



The Ellis CE (VA) Primary School

# Policy for Safeguarding Children

Issued to Designated Governor for Child Protection for approval	September 2020
Renewal Due (Annually)	September 2021

Signed: Mrs Hurding: \_\_\_\_\_  
Headteacher

Signed: Mr D Schofield: \_\_\_\_\_  
Chair of Governors

# THE ELLIS CHURCH OF ENGLAND PRIMARY SCHOOL POLICY FOR SAFEGUARDING CHILDREN

## RATIONALE

As a Church School we believe the dignity of the individual is paramount and this basic belief is at the heart of all we do. Every child and adult in school has the right to feel safe, be protected from any situation or practice that results in physical or psychological harm, to know they will be listened to and be assured that their concerns will be taken seriously and acted on.

*Section 175 of the Education Act 2002 gives maintained schools a statutory duty to promote and safeguard the welfare of children and have due regard to guidance issued by the Secretary of State.*

**We recognise our legal and moral duty to promote our children's well-being, protect them from harm and respond to child abuse. The school follows statutory guidance, "Keeping Children Safe in Education" (September 2020), to secure the safety and well-being of all our pupils.** Safeguarding children is the responsibility of **everyone** involved with the children at 'The Ellis' and this includes volunteers and governors. If we suspect that a child's well-being is, or is likely to be harmed, or that a child is being neglected we will act appropriately, in line with the procedures and guidance issued by Barnsley Safeguarding Children Board.

[www.safeguardingchildrenbarnsley.com](http://www.safeguardingchildrenbarnsley.com)

## AIMS AND PURPOSE

- To ensure that children are effectively safeguarded from the potential risk of harm at The Ellis Primary School
- To ensure that the safety and well-being of the children is of the highest priority in all aspects of the school's work.
- To help the school maintain its ethos whereby staff, pupils, parents and governors feel able to articulate any concerns comfortably, safe in the knowledge that effective action will be taken as appropriate.
- To raise awareness of individual responsibilities in identifying and reporting possible cases of abuse
- To provide a systematic means of monitoring, recording and reporting of concerns and cases, known and operated by all adults in school
- To provide guidance on recognising and reporting suspected child abuse
- To provide effective assessment of the needs of individual children who may benefit from Early Help Services. These Early Help assessments aim to identify the help / support needed by a child/family to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children's Act 1989

## RESPONSIBILITIES AND EXPECTATIONS

It is the responsibility of **all adults in school** to ensure that the safeguarding policies and procedures are adhered to at all times. We expect all adults to champion the safety and well-being of all children. *We will create an atmosphere and ethos in which parents and children will feel free to talk about any worries and concerns they have and will regard school as a safe place if they are having difficulties at home.* Any concerns must be reported to the designated teacher immediately using CPOMS and being assigned under safeguarding

**Guidance on recognising abuse is to be found at Appendix 1**

## DESIGNATED PERSON

The designated lead for safeguarding (child protection) in this school is

<b>Mrs R Hurding (Headteacher)</b>
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In her absence, there is one deputy safeguarding lead in school

<b>Mrs T Gay (PSA)</b>
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to whom all concerns must be reported in exactly the same way as outlined in the procedures section of this policy.

To be effective, the designated person will:

- Act as a source of advice, support and expertise within the school and be responsible for coordinating action regarding referrals by liaising with Children's Social Care and other relevant agencies over suspicions that a child may be suffering harm.
- Cascade safeguarding advice and guidance issued by the Barnsley Safeguarding Children Board.
- Where they have concerns that a referral has not been dealt with in accordance with the child protection procedures, ask the Head of Safeguarding to investigate further.
- Ensure each member of staff and volunteers at the school, and regular visitors (such as Education Welfare Officers, trainee teachers and supply teachers) are aware of and can access readily, this policy.
- Ensure that this policy is updated and reviewed annually and work with the designated governor for child protection regarding this.
- Be able to keep detailed accurate secure written records of referrals/concerns, and ensure that these are held in a secure place.
- Ensure parents are aware of the safeguarding policy in order to alert them to the fact that the school may need to make referrals. Raising parents' awareness may avoid later conflict if the school does have to take appropriate action to safeguard a child.
- Where children leave the school roll, ensure any child protection file is transferred to the new school as soon as possible (a signature for the receipt of the file should be obtained) but certainly within the 15 day national requirement, separately from the main file, and addressed to the designated person for child protection.
- Where a child leaves and the new school is not known, ensure that the local authority is alerted so that the child's name can be included on the database for pupils missing education pupils.
- Attend training in how to identify abuse and know when it is appropriate to refer a case
- Have a working knowledge of how Barnsley Safeguarding Children Board operates and the conduct of a child protection case conference and be able to attend and contribute to these when required.
- Attend any relevant or refresher training courses and then ensure that any new or key messages are passed to other staff, volunteers and governors.
- Make themselves (and any deputies) known to all staff, volunteers and governors (including new starters and supply teachers) and ensure those members of staff have had training in child protection. This should be relevant to their needs to enable them to identify and report any concerns to the designated teacher immediately.

## **TEACHING AND SUPPORT STAFF**

New teachers will receive a copy of this policy and the document '**What to do if you Suspect a Child is being Abused**' and supply staff will be informed of the main points of this policy and the procedures for reporting and recording concerns in the 'Important Information' sheet provided for supply staff.

All staff need to be alert to the signs of abuse as detailed in this policy.

They should:

- Apply the procedures detailed in Appendix 4 (Cause for Concern Procedures) immediately.

Cause for Concern Procedures are available in all classes and the staff room.

## **Non-teaching staff, helpers and volunteers**

Non teaching staff, helpers and volunteers may also be approached by children or have concerns. They should follow the same procedure as teaching staff in reporting concerns to the designated teacher or their deputy where appropriate.

## **DESIGNATED GOVERNOR**

The Designated Governor for Child Protection at this school is:

<b>Mrs Jean Horner (Ellis Trust Governor)</b>
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Safeguarding is important. Where appropriate, the Governors will ensure that sufficient resources are made available to enable the necessary tasks to be carried out properly under inter-agency procedures.

The Governors will ensure that the Designated Lead for Safeguarding and Child Protection is given sufficient time to carry out her duties, including accessing training.

The Governors will review safeguarding procedures at least annually to ensure that:

- The school is carrying out its duties to safeguard the welfare of children at the school;
- A termly monitoring visit is held with the designated lead, with agreed foci;
- Members of staff and volunteers are aware of current practices in this matter, and that staff receive training where appropriate;
- Safeguarding is integrated with induction procedures for all new members of staff and volunteers
- The school follows the procedures agreed by Barnsley Safeguarding Children Board, and any supplementary guidance issued by the Local Authority
- Only persons suitable to work with children shall be employed in the school, or work here in a voluntary capacity
- Where safeguarding concerns about a member of staff are raised, take appropriate action in line with BSCB Allegations against Staff Procedures and BMBC Disciplinary Procedures.

## **RECRUITMENT**

In order to ensure that children are protected whilst at this school, we will ensure that our staff and volunteers are carefully selected, screened, trained and supervised. Specific questions are asked at interview relating to the promotion of safety of children.

We accept that it is our responsibility to follow the guidance set out in “**Safeguarding Children and Safer Recruitment in Education**”; in particular we will ensure that the following checks are satisfactorily completed before a person takes up a position in the school:

- Identity checks to establish that applicants are who they claim to be<sup>1</sup>
- Academic qualifications, to ensure that qualifications are genuine
- Professional and character references prior to offering employment
- Satisfy conditions as to health and physical capacity
- Previous employment history will be examined and any gaps accounted for.
- DBS checks (eg through birth certificate, passport, new style driving licence etc.)

## **BEFORE AND AFTER SCHOOL ACTIVITIES/CONTRACTED SERVICES**

Where the governing body contracts its services to outside providers or transfers control of the use of school premises to bodies such as sports clubs, to provide after school activities, the headteacher will ensure that these bodies have the appropriate safeguarding policies and procedures and that arrangements are in place to link with the school on such matters. Such considerations will be part of any contract or Service Level Agreement with the bodies.

## **PROCEDURES FOR MONITORING, RECORDING AND REPORTING**

**At the time:**

**Members of staff and volunteers must not investigate suspicions.**

- Brief factual notes at the time or immediately after should be recorded on CPOMS and assigned to safeguarding
- Date and time of disclosure/incident observed
- Place and context of disclosure or concern
- Facts you need to report (See Appendix 2 ‘Dealing with a Disclosure’ and Appendix 4 ‘Cause for Concern Procedures’) This is to be recorded on CPOMS

**Immediately afterwards**

- Ensure that the cause for concern is discussed with the designated teacher.
- In the case of there being bruises or observed injuries the **Body Map (also on CPOMS)** should be completed.
- Remember to keep to factual information and not assumption or interpretation. Use the child’s own language to quote rather than translating into your own terms.
- Be aware that these records may be used at a later date to support a referral to an external agency and therefore high quality recording is essential.

**Designated teacher** The designated teacher will:

- Follow-up the referral using the Cause for Concern report as a basis for consideration before action.
  - Make additional records of discussion that takes place.
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- Make a decision whether to continue to monitor the situation or take the referral further. This decision should be communicated to the individual making the initial referral.
- Where a child is referred to social care a record of the referral should be completed and sent within 24 hours
- If this is the first cause for concern for that child, the designated lead will include the Cause for Concern record, which will contain the following:
  - Vulnerable Pupil
  - Monitoring Record
  - Cause for Concern record
  - Siblings records

Staff will be informed when a Vulnerable Pupil File has been created.

**This file will then be added to with such as: recorded information from social care meetings and other reports and will be kept under safeguarding on CPOMS. Any documents for inclusion in this folder should be given directly to the headteacher so they can be uploaded and added to the electronic records. This will be referred to as a 'Live' case.**

A case will be deemed 'dormant' if there have been no other concerns over a period of twelve months. The information will be transferred to the 'Dormant' files box but will still be kept as a record on CPOMS under safeguarding

Regular meetings will be held by the designated lead and other appropriate adults to discuss and review all live and dormant cases. The designated lead is therefore able to:

- Ensure agreed actions have taken place
- Evaluate the impact of these actions
- Agree next steps
- Quality assure written records

## **ALLEGATIONS AGAINST STAFF**

If anyone makes an allegation that any member of staff (including any supply teacher, volunteer or Governor) may have:

- committed an offence against a child
- placed a child at risk of significant harm
- behaved in a way that calls into question their suitability to work with children

the allegation will be dealt with in accordance with national guidance and agreements, as implemented locally by BSCB.

The Headteacher, Mrs Hurding, will handle such allegations, unless the allegation is against her, when Mr D Schofield, the Chair of Governors, will handle the school's response.

The Headteacher and Chair of Governors will gather information about the allegation, and report these without delay to the Local Authority. The Local Authority Designated Officer is Carol Rhodes. Tel no. 01226 773892)  
**(The document 'Allegations against staff and volunteers' can be seen at Appendix 6)**

## **INTER-AGENCY WORK**

### **Social care meetings**

At times school staff will be called to participate in meetings organized and chaired by social care. These might be:

- Strategy discussions
- The child protection review conference
- Child protection conferences
- Family group conferences – for children in need, in a range of circumstances where a plan is required for the child's future welfare
- Professionals' meetings – in which representative professionals from different agencies are asked to meet and discuss children and their families with a view to providing support or making recommendations in terms of next stages of involvement
- Core group meetings – meeting in which a 'core' group of professionals associated with the family are asked to meet to review the progress actions decided at case conferences and register reviews

- At these meetings, representatives from the school should be ready to report providing information about:
  - attendance and punctuality
  - academic achievement
  - the child's behaviour and attitude
  - relationships with peer group and social skills generally
  - child's appearance and readiness for school
  - contact with parents/carers
  - any specific incidents that need reporting
- Prior to the meeting, class teachers and other adults working closely with the child should be asked for their comments. Following the meeting feedback should be given and staff brought up to date with any actions that are needed. The meeting will be recorded on CPOMS

### **Children with a Child Protection Plan (CPP)**

Children with a CPP will require additional support and monitoring. The social care department will inform a school receiving a child on the register and accompanying records should follow from the previous school.

### **Early Help Assessment (EHA)**

Where a child / family may need support from a wide range of local agencies, school will offer an inter-agency Early Help Assessment.

### **CONFIDENTIALITY**

The school, and all members of staff at the school, will ensure that all data about pupils is handled in accordance with the requirements of the law, and any national and local guidance.

Any member of staff who has access to sensitive information about a child or the child's family must take all reasonable steps to ensure that such information is only disclosed to those people who need to know.

Regardless of this duty to confidentiality, if any member of staff has cause to believe that a child may be suffering from or at risk of harm, ***it is their duty to pass this information, as soon as possible, to the designated lead for safeguarding.***

### **SAFEGUARDING IN SCHOOL**

#### **The curriculum**

Safeguarding permeates all aspect of the wider school curriculum. Through the SEAL programme, Thrive and the strong Christian ethos of our school, the children learn to engage with others in a safe and mutually respectful way. Our robust anti-bullying policy is reinforced continually, but especially by our participation annually in 'Anti-Bullying Week'. Pupils who have particular needs or difficulties are supported by a range of social and emotional support strategies and programmes including Thrive as well as receiving additional individual support from parents and staff.

Within our curriculum there will also be opportunities to discuss issues which some children might find sensitive and disturbing. Care should be taken particularly in relation to discussions about member of families and their make-up. Assumptions about members of families and the presence of both parents should be avoided both in discussion and the presentation of materials. During health and safety discussion and sex education staff should be alert to the fact that some children will have very different experiences and may find the content 'sensitive' within their own histories. Staff should make themselves familiar with the background of the children in their care in order to avoid children becoming distressed.

Initiatives such as Bikeability, Crucial Crew and Playground Leaders, along with highly effective work with other agencies ensure that children are well-placed to keep themselves and other children safe in their everyday lives.

**Supporting children at risk** For children at risk, school may be the one stable place from which they can expect security and reassurance. It is not only being alert to potential abuse but providing the support to help children through difficult times. Providing them with the coping skills that can help avoid situations arising and deal with the emotional difficulties afterwards if they do.

#### **The pastoral support programme**

Children in Care (Looked after Children) have their own Termly Education Monitoring Plan. Where appropriate they may also have a pastoral support programme which will be drawn up in discussion with social care, the class teacher, foster carers and the child themselves. The education of Children in Care comes under the

responsibilities of the Virtual School and the school works closely with the Virtual School headteacher Mr Dave Benbow.

### **Support in school – pastoral care**

All class teachers are responsible, along with other staff members, for the pastoral needs of the children in their care. This includes maintaining opportunity for children to share their concerns and following the guidance in this document. At 'The Ellis' school, we include 'Circle time' during which children may be presented with issues included in our PSHCE curriculum. In addition, circle time can be used to raise issues spontaneously that are particularly relevant to the class at that time. Care should always be taken in regard to the discussion of sensitive issues and advice should be sought where there are concerns. The PSHCE co-ordinator has available a variety of resources to support circle time and the discussion of issues. We also offer Socially Speaking programmes to support children with social interaction issues and issues around self-esteem. We also use the Thrive approach in school and this gives children opportunities to talk to staff on a 1:1 basis. Children are also able to access bereavement counselling if this is appropriate. Each class has a bubble onto which children can put their name on with the understanding that the adult will give them some private discussion time that day or as soon as possible.

### **Physical contact with pupils**

Some form of physical contact with pupils by teachers is inevitable. In some cases it is necessary for reassurance. However, all teachers should be aware of issues related to touching and the way this might be misconstrued. This relates particularly to sensitive areas of the body.

In the event of physical restraint being used it is important that only the minimum amount is used in order to prevent the pupil from causing injury to themselves, others or property. Following such an intervention the critical incident form should be completed.

A rolling programme of training in 'Team Teach' is in place.

## **Child Sexual Exploitation (CSE)**

### **Definitions**

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#### **Child**

Under the Children Act 1989, a child is defined as anyone under the age of 18. However, The National Institute for Health and Clinical Excellence (NICE) uses the following terms to describe children of different ages:

- Child (under 13 years);
- Young person (13 - 17 years).

These terms will be adopted for the purposes of this guidance.

Sexual abusers are more likely to be people we know, and could well be people we care about; more than 8 out of 10 children who are sexually abused know their abuser. They are family members or friends, neighbours or babysitters – many hold responsible positions in society. Some will seek out employment which brings them into contact with children, some will hold positions of trust which can help to convince other adults that they are beyond reproach, making it hard for adults to raise their concerns.

CSE is crime. The child or young person is persuaded by someone older or more powerful, the abuser, to take part in sexual activities, with the abuser or with other people, or in posing for photographs, for example.

Sometimes there is gain for the young person – money, friendship, gifts, food or shelter. The abuser often takes the young person through a process to gain their trust before abusing them or using the young person; this is known as "grooming". Grooming may be carried out by adults or other young people. Young people will be "recruited" into feeling they are not being abused, and introduced to a lifestyle they feel is normal. Children may experience grooming at parties, in gangs, from older adults or from their peers.

It is not just girls and young women who are sexually exploited; boys and young men may be victims too. Abusers and coercers often physically, sexually and emotionally abuse children and young people and in some situations, may effectively imprison them.

Children and young people make constrained choices against a background of social, economic and emotional vulnerability; it is not a 'free choice'. Because of either their age or their needs, they are unable to give truly informed consent to this activity.

### **Risks**

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Children and young people involved in any form of sexual exploitation face immense risks to their physical, emotional and psychological health. The environment in which sexual exploitation takes place tends to have close links with criminal behaviour, drug and alcohol misuse and violence. Children drawn into this kind of sexual abuse therefore become exposed to these risks;

Sexual exploitation results in children and young people suffering harm. The extent of the harm can range from situations where the exploitation is short lived and the young person is effectively supported to recover, to situations which lead to serious life-long impact and on occasions to the death of the young person, including through suicide and murder;

Other risk factors are common to child sexual abuse generally, and can include physical injuries, non-attendance at school and/or underachievement, depression, self-mutilation and attempted and actual suicide; the risks to children from sexual exploitation can be seen to be extremely high and can be life-threatening. Through teaching Healthy Relationships in PSHE, SEAL approaches, circle time children at The Ellis will be taught about appropriate friendships relationships, how to raise any concerns with trusted adults and how to keep themselves in the community. In school children and parents are positively encouraged to raise any concerns or worries with a member of staff, this may be a class teacher, teaching assistant, office staff or Headteacher.

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Grooming may be carried out by adults or other young people. Young people will be “recruited” into feeling they are not being abused, and introduced to a lifestyle they feel is normal. Children may experience grooming at parties, in gangs, from older adults or from their peers.

As professionals we acknowledge that children / young people can change or present challenging behaviour, especially approaching / during adolescence. We also acknowledge that as a community primary school we gain knowledge and understanding of children and their behaviours outside our setting. Concerns should be raised with the Designated Safeguarding Lead if staff become aware of changes in a child’s behaviour, either within or outside school which indicate the following warning signs;

- A child’s behaviour has changed - perhaps becoming more secretive, more distant, not seeing their usual friends, dressing in a different way, becoming tired or unwell;
- You may have concerns for the child’s sexual health – sexually transmitted diseases, pregnancy scares, associating with older men or women, marks or scars;
- The child may be in possession of more money than usual, or expensive gifts, such as jewellery or mobile phones, which they could not afford;
- The child may receive odd calls or messages, threats or bullying on social media or mobile phones (this may include inappropriate images or inappropriate words ‘sexting’) – they may be secretive about calls and messages;
- The child or young person may go missing from home and / or school – afterwards the child may be defensive about their location and activities, returning home late at night, perhaps in a dishevelled state or under the influence of substances or alcohol.
- The child may frequent known areas of drug abuse / crime, perhaps in the company of older teenagers
- The child is in the company of older children and seen in ‘risky situations’ or demonstrating ‘risky behaviours’ (see below)

## Procedure

Children who are the victims of abuse through sexual exploitation can only be safeguarded by the concerted effort of all agencies involved to tackle both the coercer (pimp) and the abuse, whilst working positively to protect the victim.

When an agency suspects that a young person is at risk of sexual exploitation because of some of the behaviour patterns detailed above, but there is no concrete evidence, a referral should be made to Children’s Social Care, who will undertake the **Barnsley Assessment Framework** which will include a discussion with the Police and the Safeguarding Children’s Unit.

## Female Genital Mutilation (FGM)

Female genital mutilation (FGM) is a collective term for procedures which include the removal of part or all of the external female genitalia for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. The procedure is typically performed on girls aged between 4 and 13, but in some cases it is performed on new born infants or on young women before marriage or pregnancy.

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The school recognises that FGM is much more common than is generally realised both worldwide and in the U.K. It is deeply embedded into the culture of communities and intervention by statutory agencies may be resented. FGM cannot be left to personal preference or cultural custom as it is an extremely harmful practice which violates basic human rights.

FGM has been a criminal offence in the U.K. since the Prohibition of Female Circumcision Act 1985 was passed. The Female Genital Mutilation Act 2003 replaced the 1985 Act and makes it an offence for the first time for UK nationals or permanent UK residents to carry out FGM abroad, or to aid, abet, counsel or procure the carrying out of FGM abroad, even in countries where the practice is legal.

It is reportedly practised in 28 African countries and in parts of the Middle and Far East, but it is increasingly found in Western Europe and other developed countries primarily among immigrant and refugee communities. From April 2014 NHS hospitals are required to record:

If a patient has had Female Genital Mutilation;  
If there is a family history of Female Genital Mutilation;  
If a Female Genital Mutilation-related procedure has been carried out on a patient.

### **Signs / suspicions**

Suspicious may arise in a number of ways that a child is being prepared for FGM to take place abroad.

If any agency becomes aware of a child who may have been subjected to or is at risk of FGM they must make a referral to Children's Social Care, in the first instance staff must raise any concerns with the Designated Safeguarding Lead (Mrs Hurdling) or Deputy (Mrs Edwards/Mrs Gay), who will make a referral to children's social care.

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All professionals need to consider whether any indicators exist that suggest FGM may be planned or have

- Preparations are being made to take a long holiday - arranging vaccinations or planning an absence from school;
- The child has changed in behaviour after a prolonged absence from school; or
- The child has health problems, particularly bladder or menstrual problems.

There may be older women in the family who have already had the procedure and this may prompt concern as to the potential risk of harm to other female children in the same family.

The Children's Social Care team will liaise with the Paediatric services where it is believed that FGM has already taken place to ensure that a **Medical Assessment** takes place.

### **Working with Parents**

The Ellis School has an established approach to working with parents. Parents and children's need for privacy is always respected. Attitudes to and contact with parents is non-judgemental in order to obtain and maintain the most conducive working relationship. The child's needs are the priority and effective liaison is crucial. It is recognised that families from different backgrounds and cultures will have different approaches to child-rearing. These differences will be acknowledged and respected provided they do not place the child at risk as defined earlier in the document.

Parents can access this policy on the school's website or a paper copy can be obtained from the Office.

### **Photographing Children**

Taking photographs of children on sports days, at concerts and plays is part of a school's normal day to day life. We will not discourage this, however:

- if there are Health and Safety issues such as flash photography dazzling or distracting children, causing them to have an accident or an adverse reaction we will encourage parents to use settings that do not require a flash
- we will not allow visitors, theatre groups or workshop providers to film or photograph children whose parents have indicated that they do not wish their child to be photographed (Pupil Information Sheet)
- we will not allow photographs of such children to appear on the website, in publicity or press releases unless we have permission. Children who are allowed to be included in the above will not have their names released

- the school cannot be held accountable for photographs or video footage taken by parents or members of the public at school functions and the Headteacher will emphasise at such events that photographs are for personal family use and must not be posted on the internet / social media

## **INDUCTION & TRAINING**

All new members of staff will receive a comprehensive induction which will give an overview of the organisation and ensure they know its purpose, values, services and structure, as well as safeguarding and confidentiality issues.

All new staff at the school (including volunteers) will receive safeguarding information (What To Do If You Suspect A Child Is Being Abused and Keeping Children Safe in Education, September 2016) and a copy of this policy on starting their work at the school. An 'Important Information' sheet will be available for supply staff and they will be required to read this information before they begin their teaching on their first day at school.

All staff will be expected to **at least, complete the appropriate level of online training before or as soon as possible after they begin their employment.**

Staff will undertake safeguarding refresher training every three years, and the designated person every two years.

## **LINKS TO OTHER POLICIES**

As well as ensuring that we address child protection concerns, we will also ensure that children who attend the school are kept safe from harm whilst they are in our charge.

To this end, this policy must be seen in light of the school's policies on:

- Personal, Social and Health Education and Sex and Relationships Education; child protection issues will be addressed through the curriculum as appropriate.
- Bullying; the school will also ensure that bullying is identified and dealt with so that any harm caused by other pupils can be minimised. We will pay particular attention to sexualised behaviour, or bullying that is homophobic in nature, or where there appear to be links to domestic abuse in the family home.
- Safe Recruitment and Code of Conduct for staff.
- Racist incidents
- Confidentiality
- Behaviour and Discipline
- Health & Safety
- Physical Intervention (positive handling)
- Allegations against members of staff
- E-Safety
- Whistle Blowing
- Visitors In School
- Information Sharing
- Intimate Care

## **MONITORING AND REVIEW**

All adults working in school will receive a copy of this policy and will be asked to sign to say they have read, understood and agree to follow its procedures. It will be discussed at least annually by all staff.

The effectiveness of the policy will be reviewed, based on monitoring activities by the designated leads and governor and in the light of any specific incidents or changes to local or national guidance/legislation, annually by the governing body.

The designated governor will monitor one aspect of the school's work each term and will report back to the full governing body.

The Headteacher will report on safeguarding as part of the Headteachers report to governors, termly. Safeguarding will be a standing agenda item at all governing body meetings and at all staff meetings.

## APPENDIX 1

### **GUIDANCE ON RECOGNISING SUSPECTED ABUSE**

Child abuse is a term used to describe ways in which children are harmed by someone often in a position of power. It may not be our responsibility to decide whether child abuse is occurring but we are required to act on any concerns and report it to the appropriate party. **The health, safety and protection of a child is paramount.**

### **PHYSICAL ABUSE**

Can include hitting, shaking, throwing, poisoning, burning, scalding, suffocating or causing any form of physical harm to a child.

Possible signs include:

- Unexplained injuries or burns
- Refusal to discuss injuries
- Improbable explanations of injuries
- Untreated injuries or lingering illness
- Admission of punishment which appears excessive
- Shrinking from physical contact
- Fear of returning home or parents being contacted
- Fear of undressing
- Fear of medical help
- Aggression/ bullying
- Over compliant behaviour
- Running away
- Significant changes in behaviour
- Deterioration in work
- Unexplained pattern of absences

### **EMOTIONAL ABUSE**

This is persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on a child's emotional development. It can include:

Conveying to a child that they are worthless or unloved placing inappropriate age-related expectations on children making children feel frightened or in danger on a frequent basis

Possible signs of emotional abuse include:

- Continual self-deprecation
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Self-harm or mutilation
- Compulsive stealing/ scrounging
- Drug/ solvent abuse
- 'Neurotic' behaviour – obsessive rocking/thumb sucking
- Air of detachment 'don't care' attitude
- Social isolation
- Attention-seeking behaviour
- Eating problems
- Depression, withdrawal

### **SEXUAL ABUSE**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. They can include non-contact activities such as involving children looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways. Possible signs include:

- Bruises, scratches, burns or bite marks
- Scratches abrasions or persistent infection in the anal or genital regions
- Pregnancy
- Sexual awareness inappropriate to the child's age
- Frequent public masturbation
- Attempts to teach other children about sexual activity
- Refusing to stay with certain people or go to certain places
- Aggressiveness, anger, anxiety, tearfulness

- Withdrawal from friends

## **NEGLECT**

Neglect is also a form of abuse. It is the persistent failure to meet a child's basic physical and or psychological needs can affect the child's health and development. It might include failure to provide adequate food, shelter and clothing, failure to protect a child from physical harm or danger, failure to ensure appropriate access to medical care and treatment.

Possible signs include:

- Constant hunger
- Poor personal hygiene
- Inappropriate clothing
- Frequent lateness or non-attendance
- Untreated medical problems
- Low self-esteem
- Poor social relationships
- Compulsive stealing or scrounging
- Constant tiredness

## **BULLYING**

Bullying can be defined as using deliberately hurtful behaviour, usually over a period of time, where it is difficult for those being bullied to defend themselves.

The three main types of bullying are:

- physical
- verbal
- emotional

All incidents of bullying should be dealt with by the class teacher in the first instance, followed by the Deputy Headteacher and then the Headteacher. A more detailed guide can be found in the school's anti-bullying policy.

## **SELF HARM**

If it comes to the attention of a member of staff that a child is self-harming, they should alert the Headteacher.

Actions might include:

- contacting parents
- contacting Child Adolescent Mental Health Services
- contacting Social Care if the child meets the referral criteria

## APPENDIX 2

### **DEALING WITH A DISCLOSURE**

**When a child tells me about abuse s/he has suffered, what must I remember?**

- Stay calm
- Do not transmit shock, anger or embarrassment.
- Reassure the child.
- Tell her/him you are pleased that s/he is speaking to you.
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed.
- Tell the child that it is not her/his fault.
- Encourage the child to talk but do not ask "leading questions" or press for information.
- Listen and remember.
- Check that you have understood correctly what the child is trying to tell you.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Do not tell the child that what s/he experienced is dirty, naughty or bad.
- It is inappropriate to make any comments about the alleged offender.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

NB It is not education staff's role to seek disclosures. Their role is to observe that something may be wrong, ask about it, listen, be available and try to make time to talk.

### Immediately afterwards

**You must not deal with this yourself.** Clear indications or disclosure of abuse must be reported to social services without delay, by the Headteacher / Designated Teacher using the correct procedures as stated in the guidelines.

Listening to and supporting a child/young person who has been abused can be traumatic for the adults involved. Support for you will be available from your Designated Teacher or Headteacher.



## APPENDIX 4

### Cause for Concern Procedures

A 'Cause for Concern' is an action, observation or discussion that makes you feel anxious or worried about the well-being or safety of a child.

All causes for concern must be recorded immediately on CPOMS and assigned to Safeguarding.

This will then be passed to the designated teacher immediately, who will decide on the appropriate actions, If this is the first cause for concern for that child, the designated lead will tick the initial concern box and appoint vulnerable child status to the concern.

This will contain the following:

- Vulnerable Pupil Information
- Monitoring Record
- Cause for Concern
- siblings

Staff will be informed when a child is appointed Vulnerable pupil status

Any further discussions, telephone calls or meetings in relation to the child must be recorded on CPOMS

Designated teachers and other appropriate adults will hold a monthly meeting to discuss and review all live and dormant cases. This provides the opportunity for designated teacher to:

- Monitor that agreed actions have taken place
- Evaluate the impact of these actions
- Agree next steps
- Quality assure written records

All further involvement and documentation must be stored in this file and nowhere else. Files will be stored on CPOMS

#### **Procedure in case of designated teacher absence:**

Contact other designated leads, if not possible

Phone designated teacher and ask permission to access files



## APPENDIX 6

### **ALLEGATIONS AGAINST STAFF AND VOLUNTEERS THRESHOLDS FOR CHILD PROTECTION REFERRAL**

#### **Introductory notes:**

- (i) The following table has been produced to assist decision-making when considering whether to make a child protection referral. This should be used in conjunction with DfES standards, LSCB procedures and guidance. Its purpose is to ensure that wherever possible, the initial category of the allegation is ascribed on the basis of the evidence presented, rather than upon assumption or preconception.
- (ii) The decision-making process should not preclude a 'child in need' referral at any stage.
- (iii) All concerns raised about staff should include consideration of their conduct, whether in relation to any necessary disciplinary action and/or with regard to reducing their vulnerability to further allegations. This may involve an action plan for other staff too.

<b>CATEGORY</b>	<b>DEFINITION</b>	<b>EXAMPLES</b>	<b>ACTION</b>	<b>SAFEGUARDS</b>
1. <b>APPARENT CORROBORATION</b>	Where an allegation or concern is accompanied by actual or circumstantial evidence.	<p>A child may have a visible injury.</p> <p>The incident may have been witnessed.</p> <p>The member of staff may behave in a way that is consistent with the allegation.</p>	<p>A Child Protection referral <b>must</b> be made to the LADO, Local LSCB procedures <b>must</b> be followed.</p> <p>The LADO should make a referral to Children's Social Care in accordance with local LSCB child protection procedures.</p>	The referral must be confirmed in writing to the LADO/CSC within 2 working days.
2. <b>POSSIBLE</b>	Where there are indications that an abusive incident might have taken place, or little evidence to disprove a child's allegations.	Where a child's allegations might be supported by other information, or where it is a matter of one word against another.	<p>A Child Protection referral <b>must</b> be made to the LADO, Local LSCB procedures <b>must</b> be followed.</p> <p>The LADO should make a referral to Children's Social Care in accordance with local LSCB child protection procedures.</p>	The referral must be confirmed in writing to the LADO/CSC within 2 working days.
3. <b>UNLIKELY</b>	The alleged incident most probably did not take place.	Where circumstantial evidence <b>appears</b> incompatible	Only clarification of the specific allegation or concern should be sought. No	The school/service's knowledge of both the child and member of staff

		<p>with the allegation.</p>	<p>attempt should be made to investigate the matter at this stage.</p> <p>School/Service should consult with LADO on next steps</p>	<p>concerned will be invaluable – <b>however</b>, the LADO's view will contribute further objectivity and help to secure consistency and appropriateness of response.</p> <p>Details of any consequent referral must be confirmed to the LADO/CSC within two working days</p>
<p>4. <b>DEMONSTRABLY FALSE</b></p>	<p>It is known without a doubt that an allegation is untrue.</p> <p>This position requires strong evidence and must not be based on preconceptions about the child or member of staff concerned.</p>	<p>The alleged perpetrator was <b>known</b> not to be anywhere in the vicinity and the child is not confused in terms of time, place or person.</p>	<p>Internal enquiries can be undertaken by the school/service</p> <p>The child's motives or misunderstandings should be addressed – involving those with parental responsibility.</p> <p>Written confirmation to LADO</p>	<p>The LADO <b>must</b> receive written notification of the allegation, the evidence and how the matter was resolved within 5 working days</p> <p>This allows for external monitoring and further intervention if appropriate.</p> <p>Consideration should always be given to the possibility that the child may be displacing abuse experienced elsewhere.</p>

## Consideration of allegation

<u>Consideration</u>	<u>No cause for concern</u>	<u>Possible cause for concern</u>	<u>Definite cause for concern</u>
Did the incident occur during the discharge of normal duties?			
Have there been any previous concerns expressed?			
Did the incident contravene the schools/services code of conduct in relation to physical contact?			
Did the incident contravene the schools/services discipline and behaviour policy, were any sanctions imposed appropriate?			
Is the member of staff authorised to exercise restraint and if so did the incident come within that jurisdiction?			
Were any racist or homophobic comments made?			
Were there any comments of a sexual nature?			
Is there any corroboration from adults?			
Is there any corroboration from pupils?			
Could the incident damage the pupils self esteem?			
Do you consider this to be an abuse of trust?			
Was there a failure to protect a pupil from physical harm?			