

Safeguarding Children, Learners and Adults at Risk

It is important that children, young people, learners and adults at risk are protected from abuse, neglect or significant harm. It is the responsibility of all TTE staff to safeguard and promote the welfare of children, young people, learners and adults at risk participating on our training programmes and activities. Staff should report any allegations or concerns regarding the welfare of these groups in accordance with company policy and associated guidance documentation. Some possible indications of abuse, neglect, significant harm are listed below:

- Wariness and distrust of other people
- Unexplained or unconvincingly explained injuries
- Low self-esteem
- Withdrawal from contact with others
- Aggressive or demanding behaviour
- Compulsive stealing or scrounging
- Drug, solvent or alcohol abuse
- Lack of concentration
- Reluctance to go home
- Eating problems
- Self-harm
- Suicidal feelings or attempted suicide.

Any problem of this kind can lead not only to immediate harm but also to long-term physical or emotional damage unless it is resolved. Whilst young people in trouble may attract attention and help because of their age, vulnerability in adults can be more complex. Vulnerability may consist of learning or physical disabilities, mental or physical health problems, difficulty with language or with social integration, financial or accommodation worries or harassment and bullying – personally or through the internet. All staff must remain vigilant and watch for personal problems among learners as part of their overall duty of care.

Types of Abuse and Neglect and How to Recognise Them

TTE staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

Abuse: a form of maltreatment of a child/learner. Somebody may abuse or neglect a child/learner by inflicting harm or by failing to act to prevent harm. Children/learners may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or by another child or children/learner or learners.

Physical abuse: is a physical form of abuse/ill treatment which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child/learner. Physical harm may also be caused when a parent

or carer fabricates the symptoms of, or deliberately induces, illness in a child/learner. It can also occur when a person is not provided with adequate care and support, causing him/her unjustifiable physical discomfort. This can include inappropriate use of restraint or sanction, withholding food, drink or necessary aids to mobility or independence.

▪ **Possible Signs of Physical Abuse:**

- fractures or any bruising on a baby;
- bruises and scratches to face and head;
- pinch bruises or bite bruises;
- bruising around both eyes simultaneously;
- torn frenulum (skin linking upper jaw and lip);
- fingertip bruising on front and back of chest (gripping);
- finger or hand marks on any part of the body;
- ligature marks on either neck, arms or legs;
- cigarette burns;
- linear or shaped burns or bruises (e.g. iron/radiator);
- 'non-cascade' scalds;
- head injury, may be no outward sign of injury;
- poisoning;
- bald patches;
- recurrent unexplained/untreated injuries or lingering illness.

▪ **Possible Behaviour:**

- explanation inconsistent with injury;
- refusal to discuss injuries;
- fear of going home or parents being contacted;
- arms and legs kept covered in hot weather or fear of undressing;
- aggressive bullying behaviour;
- frozen watchfulness/cowering/flinching at sudden movements;
- withdrawal from physical contact;
- fear of medical help;
- admission of excessive punishment;
- running away;
- self-destructive tendencies.

Emotional abuse: the persistent emotional maltreatment of a child/learner such as to cause severe and adverse effects on the child's/learner's emotional development. It may

involve conveying to a child/learner that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child/learner opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children/learner. These may include interactions that are beyond a child's/learner's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child/learner participating in normal social interaction.

It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children/learners frequently to feel frightened or in danger, or the exploitation or corruption of children/learners. Some level of emotional abuse is involved in all types of maltreatment of a child/learner, although it may occur alone.

- **Possible Signs of Emotional Abuse:**

- speech delay, poor verbal ability, lack of communication skills;
- lack of concentration, learning problems;
- unreasonable fear of new situations;
- eating disorders (over eating and under eating);
- inappropriate emotional responses to stressful situations;
- low self-esteem;
- self-mutilation;
- alcohol, drugs, solvent misuse.

- **Possible Behaviour:**

- over reaction to mistakes;
- obsessive behaviour (e.g. rocking, twisting hair, sucking thumb);
- withdrawal from relationships with other children;
- fear of parents being contacted;
- extremes of passivity or aggression;
- attention seeking;
- chronic running away;
- compulsive stealing, scavenging for food or clothes;
- Impaired capacity to enjoy life.

Sexual abuse: involves forcing or enticing a child, learner or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child/learner is aware of what is happening.

The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities, such as involving children/learners in looking at, or in the production of, sexual images, watching sexual activities, encouraging children/learners to behave in sexually inappropriate ways, or grooming a child/learner in preparation for abuse (including via the internet).

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children/learners.

▪ **Possible Signs of Sexual Abuse:**

- young people wetting and soiling themselves;
- sudden drop in learning performance/poor concentration;
- obsessed with sexual matters as opposed to normal exploration;
- changes from being happy and active to being fearful and withdrawn;
- unexplained sources of money/gifts;
- urinary infections, bleeding or soreness in the genital/anal areas;
- vaginal discharge – vaginal warts;
- soreness and bleeding to the throat;
- chronic ailments e.g. stomach pains, headaches without obvious cause;
- eating disorders;
- becomes severely depressed;
- has a poor self-image;
- uses drugs/alcohol to excess;
- not allowed to have friends around or to go out on dates;
- fearful of undressing for physical education;
- venereal infection;
- pregnancy.

▪ **Possible Behaviour:**

- overly compliant behaviour;
- behaves in a sexually inappropriate way in relation to their age;
- withdrawn and unhappy, insecure and 'clingy';
- plays out sexual acts in too knowledgeable a way for their age;
- regresses to behavioural pattern of much younger children;
- say of themselves that they are bad or wicked;
- arriving early at school/college and leaving late with few, if any, absences;

- excessive masturbation – exposing themselves;
- drawings of sexually explicit nature;
- attempts to sexually abuse another child;
- recurring nightmares and/or fear of the dark;
- had a 'friend who has a problem' and then tells about the abuse of 'a friend';
- self-mutilates/attempted suicide;
- running away;
- prostitution.

Sexual Violence: when referring to sexual violence we are referring to any sexual offence under the Sexual Offences Act 2003.

Sexual Harassment: the unwanted conduct of a sexual nature' that can occur online and offline. Whilst not intended to be an exhaustive list, sexual harassment can include:

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- sexual "jokes" or taunting;
- physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (schools and colleges should be considering when any of this crosses a line into sexual violence - it is important to talk to and consider the experience of the victim) and displaying pictures, photos or drawings of a sexual nature; and
- online sexual harassment, which might include: non-consensual sharing of sexual images and videos and sharing sexual images and videos (both often referred to as sexting); inappropriate sexual comments on social media; exploitation; coercion and threats. Online sexual harassment may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence.

It is important to consider sexual harassment in broad terms. Sexual harassment (as set out above) creates an atmosphere that, if not challenged, can normalise inappropriate behaviours and provide an environment that may lead to sexual violence.

Financial and Material Abuse: this abuse involves an individual's funds, resources or possessions being taken or inappropriately used by a third party. With Adults at Risk, this may include theft, fraud, or extortion through threat, exploitation, misuse or misappropriation of property or possessions by someone trusted to handle the adult's finances, preventing the adult's access to his/her funds. Risks of financial abuse may increase if (s)he lacks capacity or numeracy skills, lives alone and is regarded as "vulnerable" within the local community, and where there is a dependence on other people with the management of finances.

Discriminatory Abuse: is motivated by oppressive and prejudicial attitudes towards a person's disability, (including physical or sensory impairment, learning difficulty or mental ill health), their age, race, gender, religion, cultural background, sexual orientation or social situation, or dependence on substances such as drugs or alcohol. It may include all the above types of abuse, inequality in access to statutory service provision or breaches in civil liberties and denial of rights. Incidents or crimes caused by someone who has a prejudice against a group of people are sometimes described as Equality or Hate Incidents or Crimes.

Multiple or Institutional Abuse: the practice of an abusive regime or culture which denies an adult or group of adults care, support, dignity and respect to which every human has a right. It may occur when an individual's needs and choices are ignored or trivialised in order to make an institution or organisation easier to manage and run and/or to save an organisation's resources.

Domestic Violence: this may include any or all of the types of physical, sexual, emotional and financial abuse listed above. It can happen in any family relationship. It can be carried out by men against women, but also by women against men.

Forced Marriage: A forced marriage is one where one or both of the partners do not, or perhaps in the case of an Adult at Risk, are not able to consent to the marriage and an element of duress is involved. Duress or "force" can include physical, psychological, sexual or emotional pressure. Forced marriage is a form of domestic abuse for adults, and where children are involved, child abuse. It happens to males and females and should not be confused with an "arranged marriage", where the partners have a choice to accept or reject the arrangements. Forced marriage is a marriage conducted without the full consent of both parties where duress is a factor. This should not be confused with an 'arranged marriage'.

Forced marriage is regarded as a form of domestic abuse for adults, and where children are involved, as a form of child abuse. Initial concerns should be reported to the Designated Safeguarding Lead who will liaise with appropriate agencies, First Contact Services or the Police. Contact should not be made with the person's family.

So-called 'honour-based' violence: So-called 'honour-based' violence (HBV) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBV are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

Modern Day Slavery & Human Trafficking: These crimes include holding a person in a position of slavery, servitude, forced or compulsory labour, or facilitating their travel with the intention of exploiting them soon after. Although human trafficking often involves an international cross-border element, it is also possible to be a victim of modern day slavery within your own country. It is possible to be a victim even if consent has been given to be moved.

Children cannot give consent to being exploited therefore the element of coercion or deception does not need to be present to prove an offence.

Neglect: the persistent failure to meet a child's/learner's basic physical and/or psychological needs, likely to result in the serious impairment of the child's/learner's health or development

Neglect can be:

- medical or physical care needs being ignored to such an extent that a person's health and well-being is impaired;
- administering too much, too little, or the wrong type of medication;
- a failure to allow the person access to appropriate health, social care or education services;
- withholding of the necessities of life, eg adequate nutrition, heating or clothing;
- a failure to intervene in situations assessed to be dangerous to the person or others around them, especially when the person lacks capacity to assess risk.

Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers);
- or ensure access to appropriate medical care or treatment.

Neglect may also include neglect of, or unresponsiveness to, a person's basic emotional needs.

- **Possible Signs of Neglect:**
 - unkempt appearance, poor personal hygiene;
 - poor skin/hair condition;
 - drop through height/weight centiles;
 - small stature (where not a family characteristic);
 - constant tiredness;

- repeated accidents;
 - untreated medical conditions;
 - inappropriate clothing;
 - constant hunger;
 - frequent lateness, or non-attendance at school;
 - accidental self-poisoning.
- **Possible Behaviour:**
- chronic running away;
 - compulsive stealing;
 - scavenging of food and clothes;
 - low self-esteem;
 - neurotic behaviour (e.g. rocking, thumb sucking, hair twisting);
 - inability to make social relationships;
 - tendency to destroy things.

Specific Safeguarding Issues

All TTE staff should have an awareness of safeguarding issues, some of which are listed below. Staff should be aware that behaviours linked to the likes of drug taking, alcohol abuse, truanting and sexting put children in danger.

All TTE staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to, bullying (including cyberbullying), gender based violence/sexual assaults and sexting.

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example, information for schools, colleges and training providers can be found on the TES, MindEd and the NSPCC websites. TTE staff can access government guidance as required on the issues listed below via GOV.UK and other government websites: [Keeping Children Safe in Education](#) – (Statutory Guidance for Schools and Colleges) – DofE September 2108 also provides additional information.

- Bullying including cyberbullying
- Children missing education
- Child missing from home or care
- Child sexual exploitation (CSE)
- Domestic violence
- Drugs
- Fabricated or induced illness
- Faith abuse

- Female genital mutilation (FGM)
- Forced marriage-
- Gangs and youth violence
- Gender-based violence/violence against women and girls (VAWG)
- Hate
- Mental health
- Missing children and adults
- Private fostering
- Preventing radicalisation
- Relationship abuse
- Sexting
- Trafficking

Cyberbullying

To an increasing extent, abuse occurs through Internet sites. It can include publishing or sending indecent, intimate, pornographic or violent images; threatening, menacing or ridiculing messages; or unnecessary exclusion of individuals from 'buddy' lists.

Where evidence of cyberbullying is alleged or observed it will be treated in the same way, and with the same seriousness, as personal abuse using either existing safeguarding procedures involving external agencies or internal sanctions against harassment and bullying.

Further information on preventing radicalisation

Protecting children from the risk of radicalisation should be seen as part of schools' and colleges' wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism.

As with other safeguarding risks, staff should be alert to changes in children's/learner's behaviour which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children/learners who might be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme.

Prevent

From 1 July 2015, specified authorities, including all schools (and, since 18 September 2015, all colleges) as defined in the summary of this guidance, are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions, to have "due regard" [Revised Prevent Duty Guidance](#): for England and Wales are specifically concerned with schools (but also cover childcare). The

guidance is set out in terms of four general themes: Risk assessment, working in partnership, staff training, and IT policies.

- Schools colleges and training providers are expected to assess the risk of children/learners being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. This means being able to demonstrate both a general understanding of the risks affecting children and young people in the area and a specific understanding of how to identify individual children/learners who may be at risk of radicalisation and what to do to support them. TTE has clear procedures in place for protecting children and learners at risk of radicalisation. These procedures are set out in existing safeguarding policies. The Prevent duty builds on existing local partnership arrangements. For example, governing bodies and proprietors should ensure that their safeguarding arrangements take into account the policies and procedures of the Local Safeguarding Children Board. Effective engagement with parents / the family should also be considered as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms. Schools, colleges and training providers should also discuss any concerns in relation to possible radicalisation with a child's/learner's parents in line with TTE safeguarding policies and procedures unless they have specific reason to believe that to do so would put the child/learner at risk.
- The Prevent guidance refers to the importance of Prevent awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas. Individual schools are best placed to assess the training needs of staff in the light of their assessment of the risk to pupils at the school of being drawn into terrorism. As a minimum, however, schools, colleges and training providers should ensure that the Designated Safeguarding Lead undertakes Prevent awareness training and is able to provide advice and support to staff on protecting children from the risk of radicalisation.
- Schools, colleges and training providers should ensure that children are safe from terrorist and extremist material when accessing the internet.

Channel

TTE staff should understand when it is appropriate to make a referral to the Channel programme.

An e-learning channel awareness programme for staff is available at http://course.ncalt.com/Channel_General_Awareness/01/index.html

Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools, colleges and training providers to make referrals if they are concerned that an individual might be vulnerable to radicalisation.

It is mandatory that all TTE Staff complete the Channel General Awareness Module. In addition to information sharing, if a staff member makes a referral to Channel, they may be asked to attend a Channel panel to discuss the individual referred to determine whether

support is required. Channel guidance is available at http://course.ncalt.com/Channel_General_Awareness/01/index.html

Section 36 of the CTSA 2015 places a duty on local authorities to ensure Channel panels are in place. The panel must be chaired by the local authority and include the police for the relevant local authority area. Following a referral, the panel will assess the extent to which identified individuals are vulnerable to being drawn into terrorism and, where considered appropriate and the necessary consent is obtained, arrange for support to be provided to those individuals. Section 38 of the CTSA 2015 requires partners of Channel panels to cooperate with the panel in the carrying out of its functions and with the police in providing information about a referred individual. Schools and colleges that are required to have regard to “[Keeping Children Safe in Education](#)” are listed in the CTSA 2015 as partners required are to cooperate with local Channel panels.

The 5 R's - Recognise, Respond, Report, Record and Refer

Recognise

The ability to recognise behaviour that may indicate abuse or types of harm or radicalisation to extremist views is of fundamental importance. Signs and indicators of abuse may include disclosure. This isn't always easy to recognise as such, as it may be that the learner is struggling to find the words, is using language the abuser uses for particular actions and body parts, or the disclosure is wrapped in an analogy or euphemism which is difficult to identify. A learner may choose anyone within the organisation to disclose to.

Respond

The appropriate response is vital. No disclosure about possible abuse or neglect should ever be ignored.

Actions to Take

If a child, young person or learner informs you directly that he / she or another person, is concerned about someone's behaviour towards them (this is termed a 'disclosure'), the person receiving information should:

- React calmly so as not to frighten or deter the learner/young person;
- Tell the learner/young person he / she is not to blame and that he / she was right to tell;
- Take what the person says seriously, recognising the difficulties inherent in interpreting what is said by a young person who has a speech disability and / or differences in language;
- Keep any questions to the absolute minimum to ensure a clear and accurate understanding of what has been said;
- Reassure the young person but do not make promises of confidentiality which might not be feasible in the light of subsequent developments;
- Make accurate notes of the disclosure as soon as possible after the event.

Actions to Avoid

The person receiving the disclosure should not:

- Panic;
- Allow their shock or distaste to show;
- Do not ask questions other than to clarify that you have enough information to act;
- Speculate or make assumptions;
- Make negative comments about the alleged abuser;
- Approach the alleged abuser;
- Make promises or agree to keep secrets;

- Discuss the disclosure with others;
- Make contact with parents / guardians.

Report

Report your concerns to the Designated Safeguarding Lead or Deputy (DSP). This should be the default action to take. Concerns of a staff member may not always be apparent as safeguarding concerns. Something may appear at first to be related to Equality and Diversity, a practice issue, or generally about the conduct of a staff member. In these cases, where it is not immediately apparent that the concern could be related to safeguarding, you may wish to discuss it with your line manager. However, if it is likely to be a matter relating to safeguarding, it must be reported to the DSL. Once you have reported your concerns to the DSL the responsibility for taking action lies with them. You are within your rights to check that appropriate action has been taken, but it may not be the responsibility of the DSL to share the details of this with you for the confidentiality of the individual concerned.

Record

You should use the [Safeguarding Concern Record](#) to precisely record what has been alleged, using key phrases and words that the individual used. You are not expected to remember every detail of the conversation, therefore it is not advisory to make notes or any other recording during the initial conversation, you should do so immediately afterwards. You should also record your observations of the individual, as well as your interpretation of the facts as long as you clearly identify when you are doing so. This record should be passed on, in person to the DSL. Confidentiality must be maintained at all times.

Refer

The DSL should gather all of the information to make a referral, if appropriate, by talking to the appropriate person either inside or outside the organisation. Only the DSL should make referrals outside of the organisation unless the child, young person, learner or adult at risk is immediate danger of harm.

[QP38 Safeguarding](#)