



Safeguarding for Homestays

ELC Bristol is committed to safeguarding and promoting the welfare of children and young people. We expect all staff and homestay hosts to share this commitment.

ELC Bristol will take all reasonable measures to:

- Ensure a safe environment for students in order to safeguard their interests.
- Treat all students with care and respect according to their needs and without discrimination of any kind.
- Protect each student from any form of abuse, whether from an adult or another student.
- Be alert to the medical needs of students, especially those with medical conditions.
- Strike a proper balance between protecting students and respecting the rights and needs of host family members. However, where there is conflict between these requirements the student's welfare will come first.
- Provide registered homestay hosts with copies of our Child Protection Policy: [Child Welfare Policy](#)
- Ensure that, where ELC Bristol ceases to use the services of any person because that person was considered unsuitable to work with children, a prompt and detailed report is made to the Disclosure and Barring Service (DBS) or other relevant body as determined by future legislation.
- Support students who have been abused in accordance with his / her agreed child protection plan.

What is Child Abuse?

Abuse and neglect are forms of maltreatment of a child. Somebody 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 institutional or community setting, by those known to them or, more rarely, by a stranger for example, via the internet. They may be abused by an adult or adults, or another child or children

Child Abuse is a term used to describe the way that people (usually adults but sometimes other children or young people) harm children. Usually the adult is someone the child knows well such as a member of the family, neighbour or family "friend".

There are many forms of child abuse, which can be categorised as neglect, physical abuse/injury, sexual abuse and emotional abuse. Abuse can result in the child suffering significant harm and at worst, can lead to death. In many cases, an abused child will suffer more than one type of harm, for example physical injury and emotional abuse.

Child abuse can take place anywhere that children spend time. Children may also be abused via the internet or other technology.

"To protect them from that which is not in their best interest"



Myths about Child Abuse

MYTH: Children are usually abused by strangers

FACT: Most children are abused by someone they know and trust

MYTH: Women do not sexually abuse children

FACT: Although the majority of sexual abusers are male, in approximately 5 – 10% of cases, the sexual abuser is female

MYTH: It doesn't happen here – this is usually relating to a neighbourhood, class, ethnic group or community.

FACT: Abuse happens anywhere, in all classes, ethnic groups, cultures, etc.

MYTH: Some practices are more acceptable in some cultures.

FACT: Child abuse is unacceptable in any culture.

MYTH: Children are prone to lie, and they will often lie about the abuse.

FACT: Children very rarely lie about abuse and often their greatest fear is that they won't be believed. (Abusers often tell children that no one will believe them if they disclose abuse).

MYTH: When Children's Social Care get a referral about an abused child, he or she is usually taken into care.

FACT: Most children remain at home with their parents, with support from professionals. In most cases the best place for a child to grow up is with his or her parents

MYTH: People who harm children come from deprived backgrounds, are of below average intelligence or are "recognisable as dangerous" in some way

FACT: People who harm children come from all walks of life, social class and intellectual backgrounds, and may be liked and respected members of the community.

MYTH: Disabled children are less likely to be abused.

FACT: Research shows that disabled children are more likely to be abused.



Signs and Indicators of Abuse and Neglect

Any person, who knows or suspects that a child is being or has been harmed or is at risk of significant harm, has a duty to refer his or her concern to Children's Social Care and/or the Police. It is not your role to investigate or assess whether or not abuse has occurred - you have a responsibility to pass on your concerns to those who can investigate them, so that action to protect the child can be taken if necessary.

There is sometimes a danger of applying a 'rule of optimism', whereby adults like to think that the child is or will be OK really, or that it won't happen again. However, it is known that when an adult has abused a child on one occasion, it is very likely that such behaviour will be repeated – abusers rarely stop harming children without intervention or treatment.

PHYSICAL ABUSE:

Physical Signs: Injuries not adequately explained including: Fractures, bruises, burns, bite marks, slap marks and implement marks (e.g. belt mark).

Other signs of abuse include: Grip marks, slap marks, soft tissue marks, long marks, symmetrical bruising, bruising in unusual places, teeth / bite marks, burns.

Behavioural Signs: Child appears frightened of others, child doesn't want to go home, or runs away, child flinches when approached or when someone stretches a hand towards them, child very passive or very aggressive, frozen watchfulness, equally could appear overly "happy" and "eager to please"

SEXUAL ABUSE:

Physical Signs: Repeated, inappropriate masturbation, presence of sexually transmitted disease, explicit sexual drawings, pain, soreness or itching in the genital or anal areas or mouth, recurrent genital or urinary infections, pregnancy.

Behavioural Signs: Disclosure from a child (to another child or an adult), young children acting out sexual behaviours, young children displaying sexually inappropriate knowledge or behaviour, nightmares and sleep problems, anorexia, bulimia, self-harm or excessive 'comforting' eating, fear of a specific person, running away from home, substance abuse, child having unexplained gifts, including money, children having 'secrets' that an adult says they are not allowed to tell, secrecy around internet use and webcams etc.



NEGLECT:

Physical Signs: Looks excessively thin or ill, well below average weight and height, failure to thrive, recent unexplained weight loss, complains of hunger; lack of energy, untreated conditions/injuries, repeated accidents, especially burns, left home alone inappropriately, repeatedly unwashed, smelly or dressed inappropriately for the weather.

Behavioural Signs: Poor level of concentration, constantly hungry, not keeping Doctor or Hospital appointments, frequently not at school or persistent lateness.

EMOTIONAL ABUSE:

Physical Signs: Physical, mental and emotional developmental delay / late developer with no obvious medical reason, sudden onset speech disorders, e.g. suddenly developing a stammer

Behavioural Signs: Acceptance of punishment which seems excessive, over-reaction to mistakes, continual self-deprecation, excessive fear of new situations, inappropriate emotional response to painful stimuli, excessive behaviours, e.g. rocking, head banging, pulling own hair out, self-harm and/or eating disorders, compulsive stealing/scavenging, excessively sad, depressed, withdrawn, low self-esteem, very poor relationship with parent/carer.

Handling Disclosures of Abuse:

Receive: Listen to what is being said without displaying shock or disbelief
Accept what is being said without judgement. Take it seriously

Reassure: Reassure the child, but only so far as is honest and reliable. Don't make promises that you can't be sure to keep, e.g. "I'll stay with you" or "everything will be all right now"
Don't promise confidentiality – you have a duty to report your concerns.
Tell the child that you will need to tell some people, but only those whose job it is to protect children. Acknowledge how difficult it must have been to talk.
Never agree to keep secrets – be honest
Do reassure the child that he or she is right to tell

React: Listen quietly, carefully and patiently
Do not investigate, interrogate or decide if the child is telling the truth
Don't ask leading questions, e.g. "What did he do next?" (This assumes he did).
Do ask open questions like "Is there anything else that you want to tell me?"
Do not ask the child to repeat what they have told you to another person
Explain what you have to do next and whom you have to talk to.



Record: Make some very brief notes at the time and write them up in detail as soon as possible
Do not destroy your original notes in case they are required by Court.
Record the date, time, place, words used by the child and how the child appeared to you
Record statements and observable things.
Do not assume anything – don't speculate or jump to conclusions

Remember: If a child discloses abuse to you, take it seriously
Seek advice from the designated members of staff at ELC

Don't

- Refuse to listen, tell them you will see them later
- Over-react
- Don't be on your own in a room with the student with the door closed
- Show worry or concern
- Put words in their mouth
- Make comments
- Ask leading questions
- Promise confidentiality
- Leave the student alone after they have disclosed. Just act as a reassuring presence.
- Tell anyone other than members of the Safeguarding team

What to do in response to concerns

What to do if you're worried a child is being abused?

Where the child needs urgent medical attention this must be dealt with as soon as possible. Any discussion with colleagues, the child, parents/carers or organisations can take place once medical attention has been received if necessary.

Whom Should I Tell?

Key personnel and responsibilities:

The Vice Principal, Mark Calland is the Designated Safeguarding Lead (DSL)/child protection officer (CPO) (trained to Safeguarding Level 3) and has overall responsibility for Child welfare, protection and safeguarding at senior management level, which will be delegated on a day-to-day basis.



The assistant designated safeguarding leads are:

John Duncan (the Principal) – trained to Safeguarding Level 3

Margaret Duncan (the Director) – trained to Safeguarding Level 3

Andrea d’Essen, (the Accommodation Manager) – trained to Safeguarding Level 3

Other trained staff who can deal with day-to-day issues of welfare and safeguarding:

Kate Jackson (Admissions Officer) – trained to Safeguarding Level 3,

Andrew Varney (Social Programme Manager) – trained to Safeguarding Level 2

Information Sharing and Confidentiality

The safety and welfare of the child must always be the primary consideration in deciding whether or not to share information, and always overrides confidentiality. However, if someone reports a child protection concern to you, you should only discuss it with a member of the safeguarding team and not anyone else.

Seek advice if you are in doubt – especially when you are concerned about risk of harm to a child or anyone else.