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Instill confidence

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Safeguarding children policy

What you need to know to help protect children under the age of 18 from harm, including how to act upon and record suspected, alleged or actual abuse

Revised edition August 2021 approved by:

Helen Feather
SEND Director

Next review date: October 2024

1. Statement of purpose

For the purposes of this document the phrases will refer to anybody under the age of eighteen who comes into contact with Bedazzle. This policy has been prepared by Phil Janssen, Diane Janssen and Helen Feather. For adults, those aged over 18, please refer to our policy 'Safeguarding Vulnerable Adults'.

1.1 Safeguarding policy

Everyone has the right to be protected from both the fear and reality of abuse, and we are fully committed to safeguarding the welfare of all children who come into contact with our services. Bedazzle is committed to meeting all legislative requirements with regard to keeping children safe and complying with all relevant guidance and, therefore, to ensuring that all children at Bedazzle are safe at all times, both physically and emotionally.

Bedazzle is a small organisation and works out of community centres, as well as in children's homes. This means that the work we do with children is on the premises of other agencies. Where appropriate we will draw up safeguarding contracts with other agencies and agree a joint protocol in light of any disclosures to ensure that the appropriate information is shared in order to keep the child safe and to also ensure that these are compliant with local authorities' own procedures.

1.2 Our role in safeguarding children

All members of staff and volunteers (in any capacity) have a responsibility to uphold safeguarding practices within Bedazzle. Staff may well be the first persons to spot early signs and symptoms of abuse. All staff have the same legal responsibility to help safeguard children and young people from harm as set out in Section 11 of the '2004 Children Act'. All safeguarding reports must be made as soon as is practically possible and within 24 hours in all cases.

Bedazzle has a duty to take any concerns or allegations of abuse seriously and to work transparently together with all agencies to ensure that children are safeguarded. Bedazzle's Designated Safeguarding Leads are Helen Feather and Diane Janssen. Kayleigh Orloff is Deputy Designated Safeguarding Lead. Diane Janssen has undertaken safer recruitment training.

1.3 Purpose of the document

There are four main elements to the policy:

- Prevention through the appropriate training of staff and creation and maintenance of a protective ethos at Bedazzle
- Procedures for identifying and reporting cases, or suspected cases, of abuse
- Preventing unsuitable people from working with children, ensuring processes are followed to ensure that all staff engaged to work for Bedazzle are 'suitable' for the task, ie: they pose no threat to the welfare, health or safety of young people referred to the organisation

- This policy is available on our website

2.0 Prevention

We recognise that high self-esteem, confidence, supportive friends and good lines of communication with a trusted adult help to protect children.

2.1 Ethos

- Bedazzle will therefore establish and maintain an environment where children feel safe in both the real and virtual world – all children are encouraged to talk openly and are listened to;
- Ensure children know that there are adults in the organisation that they can approach if they are worried or in difficulty and their concerns will be taken seriously and acted upon as appropriate
- Include in the curriculum activities and opportunities which equip children with the skills they need to stay safe from abuse, both in the real and virtual world
- Ensure all children know who to turn to for help should they need it

2.2 Induction and ongoing training

All staff are taken through a comprehensive induction process in which safeguarding and child protection is a key element. No member of staff will engage with children alone until they have completed this process.

Each year, staff undertake safeguarding training at Level 2, as well as undertaking annual Prevent training. All staff who work with children are required to read this document. Through appropriate training, the organisation will ensure that all staff are aware of the need to recognise when children are in need or at risk, are able to distinguish between the two categories, and understand what course of action should be taken when a child is deemed to come into either category.

2.3 Policy review

This policy will be reviewed annually and in light of legislative and organisational changes to safeguarding arrangements.

3.0 Abuse information & procedures

Staff and volunteers should familiarise themselves with the government's guidance on recognising, and responding to suspected abuse. Here's a link to an overview and resources:

<https://www.gov.uk/search/all?keywords=Child+Abuse&order=relevance>

3.1 Identifying abuse

To help practitioners identify the signs of child abuse and neglect and understand what action to take, visit:

[What to do if you're worried a child is being abused](#)

Staff and volunteers should also familiarise themselves with the latest version of

Working Together to Safeguard Children (2018), available here:

[Working together to safeguard children](#)

Following is a summary of different types of abuse and some of the signs and symptoms which might alert you to a possible cause for concern. This is not exhaustive. There may be considerable crossover regarding these signs and the different types of abuse. A child may be suffering from more than one of these forms of abuse and harm. These warning signs can only serve as a guide, staff and volunteers must be aware that an abused child may show no outward signs or change of behaviour.

Studies have shown that disabled children are almost four times more likely to be neglected or physically abused, more than three times more likely to be sexually abused and almost four times more likely to be emotionally abused.

4.0 Types of Abuse

It is generally accepted there are four main types of abuse, classified as:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

There is often no clear dividing line between one type of abuse and another. A person may show signs and symptoms from one or all of the categories given below, or none.

4.1 Physical abuse

This may involve, but is not limited to:

- Hitting
- Shaking
- Throwing
- Biting
- Poisoning
- Burning
- Scalding
- Drowning
- Suffocating
- Giving alcohol or inappropriate drugs
- Otherwise causing physical harm to a child or young person
- Physical abuse would also include fabricating the symptoms of illness in a child or young person, or deliberately inducing illness in a child or young person.

Possible signs of physical abuse:

- Unexplained injuries, or burns, particularly if they are recurrent
- Refusal to discuss injuries

- Improbable explanations for injuries
- Untreated injuries or lingering illness which is not attended to
- Acceptance of punishment which appears excessive
- Flinching when approached or touched
- Fear of staying with certain people or going to certain places
- Reluctance to get changed for sport or performance activities
- Fear of medical help
- Child or young person becoming aggressive or bullying others
- Child or young person running away from home
- Inappropriate clothing eg: being excessively covered in hot weather

Bruising is the most common injury. Some key facts about bruising are:

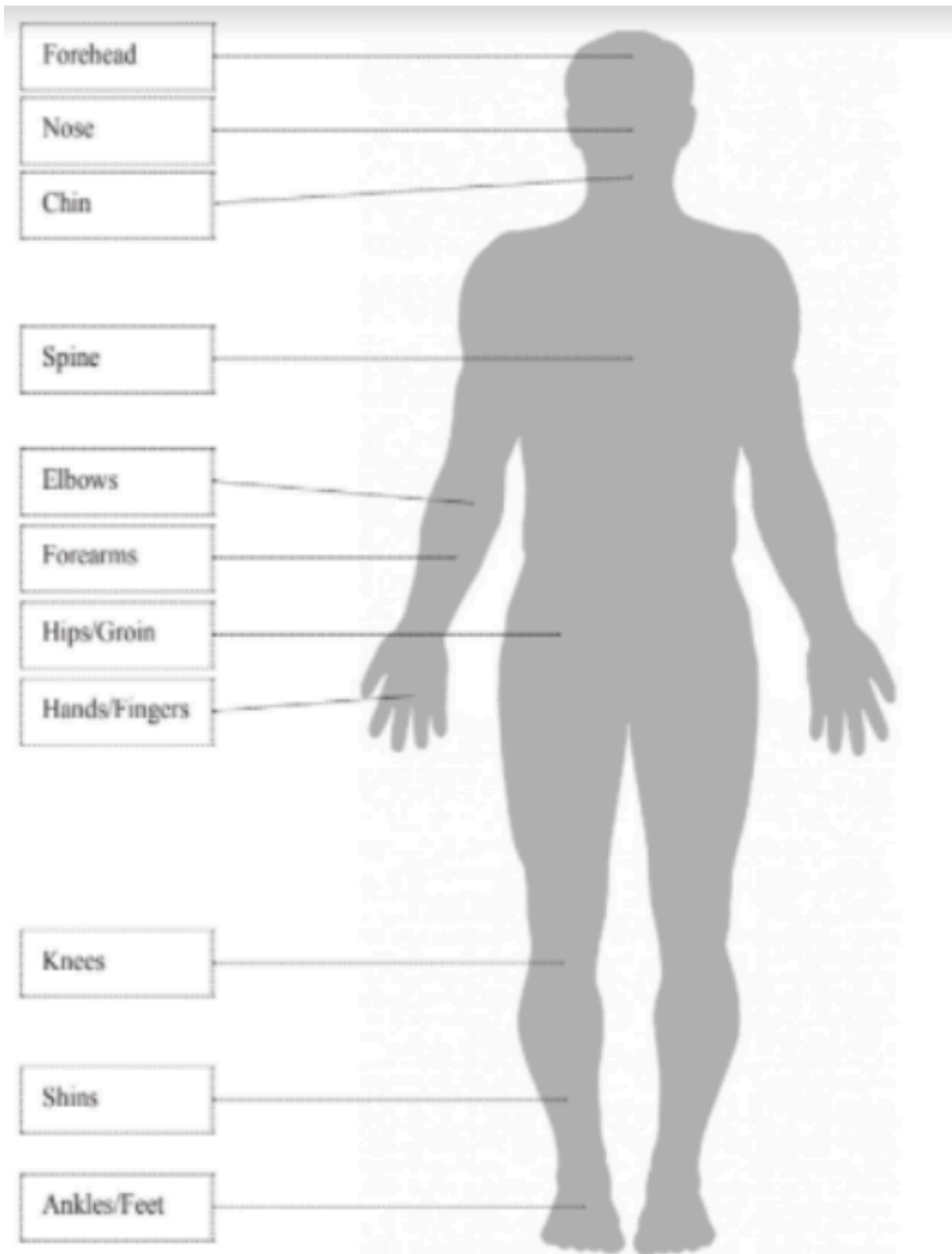
- Only one in five infants who are starting to walk have bruises
- Most young children who walk independently have bruises
- Young children tend to have more bruises in the summer months
- Fractures are not always accompanied by bruising
- The head is a common site for bruising caused by physical abuse
- Clusters of bruises are a common feature of physical abuse

It's important to differentiate between injuries that could be accidental and those that may not be. The following diagrams A and B differentiating accidental and non-accidental injuries should help.

Common body locations of accidental injuries

It's important to realise that these illustrations are only a general guide. However, research has shown that distinctive patterns have emerged.

- Bruises: most likely few, scattered, no pattern, same colour and age.
- Burns & scalds: already treated, easily explained.
- Fractures: most likely arms and legs, fractures are rare in very young children.
- Genital area: injury may be accidental (seek expert opinion), soreness may be irritation or allergic reaction eg: bathing products/soap powder etc.
- Minor cuts & Abrasions: already treated, and easily explained.

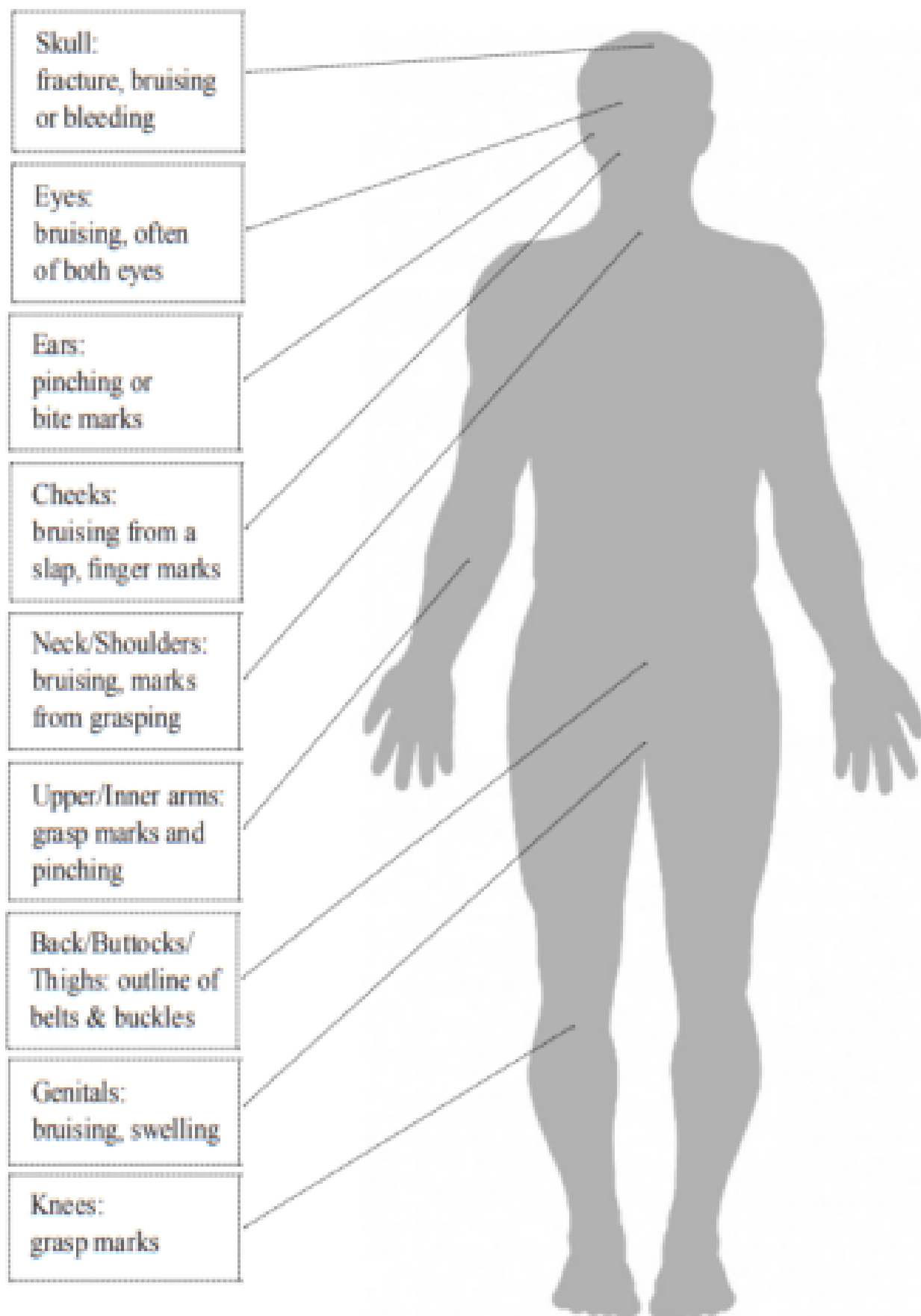


Common Body Locations of Non-Accidental Injuries

Some circumstances may require you and the child to mark a copy of this diagram as a help in recording incidents

- Bruises: likely to be frequent in places not normally harmed during play, outlined (eg: hand prints, grasp marks, belt marks), symmetrical or patterned (ie: the same pattern of bruising on both sides of the body/head/legs/arms etc.), old and new bruising in the same area
- Burns & scalds: it can be very difficult to distinguish between accidental and non-accidental burns but as a general rule, burns with clear outlines are suspicious, as are burns which are shaped (eg: cigarette burns), or in an unusual position (such as back of the hand)
- Fractures: likely to be numerous
- Genital area: abuse leading to soreness or injury in genital/anal area
- Other injuries: suspicious eg: bite marks, incisions, large & deep scratches

[Continued on following page]



4.2 Emotional abuse

Emotional abuse is the persistent emotional ill-treatment of a child such as to cause severe and persistent adverse effects on their emotional development. Emotional abuse may involve:

- Conveying to the child or young person that they are worthless, inadequate, unloved or only 'loved' with conditions attached
- Age or developmentally inappropriate expectations being imposed
- The corruption of children or young people (ie: illegal activities)
- Living with domestic violence
- Constant over-protection or preventing from socialising

Possible signs of emotional abuse:

- Continual self-depreciation
- Very low self esteem, often with an inability to accept praise or trust adults
- Fear of new situations
- Inappropriate emotional responses to stressful situations
- Self harm or mutilation
- Compulsive stealing or scrounging
- Drug or solvent abuse
- 'Neurotic' behaviour such as obsessive rocking, thumb-sucking etc.
- Extreme passiveness or aggressiveness
- Social isolation
- Desperate attention seeking behaviour
- Eating problems, including overeating and lack of appetite
- Depression or withdrawal
- Over anxious – watchful, constantly looking for signals of trouble
- Selflessness to the point of sacrifice
- Sudden development of speech disorders
- No pride in achievement

4.3 Sexual abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, either with the abuser(s) or with others as encouraged by the abuser(s).

Examples of sexual abuse may include:

- Physical contact such as oral sex, masturbation, or fondling
- Penetrative acts such as rape and buggery
- Involving a child or young person in prostitution

Sexual abuse doesn't always involve physical contact. It could involve:

- Non-penetrative acts such as showing a child or young person pornographic material or involving them in the production of pornographic material
- Watching sexual activities
- Encouraging a child or young person to behave in sexually inappropriate ways

All these activities constitute sexual abuse whether or not the child or young person is aware of, or consents to, what is happening.

Possible signs of sexual abuse:

- Bruises, scratches, burns or bite marks on the body
- Scratches, abrasions or persistent infections in the genital or anal regions
- Pregnancy
- Sexual awareness inappropriate to the child or young person's age - shown, for example: drawings, vocabulary, games, play and so on
- Frequent public masturbation
- Attempts to teach other children or young people about sexual activity
- Refusing to stay with certain people or go to certain places
- Aggressiveness, anger, anxiety, tearfulness
- Withdrawal from friends

Possible signs in older children and young adults:

- Promiscuity, prostitution, provocative sexual behaviour
- Self-injury, self-destructive behaviour, suicide attempts
- Eating disorders
- Tiredness, lethargy, listlessness
- Over-compliant behaviour
- Sleep disturbances
- Unexplained gifts of money
- Depression
- Changes in behaviour

4.4 Neglect

Neglect is the persistent failure to meet basic physical and/or psychological and emotional needs, likely to result in the serious impairment of health or development. Neglect may involve failing to:

- Provide adequate food, shelter and/or clothing
- Protect a child or young person from physical harm or danger
- Ensure a child or young person has adequate supervision (including the use of inadequate care-givers)
- Ensure access to appropriate medical care or treatment
- Respond to a child or young person's basic emotional needs

Possible signs of neglect:

- Constant hunger
- Loss of weight or consistently being underweight
- Poor personal hygiene
- Consistently unkempt, dirty appearance
- Inappropriate clothing
- Frequent lateness or non-attendance at school
- Untreated medical problems
- Low self-esteem
- Poor social relationships
- Compulsive stealing and scrounging
- Constant tiredness

4.5 Child sexual exploitation

There is growing awareness of the prevalence of Child Sexual Exploitation (CSE), given recent coverage in the national press. Practitioners should familiarise themselves with [Cambridgeshire's CSE Strategy](#).

4.6 The threshold document

Working Together to Safeguard Child (2018) included an important provision, namely that “the safeguarding partners should publish a threshold document which sets out the local criteria for action in a way that is transparent, accessible and easily understood”.

Cambridgeshire County Council's Threshold Document can be found here: [Effective support for children \(threshold\) document](#)

5.0 Reporting concerns

This part of the document outlines what you must do if you hear an allegation of abuse, or a child tells you they are being abused, or if you suspect that it's happening.

If you think someone is in immediate danger and needs urgent help, please call the police on 999. As soon as it is safe to do so, make the Designated Safeguarding Lead aware by submitting a concern through MyConcern and contacting them directly.

A disclosure may come to your attention in different ways:

- A child may tell you that they are being abused
- You may see or hear something that suggests abuse is occurring
- Another person tells you that they suspect that abuse is occurring

When there is an allegation or suspicion of abuse, everyone must be clear about their role and what they must do. It is important that staff and volunteers act professionally and not as 'friends' of children, parents or carers. It is therefore essential that the guidelines in this section are followed. In order to handle allegations, disclosures or suspicions of

abuse all staff and volunteers need to know:

- How to react to a child who tells you they are being abused
- How to report your concern
- How to record your concerns and where to obtain report forms

5.1 Listening and talking

It is important to develop and nurture your ability to listen and talk to a child who tells you that they are being abused. When they speak to you about abuse you must:

- Stay calm
- Explain at the earliest possible opportunity that you cannot keep secret what the child tells you
- Listen attentively - allow them to speak freely and never interrupt
- Tell and show them that they are being taken seriously
- Do not express disbelief
- Do not allow your shock or distaste to show
- Do not speculate or make assumptions. Even if you have an idea about the content of the sentence, never suggest words, or finish the sentence for them. In the eyes of the law this could be seen as corrupting evidence.
- Keep questions to a minimum. Ask what happened, who was involved and when it took place. Never ask 'closed' or 'leading' questions.
- Reassure the child that they've done the right thing by telling you
- Be non-judgemental – tell them it is not their fault but avoid condemning the alleged abuser
- Inform them what you'll do next and how information will be shared
- Make notes using their own words. This should include what was said and notes.

5.2 Injury

Assess situations rationally, if there is immediate danger due to injury:

- Call for assistance from colleagues
- If you have proficient first aid training, follow procedures
- If not, or in an emergency, call 999 (or 112 or 911) for emergency services
- For non-emergency medical advice, call 111

5.3 When abuse is suspected, alleged, disclosed

When abuse is suspected, alleged or disclosed you should make a written record of your concerns on MyConcern. All concerns must be reported as soon as is practically possible and within 24 hours. For guidance on using MyConcern, see the Induction Guide or speak to one of the Designated Safeguarding Leads.

5.4 Seeking advice in unclear situations

Sometimes you may not be certain whether or not a child or young person has been abused. If in doubt, report it using MyConcern.

5.5 Serious crime

If a child you're working with makes allegations that a serious crime has been committed (not related to safeguarding), ask the person to confirm their allegation and write down what they say. Tell them this must be reported to the police. Contact police on 101 or 999. This should also be reported through MyConcern.

5.6 Allegations of terrorist activity

If a child you're working with makes allegations of terrorist activity, ask the person to confirm their allegation and write down what they say. Tell them this must be reported to the police. Contact the Anti-Terrorist hotline 0800 789 321 or Police 101 or 999. This should also be reported through MyConcern.

5.7 Allegations of radicalisation

If you have concerns about the radicalisation of someone you work with, contact the Designated Safeguarding Lead who will pass on your concerns to the relevant Prevent Engagement Team.

5.8 Confidentiality

It is not your job to investigate suspicions of abuse. The only people you should speak to about an allegation or suspicion of abuse are:

- The person telling you about the abuse (using these guidelines).
- Designated Bedazzle staff and staff who may be part of monitoring a case as directed by the designated safeguarding lead. Currently at Bedazzle, it's Helen Feather
- The police

You must never question any witnesses or divulge any information to the alleged abuser.

6.0 Preventing unsuitable people from working with children

We consider that the work we undertake with children falls under the definition of 'regulated activity' through our provision of performing arts classes as well as bespoke tutor packages. This means that we have specific and important limitations on who we can employ; in particular that candidates are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates will be informed of the need to carry out enhanced DBS checks before posts can be confirmed. Where applications are rejected because of the information that has been disclosed, applicants have the right to know and to challenge incorrect information.

Bedazzle has a Safer Recruitment Policy and Checklist which is followed in all instances of recruitment, including volunteer recruitment. This policy is available in the Staff folder on the G-Drive.

6.1 Whistleblowing

All staff and volunteers must be aware of Bedazzle's Whistleblowing policy. This policy is

available in the employee handbook and on the Staff folder on the G-Drive.