



Community Development Service

Child Protection Policy

The Community Development service has a duty of care for all children and young people using our services. We take our responsibilities relating to child protection seriously.

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1. Introduction

The Community Development Service has a duty of care for all children and young people using our services. We take our responsibilities relating to child protection seriously.

- 1.2 This statement underpins our policy and will be displayed in our premises and in our publicity material as appropriate. We fully recognise the contribution we make to Child Protection and have implemented this policy to reflect our responsibilities and support.
- 1.3 Our policy applies to all permanent, temporary, casual and voluntary workers undertaking duties to provide our services. **The word 'child' throughout this document includes both children and young people under 18 years of age.**
- 1.4 All children should be and feel safe on our premises and at our activities. Some of the children we work with are vulnerable. It is important to take any concerns we have seriously and deal with them appropriately. Our policy will assist this process and it will also help to protect our staff and our volunteers. We are often in a privileged position of trust with the children we work with as in most cases they have chosen to use our services. We need to be aware of this and the boundaries of that trust.
- 1.5 This policy aims to clarify roles and responsibilities, procedures and guidelines, documentation required, definitions and staff awareness, training and support. Child abuse and protection procedures can be difficult and unpleasant. This document aims to provide a framework to assist workers but it is important to remember to agree more detailed ways of working together within teams and raise any issue or concern with line managers or designated people. It is crucial to be clear and consistent and remove areas of discretion as far as possible.
- 1.6 **We want our staff and our services to have a protective ethos.**

The child's welfare is paramount:

- ! all children whatever their age, culture, disability, gender, language, racial origin, religious belief, and/or sexual identity have the right to protection from abuse
- ! all suspicions and allegations of abuse will be taken seriously and responded to swiftly and appropriately
- ! children should be respected and listened to

2. Our Responsibilities

2.1 We operate with the following values and principles when working with children:

- ! The safety and well being of children and young people is paramount
- ! Children and young people should be listened to
- ! Children and young people and their cultures should be respected
- ! Children and young people should be encouraged to participate in decisions which affect them.

2.2 We have a legal responsibility to refer any child protection concerns to Social Services or the Police.

- ! We must refer.
- ! We must not investigate.
- ! We cannot maintain confidentiality.
- ! We have to act on suspicions, facts and disclosures.

2.3 We will nominate designated people to make referrals and be available for advice and support.

2.4 Workers are not expected to know everything concerning child protection but your duty is to:

- ! be alert and responsive to problems and the potential indicators of abuse or neglect
- ! be alert and responsive to the risks which individual abusers, or potential abusers, may pose to children
- ! share and analyse information to enable informed assessments and good practice
- ! keep clear, detailed and accurate records
- ! discuss issues and concerns with line managers or designated people only
- ! undertake appropriate behaviour and language
- ! ourselves and our colleagues for health, safety and security
- ! adhere to Council policies and procedures including the Code of Conduct

3. Designated People

- 3.1 The following are designated people for Community Development who are trained to deal with Child Protection issues and make referrals. They should be contacted in the first instance and if they are not available follow the procedure set out in the section 'out of hours'.

Suzi Wakeham – Assistant head Community Development	01227 862057
Alison Small – Children and Youth Manager	01227 862520

Designated people have the following responsibilities regarding the coordination of Child Protection issues:

- ! to receive concerns and disclosures made to workers
- ! to make referrals to Social Services and/or the Police as necessary
- ! to participate in Social Services Child Protection procedures as necessary
- ! to support workers
- ! to ensure records are completed and filed confidentially
- ! to feed back appropriate information to staff on a 'need to know' basis

- 3.3 Designated Officers must ensure they are adequately trained to deal with Child Protection issues and they will meet at least quarterly to review cases.

4. Confidentiality

- 4.1 It is very important to understand that we have to report any disclosures or suspicions of abuse or children at risk of abuse.
- 4.2 The child making a disclosure has trusted someone enough to confide in them. To avoid distrust, misunderstanding, we must be clear in our obligations to let the child know that if they tell us something we may have to act on it and tell someone else.
- 4.3 **It is important to encourage them to talk but it is essential that they know the limits of confidentiality.** If you promise confidentiality and then they disclose something you need to refer to Social Services, you will be breaking their trust and will put yourself in a difficult position.
- 4.4 We must always reserve the right to report child protection issues. We must refer any disclosures or suspicions of abuse.
- 4.5 Be honest with the child.
Reassure the child they have done the right thing.
Reassure the child you will do your best to get them support

5. What Do You Do If You Suspect Abuse?

5.1

- ! Complete a written record of your concerns using the 'children in need' form – before you talk to anyone else about it. (See Keeping Records).
- ! Hand the form to your manager or another designated person immediately.
- ! If it is urgent and you cannot contact your manager or a designated person you must call social services or the police direct. (see Disclosure out of Hours and the Contact List)

5.2 Your manager or the designated person will support you, advise you on how to continue working with the child concerned and decide on action to be taken.

5.3 Child Protection is a very serious issue and all suspicions should be reported, regardless of how minor they may seem.

- If in doubt - ask.
- If there is no one to ask - act.

6. What Do You Do if a Child Makes an Allegation of Abuse?

You must report the allegation made to a designated person or your line manager immediately. They will take the responsibility for making any referrals required.

- ! You must explain that you cannot keep the information confidential (see above).
- ! You should explain to the child that you are going to tell someone and explain who and why.
- ! The child is not always in a position to judge risks themselves and they have a right to protection.

6.1 The following are good practice guidelines when talking to the child:

- ! Avoid 'closed' or 'leading' questions - don't ask any more than you have to as this could prejudice an enquiry made by Social Services and/or the Police
- ! Be attentive, calm and reassuring
- ! Do not be judgmental
- ! Take the child seriously
- ! Avoid condemning the alleged abuser
- ! Avoid promises you cannot keep

- ! Don't make assumptions about the child's feelings
- ! Tell the child he/she is brave and right to tell - and it's not his/her fault
- ! Never promise to keep the abuse a secret
- ! Tell the child what will happen next
- ! Don't ask why
- ! Have time
- ! Tell the child they are not to blame

6.3 IF A CHILD IS AT IMMEDIATE RISK CONTACT THE POLICE OR SOCIAL SERVICES.

DO NOT CONTACT THE ALLEGED ABUSER

DO NOT INVESTIGATE - YOUR ROLE IS TO LISTEN AND REFLECT

Take advice from a Designated Officer, Social Services and/or the Police

Complete the appropriate record forms - see Keeping Records

- ! Once a referral has been made to the Social Services Department and/or the Police an enquiry may be undertaken. This may stop at any point if it is felt that there is insufficient evidence, otherwise it will follow established procedures if there is sufficient cause for concern.

7. Allegations Of Abuse 'Out Of Hours'

7.1 'Out of hours' refers to times when the office is closed and normal communication links to your line manager or a designated person may not be available.

If at all possible refer disclosures to your manager and/or the designated person immediately. This may not always be possible, particularly for workers doing evening or weekend sessions. If you cannot get hold of your manager or a designated person, you must contact Social Services or the Police direct. (See Contact Sheet).

Discuss individual procedures with your manager regarding your working practice to ensure you are confident in the approved, appropriate action for you to take regarding Child Protection issues.

7.2 Making A Referral

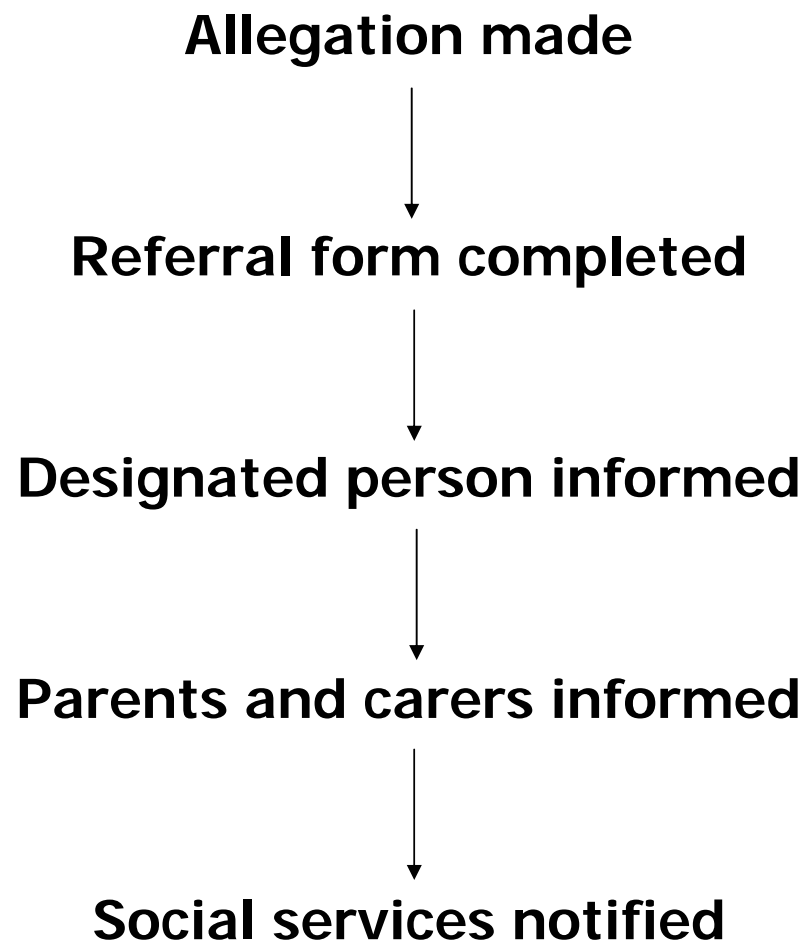
This is the task of the designated person or your line manager but if you are unable to contact them you will have to contact Social Services yourselves. Try to have as much information to hand as possible - but don't delay.

- ! your name, designation and contact number

- ! the child's name (or any names they have been previously known by), address, date of birth, age, sex, ethnic origin, language spoken, religion, school, names of parents/carers/GP/siblings - if available

- ! details of the disclosure or concerns

8. Child protection referral process



9. What Happens Next?

- 9.1 At the point of contacting the police and/or social services then the Inter-Agency Child Protection Procedures come into effect and manage the enquiry.
- 9.2 Our workers assist the Social services and/or Police enquiries as required and seek any help, advice or support they need from their line manager or designated person.
- ! Consideration will always be given to taking action designed to protect the child from abuse, and the effects on the child and their family caused by unnecessary interventions.
 - ! The Social Services Department may have need to make an application to the Court for an order authorising the removal of the child from the environment where the alleged abuser lives or has contact with them. The Police have similar powers under Police Protection. This is, however, unusual and every attempt will be made to work in partnership with the parents/carers to prevent further abuse occurring (or the likelihood).

10. Keeping Records

- 10.1 It is important to document your issues and concerns immediately.
- 10.2 Attached is a child in need form to report anything that makes you think twice about a child's safety and welfare. It should be used to record a hunch, gut feeling, incident or disclosure. It is available in Community Development or at one of the neighborhood centers.
- 10.3 Discuss anything you record with your Line Manager.
- 10.4 Sign the completed record and give to your line-manager - they (with other designated officers) will assess information received across all our services.
- 10.5 The form helps focus on details, dates and information that may be required at a later date. Records must be clear, concise, and accurate, noting who made what decisions and took what action.
- 10.6 Complete all sections of the forms immediately and clearly. Ensure what you have written would be understood by anyone reading it at any time.
- 10.7 Well kept records provide an essential underpinning to good child protection practice and are an essential source of evidence.
- 10.8 Information should include:
- ! the nature of the allegation
 - ! a factual description of any visible bruising or other injuries

- ! the child's account, if they can give it, of what has happened and how any injury has occurred
- ! any times, dates or other relevant information
- ! a clear distinction between fact, opinion or hearsay
- ! who has been involved and what action has been taken
- ! date and time of the record

Initial Assessment and Referral Form for Children in Need to Social Services

This form is to be used by all agencies and individuals when referring a child to Social Services. The information given will be accepted as part of Social Services initial assessment of the child under the DOH Assessment framework Procedures.

The more information received by Social Services at the first point of contact, the more likely it is that appropriate services will be delivered at the earliest opportunity to help children and families in the best interests of the child.

1. Please ensure that Sections 1,2 and 3 are fully completed (if known). This is essential in enabling us to respond appropriately to the children's needs.

Child's First Name/s		Child's Surname			
Any alternative name					
Date of Birth	Gender	Religion	First Language		
M/F					
Name of Parents/Carers					
Home Address			Any other relevant addresses		
Post Code			Post Code		
Telephone Number/s					
Ethnic Origin [Please x one box only]					
White	Mixed	Asian or British Asian	Black or Black British	Other Ethnic Groups	
White British	White & Black Caribbean	Indian	Caribbean	Chinese	
White Irish	White & Black African	Pakistani	African	Other Ethnic	
White Other	White & Asian	Bangladeshi	Black Other		
	Mixed Other	Asian Other			

Other Significant Family Members / Adults

Name	Relationship	Contact Details

2. Contact Information:

[Please add others you think may be relevant]

	Name	Address	Telephone
GP			
Health Visitor			
School			
School Nurse			

3. Reason for Referral and any comments on what the family needs from Social services:

[Please specify current concerns and state how long you have known the child and in what capacity, i.e. as parent, teacher, doctor, etc. For professional workers: if you wish to include letters/reports, chronologies, body maps or centile charts please attach a further page.]

4. Relevant information (if known) regarding the Child:

[Including development, health, behaviour, social skills, schooling/special educational needs, other special needs, strengths and weaknesses, any other information.]

5. Relevant information (if known) regarding the Parents and the wider Family:

[Including relationships, friendships, behaviour, emotional support, stability, safety, health and other issues.]

6. Relevant information (if known) regarding Environmental factors:

[Including housing, who is working in the household, financial situation, community and social involvement.]

7. Any other relevant information: *[Including previous referrals.]*

8. Other Agencies involved:
[Please specify if known.]

9. Parent's or Child's views:
[See Guidance Notes before completion.]

10. Is there a perceived risk of violence or other matters that could place those making contact with this family in danger (such as an unsafe neighbourhood, persons of a violent nature, an untethered dog, etc.)? YES / NO

11. Consent: *[See Guidance Notes before completion.]*

I agree to the information in this referral being passed to Social Services.

Name of Parent/Legal Guardian [Please Print].....

Signature of Parent/Legal Guardian.....

Date.....

Consent not sought because :-

- to do so may place the child or an associated person at risk of significant harm.
- to do so may compromise evidence or an investigation.
- to do so may hinder the prevention or detection of a crime.
- this is an urgent referral and it is not possible/appropriate to seek consent.

12. Referrer:

Name and Status.....

Contact Details.

Signature.....Date.....

- 11.1 If you work with children you must accept that you are exposed to a certain level of risk.
- 11.2 It is impossible to cover every eventuality relating to the right or appropriate behaviour for every situation. Use your common sense, keep alert and discuss best practice with your manager and in teams - keep it on the agenda and don't put yourself at risk.
- 11.3 the following do's and don'ts will help clarification of what to do or not to do and generally raise your awareness and help protect yourself. If you have any particular concerns you must follow them up with your line manager or a designated person.

DO

- ! treat everyone with respect
- ! provide an example you wish others to follow
- ! plan activities which involve more than one other person being present, or at least which are within sight and hearing of others
- ! remember that someone may misinterpret your actions, no matter how well-intentioned
- ! recognise that caution is required even in sensitive moments of counselling such as when dealing with bereavement, bullying or abuse
- ! keep in areas with plenty of witnesses
- ! keep colleagues informed - where you are, with whom, for what purpose
- ! avoid physical contact where possible
- ! avoid being in a room alone with a child and if it is unavoidable ensure the child is between you and the door. Use rooms with windows.
- ! keep records of concerns - complete the 'logging a concern' form, for even the slightest concern
- ! ask for further guidance on anything you are unclear about
- ! feel confident to challenge any behaviour of colleagues that could compromise them
- ! report any inappropriate behaviour of colleagues to your manager, or of your manager to the Head of Community Development, Union or Personnel
- ! appreciate your colleagues looking out for you
- ! help create a protective ethos and culture within our working environment and the services we provide

- ! discuss any support or training needs you have with your manager
- ! remember you cannot promise confidentiality
- ! ensure both male and female workers accompany trips that include both male and female children
- ! act as if you are always being filmed
- ! ensure ratios are good enough to enable appropriate supervision/staff protection

DO NOT

- ! put yourself into a situation that could be misinterpreted or a place that cannot be seen
- ! permit abusive activities
- ! play overly physical contact games (tag is ok - mud wrestling isn't)
- ! have any inappropriate physical or verbal contact with others
- ! jump to conclusions about others without checking out the facts
- ! allow yourself to be drawn in to any attention seeking behaviour such as tantrums or crushes
- ! exaggerate or trivialise child abuse issues
- ! show favouritism to any individual or have a 'best friend'
- ! make suggestive remarks or gestures
- ! rely on your good name to protect you
- ! believe 'it could never happen to me'
- ! lock doors
- ! encourage or participate in any avoidable out of work situations with children you work with
- ! share a room with a child on trips
- ! establish a relationship with children out of the work situation

12. Physical contact:

You cannot NOT touch children when you work with them - but use your common sense. Avoid physical contact wherever possible and where you cannot, always be able to justify '**why did you do that, in that way?**'. You need to make reasonable judgements for safety and care situations.

Activities that need careful attention, justification and common sense include:

- ! **helping children with clothes:** encourage them to put them on themselves, help only when essential and with witnesses
- ! **comforting distressed children:** justify the contact, let others know, have witnesses, keep it short term. Keep your hands visible
- ! **appropriate affection:** wherever possible use verbal encouragement, state your feelings, praise, smiling etc. If a child does not get affection at home, do not make the mistake of over compensating when they are with you. Children need to know the difference between what is appropriate with a parent and what is appropriate with a known other person or with a stranger
- ! **protecting a child from hurting themselves or others / physical intervention:** intervene carefully if essential with others present wherever possible
- ! **first aid:** get the child to remove any necessary clothing or have a witness present and wherever practical take the first aid to the child
- ! **if a child touches you, or attaches themselves to you as a special friend, or has a crush on you** - you must inform your manager and encourage them to be less tactile and understand that their behaviour is inappropriate - set clear boundaries with the child. You need to agree appropriate strategies with your manager to deal with this and keep people aware of progress
- ! **escorting children:** try to avoid but if essential then ensure two people escort and that your manager knows when you are collecting children and your expected time of arrival at your destination. If you use a taxi, ensure you sit in the front and put the child in the back
- ! **lateness:** if a child is continuously late being picked up make sure it is never the same person being left to supervise the child. Raise the issue with the parents
- ! **working with children with disabilities:** many of the same needs arise as detailed above, clothes, physical help, accidents etc. Use your common sense, make sure there are witnesses and remember the needs of the child must come first

12.1 Children in difficult situations may show their distress through inappropriate sexual behaviour. This needs to be reported.

13. Allegations Against Workers

- 13.1 Allegations against workers are dealt with by the City Council's disciplinary procedures process and may run parallel with Child Protection Procedures if applicable. The procedure is the same for all workers. We appreciate that staff need support through such incidences and will endeavour to keep the member of staff informed and offer sources of support for them.
- 13.2 As part of the process the member of staff is likely to be suspended to enable a full investigation to be undertaken - this is not confirmation of guilt but to protect the worker. For the individual this can feel like punishment and belief in the accuser - BUT THIS IS NOT THE CASE - it is just the procedure. Confidentiality in the work place is important to enable workers to return to work in the best possible environment if the allegations do not lead to dismissal.
- 13.3 If you are a member of a Union you may wish to contact them for advice, support or representation as required.
- 13.4 If an allegation is made to you about a colleague you must listen, make notes and consult a designated person immediately. Keep an open mind even if the allegation made is about a colleague you know professionally or socially.
- 13.5 There are several possibilities when an allegation is made against a worker:
 - ! The allegation is unfounded and malicious
 - ! The allegation is unfounded but not malicious: there has been a misunderstanding
 - ! The allegation is unfounded in relation to the person named, but the child has been abused by someone else
 - ! The allegation has some foundation but the worker was naive or lacking in social skills rather than intentionally abusive - counselling, advice or training may be required and the situation will need monitoring
 - ! The allegation is founded and can be proved 'beyond reasonable doubt' - e.g. for prosecution
 - ! The allegation is founded, cannot be proved beyond reasonable doubt but can be proved 'on the balance of possibilities' (eg for disciplinary action / dismissal). The City Council disciplinary procedures are different from any police investigation and there may be employment implications even if there is no police prosecution
 - ! The allegation is founded in the judgement of investigating professionals but there is insufficient or no evidence to corroborate the child/adult's statement.

14. Support And Supervision - Who Can I Talk To?

14.1 Working in the field of potential child protection issues means making difficult professional judgements. It is demanding and can be distressing and stressful. Get access to advice and support from managers, peers or designated people as appropriate. You cannot make everything better for a child in distress.

14.2 As stated in the procedures you must report concerns and disclosures to a designated person and/or your line manager to act as necessary.

It is not necessary for anyone else to know, but it is important that you get any support you need.

! you can continue discussions with the designated person and/or your line manager

! your line manager can arrange additional support for you if required.

14.3 Effective management supervision of those involved in day to day work with children is important to promoting good standards of practice and individual support to individual members of staff.

Supervision should help to ensure practice is soundly based and consistent with procedures. It should reinforce that staff understand their roles, responsibilities and the scope of their professional discretion and authority.

Knowing your role and resources will help you get a realistic view on the limits of your responsibilities.

Union members may wish to consult with their trade union for advice and support.

If you talk to family and friends you **must not** give information that would identify individuals.

15. Training

15.1 The implementation of this policy runs alongside a training package for all Community Development staff – led by the Children and Youth Manager.

Managers will take the responsibility to brief new workers as necessary and arrange any additional training requirements for the post holder as part of the induction programme for individuals.

15.2 Managers need to identify training and development needs of staff to ensure each has the skill and understanding to fulfil their responsibilities and that appropriate refresher training is undertaken.

16. Recruitment

- 16.1 There is a comprehensive set of recruitment and selection procedures, which managers must adhere to.

Managers also need to ensure that other considerations are given to deter those who are unsuitable to work with children.

These would include:

- ! completed application forms
- ! criminal record bureau checks for all staff
- ! professional register check, if appropriate
- ! ask candidates to confirm their identity through official documents
- ! verifying the authenticity of qualifications and reference directly
- ! seeking a full employment history reserving the right to approach any previous employer; checking with former employers the reason why employment ended; identifying any gaps or inconsistencies and seeking an explanation
- ! making appointments only after references are obtained and checked. Referees should be reminded that references should contain no material mis-statement or omission to the relevant to the suitability of the applicant
- ! making all appointments to work with children (preferably including internal transfers) subject to a six month probationary period

- 16.2 Managers will plan recruitment literature and interview questions to highlight our policy and protective ethos.

Interviews should be prepared to explore with candidates their attitudes towards children and childcare, their perceptions about boundaries, and questions about sexual boundaries and attitudes. All candidates will be required to complete a Criminal record bureau form at interview and no appointments will be made until the forms have been processed.

Candidates should be told that we have a commitment to child protection.

- 16.3 Even the most careful selection process cannot identify all those who may pose a risk to children. Post employment management and supervision should always be alert to indicators of untoward behaviour.

17. Protective Ethos

- 17.1 Help each other to protect ourselves from allegations. If you see a colleague doing something that causes you concern - tell their manager or them direct. This is not seen as 'telling tales', but as helping them not to leave themselves open to allegation. We can all be naive at times. Raise awareness amongst each other.
- 17.2 If in doubt about how your actions towards a child may appear - don't do it.
- 17.3 Build on good practice and be knowledgeable about child protection issues and procedures.
- 17.4 Use your common sense.
- 17.5 Discuss child protection at team meetings and work together on issues to build a team approach.
- 17.6 Share experiences and good practice with others to continue to raise awareness, obviously maintaining any necessary confidentiality.
- 17.7 Display the policy statement in venues and in publicity material and documents as appropriate.
- 17.8 Create an ethos of maximum respect by actively building esteem, actively building the child's ability to be assertive, and actively listen to children's concerns.
- 17.9 Teach children about personal safety and help them assess risks. Model and teach appropriate physical space.
- 17.10 Be alert to any changes in the child's physical appearance, behaviour and emotional state.

18. Risk Assessment

All buildings, events and services risk assessments will consider child protection as a standard item.

19. Review

- 19.1 This policy will be reviewed and updated annually by the Community Development Management Team. Please pass on any comments you have to your line manager to feed into the review process.

The Child Protection Procedures

The Children Act 1989 introduced the concept of significant harm as the threshold which justifies compulsory intervention in family life in the best interests of children. The local authority is under a duty to make enquiries, or cause enquiries to be made, where it has reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm.

The formal Child Protection procedures are operated by Kent County Council Social Services Department to provide services for children in need of protection. Referrals are made to them when there are concerns about a child's welfare and an assessment of the needs of and risks to the child is undertaken.

When contact is made to the social services department concerning a child's welfare it is the responsibility of the social services department to clarify with the referrer: the nature of the concerns, how and why they have arisen, what appears to be the needs of the child and family, and whether the child may need urgent action to make them safe from harm.

If the referred case constitutes, or may constitute, a criminal offence against the child the social services department should always inform the police at the earliest opportunity. This will enable both agencies to consider jointly how to proceed in the best interests of the child.

Those who contact the social services department should confirm the referrals in writing. At the end of any discussions or dialogue about a child, the referrer and the social services department should be clear about who will take what action, or that no further action will be taken. This should be recorded by both parties.

Following a child protection enquiry there may be cases considered by a Child Protection Conference to consider whether the child has suffered, or is likely to suffer, significant harm. Criteria for conferences are documented.

Significant harm is a matter of judgement in each case. The 'significance' may be in the severity of an injury or from long term impact.

'Harm' is defined in the Children's Act 1989 as ill-treatment or impairment of health or development.

Ill-treatment includes sexual abuse and forms of ill-treatment which are not physical. Health includes both physical and mental health.

Development includes: physical, intellectual, emotional, social or behavioural development.

A child who is at risk of significant harm can be placed on the Child Protection Register under the following categories:

- NEGLECT
- PHYSICAL ABUSE
- SEXUAL ABUSE
- EMOTIONAL ABUSE

Definitions Of Abuse

The following categories and descriptions help understand the different types of abuse that can cause significant harm to a child or young person.

DEFINITIONS OF ABUSE FOR REGISTRATION

Neglect includes not only poor physical care and inattention to the child's basic needs, eg for regular feeding, cleanliness and clothing, but also a failure to provide the necessary stimulation to sustain behavioural and emotional development.

Physical Injury includes actual or likely physical injury to a child, or failure to prevent physical injury or suffering to a child including deliberate poisoning, suffocating and Munchausen's syndrome by proxy. Seemingly trivial injuries should not be ignored because abuse can and does sometimes escalate if it goes unchecked.

Sexual Abuse includes actual or likely exploitation of a child or adolescent. The child may be dependent and/or developmentally immature. Both male and female children may be sexually abused by adults or older children. Sexual abuse can occur without any physical contact eg being forced to watch sexual activity. Children may also be made to take part in pornographic activity.

Emotional Abuse includes sustained and repeated responses to the child or the child's behaviour which are so negative, inconsistent, rejecting or inappropriate that the child shows serious difficulties in emotional, social or behavioural development. What makes the parental behaviour abusive is that it typifies the relationship with the child. It is thus not usually indicated by a specific incident but is observed in the interaction with the child, and the ongoing relationship between child and parents(s). One child may be scapegoated or treated completely differently to his or her siblings.

These categories do not tie in exactly with legal definitions of 'significant harm' which may be used in Court proceedings. eg 'sexual abuse' is not defined in the Children's Act. Where there is a difference in interpretation, the Courts' definition will be used.

Signs Of Abuse

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 not attended to
- ! Admission of punishment which appears excessive
- ! Shrinking from physical contact
- ! Fear of returning home or of parents being contacted
- ! Fear of undressing
- ! Fear of medical help
- ! Aggression / bullying
- ! Over compliant behaviour or a 'watchful attitude'
- ! Running away
- ! Significant changes in behaviour without explanation
- ! Deterioration in work
- ! Unexplained pattern of absences, which may serve to hide bruises or other physical injuries.

Possible Signs of Emotional Abuse

- ! Continual self-deprecation
- ! Fear of new situations
- ! Inappropriate emotional responses to painful situations
- ! Self-harm or mutilation
- ! Compulsive stealing / scrounging
- ! Drug / solvent abuse
- ! 'Neurotic' behaviour - obsessive rocking, thumb-sucking, and so on
- ! Air of detachment – 'don't care' attitude
- ! Social isolation - does not join in and has few friends
- ! Desperate attention - seeking behaviour
- ! Eating problems, including overeating and lack of appetite
- ! Depression, withdrawal

Possible Signs of Neglect

- ! Constant hunger
- ! Poor personal hygiene
- ! Inappropriate clothing
- ! Frequent lateness or non-attendance at school
- ! Untreated medical problems
- ! Low self-esteem
- ! Poor social relationship
- ! Compulsive stealing or scrounging
- ! Constant tiredness

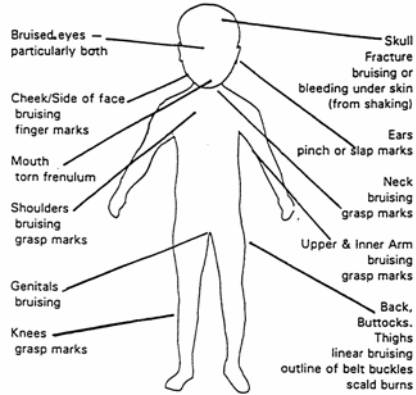
Possible Signs of Sexual Abuse

- ! Bruises, scratches, burns or bite marks on the body
- ! Scratches, abrasions or persistent infections in the anal or genital regions
- ! Pregnancy - particularly in the case of young adolescents who are evasive concerning the identity of the father
- ! Sexual awareness inappropriate to the child's age - shown, for example, in drawing, vocabulary, games and so on
- ! Frequent public masturbation
- ! Attempts to teach other children about sexual activity
- ! Refusing to stay with certain people or go to certain places
- ! Aggressiveness, anger, anxiety, tearfulness
- ! Withdrawal from friends

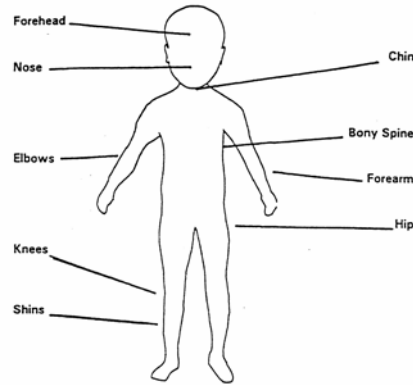
Possible Signs in Older Children

- ! 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

Common sites for non-accidental injuries



Common sites for accidental injuries



Non-accidental Injuries

Bruises likely to be:

- ! frequent
- ! patterned eg finger and thumb marks
- ! old and new in the same place (note colour)
- ! in unusual position (see chart)

consider:

- ! developmental level of child and their activities
- ! may be more difficult to see on darker skins

Burns and scalds likely to be:

- ! clear outline
- ! splash marks around the burn area
- ! unusual position eg back of hand
- ! indicative shapes eg cigarette burns, bar of electric fire

Injuries suspicious if:

- ! bit marks
- ! fingernail marks
- ! large and deep scratches
- ! incisions eg from blade

Fractures likely to be:

- ! multiple - healed at different time
- consider:
- ! age of child always suspicious in babies under two years old
 - ! delay in seeking treatment

Sexual abuse may result in:

- ! unexplained soreness, bleeding or injury to genital or anal area
- ! sexually transmitted diseases, eg warts, gonorrhoea

Accidental Injuries

Bruises likely to be:

- ! few but scattered
 - ! no pattern
 - ! same colour and age
- consider:
- ! age and activity of child eg learning to walk
 - ! may be confused with birthmarks or other skin conditions (eg Mongolian blue spot)

Burns and scalds likely to be:

- ! treated
- ! easily explained
- ! may be confused with other conditions, eg impetigo, nappy rash

Injuries likely to be:

- ! Minor and superficial
- ! treated
- ! easily explained

Fractures likely to be:

- ! of arms and legs
- ! seldom of ribs except for Road Traffic Accidents
- ! rare in very young children
- ! may rarely be due to brittle bone syndrome

Genital area:

- ! Injury may be accidental (seek expert opinion)
- ! soreness may be nappy rash or irritation eg from bubble bath
- ! anal soreness may be due to constipation or threadworm infestation

Parental attitude is important in assessing all of the above - when a child is suffering severe and painful injury most would seek medical help

The Child Protection Process

