

SAFEGUARDING CHILDREN AND CHILD PROTECTION POLICY

1.0 INTRODUCTION

1.1 The Bilbrough Country Classroom fully recognises the contribution it makes to Child Protection and the safeguarding of all children.

There are three main elements to our policy:

- a. Prevention through the teaching and pastoral support offered to pupils
- b. Procedures for identifying and reporting cases, or suspected cases of abuse. Because of our day-to-day contact with children, Bilbrough Country Classroom staff are well placed to observe outward signs of abuse.
- c. Support to pupils who may have been abused.

1.2 Our policy applies to all staff and volunteers working at The Bilbrough Country Classroom. Concerned parents may also contact the management committee.

2.0 PREVENTION

2.1 We recognise that high self-esteem, confidence, supportive friends and good lines of communication with trusted adults helps prevention.

Bilbrough Country Classroom will therefore:

- a. Establish and maintain an ethos where children feel secure and are encouraged to talk and are listened to.
- b. Ensure children know that there are adults in the Bilbrough Country Classroom whom they can approach if they are worried or in difficulty.
- c. Include in the curriculum, activities and opportunities which equip children with the skills they need to stay safe from abuse and to know to whom to turn for help.
- d. Include, in the curriculum, material which will help children develop realistic attitudes to the responsibilities of adult life, particularly with regard to childcare and parenting skills.

3.0 PROCEDURES

3.1 We will follow the procedures set out in the Inter-agency Procedures produced by the City of York Safeguarding Children Board, "Working Together to Safeguard Children", also available on-line at www.saferchildrenyork.org.uk

For North Yorkshire pupils we are committed to following the North Yorkshire Safeguarding Children Board and North Yorkshire LEA's Safeguarding procedure and guidance.

AIMS

Our aims are to:

- Create an environment at The Bilbrough Country Classroom which encourages children to develop a positive self-image regardless of race, language, religion, culture or home background.
- To help children to establish and sustain satisfying relationships within their families, peers and with other adults.
- To encourage children to develop a sense of autonomy and independence.
- To enable children to have the self-confidence and the vocabulary to resist inappropriate approaches.
- To work with parents to build their understanding of and commitment to the welfare of all our children.

OBJECTIVE

To ensure staff maintain vigilance to enable them to spot signs or symptoms associated with child abuse and inform relevant statutory authorities.

The legal framework for this is:

- The Rehabilitation of Offenders Act
- The Children Act 1989
- The Human Rights 1998
- The Data Protection Act 1984
- The Protection of Children Act 1999
- The Children (NI) Order
- The Children (Scotland) Order

The following is a summary of some of the indicators that may suggest that a child is being, or is at risk of harm under each category, indicators alone cannot confirm whether a child is being abused.

Indicators of physical abuse

Physical observations

- a. Bruising, especially:
 - i. Bruises on trunks
 - ii. Bruises on upper arm, shoulders, neck – consistent with gripping
 - iii. Fingertip bruising/finger marks
- b. Burns and scalds, especially:
 - i. Cigarette burns
 - ii. Burns caused by lengthy exposure to heat
- c. Human bite marks
- d. Fractures, particularly spiral fractures
- e. Swelling and lack of normal use of limbs
- f. Any serious injury with no explanation or conflicting explanations/inconsistent accounts
- g. Untreated injuries

Behaviour observations

- a. Unusually fearful with adults
- b. Unnaturally compliant to parents
- c. Refusal to discuss injuries/fear of medical help
- d. Withdrawal from physical contact
- e. Aggression toward others
- f. Wears cover-up clothing

Indicators of emotional abuse

- a. Physical, mental and emotional development lags
- b. Acceptance of punishment which appears excessive
- c. Over reaction to mistakes
- d. Continual self-depreciation
- e. Sudden speech disorders
- f. Fear of new situations
- g. Inappropriate emotional responses to painful situations
- h. Neurotic behaviour (such as rocking, hair-twisting, thumb sucking)
- i. Self-mutilation
- j. Fear of parents being contacted
- k. Extremes of passivity or aggression
- l. Drug/solvent abuse
- m. Running away
- n. Compulsive stealing, scavenging

Indicators of sexual abuse

Physical observations

- a. Damage to genitalia, anus or mouth
- b. Sexually transmitted disease
- c. Unexpected pregnancy, especially in very young girls
- d. Soreness in genital area, anus or mouth
- e. Unexplained recurrent urinary tract infections and discharges or abdominal pain

Behaviour observations

- a. Sexual knowledge inappropriate for age
- b. Sexualised behaviour in young children
- c. Sexually provocative behaviour/promiscuity
- d. Hinting at sexual activity
- e. Inexplicable falling off in school performance
- f. Sudden apparent changes in personality
- g. Lack of concentration, restlessness, aimlessness
- h. Socially withdrawn
- i. Overly compliant behaviour
- j. Acting out aggressive behaviour
- k. Poor trust in significant adults
- l. Regressive behaviour, onset of wetting, by day or night
- m. Onset of insecure, clinging behaviour
- n. Arriving early at school, leaving late, running away from home
- o. Suicide attempts, self mutilation, self-disgust
- p. Eating disorders, hysteria attacks in adolescents
- q. When a parent/carer causes illness or poisons a child through excessive medication, salt, alcohol and fabricates concerns about an illness
- r. When staff suspect a child is under the influence of medication due to being subdued or showing signs of drowsiness

Indicators of neglect

Physical observations

- a. Poor personal hygiene
- b. Poor state of clothing
- c. Emaciation, pot belly, short stature
- d. Poor skin tone and hair tone
- e. Untreated medical problems

Behavioural observations

- a. Constant hunger
- b. Constant tiredness
- c. Frequent lateness or non-attendance at school
- d. Destructive tendencies
- e. Low self-esteem
- f. Neurotic behaviour
- g. No social relationships
- h. Running away
- i. Compulsive stealing or scavenging
- j. Multiple accidents and accidental injuries

What is abuse?

Sexual

Emotional

Physical

Rape
Ignoring
Punching
Buggery
Locking in cupboard
Kicking
Forced to have sex with animals
Not enough food, heating
Shaking
Forced to eat faeces
Name-calling
Cigarette burns
Unwelcome sexual advances
Failing to take care of a child
Deliberately scalding a child
Being masturbated or forced to do it to someone else
Giving too much responsibility
Pinching
Penetrated by any object
Don't care where child is
Caning
Being made to pose for pornographic photos
Threatening all the time
Whipping
Made to watch sexual acts or listen to sexual talk
Made to wear old-fashioned clothes
Using a belt
Touched on breasts or genitals
Constantly ridiculed in front of people
Using a slipper
Breaking down the self-confidence of a child
Leaving a child without supervision
Not listening to a child
Teasing a child unnecessarily
Forcing a child to touch you
Verbally abusing a child
Exposing a child to pornographic acts or literature
Neglecting a child's medical needs
Manipulating a child
Not taking proper care of a child, e.g. not cleaning, clothing or feeding them
Neglecting a child's educational needs
Hitting or hurting a child – often to relieve your own frustration

Accidental/non-accidental injuries

Accidental injuries

Non-accidental injuries

Bruises likely to be:

- Few but scattered
- No pattern
- Same colour and age

Consider:

- Age and activity of child, e.g. learning to walk
- May be confused with birthmarks, etc.

Bruises likely to be:

- Frequent
- Patterned, e.g. finger and thumb marks
- Old and new in same place (note colour)
- In unusual position (see chart)

Consider:

- Development level of child and their activities
- May be more difficult to see on darker skins

Burns and scalds likely to be:

- Treated
- Easily explained
- May be confused with other conditions, e.g. impetigo, nappy rash

Burns and scalds likely to have:

- Clear outline
- Splash marks around burn area
- Unusual position, e.g. back of hand
- Indicative shapes, e.g. cigarette burns, bar of electric fire

Injuries likely to be:

- Minor and superficial
- Treated
- Easily explained

Injuries suspicious if:

- Bite marks
- Fingernail marks
- Large and deep scratches
- Incisions, e.g. from razor blade

Fractures likely to be:

- Of arms and legs
- Seldom on ribs, except for road traffic accidents
- Rarely in very young children
- May rarely be due to "brittle bone syndrome"

Fractures likely to be:

- Numerous – healed at different times

Consider:

- Age of child, always suspicious in babies under two year old
- Delay in seeking treatment

Genital area:

- Injury may be accidental (seek expert opinion)

3.2 The Bilbrough Country Classroom will:

- Ensure it has a designated senior member of staff who has undertaken the “Working Together” training course provided by the City of York Safeguarding Children Board as a minimum. Currently this is Rebecca Davison.
- Recognise the role of the designated senior staff member and arrange support and training.
- Ensure every member of staff knows:
 - the name of the designated person and his/her role.
 - that they have an individual responsibility for referring safeguarding and child protection concerns using the proper channels.
- Ensure that the members of staff are aware of the need to be alert to signs of abuse and know how to respond to a pupil who may tell of abuse.

If the Bilbrough Country Classroom suspects that there is a child protection issue then it will follow that child’s Local Authority procedures fully.