

## **PERCY HEDLEY EDUCATION SERVICES**

# **TREATMENT OF CHILDREN WHO HAVE BEEN ABUSED**

## **POLICY & PROCEDURE**

Treatment of Abused Children Policy/procedure:	Issue date: 3 July 2015	Version No: 1.0
Status: <i>Approved</i>	Review date: 3 July 2017	Page 1 of 8

## Policy Control/Monitoring

<b>Version:</b>	1.0
<b>Approved by: (Name/Position in Organisation)</b>	Lynn Watson Director of Education
<b>Date:</b>	
<b>Accountability: (Name/Position in Organisation)</b>	Lynn Watson Director of Education
<b>Author of policy: (Name/Position in organisation)</b>	Lynn Watson Director of Education
<b>Date issued:</b>	3 July 2015
<b>Revision Cycle:</b>	1
<b>Revised (Date):</b>	3 July 2016
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<b>Amendments/additions</b>	
<b>Replaces/supersedes:</b>	

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<b>Associated Policies: (insert hyperlinks)</b>	
<b>Associated National Guidance</b>	
<b>Document status</b>	<p>This document is controlled electronically and shall be deemed an uncontrolled documented if printed.  The document can only be classed as 'Live' on the date of print.  Please refer to the staff login section of the internet for the most up to date version.</p>

## Equality Impact Assessment

This document forms part of Percy Hedley's commitment to create a positive culture of respect for all staff and service users. The intention is to identify, remove or minimise discriminatory practice in relation to the protected characteristics (race, disability, gender, sexual orientation, age, religious or other belief, marriage and civil partnership, gender reassignment and pregnancy and maternity), as well as to promote positive practice and value the diversity of all individuals and communities. As part of its development this document and its impact on equality has been analysed and no detriment identified.

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## Version Control Tracker

Version Number	Date	Author/ Title	Status	Comment/Reason for Issue/Approving Body

## Roles & Responsibilities

The following roles will have specific areas of responsibility for this policy:-  
**(add/delete as appropriate)**

Role	Responsibility
Chief Executive	
Director of Human Resources Department	
Head of Service/Head of department	
Training Development Officer	
Quality Manager	
Health and Safety Manager	
Lead Nurse	

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## Introduction

This guidance for staff and young people aims to provide practical, up-to-date information on (emotional, behavioural, sexual, neglect, radicalisation and psychiatric abuse) that can affect children and what child abuse is and the harm it can cause, and offers practical help.

### What is child abuse?

- punishing a child too much
- hitting or shaking a child
- constantly criticising, threatening or rejecting a child
- sexual interfering with or assaulting a child
- not looking after a child – not giving them enough to eat, ignoring them, not making sure that they are safe
- grooming and sexual exploitation
- radicalising children behind a cause, which may result in their harm or the harming of others

Children are usually abused by someone in their immediate family circle. This can include parents, brothers or sisters, babysitters or other familiar adults. It is quite unusual for strangers to be involved.

### Physically abused children may be:

- watchful, cautious or wary of adults
- unable to play and be spontaneous
- aggressive or abusive
- bullying other children or being bullied themselves
- unable to concentrate, underachieving at school and avoiding activities and sports
- having temper tantrums and behaving thoughtlessly
- lying, stealing, truanting from school and getting into trouble with the police
- finding it difficult to trust other people and make friends.

### Sexually abused children may:

- suddenly behave differently when the abuse starts
- think badly of themselves
- not look after themselves
- use sexual talk or ideas in their play that you could usually see only in someone much older

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- withdraw into themselves or be secretive
- under-achieve at school
- start wetting or soiling themselves
- be unable to sleep
- behave in an inappropriately seductive or flirtatious way
- be fearful, frightened of physical contact
- become depressed and take an overdose or harm themselves
- run away, become promiscuous or take to prostitution
- drink too much or start using drugs
- develop an eating disorder such as anorexia or bulimia.

**Emotionally abused or neglected children may:**

- be slow to learn to walk and talk
- be very passive and unable to be spontaneous
- have feeding problems and grow slowly
- find it hard to develop close relationships
- be over-friendly with strangers
- get on badly with other children of the same age
- be unable to play imaginatively
- think badly of themselves
- be easily distracted and do badly at school.

It can be hard to detect **long-standing abuse** by an adult the child is close to. It is often very difficult for the child to tell anyone about it, as the abuser may have threatened to hurt them if they tell anybody. A child may not say anything because they think it is their fault, that no one will believe them or that they will be teased or punished. The child may even love the abusing adult, they want the abuse to stop, but they don't want the adult to go to prison or for the family to break up.

First and foremost, the child must be protected.

If you have any concerns regarding the safety of any child please refer to the Designated Safeguarding Officers.

**Help to look after the child**

When a child has been abused within the family, the person involved is sometimes able to own up to what they have done and wants help. They can then be helped to look after their child better. Occasionally, the child may have to be taken away from the abusing adult because the risks of physical and emotional harm are too great. This can be for a short time, until things become safer, or may be permanent.

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## Specialist treatment

Many children need specialist treatment because of the abuse they have endured. Some receive help from family centres run by social services. If they are worried, depressed or being very difficult, the child and family might need help from the local child and adolescent mental health service. These specialists may work with the whole family, or with children and adolescents alone. Sometimes they work with teenagers in groups. Individual therapy can be especially helpful for children who have been sexually abused, or who have experienced severe trauma. Children who have suffered serious abuse or neglect can be difficult to care for, and the service can offer help and advice to parents and carers.

**Child Line provides a free and confidential service for children. NSPCC have a helpline 0800 800 500.**

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## Monitoring & Review

Overall responsibility for the operation of the procedure lies with the Executive Headteacher. The effectiveness of the procedure will be formally reviewed and monitored as a minimum on an annual basis to ensure that it continues to meet the requirements of The Foundation, the specific service area and that it reflects best practice and statutory legislation as appropriate.

The below table outlines the monitoring and compliance requirements of the procedure:

Element Monitored	Lead Person	Tool	Frequency	Reporting Arrangement	Lead Person - Act on Recommendation	Lead Person – Dissemination of Lessons Learned
<i>E.g Adherence to policy</i>	<i>Policy Author</i>	<i>Audit</i>	<i>Annually</i>		<i>Policy Author</i>	<i>Policy Author</i>

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