

Child Protection Policy and Procedures

Compass Disability Services

Units 11 – 12 Belvedere Trading Estate
Taunton, TA1 1BH

August 2019

Date for Review: August 2021

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Policy

Introduction

Compass Disability Services/CDST work with children and families as part of our activities. These include (for example):

- Wellbeing Centre e.g. groups, sessions designed for children/young people
- Compass Independent Living e.g. direct payment support for families with disabled child/children
- Off-site activities e.g. support groups at community locations
- Compass Disability Services e.g. work placements/experience
- Compass Everyday e.g. disabled young people transitioning from school to day services.

The purpose of this policy is:

- To protect children and young people who receive any Compass Disability Services/CDST services, this includes children of adult customers who use our services
- To provide parents, staff and volunteers with the overarching principles that guide our approach to child protection.

This policy applies to anyone working on with, or on behalf of Compass Disability Services/CDST including Senior Managers and the Board of Trustees, paid staff, volunteers, sessional workers and students.

Background

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children. A summary of key legislation and guidance is available from nspcc.org.uk/childprotection.

The Data Protection Act 2018 gives additional protection to children's data, including images. Signed consent must be given freely by the parent detailing what the data or image is to be used for and this consent must be updated at least every year. This applies to each image of a child before it can be stored or used for any purpose. The use and storage of any children's data must be in line with the ethos and specific requirements of the Act.

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We believe that:

- Children and young people should never experience abuse of any kind
- We have a responsibility to promote the welfare of all children and young people, to keep them safe and to practise in a way that protects them.

We recognise that:

- The welfare of the child is paramount.
- All children, regardless of age, disability, gender reassignment, race, religion or belief, sex, or sexual orientation have the right to equal protection from all types of harm or abuse.
- Some children are additionally vulnerable because of the impact of previous experiences, their level of dependency, communication needs or other issues.
- Working in partnership with children and young people, their parents, carers and other agencies is essential in promoting young people's welfare.

We will seek to keep children and young people safe by:

- Valuing, listening and respecting them.
- Appointing a nominated child protection/safeguarding lead and member of the Board of Trustees for safeguarding.
- Develop child protection and safeguarding policies and procedures which reflect best practice.
- Using our safeguarding procedures to share concerns and relevant information with agencies who need to know, and involving children, young people, parents, families and carers appropriately.
- Creating and maintaining an anti-bullying environment and ensuring that we have a policy and procedures to help us deal effectively with any bullying that does arise.
- Sharing information about child protection and safeguarding best practice with children, their families, staff and volunteers e.g. via posters or leaflets.
- Undertake safer recruitment practices, ensuring that all necessary checks are made.
- Providing effective management for staff and volunteers through supervision, support, training and quality assurance measures.

- Training will be provided for all staff and volunteers at a level appropriate to their role, upon induction and at regular intervals, at least every 2 years. Staff and volunteers will be made aware of the importance of following policies and procedures. The training and information will ensure staff and volunteers know how to recognise neglect and abuse and respond in timely and appropriate manner. Training will also set out clear expectations of behaviour, manners and attitude.
- Using our procedures to manage allegations against staff and volunteers appropriately.
- Ensuring that we have effective complaints and whistleblowing measures in place.
- Ensuring that we provide a safe physical environment for children, young people staff and volunteers, by applying health and safety measures in accordance with the law and regulatory guidance.
- Recording, storing and using information, data and images professionally, securely and in line with current legislation and best practice guidance.

E-safety statement

We recognise that the welfare and wellbeing of children, young people and adults at risk who come into contact with our organisation is paramount and as such governs our approach to the use and management of electronic communications and online behaviour. We will therefore undertake the following:

- Set our Wi-Fi settings to filter inappropriate content to restrict the type of content people could access,
- Reviewing and updating the security of our information systems regularly.
- Promote and encourage the appropriate use of mobile phone technology and the internet in a way that keeps the customer safe and shows respect for others.
- Encourage parents and carers to do what they can to keep their children safe online, when using their mobile phone and or when gaming.
- Informing parents and carers of any incidents of concern as appropriate.
- Risk assessing in advance any social media tools used in the course of our work with children, young people and families.

Responsibilities

Child protection is everybody's responsibility. However, organisations, staff and volunteers in contact with children have a particular responsibility to be alert to the signs and early detection of abuse from whatever quarter, thus ensuring that appropriate action can be taken.

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The Board of Trustees and Chief Executive officer have overall responsibility for ensuring compliance and accountability to relevant agencies in regards to safeguarding, as required by law.

The Contracts and Projects Development Manager is the delegated senior member of staff for child protection and safeguarding. They are responsible for overseeing the implementation of the Safeguarding Policy and ensuring all staff and volunteers are adhering to their responsibilities.

In the event of a safeguarding or child protection incident, a review will be undertaken by the Contracts and Projects Development Manager or other appropriate Senior Manager in their absence. The review will be undertaken to ensure that the organisation's systems, policies and procedures enabled staff and volunteers involved to act according to their role and responsibilities.

The Board of Trustees or a member of staff (who has been delegated responsibility by the Board) has a responsibility to undertake the following:

- Refer someone to the Disclosure and Barring Service (DBS) if Compass Disability Services/CDST has :
 - Sacked an employee because they harmed a child or adult
 - Sacked an employee because they might have harmed a child or adult otherwise
 - Planned to sack an employee for either of these reasons, but the person resigned first.
- Report suspicions, allegations and incidents of abuse or mistreatment of vulnerable beneficiaries to the Charity Commission as well as the Police, Social Services, commissioners or other relevant agency.

All members of staff and volunteers have a duty to report allegations or suspicions of abuse, therefore Compass Disability Services/CDST as the employer, has a responsibility to provide these staff and volunteers with the necessary training and information in child protection, as well as measures which are aimed at preventing abuse.

Policy Revisions

This policy will be reviewed every two years and amended as necessary, or earlier in accordance with any forthcoming legislation. Where we hold a contract it will also be reviewed in line with the relevant Local Authority's Safeguarding Policy and Procedures. All employees and volunteers should pass suggestions or recommendations for the revision of any aspect of this policy through normal channels to the Chief Executive.

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This policy should be read alongside other relevant policies including:

- Bullying and Harassment Policy
- Confidentiality Policy
- Complaints Policy
- Data Protection Policy
- Disclosure and Barring Service Criminal Record Checks Policy
- Recruitment Policy
- Recruitment of Ex-Offenders Policy
- Staff and Volunteer Handbook
- Whistleblowing Policy

Child Protection Procedures

To do nothing is not an option. Anyone who works with or has contact with children must be aware of the potential for abuse, and fulfil their duty to report any actual or suspected abuse.

If a member of staff or volunteer is concerned about a child, and/or indicator(s) of abuse have been noted, and he/she would like to seek a second opinion before taking action to report this, their line manager (or another senior manager) will be available to speak to. Any discussions will take place in accordance with Compass Disability Services' Confidentiality Policy.

To ensure consistency in reporting if a member of staff or volunteer has safeguarding concerns, suspicions of abuse or an actual disclosure has been made they must complete a Safeguarding Incident Reporting Form at the earliest opportunity. This form can be found on version control. The first part of the form is to be completed by the member of staff who has concerns or has identified abuse and passed on to the Contracts and Projects Development Manager or another member of the senior team in her absence to complete the second part of the form. The form will then be filed in the Management folder on the server.

Disclosure of Abuse

Although staff and volunteers are encouraged to know about the signs and signals which make them suspect that someone might be being abused, many incidents will only come to light because the person discloses this themselves. All disclosures should be taken seriously.

What to do if a child makes a disclosure regarding abuse:

DO

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- Make sure the immediate safety of the person
- Stay calm and do not show shock or disbelief
- Listen carefully to what you are being told
- Tell them:
 - They did the right thing in telling you
 - It was not their fault
- Preserve evidence e.g. paperwork, clothing, blood, semen, etc.
- Explain that you are required to share this information with the regulating authority (as appropriate)
- Explain that further investigations will be conducted sensitively and with their involvement as much as possible
- Write down what the person has said remembering that this information may be used as evidence.

DO NOT

- Be judgmental (for example, “why didn’t you stop them...”)
- Promise to keep secrets or make promises that you will be unable to keep
- Press the person for more details
- Show them photos of the possible abuser or ask closed or leading questions
- Contact the alleged abuser or alleged victim (depending on who is making the disclosure)
- Pass on the information to anyone other than people that ‘need to know’
- ‘Sit’ on the information over the weekend or until you are on duty next, make sure you report the information as soon as possible.

Criminal Offences

If you witness abuse which is a criminal offence or someone makes a disclosure to you about being a victim of a recent criminal offence, in addition to the above you must:

- Call the emergency services by dialling 999
- Allow the police to conduct all questioning
- Take action to make sure that no-one else questions the victim, abuser or witnesses about what happened
- Ask the police for advice about whether the victims and witnesses should be kept apart before they have an opportunity to discuss the events they have witnessed
- Work with the police at the scene and co-operate with the Investigating Officer during any investigation.

Failure to comply with this process might result in any defence asking for evidence to be withdrawn on the grounds that the information has been unfairly obtained ‘due to leading the victim or a witness’.

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NOTE: In all cases staff and volunteers should attempt to obtain the consent of an individual before calling the police. This is not always appropriate and the requirement to obtain consent may be overridden or dispensed with depending on the seriousness of the incident, where there is a duty of care to intervene, for example, a crime has been or may be committed or risk to other children.

DO NOT

- Move anything, clean anything or wash anything up
- Bathe the person or change their clothes
- Remove or alter any documentation

Where sexual abuse is concerned, do not assume that it is too late to collect forensic evidence, even days after the alleged abuse – let the police decide.

Recording Statements

It is important to write a report of the incident as soon as possible using the Safeguarding Incident Reporting Form which can be found on version control. Make sure your writing is legible and you must also date, sign and print your name on it.

- Write down any injuries, describing the colour, size, depth and shape
- Note in writing the state of the clothing of the person and the alleged perpetrator
- Note what was said, using the exact words and phrases spoken wherever possible, including dates and times
- Describe the circumstances in which the disclosure came about
- Note the setting and anyone else that was there at the time
- Write down exactly what happened – not your opinion
- Use a pen or biro with black ink so that it can be photocopied.

When the statement is complete it must be passed on to the Contracts and Projects Development Manager (or another member of the senior team in her absence) to complete the second part of the form. The form will then be filed in the Management folder on the server.

Be aware that your report may be required in the future as part of a legal action or disciplinary procedure.

You must remember that if you witness, discover or suspect abuse, or someone makes a disclosure to you, you have a duty to report it. Even if an

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allegation concerns a member of staff or volunteer (who may also be a colleague) it is still the clear duty of those concerned to report the matter.

How to make an Adult or Child Protection Referral

Compass Disability Services/CDST and its projects do not have any powers to investigate any form of abuse; however staff and volunteers do have a responsibility to take action to report the identification or disclosure of abuse or suspicions of abuse regarding a child.

In circumstances where abuse amounts to a criminal offence the emergency services must be called, firstly the Police/Ambulance and then the Social Work team or Care Manager or the relevant Out of Hours Emergency Duty Team.

The Chief Executive Officer and the Contracts and Projects Development Manager (as the delegated member of staff for Safeguarding) or in their absence another member of the Senior Management Team must be informed at the earliest opportunity. Where it is reported to a member of the Senior Management Team it is then their responsibility to inform the Chief Executive Officer and the Contracts and Projects Development Manager if they are on leave if appropriate, alternatively on their return.

In the interests of confidentiality, when making the referral it is imperative not to disclose any details about the case (this could be personal details about the victim or the alleged abuser) until you are speaking to a person that 'needs to know'.

If the child lives in a care home, is receiving care from a domiciliary care agency or any registered service, you must also report the incident to the Care Quality Commission or the relevant regulatory authority.

If abuse is witnessed or suspected in services provided by a hospital, you should report your concerns to a senior manager. You may also report your concerns to the Patient Advocacy Liaison Service (PALS).

You will be advised as to which forms to complete to make the referral by whichever authority you have reported the incident/suspicion/allegation to.

The Police or regulatory authority will then become responsible for investigating the alleged abuse. As the referrer you will undoubtedly be asked to assist in the investigation, you will contribute to the investigation as appropriate, however it is the role of the Police or other authority to ensure that the child is supported from this point forward.

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Allegations of Abuse against Staff and volunteers

If a member of staff or a volunteer is alleged to be involved in an incidence of abuse, the Chief Executive must be informed as soon as possible, it would not be acceptable to wait until he/she returns from leave unless he/she is entirely un-contactable. If it is not possible to contact the Chief Executive, the next most senior member of staff should be contacted immediately; this would be the Contracts and Projects Development Manager, Operations Manager or the Business Development Manager.

The Chief Executive (or the next most senior member of staff) must contact the member of staff or volunteer against which the allegation has been made, to suspend them indefinitely pending further enquiries, making it clear that they are prohibited from contacting any customers especially the alleged victim, any member of the alleged victims' family or employees. In accordance with Compass Disability Services/CDST contracts with the County Councils, the Contracts department at the relevant County Council must be notified. From this point forward the relevant Council will dictate the necessary procedure.

Further information:

Where we hold a contract to deliver services to adults at risk and children, details of individual local authority safeguarding contacts and information will be placed on the organisations website.

Additional Information about Child Protection:

'What to do if you're worried a child is being abused'

<https://www.actionforchildren.org.uk/how-to-help/worried-about-a-child/>

Additional Information for Trustees:

Charity Commission:

<https://www.gov.uk/guidance/safeguarding-duties-for-charity-trustees>

What counts as a serious incident in your charity and how to report it.

<https://www.gov.uk/guidance/how-to-report-a-serious-incident-in-your-charity>

Types of abuse and indicators

This list is not exhaustive and some of the indicators may relate to more than one type of abuse and may also be an indicator of offending behaviour.

Child Neglect

Neglect is defined as "the ongoing failure to meet a child's basic physical and psychological needs" (Department for Education, 2018; Department of

Health, 2017; Scottish Government, 2014; All Wales, Child Protection Review Group, 2008).

It is a form of child abuse that can have serious and long-lasting impacts on a child's life - it can cause serious harm and even death.

The four main types of neglect are:

- **physical neglect:** not meeting a child's basic needs, such as food, clothing or shelter; not supervising a child adequately or providing for their safety
- **educational neglect:** not making sure a child receives an education
- **emotional neglect:** not meeting a child's needs for nurture and stimulation, for example by ignoring, humiliating, intimidating or isolating them
- **medical neglect:** not providing appropriate health care (including dental care), refusing care or ignoring medical recommendations (Horwath, 2007).

Signs and indicators of Child Neglect

There's often no single indicator that a child is being neglected. You may notice more than one sign and your concerns might become more frequent if problems are mounting up. This could indicate that a child and their family need support.

Children who are neglected may:

- live in an unsuitable home environment, for example in a house that isn't heated throughout winter
- be left alone for a long time
- be smelly or dirty
- wear clothing that hasn't been washed and/or is inadequate (for example, not having a winter coat)
- seem particularly hungry, seem not to have eaten breakfast or have no packed lunch/lunch money.
- they may suffer from poor health, including:
 - untreated injuries
 - medical and dental issues
 - repeated accidental injuries due to lack of supervision
 - untreated and/or recurring illnesses or infections
 - long term or recurring skin sores, rashes, flea bites, scabies or ringworm
 - anaemia.

Babies and young children may:

- have frequent and untreated nappy rash
- be failing to thrive (not reaching developmental milestones and/or not growing at an appropriate rate for their age).

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A child who is experiencing neglect may display unusual behaviour, or their behaviour may change. You may notice or become aware that a child:

- has poor language, communication or social skills
- withdraws suddenly or seems depressed
- appears anxious
- becomes clingy
- is aggressive
- displays obsessive behaviour
- shows signs of self-harm
- is particularly tired
- finds it hard to concentrate or participate in activities
- has changes in eating habits
- misses school
- starts using drugs or alcohol
- isn't taken to medical appointments such as vaccinations or check-ups.

Risk and vulnerability factors

Any child can suffer neglect, but research shows that some children are more vulnerable including those who:

- have a disability:
 - children with learning difficulties/disabilities
 - children with speech and language difficulties
 - children with health-related conditions
 - d/Deaf children
- are born prematurely or with a low birth weight
- have complex health needs
- are in care
- are seeking asylum.

Domestic Abuse

Domestic abuse is any type of controlling, coercive, threatening behaviour, violence or abuse between people who are, or who have been in a relationship, regardless of gender or sexuality. It can include physical, sexual, psychological, emotional or financial abuse.

Domestic abuse can include:

- sexual abuse and rape (including within a relationship)
- punching, kicking, cutting, hitting with an object
- withholding money or preventing someone from earning money
- taking control over aspects of someone's everyday life, which can include where they go and what they wear
- not letting someone leave the house
- reading emails, text messages or letters

- threatening to kill or harm them, a partner, another family member or pet.

Witnessing domestic abuse

Exposure to domestic abuse or violence in childhood is child abuse. Children may witness domestic abuse directly, but they can also witness it indirectly by:

- hearing the abuse from another room
- seeing a parent's injuries or distress afterwards
- finding disarray like broken furniture
- being hurt from being nearby or trying to stop the abuse
- experiencing a reduced quality in parenting as a result of the abuse

Signs and indicators

It can be difficult to tell if domestic abuse is happening, because perpetrators can act very differently when other people are around.

Children who witness domestic abuse may:

- display challenging behaviour
- suffer from depression and anxiety
- not do as well at school as usual.

Signs of anxiety

Children who experience domestic abuse may feel on constant alert. Signs of anxiety or fear-related behaviour include:

- bed wetting or unexplained illness
- running away from home
- constant worry about possible danger or safety of family members
- aggression towards others

Female Genital Mutilation (FGM)

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

FGM is often performed by someone with no medical training who uses instruments such as a knife, scalpel, scissors, glass or razor blade. Children are rarely given anaesthetic or antiseptic treatment and are often forcibly restrained.

The age at which FGM is carried out varies. It may take place:

- when a female baby is newborn
- during childhood or adolescence
- just before marriage
- during pregnancy.

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There are four main types of FGM:

- Type 1 (clitoridectomy) – removing part or all of the clitoris.
- Type 2 (excision) – removing part or all of the clitoris and cutting the inner and/or outer labia.
- Type 3 (infibulation) – narrowing the vaginal opening.
- Type 4 – other harmful procedures to the female genitals including pricking, piercing, cutting, scraping or burning (NHS Choices, 2016).

Labia elongation (also referred to as labia stretching or labia pulling) involves stretching the labia minora, sometimes using sticks, harnesses or weights (AFRUCA, 2016).

FGM is child abuse and is illegal in the UK. It can be extremely dangerous and can cause:

- severe pain
- shock
- bleeding
- infection such as tetanus, HIV and hepatitis B and C
- organ damage
- blood loss and infections
- death in some cases.

Sometimes religious, social and cultural reasons are given to justify FGM, however it's a dangerous practice and can cause long-lasting health problems that continue throughout a child's life, including:

- incontinence or difficulties urinating
- frequent or chronic vaginal, pelvic or urinary infections
- menstrual problems
- kidney damage and possible kidney failure
- cysts and abscesses
- pain during sex
- infertility
- complications during pregnancy and childbirth
- emotional and mental health problems.

Signs and indicators

A child at immediate risk of FGM may ask you directly for help. But even if they don't know what's going to happen, there may be other signs. You may become aware of:

- a relative or 'cutter' visiting from abroad
- a special occasion or ceremony to 'become a woman' or prepare for marriage

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- a female relative being cut – a sister, cousin, or an older female relative such as a mother or aunt
- a family arranging a long holiday or visit to family overseas during the summer holidays
- unexpected, repeated or prolonged absence from school
- a girl struggling to keep up in school and the quality of her academic work declining
- a child running away from or planning to leave home.

A child or woman who's had female genital mutilation (FGM) may:

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

Child Sexual Abuse

Child sexual abuse (CSA) is when a child is forced or persuaded to take part in sexual activities. This may involve physical contact or non-contact activities and can happen online or offline. Children and young people may not always understand that they are being sexually abused.

Contact abuse involves activities where an abuser makes physical contact with a child. It includes:

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

Non-contact abuse involves activities where there is no physical contact. It includes:

- flashing at a child
- encouraging or forcing a child to watch or hear sexual acts
- not taking proper measures to prevent a child being exposed to sexual activities by others
- making a child masturbate while others watch
- persuading a child to make, view or distribute child abuse images (such as performing sexual acts over the internet, sexting or showing pornography to a child)
- making, viewing or distributing child abuse images

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- allowing someone else to make, view or distribute child abuse images
- meeting a child following grooming with the intent of abusing them (even if abuse did not take place)
- sexually exploiting a child for money, power or status (child sexual exploitation).

Signs and indicators

Not all children will realise they are being sexually abused, particularly if they have been groomed. But there may be physical, behavioural and emotional signs that indicate a child has experienced sexual abuse.

Physical indicators include:

- bruising
- bleeding
- discharge
- pain or soreness in the genital or anal area
- sexually transmitted infections.
- Girls who are being sexually abused may become pregnant at a young age.

Emotional and behavioural indicators include:

- being afraid of and/or avoiding a particular person (including a family member or friend)
- having nightmares or bed-wetting
- being withdrawn
- alluding to 'secrets'
- self-harming
- running away from home
- developing eating problems
- displaying sexualised behaviour or having sexual knowledge that's inappropriate for their stage of development
- misusing drugs or alcohol

Emotional Abuse

Emotional abuse is emotional maltreatment of a child, which has a severe and persistent negative effect on the child's emotional development. It's also known as psychological abuse.

Most forms of abuse include an emotional element, but emotional abuse can also happen on its own.

Children can be emotionally abused by anyone:

- parents or carers
- family members

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- other adults
- other children.

There are several categories of emotional abuse.

Denying emotional responsiveness (also known as emotional neglect)

- ignoring the child
- not showing affection.

Rejection

- verbal humiliation
- name-calling
- criticism
- physical abandonment
- excluding the child from activities.

Isolating

- putting unreasonable limitations on a child's freedom of movement
- restricting social interaction
- not communicating with the child.

Exploiting or corrupting

- encouraging a child to take part in criminal activities (e.g. county lines)
- forcing a child to take part in activities that are not appropriate for their stage of development.

Terrorising

- threatening violence
- bullying
- deliberately frightening a child
- deliberately putting a child in a dangerous situation

Indicators

A child can be emotionally abused for years without any obvious signs. They may not tell anyone what's happening until they reach a 'crisis point'. However there may be indicators in the way a child behaves and reacts to certain situations. Children who are being emotionally abused may:

- lack confidence
- struggle to control strong emotions
- struggle to make or maintain relationships
- display behaviour that's inappropriate to their stage of development (for example not being able to play, developing language late or using language you may not expect of a child their age).

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

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

Older children may:

- struggle to control strong emotions or have extreme outbursts
- seem isolated from their parents
- lack social skills or have few, if any, friends
- use language, act in a way or know about things that you wouldn't expect them to know for their age.

Child Trafficking

Child trafficking is child abuse. It's defined as recruiting, moving, receiving and harbouring children for the purpose of exploitation.

Child trafficking is a form of modern slavery.

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](#)
- criminal activity, including:
 - cannabis cultivation
 - street crime - such as pickpocketing, begging and bag theft
 - moving drugs
 - benefit fraud
 - immigration fraud
 - selling pirated goods, such as DVDs
- forced marriage
- domestic servitude, including:
 - cleaning
 - childcare
 - cooking
- forced labour, including working in:
 - restaurants
 - nail bars
 - factories
 - agriculture
- illegal adoption
- unreported private fostering arrangements (for any exploitative purpose).

This list is not exhaustive and children who are trafficked are often exploited in more than one way.

How child trafficking happens

Traffickers may use grooming techniques to gain the trust of a child, family or community. They may trick, force or persuade children to leave their homes.

Child trafficking can involve a network of organised criminals who recruit, transport and exploit children and young people within or across borders. 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.

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

Signs and indicators

Children who are trafficked are intentionally hidden and isolated from the services and communities who can identify and protect them. While identification may be difficult, there will be signs that you can watch for.

Children who have **been trafficked or are at risk of being trafficked** may:

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

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Signs an **adult may be trafficking a child** include:

- making multiple visa applications for different children
- acting as a guarantor for multiple visa applications for children
- travelling with different children who they aren't 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.

Child Sexual Exploitation

Child sexual exploitation (CSE) is a type of [child sexual abuse](#). It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity.

Children and young people in sexually exploitative situations and relationships are persuaded or forced to perform sexual activities or have sexual activities performed on them in return for gifts, drugs, money or affection.

CSE can take place in person, online, or using a combination of both. Perpetrators of CSE use a power imbalance to exploit children and young people. This may arise from a range of factors including:

- age
- gender
- sexual identity
- cognitive ability
- physical strength
- status
- access to economic or other resources.

Sexual exploitation is a hidden crime. Young people have often been groomed into trusting their abuser and may not understand that they're being abused. They may depend on their abuser and be too scared to tell anyone what's happening because they don't want to get them in trouble or risk losing them. They may be tricked into believing they're in a loving, consensual relationship.

Some children and young people are trafficked into or within the UK for sexual exploitation.

Child sexual exploitation online

When sexual exploitation happens online, young people may be persuaded or forced to:

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- have sexual conversations by text or online
- send or post sexually explicit images of themselves
- take part in sexual activities via a webcam or smartphone.

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

Child sexual exploitation (CSE) can be very difficult to identify. Warning signs can easily be mistaken for 'normal' teenage behaviour.

Behavioural indicators

Children and young people who are being sexually exploited may display certain behaviours:

- displaying [inappropriate sexualised behaviour](#) for their age
- being fearful of certain people and/or situations
- displaying significant changes in emotional wellbeing
- being isolated from peers/usual social networks
- being increasingly secretive
- having money or new things (such as clothes or a mobile phone) that they can't explain
- spending time with older individuals or groups
- being involved with gangs and/or gang fights
- having older boyfriends or girlfriends
- missing school and/or falling behind with schoolwork
- persistently returning home late
- returning home under the influence of drugs/alcohol
- going missing from home or care
- being involved in petty crime such as shoplifting
- spending a lot of time at hotels or places of concern, such as known brothels
- not knowing where they are, because they have been [trafficked](#) around the country.

Physical signs include:

- unexplained physical injuries and other signs of [physical abuse](#)
- changed physical appearance - for example, weight loss
- scars from self-harm.

Repeat sexually transmitted infections, pregnancy and terminations can also be a sign of CSE.

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Physical Abuse

Physical abuse is defined as deliberately hurting a child and causing physical harm. It includes injuries such as:

- bruises
- broken bones
- burns
- cuts.

It may involve:

- hitting
- kicking
- shaking
- throwing
- poisoning
- burning
- scalding
- drowning
- any other method of causing non-accidental harm to a child.

Physical abuse may also happen when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. This is known as Fabricated or Induced Illness (FII).

Recognising physical abuse

Bumps and bruises don't necessarily mean a child is being physically abused – all children have accidents, trips and falls. These injuries tend to affect bony areas of the body such as elbows, knees and shins and aren't usually a cause for concern. However, some injuries are more likely to indicate physical abuse.

Signs and indicators

Bruises:

- commonly on the head but also on the ear, neck or soft areas (abdomen, back and buttocks).
- defensive wounds commonly on the forearm, upper arm, back of the leg, hands or feet.
- clusters of bruises on the upper arm, outside of the thigh or on the body.
- bruises with dots of blood under the skin.
- a bruised scalp and swollen eyes from hair being pulled violently.
- bruises in the shape of a hand or object.

Burns or scalds:

- can be from hot liquids, hot objects, flames, chemicals or electricity.
- these may be on the hands, back, shoulders or buttocks. Scalds in particular may be on lower limbs, both arms and/or both legs.
- a clear edge to the burn or scald
- sometimes in the shape of an implement – for example, a circular cigarette burn
- multiple burns or scalds.

Bite marks:

- usually oval or circular in shape
- visible wounds, indentations or bruising from individual teeth.

Fractures or broken bones:

- fractures to the ribs or the leg bones in babies
- multiple fractures or breaks at different stages of healing.

Signs of head injury in an infant:

- visible signs such as swelling, bruising or fractures
- unusual behaviour – being irritable, lethargic, unresponsive or not wanting to feed
- seizures
- vomiting
- respiratory problems
- being comatose.

Not all head injuries are caused by abuse. There are also other medical reasons a baby may have these symptoms.

Behavioural changes

- fear of specific individuals
- flinching when approached or touched
- reluctance to get changed in front of others or wearing long sleeves or trousers in hot weather
- depression or withdrawn behaviour.

Online Abuse

Online abuse is any type of abuse that happens on the internet, facilitated through technology like computers, tablets, mobile phones and other internet-enabled devices.

It can happen anywhere online that allows digital communication, such as:

- social networks
- text messages and messaging apps

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- email and private messaging
- online chats
- comments on live streaming sites
- voice chat in games.

Children and young people can be revictimised (experience further abuse) when abusive content is recorded, uploaded or shared by others online.

This can happen if the original abuse happened online or offline.

Children and young people may experience several types of abuse online:

- [bullying/cyberbullying](#)
- [emotional abuse](#) (this includes emotional blackmail, for example pressuring children and young people to comply with sexual requests via technology)
- [sexting](#) (pressure or coercion to create sexual images)
- [sexual abuse](#)
- [sexual exploitation](#).

Children and young people can also be groomed online: perpetrators may use online platforms to build a trusting relationship with the child in order to abuse them. This abuse may happen online or the perpetrator may arrange to meet the child in person with the intention of abusing them.

Recognising online abuse

It can be easier for perpetrators to initiate, maintain and escalate abuse through digital technology because it gives them:

- easier access to children and young people through social media and digital messaging
- anonymity – it's relatively easy to create anonymous profiles on online platforms or pretend to be another child
- children may have a false sense of safety online which means they're more likely to talk to strangers than in the offline world

Children can be at risk of online abuse from people they know as well as from strangers. Online abuse may be part of abuse that's taking place in the real world such as bullying or an abusive relationship. Or the abuse may happen online only.

A child who is experiencing abuse online may:

- spend much more or much less time than usual online, texting, gaming or using social media
- be withdrawn, upset or outraged after using the internet or texting
- be secretive about who they're talking to and what they're doing online or on their mobile phone

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- have lots of new phone numbers, texts or e-mail addresses on their mobile phone, laptop or tablet.

Risks

EU Kids online has developed a framework of risks called the 3Cs. This outlines the risks a child may experience when they are online.

Content

Age-inappropriate content that a child may come across online could be:

- commercial – such as adverts, spam or sponsorship
- aggressive – such as violent and hateful content
- sexual – inappropriate or unwelcome sexual content
- content that promotes negative values – for example biased, racist or misleading information.

Contact

If a child is actively engaged in the online world, they may become involved in interactions that could be harmful to them. This could be:

- commercial – such as tracking the sites a child has looked at or harvesting their personal information
- aggressive – for example being bullied, harassed or stalked
- sexual – receiving sexualised requests from others or being groomed
- contacts who promote negative values – for example making ‘friends’ who persuade a child to carry out harmful activities.

Conduct

Without meaning to, a child may behave in a way that puts them and/or others at risk. For example they may become involved in:

- inappropriate commercial activity - illegal downloading, hacking, using the dark web or getting involved in financial scams
- aggressive behaviour – bullying or harassing someone else
- sexualised behaviour – creating or uploading indecent images
- creating content that promotes negative values – providing misleading information to others

(Hasebrink et al, 2009).

Radicalisation

Children can be exposed to different views and receive information from various sources. Some of these views may be considered radical or extreme.

Radicalisation is the way a person comes to support or be involved in extremism and terrorism. It’s a gradual process so young people who are affected may not realise what’s happening.

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What is radicalisation

Radicalisation is a form of harm. The process may involve:

- being [groomed](#) online or in person
- exploitation, including [sexual exploitation](#)
- psychological manipulation
- exposure to violent material and other inappropriate information
- the risk of physical harm or death through extremist acts.

Vulnerability factors

Anyone can be radicalised, but there are some factors which may make a young person more vulnerable. These include:

- being easily influenced or impressionable
- having low self-esteem or being isolated
- feeling that rejection, discrimination or injustice is taking place in society
- experiencing community tension amongst different groups
- being disrespectful or angry towards family and peers
- having a strong need for acceptance or belonging
- experiencing grief such as loss of a loved one.

However these factors will not always lead to radicalisation.

Recognising radicalisation

Indicators that a child is being radicalised include:

- becoming disrespectful and intolerant of others
- becoming more angry
- avoiding discussions about their views
- using words and phrases that sound scripted
- becoming isolated and secretive
- not wanting to anyone else to know what they are looking at online.

See also – Somerset County Council’s PREVENT guidance

<https://www.somerset.gov.uk/social-care-and-health/prevent-in-somerset/>

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