

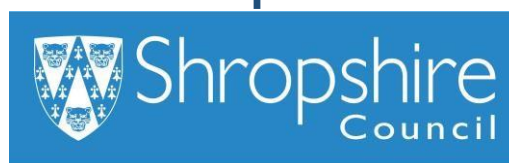


SAFEGUARDING AND CHILD PROTECTION POLICY

September 2018

This policy must be reviewed annually unless there are any changes in legislation or guidance in the interim, in which case the policy must be updated as and when necessary.

Review Date: September 2019



Contents

1	Sample Policy Statement	Pg.4
2	Policy Procedures	Pg.4
2.1	Adult Roles	Pg.4
2.2	Record Keeping	Pg.5
2.3	Decision Making	Pg.6/7
2.4	Partnership with families	Pg.8
2.5	Specific Legal Duties	Pg.9
2.6	Specific safeguarding issues	Pg.10
2.7	Safeguarding children with special educational needs and disabilities	Pg.11
2.8	Children Missing Education	Pg.12
2.9	Safeguarding children who are Looked After	Pg.12
2.10	Injuries	Pg.13
2.11	Safe use of ICT and mobile phones	Pg.13
2.12	Escalating/ de-escalating concerns	Pg.14
2.13	The impact of abuse	Pg.14
2.14	Taking action	Pg.14
2.15	Prevention in the curriculum	Pg.15
2.16	Managing allegations of abuse against staff, students or volunteers	Pg.16
2.17	Recruiting staff	Pg.17
2.18	Staff supervision	Pg.18

Safeguarding and Child Protection Policy and Procedures

1. Policy statement:

At Minsterley School we believe that it is always unacceptable for a child or young person to experience abuse of any kind and recognise that safeguarding the welfare of **all** children and young people is everyone's responsibility. We follow Shropshire Safeguarding Children Board (SSCB) procedures and acknowledge that the welfare of the child is paramount.

At Minsterley School it is our duty to respond promptly and appropriately to all concerns, incidents or allegations of abuse or neglect of a child. We work in partnership with children, young people, their parents, carers and other agencies. Our statutory duties and supporting guidance are set out in The Safeguarding and Welfare Requirements in the **Statutory Framework for the Early Years Foundation Stage (EYFS) 2017**, the Compulsory Childcare Register, Working Together to Safeguard Children 2018 and **Keeping Children Safe in Education 2018**.

- **The Children Act 1989 and 2004** - Safeguarding and promoting the welfare of children is defined as; protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and undertaking that role to enable those children to have optimum life chances and to enter adulthood successfully.

Section 3 (5) of the Children Act 1989 states that the law empowers anyone who has care of a child to do all that is reasonable in the circumstances to safeguard his/her welfare.

- **Counter-terrorism and Security Act 2015** – preventing people being drawn into terrorism and promotion of British values to ensure children are kept safe from radicalisation
- **Female Genital Mutilation Act 2003** – **Serious Crime Act 2015** - mandatory reporting of FGM from 31st October 2015

2. Procedure

2.1 Adult Roles

All staff (including students and volunteers) in this **school** are familiar with the definitions and signs and symptoms of abuse or neglect stated in Working Together to Safeguard Children March 2018 as set out in <http://www.safeguardingshropshireschildren.org.uk/search/?q=contacts>

All staff are aware of their individual roles in safeguarding and promoting the welfare of children including their responsibility to be alert to any issues for concern in the child's life at home or elsewhere. We ensure that all staff (including students and volunteers) undergo an induction process where they are given copies of the procedures they must follow if they suspect abuse or neglect. On-going support is provided through regular supervision and appraisals to ensure these policies and procedures are put into practice to protect children.

As part of induction, training will include the school's behaviour policy and the school's procedures for managing children who are missing education, as well as the staff code of conduct, and the child

protection policy. Keeping Children Safe in Education Part 1 must be read by all members of the staff; everyone working directly with children must also be issued with Annex A.

All staff are expected to update their child protection training at least every three years. In addition, all staff members should receive regular safeguarding and child protection updates (for example, via email, e-bulletins, staff meetings) as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

The Designated Safeguarding Lead (DSL) who will take the lead for safeguarding and child protection issues is: Katie Wilcox

The deputy Designated Safeguarding Lead is Jo Holloway

The **committee member/ safeguarding link governor** who oversees this work is: Rachel Steele

Our Designated Safeguarding Lead will update their child protection/safeguarding training **every two years** and has specific responsibilities as listed in **Appendix A**

2.2 Record Keeping

When a concern about a child's welfare or safety is raised it will be discussed with the designated lead and recorded. The designated lead will decide if the concern should be shared with another agency (see **decision making** below) or kept on record in case future concerns arise. The reason for the decision will be noted alongside the record.

All records will be stored in a separate confidential file in a locked, secure place with restricted access. When a child/pupil transfers to another school/setting within this or another authority, the confidential information held is forwarded under confidential cover and separate from the child's/pupil's main file to the DSL for child protection in the receiving school/setting immediately.

This should be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained (**Appendix D**).

In addition to the child protection file the DSL will consider sharing information with the new setting/school/college in advance of a child leaving.

Information is shared as necessary to protect children from harm. We follow the guidance in the HMG 2018 guide '*Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers*' and the HMG 2015 guide '*What to do if you are worried a child is being abused*'.

When information is being accumulated prior to possible referral we will start a chronology of events – see **Appendix E**. The designated lead will regularly review all child protection chronologies to decide if the accumulation of events is having a detrimental impact on a child and must be referred to Compass. If the designated lead decides not to refer, the reason will be noted on the child's chronology.

2.3 Decision making – '*Accessing the right service at the right time*'

We take a holistic approach to safeguarding all children in our care and recognise that different families need a different level of support at different times. To enable us to recognise at which level a family might require support; we use the Shropshire Safeguarding Children Board's *Multi-Agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire*. [Shropshire Threshold Document](#)

This guidance identifies four levels to ensure all children receive the support and intervention they need to achieve a positive life experience. Of central importance in understanding where a child's needs might lie

on this continuum, is the cooperation and engagement of parents and carers and we aim to develop good, professional relationships to ensure that we have a shared understanding of each child's needs.

It should be noted that if parents demonstrate a lack of co-operation or appreciation about the concerns we identify this may raise the level of the need and required level of action.

Level 1 – Universal

Children with no additional needs and where there are no concerns. Typically, these children are likely to live in a resilient and protective environment where their needs are met. These children will require no additional support beyond that which is universally available.

We anticipate that by working closely with parents and sign-posting families to other universal services within our community that we can meet the needs of children and families at this level.

At this level parents will always be consulted before any action is taken.

Level 2 – Children in need of Early Help

These children can be defined as needing some additional support without which they would be at risk of not meeting their full potential. Their identified needs may relate to their health, educational, or social development, and are likely to be short term needs. If ignored these issues may develop into more worrying concerns for the child or young person. These children will be living in greater adversity than most other children or have a greater degree of vulnerability than most if their needs are not clear, not known or not being met a lead professional will coordinate a whole family assessment and plan around the child.

Sometimes in discussion with parents and carers and through our observations and records we may think a child and their family could benefit from additional support from outside agencies to ensure he/she reaches his/her full potential. This process is known as Early Help. We have knowledge of the different agencies which may be able to offer support and we will work with parents and carers to decide which support would be most appropriate for their family. We will work with parents to complete any Early Help referral forms required to access this support.

If we are unsure of where to access support, we will contact Compass for advice.

Further information about Early Help can be found at: <http://www.shropshire.gov.uk/early-help/>

At this level parents will always be consulted before we contact another agency and their written consent gained before any action is taken.

Level 3 –children with complex needs

This level applies to those children identified as requiring targeted support. It is likely that for these children their needs and care are compromised. Only a small fraction of children will fall within this band. These children will be those who are vulnerable or experiencing the greatest level of adversity.

Children with additional needs: These children are potentially at risk of developing acute/ complex needs if they do not receive early targeted intervention.

Sometimes in discussion with parents and carers and through our observations and records we realise that a child and their family have a range of needs which are preventing a child from reaching his/her full potential. In this case we will discuss the situation with parents and carers and try to identify each area of concern so that a range of other agencies can come together to offer support to the family.

With parental consent, we will complete an Early Help assessment and contact Compass to help us identify and co-ordinate a range of other agencies. This multi-agency response will require a lead professional who may be a member of our staff.

At this level parents will always be consulted before we contact another agency and their written consent gained before any action is taken.

Level 4 – children with acute specialist needs/ child protection

These are children whose needs and care now are likely to be significantly compromised thereby requiring assessment under Section 47 or Section 17 of the Children Act 1989. These children may become subject to a child protection plan and need to be accommodated (taken into care) by Children's Social Care either on a voluntary basis or by way of Court Order. Section 17- 1989 Children Act states a child shall be taken to be in need if: (a) He is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority under this Part; (b) His health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services; or (c) He is disabled.

Sometimes in discussion with parents and carers and through our observations and records we realise that a child is at risk of significant harm (see below) and we must take emergency action to ensure that a child is kept safe. If the Designated Lead is unsure whether the concern meets this threshold he/she may discuss the case with an Early Help Social Worker.

There are no absolute criteria on which to rely when judging what constitutes significant harm. Sometimes a single violent episode may constitute significant harm but more often it is an accumulation of significant events, both acute and longstanding, which interrupt damage or change the child's development.

It may be:

- the child is at risk of serious harm from others or themselves and requires skilled risk assessment and protection;*
- the child or young person is likely to put others at risk or harm, distress or loss and a response needs to take account of the individual's interests and wellbeing of others;*
- the child's circumstances, including their health, finances, living conditions or social situation, are likely to cause them or others serious harm, social exclusion or reduction of life chances;*
- the situation requires assessment of, and intervention in unpredictable emotional, psychological, intrafamily or social factors and responses;*
- the circumstances are such that there are significant risks in both intervening and not intervening, when a fine judgement is required*

Careful analysis and interpretation of information will enable practitioners and families to:

- think about what is important and identify needs or difficulties;*
- explain why these have come about;*
- understand the impact of strengths and pressures on the child or young person;*
- reach agreement about what needs to be improved;*
- agree the priority issues, aims and goals in terms of improving the child's wellbeing; • agree desired outcomes.*

Consider:

- **What is the lived experience of the child?***
- **When and how are the child's needs NOT being met?***
- **What are the effects on the child's current development and long-term effects?***
- **What are the child's needs, wishes and feelings regarding intervention and likely outcomes?***

(Taken from: Multi-agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire 2017) [Shropshire Threshold Document](#)

2.4 Partnership with families

A copy of this policy is made available to all parents prior to their child joining our school/setting as well as details of the complaints procedure. In general, any concerns will be discussed with parents and we will offer support. All conversations, whatever the outcome, should be recorded appropriately to show that

they took place, identify what was agreed and evaluate how effectively they enabled needs to be met. In this way quality conversations can demonstrate their impact on successful practice, including improvements in decision making and joint working. Conversations should continue to inform the on-going planning and reviewing.

Practitioners working with families at a Universal, Early Help or Targeted level will need to get the consent of the family before any information is held or shared with other agencies. If the practitioner does not gain the family's consent and in future has ongoing concerns, they should consider contacting Compass for advice and guidance. **Except for child protection matters, referrals to Compass cannot be accepted without parents having been consulted first.**

Consent is not required for child protection referrals where it is suspected that a child may be suffering or be at risk of suffering significant harm; however, the referring practitioner, would need to inform parents or carers that they are making a referral, unless to do so may:

- Place the child at increased risk of Significant Harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

The child's interest must be the overriding consideration in making such decisions. Decisions should be recorded. If consent is withheld by the parent:

- If it is felt that the child's needs can be met through Early Help, then discussion with the family should take place about the completion of an Early Help Assessment and provision of services through an Early Help Plan. Early help consultations are available from the Early Help Advisors for support in managing these situations.
- For another agency familiar with the child and family to make the approach about information sharing to the family.
- No assessment should take place. The rationale for this decision will be recorded on the concerns form.
- The combination of the concerns and the refusal to consent to enquiries being made may result in the concerns being defined as child protection concerns. In this case, information sharing may proceed without parental consent. The consultation and the decision to proceed without consent must be recorded on the case papers.

If a child has been injured or is in imminent danger of being injured then we will contact the emergency services, medical or police, immediately on 999.

When making a level 4 referral to Compass we will ensure we have a record of all details required detailed on a [Shropshire Multi-Agency Referral Form](#)

2.5 Specific legal duties to report

Legislation has recognised and criminalised the following types of abuse and placed duties on education settings to report offences to the authorities:

- **Radicalisation and the Prevent Duty**
The government set out its definition of British values in the 2015 Prevent Strategy – this promotes the values of:
 - democracy
 - the rule of law
 - individual liberty
 - mutual respect
 - tolerance of those of different faiths and beliefs

Our setting promotes these values to ensure that children build resilience – see **Appendix F**

If a member of staff has a concern about a pupil/s they should follow the school's/settings normal safeguarding procedures, including discussing with the school's/settings designated safeguarding lead as set out in the Child Protection/safeguarding policy.

The designated lead should contact West Mercia Prevent Team:
Detective Sergeant Stuart Clark, 01386 591835
PC Manjit Sidhu, 01386 591815

The Prevent Team email is: prevent@warwickshireandwestmercia.pnn.police.uk

A separate policy '**Preventing Extremism and Radicalisation Policy**' can be located on the learning gateway.

- **Female Genital Mutilation (FGM)**

Whilst all staff should speak to the designated safeguarding lead (or deputy) about any concerns about female genital mutilation (FGM), there is a specific **legal** duty on **teachers**. If a **teacher**, in the course of their work in the profession, discovers that an act of FGM appears to have been carried out on a girl under the age of 18, the teacher **must** report this to the police.

Please refer to <https://www.gov.uk/government/publications/female-genital-mutilation-leaflet> ***/We may not seek parental consent if this may put the girl at increased risk.***

- **Domestic abuse and honour-based violence**

Children living in households where there is domestic abuse such as coercion or violence, including honour-based violence, could be at significant risk of harm. We will seek support for victims and their children through Compass.

Depending on the level of risk, /we may or may not consult parents before contacting Compass.

2.6 Specific safeguarding issues

To ensure that our children and young people are protected from harm, we need to understand what types of behaviour constitute abuse and neglect (Appendix A). Staff are made aware of specific safeguarding issues (listed below) through child protection training, reading up to date guidance such as Keeping Children Safe in Education 2018, Statutory Framework for the Early Years Foundation Stage stated in Section 3 – The Safeguarding and Welfare Requirements and accessing SSCB procedures at <http://www.safeguardingshropshireschildren.org.uk>

This School/settings ensures that the DSL is continually updated in all areas below. They are familiar with the referral pathways and specific toolkits and guidance available on the SSCB website.

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example, information for schools, colleges and early years settings can be found on the TES, MindEd and the NSPCC websites. Staff can access government guidance as required on the issues listed below via GOV.UK and other government websites.

<ul style="list-style-type: none"> • Bullying including cyberbullying • Child Criminal Exploitation: County Lines • Children missing education • Child missing from home or care • Child sexual exploitation (CSE) • Children and the court system • Children with family members in prison • Domestic violence • Drugs • Fabricated or induced illness • Faith abuse • Female genital mutilation (FGM) • So called honour-based violence • Gangs and youth violence • Gender-based violence/violence against women and girls (VAWG) Homelessness 	<ul style="list-style-type: none"> • • Hate (Appendix G) • • Initiation/Hazing type violence and rituals • • Mental health • • Missing children and adults' strategy • • Private fostering • • Preventing radicalisation • Relationship abuse Sexting (youth produced sexual imagery) Sexual Violence Sexual Harassment Trafficking
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Where incidents and or behaviours are associated with factors outside the school/college/setting and/or occur between children outside the school/college/setting the designated safeguarding lead (or deputy) should be considering contextual safeguarding. This simply means assessments of children in such cases should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare. Children's social care assessments should consider such factors and so, it is important that schools and colleges provide as much information as possible as part of the referral process. This will allow any assessment to consider all the evidence and the full context of any abuse. Supporting information regarding contextual safeguarding, and where schools and colleges fit into the wider environment, is available here: <https://contextualsafeguarding.org.uk/>

Peer on Peer Abuse

Staff should recognise that children can abuse their peers. Abuse is abuse and should never be tolerated or passed off as "banter" or "part of growing up". Victims of peer abuse should be supported as they would be if they were the victim of any other form of abuse, in accordance with this policy.

Peer on peer abuse occurs when a young person is exploited, bullied and/or harmed by their peers who are the same age or similar age.

Staff are aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to:

- ✦ bullying (including cyberbullying);
- ✦ physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- ✦ sexual violence and sexual harassment;
- ✦ sexting (also known as youth produced sexual imagery); and
- ✦ initiation/hazing type violence and rituals.

Compliance with the Public-Sector Equality Duty (PSED) is a legal requirement for schools and colleges that are public bodies.

Under the PSED, schools and colleges that are public bodies have a general duty to have regard to the need to eliminate unlawful discrimination, harassment and victimisation, to advance equality of opportunity between different groups and to foster good relations between different groups. The duty applies to all protected characteristics and means that whenever significant decisions are being made

or policies developed, thought must be given to the equality implications such as, for example, the elimination of sexual violence and sexual harassment.

Minsterley school will ensure that the following areas are covered within the curriculum to try and minimise the risk of peer on peer abuse:

- ✦ healthy and respectful relationships;
- ✦ what respectful behaviour looks like;
- ✦ consent;
- ✦ gender roles, stereotyping, equality;
- ✦ body confidence and self-esteem;
- ✦ prejudiced behaviour;
- ✦ that sexual violence and sexual harassment is always wrong; and
- ✦ addressing cultures of sexual harassment.

Schools often deliver this currently, through planned, high-quality, Sex and Relationship Education (SRE) and Personal, Social, Health and Economic (PSHE).

The school would respond to an incident of Peer on Peer abuse by recording the incident on a Concern Reporting Form (Appendix I) and by following guidance as set out in [Sexual violence and sexual harassment between children in schools and colleges](#). Published by Department for Education.

It is vital that staff at Minsterley understand that the child who is perpetrating the abuse may also be at risk of harm. Staff should make every effort to ensure that the perpetrator is also treated as a victim and undertake assessments to conclude this. Sensitive work must be undertaken with the child who is perpetrating, by helping them to understand the nature of their behaviour and the effect it has on others may prevent abuse.

Staff must be able to use their professional judgement in identifying when what may be perceived as “normal developmental childhood behaviour” becomes abusive, dangerous and harmful to others. Designated leads may need to consult with the SSCB Threshold document to help with their decision making as well as [Brook Traffic Light Tool](#).

2.7 Safeguarding children with special educational needs and disabilities

It is recognised that children with special educational needs or disabilities (SEND) can present additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children. These can include: assumptions that indicators of possible abuse such as behaviour, mood and injury, relate to the child’s impairment without further exploration; children with SEND can be disproportionately impacted by issues such as bullying, without necessarily showing outward signs; communication barriers.

It is important, therefore, to be particularly sensitive to these issues when considering any aspect of the welfare and safety of such children, and to seek professional advice where necessary.

2.8 Children Missing Education

All children, regardless of their circumstances, are entitled to a full-time education, which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area. Effective information sharing between parents, schools, colleges and local authorities is critical to ensuring that all children are safe and receiving suitable education

A child going missing from education is a potential indicator of abuse or neglect and such children are at risk of being victims of harm, exploitation or radicalisation. School and college staff should follow their procedures for unauthorised absence and for dealing with children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of going missing in future. Where reasonably possible the school will hold at least two emergency contacts for every child in the school in case of emergency and in case there are welfare concerns at home.

Schools and colleges should put in place appropriate safeguarding policies, procedures and responses for children who go missing from education, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, female genital mutilation and forced marriage. Further information about children at risk of missing education can be found in the Children Missing Education guidance or Shropshire Council Learning Gateway.

2.9 Safeguarding children who are Looked After

Staff are aware the most common reason for children becoming looked after is because of abuse and/or neglect. Appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. Appropriate staff members also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The designated safeguarding lead has details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

The designated teacher for looked after children will work with the Local Authority to promote the educational achievement of registered pupils who are looked after or who have left care through adoption, special guardianship, child arrangement orders or who are adopted from state care outside of England and Wales.

The appointment of a designated teacher is a statutory requirement for governing bodies of maintained schools and proprietors of academies. "KCSIE 2018" is clear that in other schools and colleges an appropriately trained teacher should take the lead therefore it would be good practice on other schools to have a designated teacher for Looked After Children.

The designated safeguarding lead should have details of the child's social worker and the name of the virtual head teacher. The designated safeguarding lead should work closely with the designated teacher.

2.10 Injuries

At the beginning of each session or school day parents are requested to notify us of any accidents, incidents or injuries which may affect their child before leaving him/her at the setting/school. A note will be made of any existing injuries and how the injury was received will be recorded. A body map may be used to indicate any marks/bruises (**See Appendix H**)

Any serious injury occurring in the school e.g. broken bone, is reported to Health and Safety Executive (HSE) via RIDDOR. This is also reported to Ofsted within 14 days (**see Appendix I**).

2.11 Safe use of ICT and mobile phones

The use of mobile phones and other electronic devices such as computers, tablets, and game devices is commonplace. However, as a society, we are beginning to recognise that although these devices have brought great benefit we also need to ensure that we help children to understand there are dangers and how to keep themselves safe. This includes:

- Keeping personal details secure
- Understanding that not all content is appropriate, truthful or legal
- What to do if they do accidentally access inappropriate or illegal content
- What to do if they are upset by something they receive
- What to do if they are going to physically meet someone they have met on-line

Practitioners can use their personal mobile phones during their break times. During working hours, they must be kept out of the reach of children and parents in a locked cupboard, a secure area accessible only to staff. All staff are made aware of their duty to follow this procedure, and to challenge anyone not adhering to it.

Visitors to the setting (including/ excluding parents) explain your procedure for visitors' mobile phone use.

Important contact details of the children are kept on risk assessments at all time.

We believe that photographs validate children's experiences and achievements and are a valuable way of recording milestones in a child's life. Parental permission for the different ways in which we use photographs is gained as part of the initial registration at Minsterley School. We take a mixture of photos that reflect the preschool environment, sometimes this will be when children are engrossed in an activity either on their own or with their peers. To safeguard children and adults and to maintain privacy, cameras are not to be used during intimate care situations by adults or children.

We use use technology to record children's learning, such as Tapestry and Dojos. We ensure that this information is kept secure by using password protected devices.

Through induction, staff and volunteers are made aware of our 'acceptable use of technology' policy both at home and in the workplace. If any staff or volunteers breach this policy, then we will take disciplinary action which may result in a referral to the Disclosure and Barring Service.

Children are not allowed to bring mobile phones into school.

2.12 Escalating / de-escalating concerns

Just because a child is assessed at a point in time as meeting certain threshold criteria does not mean that they always will. An assessment is an on-going process, not an event; children's needs often change over time. The Designated Lead for Safeguarding will maintain an overview of all children with a plan to ensure children's needs are being met at the right level of intervention. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of the parents and carers – a lack of co-operation or appreciation about the concern may of itself raise the level of the need and required response.

2.13 The impact of abuse

The impact of child abuse should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach, and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.

2.14 Taking action

Key points to remember for taking action are:

- in an emergency take the action necessary to help the child, for example, call 999
- report your concern to the DSL immediately
- if the DSL is not able to be contacted ensure action is taken to report the concern to children's social care • do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- complete a record of concern (Appendix I)
- seek support for yourself if you are distressed.

If you suspect a child is at risk of harm

There will be occasions when you suspect that a child may be at serious risk, but you have no 'real' evidence. The child's behaviour may have changed, or you may have noticed other physical but inconclusive signs. In these circumstances, you should try to give the child the opportunity to talk. The signs you have noticed may be due to a variety of factors and it is fine to ask the child if they are alright or if you can help in any way.

Use the welfare concern form (**see Appendix I**) to record these early concerns. If the child does begin to reveal that they are being harmed, you should follow the advice in the section below 'If a child discloses information to you'.

If, following your conversation, you remain concerned, you should discuss your concerns with the designated person.

If a child discloses information to you

It takes a lot of courage for a child to disclose that they are being neglected and or abused. They may feel ashamed, particularly if the abuse is sexual, their abuser may have threatened what will happen if they tell, they may have lost all trust in adults, or they may believe, or have been told, that the abuse is their own fault.

If a child talks to you about any risks to their safety or wellbeing you will need to let them know that **you must** pass the information on – you are not allowed to keep secrets. The point at which you do this is a matter for professional judgement. If you jump in immediately the child may think that you do not want to listen, if you leave it till the very end of the conversation, the child may feel that you have misled them into revealing more than they would have otherwise.

During your conversation with the child:

Allow them to speak freely.

- ✦ Remain calm and do not over react – the child may stop talking if they feel they are upsetting you.
- ✦ Give reassuring nods or words of comfort – 'I'm so sorry this has happened', 'I want to help', 'this isn't your fault', 'You are doing the right thing in talking to me'.
- ✦ Do not be afraid of silences – remember how hard this must be for the child.
- ✦ Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child's mother think about all this.
- ✦ At an appropriate time tell the child that to help them you must pass the information on.
- ✦ Do not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused.
- ✦ Avoid admonishing the child for not disclosing earlier. Saying 'I do wish you had told me about this when it started' or 'I can't believe what I'm hearing' may be your way of being supportive but the child may interpret it that they have done something wrong.
- ✦ Tell the child what will happen next. The child may agree to go with you to see the designated person. Otherwise let them know that someone will come to see them before the end of the day.

- ✦ Report verbally to the designated person.
- ✦ Write up your conversation as soon as possible on the record of concern form and hand it to the designated person.
- ✦ Seek support if you feel distressed.

Refer to **Appendix I** (or if you have your own template signpost to it here)

2.15 Prevention in the Curriculum

Minsterley School recognises the importance of developing pupils' awareness of behaviour that is unacceptable towards them and others, and how they can help keep themselves and others safe.

The PSHE programme *in each key stage* provides personal development opportunities for pupils to learn about keeping safe and who to ask for help if their safety is threatened. As part of developing a healthy, safer lifestyle, pupils are taught to, for example.

- ✦ Safely explore their own and others' attitudes.
- ✦ Recognise and manage risks in different situations and how to behave responsibly.
- ✦ Judge what kind of physical contact is acceptable and unacceptable.
- ✦ Recognise when pressure from others (including people they know) threatens their personal safety and well-being and develop effective ways of resisting pressure; including knowing when and where to get help.
- ✦ Use assertiveness techniques to resist unhelpful pressure.
- ✦ The importance of Internet safety

2.16 Managing allegations of abuse made against staff (this includes apprentices), students or volunteers (see Appendix J)

Allegations which might indicate that a person would pose a risk of harm to children if they continue to work in regular or close contact with children in their present position will be taken seriously. We have a duty to inform Ofsted of any serious allegations made against a person which suggests he or she has:

- ✦ behaved in a way that has harmed a child, or may have harmed a child;
- ✦ possibly committed a criminal offence against or related to a child; or
- ✦ behaved towards a child or children in a way that indicates he or she would pose a risk of harm to children.

We also have a duty of care towards our staff. We provide support for anyone facing an allegation and provide employees with a named contact if they are suspended. It is essential that any allegations of abuse made against members of staff or volunteers are dealt with very quickly, in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

In the first instance, the designated lead for safeguarding will meet with the Senior Manager identified in the employer's procedure to consider the nature, content and context of the allegation and agree a course of action. The Senior Manager identified in the employer's procedure will then contact the Local Authority Designated Officer (LADO) to confirm the course of action.

If there are concerns about a staff member then this should be referred to the headteacher or principal. Where there are concerns about the headteacher or principal, this should be referred to the chair of governors, chair of the management committee or proprietor of independent school as appropriate. In the event of allegations of abuse being made against the headteacher, where the headteacher is the sole proprietor of an independent school, allegations should be reported directly to the designated officer of the local authority. Staff may consider discussing any concerns with the schools designated safeguarding lead

and make any referral via them.

The LADO may ask for additional information, such as previous history, whether the child or their family have made similar allegations previously and the individual's current contact with children. There may be situations when the LADO will want to involve the police immediately, for example if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

The initial sharing of information and evaluation may lead to a decision that no further action is to be taken regarding the individual facing the allegation or concern; in which case, this decision and a justification for it will be recorded by both the Registered Person/Headteacher and the LADO, and agreement reached on what information should be put in writing to the individuals concerned and by whom. The Registered Person/Headteacher will then consider with the LADO what action should follow both in respect of the individual and those who made the initial allegation.

If further action is required, we will follow the advice of the LADO and co-operate with any investigations. We will follow instructions about what can be disclosed to the accused and whether he/she should be suspended whilst further investigations take place. This is not an indication of admission that the alleged incident has taken place but is to protect the staff as well as children and families throughout the process. Clear advice will be given to workers on the process of investigation by other agencies. We will follow advice about how to inform families about the allegation.

In all cases, we will notify Ofsted within 14 days of the allegations first being made and inform them about what actions are being taken by completing the on-line form at:

https://ofstedonline.ofsted.gov.uk/ofsted/Ofsted_Early_Years_Notification.ofm

If the member of staff/volunteer is found to be a risk to children and vulnerable adults, the Disclosure & Barring Service will be notified.

You will need to consider who makes the referral if an allegation is made against the Designated Lead e.g.....if an allegation is made against the Designated Lead the Registered Person will make the referral.

If we are aware of the details of a child who has or may have been harmed by a member of staff or volunteer we will contact Compass to make a referral to seek support for the child.

There is a legal requirement for employers to make a referral to the DBS where they think that an individual has engaged in conduct that harmed (or is likely to harm) a child; or if a person otherwise poses a risk of harm to a child. [Safeguarding Vulnerable Groups Act 2006](#)

Whistleblowing

Whistle blowing is a mechanism by which adults can voice their concerns in good faith, without fear of repercussion. Any behaviour by colleagues that raises concern regardless of source will be recorded and reported to the designated practitioner or appropriate agency. It is helpful to develop and insert a procedure here, so staff know exactly what to do if they have any concerns or refer to separate policy if you have one.

2.17 Recruiting Staff

We provide adequate and appropriate staffing resources to meet the needs of children. (More information can be found in our recruitment and retention policy).

Job adverts and application packs refer to our safeguarding policy and procedures.

Applicants for posts are clearly informed that positions are exempt from the Rehabilitation of Offenders Act 1974. We ensure that we meet our responsibilities under the Safeguarding Vulnerable Groups Act 2006.

Where applicants are rejected because of information that has been disclosed, we will inform the applicant about their right to know and to challenge incorrect information.

We comply with the Safeguarding and Welfare Requirements in the Statutory Framework for the Early Years Foundation Stage (EYFS) 2017 and the Compulsory Childcare Register, Keeping Children Safe in Education 2018 in respect of references and Enhanced Disclosure and Barring Service checks for staff and volunteers to ensure that no disqualified or unsuitable person works with or has access to the children.

Keeping Children Safe in Education 2018 states that schools will be required to complete a risk assessment for each volunteer to decide whether they need to do an enhanced DBS check or not. (Note that even if it is decided an enhanced DBS is to be requested, if the volunteer is not in regulated activity, then schools are not legally allowed to do a barred list check).

We have procedures for recording the details of visitors, including prospective candidates, to the setting and ensure that we have control over who comes in to the premises so that no unauthorised person has unsupervised access to the children.

Where pupils are placed in an alternative provision, the schools should obtain a written statement from the provider that they have completed all the vetting and barring checks that are necessary on their staff.

2.18 Staff Supervision (including students and volunteers)

To ensure that all staff are alert to any issues for concern, staff receive regular training and updates in safeguarding and child protection through a range of training and supervision activities. This includes both formal and informal supervision, annual appraisals, staff meetings and access to SSCB approved training. Individual supervision offers staff an opportunity to receive coaching to improve their practice with children and address any issues resulting in poor performance. Individual supervision also provides a safe space in which to raise any concerns they may have about the conduct of other adults connected with the setting.

Staff supervision is also used to ensure that all staff remain suitable to work with children. This means staff are required to inform their manager of any medication they are taking and provide medical evidence that this will not impair their ability to look after children properly. Staff are also required to disclose any information, which may lead to their disqualification as outlined in *The Statutory Framework for the EYFS 2017 3.14-3.18 and Keeping Children Safe in Education 2018*.

Signature: <u>Sara Tulk</u>	Date Policy adopted: 18/10/2018
Position : Chair of Governors	Review Date: September 2019