



Clovelly House

Policy & Procedure Child Protection

(Quality Standard 7)
Regulation 12)

February 2022



Clovelly House Policy

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1. Rationale

“Children are amongst the most vulnerable members of society: they are liable to abuse, exploration and deprivation. The previous life experiences of many children in care have exposed them to increased risks of victimisation. They have the right to expect and receive protection from within the childcare system” (Social Services Inspectorate Quality Standards).

Safeguarding children living in children’s homes is particularly challenging and requires staff to be aware of the need to provide robust protection and to know what action to take if abuse is alleged or suspected.

All adults who work with and on behalf of children are accountable for the way in which they exercise authority, manage risk, use resources, and safeguard children. These adults have a duty to keep children safe and to protect them from sexual, physical, emotional abuse and neglect.

Most people who work with children are only concerned about doing the best for them. There are however, some adults and other children who abuse them.

Effective child protection practice safeguards children and protects the individual staff members that have responsibility for them. Adherence to procedures will protect staff because it informs what action should be taken if abuse occurs or is suspected.

This policy should be read in conjunction with:

- [Care Act 2014](#)
- [Safeguarding Vulnerable Groups Act 2006](#)
- [Health and Social Care Act 2012](#)
- [Mental Capacity Act 2005](#)
- [Equality Act 2010](#)
- [Human Rights Act 1998](#)
- [Data Protection Act 2018](#)
- [Public Interest Disclosure Act 1998](#)
- [No Secrets 2000, a government White Paper](#)

2. Definitions of Child Abuse

Definition of a child

For the purposes of this policy, a child is a person under 18 years.

Definition of abuse

Child abuse occurs when a child is neglected, harmed, or not provided with proper care. Children may be abused in many settings, in families, in an institution or community setting, by those known to them, or more rarely, by a stranger. There are different types of abuse and a child may suffer more than one of them. Also abuse may take place on a single occasion, or it may take place repeatedly over time.

Types of abuse

Physical abuse

is the deliberate physical injury to a child, or the wilful or neglectful failure to prevent physical injury or suffering. This may include hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating confinement to a room or cot, or inappropriately given drugs to control behaviour.

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on a child’s emotional development. It may involve conveying to a child that he is worthless or unloved, inadequate, or valued only so far as he meets the needs of another person. It may involve causing a child frequently to feel frightened or in danger or the exploitation or corruption of a child. Some level of emotional abuse is involved in all types of ill treatment of a child although it may occur alone. Domestic violence, adult mental health and parental substance abuse may expose a child to emotional abuse.



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Sexual abuse involves forcing or enticing a child to take part in sexual activities. The activities may involve physical contact including penetrative and non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

In recent years many who have sexually abused children have used electronic technology such as the internet or mobile telephone, (See E-safety Policy).

Neglect is the persistent failure to meet a child's physical, emotional and physiological needs, likely to result in significant harm. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to ensure access to appropriate medical care or treatment, lack of stimulation or lack of supervision. It may also include non-organic failure to thrive (faltering growth).

Institutional abuse

Institutional abuse is either abuse by adults working in a position of trust, either employed or voluntary capacity or an organisation or association that has responsibility for or provides activities for children. The organisation or association acts as the organisational base bringing adults and children together which provides the opportunity for exploitation by abusers. Institutional abuse often involves many children over a long period in time.

Child protection in specific circumstances

Children living away from home in schools, children's home's, juvenile justice centres, or other institutions may be vulnerable to abuse by their peers. It may involve sexual, physical and/or emotional abuse, and any form of bullying. It is the responsibility of the agencies caring for the children to safeguard them from abuse, and, if it does occur, to take whatever action may be needed to protect them from further harm. (See 'Positive Behaviour Management Policy').

Abuse within institutions may precipitate children running away from them. (See 'Missing from Care Policy').

Children whose behaviours place them at risk of significant harm

A child whose own behaviours, such as alcohol consumption, or consumption of illegal drugs/substances, whilst placing the child at risk of significant harm, may not necessarily constitute abuse as defined for the purpose of these procedures. If the child has achieved sufficient understanding and intelligence to be capable of making up his own mind then the decision to initiate child protection action in such cases is a matter for professional judgement and each case should be considered individually in accordance with the guidance established by Leicestershire Safeguarding Authority. The police are responsible for dealing with any associated criminal acts or behaviours which are of a criminal nature.

3. Principles underpinning the Child Protection Policy

Staff should reference the principles of working in partnerships with families to safeguard children. Alongside these principles staff will ensure that:

- The child's welfare is the paramount consideration
- The child's identity in terms of religion, ethnicity, disability, culture and sexual orientation is valued
- Children have a right to be heard to be listened to and to be taken seriously, they should be consulted and involved in all matters and decision that affect their lives in a manner which is sensitive to their age and level of comprehension
- A child's privacy will be respected in a way which is consistent with child protection practices
- The rights, responsibility and role of parents and extended family members will be respected and promoted, providing that this does not compromise the welfare or safety of the child
- Staff working in the home will be aware of the signs and symptoms of child abuse, must attend relevant training opportunities and be familiar with the Leicestershire Child Protection and Safeguarding procedures
- Staff will endeavour at all times to work in partnership with parents and all members of the multi-disciplinary team
- Staff will be involved in regular risk assessment and the implementation of actions required to manage risks associated with protecting children



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- Staff will communicate with their line manager in an unambiguous way when child abuse occurs, is alleged or suspected
- Incidents or suspicions of child abuse will be promptly and accurately recorded.

4. Action to be taken by staff if abuse has occurred, is alleged or suspected

- Assess if the child is in immediate risk and take action whatever action is necessary to ensure their safety. These decisions will be made in consultation with the Clovelly Child Protection Officer DSL, Line manager, Social Worker, EDT or police where applicable
- Without revealing unnecessary detail, report and advise colleagues on shift of any incidents. Make a written record by completing the required child reporting procedure. These incidents will be categorised as high risk and must be dealt with accordingly. In the absence of the Social Worker, the EDT, (After Hours), team should be advised. This communication must be done as soon as possible and within 24 hours. It is the Social Worker's responsibility to initiate a child protection investigation and put in place a Child Protection Conference, arrange a medical and advise parents. When a decision has been made to initiate a Child Protection Conference a Discussion must take within 24 hours from referral. This need not necessarily involve a meeting and can be conducted by telephone. During this Strategy Discussion it will be agreed and specified whether a single or joint investigation is necessary and who will have responsibility for co-ordinating the Joint Protocol Investigation. A case conference will be convened when the criteria set out in Leicestershire Safeguarding Board's Policy and Procedures and has been met. Initial Child Protection Conferences should take place within 15 working days of the referral to the Social Worker or from the Strategy Discussion.
- If an incident occurs on an evening, weekend or bank holiday, the Emergency Duty team, (EDT), must be advised and it will take responsibility for initial assessment and Initiating Child Protection Procedures as necessary.
- Staff will ensure that information is passed on to each staff member in both written and verbal form via incident reports, daily logs and handover discussions
- If a child makes an allegation of abuse by a professional, carer or volunteer refer to the 'Whistle Blowing Policy' and Leicestershire Safeguarding Board Policy and Procedures
- All suspected, alleged or actual incidents of abuse including those where the child in the home is the alleged abuser, are dealt with in accordance with the Leicestershire Safeguarding Policy
- Any child that has been involved in abuse, including sexual exploitation, is provided with information, support and counselling

5. Other safeguarding concerns

Other safeguarding concerns may include Sexual exploitation of children, Female Genital Mutilation, Forced Child Marriages, Radicalisation and Extremism, Child Labour and Child Soldiers. Staff members are required to be vigilant in the protection of Young people and to report any concerns about safeguarding through the relevant channels.

Female Genital Mutilation, FGM

At Clovelly House will believe that all our pupils should be kept safe from harm. Female Genital Mutilation affects girls particularly from North African countries, including Egypt, Sudan, Somalia and Sierra Leone. Although our schools have few children from these backgrounds and consider girls in our school safe from FGM, we will continue to review our policy annually.

If staff members become concerned about the possible incidence of FGM amongst a pupil or pupils, all staff members will comply with the statutory guidance and refer to the local safeguarding board.



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For further information on types of abuse go to the NSPCC website, www.nspcc.org.uk

6. Dealing with Disclosure

- Many children admitted into residential care will have suffered abuse prior to admission. Placement in a children's home may provide the child with the opportunity to disclose past abuse. Staff in children's homes should aim to create a safe environment where past abuse and current abuse or fears of abuse can be disclosed
- Staff should be aware of the possibility of disclosure about abuse and feel comfortable dealing with such a discussion
- Care staff members have a supportive role and not an investigative role. The duty to investigate is the responsibility of the Social Worker and the Police
- When a child starts to make a disclosure to a member of staff, the member of staff should find a quiet private location in which the conversation can take place without interruption. Consideration could be given to having the conversation in a venue outside the home. Whenever possible, the Social Worker should also be present to try and alleviate the child having to repeat their disclosure on a number of occasions. Staff need to ensure that no action is taken that could compromise an investigation of a criminal matter
- The child should be made aware that the staff member cannot keep a disclosure about abuse 'secret' or confidential to themselves. Staff should also explain their role and that a joint protocol investigation will require more detailed information and needs to be undertaken by a specially trained Social Worker and Police at a later date. The discussion should be recorded promptly, accurately and ask questions only on points of clarification
- When recording the conversation, the member of staff should state exactly what was said to avoid ambiguity. For instance, 'inappropriate sexual touch' is unlikely to be a sufficiently accurate description of what a child has said. Record exactly what the child says in his/her own words
- The member of staff concerned should not challenge the child's story or pass judgement. The member of staff should emphasise what action will be taken to keep him/her safe from future abuse
- The child should also be reassured that they did the right thing when deciding to make the disclosure

7. Promoting a safe and protective environment at Clovelly House

The home has a Statement of Purpose in which will accurately describe what the home to do for the children in our care. Within the home's Statement of Purpose there is information on the number of children accommodated, the age range and gender of the children and how the home will safeguard the children. Central to creating a safe environment is effective and constant supervision of the children by staff. When required staff should monitor children outside the home by keeping in contact with them by phone or carrying out face to face daily checks on them (age and consent applicable)

Staff working at Clovelly will receive training on child protection and have undertaken crisis intervention training. This model provides staff with a framework to prevent crisis situations and manage challenging behaviour.

On admission of a child/young person to the home staff will follow the admission procedures for the home:

- Prior to admission request of information about the child to commence the assessment of their needs, behaviours and any associated risks
- Provide a high level of supervision for the child during the first week. This is to allow time for the child to become familiarised with the day to day routine in the home and get to know the staff and other residents. This promotes the child's safety and protection and enables staff to gain a more informed assessment of the child
- Complete a thorough introduction to the home. This will include providing the child with a children's booklet, which includes information on child protection, fire safety and complaints procedure etc. All children must also be advised of the need to work with staff and other residents to create a safe and pleasant living environment



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8. Good practice which will promote high standards of safeguarding in Clovelly House

- Each child will have an identified key worker. It is the responsibility of these workers to ensure that they spend time with the child, allowing him/her the opportunity to share any worries or concerns s/he may have. These discussions will be recorded in key work sessions and copies of these sessions will be held in each child's file. It is also their responsibility to provide the child with information and guidance on how to keep them safe both in the home and in the community
- Key work staff will also ensure that children have access to adults to whom the child can trust outside of the home i.e. the Social Worker, Mentor, Independent Visitor. Added to this staff will ensure that children know how to contact outside services such as 'Voice of Young People in Care,' (VYPC), Child Line, and Children's Law Service Freephone helpline
- Children will be encouraged to attend regular young people's meetings with other residents and will be encouraged to discuss issues about care and protection and keeping themselves safe. The children will be encouraged to take a minute of these meetings, but if not staff should ensure that a minute is taken and kept on file
- Children should be encouraged to attend and participate in discussions and decision-making processes regarding their care and protection
- Children will be encouraged to wear appropriate clothing at all times when living in communal areas. This is for the safety and comfort of both children and staff
- Children will not be allowed to have peers in their bedroom unless there is appropriate supervision by staff members
- Team meetings will be established on a regular basis in order to raise any issues of concern about the children and develop clear management strategies when required
- The staff team will be aware that good team work and effective communication, both verbal and written, between team members and other professionals, mainly the child's Social Worker is critical to effectively safeguard children. Central to this is the need for open transparent practice
- Staff will complete ongoing assessments of the children and attend LAC reviews, Case Conferences, Strategy Meetings, Core Group Meetings and Risk Management Meetings in respect of the child. Records of these minutes should be available as promptly as possible and within procedural time-scales
- Staff will work alongside the Social Worker in order to ensure that each child's Care Plan is followed
- Staff will participate in detailed hand-overs on a daily basis. This discussion will include any concerns or incidents to do with the child's safety. Staff will then formulate a plan and record how the shift will be managed in order to minimise risk
- Staff will be aware at all times of the whereabouts of their colleagues and the children. This is necessary to ensure protection and support for each other
- A detailed risk assessment will be completed in respect of each child on admission. This will highlight the vulnerability and risk particularly for each child, A copy will be placed in the child's Individual File and also the home Risk Assessment file. It is the residential staff's responsibility to ensure they have read the assessments and carry through the recommendations. These assessments will be kept continually under review
- A detailed individual Crisis management Plan, (ICMP), will be completed in respect of each child on admission. This will highlight how best staff can engage with the child in times of crisis. A copy will be placed in the child's file and in the home's ICMP file. It is the residential staff's responsibility to ensure they have read the assessments and carry through the recommendations. These assessments will be kept continually under review
- Staff will control access to the building by ensuring that they answer the front door and request visitors to sign in and out of the visitor's book
- On any occasion when pornographic magazines or material are found these should be handed over to the Line manager and the incident reporting procedure followed
- Staff will ensure at all times that the environment is free from weapons. All household appliances e.g. irons, knives, screwdrivers or other implements that may be used to inflict harm will be stored securely at all times, (TCI Policy). However, this must not limit children's access to meals and snacks



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- Staff will respect the child's right to privacy. Staff will knock on the child's door before entering his/her bedroom. Staff will only enter the child's bedroom in the presence of another worker or if the door is left open. The only exception to this is in the case of an emergency i.e. self-harm, fire setting or concern that a child is being abused or is ill. In these circumstances the staff member will enter the room and call for immediate assistance
- Staff will at all times be aware of issues regarding safe care, touch/physical contact with children in the home. Staff need to be aware of risk factors and ensure appropriate boundaries are in place, balancing this risk alongside the child's rights and need for appropriate physical attention/affection
- Staff will encourage the children to adhere to routines in the home. This includes bedtimes, mealtimes and keeping appointment, attending school. Taking care of the fabric of the home and looking out for each other. Children will also be asked to contribute to their own safety by keeping staff informed about where they are and what activities they are involved in outside the home.
- Staff will consistently monitor, record and report on instances of concern in respect of 'Looked After Children'. This will include instances of sexually harmful behaviour, sexual exploitation, bullying, fire setting, solvent/drug/alcohol abuse, violence and criminal damage.
- Staff should not bring any child to their own home or provide any child with their personal phone numbers or e-mail addresses.
- Staff will be aware of and understand the organisations confidentiality policy. Staff will have access to highly sensitive and private information regarding children and their families. This information must be stored appropriately and kept confidential at all times and is only shared when it is in the interest of the child to do so
- Staff accept that they have a responsibility to report any issues, incidents or concerns regarding Child Protection where a member of staff may be involved and are aware of and understand the written Policies and Procedures on Whistle Blowing
- Staff will at all times present as positive role models for the children in their care
- Staff are aware of the procedure for dealing with complaints by children and young people

9. Monitoring, quality assurance and training

All suspected, alleged or actual incidents of abuse will be recorded in the child's personal file. These files will be monitored and quality assured through the supervision and auditing processes

- The incidents of child abuse and bullying will be recorded in each child's monthly report and the overall incident report to the Principal/Manager or DSL
- The effectiveness of this policy will be reviewed on an ongoing basis
- The Child Protection Policy and Procedures will be part of on-going training for staff and an integral part of induction training
- Clovelly House will provide on-going training to enhance the knowledge and skills of residential care workers to enable them to deal with child protection within the home, this will be managed through induction training, supervision and staff appraisal
- Staff have a responsibility to gain access to and familiarise themselves with literature on child protection
- Staff and children will learn together about how to create a safe and protective environment in Clovelly House.



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10. Additional Reading

Keeping Children Safe is everybody's business – How you can help if you think a child is being harmed'. Local Safeguarding Children Board (Leicestershire & Rutland)
Leicestershire Safeguarding Board Policies and Procedures
'The Children's Homes Regulations' (2015)
'Working Together to Safeguard Children', (HM Government, July 2018) Update - January 2021 (Post EU **Exit**)
'Keeping Children Safe in Education', (DfE September 2018) (September 2020)
Guidance for Safer Working Practice for Adults who work with Children and Young people in Education Settings, (DfE 2008, rev Safer Recruitment Consortium Oct 2015)

Clovelly House 'E-safety policy'
Clovelly House 'Children Missing From Care Policy'
Clovelly House 'Behaviour Management Policy'
Clovelly House 'Sexual Exploitation Policy'
Clovelly House 'Self-Harm Policy'
Clovelly House 'Preventing Extremism and Radicalisation Policy'
Clovelly House 'Anti-bullying Guidance'
Clovelly House 'Managing Allegations Policy'
Clovelly House 'Safer Recruitment Policy'
Clovelly House 'Whistleblowing Policy'
Clovelly House 'Positive Behaviour Management Policy'
Clovelly House School Policies and Procedures



Signs and Symptoms of abuse:

PHYSICAL	SEXUAL	EMOTIONAL	NEGLECT
Physical Marks (Bruises/fractures)	Physical marks Sexually transmitted diseases	Attachment issues Developmental delay	Medical history Developmental Delay, failure to thrive Inappropriate clothing
Medical history/ development delay Incitement of violence to others Signs of fear/withdrawal	Medical history Promiscuity Non-age appropriate sexual Signs of fear/withdrawal	Over-compliance Manipulation Signs of fear/withdrawal or over familiarity with strangers	Cleanliness (Health, teeth/ Eye Appointment's etc) Signs of fear/withdrawal
Self-harm Sleep disturbance, night- time routine Soiling enuresis/encopresis Sexuality harmful behaviour/offences Difficult accepting boundaries Attention seeking Need for immediate gratification/inability to plan properly and follow through Trust/relationship issues Inappropriate displays of emotion Abuse of body Substance abuse/alcohol abuse/food issues) Abusive Language Depression/Mental health Running away Fire setting Self esteem issues Criminal behaviour Education/underachievin g/statement "Pack mentality" Alliance amongst C.I.C- Stigmatised Allegations/deflection/di verting, transference of Blame Distress Serious incidents of challenging behaviour	Self-harm Sleep disturbance Night time routine Soiling enuresis/encopresis Sexuality harmful behaviour/offences Difficulty accepting boundaries Attention seeking Need for immediate gratification/inability to plan properly and follow through Trust/relationship issues Inappropriate displays of emotion Abuse of body (Substance abuse/alcohol abuse/food issues) Abusive Language Depression/Mental health Running away Fire setting Self esteem issues Criminal behaviour Education/underachieving/state ment "Pack mentality" Alliance amongst C.I.C- Stigmatised Allegations / deflection / diverting Transference of blame Distress Serious incidents of challenging behaviour	Self-harm Sleep disturbance Night time routine Soiling enuresis/encopresis Sexuality harmful behaviour/offences Difficulty accepting boundaries Attention seeking Need for immediate gratification/inability to plan properly and follow through Trust/relationship issues Inappropriate displays of emotion Abuse of body (Substance abuse/alcohol abuse/food issues) Abusive Language Depression/Mental health Running away Fire setting Self esteem issues Criminal behaviour Education/underachievin g/statement "Pack mentality" Alliance amongst C.I.C- Stigmatised Allegations/deflection/di verting transference of Blame Distress Serious incidents of challenging behaviour	Self-harm Sleep disturbance Night time routine Soiling enuresis/encopresis Lack of respect for Themselves/others Difficulty accepting Boundaries Attention seeking Need for immediate Gratification/inability to Plan properly and Follow through Trust/relationship issues Inappropriate displays of Emotion Abuse of body (Substance Abuse/alcohol abuse/food Issues) Abusive Language Depression/Mental health Running away Fire setting Self esteem issues Criminal behaviour Education/underachieving /statement "Pack mentality" Alliance Amongst C.I.C- Stigmatised Allegations/deflection/ Diverting Transference of Blame Distress Serious incidents of Challenging behaviour