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Safeguarding Children Quiz

It is an Ofsted requirement that all employees who are in contact with children receive safeguarding training. It is advised that they refresh this training at least every three years. All Designated Child Protection/ Safeguarding Leads are expected to attend training every two years. Basic child protection training can also be found online or can be booked through your local authority. Keeping up to date with safeguarding training is imperative as it is everyone's responsibility to ensure all children are protected from harm.

All early years setting should have safeguarding policies and procedures in place that are adhered by all employers and employees.

• What does safeguarding children mean?

A - Safeguarding is the action that is taken to promote the welfare of children and protect them from harm.

Safeguarding means: protecting children from abuse and maltreatment / preventing harm to children's health or development / ensuring children grow up with the provision of safe and effective care / taking action to enable all children and young people to have the best outcomes.

Child protection is part of the safeguarding process. It focuses on protecting individual children identified as suffering or likely to suffer significant harm. This includes child protection procedures which detail how to respond to concerns about a child.

• What would you do if you had a concern about a child?

A - It's not always easy to know if a child or young person is being abused or neglected. You might've noticed bruises but aren't sure if they're from playing or from being physically abused. A child might start wetting the bed but you don't know if it's a minor setback in their development or if they're being abused. Or you might be worried a child is being neglected because you often hear them crying in distress. Knowing the signs of abuse can help. But it's important to remember that every child is different. If you have any concerns about a child's welfare, please do contact your local children's social care duty team. They're available 24 hours a day. Whilst you may be concerned about involving social services, these teams do more than check up on childrens' welfare.

• Name the different types of abuse?

A – Physical Abuse, emotional abuse, sexual abuse, neglect, CSE, FGM, bullying, child trafficking, grooming, breast ironing, County Lines – Criminal Child Exploitation.

• What would you say to a child that reports a disclosure to you?

A - Stay calm. Go slowly. It is normal to feel inadequate or unsure about what to do or say when a child or young person tells you about their abuse. Be reassuring. Be supportive. Get only the essential facts. Tell what will happen next (if age appropriate). Report to the Designated Safeguarding Lead. Make notes. Ensure a referral is made to social care team – MASH or similar.

• Where in your nursery would you go to find more information on safeguarding children?

A – The settings own safeguarding and child protection policies and procedures, safeguarding displays, supervision and team meeting meetings, guidance documents I.e. *Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children*²⁰¹⁸, Inspecting Safeguarding in early years, education and skills, 2019.

• What is the role of the designated safeguarding lead?

A - While every member of staff should be up-to-date with their safeguarding training and should understand the safeguarding policies and procedures for their setting, there are some members of staff who will take an extra responsibility for safeguarding. These individuals are known as the designated safeguarding lead and every setting should have at least one member of staff fulfilling this duty. Keeping Children Safe in Education 2018 (Part 1) sets out the role of the designated safeguarding lead.

Governing bodies, owners and management committees should ensure an appropriate senior member of staff is appointed to the role of designated safeguarding lead. The designated safeguarding lead should take responsibility for safeguarding and child protection (including online safety). This should be explicit in the role holder's job description. This person should have the appropriate status and authority within the setting to carry out the duties of the post. They should be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters, to take part in strategy discussions and inter-agency meetings and/or to support other staff to do so, and to contribute to the assessment of children. The designated safeguarding lead should provide support to staff to carry out their safeguarding duties and should liaise closely with other services such as children's social care. Every member of staff in the setting should be aware of the role of the designated safeguarding lead and the identity of the designated safeguarding lead and any deputies.

• How often should you refresh your safeguarding training?

A – Before becoming the designated safeguarding lead (DSL), or a deputy, you should complete training that provides you with the knowledge and skills to perform the role. This training should be updated every 2 years. You should also update your knowledge and skills "at regular intervals, but at least annually". For all other staff, they should also receive regular updates on child protection and safeguarding. You should deliver these updates "as required, but at least annually". You can update staff via, for example, team training events and workshops, email, e-bulletins and staff meetings. The updates should provide staff with the skills and knowledge they need to safeguard children effectively.

• What are the signs and symptoms of physical abuse?

A - Obvious signs of physical abuse are often physical in nature. These may include: Cuts, Bruises, Burns, Restraint or grip markings, Black eyes, Unusual pattern of injury; repeated trips to the emergency room. It can also include other injuries and health problems, such as: scarring, the effects of poisoning, such as vomiting, drowsiness or seizures, breathing problems from drowning, suffocation or poisoning.

Head injuries in babies and toddlers can be signs of abuse so it's important to be aware of these. Visible signs include: swelling, bruising, fractures, being extremely sleepy or unconscious, breathing problems, seizures, vomiting, unusual behaviour, such as being irritable or not feeding properly.

• What are the signs and symptoms of sexual abuse?

A – Emotional and behavioural signs: Avoiding being alone with or frightened of people or a person they know. Language or sexual behaviour you wouldn't expect them to know. Having nightmares or bed-wetting. Alcohol or drug misuse. Self-harm. Changes in eating habits or developing an eating problem.

Physical signs: Bruises, Bleeding, discharge, pains or soreness in their genital or anal area. Sexually transmitted infections. Pregnancy.

• What are the signs and symptoms of neglect?

A – Neglect can be really difficult to spot. Having one of the signs doesn't necessarily mean a child is being neglected. But if you notice multiple signs that last for a while, they might show there's a serious problem. Children and young people who are neglected might have: poor appearance & hygiene, health and development problems, housing & family issues, changes in behaviour. Other possible signs include; Always looking dirty. Being left alone or in the care of other young children. Eating more than usual at a meal or saving food for later. Doesn't get medical, dental, or mental health care. Poor attendance / Missing a lot of school. Poor weight gain and growth.

• What are the signs and symptoms of emotional abuse?

A – There might not be any obvious physical signs of emotional abuse or neglect. And a child might not tell anyone what's happening until they reach a 'crisis point'. That's why it's important to look out for signs in how a child is acting. As children grow up, their emotions change. This means it can be difficult to tell if they're being emotionally abused. But children who are being emotionally abused might: seem unconfident or lack self-assurance, struggle to control their emotions, have difficulty making or maintaining relationships, act in a way that's inappropriate for their age.

Other signs may include: Delayed or inappropriate emotional development; Loss of self-confidence or self-esteem; Social withdrawal or a loss of interest or enthusiasm; Depression; Avoidance of certain situations, such as refusing to go to school or ride the bus; Desperately seeks affection; A decrease in school performance or loss of interest in school / nursery; Loss of previously acquired developmental skills.

• What policy in the nursery would you refer to if you witnessed a colleague acting in an appropriate manner?

A – Whistle-blowing policy, safeguarding referral procedure. Should any staff member have a concern about the behaviour of a member of staff, this should be voiced immediately. You should inform your manager or designated safeguarding lead of any incidents where you believe the code of conduct has been breached.

• What documents do you use in your setting to record a concern and a child's disclosure?

A – use the agreed reporting procedures as set out in your setting's safeguarding and children protection policies. Written records should be made in an appropriate and timely way and are held securely where adults working with children or learners are concerned about their safety or welfare. Those records are shared appropriately and, where necessary, with consent.

Any child protection and/or safeguarding concerns are shared in a timely way with the relevant local authority. Where the concern is about suspected harm or risk of harm to a child, the referral should be made to the children's social care department of the local authority for the area where the child lives. Where the concern is an allegation about a member of staff in a setting, or another type of safeguarding issue affecting children and young people in a setting, the matter should be referred to the designated officer in the local authority in which the setting is located. When you make a referral to LADO make sure you also notify Ofsted within 14 days.

A record of any referral is retained and there is evidence that any agreed action following the referral has been taken promptly to protect the child or learner from further harm. There is evidence, where applicable, that staff understand when to make referrals when there are issues concerning peer- onpeer abuse, criminal or sexual exploitation, radicalisation and/or extremism or that they have sought additional advice and support. Children are supported, protected and informed appropriately about the action the adult is taking to share their concerns. Parents and guardians are made aware of concerns and their consent is sought in accordance with local procedures unless doing so would increase the risk of harm to a child.

Who would you report a concern too?

A – it depends. If it is an allegation against a member of staff, then the referral is made to the LA Designated Officer, if you are concerned a child is being abused or is at risk of abuse from someone outside of the setting, make the referral to MASH or similar.

• Summarise the procedures to follow when an allegation of abuse is made against a member of staff.

A - An allegation is defined as any complaint or concern that may indicate a person: Has harmed a child; Has displayed behaviour involving or related to a child that may constitute a criminal offence; or Has behaved in a way that raises concern about the adult's suitability to work with children

When dealing with an allegation: Ensure the immediate safety of the child/ren; Seek necessary medical treatment; Record in writing the time/place/details/any action then sign and date; Gather as much information as possible and clarify exactly what is being alleged.

It is important the Managers/Registered person or any other member of staff does NOT start to investigate the allegation. Any discussions with the alleged perpetrator must be kept to a minimum until Social Services and/or the Police have been informed.

When an allegation has been made:

Consider that potentially a crime may have been committed and it is essential no evidence is contaminated

Inform the registered person (unless they are the alleged perpetrator), LADO (Local Authority Designated Officer) and OFSTED

It may be necessary to suspend the worker from all duties immediately until the investigation identifies the level of risk – seek advice from the LADO

It should be explained that any statements or information given will be taken seriously but cannot be kept confidential

Incidents of poor practice or incompetence may be dealt with under ordinary disciplinary procedures – but this should be agreed / decided with LADO.

Even if an investigation is inconclusive or does not result in a criminal conviction, action can still be taken if "gross misconduct" is identified.

If a formal investigation is taking place it is not always appropriate to keep the member of staff at work. Employers have a duty of care to the staff member and support arrangements should be made available. If the perpetrator resigns to avoid any concerns being recorded on their employment record then it must be explained that the investigation will continue despite this. If the outcome of the investigation is that the member of staff was at fault, refer the matter to DBS and Ofsted.

Records should show the process of making judgements about both suspending an employee and making a referral so it can be demonstrated that a balanced and reasonable judgement was made.

If an allegation of abuse has been made against the Management then the matter should be reported directly to the registered person, if the complaint is against the registered person then the Management must be informed. In either case the Child Protection policy will be followed.

• Why would you not speak to the child's parents if you suspected sexual abuse?

A – first you need to ensure that the child is in a safe place. If you have concerns over the child's safety, be sure to discuss them explicitly with authorities when you make the referral. If you suspect the parent / carer is abusing the child do not speak to them about your concerns. If you fear that the perpetrator will cause further harm to the child upon learning about the investigation, clearly communicate this to authorities.

Only if you are not concerned that the parents or carers are causing harm, would you consult with them prior to making a report to authorities.

• What is the Government's response to radicalisation and extremism called?

A – The Prevent Duty - is the duty in the Counter-Terrorism and Security Act 2015 on specified authorities, in the exercise of their functions, to have due regard to the need to prevent people from being drawn into terrorism.

• What are your responsibilities under the Prevent Duty?

A - The Prevent duty became law back in 2015. This is a duty on all schools and registered early years providers to have due regard to preventing people being drawn into terrorism. In order to protect children in your care, you must be alert to any reason for concern in the child's life at home or elsewhere. This includes awareness of the expression of extremist views.

• What are possible signs of child sexual exploitation?

A – possible signs of CSE: Unhealthy or inappropriate sexual behaviour; Being frightened of some people, places or situations; Being secretive; Sharp changes in mood or character; Having money or things they can't or won't explain; Physical signs of abuse, like bruises or bleeding in their genital or anal area; Alcohol or drug misuse; Sexually transmitted infections; Pregnancy.

• What are the potential warning signs of radicalisation and extremism?

A - There is no single route to radicalisation or extremism. However, there are some behavioural traits that could indicate a child has been exposed to radicalising influences. Radicalisation can be really difficult to spot. Signs that may indicate a child is being radicalised include: isolating themselves from family and friends; talking as if from a scripted speech; unwillingness or inability to discuss their views; a sudden disrespectful attitude towards others; increased levels of anger; increased secretiveness, especially around internet use.

• Who may be at risk of FGM? What might make you concerned a child is at risk of FGM?

A – FGM can happen at different times in a girl or woman's life, including: when a baby is new-born; during childhood or as a teenager; just before marriage; during pregnancy.

Signs a girl may be at risk of FGM: A relative or someone known as a 'cutter' visiting from abroad; A special occasion or ceremony takes place where a girl 'becomes a woman' or is 'prepared for marriage'; A female relative, like a mother, sister or aunt has undergone FGM; A family arranges a long holiday overseas or visits a family abroad during the summer holidays; A girl has an unexpected or long absence from school; A girl struggles to keep up in school; A girl runs away – or plans to run away - from home.

What are the effects of FGM?

A - There are no health benefits to FGM. It can cause serious harm, including: severe and/or constant pain; infections, such as tetanus, HIV and hepatitis B and C; pain or difficulty having sex; infertility; bleeding, cysts and abscesses; difficulties urinating or incontinence; organ damage; problems during pregnancy and childbirth, which can be life-threatening for the mother and baby; mental health problems, such as depression, flashbacks and self-harm; death from blood loss or infections.

• Give a brief explanation of Breast Ironing and why it is a safeguarding issue.

A – breast ironing or flattening is the process during which young pubescent girls' breasts are ironed, massaged, flattened and/or pounded down over a period of time (sometimes years) in order for the breasts to disappear or delay the development of the breasts entirely.

Although there is no specific law within the UK around breast flattening or breast ironing, it is a form of physical abuse and if professionals are concerned a child may be at risk of, or suffering significant harm, they must refer to their local safeguarding procedures.

• Why is 'County Lines' as safeguarding matter?

A - Criminal exploitation is also known as 'county lines' and is when gangs and organised crime networks groom and exploit children to sell drugs. Often these children are made to travel across counties, and they use dedicated mobile phone 'lines' to supply drugs. Criminals are deliberately targeting vulnerable children – those who are homeless, experiencing learning difficulties, going through family breakdowns, struggling at school, living in care homes or trapped in poverty. These criminals groom children into trafficking their drugs for them with promises of money, friendship and status. Once they've been drawn in, these children are controlled using threats, violence and sexual abuse, leaving them traumatised and living in fear. However they become trapped in criminal exploitation, the young people involved feel as if they have no choice but to continue doing what the criminals want.

• Tell me about a safeguarding issue that you have read about in the news recently.