

INDICATORS OF SEXUAL ABUSE

Children displaying:

- Sexually transmitted disease/recurrent urinary infection
- Genital/rectal itching or soreness.
- Unexplained bleeding or discharge.
- Bruising to the genital region.
- Sexual play/masturbation inappropriate to the age of the child.
- Sexually explicit behaviour.
- Young children with an inappropriate level of sexual knowledge.
- Sexually abusive behaviour, particularly to vulnerable younger children.
- Unexplained pregnancy, particularly in younger children.

INDICATORS OF EMOTIONAL ABUSE

Children displaying:

- Abnormally passive, lethargic or attention seeking behaviour.
- Specific habit disorders, e.g. faecal smearing, excessive drinking, eating unusual substances, self-harm.
- Severely delayed social development, poor language and speech development not otherwise explained.
- Excessive nervous behaviour such as rocking, hair twisting.
- Low self esteem.

AVOIDING ALLEGATIONS

- Be careful how you touch/interact with a child, the child may see it differently.
- Be careful how you speak to a child, be aware of how it might sound
- Discuss current practises with your colleagues if there is anything that makes you feel vulnerable.
- Avoid being on your own with a child.
- It's best not to do anything for a child that he or she can do for him or herself.
- Always tell someone if a child touches you or speaks to you inappropriately. Log down the incident, time and date it.
- Notify the appropriate person in your setting if you are having problems with the parent/carer of a child
- If you have concerns about any of your colleagues it is your responsibility to inform your line manger or senior member of staff in SLT.
- If a decision is made **not** to refer your concern and you are unhappy with this then contact the Specialist Safeguarding Officer for Education

Remember... if in doubt... ask.

If you need any advice then contact staff below:

The Designated staff at VPA are:

The Designated Safeguarding Lead is Mrs Mahal.
The Designated Safeguarding Deputy is Mrs Kainth.

Other staff responsible for Safeguarding are:

Mrs Mapp –Head of School
Mrs Upton—Co-Deputy Headteacher

All Staff Allegations MUST be reported to:

Mrs Mapp—Head of School



Victoria Park
Primary Academy

Safeguarding Guide

CHILD ABUSE WHAT DO I DO?

Isolated signs and symptoms of abuse may not be particularly worrying but when combined with other indicators they may suggest there are reasons for serious concern. Alert yourself to indicators that follow in this document and if you come across any of them make sure you:

- Take immediate action to protect the child.
- Make provision for medical attention if necessary.
- Raise your concerns with the Designated Senior Person for Child Protection in your education setting.
- If you feel that a child may be at risk of abuse but are not sure then inform your Designated Senior Person for Child Protection immediately so appropriate referrals and actions can be made.

Child abuse happens to all children regardless of gender, culture, religion, social background and those with or without a disability.

Safeguarding Is Everyone's Business

Parents/Carers should be consulted and their agreement sought if Children's Social Care are to be contacted.

If, however, the nature of the concern means that to contact the parent would place the child(ren) at further risk of harm, interfere with a potential criminal investigation or raise concerns about the safety of members of staff, **do not contact the parent/carer.**

Lack of consent should not prevent a referral. All concerns, no matter how insignificant they seem, should be passed to the Designated Member of Staff.

IF IN DOUBT DISCUSS THE ISSUE WITH THE DESIGNATED SENIOR PERSON FOR CHILD PROTECTION.

Child Sexual Exploitation (CSE)

If you have any concerns about a child at risk of CSE, you **MUST** share your concerns with the safeguarding Team

Female Genital Mutilation (FGM)

Mandatory reporting: All suspicions of FGM **MUST** be reported immediately to the Safeguarding Team

The PREVENT Duty

Any concerns in relation to Extremism or Radicalisation **MUST** be reported immediately to the Safeguarding Team

DISCLOSURE OF ABUSE

Sometimes a child may disclose information to you, particularly when a relationship of trust has been formed. If this happens then the following actions must take place.

- Listen carefully to the child, particularly what is said spontaneously
- Record carefully what the child says in their words including how and when the account was given. Date, time and sign the record. Pass this onto the Designated Staff immediately.
- Do not ask questions, as this would constitute an evidential interview. If questions are needed to find out basic details of the disclosure, record them and the reply given by the child in verbatim. Any question should be open. Try to ask no more than tell, explain, describe or outline. Questioning a child in further detail at this stage may mean Police or Children's Social Care will not be allowed to conduct further enquiries.

Only trained investigators should question a child.

GENERAL INDICATORS

The following indicators may occur in children who are being abused. They are exceptionally important where sexual or emotional abuse is suspected, as these types of abuse show no outward physical signs.

- Sleeping and eating disturbance
- Change in behaviour
- Onset of enuresis (day or night)
- Recurrent headaches
- Recurrent stomach/abdominal pains.
- Inexplicable school failure.
- Restlessness/aimlessness
- Lack of trust/secretiveness
- Sexual behaviour.
- Self harming
- Drug/alcohol/solvent abuse.
- Running away.

Other factors that can impact on a child can be:

- Problems of the parents e.g. drug/alcohol use, learning disability, ill health, mental health.
- Environmental factors e.g. domestic violence, or other discrimination, bullying, homelessness.

INDICATORS OF PHYSICAL ABUSE

Bruises:

- To the eyes, mouth or ears.
- Fingertip bruising (grasp marks)
- Bruising of different ages in the same place.
- Outline bruises (hand marks, belt, shoe etc)
- Bruising with no obvious explanation
- Bruising to no mobile babies (consider shaking)

Burns, bites and scars:

- Clear impressions of teeth (more than 3cm unlikely to be a child)
- Burns/scars with clear outlines
- Small round burns that may be from cigarettes.
- Large number of different age scars.
- Scars of unusual shape.
- Scarring that indicates medical attention was not sought.

Fractures:

- Fractures in children under 1 year old.
- Fractures causing pain that would be difficult for a carer/parent to be unaware of. Be aware the babies or young children heal much quicker than adults and this may mask the nature of a fracture.

Other Injuries:

- Poisoning or ingestion of dangerous substances (including drugs/alcohol).
- Female Genital Mutilation.

INDICATORS OF NEGLECT

Children who are:

- Not receiving adequate food for their potential growth.
- Exposed to dangers through lack of supervision.
- Exposed to inadequate, dirty or cold environments.
- Abandoned or left in inappropriate situations by the carer.
- Prevented from receiving appropriate medical attention.