**Safeguarding Children and Young People Policy**

*Approved by the Board of Trustees, 25 June 2020, Due for review: June 2021*

1. **GENERAL PRINCIPLES AND SCOPE OF POLICY**
	1. A “**child**” is a person under the age of eighteen in accordance with the Children Act 1989 (as may be amended).
	2. A “**Member**” is any member of staff, sessional worker, volunteer of The NXG Trust, or partner that The NXG Trust is working alongside or funding, who come into contact with children and young people through or alongside The NXG Trust.
	3. Where The NXG Trust works alongside or funds a third party organisation, that third party shall comply with their own adequate safeguarding children and young people policy. Where such policy is not in place, The NXG Trust expects that the third party shall comply with the terms this Policy.
	4. All other Members (i.e. members of staff, sessional workers and volunteers of The NXG Trust who come into contact with children and young people through the NXG Trust) shall comply with the terms of this Policy.
	5. The NXG Trust:
		1. recognises the unique status of children and the special need to respect them as individuals and protect them in their vulnerability.
		2. will work to ensure that its Members will exercise the greatest care in their use of power and authority and will avoid taking advantage of trust and that they will maintain the highest professional standards in all activities, counselling, educational and recreational situations.
		3. will ensure that all groups involving children or young adults that are run or funded by it, are run by Members who have undertaken the necessary training to recognise abuse of children and young people and feel able to raise such concerns with the Safeguarding Lead or through the whistleblowing procedures set out below.
		4. will refer allegations or disclosures of abuse to the appropriate qualified professionals such as the Multi-Agency Safeguarding Hub (MASH), the Police, the NSPCC and Lewisham Children’s Social Care (see contact details below).
		5. will collaborate fully with the statutory and voluntary agencies concerned with child abuse and will not conduct any investigations on its own.
2. **SAFEGUARDING LEAD**

The NXG Trust’s Safeguarding Lead will be the **Besson Street and Community Development Manager (Jill Mountford)** whose name and telephone number will be given to all Members and who should be the primary point of contact for advice on or reporting of abuse.

* 1. **Responsibilities of the Safeguarding Lead**

The Safeguarding Lead shall:

* + 1. Undertake relevant training updates at least every 2 years and will be expected to keep themselves informed of the latest developments in law and practice relevant to child protection.
		2. Maintain the Safeguarding Children and Young People folder at Besson Street (which shall include this Policy, training slides and the Home Office guidelines Safe from Harm (or any subsequent or successor guidelines)).
		3. Ensure that all new and existing Members:
			1. sign a record to indicate that they have read the full contents of the folder and discussed any questions on how it affects their work with the Safeguarding Lead
			2. following any material updates to the folder, sign a record to indicate that they have read the updated documents and discussed any questions on how it affects their work with the Safeguarding Lead
			3. attend a Safeguarding Children and Young People training by the Safeguarding Lead.
			4. are aware of the following precautions in relation to lone working with children:
				1. No Members shall accompany children into the toilet.
				2. In relation to Stay and Play sessions all toilet needs should be undertaken by the responsible adult attending the session with the child.
				3. In all other circumstances, a Member may take a child to the toilet, show them where the toilet is, switch the light on, make sure they have what they need etc. but must not enter into the toilet. If the child needs help and the Member thinks that (using their discretion) it is appropriate, the child may enter into the toilet with a friend of the same sex, so long as the Member remains nearby and vigilant and ensures that they are not in the cubicle for an unreasonable amount of time.
				4. No Members, parents or carers shall administer first aid on a child in an enclosed space.

* + 1. Monitor this Policy and report on its application at least annually to the HR Committee.
		2. Be responsible for overseeing that appropriate child protection steps are applied when recruiting for a new Member. These should include obtaining telephone reference checks (wherever possible) and a Disclosure and Barring Service (DBS) check, prior to the commencement of their role.
1. **RECOGNISING ABUSE**
	1. The NXG Trust recognises that:
		1. where abuse occurs it is usually perpetrated by someone known to and trusted by the child who will often be a family member.
		2. adults with a preference for sexual relations with children often target children’s organisations to gain access to children and will therefore be sufficiently vigilant and observe good practice in the recruitment and appointment of volunteers and paid staff working with children and in the way in which they carry out their work.
		3. the internet provides an avenue for potential abuse. While Wi-Fi may be available within Besson Street and other locations where The NXG Trust operates, this will not be made open access, and individuals will only be able to gain access to the Wi-Fi if they specifically ask for the Wi-Fi code, which will be provided only when required in relation to the delivery of services provided by or facilitated by The NXG Trust.
	2. The World Health Organization sets out four key areas of abuse will be outlined in this Policy:

|  |  |
| --- | --- |
| **Neglect** | The persistent or severe neglect of a child, or the failure to protect a child from exposure to any kind of danger, including cold and starvation, or extreme failure to carry out aspects of care, resulting in the significant impairment of the child’s health and development, including non-organic failure to thrive. |
| **Physical Injury:** | Actual or likely physical injury to a child, or failure to prevent physical injury (or suffering) to a child including deliberate poisoning, suffocation and Munchausen’s syndrome by proxy. |
| **Sexual Abuse:** | Actual or likely sexual exploitation of a child or adolescent. The child may be dependent and/or developmentally immature. |
| **Emotional Abuse:**  | Actual or likely severe adverse effect of the emotional and behavioural development of a child caused by persistent or severe emotional ill-treatment or rejection. All abuse involves some emotional ill-treatment. |

The NSPCC also includes the following sub-categories of abuse that should also be considered by all Members:[[1]](#footnote-1)

* + 1. Child sexual exploitation – a type of sexual abuse, where vulnerable young people receive things such as gifts, money etc. in exchange for sexual activities
		2. Harmful sexual behaviour – can include using sexually explicit words and phrases, inappropriate touching, sexual violence or threats.
		3. Domestic abuse – any type of controlling, bullying, threatening or violent behaviour between people who are or were in an intimate relationship.
		4. Bullying and cyberbullying – a behaviour that hurts someone else, usually over a lengthy period of time.
		5. Child trafficking – the recruiting and moving of children who are then exploited.
		6. Female genital mutilation – the partial or total removal of female genitalia for non-medical reasons.

**Appendix 1** sets out further guidance from the NSPCC on these forms of abuse along with indicators of spotting such abuse.

* 1. Common signs that may indicate abuse**[[2]](#footnote-2)**
		1. All Members shall be aware of the common signs that may indicate that a child or young person is being abused.
		2. Children who suffer abuse may be afraid to tell anybody about the abuse. They may struggle with feelings of guilt, shame or confusion – particularly if the abuser is a parent, caregiver or other close family member or friend.
		3. **Appendix 1** sets out further guidance from the NSPCC on these forms of abuse along with indicators of spotting such abuse.

* + 1. These signs do not necessarily mean that a child or young person is being abused, as there could be many other reasons for changes in a child’s behaviour such as a bereavement or relationship problems between parents/carers. In assessing whether signs are related to abuse or not, they need to be considered in the context of the child’s development and situation.
	1. Disclosing abuse[[3]](#footnote-3)

Disclosure is the process by which children and young people start to share their experiences of abuse with others. This can take place over a long period of time.

All Members should understand:

* + 1. Children and young people may disclose directly or indirectly and sometimes they may start sharing details of abuse before they are ready to put their thoughts and feelings in order.
		2. Not all disclosures will lead to a formal report of abuse or a case being made or a case being taken to court, but all disclosures should be taken seriously.

**Appendix 2** sets out further guidance from the NSPCC on how children and young adults may disclose abuse.

1. **RESPONDING TO ABUSE - IF ABUSE IS REPORTED, SUSPECTED OR DISCLOSED**
	1. **Suspected Abuse**
		1. All Members working with children or young adults should be aware that they should never wait until a child or young person tells them directly that they are being abused before taking action. **Instead, they should immediately discuss their concerns with the Safeguarding Lead**.**[[4]](#footnote-4)**
		2. Waiting for a child to be ready to speak about their experiences could mean that the abuse carries on and they, or another child, are put at further risk of significant harm.
		3. **Appendix 3** sets out further guidance from the NSPCC on encouraging children and young people to seek help and support.[[5]](#footnote-5)
	2. **Responding to actual or suspected disclosures[[6]](#footnote-6)**
		1. When a child or young person wants to talk about abuse to a Member (the “actioner”) will reassure them that it is right to talk about it, they will be listened to and that everything they say will be taken seriously.
		2. In line with NSPCC guidelines (as of the date of this policy), the actioner will try to:
			1. Show that they care, help them open up: Give their full attention to the child or young person and keep their body language open and encouraging. The actioner will be compassionate, understanding and reassure them their feelings are important.
			2. Take their time, slow down: Respect pauses and don’t interrupt the child – let them go at their own pace. Recognise and respond to their body language. And remember that it may take several conversations for them to share what’s happened to them.
			3. Show they understand, reflect back: Make it clear they’re interested in what the child is telling them. Reflect back what they’ve said to check your understanding – and use their language to show it’s their experience.
			4. Reassure them that they’ve done the right thing in telling them: Make sure they know that abuse is never their fault and understand that a child may have been bullied, threatened or made to promise secrecy.
2. **REPORTING ABUSE**

The actioner should never talk to the alleged perpetrator about the child’s disclosure. This could make things a lot worse for the child.

The actioner will not promise confidentiality to the child at any time and will inform the child that someone else will need to be told about the matters they are talking about.

The actioner will try to maintain an unbiased approach when responding to disclosures and follow The NXG Trust’s procedures to ensure each case is treated in a fair and transparent manner and that the child gets the protection and support that they need.

* 1. **Note Taking[[7]](#footnote-7)**
		1. The actioner should make accurate and detailed notes of any concerns that they have regarding a child or disclosure that the child has made, including where possible:
			1. the child's details (name, age, address)
			2. what the child said or did that gave them cause for concern (if the child made a verbal disclosure, write down their exact words)
			3. any information the child provided about the alleged abuser.
		2. These notes will need to be shared with the Safeguarding Lead.
	2. **Sharing concerns or reports of abuse with the Safeguarding Lead[[8]](#footnote-8)**
		1. If a Member suspects abuse or a child or young person discloses abuse, they must immediately contact the Safeguarding Lead to discuss their concerns and share all relevant information.
		2. If a Member thinks a child may be in **immediate danger**, they should first try to discuss their concerns with the Safeguarding Lead, however if they are not available, the Member should call 999.
	3. **Reporting by Safeguarding Lead to third party agencies**
		1. The Safeguarding Lead will then assess the information and decide which is the most appropriate agency to refer the information to. This decision will be based on the urgency and time of day and may include:
			1. LB Lewisham’s Multi-Agency Safeguarding Hub (MASH)
			2. Lewisham Children’s Social Care (out of hours service)
			3. Police (out of hours service)
		2. When the Safeguarding Lead notifies a third party organisation, they should consider what specific information is appropriate to share and who to share it with.
		3. Children should be given the opportunity to decide whether they agree to their personal information being shared. If a child doesn’t have the capacity to make their own decisions the NSPCC recommends that the Safeguarding Lead should ask their parent or carer (unless doing so would put the child at risk of harm).
		4. Where the Safeguarding Lead suspects that asking for the consent of the child’s parent or carer will put the child at risk of harm, the Safeguarding Lead is not required to ask for their permission or inform them before making a referral to a third party organisation.
		5. If consent is unable to be provided, refused or if the Safeguarding Lead is unable to seek consent, the Safeguarding Lead can still share information with third party organisations if this is in the public interest. This includes protecting children from significant harm and promoting the welfare of children.
		6. If the Safeguarding Lead has made a verbal referral to MASH or Lewisham Children’s Social Care, they should follow this up with a written referral as soon as possible, ideally within 48 hours.
		7. Further investigations will be carried out by the appropriate authorities and not by The NXG Trust. The NXG Trust will not hinder any authority from exercising its statutory responsibilities concerning child protection.
	4. **Internal reporting of abuse by The NXG Trust**
		1. Following the Safeguarding Lead’s disclosure of suspected or reported abuse to a third party organisation, they will promptly provide the HR Committee and Strategy Manager with a written report. This report will not contain any personal details of the individuals involved.
		2. Following consultation, the Safeguarding Lead, HR Committee and Strategy Manager may recommend updating The NXG Trustees, Chair, Risk Register and this Policy.
	5. **Allegations or suspected abuse by Members**

If an allegation is made against a Member, the person making the allegation will be advised to contact The Multi-Agency Safeguarding hub (MASH) (contact details below). Where possible, the NXG Trust Chair, HR Committee Chair, Safeguarding Lead and Strategy Manager will promptly be advised of the situation.

1. **WHISTLEBLOWING**

If a Member or other individual connected to The NXG Trust considers that The NXG Trust doesn’t have a clear child and young people safeguarding procedure or is not comfortable with how The NXG Trust has responded to their report, they should contact the NSPCC’s Whistleblowing Advice Line to discuss their concerns on: [[9]](#footnote-9)

Tel: 0800 028 0285

Email: help@nspcc.org.uk

1. **REVIEW**
	1. This Policy will be reviewed every year, or more frequently in the event of changes to legislation or best practice.
	2. The Safeguarding Lead shall provide an annual update to the HR Committee on:
		1. any abuse reported or suspected by undertaken by Members since the last annual update
		2. any relevant legal or policy developments in the safeguarding of children and young people
		3. suggested updates to this Policy
2. **KEY CONTACTS**

|  |  |
| --- | --- |
| **Safeguard Lead**  | Jill Mountford 02076397605 |
| **Multi-Agency Safeguarding Hub (MASH)**  | Tel: 020 8314 6660Email: mashagency@lewisham.gov.uk. Opening hours: Monday–Friday, 9am–5pm |
| [**Children's Social Care**](http://www.lewisham.gov.uk/contact-us/Pages/contact.aspx?directoryid=3298) | Tel: 020 8314 6000Available out of hoursFirst FloorLaurence House1 Catford RoadSE6 4RU |
| **Police** | Tel: 999Available out of hours |
| **NSPCC Helpline** | Tel: 0808 800 5000 Email: help@nspcc.org.uk.The NSPCC’s trained professionals will discuss concerns, give expert advice and take action to protect the child as appropriate. This may include making a referral to the local authority. |

1. **APPENDICES**

The Appendices are intended to provide additional guidance from the NSPCC to accompany the Policy.

**Appendix 1 - Further guidance from the NSPCC on the different forms of abuse and indicators that may help to identify abuse.**

|  |  |
| --- | --- |
|  | **Physical abuse** What is physical abuse?  Physical abuse happens when a child is deliberately hurt, causing injuries such as cuts, bruises, burns and broken bones. It can involve hitting, kicking, shaking, throwing, poisoning, burning or suffocating.  It’s also physical abuse if a parent or carer makes up or causes the symptoms of illness in children. For example, they may give them medicine they don’t need, making them unwell. This is known as fabricated or induced illness.  Spotting the signs of physical abuse  All children have trips, falls and accidents which may cause cuts, bumps and bruises. These injuries tend to affect bony areas of their body such as elbows, knees and shins and are not usually a cause for concern.  Injuries that are more likely to indicate physical abuse include:  * Bruising – e.g. bruises on babies who are not yet crawling or walking, multiple bruises in clusters, usually on the upper arms or outer thighs, bruising which looks like it has been caused by fingers, a hand or an object, like a belt or shoe, large oval-shaped bite marks.
* Burns or scalds which have a clear shape of an object (e.g. cigarette burns) or burns to the backs of hands, feet, legs, genitals or buttocks.
* Other signs of physical abuse include multiple injuries (such as bruising, fractures) inflicted at different times.

If a child is frequently injured, and if the bruises or injuries are unexplained or the explanation doesn’t match the injury, this should be investigated. It’s also concerning if there is a delay in seeking medical help for a child who has been injured. |
|  | **Neglect** What is neglect?  Neglect is persistently failing to meet a child’s basic physical and/or psychological needs usually resulting in serious damage to their health and development. Neglect may involve a parent’s or carer’s failure to:  * + - provide adequate food, clothing or shelter
		- supervise a child (including leaving them with unsuitable carers) or keep them safe from harm or danger
		- make sure the child receives appropriate health and/or dental care
		- make sure the child receives a suitable education
		- meet the child’s basic emotional needs – parents may ignore their children when they are distressed or even when they are happy or excited. This is known as emotional neglect.

 Neglect is the most common type of child abuse. It often happens at the same time as other types of abuse. Neglect can be difficult to identify. Isolated signs may not mean that a child is suffering neglect, but multiple and persistent signs over time could indicate a serious problem.  Some signs of neglect include: * + - children who appear hungry - they may come to school without lunch money or even try to steal food
		- children who appear dirty or smelly and whose clothes are unwashed or inadequate for the weather conditions
		- children who are left alone or unsupervised
		- children who fail to thrive or who have untreated injuries, health or dental problems
		- children with poor language, communication or social skills for their stage of development
		- children who live in an unsuitable home environment, for example the house is very dirty and unsafe, perhaps with evidence of substance misuse or violence
		- children who have taken on the role of carer for other family members.
 |
|  | **Sexual abuse** What is sexual abuse?  Sexual abuse is forcing or enticing a child to take part in sexual activities. It doesn’t necessarily involve violence and the child may not be aware that what is happening is abuse.  Child sexual abuse can involve contact abuse and/or non-contact abuse. Contact abuse happens when the abuser makes physical contact with the child. It includes:  * + - sexual touching of any part of the body whether the child is wearing clothes or not
		- rape or penetration by putting an object or body part inside a child's mouth, vagina or anus
		- forcing or encouraging a child to take part in sexual activity
		- making a child take their clothes off, touch someone else's genitals or masturbate.

Non-contact abuse involves non-touching activities. It can happen online or in person and includes**:** * + - encouraging a child to watch or hear sexual acts
		- not taking proper measures to prevent a child being exposed to sexual activities by others
		- showing pornography to a child
		- making, viewing or distributing child abuse images
		- allowing someone else to make, view or distribute child abuse images.

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

 Abusers may threaten to send sexually explicit images, video or copies of sexual conversations to the young person's friends and family unless they take part in other sexual activity. Images or videos may continue to be shared long after the abuse has stopped.  Abusers will often try to build an emotional connection with a child in order to gain their trust for the purposes of sexual abuse. This is known as grooming.  Spotting the signs of sexual abuse  There may be physical signs that a child has suffered sexual abuse. These include: * + - anal or vaginal soreness or itching
		- bruising or bleeding near the genital area
		- discomfort when walking or sitting down
		- an unusual discharge
		- sexually transmitted infections (STI)
		- pregnancy.

 Changes in the child’s mood or behaviour may also cause concern. They may want to avoid spending time with specific people. In particular, the child may show sexual behaviour that is inappropriate for their age. For example: * + - they could use sexual language or know things about sex that you wouldn't expect them to
		- a child might become sexually active at a young age • they might be promiscuous.
 |
|  | **Child sexual exploitation** What is child sexual exploitation? Child sexual exploitation (CSE) is a type of sexual abuse. Young people in exploitative situations and relationships receive things such as gifts, money, drugs, alcohol, status or affection in exchange for taking part in sexual activities.  Young people may be tricked into believing they're in a loving, consensual relationship. They often trust their abuser and don't understand that they're being abused. They may depend on their abuser or be too scared to tell anyone what's happening. They might be invited to parties and given drugs and alcohol before being sexually exploited. They can also be groomed and exploited online.  Some children and young people are trafficked into or within the UK for the purpose of sexual exploitation. Sexual exploitation can also happen to young people in gangs.  Child sexual exploitation can involve violent, humiliating and degrading sexual assaults and involve multiple perpetrators.  Spotting the signs of child sexual exploitation  Sexual exploitation can be very difficult to identify. Warning signs can easily be mistaken for ‘normal’ teenage behaviour.  Young people who are being sexually exploited may:  * + - go missing from home, care or education
		- be involved in abusive relationships, appearing intimidated and fearful of certain people or situations
		- hang out with groups of older people, or anti-social groups, or with other vulnerable peers
		- get involved in gangs, gang fights, gang membership
		- have older boyfriends or girlfriends
		- spend time at places of concern, such as hotels or known brothels
		- not know where they are, because they have been moved around the country
		- be involved in petty crime such as shoplifting
		- have access to drugs and alcohol
		- have new things such as clothes and mobile phones which they can’t or won’t explain
		- have unexplained physical injuries.
 |
|  | **Harmful sexual behaviour** What is harmful sexual behaviour?  Children and young people who develop harmful sexual behaviour harm themselves and others.  Harmful Sexual Behaviour can include:  * + - using sexually explicit words and phrases
		- inappropriate touching
		- using sexual violence or threats
		- full penetrative sex with other children or adults.

 Sexual behaviour between children is also considered harmful if one of the children is much older – particularly if there is more than 2 years’ difference in age or if one of the children is pre-pubescent and the other isn’t. However, a younger child can abuse an older child, particularly if they have power over them – for example, if the older child is disabled.  Spotting the signs of harmful sexual behaviour  It’s normal for children to show signs of sexual behaviour at each stage in their development. Children also develop at different rates and some may be slightly more or less advanced than other children in their age group. Behaviours which might be concerning depend on the child’s age and the situation.  If you're unsure whether a child’s sexual behaviour is healthy, Brook provide a helpful, easy-to-use traffic light tool. The traffic light system is used to describe healthy (green) sexual behaviours, potentially unhealthy (amber) sexual behaviours and unhealthy (red) sexual behaviours.  |
|  | **Emotional abuse** What is emotional abuse?  Emotional abuse is persistent and, over time, it severely damages a child’s emotional health and development. It involves: * + - humiliating, putting down or constantly criticising a child
		- shouting at or threatening a child or calling them names
		- mocking a child or making them perform degrading acts
		- constantly blaming or scapegoating a child for things which are not their fault
		- trying to control a child’s life and not recognising their individuality
		- not allowing them to have friends or develop socially
		- pushing a child too hard or not recognising their limitations
		- manipulating a child
		- exposing a child to distressing events or interactions such as drug taking, heavy drinking or domestic abuse
		- persistently ignoring them
		- being cold and emotionally unavailable during interactions with a child
		- never saying anything kind, positive or encouraging to a child and failing to praise their achievements and successes.

 Spotting the signs of emotional abuse  There aren’t usually any obvious physical signs of emotional abuse but you may spot signs in a child's actions or emotions. It’s important to remember that some children are naturally quiet and self-contained whilst others are more open and affectionate. Mood swings and challenging behaviour are also a normal part of growing up for teenagers and children going through puberty. Be alert to behaviours which appear to be out of character for the individual child or are particularly unusual for their stage of development. Babies and pre-school children who are being emotionally abused may: * + - be overly-affectionate towards strangers or people they haven’t known for very long
		- not appear to have a close relationship with their parent, for example when being taken to or collected from nursery
		- lack confidence or become wary or anxious
		- be unable to play
		- be aggressive or nasty towards other children and animals.

 Older children may:  * + - use language, act in a way or know about things that you wouldn’t expect for their age
		- struggle to control strong emotions or have extreme outbursts
		- seem isolated from their parents
		- lack social skills or have few, if any, friends
		- fear making mistakes
		- fear their parent being approached regarding their behaviour
		- self-harm.
 |
|  | **Domestic abuse** What is domestic abuse?  Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people who are or were in an intimate relationship. There are many different types of abusive behaviours that can occur within intimate relationships, including emotional, sexual, financial, psychological and physical abuse. Domestic abuse can be underpinned by an on-going pattern of psychologically abusive behaviour (coercive control) that is used by 1 partner to control or intimidate the other partner. In situations of domestic abuse, both males and females can be abused or be abusers. Domestic abuse can happen in any relationship regardless of age, sexuality, gender identity, race or religious identity. Research by the NSPCC has indicated that many young people experience domestic abuse in their own intimate relationships. The UK’s cross-government definition of domestic abuse also covers relationships between young people aged 16 and 17. Children’s exposure to domestic abuse between parents and carers is child abuse. Children can be directly involved in incidents of domestic abuse or they may be harmed by seeing or hearing abuse happening. The developmental and behavioural impact of witnessing domestic abuse is similar to experiencing direct abuse. Children in homes where there is domestic abuse are also at risk of other types of abuse or neglect.  Spotting the signs of domestic abuse  It can be difficult to tell if domestic abuse is happening, because it usually takes place in the family home and abusers can act very differently when other people are around.  Children who witness domestic abuse may: * + - become aggressive
		- display anti-social behaviour
		- suffer from depression or anxiety
		- not do as well at school - due to difficulties at home or disruption of moving to and from refuges.

 |
|  | **Bullying and cyberbullying** What are bullying and cyberbullying?  Bullying is behaviour that hurts someone else. It usually happens over a lengthy period of time and can harm a child both physically and emotionally.  Bullying includes:* + - verbal abuse, such as name calling
		- non-verbal abuse, such as hand signs or glaring
		- emotional abuse, such as threatening, intimidating or humiliating someone
		- exclusion, such as ignoring or isolating someone
		- undermining, by constant criticism or spreading rumours
		- controlling or manipulating someone
		- racial, sexual or homophobic bullying • physical assaults, such as hitting and pushing
		- making silent, hoax or abusive calls.

 Bullying can happen anywhere – at school, at home or online. When bullying happens online it can involve social networks, games and mobile devices. Online bullying can also be known as cyberbullying.  Cyberbullying includes:  * + - sending threatening or abusive text messages
		- creating and sharing embarrassing images or videos
		- 'trolling' - sending menacing or upsetting messages on social networks, chat rooms or online games
		- excluding children from online games, activities or friendship groups
		- setting up hate sites or groups about a particular child
		- encouraging young people to self-harm
		- voting for or against someone in an abusive poll
		- creating fake accounts, hijacking or stealing online identities to embarrass a young person or cause trouble using their name.

Spotting the signs of bullying and cyberbullying  It can be hard to know whether or not a child is being bullied. They might not tell anyone because they're scared the bullying will get worse. They might also think that the bullying is their fault.  No one sign indicates for certain that a child’s being bullied, but you should look out for:  * + - belongings getting ‘lost’ or damaged
		- physical injuries such as unexplained bruises
		- being afraid to go to school, being mysteriously 'ill' each morning, or skipping school • not doing as well at school
		- asking for, or stealing, money (to give to a bully)
		- being nervous, losing confidence or becoming distressed and withdrawn • problems with eating or sleeping
		- bullying others.

  |
|  | **Child trafficking**  What is child trafficking?  Child trafficking is child abuse. It involves recruiting and moving children who are then exploited. Many children are trafficked into the UK from overseas, but children can also be trafficked from one part of the UK to another. Children are trafficked for: * + - child sexual exploitation
		- benefit fraud
		- forced marriage
		- domestic servitude such as cleaning, childcare, cooking
		- forced labour in factories or agriculture
		- criminal exploitation such as cannabis cultivation, pickpocketing, begging, transporting, drugs, selling pirated DVDs and bag theft.

 Children who are trafficked experience many forms of abuse and neglect. Physical, sexual and emotional abuse is often used to control them and they’re also likely to suffer physical and emotional neglect.  Child trafficking can require a network of organised criminals who recruit, transport and exploit children and young people. Some people in the network might not be directly involved in trafficking a child but play a part in other ways, such as falsifying documents, bribery, owning or renting premises or money laundering. Child trafficking can also be organised by individuals and the children’s own families.  Traffickers trick, force or persuade children to leave their homes. They use grooming techniques to gain the trust of a child, family or community. Although these are methods used by traffickers, coercion, violence or threats don’t need to be proven in cases of child trafficking - a child cannot legally consent to their exploitation so child trafficking only requires evidence of movement and exploitation.  Modern slavery is another term which may be used in relation to child trafficking. Modern slavery encompasses slavery, servitude, forced and compulsory labour and human trafficking. The Modern Slavery Act passed in 2015 in England and Wales categorises offences of slavery, servitude, forced or compulsory labour and human trafficking (NCA, 2017).  Spotting the signs of child trafficking  Signs that a child has been trafficked may not be obvious but you might notice unusual behaviour or events. These include a child who: * + - spends a lot of time doing household chores
		- rarely leaves their house, has no freedom of movement and no time for playing
		- is orphaned or living apart from their family, often in unregulated private foster care
		- lives in substandard accommodation
		- isn't sure which country, city or town they're in
		- is unable or reluctant to give details of accommodation or personal details
		- might not be registered with a school or a GP practice
		- has no documents or has falsified documents
		- has no access to their parents or guardians
		- is seen in inappropriate places such as brothels or factories
		- possesses unaccounted for money or goods
		- is permanently deprived of a large part of their earnings, required to earn a minimum amount of money every day or pay off an exorbitant debt
		- has injuries from workplace accidents
		- gives a prepared story which is very similar to stories given by other children.

There are also signs that an adult is involved in child trafficking, such as: * + - making multiple visa applications for different children
		- acting as a guarantor for multiple visa applications for children
		- travelling with different children who they’re not related to or responsible for
		- insisting on remaining with and speaking for the child
		- living with unrelated or newly arrived children
		- abandoning a child or claiming not to know a child they were previously with.
 |
|  | **Female genital mutilation**  What is female genital mutilation?  Female genital mutilation (FGM) is the partial or total removal of external female genitalia for non-medical reasons. It's also known as female circumcision or cutting. The age at which FGM is carried out varies. It may be carried out when a girl is new-born, during childhood or adolescence, just before marriage or during pregnancy. Religious, social or cultural reasons are sometimes given for FGM. However, FGM is child abuse. It's dangerous and a criminal offence. There are no medical reasons to carry out FGM. It doesn't enhance fertility and it doesn't make childbirth safer. It’s used to control female sexuality and can cause severe and long-lasting damage to physical and emotional health. Spotting the signs of female genital mutilation  A girl at immediate risk of FGM may not know what's going to happen. But she might talk about or you may become aware of: * + - a long holiday abroad or going 'home' to visit family
		- relative or cutter visiting from abroad
		- a special occasion or ceremony to 'become a woman' or get ready for marriage
		- a female relative being cut – a sister, cousin or an older female relative such as a mother or aunt
		- missing school repeatedly or running away from home.

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

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

**Appendix 2 - further guidance from the NSPCC on how children and young adults may disclose abuse.**

Children and young people may disclose abuse in a variety of ways, including:[[10]](#footnote-10)

* directly – making specific verbal statements about what’s happened to them
* indirectly – making ambiguous verbal statements which suggest something is wrong
* behaviourally – displaying behaviour that signals something is wrong (this may or may not be deliberate)
* non-verbally – writing letters, drawing pictures or trying to communicate in other ways.

Children and young people may not always be aware that they are disclosing abuse through their actions and behaviour.

Sometimes children and young people make partial disclosures of abuse. This means they give some details about what they’ve experienced, but not the whole picture. They may withhold some information because they:

* are afraid they will get in trouble with or upset their family
* want to deflect blame in case of family difficulties as a result of the disclosure
* feel ashamed and/or guilty
* need to protect themselves from having to relive traumatic events.

**Appendix 3 - Further guidance from the NSPCC on encouraging children and young people to seek help and support[[11]](#footnote-11)**

Encouraging children and young people to seek help and support by, where possible:

* Making it as easy as possible for young people to find and take up the offer of help.
* Reinforcing positive messages about those who seek help – seeking help is a sign of strength.
* Encouraging parents to support their children in seeking help.
* Being positive about young people, their capacity for change and their resilience.
* Listening to the people they help – improve your services using feedback from service users.
* Raising awareness about how young people can seek help.
* Seeing the whole person – engaging with young people both in terms of their strengths and their weaknesses.
* Building trust – treat young people with respect.
* Helping young people to help each other – equip young people with the skills and tools to support their friends/peers and family members.
* Considering the role of new technologies – these should be complementary to other ways of supporting young people.

**Appendix 4 - Further guidance for the Safeguarding Lead on passing on suspected or disclosed abuse to third party organisations and seeking consent**

**Passing on suspected or disclosed abuse to third party organisations[[12]](#footnote-12)**

* Prioritise the safety and wellbeing of the child and anyone else who may be affected by the situation.
* Make sure they share the information quickly and securely. The sooner the Safeguarding Lead reports their concerns the better. This means the details will be fresh in their mind and action can be taken quickly.
* Identify how much information should be shared. This will depend on the reasons for sharing it.
* Use language that is clear and precise. Different agencies may use and understand terminology differently.
* Make sure the information they are sharing is accurate. Make it clear what information is factual and what is based on opinion (i.e. their opinion or other people’s opinion).
* When recording information, be as factual as possible. If they need to give their own or somebody else’s opinion, make sure it is clearly differentiated from fact. They should identify whose opinion is being given and record that person’s exact words.

**Seeking consent to share information[[13]](#footnote-13)**

Children should be given the opportunity to decide whether they agree to their personal information being shared. If a child doesn’t have the capacity to make their own decisions, the Safeguarding Lead should ask their parent or carer (unless doing so would put the child at risk of harm).

The NSPCC provides the following tips for obtaining a child’s consent:

* be open and honest
* make sure the person you’re asking for consent understands what information will be shared and why
* explain who will see the information and what it will be used for
* make sure the person you’re asking for consent understands the consequences of their information not being shared
* get the consent in writing, in case there are any disputes in the future. If it’s only given verbally, make a written record of this
* make sure the person knows they can withdraw consent at any time.

**Sharing information without consent**

If consent is refused or if the actioner or the Safeguarding Lead is unable to seek consent, the Safeguarding Lead can still share information with relevant professionals if this is in the public interest. This includes protecting children from significant harm and promoting the welfare of children.

When deciding whether to share information without consent, Safeguarding Lead should consider:

* If the need to share information is in the public interest and whether it outweighs the need to maintain confidentiality.
* All the implications of sharing the information, for example if they are sharing sensitive details about a person's life.
* Contacting the NSPCC helpline for advice.
* If sharing information without consent, they should keep a written record explaining:
	+ what steps you took to get consent
	+ the person’s reasons for not giving consent (if known)
	+ why you felt it was necessary to share information without consent.
* Pass a copy of this record on to the agency/agencies that the Safeguarding Lead shares the information with.
1. Full details listed: <https://learning.nspcc.org.uk/media/1188/definitions-signs-child-abuse.pdf> [↑](#footnote-ref-1)
2. Full details listed: <https://learning.nspcc.org.uk/media/1188/definitions-signs-child-abuse.pdf> [↑](#footnote-ref-2)
3. Full details listed: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-3)
4. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-4)
5. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-5)
6. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-6)
7. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-7)
8. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-8)
9. Full details here: <https://www.nspcc.org.uk/keeping-children-safe/reporting-abuse/dedicated-helplines/whistleblowing-advice-line/> [↑](#footnote-ref-9)
10. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-10)
11. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-11)
12. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-12)
13. Full details here: <https://learning.nspcc.org.uk/child-abuse-and-neglect/recognising-and-responding-to-abuse/#heading-top> [↑](#footnote-ref-13)