

Safeguarding Children & Young People Policy



Children's Respite Trust is committed to building a 'culture of safety' in which the children/young people in our care are protected from abuse, harm and radicalization.

The Trust will respond promptly and appropriately to all incidents or concerns regarding the safety of a child that may occur. The Trust's child protection procedures comply with all relevant legislation and with guidance issued by the Local Safeguarding Partners (LSP) in East Sussex this is East Sussex Safeguarding children partnership (ESSCP).

There is a Designated Safeguarding Lead available at all times while the setting is in session. The Designated Safeguarding Lead (DSL) coordinates child protection issues and liaises with external agencies (e.g. Social Care, LSCB and Ofsted)

Role	Name	Contact details
Designated Safeguarding Lead (DSL)	Michelle Hulse - Head of Care	01825 817 417 07885 837375 michelle@crtcharity.org
Deputy Designated Safeguarding Lead (DDSL)	Verity Morris – U5's Manager	01825 817 417 07885 426629 verity@crtcharity.org

Looked after children

Early years settings are committed to providing quality provision based on equality of opportunity for all children and their families. All staffs are committed to doing all they can to enable "looked after" children in their care to achieve and reach their full potential.

We recognise that children who are being looked after have often experienced traumatic situations, emotional or sexual abuse or neglect. However, we also recognise that not all looked after children have experienced abuse and that there are a range of reasons for children to be taken into the care of the local authority. Whatever the reason, a child's separation from their home and family signifies a disruption in their lives that has impact on their emotional well-being.

In our setting, we place emphasis on promoting children's right to be strong, resilient, and listened to. Our policy and practise guidelines for looked after children are based on two important concepts, attachment, and resilience. The basis of this is to promote secure attachments in children's lives as the basis for resilience.

Children missing from Education

A child who is missing from an educational setting is a potential indicator of abuse and neglect. All children are entitled to a full-time education, suitable for their age and development. (**see missing child policy**)

The DSL will monitor unauthorised absences and take appropriate action including notifying the local authority (**where funded is allocated**)

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Child abuse and neglect

Child abuse is any form of physical, emotional, psychological or sexual mistreatment or lack of care that leads to injury or harm. An individual may abuse or neglect a child directly, or by failing to protect them from harm. Some forms of child abuse and neglect are listed below.

Emotional abuse is the persistent emotional maltreatment of a child so as to cause severe and persistent adverse effects on the child's emotional development. It may involve making the child feel that they are worthless, unloved, or inadequate. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Physical abuse can involve hitting, shaking, throwing, poisoning, burning, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may be also caused when a parent or carer feigns the symptoms of, or deliberately causes, ill health to a child.

Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. This can involve physical contact, or non-contact activities such as showing children/young people sexual activities or encouraging them to behave in sexually inappropriate ways.

Neglect is the persistent failure to meet a child's basic physical and emotional needs. It can involve a failure to provide adequate food, clothing and shelter, to protect a child from physical and emotional harm, to ensure adequate supervision or to allow access to medical treatment.

FGM is a form of child abuse and is usually carried out by someone non-medically trained. It can happen at any time during a girl or women's life. Female Genital Mutilation is when a female's genitals are deliberately altered or removed for non-medical reasons. It's also known as 'female circumcision' or 'cutting' but has many other names.

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. It can seriously harm children and young people and witnessing domestic abuse is child abuse. Domestic abuse can be emotional, physical, sexual, financial or psychological. It may take place inside or outside the child's home and is important to remember both men and women can be abusers. Clarion Housing Association provides safe refuge accommodation for women and children fleeing domestic violence across East Sussex.

Signs of child abuse and neglect

Signs of possible abuse and neglect may include:

- significant changes in a child's behaviour
- significant changes to a child's attendance
- deterioration in a child's general well-being
- unexplained bruising or marks
- comments made by a child which give cause for concern
- reasons to suspect neglect or abuse outside the setting, eg in the child's home, or that a girl may have been subjected to (or is at risk of) female genital mutilation
- inappropriate behaviour displayed by a member of staff, or any other person. For example, inappropriate sexual comments, excessive one-to-one attention beyond the requirements of their role, or inappropriate sharing of images.

If abuse is suspected or disclosed

When a child makes a disclosure to a member of staff, that member of staff will:

- reassure the child that they were not to blame and were right to speak out
- listen to the child but not question them

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- give reassurance that the staff member will take action
- record the incident as soon as possible (see **Logging an incident below**).

If a member of staff witnesses or suspects abuse, they will record the matter straightaway using the **Welfare Concern** form. If a third party expresses concern that a child is being abused, we will encourage them to contact Single Point of Advice (**SPoA**) If they do not do so, we will explain that the setting is obliged to, and the incident will be logged accordingly.

Peer-on-peer abuse

Children/young people are vulnerable to abuse by their peers. Peer-on-peer abuse is taken seriously by staff and will be subject to the same child protection procedures as other forms of abuse. Staff are aware of the potential uses of information technology for bullying and abusive behaviour between young people.

Staff will not dismiss abusive behaviour as normal between young people. The presence of one or more of the following in relationships between children/young people should always trigger concern about the possibility of peer-on-peer abuse:

- Sexual activity (in primary school-aged children) of any kind, including sexting
- One of the children/young people is significantly more dominant than the other (eg much older)
- One of the children/young people is significantly more vulnerable than the other (eg in terms of disability, confidence, physical strength)
- There has been some use of threats, bribes or coercion to ensure compliance or secrecy.

If **peer-on-peer abuse is suspected or disclosed**, we will follow the same procedures as set out above for responding to child abuse.

Extremism and radicalisation

All childcare settings have a legal duty to protect children/young people from the risk of radicalisation and being drawn into extremism. There are many reasons why a child might be vulnerable to radicalisation, eg:

- feeling alienated or alone
- seeking a sense of identity or individuality
- suffering from mental health issues such as depression
- desire for adventure or wanting to be part of a larger cause
- associating with others who hold extremist beliefs

Signs of radicalisation

Signs that a child might be at risk of radicalisation include:

- changes in behaviour, for example becoming withdrawn or aggressive
- claiming that terrorist attacks and violence are justified
- viewing violent extremist material online
- possessing or sharing violent extremist material

If a member of staff suspects that a child is at risk of becoming radicalised, they will record any relevant information or observations on a **Welfare Concern** form and refer the matter to the DSL.

Child sexual exploitation

Child Sexual Exploitation (**CSE**) is defined as a form of child sexual abuse. It occurs when an individual or a group take advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity in exchange for something the victim needs, or wants, and/or the

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financial advantage or increased status of the perpetrator facilitator. The victim may have been sexually exploited even if the sexual activity is consensual. CSE does not always have to involve physical contact; it can also occur through the use of technology.

Indicators/warning signs of CSE

Staff members will be aware of the children most at risk of being sexually exploited, including vulnerable children/young people

- Being secretive
- Acting withdrawn and isolated
- Unexplained school absences
- Acting hostile or aggressive
- Displaying inappropriate sexualised behaviour for age
- Having physical injuries without plausible explanation
- Trying to conceal marks or scars on their body

As with any type of abuse, we will be aware of signs and symptoms and any concerns we may have will be followed with the same procedure.

Upskirting

Under the Voyeurism Act 2019, it is an offence to operate equipment and to record an image beneath a person's clothing without consent and with the intention of observing, or enabling another person to observe, the victim's genitals or bottom. Upskirting will not be tolerated, and any incidences will be reported to the DSL who will then decide on next steps to take, which may include police involvement.

Honor Based Violence

Honor based violence (**HBV**) can be described as a “collection of practises, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and or/honour”

Some families believe that certain actions bring shame on the family and may react with punishment, these actions may include rejecting a forced marriage (also covered in this policy) having an unapproved relationship, the wearing of make up or certain clothing. Any abuse is a violation of human rights, there is no “honour” or justification for abusing the human rights of others.

It is important to be alert to signs/ symptoms, distress and indications of such abuse:

- Self-harm
- Absence from nursery
- Changes in how they dress/act
- Visible injuries
- Signs of depressions

Forced marriage

A forced marriage occurs when one or both individuals do not or cannot consent to the marriage, and pressure or abuse is used to compel them. It is important to distinguish this from a marriage where both parties willingly and knowingly give their informed consent. Forced marriage is a criminal offence.



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Forced marriage is different from an arranged marriage, which is common in several cultures. In an arranged marriage, the families of both spouses play a significant role in arranging the marriage, but the decision to accept the arrangement remains with the prospective spouses.

Additionally, forcing someone to marry before they turn 18, even without pressure or abuse, is considered a forced marriage. Coercion can include physical, psychological, financial, sexual, and emotional pressure, and may also involve physical or sexual violence and abuse.

Human Trafficking and Modern slavery

Child trafficking and modern slavery are increasingly common forms of child abuse. Children are recruited, moved, transported, and then exploited, forced to work, or sold. For an adult or child to be considered a victim of human trafficking, the following elements must be present:

- **Action:** Recruitment, transportation, transfer, etc.
- **Means:** Threat or use of force, coercion, abduction, abuse of power or vulnerability.
- **Purpose:** Sexual exploitation forced labour or domestic servitude, slavery, financial exploitation, illegal adoption, or removal of organs.

Witchcraft

Child abuse linked to faith or belief (CALFB) occurs across the country and can happen in families where there is a belief in:

- **Witchcraft and spirit possession:** Demons or the devil acting through children or leading them astray (traditionally seen in some Christian beliefs).
- **The evil eye or djinns:** Traditionally known in some Islamic faiths, and dakini in the Hindu context.
- **Ritual or multi murders:** The belief that killing children brings supernatural benefits, or that using their body parts produces potent magical remedies.
- **Magic or witchcraft:** Used to create fear in children to make them more compliant when trafficked for domestic slavery or sexual exploitation.

Families and children can be deeply worried by these perceived evil forces, and abuse often occurs during attempts to “exorcise” or “deliver” the child. Reasons for a child being identified as “different” may include disobedience, independence, bed-wetting, nightmares, or illness. Attempts to “exorcise” the child may involve beating, burning, starvation, cutting, or stabbing.

County Lines

County Lines is a form of criminal exploitation where urban gangs persuade, coerce, or force children and young people to store drugs and money, and/or transport them to suburban areas, market towns, and coastal towns. This practice is illegal and constitutes child abuse.

Cuckooing (a term used by the police) is a type of criminal exploitation where a drug dealer takes over someone’s home to use as a base for County Lines drug trafficking.

Criminals often target vulnerable individuals, including those with drug or mental health issues, single parents, and people living in poverty. Coercion, intimidation, violence (including sexual violence), and weapons are frequently used. Cuckooing typically occurs in multi-occupancy or social housing properties.

Fabricated Illness

Fabricated or induced illness (FII) is a rare form of child abuse where a parent or carer exaggerates or deliberately causes symptoms of illness in a child (NHS). FII was previously known as “Munchausen’s Syndrome by proxy” (not to be confused with “Munchausen’s Syndrome”, where a person pretends to be ill or causes illness or injury to themselves).

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Some behaviours exhibited by carers associated with FII include:

- Inducing symptoms in children by administering medication or other substances, or by intentional suffocation.
- Interfering with treatments by overdosing with medication, not administering them, or tampering with medical equipment such as infusion lines and feeding apparatus.
- Claiming the child has symptoms that are unverifiable unless observed directly, such as pain, frequent urination, vomiting, or fits, leading professionals to undertake unnecessary and potentially harmful investigations and treatments.
- Obtaining specialist treatments or equipment for children who do not require them.
- Falsifying test results and observation charts.
- Alleging unfounded psychological illness in a child.

Carers may be intensely involved with their children, never taking breaks or allowing others (family members or professionals) to care for the child, while others may spend little time interacting with their child.

A key professional skill is distinguishing between a very anxious carer responding to an extremely sick child and those exhibiting abnormal behaviour.

Staff should be alert to the possibility of FII when a child:

- Has frequent and unexplained absences.
- Is frequently unwell, with parents repeatedly claiming the child requires medical attention for vague, difficult-to-diagnose symptoms that carers have not themselves noticed (e.g., headaches, tummy aches, dizzy spells, blank episodes)

Toxic Trio

The 'toxic trio' consists of three issues: **domestic abuse, mental ill-health, and substance misuse**.

These issues often co-exist, particularly in families where significant harm to children has occurred. The Children's Commissioner reported in 2018 that 100,000 children in England lived in households where one adult faced all three 'toxic trio' issues to a severe extent, and 420,000 children lived in households where one adult faced all three to a moderate/severe extent.

One reason these issues often co-exist is that a parent misusing drugs, or alcohol is more likely to be in a relationship where domestic abuse occurs. Those who misuse drugs or alcohol have a greater chance of experiencing mental ill-health. Conversely, adults with mental health problems are more likely to abuse drugs or alcohol. Various situations can lead to the emergence of all three toxic trio issues.

Awareness of the toxic trio is crucial because it is a key indicator of increased risk of harm to children and young people. Studies, such as Brandon et al. (2012), have shown that in 86% of incidents where children were seriously harmed or died, one or more of the trios played a significant role. Similar findings are reported by Botham et al. (2016).

Children with medical conditions

Logging a concern

All information about the suspected abuse or disclosure, or concern about radicalisation, will be recorded on the **Welfare Concern** form as soon as possible after the event. The record should include:

- date of the disclosure, or the incident, or the observation causing concern
- date and time at which the record was made
- name and date of birth of the child involved
- a factual report of what happened. If recording a disclosure, you must use the child's own words
- name, signature and job title of the person making the record.

The record will be given to the Trust's DSL who will decide on the appropriate course of action.

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For concerns about **child abuse**, DSL will contact SPoA. The DSL will follow up all referrals to Social Care in writing within 48 hours. If a member of staff thinks that the incident has not been dealt with properly, they may contact Social Care directly.

For minor concerns regarding **radicalisation**, the DSL will contact Local Authority Prevent Co-ordinator Via Single Point of Access (SPoA). For more serious concerns the DSL will contact the Police on the non-emergency number (101), or the anti-terrorist hotline on 0800 789 321. For urgent concerns the CPO will contact the Police using 999.

Allegations against staff

If anyone makes an allegation of child abuse against a member of staff:

- The allegation will be recorded on an **Incident record** form. Any witnesses to the incident should sign and date the entry to confirm it.
- The allegation must be reported to the Local Authority Designated Officer (LADO) Via SPoA. The LADO will advise if other agencies (eg police) should be informed, and the Trust will act upon their advice. Any telephone reports to the LADO will be followed up in writing within 48 hours.
- Following advice from the LADO, it may be necessary to suspend the member of staff pending full investigation of the allegation.
- If appropriate, the Trust will make a referral to the Disclosure and Barring Service.

Promoting awareness among staff

The Trust promotes awareness of child abuse and the risk of radicalisation through its staff training. The Trust ensures that:

- the designated DSL has relevant experience and receives appropriate training in safeguarding and the Prevent Duty, and is aware of the Channel Programme and how to access it
- Designated person training is refreshed every two years.
- safe recruitment practices are followed for all new staff
- all staff have a copy of this **Safeguarding policy**, understand its contents and are vigilant to signs of abuse, neglect or radicalisation
- all staff are aware of their statutory duties with regard to the disclosure or discovery of child abuse, and concerns about radicalisation
- all staff receive basic safeguarding training annually, and safeguarding is a permanent agenda item at all staff meetings
- all staff receive basic training in the Prevent Duty – refreshed annually (**see Prevent Duty and Radicalisation Policy**)
- staff are familiar with the Safeguarding File which is kept with our secure system
- the setting's procedures are in line with the guidance in 'Working Together to Safeguard Children (2023)' and staff are familiar with 'What to Do If You're Worried a Child Is Being Abused (2015)'.

Use of mobile phones, smart watches, wearable devices and cameras

Photographs will only be taken of children/young people with their parents' permission. Only the Trust camera will be used to take photographs of children/young people at the Trust, except with the express permission of the manager. Neither staff nor children/young people nor visitors may use their mobile phones to take photographs at the Trust.

Smart watches and Fitbits are permitted to be worn by staff but to be used only as a watch when working with children. Therefore, other functions must be disabled when staff are with the children. Staff should never use their phones or wearable devices to take photographs of children or allow themselves to be

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photographed by pupils. If during school trips/activity days etc. a member of staff wishes to take photographs on a mobile phone, express permission must be sought from the Head of Care.

Misuse

Any member of staff found to misuse a mobile phone or wearable device will be subject to disciplinary action in line with the disciplinary procedure. It is everybody's responsibility to enforce this policy, therefore any misuse of devices at the Trust or any areas should be reported to the DSL in line with the safeguarding and whistleblowing policies and procedures.

Contact numbers:

Referrals into Early Help and Social Care

Single Point of Advice (SPOA)

Monday to Thursday: 8.30am to 5pm

Friday: 8.30am to 4.30pm - 01323 464222

0-19.SPoA@eastsussex.gov.uk

Emergency Duty Service – after hours, weekends and public holidays

01273 335906 or 01273 335905

Make a referral via the Portal:

<https://earlyhelp.eastsussex.gov.uk/web/portal/pages/home>

Or download a from:

<https://www.eastsussex.gov.uk/childrenandfamilies/professional-resources/spoa/>

Local Authority Designated Officer (LADO and Assistant LADO Consultation via the online portal:

<https://www.eastsussex.gov.uk/childrenandfamilies/professional-sources/lado/referrals/form-lado-referral/>

Contact Ofsted

To report a serious childcare incident:

<https://www.gov.uk/guidance/report-a-serious-childcare-incident>

NSPCC

NSPCC Helpline by calling 0808 800 5000, emailing help@NSPCC.org.uk or [completing our report abuse online form](#).

Our voice Helpline is currently available 10am–4pm Monday to Friday. You can still [email help@NSPCC.org.uk](mailto:help@NSPCC.org.uk) or [complete our report abuse online form](#)

For 18 and under call: 0800 1111

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Police

If you suspect someone is in immediate danger, call [999](#) now. If you have a hearing or speech impairment, use our textphone service 18000 or text us on 999 if you've pre-registered with the [emergencySMS service](#).

Legal framework for this policy

- Children act (1989/2004)
- Working together to safeguard children (2023)
- Keeping children safe in education (2024)
- Safeguarding Vulnerable Groups Act (2006)
- Counter-Terrorism Act and Security Act (2015)
- Multi-Agency Practise Guidelines
- Female Genital Mutilation Act 2003
- Serious Crime Act 2015
- Children and Social Work Act 2017
- The Prevent Duty 2015
- Data Protection 2018

This policy was adopted by: Michelle Hulse	Date: 19/01/2026
To be reviewed: January 2027	Signed: 