

APRIL 2025

Bodmin College | Brannel School | Carclaze CP School | Fowey Primary School | Lostwithiel Primary School | Luxulyan School | Mevagissey Primary School | Mount Charles School | Newquay Junior Academy
Newquay Primary Academy | Newquay Tretherras School | Penrice Academy | Poltair School | Pondhu Primary School | Port Isaac Academy | St Mewan CP School



Safeguarding vision at CELT -

- Safeguarding is the golden thread through CELT
- 'it could happen here'
- Ensure that every pupil and young person are heard
- Zero tolerance for discrimination
- Empowerment of our staff
- Safeguarding is everybody's responsibility

PROTECTION PARTNERSHIP
ACCOUNTABILITY
CARE SAFEGUARDING EMPOWER
STRENGTHEN IMPROVE
ENABLE EVERYONE VULNERABLE
RESPONSIBILITY

Physical, including fabricated and induced illness



Fabricated or induced illness can cause significant harm to the child either because of being made to be ill or from the treatment that they are given for an illness that they do not have. Harm to the child may take several forms and differ in terms of severity, with children often very confused and anxious about their health and well-being.

If you have concerns that a child is a victim of fabricated or induced illness, a referral should be made to the local authority.

Fabricated or Induced Illness (FII)

FII is a clinical situation in which a child is, or is very likely to be, harmed due to parental behaviour and action, carried out in order to convince doctors that the child’s state of physical and/or mental health or neurodevelopment is impaired (or more impaired than is actually the case). FII results in emotional and physical abuse and neglect.

There is little information about the prevalence of perplexing presentations and fabricated or induced illness, but it is believed there may be unreported cases because there is not necessarily a clear-cut pattern of incidents. For professionals involved in treating the presenting symptoms, it is not always easy to step back and consider the overall picture.

Harm to the child

This may take several forms including:

- harm to the child’s health – repeated and unnecessary appointments/tests, induction of illness (poisoning/suffocation);
- the effect on the child’s development and daily life – including limited and interrupted attendance at their education setting, the child’s normal activities being limited, the child assuming a sick role and the child being socially isolated;
- the child’s psychological health and well-being – the child may be actively aware of the parent’s deception and may be confused and/or anxious.

Spot the signs

- Education settings are well placed to notice prolonged or frequent absence. Parents or carers involved in fabricated or induced illness may seek support and attention from their child’s setting.

Be aware of the following signs:

- The child has limited/interrupted attendance and education.
- The child’s normal daily life activities are limited (not allowed to join in PE, for example).
- The child assumes a sick role (e.g., with the use of unnecessary aids, such as wheelchairs).
- Reported symptoms and signs found on examination are not explained by any medical condition from which the child may be suffering.

What to do

- Be alert to potential indicators of illness being fabricated or induced in a child.
- Produce a chronology of reported concerns, including the source of information.
- Be particularly aware when illnesses and absences are frequent.

Emotional abuse

“The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child’s emotional development.” – Keeping Children Safe in Education 2024

Emotional abuse can seriously damage a child’s health and development. Children who are emotionally abused may also experience other forms of abuse at the same time. The key element is persistent maltreatment that has long-term effects. Every parent gets things wrong from time to time, but repeated behaviours, such as those described further down this page, are abusive.

Spot the signs

Signs may include the following (this is not an exhaustive list):

Physical indicators:

- delays in physical development, e.g., milestones delayed, being underweight, experiencing unusual lethargy;
- marks on their body from self-harm.

Behaviour indicators:

- lack of confidence, withdrawn, wary or anxious;
- lacking a close relationship with a parent/carer;
- over reactions to mistakes;
- continual self-deprecation;
- sudden speech disorders;
- wetting/soiling themselves or bedding;
- social isolation (may not mix well or has few friends);
- extremes of compliance, passivity and or aggression/provocativeness;
- compulsive stealing;
- rocking, thumb sucking, hair twisting, etc.;
- drug, alcohol or solvent misuse;
- inability to play;
- fear of/anger towards a particular member of staff;
- fear of parents being contacted.

Additional vulnerabilities

Any child can be emotionally abused. Some children and young people are more vulnerable to abuse, including those with parents or carers who:

- are stressed and under pressure, and become emotionally unavailable to their children;
- are experiencing post-natal depression;
- may have unrealistic expectations about their child’s ability;
- have relationship problems and/or family arguments;
- are experiencing poverty, money problems or unemployment;
- are experiencing/perpetrating domestic abuse;

- misuse drugs and alcohol;
- suffer from mental health issues without sufficient support.

What to do

Create an environment based on equality and informed choice – help children/young people think about the issues and attitudes behind emotional abuse and bullying particularly concerning gender and other equality issues. Ensure you have an environment where bullying and other concerns about other children or staff are dealt with swiftly and consistently.

Ensure young people know the risks – talk about emotional abuse in an age-appropriate way.

Check young people have safe relationships – in their family, with their peers, with other children and with your staff. Who would they talk to if they were worried or unhappy? Create an environment where it is okay to talk, even about the most difficult things.

Know the signs and know what to do – use the checklists above, your safeguarding procedures and be confident to raise emotional abuse as a possibility. Talk with your DSL and deputies to help them analyse what you have noticed and the likely impact so as to decide what to do.

Keep a chronology – record the incidents of concern and build up a picture of the child/young person’s life. Analyse the impact and consider whether their emotional, developmental and academic progress is what you would expect of a similar child/young person. Take action – and keep taking action until you know they are safe.

If you affected by any of these themes or have any concerns, please speak to your DSL



Awareness Days

Earth Day Tuesday 22nd April

The mission is to diversify, educate and activate the environmental movement worldwide.

Our world needs transformational change. It’s time for the world to hold sectors accountable for their role in our environmental crisis while also calling for bold, creative, and innovative solutions.

That’s where you come in: As an individual, you yield real power and influence as a consumer, a voter, and a member of a community that can unite for change. Don’t underestimate your power. When your voice and your actions are united with thousands or millions of others around the world, we create a movement that is inclusive, impactful, and impossible to ignore. Every Earth Day can drive a year of energy, enthusiasm, and commitment to create a new plan of action for our planet.

Please see their website for resources of how to raise awareness in your school www.earthday.org

April is ‘Stress awareness month’ Stress and how to cope with it

Stress is our body’s response to pressure that manifests itself in many different ways. It’s the feeling of being overwhelmed and finding it hard to cope emotionally or mentally. Taking time to identify the emotional and mental pressures in our lives and addressing them is a good way to understand and protect our mental health.

How to talk about stress and support others

- Actively listen
- Validate how they’re feeling
- Help someone uncover and talk about their triggers
- Ask a person what they think might help them reduce the pressure
- Support them to seek professional help

5 self-care strategies to help reduce stress

1. Establish your priorities – be it in work or daily life
2. Reach out to family and friends
3. Spend time exercising or out in nature
4. Once a week, try to set time aside for a hobby you love or try something new
5. Seek further support from websites such as www.mentalhealth-uk.org

If you are feeling stressed about anything in life, please speak to your DSL or Headteacher about ways in which your school can support you.

April is Month of the Military Child



DSLs across the Trust

It's normal to feel overwhelmed and confused if a child reveals they're being abused. It's a challenging subject that can be both difficult to accept and talk about. However, you must be aware of your safeguarding information sharing (or disclosure) responsibilities so you can take the correct course of action to ensure the safety of the child or young person.

Although the abuse could be kept a secret out of fear, children experiencing distress may speak to you as they find you trustworthy and deem the school a safe place. It's also not unusual for them to choose particular staff members that they feel have less authority or are less intimidating. Remember we are all Emotionally Available Adults to our students.

Regardless of your role, if a child approaches you to indicate abuse or disclose harm, your role is to recognise and refer the abuse - not to investigate. Please speak to a member of the Safeguarding Team

Trust Safeguarding Lead	Amy Daniels	adaniels@celtrust.org
Safeguarding Trustee	Sally Foard	SFoard@gov.celtrust.org

School	DSL	Email Address
Bodmin	Kym O'Mara Rebecca Soby (operational)	dsl@bodmin.celtrust.org
Brannel	John Doherty	dsl@brannel.com
Carclaze	Amanda Colwill	dsl@car.celtrust.org
Fowey	Natalie Hudd	dsl@fow.celtrust.org
Lostwithiel	Sarah Kriskovic	dsl@los.celtrust.org
Luxulyan	Nathan Cooper	dsl@lux.celtrust.org
Mevagissey	Jo Bailey	dsl@mev.celtrust.org
Mount Charles	Heidi Spurgeon	dsl@mcs.celtrust.org
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Sexual violence and sexual harassment

Awareness of sexual violence and sexual harassment involving children and young people is growing. It is important that we acknowledge and address the potential impact, and do not pass this off as merely a "rite of passage" associated with growing up.

Sexual violence and sexual harassment can involve children of all ages and of any sex or gender. The fluid nature of relationships and the internet mean that it can happen anywhere: in your setting, outside of your setting, face-to-face or online.

Definitions

Sexual violence – rape, assault by penetration, sexual assault and causing someone to engage in sexual activity without consent (as defined by Sexual Offences Act, 2003).

Sexual harassment – 'unwanted conduct of a sexual nature', that can occur online or offline, which intimidates, degrades, humiliates, or creates a hostile environment. (Keeping Children Safe in Education)

Upskirting

Upskirting is a criminal offence. It is a colloquial term referring to the action of placing equipment, such as a mirror, camera or mobile phone, beneath a person's clothing to view or take a photograph of their genital area without their permission.

Public Sexual Harassment

Public sexual harassment includes unwanted attention, sexual advances and intimidating behaviour that occurs in public spaces, both in person and online. It is usually directed towards women and often oppressed groups within society. However, it can be experienced by all.

Consent

It is important that we all understand what is meant by consent. Someone consents to an action only if they agree by choice to that action and have the freedom and capacity (the ability to make an informed decision) to make that choice.

Freedom and capacity are very important. There should be no threats involved and the person consenting should feel that they have enough information about the consequences of doing something, as well as of not doing it, to make a decision. You cannot consent to anything if, for example, you are asleep, unconscious, or under the influence of alcohol/drugs etc.

Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex, or penetration with conditions - such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs.

Vulnerable Groups

Whilst this is something that can impact any child or young person, the following groups are more vulnerable to sexual violence and sexual harassment:

- girls (boys can be targeted, but victims are predominantly female);
- children with Special Educational Needs and Disabilities;
- children who are, or are perceived to be, lesbian, gay, bi-sexual, transgender.

How Should We Respond?

Reassure the victim that you are taking them seriously. Do not view or forward any illegal images of a child. Never assume that someone else will pick up the incident or deal with it. It is better that an incident is reported multiple times than for something to be missed – follow your safeguarding procedures and inform your Designated Safeguarding Lead.

TRAINING
THIS MONTH