



II VISHWA VIDYAPEETH II

CHILD PROTECTION POLICY

1: INTRODUCTION - Child Protection Policy Statement

1.1 Vishwa Vidyapeeth takes very seriously its duty towards all its pupils who have been entrusted to its care and seeks to provide a school environment where all children are safe, secure, valued, respected, and listened to.

1.2 Vishwa Vidyapeeth believes that it is always unacceptable for a child or young person to experience abuse of any kind and recognises its responsibility to safeguard the welfare of all children and young people, by a commitment to practice that protects them.

1.3 We recognise that: The welfare of the child is paramount. All children, regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity, have the right to equal protection from all types of harm or abuse. This policy applies to all children and young people.

1.4 Purpose of Policy To provide protection for the children who receive Vishwa Vidyapeeth services. To provide staff and volunteers with guidance on procedures they should adopt in the event that they suspect a child may be experiencing, or be at risk of harm.

1.5 This policy applies to all staff, including senior managers and boards of trustees of Vishwa Vidyapeeth.

1.6 This policy follows the statutory government guidance Working Together to safeguard Children 2015; the London Child Protection Procedures: 2015, Keeping Children Safe in Education 2015 and What to do if you're worried a child is being abused: 2006.

1.7 We will review our child protection policy and protocol at least annually to ensure they are still relevant and effective.

2: DEFINITIONS

2.1 A child is any person who has not yet had their eighteenth birthday.

2.2 Key outcomes:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Achieve economic well-being.

3: DEFINITIONS OF ABUSE

3.1 The following definitions of abuse are set out in statutory government guidance and provide the framework for responding to risk to children.

3.2 Abuse and neglect are forms of maltreatment. A person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institution by those known to them or, more rarely, by a stranger.

3.3 Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child.

3.4 Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent effects on the child's emotional development and may involve:

- Conveying to children that they are worthless or unloved, inadequate, or valued only in so far as they meet the needs of another person
- Imposing age or developmentally inappropriate expectations 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 participating in normal social interaction
- Serious bullying, causing children frequently to feel frightened or in danger, or the exploitation or corruption of children
- Exploiting and corrupting children.

3.5 Sexual abuse involves forcing or enticing a child to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape, buggery or oral sex) or non-penetrative acts.

3.6 Sexual abuse includes abuse of children through sexual exploitation.

3.7 Sexual abuse includes non-contact activities, such as involving children in looking at, or in the production of pornographic materials, watching sexual activities or encouraging children to behave in sexually inappropriate ways.

3.8 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.

4: FURTHER DEFINITIONS

4.1 As well as the definitions above, there are circumstances which can be indicative of abuse, or constitute abuse and are in any case, damaging to children. You should be aware of the need to act on concerns about the following.

4.2 Domestic or Family Violence adversely affects children, whether or not it is significant enough to warrant action under Child Protection Procedures.

4.3 Bullying is not acceptable behaviour. Staff members witnessing a child being bullied or receiving complaints over bullying have a duty to do whatever is within their power to stop the situation, while avoiding putting themselves or the child in danger.

4.4 Staff should always discuss instances of bullying with a senior. This should occur immediately if the situation is beyond their ability to deal with.

4.5 Child Sexual Exploitation involves exploitative situations, contexts and relationships where children receive something (for example food, drugs, alcohol, gifts or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many different forms from the seemingly 'consensual' relationship to serious organized crime involving gangs and groups.

4.6 Exploitation is marked out by an imbalance of power in the relationship and involves varying degrees of coercion, intimidation and sexual bullying including cyberbullying and grooming.

4.7 It is important to recognize that some children who are being sexually exploited do not show any external signs of this abuse and may not recognize it as abuse.

4.8 Child trafficking is the recruitment and movement of children for the purpose of exploitation; it is a form of child abuse. Children may be trafficked within the Country, or from abroad. It overlaps with Sexual Exploitation and Private Fostering. Children may be trafficked for:

- Sexual exploitation
- Labour exploitation
- Domestic servitude
- Criminal activity
- Benefit fraud
- Forced marriage
- Moving drugs.

5: WHAT TO DO IF YOU ARE CONCERNED THAT A CHILD IS BEING ABUSED

5.1 If you recognise signs of abuse keep a written record of any physical or behavioural signs or symptoms. If patterns emerge or signs become frequent report them to your senior.

5.2 However, you must not talk to the parents about concerns where it would jeopardise the child's safety, for example:

- There are concerns about Sexual Abuse
- The child appears very frightened of their parents and fears reprisals

5.3 When staff become aware of possible abuse, they must make full written record as soon as possible and always within 24 hours of the situation arising.

5.4 Recording should include as many of the following details as you know:

Index details of the child, and if known, their family, alleged offenders, witnesses, and other involved children. As much information as possible about the incident of concern i.e. what lead up to it, what was heard or witnessed, staff member's responses, location of the event, date, time and details of anyone present, and any action taken by the member of staff as a result of the incident or other relevant background information.

5.5 When you record:

- Distinguish between fact and opinion
- Try to describe what happened fully but succinctly
- Make the recording legible
- Sign and date the recording and ensure your name and designation are clearly typed or printed.

5.6 All records of child protection issues will be kept in a central, lockable, non-portable cabinet.

6 HOW TO RESPOND TO A CHILD TELLING YOU ABOUT ABUSE

6.1 Sometimes you will be concerned about abuse because of what a child says to you. If this happens you should:

- Stay calm and reassuring. Respond with tact and sensitivity and do not make judgements.
- Find a quiet place to talk and allow the child to speak in their own time (this should still be in the open but away from the crowd and you should tell someone else where you are going and with whom).
- Believe in what you are being told; take allegations or suspicion of abuse seriously.
- Make brief notes using the person's own words. Do not interpret what has been said or make assumptions.
- Say that you are glad that the child told you.
- Acknowledge that the child may have angry, sad or even guilty feelings about what happened, but stress that the abuse was not the child's fault.
- Ensure the safety of the child and that they are away from the alleged abuser.

Do not:

- Promise confidentiality, but do discuss with the child who you need to tell.
- Investigate the allegation yourself and do not contact the parents until advised to do so by the local authority/officer in charge of the allegation.
- Say that you will do your best to protect and support the child.

7: SUSPICIONS ABOUT MEMBERS OF STAFF

7.1 Introduction

It is essential that any allegation of abuse made against a member of staff is dealt with fairly, quickly, and consistently, in a way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

7.2 What Is Meant By an Allegation Against A Member of Staff

You should be concerned if you believe that a member of staff has:

Behaved in a way that 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 they are unsuitable to work with children

7.3 This part of the guidance applies whether the child is someone with whom the member of staff is acquainted through their work, is a family member, friend, or stranger. As well as the safety and wellbeing of the subject child and other involved children, it is important to consider the staff member's long term attitude, access and level of risk to children.

II VISHWA VIDYAPEETH II **8: CONFIDENTIALITY & INFORMATION SHARING** **GROUP OF SCHOOLS**

8.1 Information may be shared to protect a child or vulnerable person, or to prevent a crime. Early sharing of information is the key to providing effective early help where there are emerging problems. The Data Protection Act is not a barrier to sharing information, but provides a framework to ensure that personal information about living persons is shared appropriately.

8.2 When working with children, guarantees of absolute confidentiality must not be given. Those working with children should tell them that information will be shared if it is necessary to keep a child or vulnerable adult safe.

8.3 Staff should be open and honest with the child (and 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.

8.4 Staff should seek advice if they are in any doubt.

8.5 Staff should follow the normal rules for safe data storage and transfer.

8.6 Recording should include the decision and the reasons for it – whether it is to share information or not. It should include what was shared, with whom and for what purpose.

PART 2: CREATING A CHILD PROTECTIVE CONTEXT

9 Code Of Conduct/Behaviour For Everyone

9.1 This Code of Behaviour is for all staff involved in Vishwa Vidyapeeth.

9.2 You must:

Treat all children equally and with respect

Provide an example of good conduct you wish others to follow

Ensure that, whenever possible, there is more than one adult present during activities with children or at least that you are within sight or hearing of others. If you are asked to talk in private ensure someone else knows where you are and leave a door ajar or stay in clear view, always make a note of the conversation, tell the child or young person they are free to leave or stop talking at anytime

Respect a young person's right to personal privacy/encourage young people and adults to feel comfortable and caring enough to point out attitudes or behaviour they do not like

Remember that someone else might misinterpret your actions, no matter how well intentioned

Be aware that physical contact with a child may be misinterpreted

Recognise that special caution is required when you are discussing sensitive issues with children

Operate within the organisation's principles and guidance and any specific procedures

Challenge unacceptable behaviour and report all allegations/suspensions of abuse.

9.3 You must not:

Engage in sexual activity with a young person (even if they are over 18)

You have met through your duties within the organisation, this would be an abuse of trust

Invite a child to your home or arrange to see them outside set activity hours

Give out personal contact details or contact them unnecessarily outside of activity hours

Give child gifts personally, any appropriate gifts such as token birthday gifts should come from the organisation. You should not accept gifts from children unless they are small token gifts appropriate to a celebration.

Lend or borrow any money or property

Allow yourself to be drawn into inappropriate attention-seeking behaviour/ make suggestive or derogatory remarks or gestures in front of children

Jump to conclusions about others without checking facts

Either exaggerate or trivialise child abuse issues

Show favouritism to any individual

Rely on your good name or that of the organisation or to protect you.

Believe 'it could never happen to me'

Take a chance when common sense, policy or practice suggests another more prudent approach

Allow abusive peer activities e.g. initiation ceremonies, bullying or horseplay.

9.4 You should give guidance and support to inexperienced helpers. Staff relationships are based on mutual respect and it is everyone's responsibility to ensure a positive working environment.

10: STAFF/VOLUNTEER SELECTION AND TRAINING

10.1 Staff will be selected based on their suitability to the role. All staff/volunteers are required to complete the recruitment process before activity commences.

10.2 Job descriptions and personal specifications will be made for each new role/position and agreed with staff.

10.3 All staff will be required to:

Complete an application form.

Provide proof of identity and qualifications.

Provide two references who may be contacted before interview.

Explain gaps in employment.

Complete an agreed probationary period.

Undertake induction and training.

10.4 A senior member of the organisation will review all of the recruitment material to decide whether the individual is appropriate to work with children.

11: COMPLAINTS PROCEDURE -

Vishwa Vidyapeeth learns from complaints and uses them to improve our services.

11.1 Complaints are any clear expression of dissatisfaction with the group, its personnel, or its services that calls for a response. The procedure deals with specific concerns including: a risk to the health or

safety of any individual or improper conduct or unethical behaviour or inappropriate behaviour in relation to children.

11.2 Anyone may make a complaint including children, parents/carers, volunteers, paid workers, or other people outside the group.

11.3 All complaints will be treated seriously whether made in person, by telephone, by letter, by fax, or by e-mail. Complaints will be dealt with promptly, politely, and with respect. Please see Vishwa Vidyapeeth Complaints Policy.

APPENDIX A: SIGNS & SYMPTOMS OF ABUSE & NEGLECT

Signs of Abuse

Recognising child abuse is not easy. It is not your responsibility to decide whether or not child abuse has taken place or if a child is at significant risk of harm from someone. You do however, have both a responsibility and duty, as set out in your organisation's child protection procedures, to act in order that the appropriate agencies can investigate and take any necessary action to protect a child.

The following information should help you to be more alert to the signs of possible abuse.

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Physical Abuse

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Most children will collect cuts and bruises as part of the rough-and-tumble of daily life. Injuries should always be interpreted in light of the child's medical and social history, developmental stage and the explanation given. Most accidental bruises are seen over bony parts of the body, e.g. elbows, knees, shins, and are often on the front of the body. Some children, however, will have bruising that is more than likely inflicted rather than accidental.

Important indicators of physical abuse are bruises or injuries that are either unexplained or inconsistent with the explanation given, or visible on the 'soft' parts of the body where accidental injuries are unlikely, e.g. cheeks, abdomen, back and buttocks. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern, although this can be more complicated with burns, as these are often delayed in presentation due to blistering taking place sometime later.

Unexplained bruising, marks or injuries on any part of the body

Multiple bruises- in clusters, often on the upper arm, outside of the thigh

Cigarette burns

Human bite marks

Broken bones

Scalds, with upward splash marks,

Multiple burns with a clearly demarcated edge.

Changes in behaviour that can also indicate physical abuse:

Fear of parents being approached for an explanation

Aggressive behaviour or severe temper outbursts

Flinching when approached or touched

Reluctance to get changed, for example in hot weather

Depression

Withdrawn behaviour

Running away from home.

Emotional Abuse

Emotional abuse can be difficult to measure, as there are often no outward physical signs. There may be a developmental delay due to a failure to thrive and grow, although this will usually only be evident if the child puts on weight in other circumstances, for example when hospitalised or away from their parents' care. Even so, children who appear well-cared for may nevertheless be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of children not being allowed to mix or play with other children.

Changes in behaviour which can indicate emotional abuse include:

Neurotic behaviour e.g. sulking, hair twisting, rocking

Being unable to play

Fear of making mistakes

Sudden speech disorders

Self-harm

Fear of parent being approached regarding their behaviour

Developmental delay in terms of emotional progress

Sexual Abuse

Adults who use children to meet their own sexual needs abuse both girls and boys of all ages, including infants and toddlers. Usually, in cases of sexual abuse it is the child's behaviour that may cause you to become concerned, although physical signs can also be present. In all cases, children who tell about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

It is also important to remember that it not just adult men who sexually abuse children – there are increasing numbers of allegations of sexual abuse of children against women and sexual abuse can also be perpetrated by other children or young people.

The physical signs of sexual abuse may include:

Pain or itching in the genital area

Bruising or bleeding near genital area

Sexually transmitted disease

Vaginal discharge or infection

Stomach pains

Discomfort when walking or sitting down

Pregnancy

Changes in behaviour which can also indicate sexual abuse include:

Sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn

Fear of being left with a specific person or group of people

Having nightmares

Running away from home

Sexual knowledge which is beyond their age, or developmental level

Sexual drawings or language

Bedwetting

Eating problems such as overeating or anorexia

Self-harm or mutilation, sometimes leading to suicide attempts

Saying they have secrets they cannot tell anyone about

Substance or drug abuse

Suddenly having unexplained sources of money

Not allowed to have friends (particularly in adolescence)

Acting in a sexually explicit way towards adults

Neglect

Neglect can be a difficult form of abuse to recognise, yet have some of the most lasting and damaging effects on children.

The physical signs of neglect may include:

Constant hunger, sometimes stealing food from other children

Constantly dirty or 'smelly'

Loss of weight, or being constantly underweight

Inappropriate clothing for the conditions.

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Changes in behaviour which can also indicate neglect may include:

Complaining of being tired all the time

Not requesting medical assistance and/or failing to attend appointments

Having few friends

Mentioning being left alone or unsupervised.

Bullying

Bullying is not always easy to recognise as it can take a number of forms. A child may encounter bullying attacks that are:

Physical: pushing, kicking, hitting, pinching and other forms of violence or threats

Verbal: name-calling, sarcasm, spreading rumours, persistent teasing

Emotional: excluding, tormenting, ridiculing, humiliating.

Persistent bullying can result in:

- Depression
- Low self-esteem
- Shyness
- Poor academic achievement
- Isolation
- Threatened or attempted suicide

Signs that a child may be being bullied can be:

- Coming home with cuts and bruises
- Torn clothes
- Asking for stolen possessions to be replaced
- Losing money
- Falling out with previously good friends
- Being moody and bad tempered
- Wanting to avoid leaving their home
- Aggression with younger brothers and sisters
- Doing less well at school
- Sleep problems
- Anxiety
- Becoming quiet and withdrawn

These definitions and indicators are not meant to be definitive, but only serve as a guide to assist you. It is important too, to remember that many children may exhibit some of these indicators at some time, and that the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour such as a death or the birth of a new baby in the family or relationship problems between parents. In assessing whether indicators are related to abuse or not, the authorities will always want to understand them in relation to the child's development and context.