Safeguarding and promoting the welfare of children, in relation to this policy, is defined as:

- Protecting children from maltreatment
- Preventing the impairment of children’s health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

(Definition taken from HM Government document ‘Working Together to Safeguard Children 2013’)

We support the children visiting the Centre for Brain and Cognitive Development, (CBCD), protect them from maltreatment and have robust procedures in place to prevent the impairment of children’s health and development. Safeguarding is a much wider subject than the elements covered within this single policy, therefore this document should be used in conjunction with the other College policies and procedures.

At Birkbeck CBCD we will work with children, parents, external agencies and the community to ensure the welfare and safety of children and to give them the very best start in life. Children have the right to be treated with respect, be helped to thrive and to be safe from any abuse in whatever form.

To this end we will:

- Provide a safe and secure environment for all children
- Always listen to children and their families
- Provide an environment where staff and students are confident to identify where children and families may need intervention and seek the help they need
- Share information with other agencies as appropriate.

Our Centre has a clear commitment to protecting children and promoting welfare. Should anyone believe that this policy is not being upheld, it is their duty to report the matter to the attention of the College Safeguarding Officer at the earliest opportunity.

The legal framework for this policy is based on:
- Early Years Foundation Stage (EYFS) (2012)
- Working Together to Safeguard Children (2013)

The CBCD has a duty to protect and promote the welfare of children, and staff may be the first people to sense that there may be a problem. They may well be the first people in whom children confide about abuse or to spot changes in a child’s behaviour which may indicate abuse. The CBCD has a duty to be aware that abuse does occur in our society.

This statement lays out the procedures that will be followed if we have any reason to believe that a child involved in our research is subject to welfare issues including physical, sexual, emotional abuse or neglect.

Our prime responsibility is the welfare and well-being of all children we see. As such, we believe we have a duty to the children, parents, students and staff to act quickly and responsibly in any instance that may come to our attention. This includes sharing information with any relevant agencies such as local authority services for children’s social care, health professionals or the police. All students and staff will work as part of a multi-agency team, where needed, in the best interests of the child.
The CBCD aims to:
- Ensure that children are never placed at risk while visiting the Centre
- Ensure that information is shared only with those people who need to know in order to protect the child and act in their best interest
- Ensure that all students and staff feel confident and supported to share information and seek the help that the child may need
- Ensure students and staff are trained to understand the safeguarding policy and procedure, are alert to identify possible signs of abuse, understand what is meant by child protection and are aware of the different ways in which children can be harmed, including by other children, i.e. bullying, discriminatory behaviour
- Ensure that all students and staff are familiar and updated regularly with child protection issues and procedures
- Keep the child at the centre of all we do
- Make any referrals in a timely way, sharing relevant information as necessary in line with procedures set out by the Camden Safeguarding Children Board
- Regularly review and update this policy with students and staff and parents where appropriate and make sure it complies with any legal requirements and any guidance or procedures issued by the Camden Safeguarding Children Board.

Contacts:
Local Safeguarding Children Board: 020 7974 8716
www.cscb-new.co.uk

Types of abuse
Abuse and neglect are forms of maltreatment of a child. Somebody may abuse or neglect a child by harming them, or by failing to act to prevent harm. Children may be abused within a family, institution, or community setting by those known to them or a stranger. This could be an adult or adults, another child or children. The signs and indicators listed below may not necessarily indicate that a child has been abused, but will help us to recognise that something may be wrong, especially if a child shows a number of these symptoms or any of them to a marked degree.

Indicators of child abuse
- Failure to thrive and meet developmental milestones
- Fearful or withdrawn tendencies
- Aggressive behaviour
- Unexplained injuries to a child or conflicting reports from parents, students or staff
- Repeated injuries
- Unaddressed illnesses or injuries.

Recording suspicions of abuse and disclosures
Students and staff should make an objective record, supported by their supervisor, of any observation or disclosure and include:
- Child’s name
- Child’s address
- Age of the child and date of birth
- Date and time of the observation or the disclosure
- Exact words spoken by the child
- Exact position and type of injuries or marks seen
- Exact observation of an incident including any other witnesses
- Name of the person to whom the concern was reported, with date and time; and the names of any other person present at the time
• Any discussion held with the parent(s) (where deemed appropriate). Students and staff are not permitted to discuss these matters with the parent. If there is a cause for concern, students and staff must meet with the CBCD Centre Director who will refer the matter to the Birkbeck Safeguarding Officer.

These records should be signed by the person reporting this and the College Safeguarding Officer, dated and kept in a separate confidential file.

If a child starts to talk to an adult about potential abuse it is important not to promise the child complete confidentiality as this promise cannot be kept. It is vital that the child is allowed to talk openly and disclosure is not forced or words put into the child’s mouth. As soon as possible after the disclosure it is vital details are logged accurately.

It may be thought necessary that through discussion with all concerned the matter needs to be raised with the LSCB. Staff or student involved may be asked to supply details of any information/concerns they have with regard to a child. The CBCD expects all members of staff and students to co-operate with the LSCB in any way necessary to ensure the safety of the children. Staff and students must not make any comments either publicly or in private about a parent’s or staff’s supposed or actual behaviour.

**Physical abuse**

Action needs to be taken if a member of staff or a student has reason to believe that there has been a physical injury to a child, including deliberate poisoning, where there is definite knowledge, or reasonable suspicion that the injury was inflicted or knowingly not prevented. These symptoms may include bruising or injuries in an area that is not usual for a child, e.g. fleshy parts of the arms and legs, back, wrists, ankles and face. Many children will have cuts and grazes from normal childhood injuries. These should also be logged and discussed with the College Safeguarding Officer. Children and babies may be abused physically through shaking or throwing. Other injuries may include burns or scalds. These are not usual childhood injuries and should always be logged and discussed with the manager.

**Fabricated illness**

This is also a type of physical abuse. This is where a child is presented with an illness that is fabricated by the adult carer. The carer may seek out unnecessary medical treatment or investigation. The signs may include a carer exaggerating a real illness or symptoms, complete fabrication of symptoms or inducing physical illness, e.g. through poisoning, starvation, inappropriate diet. This may also be presented through false allegations of abuse or encouraging the child to appear disabled or ill to obtain unnecessary treatment or specialist support.

**Procedure:**

• Students and staff are not permitted to discuss these matters with the parent. If there is a cause for concern, students and staff must meet with the CBCD Centre Director who will refer the matter to the Birkbeck Safeguarding Officer.

• All signs of marks/injuries to a child when they come into CBCD, or occur during time at the visit, will be recorded as soon as noticed by a staff member. Parents will be asked to sign the record.

• The incident will be discussed with the parent at the earliest opportunity, where felt appropriate. Such discussions will be recorded and the parent will have access to such records.

• If there appear to be any queries regarding the injury, the local authority children’s social care team will be notified in line with procedures set out by the Local Safeguarding Children Board (LSCB).

**Sexual abuse**

Action needs be taken under this heading if the staff or student has witnessed occasion(s) where a child indicated sexual activity through words, play, drawing, had an excessive pre-occupation with sexual matters, or had an inappropriate knowledge of adult sexual behaviour or language. This may include acting out sexual activity on dolls/toys or in the role play area with their peers, drawing pictures
that are inappropriate for a child, talking about sexual activities or using sexual language or words. The child may become worried when their clothes are removed, e.g. for nappy changes. The physical symptoms may include genital trauma, discharge, and bruises between the legs or signs of a sexually transmitted disease (STD). Emotional symptoms could include a distinct change in a child's behaviour. They may be withdrawn or overly extroverted and outgoing. They may withdraw away from a particular adult and become distressed if they reach out for them, but they may also be particularly clingy to a potential abuser so all symptoms and signs should be looked at together and assessed as a whole. If a child starts to talk openly to an adult about abuse they may be experiencing the procedure stated below should be followed.

Procedure:
- The adult should reassure the child and listen without interrupting if the child wishes to talk
- The observed instances will be detailed in a confidential report
- The observed instances will be reported to the CBCD Centre Director who will refer the matter to the College Safeguarding Officer
- The matter will be referred to the local authority children's social care team
- A sensitive and confidential discussion will be held with the parents/carers of any other children party to inappropriate play.

Emotional abuse
Action should be taken under this heading if the staff member or student has reason to believe that there is a severe, adverse effect on the behaviour and emotional development of a child, caused by persistent or severe ill treatment or rejection. This may include extremes of discipline where a child is shouted at or put down on a consistent basis, lack of emotional attachment by a parent, or it may include parents or carers placing inappropriate age or developmental expectations upon them. Emotional abuse may also be imposed through the child witnessing domestic abuse and alcohol and drug misuse by adults caring for them. The child is likely to show extremes of emotion with this type of abuse. This may include shying away from an adult who is abusing them, becoming withdrawn, aggressive or clingy in order to receive their love and attention. This type of abuse is harder to identify, as the child is not likely to show any physical signs.

Procedure:
The concern should be discussed with the CBCD Centre Director who will refer the matter to the College Safeguarding Officer
- The concern will be discussed with the parent
- Such discussions will be recorded and the parent will have access to such records
- If there appear to be any queries regarding the circumstances, the matter will be referred to the local authority children’s social care team.

Neglect
Action should be taken under this heading if the staff member or student has reason to believe that there has been persistent or severe neglect of a child (for example, by exposure to any kind of danger, including cold, starvation or failure to seek medical treatment when required on behalf of the child), which results in serious impairment of the child's health or development, including failure to thrive. Signs may include a child persistently arriving at CBCD unwashed or unkempt, wearing clothes that are too small (especially shoes that may restrict the child’s growth or hurt them), or a child having an illness that is not being addressed by the parent. A child may also be persistently hungry if a parent is withholding food or not providing enough for a child’s needs. In addition, neglect may occur through pregnancy as a result of maternal substance abuse.

Procedure:
- The concern will be discussed with the parent by the College Safeguarding Officer
- Such discussions will be recorded and the parent will have access to such records
• If there appear to be any queries regarding the circumstances the local authority children’s social care team will be notified.

Staffing and volunteering
It is the policy of the CBCD to provide a secure and safe environment for all children. The CBCD will only allow adults who have an enhanced clearance to be left alone with children.

All CBCD members who work with children will receive initial basic child protection training during their first six months at CBCD. This will include the procedures for spotting signs and behaviours of abuse and abusers, recording and reporting concerns and creating a safe and secure environment for the children while visiting the CBCD.

The College Safeguarding Officer takes lead responsibility for safeguarding and co-ordinates child protection and welfare issues, liaising with the Local Safeguarding Children Board and the local authority children’s social care team. The Officer undertakes specific training, including a child protection training course, and receives regular updates to developments within this field.

We provide adequate and appropriate staffing resources to meet the needs of children.

• Applicants for relevant posts within the CBCD are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates are informed of the need to carry out checks before posts can be confirmed. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.
• We give staff members/volunteers and students opportunities to declare changes that may affect their suitability to care for the children including anything in their private life, family members or medical background during annual reviews/supervisions.
• This information is also stated within every member of staff’s contract.
• We request DBS checks according to Birkbeck Human Resources requirements.
• We ensure we receive at least two written references BEFORE a new member of staff commences employment with us.
• All students, staff and volunteers will have enhanced DBS checks conducted on them and not work alone with children until their clearance has come through.
• DBS checks will be renewed every three years.
• We abide by the requirements of the Safeguarding Vulnerable Groups Act (2006) and the Childcare Act 2006 in respect of any person who is disqualified from providing childcare, is dismissed from our employment, or resigns in circumstances that would otherwise have led to dismissal for reasons of child protection concern.
• Entry to CBCD is controlled by Birkbeck entry systems. Contractors are not left alone with children when in the CBCD.
• All staff have access to a whistle blowing policy which will enable them to share any concerns that may arise about their colleagues in an appropriate manner.
• All staff will receive supervision meetings where opportunities will be made available to discuss any issues relating to individual children, child protection training and any needs for further support.

Informing parents
Parents are normally the first point of contact. If a suspicion of abuse is recorded, parents are informed at the same time as the report is made, except where the guidance of the LSCB does not allow this. This will usually be the case where the parent or family member is the likely abuser, or where a child may be endangered by this disclosure. In these cases the investigating officers will inform parents.

Confidentiality
All suspicions, enquiries and external investigations are kept confidential and shared only with those who need to know. Any information is shared in line with guidance from the LSCB.
Support to families
The CBCD takes every step in its power to build up trusting and supportive relations among families, staff, students and volunteers.

The CBCD continues to welcome the child and the family whilst enquiries are being made in relation to abuse in the home situation. Parents and families will be treated with respect in a non-judgmental manner whilst any external investigations are carried out in the best interests of the child.

Confidential records kept on a child are shared with the child's parents, or those who have parental responsibility for the child, only if appropriate in line with guidance of the LSCB with the proviso that the care and safety of the child is paramount. We will do all in our power to support and work with the child's family.

Employees, students or volunteers of the CBCD or any other person working on the CBCD premises
If an allegation is made against a member of staff, student or volunteer or any other person who works on the CBCD premises, regardless of whether the allegation relates to the CBCD premises or elsewhere, we will follow the procedure below.

The allegation should be reported to the senior manager on duty. If this person is the subject of the allegation then this should be reported to:

Mr Simon Deville
Deputy Head of Student Services
Malet Street
London
WC1E 7HX
s.deville@bbk.ac.uk
0207 079 0722

The Local Authority Designated Officer (LADO), and the LSCB will then be informed immediately in order for this to be investigated by the appropriate bodies promptly:

- The LADO will be informed immediately for advice and guidance. The following link gives contact details: [www.csbc-new.co.uk/?page_id=5175](http://www.csbc-new.co.uk/?page_id=5175)
- A full investigation will be carried out by the appropriate professionals (LADO, LSCB) to determine how this will be handled
- The CBCD will follow all instructions from the LADO, LSCB and ask all staff members to do the same and co-operate where required
- Support will be provided to all those involved in an allegation throughout the external investigation in line with LADO support and advice
- The CBCD reserves the right to suspend any member of staff during an investigation
- All enquiries/external investigations/interviews will be documented and kept in a locked file for access by the relevant authorities
- Unfounded allegations will result in all rights being re-instated
- Founded allegations will be passed on to the relevant organisations including the local authority children's social care team and where an offence is believed to have been committed, the police, and will result in the termination of employment. The CBCD will also notify the Disclosure and Barring Service (DBS) to ensure their records are updated
- All records will be kept until the person reaches normal retirement age or for 10 years if that is longer. This will ensure accurate information is available for references and future DBS checks and avoids any unnecessary re-investigation
- The CBCD retains the right to dismiss any member of staff in connection with founded allegations following an inquiry
- Counselling will be available for any member of the CBCD who is affected by an allegation, their colleagues in the CBCD and the parents.
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