; involvement in petty crime; secretive behaviour eg about internet use, entering or leaving vehicles driven by unknown adults; anti-social behaviour, sexualised language, sexually offending behaviour
- Identity – low self-image; low self-esteem; self-harm; eating disorder; promiscuity; or lack of confidence
- Family and social relationships – hostility in relationship with parents, carers and/or other family members; physical aggressions towards parents, siblings, pets, teachers or peers; placement breakdown; detachment from age appropriate activities; association with other young people who are known to be sexually exploited; sexual relationship with a significantly older person; unexplained relationships with older adults (e.g. through letters, texts, internet links); staying out overnight or returning late with no plausible explanation; persistently missing or missing with no known home base; returning after having been missing looking

well cared for with no known home base; going missing and being found in an area where the child has no known links

- Social presentation – change in appearance; leaving home in clothing unusual for the child e.g. inappropriate for age
- Parental capacity – family history of parental neglect or abuse
- Family and environmental factors – family history of domestic violence pattern of homelessness
- Income - possession of large amounts of money with no plausible explanation, acquisition of expensive clothes, mobile phones or other possessions without plausible explanation; accounts of social activities with no plausible explanation of the source of necessary funding
- Social integration – frequenting known high-risk areas or going to addresses of concern

2.4.4 The Office of Children’s Commissioners have also produced a comprehensive list of warning signs which can be used as a vulnerabilities checklist. This promotes awareness of ‘softer’ intelligence. The following are typical vulnerabilities in children prior to abuse:

- Living in a chaotic or dysfunctional household (including parental substance use, domestic violence, parental mental health issues, parental criminality)
- History of abuse (including familial child sexual abuse, risk of forced marriage, risk of ‘honour’-based violence, physical and emotional abuse and neglect)
- Recent bereavement or loss
- Gang association either through relatives, peers or intimate relationships (in cases of gang associated CSE only)
- Attending school with young people who are sexually exploited
- Learning disabilities
- Unsure about their sexual orientation or unable to disclose sexual orientation to their families
- Friends with young people who are sexually exploited
- Homeless
- Lacking friends from the same age group
- Living in a gang neighbourhood
- Living in residential care
- Living in hostel, bed and breakfast accommodation or a foyer
- Low self-esteem or self-confidence
- Young carer

2.4.5 Evidence shows that any child displaying several vulnerabilities from the above lists should be considered to be at high risk of sexual exploitation. Professionals should immediately start an investigation to determine the risk, along with preventative and protective action as required.

2.4.6 The use of media and technology is now a common feature of the social activity of most young people. Smart-phones, laptops and tablets can all be used to exchange information verbally, by text, e mail and most commonly through mechanisms such as Blackberry Messenger, Facebook etc. The use of electronic media presents considerable opportunities to abusers and provides powerful tools with which to groom

and control victims. Grooming is defined as developing the trust of a young person or his or her family in order to engage in illegal sexual conduct. It may include:

- Causing a child to watch a sexual act, e.g. sending sexually themed adult content or images and videos featuring child sexual abuse to a young person;
- Inciting a child to perform a sexual act, e.g. by threatening to show sexual images of a child to their peers or parents (e.g. self-produced material or even a pseudo-image of the child);
- Suspicious online contact with a child, e.g. asking a young user sexual questions;
- Asking a child to meet in person; befriending a child and gaining their trust;
- Other grooming: the range of behaviours that fall into this category are widely variable but reflect the range of strategies often employed by adults to prepare a child for abuse eg using schools or hobby sites to gather information about particular children, their location and future events where the child may be present; presenting as a minor online to deceive a child etc.

2.4.7 It is also known that abusers and exploiters will sometimes pose as teenagers to obtain sexually explicit images via web cams or making arrangements to meet the victim. Often these individuals live some considerable distance from the victim and initially make contact through legitimate sites used by young people.

3. Duty To Report

All staff have a duty to raise a concern and report suspicions or disclosures of abuse including where the person subject to abuse has or has not given their consent to the reporting, and failure to do so is a failure of their duty of care. It should also be noted that when the death of a child at risk is caused by suspected abuse or neglect safeguarding procedures should be followed alongside any other relevant procedures.

2.5 Training

2.5.1 Staff will receive appropriate training for their role including how to raise a concern/alert and the symptoms of abuse. Refresher training – e-learning or other appropriate approach - will be provided regularly.