

Safeguarding Training

Primary Schools

Safety Net

About Safety Net

Keeping children and young people safe from harm and abuse

We work with children, families, schools and neighbourhoods, building communities where children know they have the right to feel safe and adults are actively involved in protecting them from harm.



Learning Objectives

- To identify signs and indicators of abuse and know how to respond to concerns
- To discuss relevant legislation and guidance for safeguarding in education
- To be aware of procedures and importance of recording
- To recognise elements of a safeguarding environment



Keeping yourself safe

- Housekeeping
- Confidentiality
- Be sensitive to the emotive content of the training
- Challenge ideas rather than the person
- Value the contributions of others
- Support everyone to be able to participate



Safeguarding and Child Protection



Working Together To
Safeguard Children
2018

Working Together to Keep Children Safe

Principles

Safeguarding is everyone's responsibility

For services to be effective they should be based on the needs and views of children – child centred

Child abuse is non discriminatory, stereotyping and assumptions do not protect children

Cultural norms and ethnic traditions differ



Creating a safe environment

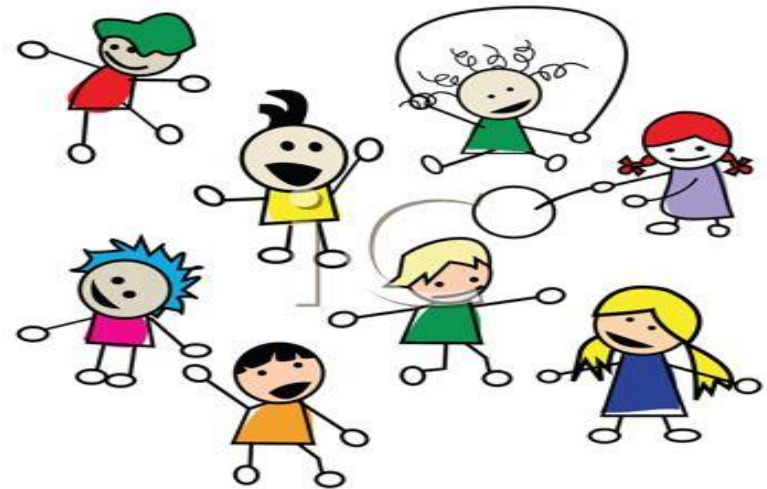
Whose responsibility is it to keep children safe?

What do the following groups need to feel safe to use your service?

Children

Parents and carers

Staff and volunteers



How do you support the safeguarding culture and policy in your school?

The Role of Education Staff

Schools have a ***Duty to promote and safeguard the welfare of children and to protect them from actual or likely harm*** – Children Act 2004 Section 11

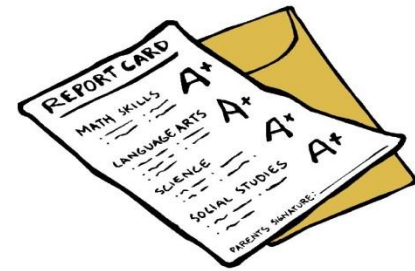
Schools are **not** investigative agencies but have a duty to support social services and the police

All staff need to read Part One for updated guidance
Keeping Children Safe in Education - May 2018

The Role of the Designated Safeguarding Lead



- Provide the point of reference for any child protection and for contact with Children's Social Care



And ensure that:

- Procedures are up to date and accessible
- Records or reports are held securely (shared only subject to the rules of confidentiality)
- Staff can access appropriate emotional or professional support

Abuse and Neglect Statistics



- 42 children died as a result of child abuse in UK in 2014
- Around 10% of children suffer abuse
- Over 50,000 children in England needed protection from abuse in 2016
- Neglect is the main concern in 46% of child protection plans in England
- Around half of the children who suffer abuse will not tell anyone at the time it is happening



NSPCC 2016

Legislation



Children Act 1989 Currently provides the legislative framework for child protection in England. Key principles established by the act include:

- The welfare of the child is paramount
- Taking account of wishes and feelings of the child

Children Act 2004 after Victoria Climbié inquiry.

Section 11 places a statutory duty on key people and bodies to make arrangements to safeguard and promote the welfare of children

Working in partnership with parents

The Children Act 1989: Defining Terms

Section 17 Child *in Need*

Unlikely to achieve or maintain a *reasonable standard of health or development* or... health or development is likely to be significantly impaired without the provision of services by the local authority ... or s/he is disabled

Section 47 Child *in Need of Protection*

where there is reasonable cause to suspect a child is suffering, or is likely to suffer, *significant harm* -the threshold that justifies compulsory intervention in family life in the best interests of children



Local Safeguarding Children Board

The LSCB is made up of statutory and voluntary partners, representatives from Health, Children's Services, Police, Probation, the Community and Voluntary Sector as well as Lay Members.

Coordinate local work to protect and promote the welfare of children and young people and monitor the effectiveness of practice

<http://www.eastsussexlscb.org.uk/>



Inspecting safeguarding in early years, education & skills settings



New edition OFSTED August 2016 ref 160047

- Regular updates on safeguarding all staff at least annually
- DSL training every 2 years and refresher annually
- Internet checks by OFSTED for safeguarding issues as part of pre-inspection planning
- DSL or deputy on site all times
- Staff behaviour policy



The Legal Framework



- England has one of the most regulated child protection systems in the world, child deaths from abuse have reduced but currently at 50 per year
- Legislation and changes to it, often result from child deaths, such as those of Maria Colwell, Victoria Climbié and Peter Connolly
- Lauren Wright whose death led to changes to the Education Act 2002 did attend school – but no staff had received child protection training and there was no designated C P officer



Victoria Climbié

Died 2000, age 8



Climbié' Inquiry Report (2003)

Victoria was known to;
3 housing departments,
4 social services departments,
2 GPs, 2 hospitals, an NSPCC run
family centre and 2 police child protection teams
She had contact with a child-minder and faith based
organisations



CM 5730 (2003) The Victoria Climbié Inquiry. Report of an Inquiry by Lord Laming. The Stationery Office, London

Climbie' Inquiry Report Recommendations



‘The extent of the failure to protect Victoria was lamentable’

- There were failures at every level and in every organisation
- The support and protection of children cannot be achieved by a single agency, every service has to play its part
- Clear expectations on all staff that their primary responsibility is to the child

Daniel Pelka

Died 2012, aged 4

- SCR Key learning points
- Timely & assured responses
- Working with parents
- Focus on child
- Professional curiosity
- English as second language



Physical Abuse Definition



May involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. It also includes when a parent or carer fabricates the symptoms of, or deliberately induces illness in a child.

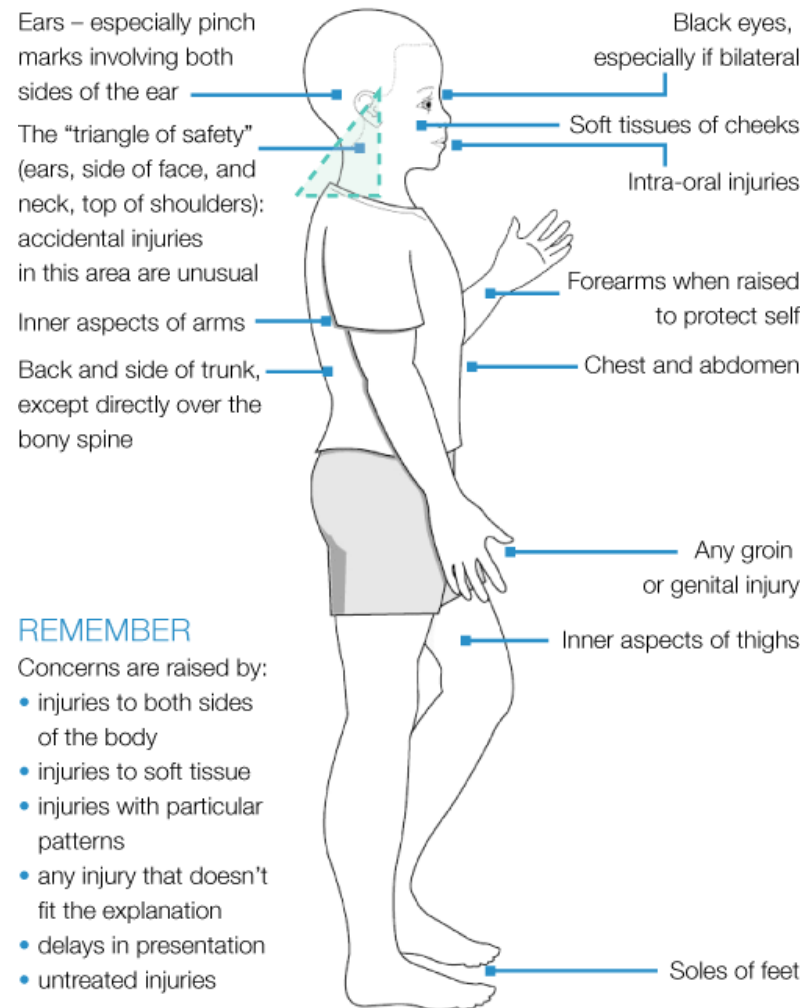
Physical Abuse

Signs and symptoms



Bruises (NAI sites), finger marks, burns, cuts, bite marks, acting out with adults or other children, aggressive, withdrawn, agitated, aggressive play, drawings, flinching or other reactions, gender differences in reactions, fabricated or induced illness, bed wetting, deliberate burns

Non Accidental Injury (NAI)



Neglect Definition



Persistent failure to meet a child's basic physical and psychological needs, likely to result in the serious impairment of the child's health or development.

Neglect - Signs and indicators

Pallid appearance, weight loss, frequent skin diseases such as impetigo or scabies, constantly late, constantly hungry and / or tired, smelly, lack of boundaries, very needy, lack of parental involvement, shabby or inappropriate appearance, with lots of different / inappropriate people

Emotional Abuse

Definition

Persistent emotional ill-treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

May involve making children feel worthless, or unloved; interactions inappropriate to the child's developmental capability or overprotection. It also includes serious bullying, including cyber bullying, or the exploitation or corruption of children

Emotional abuse – signs and symptoms



Usually based on observations over time. Includes: abnormal attachment between child and parent/carer, failure to thrive, frozen watchfulness, low self esteem, tearful, overreactions, self-harming, difficulty relating, anxious, acting out, withdrawn or verbally abusive, speech impediments or delay

Sexual Abuse Definition

Forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. Includes involvement in or exposure to pornography, sexualised language, as well as more direct forms of sexual activity.

Sexual Abuse

Signs and indicators

Self-harming, low self-esteem, eating disorders, STIs, pregnancy, precocious knowledge or language, not wanting to get undressed, discharge or bleeding, wetting or soiling, bruising, sexualised play, acting out, unexplained sources of income

Child Sexual Exploitation

CSE



- Can take many forms from the seemingly 'consensual' relationship where sex is exchanged for attention / affection, accommodation or gifts, to serious organised crime and child trafficking.
- The perpetrator always holds some kind of power over the victim, increasing the dependence of the victim as the exploitative relationship develops.

Safeguarding Children and Young People from Sexual Exploitation 2009

Can affect young men and young women

Some children are particularly vulnerable;

- history of running away or of going missing from home
- those with special needs
- those in and leaving residential and foster care
- Migrant / unaccompanied asylum seeking children
- children who have disengaged from education
- children who are abusing drugs and alcohol
- those involved in gangs

Possible signs of Sexual Exploitation



- Going missing for periods of time or regularly returning home late
- Frequently staying out late or overnight with no explanation
- Going places that you know they can not afford
- Skipping school or being disruptive in class / getting into trouble with the police
- Suddenly acquiring expensive gifts such as mobile phones, jewellery – even drugs – and not being able to explain how they came by them
- Having mood swings and changes in temperament

FGM

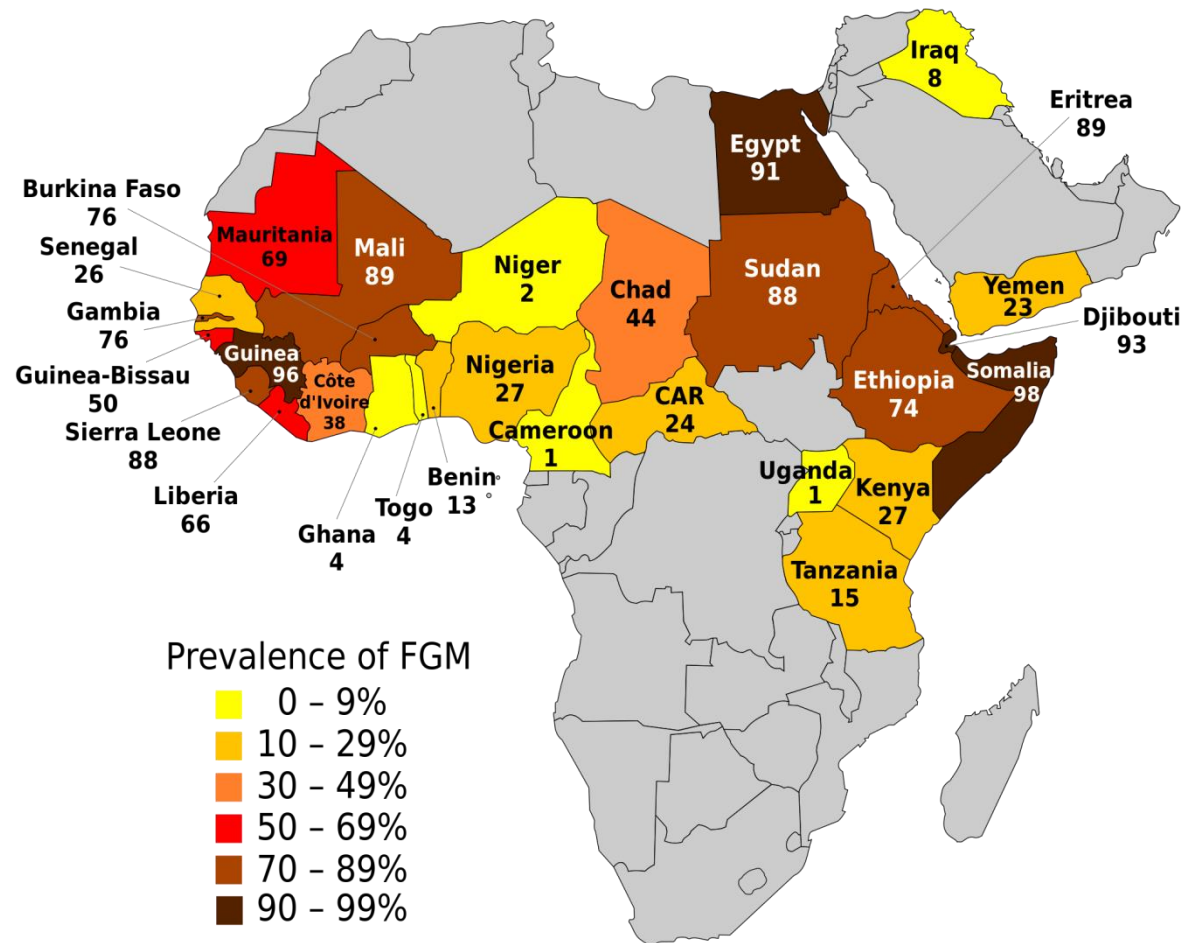
Female Genital Mutilation is also known as female circumcision, cutting or sunna.

Duty to pass any information on in relation to under 18 years.

A crime has taken place so Police need to be involved- the teacher must notify Police see Keeping Children Safe Appendix A

[Home Office FGM Resource pack](#)

FGM Prevalence Unicef 2013



The Prevent Duty



From 1 July 2015 all providers 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

Prevent Duty 2015



Even very young children may be vulnerable to radicalisation by others, whether in the family or outside, and display concerning behaviour.

Staff must take action when they observe behaviour of concern.

<https://www.elearning.prevent.homeoffice.gov.uk/>

How can we recognise if a child is in an abusive or unsafe situation?

All abuse affects children's self-worth/esteem and anxiety levels.

- Unexplained changes in behaviour
- Unusual responses/fears to parents/ carers/ other adults
- What they say
- The child is in pain or discomfort
- Concern about how they play and interact, what they draw/write
- Self-harm or risky behaviour



Risk Factors: What makes groups of children more vulnerable to abuse?

Individual Child

- The child has a disability or special educational needs
- Looked after Children/ those returning home after being in care
- Age (particularly children under 1) more than twice as likely to be registered in England than the 'all children average
- Is a young carer
- Showing signs of being drawn into anti social or criminal behaviour (eg Gang involvement)
- Frequently goes missing from care, home or school
- Risk of modern slavery / trafficking / exploitation
- Risk of being radicalised or exploited

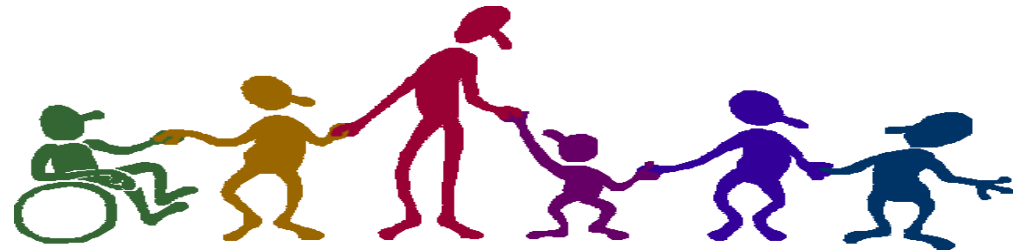


Risk Factors: What makes groups of children more vulnerable to abuse? Cont'd.....



Family Functioning

- Domestic abuse
- Parents with a learning difficulty
- Parents with mental ill health
- Substance misuse
- Previous abuse in the family



Discussion

What is your opinion?

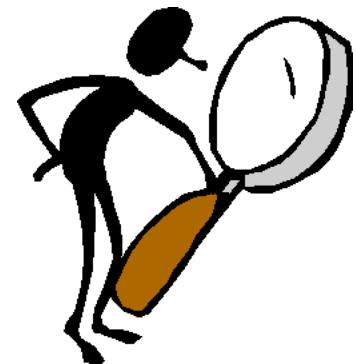
- Smacking children
- Never being cuddled as a child
- Parents criticising their child
- Not having a safe space to play



What affects our attitudes to abuse?



- Personal experience
- Culture – local, national, family
- Age/generation
- Previous experience of abuse
- Religion
- Work
- Media
- The Law
- Era
- Research



Who might abuse children?



The majority of children are abused by someone they know

- A family member
- A family friend or neighbour
- A trusted adult, such as school staff, sports' coaches, child carers

20% of sexual abuse is committed by strangers

The majority of child sex offenders are male, but women can be involved. Many offenders are educated, articulate and seemingly well intentioned.

Children can also be abused by;

- Their Peers (peer on peer abuse)
- Institutions or organisations

When to Act...

1. If a child makes a disclosure
2. If you see or hear something that concerns you (you recognise a sign or symptom)
3. If a 3rd party tells you something



What to do if a child makes a disclosure



DON'T:

- Promise not to tell anyone
- Ask leading questions
- Express doubt or disbelief
- Interrogate the child
- Assume someone else will deal with it
- Panic!

DO:

- Listen and reassure
- Report your concerns to DSL
- Monitor and record
- Communicate & seek support

Barriers to Responding



Exercise: What could stop these people taking action when they suspect a child might be being abused?

Family members and close family friends

Neighbours

Children/young people:

Workers (including all staff and volunteers)



What might stop children telling?

- Often don't realise what's happening is 'wrong'
- Accept abuse as part of life
- Confuse sexual abuse with love, or fun and games
- Dependant on adults / disempowered
- Threatened by adults to keep quiet
- Developing sense of self
- Communication and language
- Can be clumsy/ fall over/ bruise making it difficult to spot physical signs – look for irregularities in explanations and hiding marks

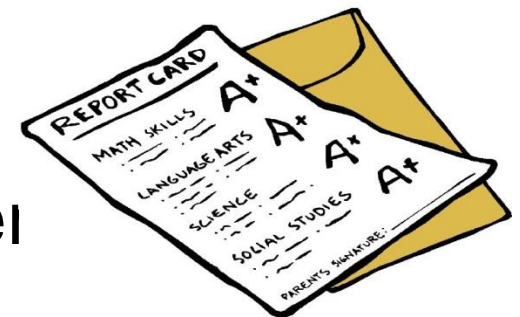


If you see or hear something that concerns you – The 5 R's

- **RECOGNISE** – Be aware and don't ignore it
- **RESPOND** - Act quickly if you are worried about a child's safety
- **REPORT** - Speak to your DS Lead as soon as you can
- **RECORD** – Make a note of what was said, what you saw, complete a welfare concern form
- **REFER** – Pass on concerns to relevant agencies
- Single Point of Access (SPOA) 01323 464222

Recording Information

- Follow your organisation's child protection procedure
- Record your concern on the appropriate form
- Include the child's name, age, ethnicity and any disability or special educational needs
- Include dates, times, what you have observed, what the child has said to you and what you have said or done
- Give the form to your DSL or another member of staff



Information Sharing



Where a child is considered to be 'in need' **consent** is required from the family for an assessment to be undertaken.



Where a child is considered to be **suffering or likely to suffer 'significant harm'** consent is not required, although wherever possible, unless this would pose a further risk to the child, **parents should be informed.**

The requirements of safeguarding override the constraints of **consent and confidentiality**

Any Information shared should be appropriate, relevant, accurate and only shared with necessary people

The referral process

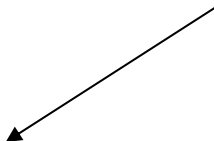
Child case is referred to Children's Social Care - Feedback to referrer



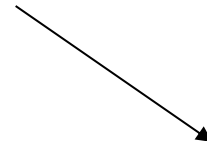
Social worker and manager decide on course of action within 1 working day



Assessment required under Section 17 or Section 47 of Children Act



CHILD IN NEED (S17)



**Significant harm or concerns
about child's immediate safety (S47)**



NFA / onward referral / early help hub

Keeping yourself safe



Be vigilant, take care over your behaviour and the behaviour of others

Pay attention to:

- Professional boundaries
- Behaviour appropriate to context
- Perceptions of the child and others
- Safe environments
- Know who your network of support are



Whistle blowing (Public Interest Disclosure)

When does it apply? - when you reasonably believe you have information which tends to show malpractice such as;

- Breach of legal obligation
- Criminal offence
- Breach of health and safety
- Environmental damage
- Miscarriage of justice



The Local Authority Designated Officer (LADO)



- Supports organisations when an allegation is made and
- provides advice and guidance
- Works with the Police, Social Care Teams, regulatory bodies such as Ofsted
- Ensures a consistent, fair and thorough process for both child and adult.

East Sussex: Amanda Glover 07825 782793

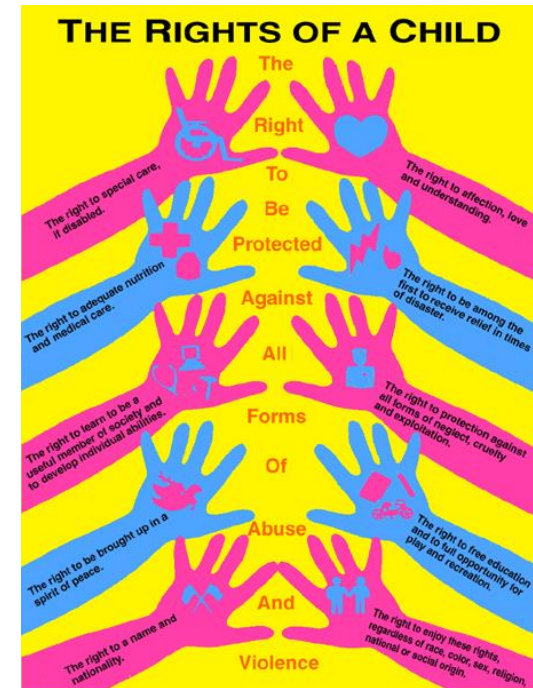
E Sx. School SG Officer: Sandi Buttrey 07834 148479

Brighton & Hove Darrel Clews 01273 295643

West Sx Lindsey Tunbridge-Adams 0330 222 3339

To sum up

- Listen to what children are telling you by their words and their actions, and put children's needs first
- Be willing to consider the unthinkable
- Trust your instincts
- Don't be afraid to seek guidance and clarification
- Know who your safe networks are
- Don't fear the system and procedures
- If in doubt check it out!



Safeguarding is Everyone's Responsibility

Working Together to Keep Children Safe

We can also help you with:



Additional training in...

- Protective Behaviours
- Understanding Attachment
- Mindfulness for Practitioners
- Online Safety for Professionals, Parents or Children & Young People
- Safeguarding Lead Training
- Effective Supervision of Staff
- Safeguarding Policies
- Safeguarding Young Adults
- Reducing Stress: Wellbeing at Work

Support for...

- DBS Checks
- Self Assessment

Help for children, young people & families...

- Anti-bullying
- Peer Mentoring
- Assertiveness
- Personal Safety
- Transition (Y6 – Y7)
- Feeling Good, Feeling Safe

To receive more information on any of the above please complete the participant contact form at the end of the session

Working Together to Keep Children Safe

Useful links

- <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>
- PREVENT DUTY
- <https://www.gov.uk/government/publications/prevent-duty-guidance>
page 10
- <https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>
- FGM
- <https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/female-genital-mutilation-fgm>

West Sussex Local Safeguarding Children Board

www.westsussexscb.org.uk/