**Safeguarding & Young Person Protection Policy**

(16-18)

Updated September 2021

(Next review due August 2022)

1.Key legislation & statutory policy/guidance reading list

• Children Act 1989 & 2004

• Section 175 Education Act 2002

• Keeping Children Safe in Education (September 2019)

• Working Together to Safeguard Children (September 2018)

• Sexual Violence & Sexual Harassment Between Children in Schools & Colleges (Sept. 2021)

• Children Missing Education: Statutory Guidance for Local Authorities (September 2016)

• UKCCIS Guidance: Sexting in Schools and Colleges, Responding to Incidents and Safeguarding Young People (2017)

• Information Sharing: Advice for Practitioners Providing Safeguarding Services (Department for Education, 2015)

• Female Genital Mutilation Act 2019 and Serious Crime Act 2015 • Multi-agency statutory guidance on female genital mutilation (April 2016)

2. Purpose and aims of this policy

2.1. The purpose of this document is to assist all staff, volunteers, and partners to safeguard and protect children and young people under the age of 18 who are at risk of abuse or neglect and promote their well-being. This policy also reflects the requirements of the government publications Working Together to Safeguard Children 2018 and Keeping Children Safe in Education 2019.

2.2. It also sets out practices and responsibilities of everyone which promotes the welfare of young people as defined in Working Together to Safeguard Children 2018 as:

• Protecting children from maltreatment

• Preventing impairment of children’s health and development

• Ensuring that children grow up in circumstances consistent with the provision of safe and effective care and

• Taking action to enable all children to have the best outcomes

2.3. We will aim to safeguard young people by:

• Adopting child protection guidelines through procedures and a code of conduct for staff, volunteers, governors and partners.

• Sharing information about child protection and good practice with young people, parents and carers, staff and volunteers.

• Sharing information about concerns with agencies who need to know, and involving parents and young people as appropriate.

• Carefully following the procedures for recruitment and selection of staff and volunteers. Providing effective management for staff and volunteers through support, supervision and training.

2.4. We are committed to reviewing our policy and good practice at least annually.

3. Commitment to safeguarding young people

3.1. SupaJam Education in Music & Media (SupaJam) is committed to providing all of its staff and students with a safe and enjoyable experience and the welfare of everyone is paramount. The Designated Safeguarding Manager will lead the example in creating a culture of vigilance in safeguarding.

3.2. The role of the Designated Safeguard Manager is to be responsible for leading and championing good safeguarding practices and being the first point of contact for staff who have concerns about young people. The DSL will usually be responsible for making referrals for any safeguarding concern – however, this does not mean that staff should not be able to take any action themselves. The DSL will be contactable at all times of the day either in person or via telephone to be able to provide support or

guidance to all members of staff with any safeguarding concerns.

3.3. The DSL will promote a culture of openness and being approachable so that everyone is able to speak openly about safeguarding concerns with confidence that they are being listened to. The Safeguarding and Pastoral team will actively conduct welfare checks with the students of SupaJam as required to encourage trust and confidence. Regular safeguarding update meetings will occur to keep key members of staff up to date with any developments. Only need-to-know information will be shared with all staff members at regular weekly team meetings.

3.4. All students will be involved in learning and understanding safeguarding through appropriate sessions, such as individual pastoral sessions or small group discussions, as well as when providing reactive support and guidance following any safeguarding incident.

3.5. SupaJam has a pivotal role to play in multi-agency safeguarding arrangements. SupaJam will refer as appropriate to other agencies where there is a concern for the wellbeing of students. Other agencies include the police, social services or the local authority.

3.6 In order to maintain a robust review of SupaJam’s Safeguarding policies and practices, two unannounced audits will take place during the academic year. This may be carried out by the in-house designated Senior Leader for Safeguarding or an external professional.

4. Definitions

4.1. Throughout this policy will be references to safeguarding and child protection. This section explains what these key definitions mean and how they are appropriate to SupaJam.

a) Safeguarding - Safeguarding is a term which is broader than ‘child protection’ and relates to the action taken to promote the welfare of children and young people and protect them from harm. Safeguarding is everyone’s responsibility.

b) Child Protection - The Children Act 1989 defines a child as being up to the age of 18 years. Child Protection refers to the actions taken by relevant services such as Social Service or The Police to remove or mitigate the risk of harm to a child. Child protection is not an umbrella concept; however, there are various forms of abuse, neglect or circumstances which may constitute the need for child protection measures.

5. Significant harm and abuse – signs & symptoms

5.1. **Significant harm** - There is no absolute criteria on which to rely when judging what

constitutes significant harm. Consideration of the severity of ill-treatment may include the degree and the extent of physical harm, the duration and frequency of abuse and neglect, the extent of premeditation, and the presence or degree of threat, coercion, sadism, and bizarre or unusual elements.

5.2. Each of these elements has been associated with more severe effects on the child, and/or relatively greater difficulty in helping the child overcome the adverse impact of the maltreatment. Sometimes, a single traumatic event may constitute significant harm (e.g. a violent assault, suffocation or poisoning). More often, significant harm is a compilation of significant events, both acute and longstanding, which interrupt, change or damage the child’s physical and psychological development.

5.3. Some children live in family and social circumstances where their health and development are neglected. For them, it is the corrosiveness of long-term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm. In each case, it is necessary to consider any maltreatment alongside the family’s strengths and supports.

5.4. **Types of abuse and signs/symptoms** - There are four categories of abuse: physical abuse, emotional abuse, sexual abuse and neglect. Full details of the signs and symptoms can be found in Appendix A of this document.

5.5.It is acknowledged that a child can be abused, harmed or neglected in a family, institution or community setting by someone known to them, or less commonly, by a stranger, this includes someone in a position of trust such as a teacher or other professional.

6. Responding to a young person making an allegation/disclosure of abuse

6.1. It is important that young people trust all staff to be able to communicate with them and be able to make allegations/disclosures with the confidence that they will be listened to. When responding to any allegation or disclosure, all staff will;

• Stay calm, listen carefully to what is being said

• Find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others - do not promise to keep secrets

• Allow the young person to continue at his/her own pace

• Ask questions for clarification only, and at all times avoid asking leading questions.

• Reassure the young person that they have done the right thing in telling you • Tell them what you will do next and with whom the information will be shared

• Record in writing what was said using the young person’s own words as soon as possible, note the date, time, any names mentioned, to whom the information was given and ensure that the record is signed and dated.

• Pass this information on immediately to your Designated Safeguarding Manager or Deputy Designated Person in his/her absence.

6.2. Some young people with special educational needs (SEN) may need a different approach from other young people e.g. in the way their physical/mental health condition might mask possible abuse. Particular attention may have to be given to SEN young people with speech impediments as verbal communication may be difficult. Members of staff talking with these young people should seek guidance from the college Designated Safeguarding Manager or Designated Safeguard Lead(s) who will advise where necessary.

6.3. After a young person has disclosed abuse the designated safeguard lead should carefully consider whether or not it is safe for a young person to return home to a potentially abusive situation. On these rare occasions it may be necessary to take immediate action to contact Children’s Social Care or the Police to discuss putting safety measures into effect.

6.4. Any safeguarding concern will be managed by SupaJam’s Safeguarding Manager. If they have concerns which require escalation to the local authority, they will contact the home authority in which the young person resides. For any advice, the Safeguarding Lead may call Kent County Council’s Social Services on 03000 411111 or email social.services@kent.gov.uk .

7.What to do if you suspect that abuse may have occurred

7.1. You must report the concerns immediately to the DSL. A full list of trained DSLs can be found in this appendix.

7.2. If within two hours of the initial concern arising it had not been possible to contact the DSLs, the matter must be reported to the police.

7.3. The SupaJam Designated Safeguarding Manager has been nominated by SupaJam to refer allegations or suspicions of neglect or abuse to the statutory authorities.

The role of the Designated Safeguard Lead is to:

• Obtain information from staff, volunteers, young people or parents and carers who have child protection concerns and to record this information.

• Assess the information quickly and carefully and ask for further information as appropriate.

7.4. The Designated Safeguarding Manager should make a referral to the Children’s Social Care or the police without delay if it is agreed during the consultation or if there is an immediate risk to the young person.

7.5. The referral should be made to the Children’s Social Care Agency in which the young person lives, e.g. if a young person lives in another borough/county, the referral needs to be made to the Children’s Social Care Department in that borough/county.

7.6. A telephone referral should be made and confirmed in writing using an inter agency referral form without any undue delay but in any case, within 24 hours. Children’s Social Care should acknowledge the referral within one working day and should be contacted if no acknowledgement has been received within 3 working days. Following referral, Children’s Social Care should, within one working day, consider the next course of action, record their decision in writing and notify the designated person.

7.7. Suspicions will not be discussed with anyone other than those nominated above

7.8. It is the right of any individual to make direct referrals to the child protection agencies. If for any reason you believe that the nominated designated persons have not responded appropriately to your concerns, it is then your responsibility to consider contacting the child protection agencies directly.

7.9. Staff should feel confident that their concerns will be acted upon appropriately by the Designated Safeguarding Manager. However, if a member of staff does not feel that their safeguarding concerns are being listened to or actioned, then they should strongly consider using an appropriate Whistleblowing service, such as the NSPCC. Details of how to whistleblow will be posted in an appropriate place within the college, and staff

can refer to the section within this policy to further support this process. 8. Gangs

8.1. Any member of staff who suspects that a young person has affiliation or may have affiliation with gangs, or may be a victim of gang related activity should report their concerns to the Designated Safeguarding Manager as soon as possible.

8.2. Any student known to be in possession of any article(s) associated with gang related activity (such as drugs or weapons) will fall under the Code of Behaviour for Students policy, and the incident will be dealt with promptly and appropriately.

8.3. Any confirmed/corroborated accounts of gang activity will require a referral to Children’s Services.

9. Serious Violence

9.1. All staff should be aware of indicators, which may signal that children are at risk from, or are involved in serious violent crime. These may include increased absences from college, a change in friendships or relationships with older individuals or groups, a significant decline in educational performance, signs of self-harm or a decrease in physical or emotional wellbeing, or signs of assault or unexplained injuries.

9.2. Any concerns for serious violence will need to be reported to the DSL and the concern will be risk assessed.

9.3. Any confirmed violent criminal activity will require a referral to the police.

10.Child sexual exploitation

10.1. Staff must be aware of the signs and symptoms of child sexual exploitation.

10.2. The following is taken from the guidance, “Child sexual exploitation: Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation” published February 2017;

*“Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.”*

*10.3.* Please see Appendix B for signs and symptoms of CSE.

10.4. Child sexual exploitation is not likely to be confined to a single area and therefore it is important for staff to be aware of the demographics of SupaJam Education in Music & Media students as students will live within different local authorities. It is not unusual that cross-border working will be required as SupaJam Education in Music & Media works with students from London Boroughs as well as neighbouring Local Authorities of Kent County Council.

10.5. Young people with SEN are likely to be more vulnerable as they may have difficulties with communication, processing or understanding what is happening to them.

10.6. Any person who suspects that a young person may be a victim of child sexual exploitation should report their concerns to the DSL immediately and record their concerns in writing.

10.7. All young people who attend SupaJam will be provided with information or teaching of child sexual exploitation and how to try and keep themselves safe. This will be through either individual/small group pastoral discussions or teaching through the programme.

11. Female genital mutilation and honour-based violence/forced marriage

11.1. The published definition of FGM, from the Multi-Agency Statutory Guidance on

Female Genital Mutilation (April 2016) is;

*“FGM is a procedure where the female genital organs are injured or changed and there is no medical reason for this. It is frequently a very traumatic and violent act for the victim and can cause harm in many ways. The practice can cause severe pain and there may be immediate and/or long-term health consequences, including mental health problems, difficulties in childbirth, causing danger to the child and mother; and/ or death.”*

11.2. A young person may or may not be aware of what could happen to them prior to any act of FGM. Evidence suggests that young people with an African heritage may be at particular risk; however, FGM can occur to anyone.

11.3 Signs and symptoms that FGM may be about to occur, or may have occurred can be found in Appendix C of this document.

11.4. Reporting FGM is a statutory requirement under Section 5B of the Female Genital Mutilation Act 2003. Any member of staff who is either;

• notified by any girl under the age of 18 that an FGM act has been carried out on her

• or observes physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe that the act was necessary for the girl’s physical or mental health or for purposes connected with labour or birth **must** report to the police as soon as possible but in any

case, by the end of the day.

11.5. The DSLs or Management Team will support the member of staff in completing this statutory duty as well as providing support the young person and the member of staff involved.

11.6. Honour-based violence is a crime or incident which has or may have been committed to protect or defend the honour of the family and/or community.

11.7. Young people of certain religions or ethnicities may be expected to conform to ideologies, agreements or ways of living as to not ‘disrespect’ the family. Young people may also be forced to marry someone not of their choosing.

11.8. Some of the signs of honour-based violence and forced marriage can be found in the table under Appendix A of this policy and the same procedures apply if staff suspect that a young person may be abused.

12. Children/young people missing education

12.1. SupaJam places high value on good attendance and actively promotes an ethos which welcomes, encourages and supports students with their attendance.

12.2. SupaJam has a separate attendance policy; however, for those students who may be more likely to be at risk of exploitation, the college will engage in regular communication by giving them a call each and every morning that they do not come in. This will be a welfare call as well as an encouragement to return to college.

12.3. For those students who have consistently poor attendance, the DSL will arrange for a home visit either at the student’s home address (attended by at least two members of staff) or at a local spot near the student’s home to actively encourage them to return.

12.4. During enrolment, students will be required to provide at least two emergency contacts so that the college is able to get hold of somebody where the young person is uncontactable.

12.5. Where a student and their family/emergency contacts are consistently uncontactable, or do not respond to invitations to meet up, the DSLs will make a referral to Children’s Services. This will be after considerable effort has been made at various times of the day and through various communication methods to try and reach the young person. A prolonged period is defined for the purposes of this policy as 10 working days (i.e. 2 college weeks) where no previous indication of time off has been given (e.g. holiday).

12.6. Any student subject to a child protection plan who has an unexplained absence will be reported to Child Services after 5 working days if contact is not made with the young person or their family or if the college is not satisfied that the young person is safe.

13.Peer-on-peer abuse including sexual violence & harassment between children in schools and colleges (Sept. 2021)

13.1. SupaJam Education in Music & Media have many students who would be considered as vulnerable (i.e. they have special educational needs, are looked after/ care leavers or are from socially deprived areas).

13.2. This makes students susceptible to bullying or being bullied. Staff will be vigilant in supporting and educating young people about types of bullying both in reaction to specific incidents as well as anticipatory duties. This includes all types of abuse as outlined in table 5.4 as well as sexting.

13.3. Any peer-on-peer abuse will be dealt with swiftly and in search of a just outcome. In most incidents, this may be achieved through mediation and a positive resolution. However, in some more severe incidents, this may require further intervention including calling the Police. This includes, but is not limited to, physical assault, verbal or emotional abuse or harmful sexual behaviour (see sexual violence and sexual harassment between children in schools and colleges, September 2021).

13.4. All incidents will be recorded electronically using the college’s safeguarding system which will automatically alert the DSLs and SLT, where a thorough investigation will be conducted.

13.5. All incidents where sexual and explicit images are shared with young people under the age of 18 and staff are made aware of this will be reported to the Police.

13.6. All students will be supported by familiar staff and overseen by the DSLs whether they are victims of abuse or the perpetrators in recognition that it is likely that they may in fact be victims themselves.

14.Record keeping

14.1. All conversations held with a young person which amounts to a safeguarding concern **must** be recorded.

14.2. SupaJam uses the secure online system CPOMS. All staff will have access to the system to be able to create an incident which automatically alerts the Centre Managers Designated Safeguarding Manager and SLT. All incidents must be recorded on the system by the end of the same day the incident occurred. If this is not possible, then the Designated Safeguarding Manger must be made aware and the report must be done in the first instance the next day.

14.3. CPOMS will be used for recording incidents, behavioural challenges, child protection concerns and pastoral interventions for all students. It provides a platform for a fully auditable system and will be consistently used. Staff will be asked to record any concerns they have given verbally through CPOMS.

14.4. Completing this process fully and consistently will create an auditable chronology of events for each student.

14.5. It is vital that all telephone calls and correspondence is recorded either CPOMS or Arbor to maintain an accurate chronology for each student.

15. Responding to Allegations of abuse against a member of staff, other worker or volunteer

15.1. SupaJam Education in Music and Media will:

• Identify a named Senior Manager or SLT responsible for managing allegations – this will be David Court, Nick Stillwell & Hannah Goslett

• Ensure that the young person's welfare is paramount;

• Ensure all reports or disclosures that indicate that an adult staff member or volunteer has:

- Behaved in a way that has harmed, or may have harmed a young person - Possibly committed a criminal offence against or related to a young person OR - Behaved towards a young person in a way that indicates s/he is unsuitable to work with young

people

• Is fully recorded and is notified to the College’s HR Department and a consultation with the Local Authority Designated Officer (LADO) is undertaken in all cases ensuring that the appropriate action is taken.

• Ensure that the adult about whom there are concerns is treated fairly and honestly and provided with support

• Consider the safety & welfare of other young people in the class/College

• Remember that disciplinary action is the responsibility of the College but that any decisions should be made in consultation with the LADO and, if involved, the police.

• Work with the LADO to keep the young person and their family fully informed in relation to any investigation and subsequent action.

• Kent County Council LADO Service can be contacted on 03000 410888 or kentchildrenslado@kent.gov.uk

16. Management of Young People subject to Child Protection Investigation or subject to a Child Protection Plan

16.1. SupaJam will contribute to the child protection investigation (section 47) and attend or contribute to strategy meetings.

16.2. The DSLs will attend the Initial Child Protection Conference to share any relevant information and provide a written report for the conference.

16.3. If the young person is placed on the Child Protection Plan, the DSL is responsible for ensuring that SupaJam participates appropriately in the Child Protection Plan and attends all Core Group Meetings and Child Protection Conferences.

16.4. Information will be shared with staff on a need to know basis but key personnel working with young people should have sufficient information to support them in their work with that young person.

16.5. If a young person with a Child Protection Plan has an unexplained absence from SupaJam the DSL, or an appropriate deputy, will inform the Social Worker.

17.Support and Training

17.1. We are committed to the provision of safeguarding training for all of our staff.

17.2. In addition to the basic safeguarding training, the Designated Safeguarding Manager undertakes training in inter agency working that is provided by SupaJam, and refresher training at 2 yearly intervals to keep his/her knowledge and skill up to date.

17.3. All other staff undertake appropriate training to equip them to carry out their responsibilities for child protection effectively, which is kept up to date by refresher training throughout the year, or as significant events/policy change occurs.

18. Confidentiality and Information Sharing

18.1. We recognise that all matters relating to child protection are confidential.

18.2. The Designated Safeguarding Manager and DSLs will disclose personal information about a young person to other members of staff on a need to know basis only. However, all staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard young people.

18.3. When considering sharing information, the staff will consider the seven golden rules:

• Remember that the Data Protection Act and General Data Protection Regulations (GDPR) 2018 is not a barrier to sharing information, it provides the framework

• Be open & honest with the person from the outset about how information may be shared

• Seek advice, do not fail to share information because you are unsure what to do

• Share with consent where appropriate and respect the wishes of those who refuse consent unless you believe that there is a risk of harm to a young person if the information is not shared

• Consider safety and well-being of the young person and base information sharing decisions on this

• Ensure all information shared is Necessary, Proportionate, Relevant, Accurate, Timely & Secure. Ensure any third party or hearsay information is identified and that you have consent to share it

• Keep a record of your decision and reasons for it, record what you have shared, with whom and the purpose.

18.4. All staff must be aware that they cannot promise a young person to keep secrets which might compromise the young person’s safety or well-being or that of another.

18.5. We will always undertake to share our intention to refer a young person to Children’s Social Care with their parents/carers unless to do so could put the young person at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with Children’s Social Care.

19.Whistle Blowing

19.1. Staff should be aware that young people may feel unable to express concerns in an environment where staff fail to do so.

19.2. All staff should therefore feel free to voice concerns about the attitude and actions of their colleagues.

19.3. All concerns should first be discussed with the Designated Safeguarding Manager. If staff do not feel that they have been listened to, they should escalate their concerns to the SLT.

19.4. If their concerns are with the DSLs or SLT, then staff are encouraged to speak to someone independent – the NSPCC have an available Whistleblowing helpline which staff can contact to discuss their concerns for advice.

19.5. Under no circumstances should staff feel intimidated or fearful of escalating safeguarding concerns.

20. Safer Working Practice for Staff

20.1. Holding Discussions with Students;

• Staff **will not** interview students about any allegations or disclosures (whether the victim or alleged perpetrator). This can have ramifications in the long-term with any criminal investigations. Staff will only have discussions with the young person to ascertain facts and use clarifying questions only.

• All staff, male or female, should be aware of the potential risks (i.e. false allegations against staff) of talking to a young person alone, particularly if the young person has previously had an experience of sexual/emotional abuse. Talking with individual students is an integral part of our work and therefore staff should exercise their own professional judgement and a degree of caution in these situations. All staff should try to ensure that they are not in a compromising position where allegations can be made against them.

20.2. Suggested protective measures to consider:

• ask another person (teacher or young person’s friend – as appropriate to the content) to sit in on the interview:

• sit in a room where it is possible to be observed through a window or glass panelled door or has CCTV:

• do not close the door of the room, if you are not clearly visible from outside the room.

20.3. Transporting Students - Staff are not expected to transport students in their own vehicles. If a student needs to get home due to an emergency then their emergency contact should be consulted and a taxi called if necessary. If a student is required to attend an emergency department (such as A&E) and the only viable option is to transport them by a staff vehicle, then the following procedures must be followed;

• A minimum of two members of staff attend with the student

• The staff member driving the vehicle must have adequate business cover in their insurance which has been verified by the Operations Manager • The vehicle has an in-date MOT certificate

• The member of staff and their family are protected by ensuring no personal documentation is readily available to the student

• Both members of staff must be contactable at all times and give regular updates to SLT

• Where possible, seek permission from the student’s guardian

20.4. The DSL should be contacted if there are any circumstances that need clarification.

20.5. Use of Technology - All staff in SupaJam will use technology to support and promote the learning and welfare of young people. However certain safeguards should be remembered:

• Mobile phones - Staff will NOT give any young person their personal mobile phone number and will only contact the young person on their mobile phone from a college landline or designated college mobile phone

• Staff will ensure Bluetooth is disabled when on College premises on all personal mobiles and laptops.

• Communication by email should only be through the SupaJam’s email system and personal emails must not be shared with young people

• Use of Internet: Staff will NOT access or expose young people to unsuitable material on the internet. Staff will ensure that they follow SupaJam’s policy about access to and use of the internet.

20.6. Lone working

20.7. Staff will not work alone with any student in any environment which has not been deemed ‘safe’ – i.e. has CCTV or has other people around.

20.8. Students receiving home tutoring will do so in their home only if another family member or appropriate adult is present for the duration of the tutoring. If this is not possible, then the teacher will arrange to meet the student in a public place such as the local library or coffee shop.

20.9. There will always be a minimum of two members of staff in the college building at any one time. This is to safeguard staff and students from allegations but also for safety reasons.

20.10 For additional information around Lone Working, please refer to the Lone Working policy.

Appendix A - signs and symptoms of abuse 5.4 **Types**

**of abuse and signs/symptoms** - There are four categories of abuse:

| Type  | Description Signs/symptoms |
| --- | --- |
| Physical abuse | Physical abuse may take many forms e.g. Unexplained and so hitting, shaking, throwing, poisoning, burning called “accidental” or scalding, drowning or suffocating a young injuries, burns or person. bruising Improbable excuses or It may also be caused when a parent or carer feigns the symptoms of, or deliberately refusal to explain causes, ill health to a young person. This injuries Refusal to unusual and potentially dangerous form of undress for physical abuse is now described as fabricated or activities induced illness in a young person. Self-destructive tendencies Aggression towards others Fear of physical contact - shrinking back if touched Admitting that they are punished, but the punishment is excessive Fear of suspected abuser being contacted |

| Emotion al abuse | Emotional abuse is the persistent emotional Physical, mental and ill treatment of a young person such as to emotional development cause severe and persistent effects on the delays young person’s emotional development, and Sudden speech may involve: disorders Continual self depreciation ('I'm · Conveying to young people that they are worthless or unloved, inadequate, or stupid, ugly, worthless, valued only insofar as they meet the etc') needs of another person · Imposing Overreaction to developmentally inappropriate mistakes Extreme fear expectations of any new situation Inappropriate · Causing young people to feel frightened or in danger - e.g. witnessing domestic response to pain ('I violence · Exploitation or corruption of deserve this') young people Unusual attention seeking behaviour Extremes of passivity or aggression |
| --- | --- |

| Sexual Sexual abuse involves forcing or enticing a Being overly abuse young person to take part in sexual activities, affectionate or whether or not the young person is aware of knowledgeable in a what is happening and includes penetrative sexual way (i.e. vaginal or anal rape or buggery) and non inappropriate to the young person's age penetrative acts. It may also include non-contact activities, Itchy or pain in the such as involving young people in looking at, genital area or in the production of pornographic Other extreme materials, watching sexual activities or reactions, such as encouraging young people to behave in depression, self sexually inappropriate ways. mutilation, suicide attempts, running away, overdoses, anorexia Personality changes such as becoming insecure or clinging Being isolated or withdrawn Inability to concentrate Become worried about clothing being removed Suddenly drawing sexually explicit pictures Trying to be 'ultra-good' or perfect; |
| --- |

| overreacting to criticism |
| --- |
| Neglect Neglect involves the persistent failure to Constant hunger meet a young person’s basic physical Poor personal and/or psychological needs, likely to result hygiene Constant in the serious impairment of the young tiredness person’s health and development. Poor state of clothing This may involve failure to provide adequate food, shelter or clothing, failure to protect Emaciation from physical harm or danger or failure to Untreated medical ensure access to appropriate problems medical/physical care or treatment e.g. No social correct maintenance of wheelchairs, use of relationships body braces etc. Supply of medication Compulsive needed according to care plans. It may also scavenging include neglect of a young person’s basic Destructive emotional needs. tendencies Stealing food/money Poor college attendance Compulsive attention seeking |

APPENDIX B - signs and symptoms of CSE

*10.3.*Signs or symptoms may include;

• Acquisition of money, clothes, mobile phones etc without plausible explanation; • Gang-association and/or isolation from peers/social networks;

• Exclusion or unexplained absences from school, college or work; • Leaving home/care without explanation and persistently going missing or returning late;

• Excessive receipt of texts/phone calls;

• Returning home under the influence of drugs/alcohol;

• Inappropriate sexualised behaviour for age/sexually transmitted infections; • Evidence of/suspicions of physical or sexual assault;

• Relationships with controlling or significantly older individuals or groups; • Multiple callers (unknown adults or peers);

• Frequenting areas known for sex work;

• Concerning use of internet or other social media;

• Increasing secretiveness around behaviours; and

• Self-harm or significant changes in emotional well-being.

APPENDIX C - Signs & Symptoms of FGM

11.3 – signs that FGM may be planned or have taken place can include: • A family arranging a long break abroad during the summer holidays. • Unexpected, repeated or prolonged absence from school.

• Academic work suffering

Some of the signs of FGM having already taken place may include; • 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

• talk of infections, including tetanus, HIV and hepatitis B and C

**Designated Safeguarding Leads for SupaJam**

Swanley Base:

1. Julia Abrams - Designated Safeguarding Manager & Designated LAC/PLAC Lead 2.Sammi Hastie - Centre Manager

Canterbury Base:

1. Julia Abrams - Designated Safeguarding Manager & Designated LAC/PLAC Lead 2. Johnny Fairbrother - Centre Manager