



Corringham Primary School

(Including: Corringham Primary Pre-School and Speech and Language Enhanced Provision)

Child Protection & Safeguarding Policy 2017/2018

KEY CONTACTS WITHIN THE SCHOOL

Head Teacher

Name: Lorna Hamilton
Contact Number: 01375 672157
Mobile Number: 07854 467221

Designated Safeguarding Lead (DSL)

Name: Catherine Smith
Contact Number: 01375 672157
Mobile Number: 07966 090345

Deputy Designated Safeguarding Lead (DDSL)

Name: Kelly Hamilton
Contact Number: 01375 672157
Mobile Number: 07789 487093

Nominated Governor Safeguarding

Name: Georgina Clark

KEY CONTACTS WITHIN THE LOCAL AUTHORITY

The Lead Officer for Educational Safeguarding

(is able to provide advice and consultancy)

Name: Neale Laurie
Contact Number: 01375 6525335
E-mail: nlaurie@thurrock.gov.uk

MASH Team: 01375 652802

Referral to Social Care Services

Where schools have **URGENT** and **IMMEDIATE** concerns for the safety and welfare of a child or young person during office hours telephone **01375 652802**

To make **URGENT** referrals **OUT OF OFFICE HOURS** telephone **01375 372468**

For all **NON-URGENT** referrals and enquiries telephone **01375 653548**

CHILD PROTECTION POLICY FOR CORRINGHAM PRIMARY SCHOOL –
(DFE Statutory Document - Keeping Children Safe in Education –
Effective from 05/09/2016)

Philosophy Statement

Corringham Primary School (CPS) is committed to safeguarding and promoting the welfare of children and young people and believes that every child has the right to be free from all forms of abuse from any person. The protection of the child takes precedence over our responsibility to the parents/carers. It is everyone's fundamental duty to protect every child and to prevent or stop abuse whenever possible by always being alert to and sensitively aware of the possible signs and symptoms of abuse and by sharing this information with relevant agencies.

The Local Governing Body and staff take seriously their obligations as detailed in the Children Act 2004 to work together with other professionals to improve the 'well-being' of children in their care with respect to

- physical and mental health
- protection from harm and neglect
- education training and recreation
- contribution to society
- emotion, social and economic well being

This school policy has been updated to meet the new requirements stated in the new statutory guidance for schools, 'Keeping Children Safe in Education', which took effect from 5th September 2016. A copy of this statutory document is also on our website.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550511/Keeping_children_safe_in_education.pdf

Aims

The governors, staff and volunteers of Corringham Primary School (CPS) are committed to

- acknowledging the right of every child to be free from abuse of any type from any person
- being aware of and alerted to the signs and symptoms of child abuse and to ensure that this information is shared with the appropriate agencies
- being aware of and alerted to the signs and symptoms of child radicalisation and to ensure that this information is shared with the appropriate agencies
- developing and implementing procedures for identifying and reporting cases, or suspected cases, of abuse and safeguarding and promoting the welfare of children
- ensuring we practice "Safer Recruitment" in checking the suitability of staff and volunteers to work with children

A DBS (Disclosing and Barring Service) check will always be an essential part of making a recruitment decision. DBS checks are conducted against personal

information relevant at the time of application. DBS checks are also checked at least every 3 years or sooner if required.

- raising awareness of child protection issues and equipping children with the skills needed to keep them safe
- supporting pupils who have been abused in accordance with the agreed child protection plan
- establishing a safe environment in which children can learn and develop and where they are encouraged to talk and are listened to
- ensuring that there are adults within the school who they can approach if they are worried or in difficulty
- including in the curriculum activities and opportunities for PHSE, which equip pupils with skills they need to stay safe from abuse
- ensuring that wherever possible every effort will be made to establish effective working relationships with parents/carers and colleagues from partner agencies

Roles and Responsibilities

All adults working with or on behalf of children have a responsibility to protect them. There are however key people within the school and Local Authority who have specific responsibilities under child protection procedures. The names of those carrying out these responsibilities are listed on the front page of this document

The Head Teacher at Corringham Primary School will:

- Ensure safeguarding policies and procedures are fully implemented and followed by all staff
- Provide adequate resources to ensure designated persons and other staff as needed, are able to attend strategy discussions, inter agency meetings, as well as contribute to assessments etc.
- Ensure that the designated safeguarding lead receives appropriate training and support every year
- Ensure all staff receive safeguarding training and updates at least annually and changes are communicated in a timely manner
- Ensure appropriate members of staff have received training on the use of Common Assessment Framework so young people receive appropriate support at an early stage
- Identify a deputy to take over above responsibilities in her absence
- Be responsible for receiving allegations against staff and volunteers, and for recording all allegations against staff and volunteer and for reporting to the Local Authority Designated Office (LADO) in order to ensure allegations are dealt with in an objective transparent way.
- Consult with the LADO responding to an allegation and be responsible for carrying out any actions agreed with the LADO and reporting on outcomes

Designated Safe Guarding Lead will:

The Designated Safeguarding Lead is Catherine Smith in her absence the Deputy Head Teacher Kelly Hamilton is the Designated Safeguarding Lead.

It is the role of the Designated Safeguarding Lead to ensure that all of the child protection procedures are followed within the school and to make appropriate timely referrals to Thurrock Social Care in accordance with school procedures.

If for any reason the Designated Safeguarding Lead is unavailable then the Deputy Designated Safeguarding lead will act in their absence, additionally it is the role of the Designated Safeguarding Lead to ensure that all staff employed including temporary staff and volunteers are aware of the school's internal procedures to advise staff and to offer support to those requiring this.

The Governors:

Governors will ensure appropriate safeguarding training for designated safeguarding leaders and a nominated governor is conducted.

The Governing Body and School Leadership Team are responsible for ensuring that the school follows safe recruitment processes including checks on people who have lived or worked outside the UK. As part of the school recruitment and vetting process, enhanced Disclosing and Barring Service (DBS) DFE List 99 and other statutory lists and local intelligence checks will be sought on all staff that have substantial and unsupervised access to children. The Teaching Services system will be used to carry out prohibition from teaching.

The role of the Nominated Governor for Safeguarding is to ensure that the School has an effective policy, that the SET SCB guidelines are complied with and to support the school in this aspect. Governors must not be given details relating to individual child protection cases or situations to ensure confidentiality is not breached. The Governing Body will be provided with an annual report detailing any changes to the policy and procedures; training undertaken by all staff and governors and any other relevant issues.

Responsibilities of teaching and non-teaching staff:

To undertake appropriate training in relation to safeguarding and promoting the welfare of children every year.

Be alert to signs of abuse or neglect and report IMMEDIATELY to the designated safeguarding lead.

To comply with the school's procedures on behaviour management, restraint and the staff codes of conduct.

The Whole School Community will:

Establish and maintain an ethos which enables all children to feel secure and encourage them to talk knowing they will be listened to and supported.

Ensure that through PSHE, Citizenship, and form activities, pupils will be encouraged to become more self-aware and develop a positive self-image; develop a greater understanding of relationships; become confident in recognising accepting and expressing their feelings.

Ensure all Children know there is an adult in the school whom they can approach if they are worried or in difficulty.

Provide children with opportunities to equip them with the knowledge and skills they will require to stay safe from harm and whom to turn to for help.

Be vigilant to indicators of abuse and refer to the designated members of staff (see appendix 4).

MONITORING THE EFFECTIVENESS OF THE POLICY

The implementation of the policy is monitored by the three designated safeguarding leads for child protection, and SLT. This will include:

- Regular reviews of paperwork
- Quality of staff training
- Feedback from staff training
- De briefing of staff who bring a disclosure to the named persons
- Feedback from families involved
- Any feedback from social services
- Any feedback from serious case reviews
- Outcomes from interventions by the designated leads
- Monitoring of PSHE, Citizenship, assemblies and form activities
- Data from departmental health checks

Evidence gathered through the monitoring process will evaluate the effectiveness of the policy.

Definition of Child Abuse

Neglect:

The persistent or severe neglect of a child, which results in serious impairment of the child's health or development, including failure to thrive.

Physical Abuse:

Physical injury to a child which is inflicted deliberately or knowingly not prevented.

Sexual Abuse:

The involvement of dependent developmentally immature children in sexual activities.

Emotional Abuse:

The severe effect on the behaviour and emotional development of a child caused by persistent or severe emotional ill treatment or rejection.

The Four main elements of our Child Protection Policy include:

1. Prevention

- Provide an environment in which children and young people feel safe, secure, valued and respected, feel confident and know how to approach adults if they are in difficulty
- Raise awareness of all staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse
- Ensure all adults within the school who have access to children have been rigorously checked as to their suitability using safe recruitment procedures

2. Protection

- Through close monitoring of children known or thought to be at risk of harm
- Through the establishment of structure procedure within the school which will be followed by all members of the school staff in cases of suspected child abuse.
- Through the development of effective working relationships with all other agencies involved in safeguarding children.

1. Support

- Ensuring key concepts of child protection are integrated within the curriculum via PSHE, citizenship, assemblies, and form time activities. We will also ensure that pupils' parents and carers are educated about risk associated with internet use and new technology.
- Ensuring all children are listened to and their concerns taken seriously and acted upon.
- Working with others, to support pupils who may have been abused, to access the curriculum and take part in school life.

2. Training

- All staff will receive training on how to recognise signs of abuse, to handle disclosure and the procedure to follow in the event of the above.
- All new staff and supply staff will be advised as to who the designated leads are.
- Appendices
 - i. Handling disclosures of abuse
 - ii. What can harm children?
 - iii. Who harms children?
 - iv. Who is at risk of harm?
 - v. Possible indicators of abuse
 - vi. Procedure

Signs and Symptoms of Child Abuse

The term “Child Abuse” encompasses all forms of ill-treatment or neglect of children by members of their family or any other person. Suspicion that a child is being abused can be aroused in many ways and staff should be alert at all time.

Staff should be alert to any injuries and always inquire as to how they were come by. Staff should be particularly alert when children are changing for Physical Education.

Suspicious may be aroused in many ways e.g.:

- Injuries inconsistent with the age and mobility of the child
- Injuries inconsistent with the explanation offered by child or adult
- Delay or failure by the responsible adult to seek medical attention
- An abnormally high incidence of minor injuries
- Frequent and/or patterns of absences from school with unsatisfactory explanations
- Failure to thrive or to develop normally
- Lethargy, tiredness, aggression or a sudden unexplained change in behaviour
- A cowering, wary or fearful attitude towards a parent or other adult
- Sexually inappropriate behaviour
- Genito-urinary infections which with other factors may be incompatible with normal sources of infection

This list is not exhaustive and any concerns that staff may have should be shared with the designated teacher. It is possible that several people have various parts of the “jigsaw” and the complete picture only becomes apparent when information is passed on.

Child Protection training for all staff is provided annually at the beginning of the academic year and as part of their initial induction.

Procedures

CPS will follow the procedures set out by the SET Child Protection Handbook **2015** <http://www.escb.co.uk/Professionals/InformationResources/SETChildProtectionProcedures.aspx> (online) and take account of guidance issued by the DCSF to:

- ensure we have a designated lead (senior member of SLT) for safeguarding who has received appropriate training and support for this role
- ensure we have a nominated governor responsible for safeguarding
- ensure every member of staff (including temporary and supply staff and volunteers) and governing body knows the name of the designated senior person responsible for safeguarding and their role
- ensure all staff and volunteers understand their responsibilities in being alert to the signs of

abuse and responsibility for referring any concerns to the designated senior person responsible for safeguarding

- ensure that regular training is provided for all staff members
- ensure that parents and carers have an understanding of the responsibility placed on the school and staff for child protection by setting out its obligations in the school prospectus
- notify social services if there is an unexplained absence of more than two days of a pupil who is on the child protection register
- develop effective links with relevant agencies and cooperate as required with their enquiries regarding child protection matters, including attendance at case conferences
- keep written records of concerns about children, even where there is no need to refer the matter immediately
- ensure all records are kept securely in filing cabinet in the Inclusion Office
- ensure that if a child transfers from the school these files will be copied for the new establishment and forwarded to the new school marked confidential and for the attention of the Designated Safeguarding Lead – evidence of receipt (e.g. signature) will be kept
- ensure safe recruitment practices are always followed
- Ensure that school shares the intention to refer the child to social care unless to do so could place the child at greater risk. On these occasions advice will be taken from Thurrock social care or Essex police

If abuse is suspected or a disclosure made then it is important not to promise that any information gained will not be passed on. It is also important not to suggest that you do not believe their story particularly where disclosure concerning sexual abuse is involved.

Inform the designated person immediately. Record the concern, including any dates and other relevant information on the concern sheet which can be found in Inclusion Office. If for any reason this is not possible then the Chair of the Governing Body of the School or the Thurrock Local Authority Designated Officer with responsibility for Child Protection can be contacted. It may also be appropriate to refer to the Bullying and Harassment Policy and Whistle Blowing Policy.

Dealing with Disclosure

- Listen to the child
- Try not to show any shock you might feel
- Stay calm and reassure the child that they have done the correct thing in telling you
- Don't make promises about what might happen next or about confidentiality
- Do not interrogate or ask leading questions
- Don't make judgements about the person/people the child refers to

- Explain what will happen next and who you will have to talk to
- Make brief notes and write them up afterwards keep both sets of notes
- Use diagrams to record any bruising or marks
- Be objective in your recording
- Be aware that any information shared between staff will be on a “need to know” basis only and must remain confidential

Designated Lead

The designated lead will

- follow up the referral using the referral sheet as a basis for consideration before action
- make additional records of discussions and any investigations that take place
- make a decision whether to continue to monitor the situation or take the referral further. This decision should be communicated to the individual making the initial referral
- where a child is referred to social care a referral form should be completed and sent within 24 hours

Supporting those who have been abused

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school their behaviour may be challenging and defiant or they may be withdrawn.

The school will endeavour to support the pupil through:

- the content of the curriculum: which should encourage self-esteem and self-motivation
- the school ethos which promotes a positive, supportive and secure environment and gives pupils a sense of being valued
- a commitment to develop productive supportive relationships with parents whenever it is in the child’s best interest to do so
- the school behaviour policy which is aimed at supporting vulnerable pupils in the school. The school will ensure that the pupil knows that some behaviour is unacceptable but they are valued and not to be blamed for any abuse which has occurred
- liaison with other agencies that support the pupil such as social services, Child and Adult Mental Health Service (CAHMS), education welfare service and educational psychology service
- ensuring that where a vulnerable pupil or a child on the Child Protection Register leaves the school, their information is transferred to the new school immediately and that the child’s social worker is informed

Safe School, Safe Staff

It is essential that the high standards of concern and professional responsibility adopted with regard to alleged child abuse by parents are similarly displayed when members of staff are accused of abuse

Only authorised agencies investigate child abuse allegations (Social care, the police or in some cases NSPCC) Whilst it is permissible to ask the child(ren) simple non leading questions to ascertain the facts of the allegation formal interviews and the taking of statements is not.

The procedure to be followed in the event of an allegation being made against a member of staff is set out in the SET handbook

The Headteacher or another senior manager should in the first instance contact the education Safeguarding Service, through discussion and consultation, a decision will be made as to whether to make a referral to Thurrock Social Care Service. Where the allegation is against the Head Teacher, the Chair of Governors will take this action.

If for any reason it is decided that referral is not appropriate it will be necessary to address matters in accordance with the school's disciplinary procedures.

Use of School Premises by other Organisations

Where services are provided separately by another body, using school premises the Governing Body will seek assurance that the body concerned has appropriate policies and procedures in place in regard to safeguarding children.

We also acknowledge that within the school community there will be adults who have been abused themselves and will endeavour to signpost them to access available support as appropriate.

Confidentiality

Staff cannot keep confidential a disclosure of abuse and should never promise the child that confidentiality. Matters must be passed on to the designated lead as soon as possible. There may be occasions when other staff may need to be alerted to concerns about individuals but this will be kept to a need to know basis. Parents and carers will be informed of any intentions to refer their child to Social services unless in so doing it puts the child at greater risk of harm.

Record keeping is an important element of the child protection process. These will be kept separate from main school files in a locked cabinet.

Referring staff will be asked to write up information relating to;

- the reason for concern
- what was said or witnessed
- dates and times of incidents

All subsequent records will be made by the designated person/persons

Specific safeguarding issues

1. All staff should have an awareness of safeguarding issues, some of which are listed below. Staff should be aware that behaviours linked to the likes of drug taking, alcohol abuse, truancy and sexting put children in danger.
2. All staff should be 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 cyber bullying), gender based violence/sexual assaults and sexting. Staff should be clear as to the school or college's policy and procedures with regards to peer on peer abuse.
3. 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 and colleges 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:
 - bullying including cyber bullying
 - children missing education – and Annex A
 - child missing from home or care
 - child sexual exploitation (CSE) – and Annex A
 - domestic violence
 - drugs
 - fabricated or induced illness
 - faith abuse
 - female genital mutilation (FGM) – and Annex A
 - forced marriage- and Annex A
 - gangs and youth violence
 - gender-based violence/violence against women and girls (VAWG)
 - hate
 - mental health
 - missing children and adults
 - private fostering
 - preventing radicalisation – and Annex A
 - relationship abuse
 - sexting
 - trafficking

Annex A contains important additional information about specific forms of abuse and safeguarding issues. School leaders and those staff who work directly with children should read the annex.

Safe use of Information Technology – Online Safety

The use of technology has become a significant component of many safeguarding issues. Child sexual exploitation; radicalisation; sexual predation: technology often provides the platform that facilitates harm. Some adults use it to establish contact with children with a view to grooming them for inappropriate relationships.

Our approach to online safety empowers our school to protect and educate the whole school community in their use of technology and we have established mechanisms to identify intervene in and escalate any incident where appropriate.

The breadth of issues classified within online safety is considerable, but can be categorised into three areas of risk:

- content: being exposed to illegal, inappropriate or harmful material;
- contact: being subjected to harmful online interaction with other users; and

- conduct: personal online behaviour that increases the likelihood of, or causes, harm.

Filters and monitoring

Our Governing body and proprietors do all that they reasonably can to limit children's exposure to the above risks from the school's IT system. The school ensures appropriate filters and monitoring systems are in place to protect pupils from inappropriate and harmful online material. We have referenced our policy to The UK Safer Internet Guidance.

At Corringham Primary School we aim to ensure positive use of IT which models safe and effective practice.

Taking and Storing Photos and Films - (Mobile Technology)

The Digital and Video Image Policy will aim to ensure safer and appropriate use of cameras and images through agreed acceptable use procedures. This is to be in line with legislative requirements and will aim to respect the rights of all individuals.

It has to be recognised however, that digital technology has increased the potential for cameras and images to be misused and inevitably there will be concerns about the risks to which children and young people may be exposed.

We recognise that having the right policies and practices in place will also protect school staff from misunderstanding, false accusations and damage to reputation around the use of digital images.

Sexual Activity

A child under 13 is not legally capable of consenting to sexual activity.

Any offence under the Sexual Offences Act 2003 involving a child under 13 is very serious and will be taken as an indicator of risk of harm to the child. All information which comes to the attention of staff must be discussed with the designated person.

Any penetrative sex with a child under 13 will be referred to Social Care.

Any cases of pupils over 13 will be referred to Social Services for them to decide if the child is at risk.

Staff Conduct

Adults working in schools are placed in privileged relationships with children. In order to ensure that such relationships cannot be (or be seen to be) abused, staff follow the following guidelines:

- Staff should not have the personal details of any child or parent stored in their mobile telephone or computer contacts list
- Staff should not have pupils listed as "friends" or "contacts" on any on line social networking or messaging site

Should any ex pupils attempt to continue their relationship after they have left CPS e.g. an ex pupil writes or emails a member of staff then the staff member must inform the Head Teacher. It is safest and therefore only appropriate to have contact with ex pupils if they visit on site at school. If in doubt consult with the Head Teacher and always err on the side of caution. Failure to follow this advice could result in disciplinary action.

Allegations against staff

- All school staff will take care not to place themselves in a vulnerable position with a child. Work with individual children or meetings with parents will be conducted in view of other adults as far as practicable
- All staff will be made aware of the code of conduct and professional boundaries
- If an allegation is made by a pupil against a member of staff the member of staff receiving the allegation will immediately inform the Head Teacher or Deputy in her absence
- The Headteacher or Deputy will, on all occasions discuss the content of the allegation with the Local Authority Designated Officer (LADO) before discussing the details with the member of staff concerned
- If the allegation is made about the Headteacher the person receiving the allegation will immediately inform the Chair of Governors who will consult LADO without notifying the Head Teacher.

Attendance at Child Protection Conferences and Core Groups

It is the responsibility of the Designated Safeguarding Lead to ensure that the school is represented or a report submitted to any Child Protection conferences called for children on roll or previously known to them. Whoever attends will be fully briefed on any issues or concerns the school has and be prepared to make decisions on registration at the end of the conference.

When a child is placed on the child protection register and is, therefore a child with a plan, it is the designated safeguarding lead's responsibility to ensure that the child is monitored regarding their school attendance, welfare and presentation. If the school are part of the core group then the child protection coordinator should ensure that the school is represented at these meetings; that there is a record of attendance and issues discussed. All concerns about the child protection plan/and or the child's welfare should be discussed and recorded at the core group meeting unless the child is at further risk of significant harm. In this case the child protection coordinator must inform the child's key worker immediately and then record they have done so and actions agreed.

ACCESS TO RECORDS

The Access to Health Records Act gives individuals the right to access to health information recorded in individual records. The Act gives 4 cases where access is not to be given to the whole of the case record:

- Where, in the opinion of the holder of the record, giving access would disclose information likely to cause serious harm to the physical or mental health of the patient or of any other individual
- Where giving access would, in the opinion of the holder of the record, disclose information relating to or provided by an individual other than the patient who could be identified from that information
- Where the relevant part of a health record was made before commencement of the Act in November, 1991

- Where the child is of sufficient age and understanding they may wish the parents not to see their records

Appropriate further action will vary according to the circumstances and nature of the situation. It can range from the immediate involvement of the Social Services Department, or the Police or NSPCC.

CHILD PROTECTION REGISTER

The register is usually maintained and run by the Social Service Department. The nominated teacher will have information on pupils in this category.

A central record is kept of children in an area for whom support is being provided via inter-agency protection planning. Generally these children are considered to be 'At Risk' of abuse or neglect.

Corringham Primary School has a role in preventing abuse, not only adopting sound policies and procedures on the management of a situation where there is suspected abuse, but also through the curriculum. Pupils can be made aware of appropriate information, skills and attitudes both to resist abuse in their own lives and to prepare them for the responsibilities of their adult lives including parenthood.

APPENDIX 1 – HANDLING DISCLOSURES OF ABUSE

IN OTHER SITUATIONS WHERE CHILD ABUSE IS SUSPECTED:

Actions of Nominated Staff

Make a careful note of the injuries or circumstances, which cause concern.

Ask the child to describe how the injury happened and make a careful note of the explanation. At this stage all that is needed is sufficient information to ascertain whether or not there is concern. Care should be taken to avoid contaminating evidence by leading the child or discussing the incidents in too great a depth.

Ask the parent or carer, if present, to describe how the injury occurred gaining sufficient information to ascertain whether or not there is concern and make a careful note of the explanation. Again care should be taken not to avoid contaminating evidence by not discussing the incidents in too great a depth.

Inform the carer if present of your concern and the action that you may be taking.

Discuss with senior colleagues where possible and appropriate.

Keep Head Teacher informed where possible and appropriate in case a crisis team response is needed.

Ensure that you have all appropriate information like telephone numbers, addresses, dates of birth, names and relationships of family member and then contact the duty Social Worker with the referral and information as to whether or not the parents have been informed.

All information must be recorded in writing within 24 hours. A report of the referral should be completed and sent to Social Services with 24 hours.

WHEN SEXUAL ABUSE IS ALLEGED OR SUSPECTED

Action of Nominated Staff

The person to whom the child first confides an allegation of sexual abuse needs to handle that confidence with tact and sympathy, asking sufficient questions to confirm that there is an allegation of a sexual nature but avoiding any cross-examination or detailed examination of the child. Care should be taken to avoid contaminating evidence by leading the child or discussing the incidents in too great a depth. It may well be advisable to have another member of staff present.

Listen carefully to the child.

Discuss with senior colleagues where possible and appropriate.

Keep Headteacher informed where possible and appropriate in case a crisis team response is needed.

Ensure that you have all appropriate information like telephone numbers, addresses, dates of birth, names and relationships of family member and then contact the duty Social Worker with the referral and information as to whether or not the parents have been informed. All information should be recorded in writing within 24 hours. A report of the referral should be completed and sent to Social Services within 24 hours.

N.B. There are less likely to be physical manifestations in sexual abuse and the child's account of what has happened assumes a greater importance. If the child is being abused by a member of their family, he or she may be under great pressure not to tell, and it is not always possible to be as open with parents initially as one would be when investigating other forms of abuse.

Always record and date all information – both factual and non-factual – making clear which it is as soon as possible. Maintain confidentiality. This information must be stored in the child's confidential record.

Procedures are in place to cover the following:-

- Bullying, including on-line bullying and prejudice based bullying.
- Racist, disability and homophobic or transphobic abuse.
- Gender based violence/violence against girls.
- Radicalisation and or extremist behaviour.
- Child sexual Exploitation and trafficking (private fostering).
- Sexting – impact of new technologies.
- Domestic Violence.
- Substance misuse.
- Gang activity and youth violence.
- Fabricated or Induced Illness.
- Poor Parenting. (To include babies and young children).

APPENDIX 2 – WHAT CAN HARM CHILDREN

Child abuse can take many forms, but they are usually divided into four categories:

- Physical Abuse
- Neglect
- Sexual Abuse
- Emotional Abuse

PHYSICAL ABUSE

Can range from over-chastisement, slapping with the hand, a belt, a stick or other object, to shaking, punching or throwing a child across the room. Children have died as a result of deliberate physical injury by parents or other “carers”. This may also take the form of induced or fabricated illness (Munchausen’s Syndrome by Proxy).

NEGLECT

Can range from ignoring a child’s development needs to not feeding or clothing her/him adequately and/or not supervising her/him adequately.

SEXUAL ABUSE

Is the involvement of a child or adolescent in sexual activities they may not understand, to which they cannot give consent and which are not acceptable by our society. This includes inappropriate touching, obscene photographs, child pornography as well as attempted or actual sexual intercourse.

EMOTIONAL ABUSE

May include rejecting a child, refusing to show a child love or affection, or deliberately making a child unhappy by continually belittling her/him or verbally abusing her/him.

Although divided into four categories for ease of description, the forms of abuse are often found together.

For the purposes of this policy the four commonly accepted headings outlined above will be used and dealt with separately for ease of reference and understanding.

There is now one single act of Parliament dealing with the welfare of children. The Children Act 1989 which does not use the concept of abuse at all, but introduces a new concept, that of **“SIGNIFICANT HARM”**.

This acknowledges that few of us get through childhood without suffering some harm and that parents are not “perfect!” The question to be considered for any child is how significant the harm may be and how reasonable is the parenting. The Act is looking for good enough parenting to keep children in their families.

APPENDIX 3 – WHO HARMS CHILDREN

Abusers come from all walks of life. They can be

- male or female
- come from all classes, races and religions
- often, someone the child knows well, e.g. a relative, step-parent or family friend
- children or adolescents
- able bodied or disabled
- people who work with children

Very little abuse is caused by strangers, but a stranger can quickly become a friend to a child and their family.

APPENDIX 4 – WHO IS AT RISK OF HARM

Children of all ages can be abused, irrespective of their gender, race, culture, language, religion or ability and whether or not living with their natural parent(s). Establishing the degree of risk will be dependent on various factors, e.g. the child's age, degree of vulnerability, method of communication, children who experience racism or discrimination in their communities and our own ability to understand.

A child who has a physical or learning disability may be more vulnerable than one who does not.

A baby not being fed is more vulnerable than a teenager in the same circumstances.

Children who are lonely or deprived of affection or often left unsupervised may be more vulnerable than others.

In many cases you will have to pick up the clues from the child's behaviour, or from the signs you see on the child's body.

There will be some cases which the child does not exhibit any signs or symptoms but concerns arise from other sources e.g. contact with a known abuser or another child who has been abused.

APPENDIX 5 – POSSIBLE INDICATORS OF ABUSE

A) PHYSICAL ABUSE

Recognition

Children are remarkably resilient and normal everyday scrapes and falls usually result in little bruising or other injury. We normally expect to see bruises on the bony protuberances e.g. foreheads, knees and shins, not on the softer fleshy parts of the body (see attached skin map). Nevertheless children do often acquire bruises in odd places! We should always ask how bruises, burns, scars and bites have occurred – and consider whether the explanation seems to fit the injury. The attitude of child and parent is also significant. Is the child's own demeanour causing us concern? Considerable force is required to cause actual bruising and is not an acceptable form of chastisement.

While a situation may not seem initially to be serious, it is worth remembering that providing prompt help to a family under stress may prevent minor abuse escalating into something more serious.

Non-Accidental injuries

The following is not a comprehensive or definitive list, but it does provide a guide to the more common non-accidental injuries and, taken in conjunction with the skin map, indicates situations in which more expert advice should be sought.

Clusters of signs may be more important than any one sign on its own. Much depends on whether the right questions are asked in order to make sense of what is seen. Any injury which the child, parent or carer tries to hide or gives several different explanations for; or give an unlikely explanation for, should raise concerns.

Bruises

Symmetrical bruised eyes are rarely accidental, although they may occur where there is a fracture of the head or nose and blood seeps from the injury site to settle in the loose tissue around the eye. A single bruised eye may be the result of an accident – or abuse. Careful consideration is required whenever there is an injury around the eye. It should be noted whether the lids are swollen and tender and if there is damage to the eye tissue.

- Bruising in or around the mouth (especially in small babies)
- Grasp marks on arms – or chest of a small child
- Finger marks (e.g. you may see 3 – 4 small bruises on one side of the face and one on the other).
- Symmetrical bruising (especially on the ears)
- Outline bruising (e.g. belt marks, hand prints)
- Linear bruising (particularly on the buttocks or back)
- Bruising on soft tissue with no obvious explanation.

- Different age bruising (especially in same area e.g. buttocks)

N.B.

1. Most falls or accidents produce one bruise on a single surface – usually on a bony protuberance. A child who falls downstairs generally has only one or two bruises. Bruising in accidents is usually on the front of the body as children generally fall forwards. In addition, there may be marks on their hands if they have tried to break their fall.
2. Mongolian blue spots may be mistaken for bruising. These are purplish-blue skin markings most commonly on the back of black children. These marks do not change colour as do bruises which on all children change from purple to yellow over a few days.
3. The following are uncommon sites for accidental bruising:
 - back of legs, buttocks (except occasionally along the bony protuberance of the spine)
 - mouth, cheeks, behind the ear
 - stomach, chest
 - under the arm
 - genital, rectal area
 - neck

Bites

These can leave clear impressions of the teeth. Human bites are oval or crescent shaped. If the distance is more than 3 cm across, they **must** have been caused by an adult or older child with permanent teeth.

Burns/Scalds

It can be very difficult to distinguish between accidental and non-accidental burns, but as a general rule of thumb, burns or scalds with clear outlines are suspicious as are burns of uniform depth over a larger area and also splash marks above the main burn area (caused by hot liquid being thrown).

Remember also

A responsible adult:

- checks the temperature of the bath before a child gets in
- a child is unlikely to sit down voluntarily in too hot a bath and cannot accidentally scald its bottom without also scalding its feet
- a child getting into too hot water of its own accord will struggle to get out again and there will be splash marks
- small round burns may be cigarette burns (but may be friction burns, and accidental, if along the bony protuberances of the spine)

Scars

Children may have scars, but notice should be taken of an exceptionally large number of differing age scars (especially if coupled with current bruising), unusual shaped scars (e.g. round ones from possible cigarette burns), or of large scars that are from burns or lacerations that did not receive medical treatment.

Fractures

These should be suspected if there is pain, swelling and discoloration over a bone or joint. The most common non-accidental fractures are to the long bones in arms, legs and ribs. It is very rare for a child under one year to sustain a fracture accidentally. Fractures also cause pain, and it is difficult for a parent to be unaware that a child has been hurt.

SUMMARY

There can never be a definitive list of indicators of physical abuse but we can, safely say that the following are causes for concern. The indicators can be divided into physical and behavioural indicators:

POSSIBLE PHYSICAL INDICATORS

Unexplained Bruises, Welts, Lacerations, Abrasions

- on face, lips, mouth
- on torso, back, buttocks, thighs
- in various stages of healing
- clustering forming regular patterns
- reflecting shape of article used, e.g. belt, buckle, electrical flex
- on several different surface areas
- regularly appear after absence, weekend, or holiday
- bite marks or fingernail marks

Unexplained Burns:

- Cigar, cigarette burns especially on soles of feet, buttocks, palms or back
- "immersion" burns, where hands feet or body have been forcibly immersed in very hot water
- patterned like electrical burner, iron, etc.
- rope burns on arms, legs, neck or torso

Unexplained Fractures:

- to skull, nose, facial structure
- in various stages of healing

- multiple or spiral fractures

POSSIBLE BEHAVIOURAL INDICATORS

- Flinching when approached or touched
- Reluctance to change clothes for PE lessons
- Wary of adult contacts
- Difficult to comfort
- Apprehension when other children cry
- Crying/irritable
- Frightened of parents, carers
- Afraid to go home
- Rebelliousness in adolescence
- Behavioural extremes – aggressiveness – withdrawal – impulsiveness
- Regresses to child-like, behaviour
- Apathy
- Depression

B) NEGLECT

Children need to be fed, clothed, kept from physical harm and moral danger, and most of all they need a loving and stimulating home.

Parents/carers can neglect any or all of a child's needs. Long-term damage to health or development may result from neglect and children may be injured or killed if they are not adequately supervised. If they are not loved or valued then they grow up not loving or valuing themselves or others.

We should be concerned about the child who:

- is regularly hungry and steals food from other children
- is always dirty, whose underwear is never changed or always has dirty nappies
- wears inappropriate clothing, e.g. summer clothes in the middle of winter
- has parents/carers who regularly forget to pick her or him up from day-care school
- has parents carers who regularly fail to take her or him for important medical or educational appointments

SUMMARY

Neglect is not always easy to recognise, but the following may give cause for concern when considered in relation to the age of the child:

- constant hunger
- poor hygiene
- inappropriate dress
- consistent lack of supervision, especially in dangerous activities, or for long periods
- unattended physical problems or medical needs
- abandonment
- weight problems
- stealing food
- constant fatigue, listlessness
- problems in relationship with care-giver
- regularly not collected on time from playgroup or school

C) SEXUAL ABUSE

Sexual abuse is more common than generally believed. Whilst there is currently no research data available which conclusively proves that disabled children are abused more than non-disabled children, existing studies do show that, contrary to popular belief, children with disabilities are abused.

Some sexually abused children will tell of the abuse readily, but some deny it, perhaps for a considerable period. They can have good reason not to tell, including feeling shame, guilt, fear of the consequences or because they have been sworn to secrecy or threatened. For children with communication difficulties, 'telling' is not always possible without help.

Children can accommodate and adjust their lives to being abused but there is a sense of being abandoned, helpless and entrapped by the inability to escape their abuse. Their feeling of trust in people is damaged or destroyed, and further undermined if they have tried to tell and not been heard.

You should be concerned for a child who:

- is sore or bleeding in the genital or anal area. Such children often refuse to be undressed or are reluctant to go to the toilet.
- knows a lot more about sex than she/he should for her/his age and who plays in a sexualised way. Children under five usually know nothing about sex. They may look at each others' private parts but that is all they do.

- says that someone has done something bad to them and that it is a secret.
- has regressed in her/his developmental milestones and has started wetting the bed or soiling when they used to be clean.
- is withdrawn or has wide mood swings, sometimes running around madly, sometimes crying a lot for no reason or running away from home.
- suffers night terrors sleep disturbances.

SUMMARY

The signs of sexual abuse are not always apparent, are very varied and can often be linked with the other forms of abuse.

The following list is only a guide and cannot be relied on as exhaustive. They too can be subdivided into two groups.

POSSIBLE PHYSICAL INDICATORS

- Difficulty in walking, sitting down
- Stained or bloody underclothing
- Pain or itching in genital area
- Bruising, bleeding, injury to external genitalia, vaginal and or anal areas
- Vaginal discharge
- Bed-wetting
- Excessive crying
- Sickness
- Pregnancy

POSSIBLE BEHAVIOURAL INDICATORS

- Bizarre, sophisticated or age inappropriate sexual behaviour or knowledge
- Promiscuity
- Sudden changes in behaviour
- Running away from home
- Wary of adults
- Feeling different from other children

- Unusual avoidance of touch
- Reporting of assault
- Substance abuse (e.g. glue sniffing)
- Emotional withdrawal through lack of trust in adults
- Over-compliance with requests of others
- Frequent complaints of unexplained abdominal pains
- Eating problems
- Sleep disturbances
- Poor peer relationships
- Possessing money or “gifts” that cannot be adequately accounted for
- Panics in response to pain

D) EMOTIONAL ABUSE

Emotional abuse causes damage to emotions and feelings, and because it is difficult to measure, it is the most difficult form of abuse to prove. Children need to be loved and nurtured so they can learn how to care and give affection. They also need to be controlled and supervised so they can learn self-control.

Parents/carers can emotionally abuse children by being cold and unloving and not giving or returning love and affection. They may show an active dislike of a child by being rude and unpleasant all the time, being negative, and always complaining instead of praising. Equally, they can be inconsistent by being loving one day and very unpleasant the next. Often one child in the family becomes the scapegoat or focus of family unpleasantness.

Emotional abuse damages the emotional growth of the child and in some cases it also damages physical growth. It might be evident in a child who is:

- not growing or putting on weight
- timid and withdrawn
- over-demanding or showing mood swings, sometimes running round madly and or sometimes crying a lot for no reason

SUMMARY

The signs of emotional abuse are probably the hardest to link to actual abuse as there may be other factors affecting the child's behavioural or physical development. However, we have compiled a list of the main indicators:

POSSIBLE PHYSICAL INDICATORS

- Failure to thrive
- Delays in physical development or progress

POSSIBLE BEHAVIOURAL INDICATORS

Behavioural disturbances such as:

- Sucking, biting, rocking
- Anti-social, destructive
- Sleep disorders, inhibition of play
- Compliant, passive, aggressive, demanding
- Impairment of intellectual, emotional, social or behavioural development
- Behaviour which seems to be too grown up or too **young** for the age and stage of development of the child

CONCLUSION

There is **NO** absolute list of indicators. Indications that abuse has occurred may come from other factors such as a child's paintings or drawings, or the presence of pornographic and or violent

videos or literature. The carer's or abuser's behaviour can also give cause for concern, such as excessive touching, intimidating manner to the child, lack of parental warmth, etc.

Of course several of the indicators we have listed, taken on their own, do not mean that abuse must have occurred, and further evidence in such cases would normally be required. The indicators should be viewed as features which are usually present in cases of child abuse. They do not necessarily mean that child abuse has taken place indeed; some of the cases we have used support this view.

It is important, however that if you do recognise signs and symptoms of abuse and you are concerned about the child, you should do something about it.

APPENDIX 6 – PROCEDURES

REFERRAL

Social Services, NSPCC and the Police have powers to initiate action to protect children who are thought to be at risk of significant harm.

Referrals must be directed to Social Services without delay, but the following questions should be considered

- Does the child need immediate medical attention? If so, call an ambulance and then inform Social Services/Police.
- Does the child need immediate protection? If so, call the Police and then inform Social Services.

Generally professionals should seek to discuss any concerns with the family and where possible seek their agreement to making referrals to Social Services. However such discussions should occur only where this will not place the child at increased risk of significant harm. If in any doubt seek advice from Social Services.

Referrals should be directed to the Social Services Adolescent Team. If you know there is an allocated social worker, contact her/him directly.

PRINCIPLES OF PARTNERSHIP

1. Treat all family members as you would wish to be treated, with dignity and respect.
2. Ensure that family members know that the child's safety and welfare must be given first priority, but that each of them has a right to a courteous, caring and a professionally competent service.
3. Take care not to infringe privacy any more than is necessary to safeguard the welfare of the child.
4. Be clear with yourself and with family members about your power to intervene, and the purpose of your professional involvement at each stage.
5. Be aware of the effects on family members of the power you have as a professional, and the impact and implications of what you say and do.
6. Respect the confidentiality of family members and your observations about them, unless they give permission for information to be passed to others or it is essential to do so to protect the child.
7. Listen to the concerns of children and their families, and take care to learn about their understanding, fears and wishes before arriving at your own explanations and plans.
8. Learn about and consider children within their family relationships and communities, including their cultural and religious contexts, and their place within their own families.

9. Consider the strengths and potential of family members, as well as their weaknesses, problems and limitations.
10. Ensure children, families and other carers know their responsibility and rights, including any right to services, and their right to refuse services, and any consequences of doing so.
11. Use plain, jargon-free language appropriate to the age and culture of each person. Explain unavoidable technical and professional terms.
12. Be open and honest about your concerns and responsibilities, plans and limitations, without being defensive.
13. Allow children and families time to take in and understand concerns and processes. A balance needs to be found between appropriate speed and the needs of people who may need extra time in which to communicate.
14. Take care to distinguish between personal feelings, values, prejudices and beliefs, and professional roles and responsibilities, and ensure that you have a good supervision to check that you are doing so.
15. If a mistake or misinterpretation has been made, or you are unable to keep to an agreement provide an explanation. Always acknowledge any distress experienced by adults and children and do all you can to keep it to a minimum.

DO'S AND DON'TS

DO'S:

- The child's welfare and interests must be paramount, taking precedent over all other considerations
- If a child discloses abuse to you always acknowledge how difficult and painful it must have been for them to do so
- Tell and show the child that you are taking them seriously
- Always think before you act, keep an open mind and take an objective view of the situation
- Consider the long term future of the child and not necessarily the option which is least painful for you
- If you belong to an organisation which has child protection procedures, make sure you are familiar with them

DON'TS:

- Taking inappropriate action could put a child at further risk
- Ignore the child's race, gender, culture, ability
- Don't make any promises to the child that you cannot keep
- Do not take sole responsibility if you are concerned, consult with other professionals

Responded by:

Action taken:

Outcome:

Signed _____

Date _____

Open

Closed

Date:

This form must be printed on BLUE paper



Responded by:

Action taken:

Outcome:

Signed _____

Date _____

Open **Closed** **Date:**



Referral to Learning Support Team

Pupil's Name		
Class		
LSP		Y/N
SEN register		Y/N
If Yes: SA / SA+ / Statement		
Any specific needs? Please attach LSP		
Attendance records. Please attach reg. certificate		
Attainment data. Please attach individual pupil sheet		
Reason for referral:		
Any previous strategies used which were effective:		
Any previous strategies used which were not effective and why:		
Recommendation after Assessment		
Assessor signature		

Signed: _____ Date: _____

Name: _____

Annex A: Further information – (From Keeping children safe in education document)

Further information on a child missing from 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 that 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. 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.

Private Fostering

A private fostering arrangement is one that is made privately (without the involvement of the Local Authority) for the care of a child under 16 year (under 18 if disabled) by someone other than a parent or close relative in their own home, with the intention that it should last for 28 days or more.

Whilst most privately fostered children are appropriately supported and looked after they are a potentially vulnerable group who should be monitored by the local authority particularly if they have come from another country. In some cases they may be affected by abuse, neglect or be involved in trafficking or child sexual exploitation.

Relevant staff are aware that the school has a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to private fostering arrangements. Concerns will be reported to the DSL with responsibility for Children who are Looked After (CLA) who will investigate and notify the local authority if required. On admission to the school we will take steps to verify the relationship of the adults to the child who is being registered.

Schools

The law requires all schools to have an admission register and, with the exception of schools where all pupils are boarders, an attendance register. All pupils must be placed on both registers. Schools must place pupils on the admission register at the beginning of the first day on which the school has agreed, or been notified, that the pupil will attend the school. If a pupil fails to attend on the agreed or notified date, the school should consider notifying the local authority at the earliest opportunity to prevent the child from going missing from education.

It is important that the admission register is accurate and kept up to date. Schools should regularly encourage parents to inform them of any changes whenever they occur. This can assist the school and local authority when making enquiries to locate children missing education.

Schools should monitor attendance and address it when it is poor or irregular. All schools must inform the local authority of any pupil who fails to attend school regularly, or has 52 for a continuous period of 10 school days or more, at such intervals as are agreed between the school and the local authority.⁵³

- the full name of the pupil;
- the full name and address of any parent with whom the pupil lives;
- at least one telephone number of the parent with whom the pupil lives;
- the full name and address of the parent with whom the pupil is going to live, and the date the pupil is expected to start living there, if applicable;
- the name of pupil's destination school and the pupil's expected start date there, if applicable; and
- the ground in regulation 8 under which the pupil's name is to be deleted from the admission register.

Schools and local authorities should work together to agree on methods of making returns. When making returns, the school should highlight to the local authority where they have been unable to obtain the necessary information from the parent, for example in cases where the child's destination school or address is unknown. Schools should also consider whether it is appropriate to highlight any contextual information of a vulnerable child who is missing education, such as any safeguarding concerns.

It is essential that schools comply with these duties, so that local authorities can, as part of their duty to identify children of compulsory school age who are missing education, follow up with any child who might be at risk of not receiving an education and who might be at risk of being harmed, exploited or radicalised.

The department provides a secure internet system – school2school – to allow schools to transfer pupil information to another school when the child moves. All local authority maintained schools are required, when a pupil ceases to be registered at their school and becomes a registered pupil at another school in England or Wales, to send a Common Transfer File (CTF) to the new school. Academies (including free schools) are also strongly encouraged to send CTFs when a pupil leaves to attend another school. Independent schools can be given access to school2school by the department.

The school2school website also contains a searchable area, commonly referred to as the ‘Lost Pupil Database’, where schools can upload CTFs of pupils who have left but their destination or next school is unknown or the child has moved abroad or transferred to a non-maintained school. If a pupil arrives in a school and the previous school is unknown, schools should contact their local authority who will be able to search the database.

Further information on child sexual exploitation

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation does not always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point. Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions;
- Children who associate with other young people involved in exploitation;
- Children who have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant;
- Children who suffer from changes in emotional well-being;
- Children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late; and
- Children who regularly miss school or education or do not take part in education.

Further information on so-called ‘honour based’ violence

So-called ‘honour-based’ violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the designated safeguarding lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

Indicators

There are a range of potential indicators that a child may be at risk of HBV. Guidance on the warning signs that FGM or forced marriage may be about to take place, or may have already taken place, can be found on pages 38-41 of the Multi agency statutory guidance on FGM (pages 59-61 focus on the role of schools and colleges) and pages 13-14 of the Multi-agency guidelines: Handling case of forced marriage.

Actions

If staff have a concern regarding a child that might be at risk of HBV, they should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children’s social care.

Further information on preventing radicalisation

Protecting children from the risk of radicalisation should be seen as part of schools’ and colleges’ wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation it is possible to intervene to prevent vulnerable people being radicalised.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism.

As with other safeguarding risks, staff should be alert to changes in children’s behaviour which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme.

Prevent

From 1 July 2015, specified authorities, including all schools (and, since 18 September 2015, all colleges) as defined in the summary of this guidance, are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015 (the CTSA 2015), in the exercise of their functions, to have “due regard Revised Prevent duty guidance: for England and Wales are specifically concerned with schools (but also cover childcare). The guidance is set out in terms of four general themes: Risk assessment, working in partnership, staff training, and IT policies.

- Schools are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology.
- The Prevent duty builds on existing local partnership arrangements. For example, governing bodies and proprietors of all schools should ensure that their safeguarding arrangements take into account the policies and procedures of the

Local Safeguarding Children Board. Effective engagement with parents / the family should also be considered as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms. Schools should also discuss any concerns in relation to possible radicalisation with a child's parents in line with the individual school's safeguarding policies and procedures unless they have specific reason to believe that to do so would put the child at risk.

- The Prevent 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. Individual schools are best placed to assess the training needs of staff in the light of their assessment of the risk to pupils at the school of being drawn into terrorism. As a minimum, however, schools should ensure that the designated safeguarding lead undertakes Prevent awareness training and is able to provide advice and support to staff on protecting children from the risk of radicalisation.
- Schools should ensure that children are safe from terrorist and extremist material when accessing the internet in schools.

Extremism and Anti-Radicalisation

Protecting children from the risk of radicalisation is part of the school's wide safeguarding duties

Staff should be alert to changes in pupil's behaviour which could indicate that they may be in need of help or protection.

Staff will use their judgement to identify children who may be at risk of radicalisation and act appropriately, this may include a referral to the Channel Panel (a service used where a vulnerable child is at risk of being involved in terrorist activities).

Indicators of Radicalisation or Extremism

Recognising Extremism

Early Indicators of radicalisation and extremism may include:

- Showing sympathy for extremist causes
- Glorifying violence, especially to other faiths and cultures
- Making remarks or comments about being at extremist events or rallies outside school.
- Evidence of possessing illegal or extremist literature
- Advocating messages similar to illegal organisations or other extremist groups
- Out of character changes in dress, behaviour and peer relationships (but there are also very powerful narratives, programmes and networks that young people can come across online so involvement with particular groups may not be apparent).
- Secretive behaviour.
- On line searches or sharing extremist messages or social profiles.
- Intolerance of difference, including faith, culture, gender, race or sexuality.
- Graffiti, art work or writing that displays extremist themes.
- Attempts to impose extremist views or practices on others.
- Verbalising anti-Western or anti British views

The department has also published advice for schools on the Prevent duty. The advice is intended to complement the Prevent guidance and signposts other sources of advice and support.

There is additional guidance: Prevent duty guidance: for further education institutions in England and Wales that applies to colleges.

The Government has launched educate against hate, a website designed to equip school and college leaders, teachers and parents with the information, tools and resources they need to recognise and address extremism and radicalisation in young people. The website provides information on training resources for teachers, staff and school and college leaders, such as Prevent e-learning, via the Prevent Training catalogue

Female Genital Mutilation (FGM)

Female Genital Mutilation refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. This practice is illegal in the UK.

All staff are aware that the Serious Crime Act 2015 sets out a duty on professionals (including teachers) to notify police when they discover that FGM appears to have been carried out on a girl under 18.

Teachers must personally report to the police (via the school's Designated Safeguarding lead) cases where they discover that an act of FGM appears to have been carried out.

Signs and Symptoms of Female genital Mutilation (FGM)

FGM typically takes place between birth and around 15 years of age however, it is believed that the majority of cases happen between the ages of 5 and 8.

Risk factors for FGM include:

- Low level of integration into UK society.
- Mother or a sister who has undergone FGM.
- Visiting female elder from the country of origin.
- Being taken on a long holiday to the country of origin.
- Talk about a special procedure to become a woman.

Indications that FGM may have already taken place may include:

- Difficulty walking, sitting or standing and may even look uncomfortable.
- Spending longer than normal in the bathroom or toilet due to difficulties urinating.
- Spending long periods of time away from the classroom during the day with bladder or menstrual problems.
- Frequent urinary, menstrual or stomach problems.
- Prolonged or repeated absences from school, especially with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return.
- Reluctant to undergo normal medical examinations
- Confiding in a professional without being explicit about the problem due to embarrassment or fear
- Talking about pain or discomfort between the legs.

Breast Ironing

This is where young pubescent girls' breasts are ironed, massaged and/or pounded down through the use of hard or heated objects in order for the breasts to disappear or delay the development of the breasts entirely. The custom uses large stones, a hammer or spatulas that have been heated over scorching coals to compress the breast tissue, or an elastic belt to press the breasts so as to prevent them from growing in girls as young as 9 years old. Much like Female Genital Mutilation (FGM), breast-ironing has been identified by the UN as one of five under-reported crimes relating to female-to-female/gender-based violence.

The practice is performed usually by mothers and female relatives and it is believed that by carrying out this act:

- young girls will be protected from harassment, rape, abduction
- it will prevent early pregnancy that would tarnish the family name
- it will allow the girl to pursue education rather than be forced into early marriage
- it will delay pregnancy by "removing" signs of puberty
- girls may not appear sexually attractive to men

Most at risk: Young pubescent girls usually aged between 9 – 15 years old.

Legislation

The key legislation upon which this policy is formed is:

Children Act 2004

Keeping Children Safe in Education: Statutory Guidance for schools and colleges (September 2016) – This document is available on the school website in the policies section and is also linked to the policy.

https://www.org.gov.uk/government/uploads/system/attachment_data/file/550511/Keeping_children_safe_in_education.pdf

Keeping Children Safe in Education: Part 1 – Information for all school and college staff (September 2016)

http://dera.ioe.ac.uk/27165/1/Keeping_children_safe_in_education_Part_1.pdf

Every member of staff has a copy of this document

Working Together to Safeguard Children: A guide to inter- agency working to safeguard and promote the welfare of children (March 2015)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf

The Prevent Duty: Department Advice for schools and childcare providers (June 2015)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/439598/prevent-duty-department-advice-v6.pdf

Mandatory Reporting of Female Genital Mutilation – Procedural Information (October 2015)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/469448/FGM-Mandatory-Reporting-procedural-info-FINAL.pdf

Guidance – Female Genital Mutilation: Resource (May 2016)

<https://www.gov.uk/government/publications/female-genital-mutilation-resource-pack/female-genital-mutilation-resource-pack>

Children Missing Education: Statutory guidance for local authorities (September 2016)

[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550416/Children Missing Education - statutory guidance.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550416/Children_Missing_Education_-_statutory_guidance.pdf)

Child Sexual Exploitation: Definition and a guide for Practitioners, Local Leaders and Decision Makers Working to Protect Children from Child Sexual Exploitation' (February 2017)

[https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/591903/CSE Guidance Core Document 13.02.2017.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/591903/CSE_Guidance_Core_Document_13.02.2017.pdf)