



# Safeguarding Policy

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## Our Statement

The Martial Arts Method acknowledges the duty of care to safeguard and promote the welfare of children and is committed to ensuring safeguarding practice reflects statutory responsibilities, government guidance and complies with best practice and 'Safeguarding Code in Martial Arts' requirements.

The policy recognises that the welfare and interests of children are paramount in all circumstances. It aims to ensure that regardless of age, ability or disability, gender reassignment, race, religion or belief, sex or sexual orientation, socio-economic background, all children:

- have a positive and enjoyable experience of sport at The Martial Arts Method in a safe and child-centred environment
- are protected from abuse whilst participating in martial arts or outside of the activity.

We acknowledge that some children, including disabled children or those from ethnic minority communities, can be particularly vulnerable to abuse and we accept the responsibility to take reasonable and appropriate steps to ensure their welfare.

## Our Policy

As part of our safeguarding policy we will:

- promote and prioritise the safety and wellbeing of children and young people
- value, listen to and respect children ensure robust safeguarding arrangements and procedures are in operation
- adopt safeguarding best practice through our policies, procedures and code of conduct for staff and volunteers
- ensure everyone understands their roles and responsibilities in respect of safeguarding and is provided with appropriate learning opportunities to recognise, identify and respond to signs of abuse, neglect and other safeguarding concerns relating to children and young people
- provide effective management for staff and volunteers through supervision, support, training and quality assurance measures so that all staff and volunteers know about our policies, procedures and behaviour codes and follow them confidently and competently
- ensure appropriate action is taken in the event of incidents or concerns of abuse and support provided to the individual(s) who raise or disclose the concern
- ensure that confidential, detailed and accurate records of all safeguarding concerns are maintained and securely stored
- record and store information securely, in line with data protection legislation and guidance
- prevent the employment or deployment of unsuitable individuals by recruiting and selecting staff and volunteers safely, ensuring all necessary checks are made
- appoint a nominated safeguarding lead for children and young people
- share information about safeguarding and good practice with children and their parents via leaflets, posters, group work and one-to-one discussions
- make sure that children, young people and their parents know where to go for help if they have a concern

The policy and procedures will be widely promoted and are mandatory for everyone involved in The Martial Arts Method.

Failure to comply with the policy and procedures will be addressed without delay and may ultimately result in dismissal or exclusion from The Martial Arts Method.

This policy will be reviewed a year after development and then every three years, or in the following circumstances: changes in legislation and/or government guidance as required by the local safeguarding partnership, UK Sport and/or home country sports councils or because of any other significant change or event.

Date of next review: Feb 2024

## Aims

The Martial Arts Method aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- All staff are aware of their statutory responsibilities with respect to safeguarding
- Staff are properly trained in recognising and reporting safeguarding issues
- The staff of The Martial Arts Method (hereinafter referred to as "our school" or TMAM) recognise our responsibility to safeguard and promote the welfare of our members, to minimise risk and to work together with other agencies to ensure procedures are in place within our school to identify, assess and support those children who are suffering harm and to keep them safe and secure whilst in our care

- The responsibilities set out in this policy apply (as appropriate) to all members of the TMAM community including members, staff, visitors/contractors, volunteers and trainees working within the school.

## Legislation

- This policy is based on the Department for Education's statutory guidance, [Working Together to Safeguard Children - A guide to inter-agency working to safeguard and promote the welfare of children](#), we comply with this guidance
- The Children Acts 1989 and 2004 define children as under 18 years of age.
- General Data Protection Act (2018) Guide to the General Data Protection Regulation - GOV.UK <https://www.gov.uk/government/publications/guide-to-the-general-data-protection-regulation>
- Data Protection Act <http://www.legislation.gov.uk/ukpga/2018/12/contents/enacted>
- Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on instructors to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18
- [Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- [The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children
- [Schedule 4 of the Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children
- [Statutory Guidance on the Prevent duty](#), under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- Guidance for safer working practice for those working with children and young people in education settings (GSWP) (Safer Recruitment Consortium May 2019)
- [Kirklees Safeguarding Children Partnership Procedures](#)

## Definitions

Safeguarding and promoting the welfare of children means:

- Protecting children from maltreatment
- Preventing impairment of children's mental and physical 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 outcomes
- Child protection is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm
- Children includes everyone under the age of 18
- Parent refers to both parents and carers inclusively

## Equality statement

The Martial Arts Method recognises that some members have an increased risk of abuse, and additional barriers can exist for some members with respect to recognising or disclosing it.

We are committed to practice that is anti-discriminatory and recognise the range of members' diverse circumstances. We ensure that all members have the same protection, regardless of any barriers they may face.

We give special consideration to members who:

- Have special educational needs or disabilities
- Are young carers

- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of Female Genital Mutilation (FGM), sexual exploitation, criminal exploitation, forced marriage, or radicalisation
- Are asylum seekers, refugees or migrants

## Roles and Responsibilities

Safeguarding and child protection is everyone's responsibility. This policy applies to all staff (including those not directly employed by this school), volunteers and trainees in this school. Our policy and procedures also apply to off-site activities

All staff

- All staff will undertake and complete relevant safeguarding training

All staff will be aware of:

- Our systems which support safeguarding and the role of the designated welfare officer (DWO)
- The process for making referrals to relevant outside agencies. Wherever possible, speak to the DWO, deputy DWO, School owner or Head instructor (in the absence of a DWO) first to agree a course of action. In the absence of a DWO or School owners/Head instructor being available, staff must not delay in directly contacting the local duty and advice team or the police if they believe a child is at immediate risk of significant harm
- What to do if they identify a safeguarding issue or a student tells them they are being abused or neglected, including specific issues such as female genital mutilation (FGM), and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
- Procedures in place for recording any cause for concerns and passing information on to DWOs in accordance with our school's recording systems
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), child criminal exploitation (CCE), female genital mutilation (FGM) and radicalisation

The designated welfare officer (DWO) and deputy designated staff:

- Our DWO is Ami-Jane Beal. The DWO takes lead responsibility for child protection and wider safeguarding
- The DWO will be able discuss your safeguarding concerns and can be contacted on 07865658288 or [info@themartialartsmethod.co.uk](mailto:info@themartialartsmethod.co.uk).
- If you wish to remain anonymous when reporting a safeguarding concern then you can use the form here <https://tmammembers.co.uk/safeguarding/>

The DWO will be given the time, training, resources and support to:

- Provide advice and support to other staff on child welfare and child protection matters
- Contribute to the assessment of members regarding safeguarding concerns
- Refer suspected cases, as appropriate, to the relevant body (children's social care duty and advice team, Channel programme, and/or police), and support staff to comply with their mandatory reporting duties in cases where Female Genital Mutilation has been identified
- The DWO will also keep the Head Instructor informed of any issues, and liaise with local authority officers and relevant professionals for child protection concerns as appropriate

- Provide reports as required for meetings if needed

## Reporting or responding to a concern

Concerns should be reported to the Designated Welfare Officer in the first instance or if the concern involves the DWO or someone they are related to then the Local Authority Designated Officer (LADO) should be informed, each local authority will have their own services. Details of the LADO's for our location can be found in the appendices of this document. You may also report to the martial arts association we are registered with, BMABA, using this link <https://bmaba.org.uk/verify/report/>, the organisation as Lead Safeguarding officers who will be able to help.

Concerns that staff must immediately report:

- any suspicion that a child is injured, marked, or bruised in a way which is not readily attributable to the normal knocks or scrapes received in play
- any explanation given which appears inconsistent or suspicious
- any behaviours which give rise to suspicions that a child may have suffered harm (e.g. worrying drawings or play)
- any concerns that a child may be suffering from inadequate care, ill treatment, or emotional maltreatment
- any concerns that a child is presenting signs or symptoms of abuse or neglect
- any significant changes in a child's presentation, including non-attendance
- any hint or disclosure of abuse from any person
- any concerns regarding person(s) who may pose a risk to children (e.g. living in a household with children present)

If you think a child is in immediate danger or requires medical attention, you should call the emergency services on 999. You can also ring the NSPCC helpline on 0808 800 5000 to report immediate risks.

Everyone has a responsibility to refer a child when it is believed or suspected that a child:

- Has suffered significant harm and /or;
- Is likely to suffer significant harm and/or;
- Has developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent).

Unless we believe that it would put the child at risk of further harm, we will discuss concerns with a child's parent/carer if we notice:

- significant changes in a child's behaviour;
- deterioration in a child's general wellbeing and/or appearance;
- unexplained bruising, marks or signs of possible abuse or neglect;
- children's comments which give cause for concern;
- any reasons to suspect neglect or abuse outside the setting, for example in the child's home or while with a friend/family member.

## Disclosures

If a child tells a member of staff that they or another child is being abused, we will:

- show that we have heard what they are saying, and that we take their allegations seriously;
- encourage the child to talk, without prompting them or asking them leading questions.
- We will not interrupt when a child is recalling significant events and will not make a child repeat their account;
- reassure the child that they can tell us anything that is worrying them, but that we cannot promise not to tell anybody because some things have to be passed on in order to keep them safe;

- explain what actions we must take, in a way that is appropriate to the age and understanding of the child;
- record what we have been told, in writing, as soon as we can, using exact words where possible;
- make a note of the date, time, place and people who were present during the disclosure.

The DWO should be notified of any disclosure at the earlier opportunity.

## Information sharing

The Martial Arts Method understand that to keep children safe, information needs to be shared appropriately so that decisions can be made to protect them.

We will maintain clear boundaries around information sharing to ensure confidentiality where appropriate and to guarantee that only those who need the information are made aware of it.

If we receive information that raises concerns about a child or children, decision will be made about sharing this safeguarding information.

Information may include:

- concerns about a child received within or outside the sport
- concerns about a person in a position of trust, such as a coach or instructor – this could include information on a Disclosure & Barring Service (DBS) check
- concerns about a member of a sports club
- concerns about a sports environment, such as an event location or hosting arrangements

### Key principles of information sharing

We will:

- Use the General Data Protection Regulations (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
- Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
- Seek advice from other practitioners if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
- Share with informed consent where appropriate and, where possible, respect the wishes of those who do not consent to having their information shared. We may still share information without consent if, in your judgement, there is lawful basis to do so, such as where safety may be at risk.
- Base our information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
- Ensure that the information we share is necessary for the purpose for which we are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
- Keep a record of our decision and the reasons for it – whether it is to share information or not. If we decide to share, then we will record what we have shared, with whom and for what purpose.

Who will we share information with:

This may include:

- Statutory organisations – the Police and/or Children’s Services must be informed about child protection concerns; Designated Officers (LADOs) should be consulted where there are concerns about someone in a position of trust.
- Disclosure & Barring Service – must be informed of any concerns about someone in regulated activity who is suspended or expelled from the organisation.
- Other clubs and other sports organisations – informed decisions will be made about sharing information with other organisations to enable them to safeguard children in their care who may be at risk of harm.
- Individuals within the organisation – who needs to know what information in order to keep children safe.

## Confidentiality

- Confidentiality is an issue that needs to be understood by all those working with members particularly in the context of safeguarding
- The Martial Arts Method recognise that the only purpose of confidentiality in this respect is to benefit the member. Staff, volunteers, trainees and visitors to school should never promise a member that they will not tell anyone about an allegation or disclosure and must pass any cause for concerns immediately to a designated welfare officer

## Information sharing and GDPR

- Timely information sharing is essential for effective safeguarding. This school will share safeguarding information as appropriate in keeping with the principles outlined in the government guidance document.
- The storing and processing of personal data is governed by the General Data Protection Regulations 2018 (GDPR) and Data Protection Act 2018. This school will give clear advice to staff about their responsibilities under this legislation so that, when considering sharing confidential information, those principles should apply
- Staff may have access to special category personal data about members and their families which must be kept confidential at all times and only shared when legally permissible to do so and in the interest of the child. Records should only be shared with those who have a legitimate professional need to see them

## Working with parents to protect children

- Parents/carers should be aware that our school will take any reasonable action to safeguard the welfare of its members. In cases where the school has reason to be concerned that a child may be suffering significant harm, ill treatment or neglect or other forms of harm, staff have no alternative but to follow procedures and contact the duty and advice team to discuss their concerns
- We will endeavour wherever possible to obtain at least two emergency contacts for every child in the school in case of emergencies, and in case there are welfare concerns at the home
- In general, we will discuss concerns with parents/carers before approaching other agencies and will seek to inform parents/carers and receive their consent when making a referral to another agency. Appropriate staff will approach parents/carers after consultation with the designated welfare officer. The exception to this rule will be in situations where a member of staff has reasonable cause to believe that informing parents/carers of a referral to another agency may increase the risk of significant harm.
- Parents/carers are informed about our safeguarding policy through the website and can request a copy by email.

## Our role in supporting children

- We will offer appropriate support to individual children who have experienced abuse or who have abused others where possible



## Safer recruitment

We will employ rigorous recruitment and selection procedures to ensure the wellbeing and safety of all members.

This will include:

- clear job descriptions outlining any roles and responsibilities that involve children
- at least 2 people interviewing the applicant
- checking out any gaps in the application form, including any gaps in employment history
- ensuring the applicant has the ability and commitment to meet the standards required to adhere to the safeguarding policy
- assessing the applicant's commitment to promoting good practice and their ability to communicate with children and young people
- taking appropriate steps to confirm the candidate's identity such as requesting to see original copies of their ID, qualifications, experience and right to work in the UK
- obtaining at least 2 written references, including the applicants last employer. Referees should include someone who can comment on the applicant's previous work with children. (Ideally, references will be sought on all shortlisted candidates and obtained before an interview takes place)
- getting in direct contact with the referees via telephone to confirm they gave the reference, it is an accurate reflection of the candidate and give them the opportunity to raise any concerns
- enhanced Disclosure and Barring Service checks
- recording outcomes of pre-employment checks and interview notes
- undertaking a risk assessment should any concerns arise during the recruitment process
- setting a probationary or trial period (usually 6 months) to review the post holder's performance against the job description

If a candidate is successful, then new starters at The Martial Arts Method will undergo a full induction process, which will be led by the School owner or Head instructor.

This will include:

- safeguarding policies and procedures
- codes of conduct
- rules and guidelines
- member registration
- roles and responsibilities of the post
- identifying training needs such as First Aid and Safeguarding training

## Managing Allegations against Staff, Volunteers and Trainees Procedure

This procedure will be used by The Martial Arts Method where adults work with children and young people up to the age of 18 years old.

This will involve:

- taking all allegations relating to the harm of a child or young person by those who work with them seriously
- ensuring any allegation of harm made in relation to a professional who works with children and young people or any other member of staff or volunteer in any setting, is dealt with fairly, quickly and consistently; in a way which provides effective protection for the child/children whilst at the same time supporting the person who is the subject of the allegation

This procedure should be applied in all situations where it is alleged that a person who works with children in a position of trust has:

- Behaved in a way which has harmed a child, or may have harmed a child
- Possibly committed a criminal offence against or related to a child
- Behaved towards a child or children in a way that indicates that he/she may pose a risk to children.
- Behave or may behave in a way that indicates they may not be suitable to work with children.

This can be connected with his/her employment or voluntary activity, or in relation to a person's private life where:

- Concerns arise about a person's behaviour regarding his/her children.
- Concerns arise about the behaviour of a partner, member of the family or other household member.
- Where other information suggests they may pose a risk to any person that may demonstrate a transferable risk within their role with children.
- Allegations may relate to an adult's behaviour at work, at home or in another setting

Allegations of non-recent (historical) harm should be responded to in the same way as contemporary allegations. In such cases, it is important to find out whether the person against whom the allegation is made is still working with children. If they are, a discussion with the LADO should take place as the person's current employer or voluntary organisation must be informed of the allegation and a referral to Children's Social Care must be made.

#### Examples of inappropriate behaviour

Inappropriate behaviour by staff/volunteers/trainees could be any of the following:

- Physical, for example intentional use of force as a punishment, slapping, use of objects to hit with, throwing objects or rough physical handling
- Emotional, for example intimidation, belittling, scapegoating, sarcasm, lack of respect for children's rights, and attitudes which discriminate on the grounds of race, gender, disability or sexuality
- Sexual, for example sexualised behaviour towards members, grooming, sexual harassment, sexual assault and rape
- Neglect which may include failing to act to protect a child or children, failing to seek medical attention or failure to carry out appropriate/proper risk assessment etc

Staff have a duty to disclose to the School owner or DWO where their relationships and associations both within and outside of the workplace (including online) may have implications for safeguarding children in school.

#### Procedure

- If a safeguarding complaint meets the above criteria then it must be reported to the DWO immediately. If the complaint involves the School owner or DWO, then the Deputy DWO and outside agencies should be informed.
- A designated staff member will gather as much information about the alleged incident as necessary in order to establish whether there is substance to the allegation.
- The designated staff must use the local authority designated officer (LADO) flow chart) in order to assess the level of concern. As part of this initial consideration, the case manager should consult with their school's Human Resources Advisor/provider/contact. This will assist the case manager and HR in consultation with the LADO to decide on the most appropriate course of action

- The case manager **will not** carry out an investigation or **directly interview** an individual about whom there is a concern until the above process has been duly completed and relevant partners have been consulted
- In many cases it may be appropriate to provide further training and support to staff/volunteers and ensure that they are clear about the expectations for their conduct
- In more serious cases, allegations may be investigated under the formal disciplinary procedures and where allegations are upheld, formal warnings issued as well as specific training and support.
- In cases where members may be at further risk gross misconduct, suspension of the member of staff may be appropriate and should be considered in line with the school's Disciplinary Policy
- Any staff or volunteers who are dismissed by The Martial Arts Method for gross misconduct or cumulative misconduct relating to safeguarding of pupils will be referred to the Disclosure and Barring Service for consideration of barring. Similarly, where the school has a reasonable belief that the member of staff/volunteer would have been dismissed by the school had they been employed at the time of the conclusion of investigations, they will be referred to the DBS. The school will keep written records of all the above
- Where The Martial Arts Method is not the employer of an individual, they still have a responsibility to ensure allegations are dealt with appropriately and that they liaise with the relevant parties, this includes apprentices and volunteers.

### Whistleblowing

- Where a staff member feels unable to raise an issue with their senior leadership or feel that their genuine concerns are not being addressed, other whistleblowing channels may be open to them by accessing; [www.gov.uk/whistleblowing](http://www.gov.uk/whistleblowing) or alternatively ([www.gov.uk/government/news/home-office-launches-child-abuse-whistleblowing-helpline](http://www.gov.uk/government/news/home-office-launches-child-abuse-whistleblowing-helpline))
- The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – available from 8:00am to 8:00pm, Monday to Friday and Email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk)
- Local authorities may have their own designated whistleblowing service. Details can be found in the appendices of this document.

### Unaccompanied children policy

Concerns regarding unaccompanied children within facilities include:

- physical harm from inappropriate use or access to equipment
- contact with dangerous adults or others within the wider facility (potential for grooming or abuse)
- parents' contact details and children's medical information is not available in the event of an emergency
- staff being required to manage children's unruly or dangerous behaviour

Primarily, it's a parent's or carer's responsibility to judge whether it's safe and appropriate to allow their unaccompanied child to visit The Martial Arts Method

This decision should be based on their understanding of:

- their child's general developmental maturity
- their child's awareness of the potential risks
- the level of supervision and care provided within the facility

Mitigating safeguarding risks associated with unaccompanied children

- CCTV is in place in common areas
- Parents must inform staff that their child will be unaccompanied

- Parents must ensure that contact and medical information is up to date

## Female Genital Mutilation (FGM) the Mandatory Reporting Duty

The Department for Education's Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs"

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'

Any instructor who discovers that an act of FGM appears to have been carried out on a pupil under 18 will immediately (in consultation with the designated safeguarding lead) report this to the police, personally. This is a statutory duty, and instructors will face disciplinary sanctions for failing to meet it

The duty above does not apply in cases where a pupil is at risk of FGM or FGM is suspected but is not known to have been carried out. Staff will not examine pupils

Any other member of staff who discovers that an act of FGM appears to have been carried out on a pupil under 18 will speak to the designated safeguarding lead and follow our local safeguarding procedures

Any member of staff who suspects a pupil is at risk of FGM will speak to the DSL and follow our local safeguarding children's partnership procedures.

### Honour- based abuse (including forced marriage)

The Martial Arts Method recognises that Honour-based abuse (HBA) encompasses incidents of crimes which have been committed to protect or defend the honour of the family and/or the community. Abuse committed in this context often involves a wider network of family or community pressure and can involve multiple perpetrators. If staff in our school have a concern regarding a pupil that might be at risk of HBA or who has suffered from HBA they will immediately speak to the designated safeguarding lead who will follow the schools safeguarding procedures.

## Safeguarding Vulnerable Adults

### Who is an adult at risk?

A vulnerable adult at risk is anyone aged 18 and over who is not able to care for or protect themselves from harm or exploitation. It might be because of mental health, disability, age or illness. To help decide whether someone is at risk read [recognising abuse or neglect](#).

Safeguarding concerns regarding at risk adults can be reported via the usual methods detailed above via the DWO or directly to Kirklees <https://www.kirklees.gov.uk/beta/adult-protection/report-abuse.aspx>

### Forms of abuse commonly seen against vulnerable adults

- Neglect – ignoring mental or physical needs, care, education, or basic life necessities or rights
- Bullying – family, carers, friends
- Financial – theft or use of money or possessions
- Sexual – assault, rape, non-consensual acts (including acts where unable to give consent), touching, indecent exposure
- Physical – hitting, assault, man-handling, restraint, pain or forcing medication
- Psychological – threats, fear, being controlled, taunts, isolation
- Discrimination – abuse based on perceived differences and vulnerabilities

- Institutional abuse – in hospitals, care homes, support services or individuals within them, including inappropriate behaviours, discrimination, prejudice, and lack of essential safeguards

Who might commit abuse against a vulnerable adult?

Abuse can happen anywhere, at any time and be caused by anybody including:

- a partner or relative
- a friend or neighbour
- a paid or volunteer carer
- other service users
- someone in a position of trust
- a stranger

## Appendices

### Additional Guidance for Staff: Definitions and indicators of abuse

Reference: Working Together to Safeguard Children (DfE 2018)

#### **Neglect**

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result maternal substance abuse. Kirklees safeguarding children's partnership (KSCP) have developed in collaboration with a wide range of partners a toolkit with the aim of supporting anyone working with children, young people, parents and families to identify, assess and reduce child neglect <https://www.kirkleessafeguardingchildren.co.uk/wp-content/uploads/2020/03/6.-Neglect-Practitioners-Toolkit.pdf>

Once a child is born, neglect may involve a parent or carer failing to:

- Provide adequate food, clothing and shelter (including exclusion from home or abandonment)
- Protect a child from physical and emotional harm or danger
- Ensure adequate supervision (including the use of inadequate caregivers)
- Ensure access to appropriate medical care or treatment

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

Examples which may indicate neglect (not designed to be used as a checklist)

- Hunger
- Tiredness or listlessness
- Child dirty or unkempt
- Poorly or inappropriately clad for the weather
- Poor school attendance or often late for school
- Poor concentration
- Affection or attention seeking behaviour
- Untreated illnesses/injuries
- Pallid complexion
- Stealing or scavenging compulsively
- Failure to achieve developmental milestones, for example growth, weight
- Failure to develop intellectually or socially
- Neurotic behaviour

#### **Physical abuse**

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child

Examples which may indicate physical abuse (not designed to be used as a checklist):

- Patterns of bruising; inconsistent account of how bruising or injuries occurred
- Finger, hand or nail marks, black eyes
- Bite marks
- Round burn marks, burns and scalds
- Lacerations
- Fractures
- Bald patches
- Symptoms of drug or alcohol intoxication or poisoning
- Unaccountable covering of limbs, even in hot weather
- Fear of going home or parents being contacted
- Fear of medical help
- Fear of changing for sports activities
- Inexplicable fear of adults or over-compliance
- Violence or aggression towards others including bullying
- Isolation from peers

### **Sexual abuse**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether the child is aware of what is happening or not. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing, and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children

Examples which may indicate sexual abuse (not designed to be used as a checklist):

- Sexually explicit play or behaviour or age-inappropriate knowledge
- Anal or vaginal discharge, soreness, or scratching
- Reluctance to go home
- Inability to concentrate, tiredness
- Refusal to communicate
- Thrush, Persistent complaints of stomach disorders or pains
- Eating disorders, for example Anorexia Nervosa and Bulimia
- Attention seeking behaviour, self-mutilation, substance abuse
- Aggressive behaviour including sexual harassment or molestation
- Unusually compliant
- Regressive behaviour, enuresis, soiling
- Frequent or open masturbation, touching others inappropriately
- Depression, withdrawal, isolation from peer group
- Reluctance to undress for sports activities or swimming
- Bruises, scratches in genital area

### **Emotional abuse**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children.

These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child in participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment

Examples which may indicate emotional abuse (not designed to be used as a checklist):

- Over-reaction to mistakes, continual self-deprecation
- Delayed physical, mental, emotional development
- Sudden speech or sensory disorders
- Inappropriate emotional responses, fantasies
- Neurotic behaviour: rocking, banging head, regression, tics and twitches
- Self-harming, drug or solvent abuse
- Fear of parents being contacted
- Running away / going missing
- Compulsive stealing
- Masturbation, appetite disorders - anorexia nervosa, bulimia
- Soiling, smearing faeces, enuresis

N.B: Some situations where children stop communication suddenly (known as “traumatic mutism”) may indicate maltreatment

### **Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE)**

Both Child Sexual Exploitation and Criminal Exploitation are forms of abuse. They both occur where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into sexual or criminal activity.

Whilst age maybe the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status and access to economic or other resources. In some cases, the abuse will be in exchange for something the victim needs or wants and/or will be to the financial benefit or other advantages (such as increased status) of the perpetrator or facilitator in exchange for something the victim needs or wants and/or will be for the financial advantage or increased status of the perpetrator or facilitator.

The abuse can be perpetrated by individuals or groups males or females and children or adults. The abuse can be a one-off occurrence or a series of incidents over time and range from opportunistic to complex organised abuse. It can involve force and/or enticement-based methods of compliance and may or may not be accompanied by violence or threats of violence. Victims can be exploited even when activity appears consensual and it should be noted exploitation as well as being physical can be facilitated and/or take place online.

Reference: Child Sexual Exploitation. Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation (<https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners>) where child sexual exploitation, or the risk of it, is suspected, frontline practitioners should pass the information onto the designated member of staff for child protection

Young people who are victims of CCE include those who are:

- Trafficked within the UK with the intention of being used to commit criminal acts that benefit the trade of drugs and criminal gangs
- Coerced into the supply, transporting and dealing of class A drugs. They may be doing this within their local area, however they are often crossing one or more police force or local authority boundaries
- Coerced into carrying drugs, weapons and money to assist in the trade and movement of drugs

CCE often occurs without the child's immediate recognition, and with the child believing they are in control of the situation. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength. Violence, coercion and intimidation are common, involvement of exploitive relationships being characterised in the main by the child/young person's availability of choice resulting from their social/economic and/or emotional vulnerability

### **Serious Violence**

Our staff will recognise when children may be at risk from/or involved with serious violent crime by recognising the indicators such as:

1. Increased absence from school
2. A change in friendship or relationships with older individuals or groups
3. A decline in performance
4. Signs of self-harm or a significant change in wellbeing
5. Signs of assault or unexplained injuries
6. Unexplained gifts or new possessions

### **Responses from parents**

Research and experience indicate that the following responses from parents may suggest a cause for concern:

- An unexpected delay in seeking treatment that is obviously needed
- An unawareness or denial of any injury, pain or loss of function (for example, a fractured limb)
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development
- Reluctance to give information or failure to mention other known relevant injuries
- Frequent presentation of minor injuries
- Unrealistic expectations or constant complaints about the child
- Alcohol misuse or other drug/substance misuse
- Parents request removal of the child from home
- Violence between adults in the household

### **Children with Special Educational Needs and Disabilities**

When working with children with disabilities school staff will to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin, might be of concern on a non-mobile child
- Not getting enough help with feeding leading to malnourishment
- Poor toileting arrangements



- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification e.g. deprivation of liquid medication, food or clothing, disabling wheelchair batteries
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment e.g. callipers, sleep boards, inappropriate splinting.
- Misappropriation of a child's finances
- Invasive procedures

### Additional Guidance for Staff: Dealing with a disclosure of abuse

When a child tells me about abuse s/he has suffered, what must I remember?

- Stay calm
- Do not transmit shock, anger or embarrassment
- Reassure the child. Tell her/him you are pleased that s/he is speaking to you
- Never enter a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this, state who this will be and why
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed
- Tell the child that it is not her/his fault
- Encourage the child to talk but do not ask "leading questions" or press for information
- Listen and remember
- Check that you have understood correctly what the child is trying to tell you
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected
- Do not tell the child that what s/he experienced is dirty, naughty or bad
- It is inappropriate to make any comments about the alleged offender
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations

If you think a child is in immediate danger or requires medical attention, you should call the emergency services on 999. You can also ring the NSPCC helpline on 0808 800 5000 to report immediate risks.

NB It is not staff's role to seek disclosures. Their role is to observe that something may be wrong, ask about it, listen, be available and try to make time to talk

#### **Immediately afterwards**

All disclosures of abuse will be responded to in keeping with the professional roles and responsibilities outlined in the policy above.

#### Additional guidance for staff: Reporting concerns – Location specific information

The Martial Arts Method Mirfield LADO details

Access advice and guidance via ['Contact LADO' form](#)

Or to submit a formal referral via ['Make a LADO referral' form](#)

LADO 01484 221 126 [LADO.cases@kirklees.gov.uk](mailto:LADO.cases@kirklees.gov.uk)

CSC Duty and Advice 01484 414 960 [DutyAdvice.Admin@kirklees.gov.uk](mailto:DutyAdvice.Admin@kirklees.gov.uk)

Additional advice and guidance can be found here:

<https://www.kirklees.gov.uk/beta/working-with-children/lado.aspx>

<https://westyorkscb.proceduresonline.com/>

