



Hand Of Arts Platform
Child and Vulnerable
Adult Safeguarding Policy
2018-2019

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Section 1: Procedures and Policies

1. Introduction

This policy has been created with guidance from **Safe Network**, a website providing safeguarding information for organisations who run activities outside the home, **Online Compass**, a safety self-review tool for any group that works with children and young people.

www.safenetwork.org.uk

www.onlinecompass.org.uk

1.1 Description of Hand Of

Hand Of is an arts platform dedicated to supporting and enriching local communities through organising and programming interdisciplinary arts projects and events.

We aim to reach young people from disadvantaged backgrounds (Pupil Premium Grant, PPG) and in areas of low cultural engagement, as well as school children on the Special Educational Needs and Disabilities (SEND) register and children learning English as an Additional Language (EAL).

We work together with heritage locations, archival institutions, and other arts and community organisations, to deliver engaging inter-disciplinary educational arts projects. These projects positively impact children's educational experiences by allowing them to explore and express their imaginations through collaborating with artists and working with project partners.

Our commissions are an initiation into the limitless possibilities of learning. They aim to equip young people with confidence in their imagination and the curiosity necessary to seek out knowledge and enjoy learning more widely.

The safety and well-being of children is of utmost importance to Hand Of, throughout our work.

1.2 Safeguarding Objectives and Principles

1.2.1 Objectives

- To have a clear, up-to-date safeguarding policy that is available to all families, employees, volunteers and associates of Hand Of
- To ensure all people working with Hand Of know what the procedures are for reporting

concerns or allegations against individuals

- To communicate and discuss safeguarding values with all families, employees and associates of Hand Of
- To provide training to all people working for Hand Of
- To signpost or make training available to partners of Hand Of when required.
- To ensure safe recruitment in a way which deters those who may wish to harm children from becoming involved in Hand Of

1.2.2 Principles

In all our work with children and vulnerable adults we adhere to the following principles: The well-being and safety of each child and vulnerable adult is our primary concern.

- We respect the rights of every child and vulnerable adult we work with.
- All children and adults are treated equitably and sensitively, regardless of gender, ethnic origin, cultural background, sexual orientation and religion.
- Relationships between Hand Of staff and artists, children and adults should be based on mutual trust and respect.
- The feelings and concerns of any child or vulnerable adult, or their parent/carer are listened to and acted upon.
- Hand Of staff have a responsibility to prevent the physical, sexual or emotional abuse of any child or vulnerable adult with whom they come into contact. Any suspicions of abuse are taken seriously and responded to swiftly and appropriately.
- Staff and artists recruitment and selection processes will include Disclosure and Barring Service checks where appropriate.

2. Definitions

2.1 Defining 'Safeguarding'

Safeguarding is defined as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcome.

2.2 Defining 'Abuse'

There are many different types of abuse, including:

- physical abuse,
- verbal abuse,
- emotional or psychological abuse,
- sexual abuse and/or exploitation,
- neglect,
- bullying and discrimination,
- child trafficking,
- female genital mutilation (FGM),
- extremism and radicalisation,
- domestic abuse, including between adults,
- Honour Based Violence (HBV),
- forced marriage.

Abuse does not always require action. In the case of neglect, for example, abuse can be an act of omission.

Victims of abuse may feel frightened, confused, alone, guilty, unloved and ashamed.

All people who work with and for the Hand Of should feel they can seek advice as well as report concerns and discuss issues arising from their contact with children and young people.

2.3 Definitions

Hand Of's activities include activities defined as 'regulated' by the Safeguarding Vulnerable Groups Act 2006.

The term 'child', where used on its own, will include all children and young people under the age of 18.

The term 'vulnerable adult' means those aged 18 years or over who receives is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to protect him or herself from significant harm or exploitation.

The term 'staff' will in this document apply to anyone who works for Hand Of on a permanent, temporary or freelance contract, or as a volunteer.

2.4 Legal Background

Hand Of uses the term 'child' to refer to anyone under the age of 18, as defined by the Children Act 1989 and Working Together to Safeguard Children 2013

The safety of the children we work with is our priority. Although not legally required to do so, we take every reasonable step to ensure a level of care that is comparable to the requirements of the Protection of Children Act 1999.

All policies and procedures in this document will be reviewed on an annual basis or sooner if the need arises.

3. Staff Code of Conduct

It is always possible that someone may misinterpret your actions, however well intentioned. Ask yourself: *"are my actions fair, reasonable, warranted, proportionate, measured, safe and applied equally?"*

All staff should be encouraged to demonstrate exemplary behaviour in order to protect themselves from false allegations.

Do:

- treat all people with respect
- be excellent role models for dealings with other people
- give enthusiastic and constructive feedback rather than negative criticism
- put the welfare of each participant first, before achieving goals
- ensure that someone from the school/establishment, youth organisation or care setting is present at in-school workshops
- ensure that wherever possible there is more than one adult present during activities, or at least that an artist working on their own is within sight or hearing of others i.e. the door is kept open
- follow any relevant procedures required by schools or community groups, for example most schools will expect you to sign in on arrival and some require visitors to wear ID badges
- when in schools, make sure you use the staff toilets, not the children's
- create an environment in which people feel comfortable in pointing out attitudes and behaviours they don't like
- remember that someone else might misinterpret their actions no matter how well intentioned
- be aware that physical contact with a child or vulnerable adult may be misinterpreted
- only touch participants when it is absolutely necessary in relation to the activity and seek agreement from them before doing so
- recognise that special caution is required when discussing sensitive issues with children or vulnerable adults
- be aware of Hand Of's Safeguarding policies, guidance and procedures and operate within those procedures
- challenge unacceptable behaviour and report all allegations/suspicions of abuse
- act responsibly to stay safer while online, being a good role model for younger users and ensure that their online activity does not compromise professional responsibilities, nor bring Hand Of into disrepute.
- remember that an allegation could be made against you
- report all Health & Safety issues without delay
- keep students safe and protect them from physical and emotional harm
- look after yourself
- provide a positive example to others and encourage them to follow
- whenever possible, work with another appropriate adult in all planned activities
- respect everyone's right to personal privacy

- report any gifts you receive and ensure they are not of significant value or intention
- give gifts to students only as part of an agreed reward system
- follow procedures for reporting all allegations against staff, carers and volunteers.

Do not:

- have inappropriate physical or verbal contact with children or vulnerable adults
- allow yourself to be drawn into inappropriate attention-seeking behaviour
- make suggestive or derogatory remarks or gestures in front of any participant
- jump to conclusions about others without checking facts
- exaggerate or trivialise abuse issues
- show favouritism to any individual
- believe 'it could never happen to me'
- take a chance when common sense, policy or practice suggests a more prudent approach
- share online personal information (eg social networking profiles) with children and young people taking part in Hand Of projects.
- use your position to gain access to information for your own advantage or another's detriment
- intimidate, threaten, coerce or undermine anyone
- engage in any sexual activity (even consensual) with a student under 19 years of age with whom you are working
- play games or have physical contact that is inappropriate
- investigate any allegations on your own
- make suggestive remarks or gestures, tell jokes of a sexual nature or engage in inappropriate verbal banter
- create a personal relationship with a student where one does not already exist
- give any personal details about yourself, or others, to a student
- allow any student to access any of your personal accounts on social networking sites
- rely on your good name to protect you - it may not be enough.

4. Participant Code of Conduct

This code of behaviour for children and young people is intended to:

- identify acceptable behaviour for children and young people
- promote self-respect and self-control
- raise children's and young people's self-esteem and self-confidence
- encourage individual responsibility for behaviour and outline the consequences of poor behaviour
- encourage children and young people to recognise and respect the rights of others
- encourage cooperation at all times and in all situations
- promote the values of honesty, fairness and respect
- anticipate and resolve any conflict that may arise
- ensure that children and young people are aware of when sanctions will be put into place.

4.1 Do's and don't's

Children and young people are expected to:

- cooperate with each other
- be friendly
- listen to each other
- be helpful
- follow this code of behaviour and other rules
- use technology safely and responsibly
- have good manners
- join in
- respect each other's differences
- treat staff and volunteers with respect
- report anything that worries or concerns them to a member of Hand Of staff.

Children and young people shouldn't:

- pick on or make fun of each other
- bully each other
- stare at others
- yell or shout at others
- be abusive
- use equipment to be abusive or to cyberbully – for example, by using mobile phones to send nasty messages, taking and sharing photos without permission, sending nasty emails, or "trolling" (leaving unkind comments on a webpage or social network profile).

4.2 Breaching the Code of Conduct

This code of conduct is only useful if it forms part of a process for guiding children and young people to receive appropriate support. It is the responsibility of the Hand Of staff to ensure that all children and young people attending or participating in Hand Of projects are informed of this code of conduct and to confirm with them that they have

seen, understood and agreed to follow it. Children and young people must also be made aware of the consequences if they breach the code.

1. If a child or young person breaches the code of conduct, they will first be reminded of the code, and asked to comply with it.
2. If, following step (1), the child or young person continues to breach the code of conduct, he or she should be referred to a more senior member of staff (e.g. Hand Of Director/DSL, a teacher from their school), who will give them a formal warning.
3. If there is another incident of the child or young person breaching the code of conduct, they will no longer be allowed to attend or participate in Hand Of activities. Parents will be informed.

4.3 Behaviour indicating risk of harm

If Hand Of staff become concerned that a child's behaviour suggests either that he/she may be at risk of significant harm or that he/she may present a risk of significant harm to other children, Hand Of's child protection procedures will be followed and a referral may be made to the local authority children's social care department.

Such a referral would be discussed with the child and his/her family at the earliest possible opportunity except in situations where this would possibly endanger a child's safety or interfere with a police investigation.

5. Roles and Responsibilities

5.1 The Role of the Designated Safeguarding Lead (DSL)

The DSL is a senior member of the leadership team of the organisation or institution responsible, such as the school usually attended by the child(ren) in question. They have a legal responsibility for dealing with child protection issues, providing advice and support to other staff, and liaising with the Local Authority.

The Designated Safeguarding Lead should:

- Receive information from staff, children, parents, carers, teachers and community workers who have Safeguarding concerns and record it
- Assess the information promptly and carefully, clarifying and seeking more information about the matter as appropriate
- Where appropriate consult initially with statutory Safeguarding agencies such as local social services department or health board, or the NSPCC
- Where appropriate make a formal referral to a Safeguarding agency or the police without delay
- Be aware of the local statutory Safeguarding network and the role of the Area Safeguarding Children Committee
- Be aware of relevant contact numbers and addresses
- Have up to date training on Safeguarding awareness

The DSL at Hand Of is **Rob Hughes**. If for any reason he is not available, contact Deputy Safeguarding Lead **Louise Snape**.

5.2 The Role of Schools

Schools are the first point of contact for anyone with concerns about a child. The DSL in a school should be informed immediately of concerns and school procedures should be followed.

5.3 The Role of Partners

All partners of the Hand Of are expected to have an up-to-date safeguarding policy. They are expected to provide their staff and volunteers with training and to adhere to all statutory responsibilities for the safeguarding of children. A copy of the organisation's safeguarding policy and procedures will be inspected as a condition of partnership.

6. Responding to possible abuse

It is not the responsibility of anyone working for Hand Of to decide whether or not abuse has taken place. However, there is a responsibility to act on any concerns through contact with the appropriate authorities.

Details on what constitutes abuse and neglect and how to spot their signs can be found in **Section 2: Types of Abuse** (page 19).

6.1 First point of contact for suspicions or concerns

No Hand Of staff should ever assume sole responsibility for a child or vulnerable adult.

Along with the Hand Of DSL, any relevant person with responsibility will be established at the outset of any project, and all staff informed. If the project takes place in a school or community setting, it may be a teacher, care worker, or school staff member who is the first point of contact.

If any Hand Of staff member suspects that the person with legal responsibility (e.g. the teacher, youth or care worker) is in fact the source of the problem, they should make their concerns known to the Hand Of DSL, who will take appropriate further action. This may include informing another member of staff employed at the site. In situations where there is an immediate and serious danger to the child or vulnerable adult, the Hand Of staff member should immediately inform another member of staff at the site.

6.2 Rights and Confidentiality

It should be remembered that no matter how you may feel about an accusation, both the alleged abuser and the person who is thought to have been abused have the right to confidentiality (**Data Protection Act 1998**). Remember also that any possible criminal investigation could be compromised if inappropriate information is released.

Information will be handled and disseminated on a need to know basis only. This may include:

- Hand Of DSL
- Hand Of Directors
- the parents/guardians of the person who is alleged to have been abused
- the alleged abuser (and parents/guardians, if the alleged abuser is a child)
- the person making the allegation
- social services
- the police

7. Seeking Advice and Reporting

7.1 In every case:

- really listen to the child - allow the child time to speak. Use open questions like "Tell me...",
- seek clarification from the child if necessary but do not press for information
- stay calm and be reassuring
- reassure the child they have done the right thing by telling you
- do not promise to keep information confidential. It is vital that the child receives appropriate support and protection
- do not say that 'everything will be OK now' (don't promise something you cannot deliver)
- offer reassurance to a child that he/she will be kept safe and take immediate action to protect a child. You may wish to say something like:

"I am going to try and help. I'm going to talk to X and they will help you through this. You did the right thing by telling me."

- remain calm, no matter how difficult it is to listen to the child – think of how hard it must be to say it. Some things are very difficult to talk about, you've been chosen because the child feels they can talk to you. If you show anger, disgust or disbelief then the child may stop talking for fear of upsetting you further or feel that your negative feelings are being directed towards them
- talk in a quiet place if possible
- take what you are being told seriously even if you are not sure if you believe it
- do not ask the child to write it down
- do not photograph any injuries
- always record the time and date and make notes on what you noticed and how you reported it
- do not discuss your concerns with the mother/father/carer until you have talked to the DSL
- you can always seek advice from and report to the DSL but issues during school time and in a school should go immediately to the school
- be prepared to confirm verbal and telephone referrals in writing within 24 hours of being made.

7.2 Examples

Examples of scenarios that staff may encounter are given below. Advice is available at any time; please do not hesitate to ask a school or Hand Of DSL, if you are unsure of the appropriate course of action.

7.2.1 You are teaching in a school during school time

- **You think something is wrong with a child and you are not sure what to do** – discuss your concerns immediately with the class teacher & schools DSL. You may be asked to record your concerns with the DSL. Speak with the Hand Of DSL.
- **You see an injury (and you do not have any other information)** – you must report to the class teacher AND seek advice from the school DSL. Speak with the Hand Of DSL.
- **Child reveals information to you which may indicate abuse, neglect, bullying, participation in or victimisation by gang activity** – you must report to the DSL in school AND Hand Of DSL immediately.
- **Child reveals information about contact with an adult or another child which may pose a risk.** One example would be exposure to radicalisation and/or extremist views. You must report to the DSL in school AND Hand Of DSL immediately.

It is likely you will be asked to record any of the above scenarios and subsequent actions. Any safeguarding records should be sent only through safe electronic means.

Write the report timely and accurately. You could be called to court to give evidence whether as a witness of a disclosure or a witness of an incident.

7.2.2 If the situation arises outside of a school, during school time

Report all concerns and seek advice directly from the Hand Of DSL.

8. One-to-one Working

8.1 Safe Venues

Hand Of projects may involve activities with children outside of their usual school premises. All such activities must take place on premises approved in advance. Written approval must be provided by the party ultimately responsible for the well-being of the children in question, for example by the school attended by the participating children.

There must always be a member of staff from the participating school present to monitor the well-being of the children from which they are responsible.

9. E-Safety

Internet use is becoming more prominent in both personal and professional lives, so it is important that all members of staff are made aware that their online conduct can have an impact on their role and reputation.

The policy is not intended to restrict employees activity on social media. Rather, it is to encourage caution and professional judgement - consideration should be given to how a member of staff uses any applications, who they communicate with, and the subject matter of that communication.

Employees and volunteers should be aware that information they share through social media applications, even if they are on "private spaces", remain subject to copyright, data protection, Freedom of Information legislation, the **Safeguarding Vulnerable Groups Act 2006**, and other legislation. These regulations apply both for work and/or personal purposes; whether during work hours or otherwise and wherever social media may be accessed.

Civil, legal or disciplinary action could be taken should an employee be found to have brought the profession or institution into disrepute, or a behaviour or communication is felt to have undermined confidence in their professional abilities.

Inappropriate actions which could result in disciplinary action include:

- inappropriate posting of comments on Facebook about children/participants/pupils or their parents/carers or partnership organisations which divulge personal information
- commenting on or sending inappropriate messages about colleagues which might constitute harassment, discrimination, victimisation or bullying
- posting personal views on issues in the public domain that might lead Hand Of to lose confidence in the employee e.g. racist comments
- joining groups deemed to be inappropriate for employees of Hand Of
- posting illegal, sexual or offensive materials with content based on race, sex, disability, age or religion.

It is crucial that all members of staff and volunteers work within the following professional boundaries, in order to protect themselves and the young people they work with.

9.1 Do Not:

- Engage in activity that could be deemed to be cyberbullying
 - use email, text or social networking to communicate with children and young people.
- This applies to all children no matter what the circumstances are, up to the age of 19.

It can be problematic to ban certain relationships online e.g. a parent may also be a relation, a colleague or a spouse. Any pre-existing relationships which may compromise the above guidance should be disclosed and discussed with Hand Of. At all times the

employee or volunteer is responsible for ensuring that their online relationships are appropriate to their position and the choice of information posted is appropriate to those relationships.

9.2 Do:

- communicate with parents/carers only when making arrangements for lessons/workshops
- avoid mentioning work, your opinions of your colleagues or processes and projects on your own private social media networks
- consider carefully whether it is appropriate to accept colleagues or parents as "friends" on your private social networks. It may be advisable to manage your online "friends" in social networks by creating friend groups that restrict access to certain information and photographs
- have awareness of how technologies can be used to expose individuals to aggressive/violent/sexual/abusive/misleading/scams/self-harm/hatred or commercial behaviours. Children/young people and vulnerable individuals have a heightened risk.
 - *For example – Snapchat recently added a new feature that lets people pay to watch snaps that had apparently disappeared. The Replay feature lets people recover and replay as many snaps as they like if they pay to do so.*
- check your privacy settings on any personal social media sites. Staff/volunteers should always remember that once content is shared online it is possible for it be circulated more widely than intended without consent or knowledge (even if content is thought to have been deleted or privately shared).

9.3 Cyber Bullying

Hand Of, its employees and its volunteers will not engage in activity deemed to be bullying online. Any such activity should be reported to the Hand Of DSL immediately.

Examples of the most common types of cyber-bullying include:

- Text messages — messages that are threatening or cause discomfort; also included here is "Blue jacking" (the sending of anonymous text messages over short distances using "Bluetooth" wireless technology)
- Picture/video-clips via mobile phone cameras - images sent to others to make the victim feel threatened or embarrassed; also included here are apps such as Instagram/Snapchat/WhatsApp/Twitter/Vine
- Mobile phone calls — silent calls or abusive messages; or stealing the victim's phone and using it to harass others, to make them believe the victim is responsible.
- Emails — threatening or bullying emails, often sent using a pseudonym or somebody else's name.
- Chatrooms — menacing or upsetting responses to children or young people when they are in web-based chatroom.
- Instant messaging (IM) — unpleasant messages sent while children conduct real-time conversations online using MSN (Microsoft Messenger)/Yahoo Chat/WhatsApp/kik/

BBM/Facebook Messenger/iMessage.

- Websites — use of defamatory blogs (web logs), personal websites and online personal “own web space” sites such as Facebook, Bebo (which works by signing on in one’s school, therefore making it easy to find a victim) and Myspace
- Public posts that are abusive or threatening, even when not targeted privately or specifically, on apps or sites such as YikYak/Twitter/Tumblr/YouTube/Reddit/4Chan

This list is not exhaustive. New technologies emerge all the time, and with them, new threats.

10. Use of Mobile Phones

Hand Of understands that many children and young people attending workshops and other events will carry a mobile phone. Regarding the safe and appropriate use of mobile phones:

- Mobile phones must be turned off during workshop sessions
- Children and young people taking photos of their peers on their phones should only do so with their consent, and also only share by text, email or on social media with consent
- Staff should never use a personal mobile phone to take photos of children, nor call a child's personal number from their mobile phone.

Hand Of cannot be held responsible for the safekeeping of mobile phones and other similar electronic devices during our projects. Participants are advised to look after their valuables at all times.

10.1 Use of Mobile Phones by Staff and Volunteers

All contact with parents/carers/families should be done via Hand Of work email addresses, or, where this is not possible, Hand Of should be copied into direct communications.

Contact should always be with parents/carers/families or with the relevant school, and never with the child/pupil directly, unless specifically requested by the parents/carers/families or the school. In that event, the parents/carers/families or school should remain copied into all communications.

If there is an immediate need/emergency or safeguarding matter, then with consideration to the risk and this overall policy, staff and volunteers may use their personal mobile phones.

10.2 Use of Mobile Phones by Pupils and Participants

Most children use mobile phones sensibly, but they can be a tool for the sharing of unpleasant photos, bullying behaviour, or grooming by adults. If unpleasant information on a mobile phone is discovered:

- do not delete the inappropriate texts, messages or images
- help and support pupils involved
- do not confiscate the device as this should not remain in your possession. Report the situation to the parent/carer who is collecting the child and to the Hand Of DSL and school DSL. It may be necessary to take the phone to the Headteacher to report the incident
- if there is no one available to help and the matter is serious it is necessary to make a referral to the police.

11. Photographs, Videos and Other Images

11.1 Staff and Volunteers

Photographs or videos are used to celebrate Hand Of's work. Photographs also pose a growing danger to the safety of children, young people and their families, and must be used with caution. Photos can fall into the wrong hands and can be easily manipulated once they are downloaded electronically.

All images taken will be used in a manner respectful of the eight Data Protection Principles. This means images will be:

1. Fairly and lawfully processed
2. Processed for limited, specifically stated purposes only
3. Used in a way that is adequate, relevant and not excessive
4. Accurate and up to date
5. Kept on file for no longer than is necessary
6. Processed in line with an individual's legal rights
7. Kept securely
8. Adequately protected if transferred

All staff and volunteers will adhere to the following:

- Children, young people, families, Hand Of employees, volunteers, participants, and partners have to give written permission for imagery to be used including the use of the material. The Hand Of Imagery Consent Letter and Form are available at Appendix 2. This give parents & carers information so that their decision is well informed.
- Staff and volunteers must not take photographs of any children using a personal camera/mobile phone.
- Children's names will not be used on the website in association with any imagery.
- Photos should only be taken by the person who has been given specific permission by Hand Of. The professional photographer will work in accordance to this policy and the Data Protection Act.
- The Management Team are responsible for ensuring the acceptable, safe use and storage of all images.

11.2 Hand Of Management

As outlined in the **Data Protection Act 1998**, Hand Of will:

- get the consent of all parents/carers of children appearing in the photograph, video, DVD or webcam image before it is created. (Applies where images are clearly identifiable)
- be clear why and what an image will be used for and who will see it
- only use images from a school or another provider, where it has been checked that informed consent has been obtained
- appoint official photographers for large-scale events.

11.3 Photography - Do Not:

- include full names or personal contact details (of the subject) in any image you use
- create or use images of a looked after child without prior consent from Children's Specialist Hubs, Social Care
- use images of children in swimming costumes or other revealing dress – this reduces the risk of inappropriate use

11.4 Photography - Do:

- be aware that children and families fleeing domestic abuse may be recognised via photos/images and their whereabouts revealed to an abusive partner
- be sensitive to what photography/video might mean to any individual person, who has experienced imagery being used to abuse/harass or exploit them previously
- destroy images once consent has expired

12. Administration of Medicines and First Aid

During projects, workshops and activities, children must be observed for signs of tiredness or illness, and appropriate action should be taken when needed.

This may simply mean suggesting that a child has a rest, particularly when singing or playing brass or wind instruments. It may mean involving the school's welfare officer.

As many Hand Of projects and activities will take place off school premises, it may not always be possible to involve the school's welfare officer. Hand Of will train as many staff and volunteers as possible in emergency first aid, and ensure that those who have received emergency first aid training are known to those who have not.

All staff and volunteers will be made aware of the whereabouts of first aid equipment.

In case of serious medical emergency, the parent/carer of the child should be notified immediately. It may be necessary to contact the emergency services, dialling 999, or to accompany a child to hospital. The child should be accompanied by a member of staff or volunteer until a parent/carer arrives.

Emergency contact details for parents/carer will be kept and updated by the DSL of the school.

Section 2: Types of Abuse

13. Abuse: Definition and Indicators

13.1 Understanding Significant Harm

Local authorities have legal justifications for compulsory interventions in a child's life, in order to decide whether they should take action to safeguard or promote the welfare of a child.

To understand significant harm, they may consider:

- the nature of harm in terms of maltreatment or failure to provide adequate care
- the impact on the child's health and development
- the child's development within the context of their family and wider environment
- Any special needs such as a medical condition, communication impairment or disability that may affect the child's development and care within a family
- the capacity of parents to adequately meet the child's needs
- the wider and environmental family context.

For this reason, it is vital that you report all safeguarding concerns to the school and Hand Of DSL. It is often the combination of small bits of information that build the full picture of a child or young person's life.

Identifying a child's needs early is crucial. Children or young people who are being abused or neglected are unlikely to reach or maintain a satisfactory level of health or development, or their health or development will be significantly impaired without intervention or the provision of services.

Below are definitions, indicators and circumstances that may suggest a child is at risk of significant harm.

13.2 Physical Abuse

13.2.1 Definition of Physical Abuse

Physical abuse is deliberately physically hurting a child. This may take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning/scalding, drowning or suffocating a child. Physical abuse can happen in any family, but children may be more at risk if their parents or carers have problems with drugs, alcohol, mental health, or if they live in a house where domestic abuse happens.

Babies and disabled children also have a higher risk of suffering physical abuse. Physical harm may also be caused when a parent/carer fabricates the symptoms of, or deliberately induces, illness in a child.

Physical abuse can also occur outside of the family environment.

13.2.2 Indicators of Physical Abuse

- bruising
- bruised eyes
- unexplained or unusual fractures/ broken bones/ joint injuries
- frequent injuries
- internal injuries
- suffocation – red dots around eyes
- substance misuse – access to drugs
- shaking
- bald patches
- scalds burns – radiator stripes – dipping injury
- poisoning
- bites (these may contain DNA – act ASAP)
- behavioural indicators – cringing or flinching if touched unexpectedly
- dressed inappropriately to hide bruises or other injuries (e.g. long sleeve shirt in the summer)
- violent to other children or animals
- fear of medical help or examination
- refusal to undress for gym
- chronic running away
- self-destructive tendencies
- fear of suspected abuser being contacted
- peer on peer abuse – child on child

13.3 Emotional/Psychological Abuse

13.3.1 Definition of Emotional/Psychological Abuse

Emotional or psychological abuse is persistent emotional mistreatment of a child, and can have severe and persistent adverse effects on a child's emotional development.

The effects of emotional abuse might take a long time to be recognisable. It is most noticeable in the child's interaction with their parents or carers, and could include deliberately being told that they are worthless, unloved, inadequate, or not giving a child the opportunity to express their views, deliberately silencing them, 'making fun' of what they say or how they communicate, exploiting or terrorising a child or young person.

13.3.2 Indicators of Emotional/Psychological Abuse

- physical, mental or emotional development delay
- sudden speech disorders
- overreaction to mistakes
- continual self-deprecation
- extreme fear of any new situation

- inappropriate response to pain
- neurotic behaviour
- delayed language development
- self-harm
- extreme behaviour such as rocking or nail biting
- wetting or soiling
- difficulties with play
- forms relationships with adults not children
- frequent psychosomatic complaints (e.g. headaches, nausea, abdominal pains)
- extremes of passivity or aggression
- seeing/hearing the ill treatment of another
- domestic violence
- parents/carers who withdraw their attention from their child, giving the child the 'cold shoulder'
- parents/carers blaming their problems on their child
- parents/carers who humiliate their child, for example, by name-calling or making negative comparisons.
- over-stretching children (in a manner not appropriate for their age/ development)
- 'cottonwool' children (not allowed/encouraged to be independent at an appropriate level for their age/development)

13.4 Sexual Abuse

13.4.1 Definition of Sexual Abuse

Sexual abuse is forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. Sexual abuse does not necessarily involve a high level of violence, and some children or young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening, or even that it is wrong. Sexual abuse can have a long-term impact on mental health.

Sexual abuse may involve physical contact, including assault by penetration (e.g. rape or oral sex) or non-penetrative acts (e.g. masturbation, kissing, rubbing and touching outside clothing). It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse, including via the internet.

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

13.4.2 Indicators of Sexual Abuse

- physical sexual health problems, including soreness in the genital and anal areas, injuries around genitals, sexually transmitted infections or underage pregnancy
- sexually inappropriate knowledge/language/behaviour for their age
- overly affectionate
- ask others to behave sexually or play sexual games
- wetting or soiling, day or nightmares
- sleeplessness
- self-harm
- eating disorders – loss of appetite or compulsive eating
- psychosomatic symptoms eg abdominal pain
- personality changes - isolated, withdrawn, insecure or clinging
- trying to be 'ultra-good' or perfect, overreacting to criticism
- itching around genitals
- fidgeting
- extreme reactions, e.g. depression, self-mutilation, suicide attempts, running away, overdoses, anorexia
- watching pornography
- regress to younger behaviour patterns – thumb sucking or bringing out discarded toys
- inability to concentrate
- lack of trust/ fear of certain people or of a particular person or fear of a certain place
- being worried about clothing being removed
- female genital mutilation.

13.5 Sexual Exploitation

13.5.1 Definition of Sexual Exploitation

Sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assault. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status.

Consent cannot be given, even where a child may believe that they are voluntarily engaging in sexual activity with the person who is exploiting them.

Child Sexual Exploitation (CSE) doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Children or young people who are victims of sexual exploitation often do not recognise themselves as such.

12.5.2 Indicators of Sexual Exploitation

- Appearing with unexplained gifts or new possessions
- associating with other young people involved in exploitation
- having older boyfriends or girlfriends
- suffering from sexually transmitted infections or become pregnant
- mood swing or changes in emotional well-being
- drug and alcohol misuse
- going missing for periods of time or regularly come home late
- regularly missing school or education or don't take part in education
- displaying inappropriate sexualised behaviour

The 'Say Something' Helpline helps prevent and support vulnerable children/young people and victims of CSE.

Call or Text 11 6000 to talk to someone.
<http://www.stop-cse.org/saysomething/>

13.6 Female Genital Mutilation (FGM)

13.6.1 Definition of FGM

FGM comprises all procedures involving partial or total removal of the external female genital organs or any other injury to the female genital organs for non-medical reasons.

- FGM is very harmful. Unlike male circumcision, it causes long-term mental and physical suffering, difficulty in giving birth, infertility and even death. **FGM is illegal in the UK.**
- FGM is much more common than people realise. It is estimated that there are 74,000 women in the UK who have undergone the procedure, and about 7,000 girls under the age of 16 who are at risk.
- Traditionally practised in Yemen, Oman, Malaysia, Indonesia and the United Arab Emirates, FGM is also practised in 26 countries in Africa, including Somalia, Sudan and Sierra Leone.
- FGM is most often carried out on young girls between infancy and 15 years of age. The age varies according to the community beliefs and can occur at marriage or during the first pregnancy.
- FGM is often referred to as 'cutting', 'female circumcision', 'initiation', 'Sunna' and 'infibulation'

13.6.2 Indicators that FGM has taken place, or may be about to take place

- a girl or young women may confide that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'
- a prolonged absence from the school and a noticeable change in the child's behaviour on their return, including a reluctance or inability to take part in physical activity

- a prolonged family trip to the country of origin. This procedure often takes place over the summer, as the recovery period after FGM is 6-9 weeks.
- mother or sister has undergone FGM
- a child may spend long periods of time away from class during the day – perhaps indicating bladder or menstrual problems
- any girl withdrawn from Personal, Social and Health Education (PSHE) may be at risk as a result of her parents/carers wishing to keep her uninformed about her body and rights
- when a female family elder is around, particularly when she is visiting from a country of origin
- communities/families that are less integrated into British society.

13.6.3 Reporting FGM

It is essential to report FGM.

You should be prepared to provide the call handler with the following information:

- that you are making a report under the FGM mandatory reporting duty
- your details:
 - name
 - contact details (telephone number, email address) and times when you will be available to be called back
 - role and place of work
- details of your organisations DSL:
 - name
 - contact details (telephone number, email address)
 - place of work
- the child's details
 - name
 - age/D.O.B
 - address
- If applicable, confirmation that you have undertaken, or will undertake, appropriate safeguarding actions.

You will be given a reference number for the call, and should ensure that you document this in your records.

Throughout the process, you should ensure that you keep a comprehensive record of any discussion held and subsequent decisions made, in line with standard safeguarding practice. This will include the circumstances surrounding the initial identification or disclosure of FGM, details of any safeguarding actions which were taken, and when and how you reported the case to the police (including case reference number).

FGM mandatory reporting is a legal duty provided for in the **FGM Act 2003** and **The**

Serious Crime Act 2015 requiring social and health care professionals and teachers in England and Wales to make a report to police when a girl under 18 years discloses they have had FGM. The duty applies to any teacher who is employed or engaged to carry out 'teaching work', whether they do or do not have qualified teacher status.

The duty is a personal duty which requires the individual professional who becomes aware of the case to make a report; the responsibility cannot be transferred. The only exception to this is if you know that another individual from your profession has already made a report; there is no requirement to make a second. If, however, you are unsure, or if the person making the report does not belong to a profession captured by the duty, you should report the case to the police, and highlight that a report may have been made previously.

- **Where there is a risk of life or likelihood of serious immediate harm, professionals should report the case immediately to police, including dialling 999 if appropriate.**
- **FGM is child abuse, and employers and professional regulators are expected to pay due regard to the seriousness of breaches of the duty.**
- **Failure to report is a criminal offence under The Serious Crime Act 2015.**

Further information including FGM phrases/terms in various languages is available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/380125/MultiAgencyPracticeGuidelinesNov14.pdf
(Multi-Agency Practice Guidelines: Female Genital Mutilation)

13.7 Neglect

13.7.1 Definition of Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs.

It is likely to result in the serious impairment of the child's health or development. Children who are neglected often also suffer from other types of abuse. Neglect may occur if a parent or carer becomes physically or mentally unable to care for a child. A parent who has an alcohol or drug addiction may be impaired in their ability to keep a child safe or result in them prioritising buying drugs or alcohol over food, clothing or warmth for the child.

Neglect may involve a parent/carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home/ abandonment)
- protect a child from physical and emotional harm or danger
- ensure adequate supervision
- ensure access to appropriate medical care or treatment

13.7.2 Indicators of Neglect

- constant hunger – compulsive scavenging
- emaciation or obesity
- hiding or storing food
- poor personal hygiene
- constant tiredness
- delayed development/not reaching milestones
- living in a dirty or unsafe home
- poor hair/skin
- dilapidated/inadequate clothing
- stealing
- untreated medical problems
- low self esteem
- poor social relationships
- living in an unsafe environment i.e. around drugs, alcohol or violence
- destructive tendencies
- often angry, aggressive or self-harm
- Munchausen's by proxy
- emotional neglect

13.8 Child Trafficking

13.8.1 Definition of Child Trafficking

Child trafficking is the recruitment, movement or transportation of children in order to exploit, sell or force a child to work.

Many children are trafficked into the UK from abroad, but children can also be trafficked from one part of the UK to another. These children are often subjected to multiple forms of exploitation.

Children are trafficked for:

- child sexual exploitation (CSE)
- benefit fraud
- forced marriage
- domestic servitude such as cleaning, childcare, cooking
- forced labour in factories or agriculture
- criminal activity such as pickpocketing, begging or transporting drugs.

13.8.2 Indicators of Child Trafficking

A child that has been trafficked may not be obvious but you might notice unusual behaviour or events. These could include:

- spending a lot of time doing household chores
- rarely leaving their house, having no freedom of movement and no time for playing
- being orphaned or living apart from their family, often in unregulated private foster care
- living in substandard accommodation
- not being sure which country, city or town they're in
- being unable or reluctant to give details of accommodation or personal details
- not being registered with a school or a GP surgery
- having no access to their parents or guardians
- having no documents or falsified documents
- being seen in inappropriate places such as brothels or factories
- possessing unaccounted for money or goods
- being permanently deprived of a large part of their earnings, required to earn a minimum amount of money every day or pay off an exorbitant debt
- being injured from workplace accidents
- providing a prepared story which is very similar to stories given by other children.

Further information including signs an adult is involved in child trafficking, the effects, things you may notice in a child and next steps are available from here:

<https://www.nspcc.org.uk/preventing-abuse/child-abuse-and-neglect/child-trafficking/signs-symptoms-effects/>

The Modern Slavery Act 2015 significantly enhances support and protection for victims, gives law enforcement the tools they need to target today's slave drivers, ensures perpetrators can be severely punished, and includes a world leading provision to encourage business to take action to ensure their end-to-end supply chains are slavery free.

The Stolen Lives Project raises awareness of these issues: **<http://www.stolenlives.co.uk/>**

13.9 Faith Abuse

13.9.1 Definition of Faith Abuse

Faith abuse is the abuse of a child because of a belief in spirit possession.

This abuse/neglect may occur in the household where the child lives, or in a place of worship. The abuse can be one or many forms of abuse: physical, emotional/psychological, sexual, or neglect.

13.9.2 Indicators of Faith Abuse

Previous indicators identified from physical, emotional/psychological, sexual or neglect abuse include:

- wider social/community consensus that witchcraft exists, propagated by faith or influential leaders. This includes beliefs in demons or the devil acting through children or leading them astray (traditionally seen in some Christian believers); the evil eye or djinns (some Islamic contexts); and dakini (some Hindu contexts).
- child(ren) reporting that they are or have been accused of being 'evil', and/or that they are having the 'devil beaten out of them'
- belief that the child is the 'victim' of a supernatural force and the abuse is designed to 'save' him or her by 'driving out the devil' or other evil spirits – perpetrators may believe that they are doing the right thing
- the child's 'possession' accounts for misfortune befalling on those nearest to him or her
- the fear the child may harm or kill their parents, family, relatives etc
- abusers target children that are 'different' because they have a disability or learning difficulty, an illness, or are exceptionally bright
- ritual or multi-murders, where the killing of children is believed to bring supernatural benefits or the use of their body parts is believed to produce potent magical remedies
- use of belief in magic or witchcraft to create fear in children to make them more compliant when they are being trafficked for domestic slavery and sexual exploitation

These beliefs are not confined to one faith, nationality or ethnic community. Examples have been recorded worldwide among Europeans, Africans, Asians and elsewhere, as well as in Christian, Muslim, Hindu and Pagan faiths, among others.

Not all those who believe in witchcraft or spirit possession harm children.

13.10 Extremism and Radicalisation

Following on from the **Counter-Terrorism and Security Act 2015**, the Government document, "Protecting children from radicalisation: 'the prevent duty'", all schools must have "due regard" to the need to prevent people from being drawn into terrorism and extremism.

13.10.1 Definition of Extremism

Extremism is a vocal of active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

13.10.2 Definition of Radicalisation

Radicalisation is the act or process of encouraging extremist views or actions in others, including forms of extremism leading to terrorism.

Preventing terrorism means challenging extremist (and non-violent) ideas that are also part of the terrorist ideology. Prevent will also mean intervening to stop people moving from extremist groups or from extremism into terrorist-related activity. There is no single way of identifying who is likely to be vulnerable to being drawn into terrorism.

13.10.3 Indicators of Radicalisation

- Becoming distant or showing a loss of interest in friends or activities
- possession of materials or symbols associated with extremist causes

Protecting children from these risks is similar to protecting them from harm and abuse.

Factors that make a student vulnerable include:

- pressure from peers, other people or the internet
- influence from other people or the internet
- crime against them or their involvement in crime
- anti-social behaviour and bullying
- family tensions
- race/hate crime
- lack of self-esteem or identity
- personal/ political grievances

Discuss any concerns with the school's DSL and Hand Of's DSL

14. Other Abuses/At Risk Concerns

14.1 Gang Activity

14.1.1 Definition of Gang Activity

A gang is a group of 3 or more people, who have a distinct identity, which commits general criminal or anti-social behaviour as part of that identity, and uses (or is reasonably suspected of using) firearms or knives.

14.1.2 Indicators of Gang Activity

Children and young people in gangs may be subjected to actual or threats of physical/sexual violence, including against their family members.

14.2 Teen Partner Abuse

14.2.1 Definition of Teen Partner Abuse

One in five young men and one in ten young women think that abuse or violence against women is acceptable. According to an NSPCC study of 13-17 year olds, 25% of girls and 18% of boys reported some form of physical partner violence; nearly 75% of girls and 50% of boys reported some form of emotional partner violence; and 33% of girls and 16% of boys reported some form of sexual partner violence.

14.2.2 Indicators of Teen Partner Abuse

- isolation – no longer spending time with a usual circle of friends
- constantly checking a mobile phone, and getting upset when asked to turn it off
- being withdrawn or quieter than usual
- being angry or irritable when asked how things are
- changing their appearance, clothes, make up or style
- making excuses for a boyfriend or girlfriend.
- physical signs of injury, such as unexplained scratches or bruises
- truancy, falling grades
- self harm.

14.3 Substance Misuse

14.3.1 Definition of Substance Misuse

The risks of substance misuse increase significantly when:

- the substance use is unusual in view of the age of the young person
- the misuse is becoming chaotic and risky
- the misuse is leading to crime or exploitation by others, including sexual exploitation
- the misuse is a serious danger to health
- the young person is caring for another child/young person and using substances
- an adult is involved in facilitating the misuse.

14.3.2 Indicators of Substance Misuse

- being left home alone or with inappropriate carers
- emotional difficulties
- developmental delay
- feelings of gloom, isolation, social isolation, not taking friends home
- self harming/suicidal behaviours
- school problems (truancy, levels of attainment dropping, difficulty in concentrating)
- offending behaviour
- neglect
- high levels of accidents in the home possibly due to poor parental/carer supervision
- tendency to keep secrets
- attachment issues and behavioural difficulties
- family isolation e.g. moving schools, relationship conflict, domestic abuse
- extreme anxiety and fear (fear of hostility, violence)
- children with disabilities have an increased risk to their safety
- inconsistent approach to management of a child/young person's medication
- role reversal and confusion e.g. protecting others, acting as a mediator and/or confidant, taking on an adult role
- the long term effect of substance misuse with continued absence, emotional or physical unavailability of a parent/carer can be very detrimental to children and young people.

14.4 Domestic Abuse

Children and young people are at risk of suffering long-term psychological and emotional damage from domestic abuse as a result of:

- witnessing the abuse perpetrated against another
- experiencing the fear and anxiety of living in an environment where abuse occurs
- becoming actual victims of abuse and neglect
- taking on the role of the abuser
- witnessing physical abuse against pets
- being controlling through use/ tone of voice.

14.5 Forced Marriage

14.5.1 Definition of Forced Marriage

While forced marriage affects mainly girls and young women, 15% of victims are male. Force can be in the form of emotional pressure by close or extended family members. This may include threatening behaviour, abduction, imprisonment, physical violence and/or rape. In extreme cases, this can result in murder.

14.5.2 Indicators of Forced Marriage

- absence and persistent absence
- fear about forthcoming school holidays
- surveillance by siblings or cousins at school
- decline in behaviour, engagement, performance or punctuality
- being withdrawn from school by those with parental responsibility
- not allowed to attend extra-curricular activities
- prevented from going onto further/higher education

There are often children of forced marriage, who live in this potentially stressful environment.

14.6 Mental Ill-health

14.6.1 Definition of Mental Ill-health

Children can experience a range of mental health conditions, some of which can be life-threatening, including:

- Obsessive Compulsive Disorder (OCD)
- Post-Traumatic Stress Disorder (PTSD)
- social phobia
- generalised anxiety
- Attention Deficit Hyperactivity Disorder (ADHD)
- autism spectrum disorder
- Anorexia nervosa
- Bulimia nervosa
- Binge-eating disorder
- depression
- Bipolar disorder
- Schizophrenia

14.6.2 Indicators of Mental Ill-health

- mood/behaviour changes
- intense feelings
- difficulty concentrating

- unexplained weight-loss
- physical symptoms e.g. headache/stomach-ache
- substance misuse
- self-harm

Some children whose parent/carer has a mental illness may:

- withdraw into themselves, become anxious
- struggle at school, find it hard to concentrate on their school work
- may find it very difficult to talk about their parent's illness or their problems especially when they have no explanation of their illness. This may stop them from getting help.
- feel ashamed of their parent's illness and worry about becoming ill themselves
- be preoccupied with fears of 'catching' the illness
- show signs of a similar illness or severe emotional problems
- have physical health problems.

14.7 Self-harm/Suicide

Any child or young person who self-harms or expresses thoughts about this or about suicide must be taken seriously. Deliberate self-harm is a common precursor to suicide, and young people who deliberately self-harm may kill themselves by accident.

15. Other Issues to be aware of

15.1 Young Carers and Disability in the Family

15.1.1 Definition of a Young Carer

A young carer is a child or young person under the age of 18 who provides substantial care for a family member or family members that have a chronic illness, mental health issues, a disability, and/or substance misuse issues.

Caring responsibilities can include:

- cooking, cleaning, shopping, self/sibling care, paying bills, making appointments, writing letters
- washing, moving, dressing, giving medication
- listening to problems, keeping company, calming or reassuring
- first aid, phoning ambulance, taking to hospital, making arrangements

Support for young carers will, in most cases, be available through the local council, the school, or local statutory bodies.

15.1.2 Disability in the Family

Research suggests that disabled children are:

- at a greater risk of physical, sexual and emotional abuse and neglect than non-disabled children
- at greater risk of abuse if they have behaviour/conduct disorders, learning difficulties/disabilities, speech and language difficulties, health-related conditions and deaf children.
- can have limited opportunities to seek help from someone else
- can be at greater risk if living in residential care
- more likely to experience bullying.

If a parent or carer becomes ill or disabled, children/young people may feel:

- frightened, insecure, uncertain
- anger, guilt, depression and/or anxiety
- fearful of the unknown
- the ups/ downs of their parent's emotions
- their needs are not being attended to (very young child)
- the pressure of being powerless to help (older child).

Information on how to improve protection for disabled children is available here:
<https://www.nspcc.org.uk/services-and-resources/research-and-resources/2014/right-to-be-safe/>

15.2 Bereavement and Loss

Bereavement and loss is experienced by all of us. Recognising that you may be experiencing this whilst trying to support or assist a child/young person/family is crucial. Take care of yourself and ask for support by talking to a trusted family member, friend, colleague, or the DSL.

15.2.1 Types of Loss

- Death of relative/friend
- miscarriage/abortion
- death of a pet
- parent in prison
- parental separation
- young person in or taken into care
- moving home/school/country etc.

Additional factors to be aware of around bereavement and loss are:

- traumatic bereavement
- death/separation linked to terrorism
- death/separation linked to gang activity
- death/separation resulting in/occurring whilst child/young person is in care
- language barriers
- learning disability
- cultural differences.

15.2.2 Indicators of Bereavement and Loss

0-2 years

- no concept of death
- will notice the absence of a parent between 4-7 months
- anxious about separating from parent
- acts in ways they did when they were younger (regressive behaviour)
- feeding and sleeping difficulties.

2-5 years

- sees death as reversible
- may feel they have caused the death
- may make up fantasies to fill gaps in knowledge
- feels abandonment and separation
- despair
- angry about changes to their daily routine
- sleep problems
- complaints such as tummy aches.

5-11 years

- starts to understand the finality of death at about eight years old
- withdrawal/sadness/loneliness
- gets angry more often, difficulty concentrating at school
- tries to be the perfect child
- regressive behaviour
- tries to be brave and control things
- feels different to their peers, struggles to express him/herself verbally.

The impact of bereavement and loss on children and their families can be massive. It can affect their health, financial situation, safety, contribution to society, education, and ability to enjoy life.

- be honest
- use plain language
- encourage questions
- reassure them
- ask them to tell their story
- facilitate opportunities to meet/share with others who have had similar experiences.

Often, young people express their grief physically, rather than verbally. They tend to grieve in spurts and may periodically seem unaffected. They need to be reassured that it is ok to have fun, as well as being supported to understand their often conflicting emotions. Young people may experience denial, guilt, anger, idealisation, panic, psychosomatic symptoms, numbness, loneliness, worry, or confusion.

15.2.3 Loss Through Imprisonment

In England and Wales, each year, around 200,000 children have a parent who is sent to prison. Many children have siblings or other family members in prison. 41% of people who offend have experienced childhood bereavement.

16. Contact and Emergency Numbers

In emergency situations (a child in immediate risk of harm or a security incident; yours or others safety is threatened), call 999.

In non-emergency situations, call 101.

Sexual Exploitation

The 'Say Something' Helpline: call or text 11 6000, visit www.stop-cse.org/saysomething.

FGM

If a girl under 18 years of age discloses they have had FGM, you must inform the DSL and call 101 to disclose this to police.

If you believe there is a risk or likelihood of serious immediate harm call 999.

Child Trafficking

The Stolen Lives Project: <http://www.stolenlives.co.uk>

Extremism and Radicalisation

Anti-Terrorist Hotline: 0800 789 231

Department for Education helpline: 020 7340 7264

If you are concerned about extremism, you can also email:
counter.extremism@education.gsi.gov.uk

To report online material promoting terrorism or extremism, visit www.gov.uk/report-terrorism.

Gang Activity

NSPCC gang activity helpline 0800 800 5000

<https://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/staying-safe-away-from-home/gangs-young-people/>

Domestic Abuse

Domestic Abuse Helpline: 0808 808 2241

Email: help@sheffielddact.org.uk

Website: www.sheffielddact.org.uk

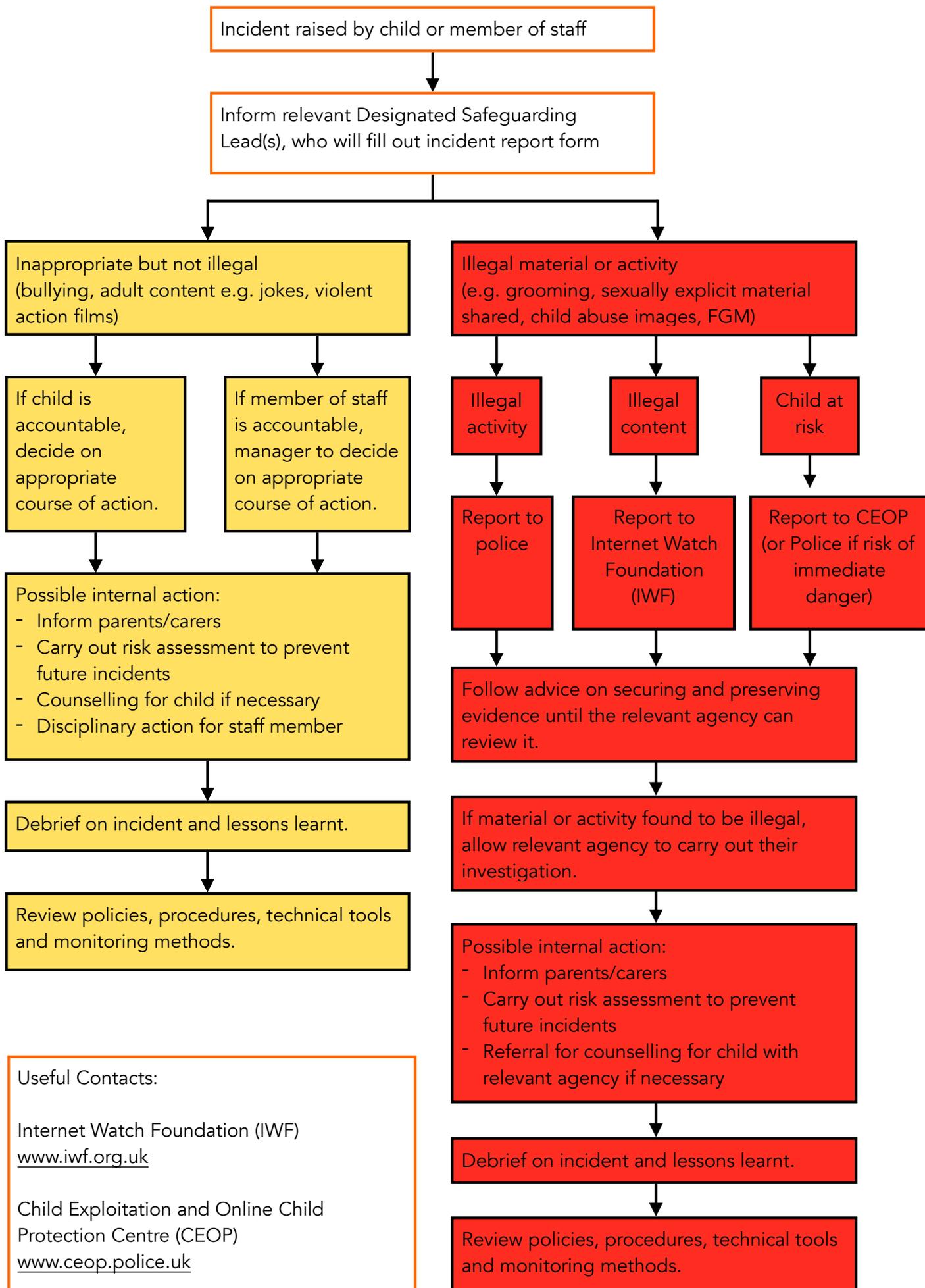
Appendix 1

Reporting Incidents Flow-chart

The flow chart on the page below provides an overview of the process of reporting an incident.

In the event of an incident, you should consult the full Safeguarding Policy for further information, as well as this flow chart.

If for any reason you are unsure of the right course of action, consult the DSL.



Useful Contacts:

Internet Watch Foundation (IWF)
www.iwf.org.uk

Child Exploitation and Online Child Protection Centre (CEOP)
www.ceop.police.uk

Appendix 2

1. Image Consent Letter

The Hand Of Image Consent Form is included below as a PDF. Other file formats are available on request from the DSL.



Hand Of Arts and Education Charity

Image Consent Form

At Hand Of, we take photographs, videos and recordings to help us celebrate the fantastic work that is being created by the children and young people taking part in our projects. To comply with the Data Protection Act 1998 and the EU General Data Protection Regulation, we need your permission before we can photograph or make any recordings of your child.

Name of Child:

I agree that Hand Of Ltd. and its partners [XXXXXXXX] may use photographs/videos/recordings of the above named, for (delete as appropriate):

- | | |
|---|----------|
| Their promotional material e.g. flyers/posters/video/audio | Yes / No |
| Their websites | Yes / No |
| Their social media profiles (including Facebook, Twitter and Instagram) | Yes / No |
| Staff training | Yes / No |
| Concerts/recordings for general release | Yes / No |

In the event of the media (e.g. newspaper or news programmes) attending one of our events:

Are you happy for your child's image and details (e.g. name/age/school) to appear in the media? Yes / No

This form will remain valid until July 2020. You can revoke your consent at any point by contacting info@handof.co.uk to do so. You can also contact us to request a copy of our Safeguarding Policy.

Signed:

.....

Name of parent/guardian:

Date: