



# Recognising Signs of Child Abuse and What To Do

## A Guide for Childcare Providers

Cambridgeshire



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# Recognising Signs of Child Abuse and What To Do

## A Guide for Childcare Providers

### Introduction

**Child abuse is a very difficult subject to deal with for everyone. This is certainly the case for those providing day care for children, not least because a decision to report concerns or suspicions of possible child abuse might seem to go against the principle of working in partnership with parents.**

However, you have a responsibility to the children you care for and because of your close contact with these children, you may well be the first person to spot early signs and symptoms of abuse. Regulations require all group care providers to have in place a **safeguarding children policy and procedure**, which reflects the Local Safeguarding Children Board (LSCB) local guidance and procedures. This should include contact telephone numbers for the local police and children's social care. (**'Working Together to Safeguard Children' The Stationery Office, 2006 paragraph 2.13**). It is not mandatory for childminders to have written copies of safeguarding policies and procedures. However, childminders are expected to ensure that any assistants they employ are aware of all policies and procedures and that they are clearly able to define them for parents and others. The procedures to be followed by practitioners working with children and their families when identifying concerns and referring to children's social care are set out in chapter 2 of the Cambridgeshire LSCB inter-agency procedures. Accessible at [www.cambslscb.org.uk](http://www.cambslscb.org.uk), all staff and parents/carers should be made aware of this.

These guidelines are intended to assist you in recognising child abuse and understanding your role in protecting the children in your care. They explain how you should report your concerns and who you should contact.

Remember that you can always get help and advice, even if you are not sure whether a child in your care has been harmed in some way. If in doubt, seek advice from a social care professional via Cambridgeshire Direct. Contact numbers are included in Appendix 1 on page 13.

This booklet complies fully with the Cambridgeshire Local Safeguarding Children Board (LSCB) Safeguarding Inter-agency Procedures. (See Appendix 2 for LSCB details.)

**This booklet should be used in conjunction with the following Cambridgeshire Early Years and Childcare Service guidance documents:**

- **'Guidance for Managing Allegations of Abuse Against all Adults Working With and Looking After Children in Early Years and Childcare Settings'** – Cambridgeshire County Council, 2007 (for group care settings and childminders who work with other adults)
- **'Guidance for Managing Allegations of Abuse Against all Adults Working With and Looking After Children in Homebased Settings'** – Cambridgeshire County Council, 2008 (for all other childminders).

# Recognising signs of child abuse

## Introduction

There is no clear dividing line between one type of abuse and another. Children may show symptoms from one or all of the categories given below. The following is not a comprehensive or definitive list, but gives an indication of situations, which should alert you to possible cause for concern.

## Physical abuse

Physical abuse can take various forms. In addition to the following examples, injury may be inflicted through means such as suffocating or poisoning.

- Bruises in places not normally harmed during play, for example, back of the legs, abdomen, groin area
- Bruising in or around the mouth area (especially in young babies) – Note: "Bruising to immobile babies" is listed in the LSCB procedures as one of the indicators for which for a referral to children's social care should always be made.
- Grasp marks on legs and arms – or chest of a small child
- Finger marks (for example, you may see three or four small bruises on one side of the face and none on the other)
- Symmetrical bruising, i.e. the same pattern of bruising on both sides of the body/head/legs/arms etc. (especially on the ears or around the eyes)
- Outline bruising (for example, belt marks, hand prints)
- Linear bruising (particularly on the buttocks or back)
- Old and new bruising (especially in the same area, for example, buttocks)
- Unexplained injuries, bruises or marks
- Fear, watchfulness, over-anxiety to please
- **Bites** – these can leave clear impressions of teeth. Human bite marks are oval or crescent shaped. If the distance is more than 3cm across, it indicates that they have been caused by an adult or older child.
- **Fractures** – these should be suspected if there is pain, swelling and discolouration over a bone or joint. As fractures also cause pain it is difficult for a parent or carer to be unaware that a child has been hurt.
- **Burns/scalds** – it can be very difficult to distinguish between accidental and non-accidental burns, but as a general rule, burns or scalds with clear outlines are suspicious, as are burns of uniform depth over a larger area.

### Points to note:

- It is very rare for a child under one year to sustain fractures accidentally
- Bruising is very rare in babies who are not yet mobile.

## Neglect

Neglect occurs when the child's parents or carers do not consistently meet their needs for food, warmth, protection, stimulation, education and care, including of their health needs. It may also occur when children are not helped with the development of their behaviour and emotions.

### Warning signs include:

- Child frequently appears hungry, asks for food
- Consistently unkempt, dirty appearance, smelly, poor hygiene
- Babies' nappies not being changed frequently enough
- The child's clothes are often dirty, scruffy or unsuitable for the weather
- Repeated failure by parents/carers to prevent accidental injury
- Medical needs of child unmet – for example, failure to seek medical advice for illness
- Developmental delay
- Behaviours such as head banging or rocking.
- The child is exposed to risks and dangers, such as the home being unsafe or drugs or needles being left around
- The child is left alone with unsuitable carers
- The child has lots of accidents
- No one seeks medical help when the child is ill or hurt.

## Sexual abuse

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. Sexual abuse occurs when children are used by others to meet their own sexual needs, this might include sexual activity involving the child or showing the child pornographic material on videos or the internet.

Most child victims are sexually abused by someone they know – either a member of their family or someone well known to them or their family. The child is likely to have been put under considerable pressure not to reveal what has been happening and many children feel guilty and responsible about their involvement. There are no typically sexually abusing families.

Very young children or children with special needs may not be aware or have the language to describe what is happening to them and it is particularly difficult in such cases to assess possible abuse by an adult or a child's sibling or another child

### Some possible signs:

- Explicit or frequent sexual pre-occupation in talk and play
- Hinting at sexual activity or secrets through words, play or drawing
- Sexualised behaviour – for example, pretend sexual intercourse during play
- Sexually provocative relationships with adults
- Itching, redness, soreness or unexplained bleeding from vagina or anus
- Bruising, cuts and marks in the genital area
- Repeated urinary tract or genital infections.

## Emotional abuse

Emotional abuse occurs when children are persistently denied love and affection. Children will be harmed if they are frequently shouted at, made to feel stupid, rejected, used as a scapegoat or live in a violent atmosphere.

### **This might include:**

- The parent/carer giving the repeated message to the child that he/she is worthless, unloved or inadequate
- The parent/carer having wildly unrealistic expectations of their child's abilities, taking into account the child's age and stage of development
- The child showing serious difficulties in his/her emotional, social or behavioural development
- The parent/carer frequently causing the child to feel frightened or in danger.

### **Some possible signs:**

- Very low self-esteem, often with an inability to accept praise or to trust adults
- Excessively clinging, withdrawn anxious behaviour
- Demanding or attention-seeking behaviour
- Over-anxious – either watchful, constantly checking or over-anxious to please
- Withdrawn and socially isolated
- Unwillingness to communicate
- Sudden speech disorders
- Repetitive, nervous behaviour such as rocking, hair twisting.

## Supporting a child who tells about abuse

- Stay calm
- Ensure that the child is, and feels safe
- Seek necessary medical treatment without delay
- Tell the child they are not to blame – it's not their fault
- Tell and show the child that they are being taken seriously – do not express disbelief
- Explain to the child that they have done the right thing to tell you
- Do not promise that you will be able to keep secret the things the child has told you – be honest and explain that it will be necessary to tell someone else
- Keep questions to a minimum and ask only open questions. For example: after noticing a mark on a child, ask: "How did that happen?" and NOT "Did Daddy do that?" which is a 'leading' question.
- Use the child's own words but check out with the child what they mean if this is unclear (for example, the child may have particular words for parts of the body)
- Repeat back to the child (as accurately as possible) what you have heard to check your understanding of what the child has told you
- Ask the child if he/she has told their mum/dad/other person these things
- Any child old enough to communicate directly should be asked how he/she hurt himself/herself. In younger children it is perfectly normal to ask the parent/carer what happened where an injury is clearly visible.
- Tell the child what will happen next and what you intend to do
- Write down what the child has told you as soon as possible after the event. Ensure that records are recorded factually and signed and dated. They should be countersigned by the designated person for child protection in your setting.

### **DON'T:**

- Put it off
- Press the child for explanations
- Leave it to someone else to help the child
- Be afraid to voice your concerns, the child may need urgent protection and help.

### **Remember!**

- Any child anywhere can be abused at any time.
- Children with disabilities are especially vulnerable.
- Child abuse can be committed by anyone – adults or children.

There is separate guidance for managing allegations of abuse against all adults working with children in early years and childcare settings. This guidance can be found online at: [www.cambridgeshire.gov.uk/childcare](http://www.cambridgeshire.gov.uk/childcare)

## Your responsibility as a childcare provider

This section tells you what you should do if you have any worries or nagging doubts about a child in your care. Your concerns may be triggered by changes in the child's behaviour or by something the child may have said.

### Introduction

The Childcare Act 2006 requires that group care providers on the Early Years Register and the Childcare Register have in place a **safeguarding children policy and procedure**, which adheres to the Local Safeguarding Children Board (LSCB) local guidance and procedures. Providers should ensure through induction that all members of staff (including volunteers) understand the policy and procedure. The policy and procedure should be explained to, and accessible to, all parents.

It is not mandatory for childminders to have written copies of safeguarding policies and procedures. However, childminders are expected to ensure that any assistants they employ are aware of all policies and procedures and that they are clearly able to define them for parents and others.

#### The Childcare Act requires that group care providers must:

- have a written safeguarding children policy and procedure in place, in line with the Local Safeguarding Children Board (LSCB) local guidance and procedures, and implement it effectively
- ensure through induction that all members of staff (including volunteers) understand the policy and procedure
- ensure the policy and procedure have been explained to and are accessible to all parents
- have a designated member of staff, with appropriate child protection training, to take lead responsibility for safeguarding children within the setting and to liaise with local statutory children's services agencies, as appropriate<sup>1</sup>
- have procedures in place to be followed in the event of an allegation being made against a member of staff and that all staff are aware of these procedures.

#### School-run Provision

Schools that directly manage childcare may use the school's safeguarding policy and procedure for their childcare provision, as long as it meets Childcare Act requirements.

#### Childminders

Childminders must have a thorough understanding of safeguarding policy and procedure. They must also ensure that all assistants are aware of and understand the policy and procedure. Childminders must be able to clearly define the policy and procedure for parents and take the lead responsibility for safeguarding children in their setting.

<sup>1</sup>The designated person (DP) for child protection should attend refresher training every three years. A setting should have more than one trained DP, if the DP works part time or is absent from the setting for long periods.

## Recording concerns about children

### You must:

- Write down everything that has given you cause for concern and why. Do this as soon as possible.
- Record any dates and times of incidents or observations and any contact with the child's parents/carers, making sure they are factual and do not include personal opinions or assumptions, unless they can be supported by facts.
- Record any explanation for the injuries or behaviour given by the child and/or parent/carer.
- Record who the child has come into contact with since the disclosure or injury (if known).
- Ensure that records containing information on individual children are stored in a secure place on the premises. In the case of group care facilities (for example, nurseries, pre-schools etc) records should be kept in a locked place and arrangements made for designated persons to gain access to them. It will not be sufficient for keys to locked storage to be held by only one member of staff.
- Your record of the disclosure or injury in your accident/incident record should be cross-referenced to all other records or files that are held about the individual child concerned.

## Seeking advice and reporting to the Local Authority

You may not be certain whether or not a child has been abused, but if in doubt, it is possible to seek advice first, provided you are clear that:

- it must not delay the reporting process
- it is not a substitute for making a child protection referral

### Reporting suspected abuse/making a child protection referral

You must make a referral to Children's Social Care Services at Cambridgeshire Direct on 0345 045 5203, where a social worker trained in child protection will support you.

The social worker will check whether the family is known to social care services already and will discuss the case with a senior officer.

Enquiries will often begin by asking other people in contact with the child, such as teachers, health visitors or doctors, if they have any concerns for the child. In most cases there will be a discussion between the social worker and the parents and child. Sometimes it soon becomes clear that there is nothing to worry about, but if concern remains about the welfare of the child, the formal Child Protection Enquiry procedures will begin immediately. Because of the confidential nature of this work, you may not be kept informed as the enquiry continues, but your alertness will have been the important first step in protecting the child.

- A 'referral' is simply a report of a concern or a request for a service to the Local Authority Children's Social Care Team by a member of the public, a person who has contact with children in a professional capacity or a relative of the child.
- When making a referral, you need to be aware that the Local Authority Children's Social Care Team may already be involved with the family.

- Before making a referral, you will normally be expected to have spoken to the parents/carers about your intention to refer to the Local Authority Children's Social Care Team, unless – following prior discussions with a social care professional and/or your colleagues – it is believed that this will place the child at risk of significant harm. Please also refer to 'Communicating with parents and carers', paragraph 2, on page 12.
- Whether or not you have sought advice beforehand from a social care professional, making a referral to the Local Authority Children's Social Care Team will involve providing the following information:
  - The child's name, address, date of birth, parents'/carers' names, GP's name
  - The referring person's details, for example, position in the setting, address, childminder, etc.
  - What the concerns are; how and why they have arisen; what appear to be the needs of the child
  - The parents'/carers' reaction to the concerns that have been expressed (if parents/carers are aware of the concerns)
  - Any recent changes in the child's behaviour or presentation
  - Whether there are any other children in the household (if known)
  - Whether there are any other agencies currently involved with the family (if known)
  - Whether there have been any previous concerns about this child or other children in the household
  - Whether the child has any disabilities or special needs.

### Also:

- Whether any immediate action is necessary to protect the child
- Clarify who knows about this referral
- Clarify which information the referrer is reporting directly and information that has been obtained from a third party.

**A referral should be made using the Single Agency Referral Form (SARF). The SARF can be accessed online at: [www.cambridgeshire.gov.uk/childrenyoungpeople/sarf](http://www.cambridgeshire.gov.uk/childrenyoungpeople/sarf)**

**Remember that these matters should not be discussed in general conversation.**

### Seeking advice

You may wish to speak to your Early Years Foundation Stage Adviser (EYFSA), Childcare and Playwork Adviser (CAPA) or Childminding Support and Development Officer (CSDO) for advice. This can be useful if you are unsure, but it is not a substitute for a referral and it is essential that it does not delay the reporting process. In the event that you seek advice in this way, your Adviser will contact you the next day to check if a referral has been made, and in some cases make a third party referral. The need for a third party referral could signal that you have not acted in accordance with your setting's child protection policies and procedures and may require further investigation.

## Public Protection Specialist Investigations and Domestic Abuse Unit

In cases where there is a possibility of a criminal act having been committed, the Public Protection Specialist Investigations and Domestic Abuse Unit may become involved (either directly or following discussions with social care professionals). Keep anything (i.e. 'evidence') that may help police with their enquiries.

### Communicating with parents and carers

**This section must be read in conjunction with the section 'Seeking advice and reporting to the Local Authority' on page 10.**

- Every parent/carer should be made aware of the childcare provider's child protection policy.

Parents/carers must be informed that childcare providers have a duty to report suspected child abuse or neglect. This information should be included in safeguarding policies and can be included on the setting's registration form.

- **If your concerns are that the child may have been deliberately harmed or sexually abused, or you feel that child may be at greater risk of harm by discussing with the parents, then you should contact the Local Authority Children's Social Care Team immediately, without informing the parents that you are doing so (as they may be implicated in the abuse).**
- Any injury visible on a child (accidental or non-accidental) should be recorded as soon as the child arrives. Parents should be encouraged to tell you about injuries that have happened outside the childcare setting. If an injury is clearly visible on a child, it is appropriate to ask the parents/carers about the injury, which may be accidental. Do not be afraid to ask open questions or make observations, like: "What happened?" or "I noticed when she got changed that Tracy had a bruise under her arm." Similarly changes in a child's behaviour causing you concern will need to be discussed with the parents and carers using open questions such as "Has anything happened at home as I've noticed that Sam seems very quiet and not his normal self?"
- If your concerns are about signs of neglect in the child or a damaging emotional relationship observed over a period of time, you will normally have discussed these concerns with the parent. If there is no change and you remain concerned about the welfare of the child you should then tell the parent/carer that you are contacting the Local Authority. (It might be helpful to remind the parents/carers of your duty to report concerns in line with your safeguarding policy, which the parents/carers will have seen.)

## Appendix 1: Important contact information

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**Referrals to the Local Authority - In office hours (8am - 8pm Mon - Fri)** **0345 045 5203**  
Children's Social Care Services at Cambridgeshire Direct

**Referrals to the Local Authority - Outside office hours** **01733 234724**  
Cambridgeshire Children and Young People's Services

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**NSPCC** **0800 800500**  
National Society for the Prevention of Cruelty to Children

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**Police (8am - 8pm Mon - Fri)**  
Public Protection Specialist Investigations and Domestic Abuse Unit

General e-mail - [CentralReferral.TaskingUnit@cambs.pnn.police.uk](mailto:CentralReferral.TaskingUnit@cambs.pnn.police.uk)

Central Referral Unit **01480 428080**

Out of Hours Switchboard **0345 456 4564**

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**LSCB** [www.cambslscb.org.uk](http://www.cambslscb.org.uk)  
Cambridgeshire Local Safeguarding Children Board **01480 373522**

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**LADO** Local Authority Designated Officers (LADO)

LADO Unit **01223 727967**

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### Early Years and Childcare Advisory Teams:

**EYFSA** **01954 273339**  
Early Years Foundation Stage Advisers

**CAPA** **01954 273365**  
Childcare and Playwork Advisers

**CSDO** **01954 273358**  
Childminding Support and Development Officers

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## Appendix 2: The Cambridgeshire Local Safeguarding Children Board

**The Cambridgeshire Local Safeguarding Children Board (LSCB) was formed in 2005, succeeding the former Area Child Protection Committee and is the key statutory mechanism for agreeing how the relevant organisations in each local area will cooperate to safeguard and promote the welfare of children.**

The LSCB aims to be a listening, active and challenging partnership with a focus on promoting safe service delivery and practices to enable children in the county to enjoy their childhood and youth.

The LSCB has appointed an independent chair to oversee its business. The main functions are:

- Developing policies and procedures for keeping children safe and promoting their welfare
- Making sure everyone working with children knows about the need to keep children safe
- Checking that the agencies working with children are doing all they should to safeguard and promote their welfare
- Taking part in local planning and commissioning of services
- Collecting and analysing information around any child deaths in the area so as to identify any issues of concern and lessons that need to be learnt

The LSCB drives its work through a number of specialist subcommittees, has a multi agency training programme and a number of useful leaflets further details of which can be found at the website on [www.cambslscb.org.uk](http://www.cambslscb.org.uk)

### Contact Details:

Cambridgeshire LSCB  
7 The Meadows  
Meadow Lane  
St Ives  
Cambridgeshire  
PE27 4LG

**Tel:** 01480 373522

**Web:** [www.cambslscb.org.uk](http://www.cambslscb.org.uk)

## Appendix 3: Other publications

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### National Guidance

- **'What to do if you're worried a child is being abused.'** Department for Children, Schools and Families (DCSF), 2006
  - **'Guidance for Safer Working Practice for Adults who Work with Children and Young People'** Department for Children, Schools and Families (DCSF), November 2007
  - **'Working Together to Safeguard Children'** The Stationery Office, 2006
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### Cambridgeshire Guidance

- **'Local Safeguarding Children Board (LSCB) Safeguarding Inter-agency Procedures'** LSCB, November 2006 (<http://www.cambslscb.org.uk/professionals/lscbprocs.shtm>)
  - **'Guidance for Managing Allegations of Abuse Against all Adults Working With and Looking After Children in Early Years and Childcare Settings'** Cambridgeshire County Council, 2007
  - **'Guidance for Managing Allegations of Abuse Against all Adults Working With and Looking After Children in Homebased Settings'** Cambridgeshire County Council, 2008
  - **'Common Assessment Framework (CAF) – Cambridgeshire Operational Guidance'** Cambridgeshire Children and Young People's Strategic Partnership (Downloadable from <http://www.cambridgeshire.gov.uk/childrencyoungpeople/cypsp/caf/CAFfurtherinfo.htm> )
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**The designated person for Child Protection for your setting should have a copy of the 'Designated Person for Child Protection Information Booklet', which is given out at the training for the designated person, provided jointly by the Cambridgeshire Education Child Protection Service and the Early Years and Childcare Service.**

**Cambridgeshire County Council  
Children and Young People's Services  
Early Years and Childcare Service**

Unit 3, Bar Hill Business Park, Saxon Way, Bar Hill, Cambridge CB23 8SL