



**Fun, Adventure and Learning in the woods**

## **Safeguarding (Child Protection) Policy**

A Touch of the Wild is committed to building a 'culture of safety' in which the children in our care are protected from abuse, harm and radicalisation.

A Touch of the Wild will respond promptly and appropriately to all incidents or concerns regarding the safety of a child that may occur. A Touch of the Wild's Kindergarten child protection procedures comply with all relevant legislation and with guidance issued by the Local Safeguarding Children Board (LSCB).

There will be a Safeguarding Designated Officer (SDO) available at all times while the holiday club is in session. The SDO coordinates child protection issues and liaises with external agencies (e.g. Social Care, the LSCB and Ofsted).

The Club's designated SDO is Hannah Standen. The Deputy / on-call SDO is Hannah Standen 07961 070887.

### **Child abuse and neglect**

Child abuse is any form of physical, emotional 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 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.

### **Signs of child abuse and neglect**

Signs of possible abuse and neglect may include:

- significant changes in a child's behaviour
- deterioration in a child's general well-being
- unexplained bruising or marks
- comments made by a child which give cause for concern
- 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:



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- reassure the child that they were not to blame and were right to speak out
- listen to the child but not question them
- 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 **Logging a concern** form. If a third party expresses concern that a child is being abused, we will encourage them to contact Social Care directly. If they will not do so, we will explain that the Kindergarten is obliged to and the incident will be logged accordingly.

### Peer-on-peer abuse

Children 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 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 is significantly more dominant than the other (e.g. much older)
- One of the children is significantly more vulnerable than the other (e.g. 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 from the risk of radicalisation and being drawn into extremism. There are many reasons why a child might be vulnerable to radicalisation, e.g.:

- 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 **Logging a concern** form and refer the matter to the CPO.



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### Logging a concern

All information about the suspected abuse or disclosure, or concern about radicalisation, will be recorded on the **Logging a 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 Club's SDO who will decide on the appropriate course of action.

For concerns about **child abuse**, the SDO will contact Social Care. The SDO 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 SDO will contact the Local Safeguarding Children Board (LSCB). For more serious concerns the CPO will contact the Police on the non-emergency number (101), or the anti-terrorist hotline on 0800 789 321. For urgent concerns the SDO 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) and to Ofsted. The LADO will advise if other agencies (e.g. police) should be informed, and the Club 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 Club will make a referral to the Disclosure and Barring Service.

### Promoting awareness among staff

A Touch of the Wild promotes awareness of child abuse and the risk of radicalisation through its staff training. A Touch of the Wild ensures that:

- The designated SDO 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 three years
- Safe recruitment practices are followed for all new staff
- All staff have a copy of this **Safeguarding (Child Protection) 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, and safeguarding is a permanent agenda item at all staff meetings
- All staff receive basic training in the Prevent Duty



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- Staff are familiar with the Safeguarding File which is kept in locked file box.
- A Touch of the Wild's procedures are in line with the guidance in 'Working Together to Safeguard Children (2018)' and staff are familiar with the guidance in 'What To Do If You're Worried A Child Is Being Abused (2015)'.

### Use of mobile phones and cameras

Photographs will only be taken of children with their parents' permission. Only the A Touch of the Wild camera will be used to take photographs of children at the Kindergarten, except with the express permission of the manager. Neither staff nor children may use their mobile phones to take photographs at the holiday club.

Staff mobile phones must be kept in bags in the shed, during holiday club hours.

## Guidance for staff / volunteers

### Recognising signs of abuse

Type of abuse	Possible Indicators
<p><b>Neglect</b></p> <p>The withholding of or failure to provide (whether intentional or unintentional) the help, care or support necessary for a child, resulting in the serious impairment of the child's health or development.</p> <p>Neglect includes a failure to intervene in dangerous situations.</p> <p>Neglect often does not have obvious signs; the effects of neglect are more emotional and may affect the child's normal or expected development.</p> <p><b>Examples:</b></p> <p>Substance misuse by a mother during pregnancy (can include smoking, alcohol and drugs)</p> <p>Provision of inadequate food, clothing and/or shelter Being excluded from home or abandoned</p> <p>Inadequate protection or not responding to emotional needs</p>	<p><b>Behavioural Indicators:</b></p> <p>Frequent absences Inappropriate acts or delinquent behaviour Begging/stealing food Seeks inappropriate affection and attention Mature for their age</p> <p><b>Physical Indicators:</b></p> <p>Poor hygiene No energy Pale colour Dirty, scruffy or torn clothing Inappropriate clothing for the weather Injuries or medical problems that are untreated Consistent lack of supervision</p>
<p>Inadequate supervision, leaving a child alone at home Poor access to proper medication or care Lack of encouragement to develop and grow Refusing access to play with other children</p>	<p>Underweight, poor growth, failure to thrive Constant hunger</p>
<p><b>Physical</b></p> <p>The physical ill treatment, which may or may not cause injury or discomfort but which will harm or damage the health, emotions, well-being or development of the child.</p>	<p><b>Behavioural Indicators:</b></p> <p>Inconsistent explanation for an injury Says "cannot remember" how any injury occurred</p>



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<p>Examples:</p> <p>Punching or hitting Shaking or pushing Poisoning Smothering</p> <p>Force feeding Burning or scalding</p>	<p>Wary of adults          Flinches if touched unexpectedly          Extremely aggressive or extremely withdrawn          Feel that they deserve to be punished          Apprehensive when others cry          Frightened of parents          Afraid to go home</p> <p><b>Physical Indicators:</b></p> <p>Any injury not fully explained by the explanation given</p> <p>Injuries inconsistent with a child's normal play or daily routine</p> <p>Unexplained bruising and/or cuts on face, lips, mouth, body, arms, back, buttocks, thighs</p> <p>Clusters of injuries forming regular patterns, or reflecting the shape of an instrument</p> <p>Burns, especially on soles, palms or backs</p> <p>Burns for immersion in hot water, friction burns, rope or electric appliance burns</p> <p>Marks on the body, including slap marks, finger marks</p> <p>Injuries at different stages of healing</p>
<p><b>Emotional</b></p>	<p><b>Behavioural Indicators:</b></p>

<p>Emotional abuse is a pattern of behaviour that attacks the child's confidence, sense of worth and trust in their own judgements. Constant criticism and mocking, by threats or disguised as "guidance", "teaching" or "advice" can lead to emotional abuse.</p> <p>The emotionally abused child loses all sense of importance and personal value. Emotional abuse strikes at the very heart of the child, creating scars that may be far deeper and more lasting than physical ones.</p> <p>Through emotional abuse, insults, insinuations, criticisms and accusations slowly eat away at the child's self-esteem until he/she is incapable of judging a situation logically. The child becomes so low emotionally, that he/she often blames him/herself for the abuse. Emotionally abused children can become so convinced that they are worthless that they believe that no one else cares for them or loves them.</p>	<p>Depression</p> <p>Withdrawal or aggressive behaviour</p> <p>Excessively compliant</p> <p>Habit disorder (sucking a thumb, biting, rocking, etc)</p> <p>Learning disorders          Sleep disorders          Unusual fearfulness          Obsessive compulsive behaviour Phobias</p> <p>Extreme behaviour Suicide attempts</p> <p>Developmental delays</p>
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<p><b>Examples:</b></p> <p>Lack of interest in or concern for the child, giving them the feeling that they are worthless or unloved/unwanted/rejected</p> <p>Imposing age-inappropriate actions or expectations</p> <p>Preventing the child participating in normal routines</p> <p>Preventing the child from playing with other children</p> <p>Hostility, children frequently feeling threatened frightened, intimidated or in danger</p> <p>Overuse of bad language</p> <p>Shouting and developing a culture of fear and rejection</p>	<p><b>Physical Indicators:</b></p> <p>Changes in appetite and nausea</p> <p>Headaches</p> <p>Bed-wetting</p> <p>Habit disorders (sucking a thumb, biting, rocking, etc)</p>
<p><b>Sexual</b></p> <p>Sexual abuse occurs when a child or young person is pressurised, forced or tricked into taking part in any kind of sexual activity with an adult or young person. This can include kissing, touching the young person's genitals or breasts, intercourse or oral sex. Encouraging a child to look at pornographic magazines, videos or a sexual act is also sexual abuse.</p> <p>This form of abuse is often something that the child will not understand (particularly in the younger stages of development) or be aware of, which may lead them to see this form of abuse as normal. It is more often someone who is known to the child that inflicts this form of abuse as opposed to a stranger.</p>	<p><b>Behavioural indicators:</b></p> <p>Sexual knowledge or play inappropriate to age Sophisticated or unusual sexual knowledge Poor peer relationships Delinquent or runaway</p> <p>Change in performance in school Sleeping disorders Aggressive behaviours Self-abusive behaviours</p> <p>Self-mutilation</p>
<p><b>Examples:</b></p> <p>Prostitution</p> <p>Physical sexual contact</p> <p>Involving the child in looking at sexual images, watching sexual activities</p> <p>Encouraging children to behave in sexually inappropriate way</p> <p>Rape</p> <p>Inappropriate touching</p> <p>Exposing genitalia (possibly encouraging the abused person to touch)</p>	<p><b>Physical indicators:</b></p> <p>Unusual or excessive itching in the genital or anal area</p> <p>Stained or bloody underwear Injuries to the vaginal or anal areas Difficulty in walking or sitting</p> <p>Pain when urinating</p> <p>Vaginal/penile discharge</p> <p>Excessive masturbation</p> <p>Urinary tract infections</p> <p>Presence of "love bites"</p>



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### Disclosure procedure

In a situation where a child discloses or makes an allegation of abuse against an adult or another child, your role is to simply find out just enough about the alleged abuse in order to make a decision about whether or not the disclosure should be referred. You may need to ask the child or clarify what is being said.

**In these situations, you must use open questions, such as:**

- Please explain to me what happened?
- Can you explain a little more?
- Can you tell me more about?

It is essential that you do not "contaminate" any of the evidence provided by the child by asking leading questions or putting words into the child's mouth; as this could affect the case, should it end in court.

Make sure that he or she realises that you take very seriously what is said

Let the child know how brave you think he or she is to tell you and that you understand how hard it must be

Ensure the child does not feel that she or he is to blame

Remain calm and reassuring

Explain that you cannot promise to keep what the child tells you a secret

Do not make promises or reassure the child about things you cannot do or make happen

You must not physically examine the child.

Record complete, accurate, unbiased, factual and legible notes

### Recording procedure for disclosures

#### Recording during the disclosure

If it is possible you should write down phrases and words whilst the child is talking. These will be useful to trigger your memory when you come to recall and record your full notes following the disclosure. This should only be done if the child agrees and is comfortable with you writing things down.

#### Recording immediately following the disclosure

Immediately after the disclosure it is very important to record exactly what the child said in as much detail as you can remember. It is very important to use the child's own words and vocabulary even if the words do not make a great deal of sense. What is very important is that there is an accurate record of what the child actually said and not your interpretation of what was said.

#### Recording your own responses

Your verbal and non-verbal response should be accurately recorded. It is very important that it is clear that you used a non-leading approach.

#### Recording the environmental context of the disclosure

The environmental context in which the child decided to disclose the abuse can be valuable information later on for the investigating team.

#### Recording the emotional context of the disclosure



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The emotional context will provide valuable clues to the investigating team. The child may have made serious statements in a joking fashion or may have been upset and distressed. Children may speak about very serious matters in a matter of fact way, which can be a surprise for adults.

### Recording repetition

If a child repeats statements or certain words, these should be recorded. Consistency in a child's repeated statements gives the evidence strength.

### Contact numbers

Social Care: 0345 155 1078

Social Care out of hours contact: 0345 600 0388.

MASH: 0345 1551071

LADO (Local Authority Designated Officer): Carola Salvadori / Jane Parmenter / Rosie Geis  
01392 384964

LSCB (Local Safeguarding Children Board): 01392 386 067

Local Authority Prevent Co-ordinator: 01392 384964

Police: 101 (non-emergency) or 999 (emergency)

Anti-terrorist hotline: 0800 789 321

NSPCC: 0808 800 500

Ofsted: 0300 123 1231

This policy was adopted by: A Touch of the Wild	Date: July 2020
To be reviewed: July 2021	Signed: Hannah Standen

Written in accordance with the *Statutory Framework for the Early Years Foundation Stage (2014)*:  
*Safeguarding and Welfare requirements: Child Protection [3.4-3.8] and Suitable People [3.9-3.13].*