



Graiseley Primary School

Safeguarding & Child Protection Policy

Approval Date:	June 2021
Chair of Governors Signature:	
Date for Review:	June 2022

Graiseley Primary Safeguarding & Child Protection Policy

Safeguarding is what we do for all children; and Child Protection is what we do for children who have been harmed or are at significant risk of being harmed. In other words the Safeguarding Policy includes the Child Protection Policy, as well as links to other policies.

School details

Governors' Committee Responsible: Full Governing Body

Governor Lead: Simon Graeme (Chair)

Designated Safeguarding Leader: Sharifan Nasa (Head teacher)

Joint Designated Safeguarding Leader: Audrey Steadman- Watt(HMSCLO)

Deputy Designated Safeguarding Leader: Stacey Usher (Assistant Head)

Vicky Cartwright (Assistant Head)

LA Virtual Head teacher for Children in Care Darren Martingdale

Tel 01902 556951

Multi Agency Support Hub (MASH) 01902 55392 (Emergency Duty Team)

Strengthening Families Hub / Early Help Team Tel 01902 550670

Local Authority Designated Officer for Safeguarding Paul Cooper Tel 01902 550661

Status & Review Cycle:

Statutory Annual

Next Review Date:

June 2022

1. Introduction

- 1.1 This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002, and in line with government publications: 'Working Together to Safeguard Children' 2015, Revised Safeguarding Statutory Guidance 2 'Framework for the Assessment of Children in Need and their Families' 2000, 'What to do if You are Worried a Child is Being Abused' 2015. The guidance reflects, 'Keeping Children Safe in Education' 2021.
- 1.2 The Governing body takes seriously its responsibility under section 175 of the Education Act 2002 to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements within our school to identify, assess, and support those children who are suffering harm.
- 1.3 We recognise that all adults, including temporary staff¹, volunteers and governors, have a full and active part to play in protecting our pupils from harm, and that the child's welfare is our paramount concern.
- 1.4 All staff believe that our school should provide a caring, positive safe and stimulating environment that promotes the social, physical and moral development of the individual child.
- 1.5 The aims of this policy are:
 - 1.5.1 To support the child's development in ways that will foster security, confidence and independence.

¹ Wherever the word "staff" is used, it covers ALL staff on site, including ancillary supply and self-employed staff, contractors, volunteers working with children etc., and governors

- 1.5.2 To provide an environment in which children and young people feel safe, secure, valued and respected, and feel confident, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
- 1.5.3 To raise the awareness of all teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse (Reference Appendices 1 and 2)
- 1.5.4 To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the school, contribute to assessments of need and support packages for those children.
- 1.5.5 To emphasise the need for good levels of communication between all members of staff.
- 1.5.6 To develop a structured procedure within the school which will be followed by all members of the school community in cases of suspected abuse.
- 1.5.7 To develop and promote effective working relationships with other agencies, especially the Police and Social Care.
- 1.5.8 To ensure that all staff working within our school who have substantial access to children have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory CRB check (according to guidance)², and a central record is kept for audit.
- 1.5.9 For children to be confident and report any concerns to an adult.

2. The Role of the DSL and Reporting a Concern

2.1 The Designated Safeguarding Lead is responsible for safeguarding and child protection. Their key role is to

- Manage referrals from school staff or any others from outside the school;
- Work with external agencies and professionals on the matter of safety and safeguarding;
- Ensure that child protection information is transferred to the pupil's new

² Guidance regarding CRB checks recently updated by the Protection of Freedoms Act 2012

school whenever the child moves;

- Undertake training;
- Raise awareness of safeguarding and child protection amongst the staff and parents.

2.2 Reporting Concerns

When adults in a school have a concern about a child they should

- Complete a CPOMs form promptly/ within 10 minutes;
- Forms can be found in the school office / electronically for CPOMs
- The DSL should be informed that a concern has been raised by **PROMPT verbal** feedback
- The DSL will investigate the concern immediately;
- See flowchart (Appendix 1)
- Following a concern the child and family may become subject to a plan to address the concerns and staff will be asked to inform this process and give regular feedback regarding the well being of the child whilst at school.
- ANYONE, all staff and members of public, can make a referral to Social Care if they have a concern under the Children Act 1989; and if they have raised a concern with the DSL, can ask what the consequence and follow up actions of the concern are.

3. Safe School, Safe Staff

Pupils are taught about safeguarding through our Personal Social Health and Citizenship Education, SEAL, online safety and other learning opportunities as part of providing a broad and balance curriculum.

ALL staff should be aware that ALL key documents and training can be found on Hayes online training and new staff must ensure they have a password and easy access Hayes online from the Headteacher.

3.1 We will ensure that:

- 3.1.1 All members of the governing body understand and fulfil their responsibilities, namely to ensure that:
- there is a Safeguarding and Child Protection Policy together with a staff behaviour (code of conduct) policy

- the school operates safer recruitment procedures by ensuring that there is at least one person on every recruitment panel that has completed Safer Recruitment training
- the school has procedures for dealing with allegations of abuse against staff and volunteers and to make a referral to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned.
- a senior leader has Lead Designated Child Protection Officer (DCPO) responsibility
- on appointment, the DCPOs undertake interagency training and also undertake DCPO 'new to role' and an 'update' course every 2 years
- all other staff have Safeguarding training updated as appropriate
- any weaknesses in Child Protection are remedied immediately
- a member of the Governing Body is, usually the Chair, is nominated to liaise with the LA on Child Protection issues and in the event of an allegation of abuse made against the Headteacher
- Child Protection policies and procedures are reviewed annually and that the Child Protection policy is available on the school website or by other means
- the Governing Body considers how children may be taught about safeguarding. This may be part of a broad and balanced curriculum covering relevant issues through personal social health and economic education (PSHE) and/or for maintained schools through sex and relationship education (SRE).
- Governors should ensure members of staff do not promise confidentiality and always act in the interest of the child
- that enhanced DBS checks are in place for Chairs of Governors of independent, academies, non-maintained special schools
- enhanced DBS checks are required for volunteers
- Section 128 checks are required for all teachers.

- 3.1.2 The Lead DCPO is the Head teacher. The Deputy Designated Child Protection Officers are (Home school Liaison) and Deputy Head. These Officers have undertaken the relevant training, and, upon appointment will undertake relevant training followed by annual updates.
- 3.1.3 The DCPO's who are involved in recruitment and at least one member of the governing body will also complete safer recruitment training (currently on-line on the DfE website) to be renewed every 5 years
- 3.1.4 All members of staff and volunteers are provided with child protection awareness information at induction, including in their arrival pack, the name of the DSL so that they know who to discuss a concern with.
- 3.1.5 All members of staff are trained in and receive regular updates in e-safety and reporting concerns
- 3.1.6 All other staff and governors, have child protection awareness training, updated by the DCPO as appropriate, to maintain their understanding of the signs and indicators of abuse.
- 3.1.7 All members of staff, volunteers, and governors know how to respond to a pupil who discloses abuse through delivery of the Induction pack.
- 3.1.8 All parents/carers are made aware of the responsibilities of staff members with regard to child protection procedures through publication of the school's Safeguarding and Child Protection Policy, and reference to it in our School Prospectus.
- 3.1.9 Our lettings policy will seek to ensure the suitability of adults working with children on school sites at any time.
- 3.1.10 Community users organising activities for children are aware of the school's child protection guidelines and procedures.
- 3.1.11 We will ensure that child protection type concerns or allegations against adults working in the school are referred to the LADO³ for advice, and that any member of staff found not suitable to work with children will be notified to the Disclosure and Barring Service (DBS)⁴ for consideration for barring, following resignation, dismissal, or when we

³ LADO Local Authority Designated Officer for allegations against staff. AEO Area Education Officer

⁴ Contact the LADO for guidance in any case

cease to use their service as a result of a substantiated allegation, in the case of a volunteer.

- 3.2 Our procedures will be regularly reviewed and up-dated.
- 3.3 The name of the designated members of staff for Child Protection, the Designated Child Protection Officers, will be clearly advertised in the school, with a statement explaining the school's role in referring and monitoring cases of suspected abuse.
- 3.4 All new members of staff will be given a copy of our safeguarding statement, and child protection policy, with the DCPOs' names clearly displayed, as part of their induction into the school.
- 3.5 The policy is available publicly on the school website. Parents/carers are made aware of this policy and their entitlement to have a copy of it via the school handbook/newsletter/website
- 3.6 At Graiseley our HMSCLO will coordinate the early help assessments. This is a multi agency approach to support children and families with advice and sign-posting. The Early Help Assessments (EHA) are managed through ECLIPSE - an online system to gather information and share with other relevant agencies across Wolverhampton. Any one of these agencies may be the Lead Professional opening and leading the EHA. Any such cases should be kept under constant review and consideration given to a referral to children's social care for assessment for statutory services if the child's situation does not appear to be improving or getting worse. Any child may benefit from Early Help, but all staff should be particularly alert to the potential need for Early Help for a child who :
- is disabled and has specific additional needs;
 - has special educational needs (whether or not they have a statutory education health care plan);
 - is a young carer;
 - is frequently missing/ goes missing from care or home;
 - is frequently absent from school;
 - is in a family circumstance presenting challenges for the child, such as substance abuse, mental health issues, domestic abuse;
 - has returned home from being in care.

The pastoral team, through the DSLs will monitor and must be informed of any additional information from staff to ensure the pastoral needs of the pupil is being met.

- school's own pastoral systems
- Early Help assessment
- referral for statutory assessment

3.7 The Pastoral Team at Graiseley meet weekly to monitor children on our pastoral register. This register is formed following an initial meeting with classteachers and support staff after autumn half term, where the whole school's pupil needs are assessed against these criteria

- Health and Medical
- Emotional well-being
- Attendance
- Behaviour/ social
- Welfare
- Additional Info e.g Looked After Child, At Risk, SEN, BEP

The team monitor the support pupils are receiving and make internal and external referrals to support the pupil pastoral needs across the school.

4. Responsibilities

The designated DCPOs are responsible for:

- 4.1 Referring a child if there are concerns about possible abuse, to the *Local Authority*, and acting as a focal point for staff to discuss concerns. Referrals should be made in writing, following a telephone call using the Multi Agency Referral Form (MARF)⁵
- 4.2 Keeping written records of concerns about a child even if there is no need to make an immediate referral.
- 4.3 Ensuring that all such records are kept confidentially and securely and are separate from pupil records, until the child's 25th birthday, and are copied on to the child's next school or college.
- 4.4 Ensuring that an indication of the existence of the additional file in 3.1.3 above is marked on the pupil records.

⁵ Check with your LA for local alternatives

- 4.5 Liaising with other agencies and professionals.
- 4.6 Ensuring that either they or the staff member attend case conferences, core groups, or other multi-agency planning meetings, contribute to assessments, and provide a report which has been shared with the parents.
- 4.7 Ensuring that any pupil currently with a child protection plan who is absent in the educational setting without explanation for two days is referred to their key worker's Social Care Team.
- 4.8 Organising child protection induction, and update training every 3 years, for all school staff. Ensuring Hayes online training is used annually.
- 4.9 Providing an annual report for the governing body, detailing any changes to the policy and procedures; training undertaken by the DCPO, and by all staff and governors; number and type of incidents/cases, and number of children on the child protection register (anonymised)⁶
- 4.10 The immediate response, concern and chronology reports must be completed as soon as possible. All victims must be taken seriously, supported and kept safe.

5. Supporting Children

- 5.1 We recognise that a child who is abused or witnesses violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.
- 5.2. We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.
- 5.3. We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.
- 5.4. Our school will support all children by:
 - 5.4.1 Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.

⁶ A model format for the Governors Annual Report is available from Governor Services

- 5.4.2 Promoting a caring, safe and positive environment within the school.
- 5.4.3 Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- 5.4.4 Notifying Social Care as soon as there is a significant concern.
- 5.4.5 Providing continuing support to a child about whom there have been concerns who leaves the school by ensuring that appropriate information is copied under confidential cover to the child's new setting and ensuring the school medical records are forwarded as a matter of priority.

5.5 If in exceptional circumstances the DSLs are not available, this should not delay appropriate action taking place.

6. Pupils with Special Educational Needs and Disabilities

Children and young people with special educational needs and disabilities can face additional safeguarding challenges because: there may be assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration; children with SEN and disabilities can be proportionally impacted by things like bullying without outwardly showing signs; and difficulties may arise in overcoming communication barriers.

Children with SEND have a greater risk of being left out, of being isolated from their peers, and they are disproportionately affected by bullying. We endeavour to make sure that children with SEND have got a greater availability of mentoring and support.

We identify pupils who might need more support to be kept safe or to keep themselves safe by :

1. Early identification by the SENCO
2. Provision personalised to meet the needs of the child
3. Establishing strong parental relationships
4. Assessing and reviewing every 6-8 weeks

5. Creating an inclusive culture where all children are valued
6. Always consider the views of the child
7. Work collaboratively with external agencies
8. Ensure the culture of the school celebrates differences and promotes a mutual respect agenda in accordance with the school values/ British values.
9. Providing transitional/ consultation days each year for children and families to meet staff.

7. Confidentiality

- 11.1 We recognise that all matters relating to child protection are confidential.
- 11.2 The Headteacher (DCPO) or deputy will disclose any information about a child to other members of staff on a need to know basis only.
- 11.3 All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- 11.4 All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.
- 11.5 We will always undertake to share our intention to refer a child to Social Care with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with *Multi Agency Support Hub*.

8. Supporting Staff

- 11.1 We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.

- 11.2 We will support such staff by providing an opportunity to talk through their anxieties with the DCPOs and to seek further support as appropriate.

9. Allegations against staff

- 11.1 All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults.
- 11.2 All Staff should be aware of *local* Guidance on Behaviour Issues, and the school's own Behaviour Management policy.
- 11.3 Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at induction⁷

The use of texting and messages that contain sexual references is forbidden. This can expose individuals to risks, particularly if the imagery is shared further, including embarrassment, bullying and increased vulnerability to sexual exploitation. Producing and sharing sexual images of under 18s is also illegal.

Mobile phones and the use of personal cameras is not permitted during the hours children are present.

- 11.4 We understand that a pupil may make an allegation against a member of staff.
- 11.5 If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children, the member of staff receiving the allegation if aware of the information, will immediately inform the Headteacher⁸.
- 11.6 The Headteacher on all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO)

⁷ Refer to "Guidance for Safe Working Practice for the Protection of Children and Staff in Education Settings" available on the DfE website

⁸ or Chair of Governors in the event of an allegation against the Headteacher

- 11.7 If the allegation made to a member of staff concerns the Headteacher, the person receiving the allegation will immediately inform the Chair of Governors who will consult as in 9.6 above, without notifying the Headteacher first.
- 11.8 The school will follow the *approved* procedures for managing allegations against staff. Under no circumstances will we send a child home, pending such an investigation, unless this advice is given exceptionally, as a result of a consultation with the LADO.
- 11.9 Suspension of the member of staff, excluding the Headteacher, against whom an allegation has been made, needs careful consideration, and the Headteacher will seek the advice of the LADO and Personnel Consultant in making this decision.
- 11.10 In the event of an allegation against the Headteacher, the decision to suspend will be made by the Chair of Governors with advice as in 9.8 above.
- 11.11 We have a procedure for managing the suspension of a contract for a community user in the event of an allegation arising in that context.
- 11.12 If an allegation is made against another child the school will make a decision whether the allegation constitutes a Safeguarding or child protection concern, the school will contact social care for advice on how to proceed

10. Whistle-blowing

- 11.1 Where there are concerns about the way that safeguarding is carried out in the school, staff should refer to the Whistle-blowing Policy.
- 11.2 A whistleblowing disclosure must be about something that affects the general public such as :
- a criminal offence has been committed, is being committed

- or is likely to be committed
 - an legal obligation has been breached
 - there has been a miscarriage of justice
 - the health and safety of any individual has been endangered
 - the environment has been damaged
 - information about any of the above has been concealed.
- 11.3 The NSPCC runs a whistleblowing helpline on behalf of the Home Office, the number is 0808 800 5000.
- 11.4 It is recognised that there is a possibility adults may harm children. Any concerns about the conduct of other adults in the school should be taken to the Head teacher without delay (or when it is not possible to the DSL/ Deputy DSL)
- 11.5 Any concerns about the Head should go to the Chair of Governors who can be contacted through the school office - stating the urgency of the contact.
- 11.6 All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues. If it becomes necessary to consult outside the school, they should speak in the first instance, to the Area Education Officer/LADO following the Whistleblowing Policy.
- 11.7 We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.
- 11.8 Whistle-blowing re the Head teacher should be made to the Chair of the Governing Body whose contact details are readily available to staff in the staff handbook.

11. Physical Intervention

- 11.1 We acknowledge that staff must only ever use physical intervention as a last resort, when a child is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person. Guidance on Use of reasonable force DFE 2013
- 11.2 Such events should be recorded and signed by a witness.

- 11.3 Parents/ carers will be notified by the school to ensure an opportunity will be provided for the child and staff member to receive a debrief.
- 11.4 Staff who are likely to need to use physical intervention will be appropriately trained.
- 11.5 We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.
- 11.6 We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.⁹
- 11.7 We identify children where physical intervention might be necessary by creating individual plans in order to **minimise** the likelihood of challenging behaviour, and when it does occur, that there is less use of physical restraint and other restrictive methods. Our policy is to remove all other children and adults until the situation is calm and the child is no longer posing a physical risk to others and self.

12. Anti-Bullying

- 10.1 Our school policy on anti-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms .g. cyber, racist, homophobic and gender related bullying. We keep a record of known bullying incidents. All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse. We keep a record of bullying incidents.

⁹ 'Guidance on Safer Working Practices is available on the DfE website

13. Racist Incidents

- 11.1 Our policy on racist incidents is set out separately, and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents.

14. Prevention

- 12.1 We recognise that the school plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults, supportive friends and an ethos of protection.
- 12.2 The school community will therefore:
- 12.2.1 Work to establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.
 - 12.2.2 Include regular consultation with children e.g. through safety questionnaires, participation in anti-bullying week, asking children to report whether they have had happy/sad lunchtimes/playtimes
 - 12.2.3 Ensure that all children know there is an adult in the school whom they can approach if they are worried or in difficulty.
 - 12.2.4 Include safeguarding across the curriculum, including PSHE, opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help. In particular this will include anti-bullying work, e-safety, road safety, pedestrian and cycle training. Also focused work in Year 6 to prepare for transition to Secondary school and more personal safety/independent travel.
 - 12.2.5 Ensure all staff are aware of school guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.

15. Health & Safety

- 13.1 Our Health & Safety policy, set out in a separate document, reflects the consideration we give to the protection of our children both physically within the school environment, and for example in relation to internet use, wearing religious symbols, and when away from the school and when undertaking school trips and visits.

16. Prevent, Extremism and Radicalisation

17. As part of Graiseley Primary School's ongoing safeguarding and child protection duties we are fully behind the government's *Prevent Strategy*.
18. From 1 July 2015 all schools are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism". This duty is known as the *Prevent Duty for Schools*.
19. We build pupils' resilience to radicalisation by promoting fundamental British values and enabling our pupils to challenge extremist views.
20. The statutory guidance refers to the importance of *Prevent* awareness training to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas.
21. We are aware that it is appropriate to make a referral to the Channel programme, which is a programme which focuses on providing support at an early age. An individual's engagement is entirely voluntary. It is a referral mechanism for school's where there is a concern.

22. Monitoring and Evaluation

Our Child Protection Policy and Procedures will be monitored and evaluated by:

- *Governing Body visits to the school*
- *SLT 'drop ins' and discussions with children and staff*
- *Pupil surveys and questionnaires*
- *Scrutiny of Attendance data*
- *Scrutiny of range of risk assessments*
- *Scrutiny of GB minutes*
- *Logs of bullying/racist/behaviour incidents for SLT and GB to monitor*
- *Review of parental concerns and parent questionnaires*
- *Review of extra-curricular provision*

This policy also links to our policies on:

- *Behaviour,*
- *Staff Behaviour Policy / Code of Conduct*
- *Whistleblowing,*
- *Anti-bullying,*
- *Intimate care guidance*
- *Health & Safety*
- *Allegations against staff,*
- *Parental concerns,*
- *Attendance,*
- *Curriculum*
- *PHSCE*
- *Teaching and Learning*
- *Administration of medicines*
- *Drug Education*
- *Sex and Relationships Education*
- *Physical intervention*
- *ESafety, including staff use of mobile phones*
- *Risk Assessment*
- *Recruitment and Selection*
- *Child Sexual Exploitation*
- *Intimate Care*

23.Data Protection Act 1998: How we use pupil information

Our Data Protection Policy can be found on the school website and school office. All guidance was updated in line with law changes of May 2018.

24. Policy guidance for all Safeguarding Issues

ALL staff should be aware that ALL key documents and training can be found on Hayes online training and new staff must ensure they have a password and easy access Hayes online from the Headteacher. See quick reference guide below -

Module 1 - Safeguarding Children

- Types of abuse and neglect
- Grooming
- Honour based violence (Including FGM and forced marriage)
- Trafficking
- County Lines
- Child Sexual Exploitation
- Peer on Peer abuse – Sexual violence and Sexual harassment
- Children missing from Education

Module 3 - Mental Health & Wellbeing

- Types of mental health needs
 - o Anxiety
 - o Depression
 - o Self-harm
 - o Suicidal thoughts
- Drugs and Alcohol
- How to support young people
- Bullying
- Teenage Relationship Abuse
- Domestic Violence & Abuse

Module 2 - Radicalisation & Extremism

- Prevent Strategy Guidance
- Warning signs
- Raising concerns
- Taking positive action
- Talking about terror attacks

Module 4 - How to keep children safe

- Duty of care
- Raising concerns about a child
- Ofsted requirements for Safeguarding
- Accidents and First Aid
- Education visits
- Practical lessons
- Use of Force to control or restrain pupils
- Knife Crime
- Screening, searching and confiscation

Module 5 - Online Safety

- Cyber bullying
- Sexting
- Sharing and streaming Apps
- Online Grooming
- Live streaming
- Ofsted requirements and recommended practices
- Guidance and information on current technologies
- Safe Internet usage
- Trolling

Appendix one

Recognising signs of child abuse

Categories of Abuse:

- Physical Abuse
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse
- Neglect

Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness
- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour
- Child Sexual Exploitation.

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

- Must be regarded as indicators of the possibility of significant harm

- Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
- May require consultation with and / or referral to Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the child may:

- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury

- Unexplained delay in seeking treatment
- The parents/carers are uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a "cry for help" and if ignored could lead to a more serious injury)
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

Bruising

Children can have accidental bruising, but the following must be considered as non-accidental unless there is evidence or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
- Indiscriminate attachment or failure to attach
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a "loner" - difficulty relating to others

Recognising Signs of Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self-mutilation and suicide attempts
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is not disclosed
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Sexual Abuse by Young People

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is "acting out" which may derive from other sexual situations to which the child or young person has been exposed.

If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base.

Assessment

In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

- **Equality** - consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies
- **Consent** - agreement including all the following:
 - Understanding that is proposed based on age, maturity, development level, functioning and experience
 - Knowledge of society's standards for what is being proposed
 - Awareness of potential consequences and alternatives
 - Assumption that agreements or disagreements will be respected equally
 - Voluntary decision
 - Mental competence
- **Coercion** - the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
- A child seen to be listless, apathetic and irresponsible with no apparent medical cause

- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Child Sexual Exploitation

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers

- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Appendix two

Forced Marriage (FM)

This is an entirely separate issue from arranged marriage. It is a human rights abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. Never attempt to intervene directly as a school or through a third party.

Female Genital Mutilation (FGM)

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM.

What is FGM?

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy - partial/total removal of clitoris

Type 2 Excision - partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl - social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Is FGM legal?

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** in most countries including the UK.

Circumstances and occurrences that may point to FGM happening

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinary tract infection
- Disclosure

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action **without delay**.

Appendix three

References

This policy adopts all statutory guidance from Keeping Children Safe in Education:

References for further reading

Full guidance, *Keeping Children Safe in Education* at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/828312/Keeping_children_safe_in_education.pdf

Kirpan

- See Health and Safety Policy for guidance