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1. INTRODUCTION

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the provision of safe and effective care and optimising children's life chances.

This Child Protection Policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the school. In particular this policy should be read in conjunction with the Safer Recruitment Policy, Behaviour Policy, Physical Intervention Policy, Anti-Bullying Policy, Code of Conduct/Staff Behaviour Policy and ICT Acceptable Usage Policy.

Purpose of a Child Protection Policy Barnet Safeguarding Children	To inform staff, parents, volunteers and governors about the school's responsibilities for safeguarding children. To enable everyone to have a clear understanding of how these responsibilities should be carried out. The school follows the procedures established by the Barnet Safeguarding Children			
Board Inter-agency Child Protection and Safeguarding Children Procedures	Board and the PAN London procedures; a guide to procedure and practice for all			
School Staff & Volunteers	All school staff have a responsibility to provide a safe environment in which children can learn. School staff and volunteers are particularly well placed to observe outward signs of abuse, changes in behaviour and failure to develop because they have daily contact with children. All school staff will receive appropriate safeguarding children training (which is updated regularly, annually for all staff and governors (Level1,Child Protection School Team updated Level 2 and Level3 training every 2 years), so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse or neglect and of the appropriate procedures to follow. It is good practice for the Designated Senior Person to deliver an annual update. Temporary staff and volunteers will be made aware of the safeguarding policies and procedures by the Designated Senior Person			
Mission Statement	Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to when they have a worry or concern. Establish and maintain an environment where school staff and volunteers feel safe, are encouraged to talk and are listened to when they have concerns about the safety and well being of a child.			



Date: Autumn 2014 Review Cycle: Annually Review: Autumn 2015



	Ensure children know that there are adults in the school whom they can approach if they are worried. Ensure that children who have been abused will be supported in line with a child				
	protection plan, where deemed necessary.				
	Include opportunities in the curriculum for children to develop the skills they need to recognise and stay safe from abuse eg computing and PSCHE curriculum.				
	Contribute to the five outcomes which are key to children's wellbeing: -				
	Be healthyStay safe				
	Enjoy and achieving				
	Make a positive contribution				
	Achieve economic well-being				
	Consider how children may be taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.				
	Staff members working with children are advised to maintain an attitude of 'it could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child				
Implementation, Monitoring and Review of the Child	The policy will be reviewed annually by the governing body. It will be implemented through the school's induction and training programme, and as part of day to day				
Protection Policy	practice. Compliance with the policy will be monitored by the Designated Senior Person and through staff performance measures				

2. STATUTORY FRAMEWORK

In order to safeguard and promote the welfare of children, the school will act in accordance with the following legislation and guidance:

- The Children Act 1989
- The Children Act 2004
- Education Act 2002 (section 175)
- Barnet Inter-agency Child Protection and Safeguarding Children Procedures (M.A.S.H)
- Keeping Children Safe in Education (DFE 2014)
- Keeping Children Safe in Education: information for all school and college staff (DFE 2014) APPENDIX 2
- Working Together to Safeguard Children (DfE 2013)
- Safeguarding Children and Safer Recruitment in Education (DfES 2006)
- The Education (Pupil Information) (England) Regulations 2005

Working Together to Safeguard Children (DFE 2013) requires all schools to follow the procedures for protecting children from abuse which are established by the Barnet Safeguarding Children Board.

Schools are also expected to ensure that they have appropriate procedures in place for responding to situations in which they believe that a child has been abused or are at risk of abuse - these procedures should also cover circumstances in which a member of staff is accused of, or suspected of, abuse.

Furthermore

Keeping Children Safe in Education (DfE April 2014) places the following responsibilities on all schools:

- Schools should be aware of and follow the procedures established by Barnet's Safeguarding Children's Board.
- Staff should be alert to signs of abuse and know to whom they should report any concerns or suspicions
- Schools should have procedures (of which all staff are aware) for handling suspected cases of abuse of pupils, including
 procedures to be followed if a member of staff is accused of abuse, or suspected of abuse. The Hyde School follows
 Barnet's 'Managing Allegations against staff procedures.'







- A Designated Senior Person (referred to in 'Keeping Children Safe in Education (DFE, April 2014)as Designated Safeguarding Lead') should have responsibility for co-ordinating action within the school and liaising with other agencies
- Staff with the designated safeguarding lead should undergo updated child protection training every two years

Keeping Children Safe in Education (DfE April 2014) also states:

Governing bodies and proprietors should ensure there is an effective child protection policy in place together with a staff behaviour policy (code of conduct). Both should be provided to all staff – including temporary staff and volunteers – on induction. The child protection policy should describe procedures which are in accordance with government guidance and refer to locally agreed inter-agency procedures put in place by the LSCB, be updated annually, and be available publicly either via the school or college website or by other means.

3. THE DESIGNATED SENIOR PERSON (referred to in 'Keeping Children Safe in Education (DFE, April 2014)as Designated Safeguarding Lead')

Governing bodies and proprietors should ensure that the school or college designates an appropriate senior member of staff to take lead responsibility for child protection. This person should have the status and authority within the school to carry out the duties of the post including committing resources and, where appropriate, supporting and directing other staff.

The Designated Senior People for Child Protection in this school are:

NAME: Sian Morris (Deputy Head) Jo Djora (Headteacher)

A Deputy DSPs should be appointed to act in the absence/unavailability of the DSPs.

The Deputy Designated Senior People for Child Protection in this school are:

NAME: Lisa Pratchett (Leaning Mentor) Keith Marsh (Assistant Head)

The broad areas of responsibility for the designated safeguarding lead are:

Managing referrals

Refer all cases of suspected abuse to the local authority children's social care and:

- Police (cases where a crime may have been committed).
- Liaise with the head teacher or principal to inform him or her of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations
- Act as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether
 to make a referral by liaising with relevant agencies

Training

- The designated safeguarding lead should receive appropriate training carried out every two years in order to:
- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments
- Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so
- Ensure each member of staff has access to and understands the school's child protection policy and procedures, especially new and part time staff
- Be alert to the specific needs of children in need,S49 those with special educational needs and young carers
- Be able to keep detailed, accurate, secure written records of concerns and referrals
- Obtain access to resources and attend any relevant or refresher training courses
- Encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any
 measures the school or college may put in place to protect them







Raising Awareness

- The designated safeguarding leads should ensure the school policies are known and used appropriately:
- Ensure the school's child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this
- Ensure the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school or college in this
- Link with the local LSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding
- Where children leave the school or college ensure their child protection file is copied for any new school as soon as
 possible but transferred separately from the main pupil file

4. THE GOVERNING BODY

Governing bodies and proprietors must ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training in their schools or colleges are effective and comply with the law at all times.

The nominated governor for child protection is: NAME:Stuart Lester (Chair of Governors)

In particular the Governing Body must ensure:

- The responsibilities placed on governing bodies and proprietors include:
- their contribution to inter-agency working, which includes providing a coordinated offer of early help when additional needs
 of children are identified
- ensuring that an effective child protection policy is in place, together with a staff behaviour policy
- appointing a designated safeguarding lead who should undergo child protection training every two years
- prioritising the welfare of children and young people and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns
- making sure that children are taught about how to keep themselves safe.
- Safe recruitment procedures are carried out
- Safe management of allegations following Barnet's 'Managing Allegations against Staff procedures'
- Deficiencies or weaknesses in safeguarding arrangements are remedied without delay

5. SCHOOL PROCEDURES - STAFF RESPONSIBILITIES

If any member of staff is concerned about a child he or she must inform the Designated Senior Person.

The member of staff must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations using the School's Concern Form.

The Designated Senior Person will decide whether the concerns should be referred to the M.A.S.H Team in social care. If it is decided to make a referral to social care this will be done with prior discussion with the parents, unless to do so would place the child at further risk of harm.

Particular attention will be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a child protection plan and a written record will be kept.

If a pupil who is/or has been the subject of a child protection plan changes school, the Designated Senior Person will inform the social worker responsible for the case and transfer the appropriate records to the Designated Senior Person at the receiving school, in a secure manner, and separate from the child's academic file.

The Designated Senior Person is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. If necessary, training will be arranged.

As a person who works with children, staff have a duty to refer safeguarding concerns to the designated senior person for child protection. However if:

• concerns are not taken seriously an organisation or







- · action to safeguard the child is not taken by professionals and
- the child is considered to be at continuing risk of harm

Then Staff should speak to a DSP in their school or contact Barnet's M.A.S.H Team (including out of hours) on 020 8359 4066 / 020 8359 2000

If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.

WHEN TO BE CONCERNED

All staff and volunteers should be aware that the main categories of abuse are:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

All staff and volunteers should be concerned about a child if he/she presents with indicators of possible significant harm – see Appendix 1 for details.

Generally, in an abusive relationship the child may:

- Appear frightened of the parent/s or other household members e.g. siblings or others outside of the home
- Act in a way that is inappropriate to her/his age and development (full account needs to be taken of different patterns of development and different ethnic groups)
- Display insufficient sense of 'boundaries', lack stranger awareness
- Appear wary of adults and display 'frozen watchfulness'

7. DEALING WITH A DISCLOSURE

If a child discloses that he or she has been abused in some way, the member of staff / volunteer should:

- Listen to what is being said without displaying shock or disbelief
- Accept what is being said
- Allow the child to talk freely
- Reassure the child, but not make promises which it might not be possible to keep
- Not promise confidentiality it might be necessary to refer to social care
- Reassure him or her that what has happened is not his or her fault
- Stress that it was the right thing to tell
- Listen, only asking questions when necessary to clarify
- Not criticise the alleged perpetrator
- Explain what has to be done next and who has to be told
- Make a written record (see Record Keeping)
- Pass the information to the Designated Senior Person without delay

Support

Dealing with a disclosure from a child, and safeguarding issues can be stressful. The member of staff/volunteer should, therefore, consider seeking support for him/herself and discuss this with the Designated Senior Person.

8. CONFIDENTIALITY

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in schools.







- All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (social care and the Police).
- If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe.
- Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

9. COMMUNICATION WITH PARENTS

We will:

Ensure the child protection policy is available publicly either via the school or college website or by other means.

Ensure that parents have an understanding of the responsibilities placed on the school and staff for safeguarding children.

Parents should be informed prior to referral, unless it is considered to do so might place the child at increased risk of significant harm by:

- The behavioural response it prompts e.g. a child being subjected to abuse, maltreatment or threats / forced to remain silent if alleged abuser informed;
- Leading to an unreasonable delay;
- Leading to the risk of loss of evidential material;
- Placing a member of staff from any agency at risk.

10. RECORD KEEPING

When a child has made a disclosure, the member of staff/volunteer should:

- Record as soon as possible after the conversation using the school's concern form.
- Not destroy the original notes in case they are needed by a court
- Record the date, time, place and any noticeable non-verbal behaviour and the words used by the child
- Draw a diagram to indicate the position of any injuries
- Record statements and observations rather than interpretations or assumptions

All records need to be given to the Designated Senior Person promptly. No copies should be retained by the member of staff or volunteer.

The Designated Senior Person will ensure that all safeguarding records are managed in accordance with the Education (Pupil Information) (England) Regulations 2005.

11. ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS

An allegation is any information which indicates that a member of staff/volunteer may have:

- · Behaved in a way that has, or may have harmed a child
- Possibly committed a criminal offence against/related to a child
- Behaved toward a child in a way which indicates s/he is unsuitable to work with children

This applies to any child the member of staff/volunteer has contact with in the personal, professional or community life.

To reduce the risk of allegations, all staff should be aware of safer working practice and should be familiar with the guidance contained in the staff handbook, school code of conduct or Government document 'Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings'.







The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification, it is important not to make assumptions. Confidentiality should not be promised and the person should be advised that the concern will be shared on a 'need to know' basis only.

Actions to be taken include making a written record of the allegation using the informant's words - including time, date and place where the alleged incident took place, what was said and anyone else present. This record should be signed and dated and immediately passed on to the headteacher.

If the concerns are about the Headteacher, then the Chair of Governors should be contacted. The Chair of Governors in this school is: NAME: **Stuart Lester (Chair of Governors)** CONTACT: **via the school office**

In the absence of the Chair of Governors, the Vice Chair should be contacted.

The recipient of an allegation must **not** unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The Headteacher will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to social care in consultation with the Local Authority Designated Officer via Barnet's M.A.S.H Team on 0208 359 4066 or direct line 020 8359 4528.

If it is decided that the allegation meets the threshold for further action through the Barnet Inter-agency Child Protection and Safeguarding Children Procedures, the Headteacher must immediately make a referral to social care on 0208 359 2000

If it is decided that the allegation does not meet the threshold for referral to social care, the Head Teacher and Local Authority Designated Officer will consider the appropriate course of action, e.g. joint evaluation meeting, internal investigation.

The Headteacher should, as soon as possible, **following briefing** from the Local Authority Designated Officer inform the subject of the allegation.

Managing Allegations Against Staff Procedures are found at: http://www.barnetscb.org/info/90026/local_authority_designated_officer_lado



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APPENDIX 1 - INDICATORS OF POSSIBLE SIGNIFICANT HARM - In addition to all the above signs a child may disclose an experience in which he/she may have been harmed, or there may be any other cause to believe that a child may be suffering harm.

POSSIBLE SIGNS	POSSIBLE SIGNS OF	POSSIBLE SIGNS OF	POSSIBLE SIGNS OF SEXUAL ABUSE
OF NEGLECT	PHYSICAL ABUSE	EMOTIONAL ABUSE	
 Constant hunger Poor personal hygiene Inappropriate clothing, clothing in a poor state of repair Frequent lateness or non-attendance at school Untreated medical problems Low self-esteem Poor social relationships Compulsive stealing Constant tiredness Emaciation Destructive tendencies. Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking) Chronic running away Scavenging for food or clothes 	 Unexplained injuries or burns, particularly if they are recurrent Injuries not typical of accidental injury Frequent injuries even with apparently reasonable explanations Improbable or conflicting explanations for injuries Refusal to discuss injuries Admission of punishment which appears excessive Fear of parents being contacted Bald patches Withdrawal from physical contact Arms and legs kept covered in hot weather Fear of returning home Fear of medical help / parents not seeking medical help Self-destructive tendencies Aggression towards others Chronic running away Frequently absent from school 	 Probably the most difficult type of abuse to recognise. An emotionally abused child is often withdrawn, introverted and depressed. Admission of punishment which appears excessive Over-reaction to mistakes Sudden speech disorders Fear of new situations Inappropriate emotional responses to painful situations Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking) Self mutilation Fear of parents being contacted Extremes of passivity or aggression Drug/solvent abuse Chronic running away Compulsive stealing Scavenging for food or clothes Continual self depreciation Air of detachment – 'don't care' attitude Social isolation – does not join in and has few friends Desperate attention-seeking behaviour Eating problems, including overeating or lack of appetite Depression, withdrawal 	 Demonstrate sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit Wetting or other regressive behaviours e.g. thumb sucking Inexplicable changes in behaviour, such as becoming aggressive or withdrawn Stop enjoying previously liked activities Be reluctant to undress for PE Become fearful of, or refuse to see, certain adults for no apparent reason; show dislike of a particular baby-sitter, relative or other adult Draw sexually explicit pictures Urinary infections, bleeding or soreness in the genital/anal areas Soreness or bleeding in the throat Chronic ailments, such as stomach pains or headaches Take over the parental role at home; seem old beyond their yrs Develop eating disorders, such as anorexia or bulimia Depression, suicidal thoughts Poor self-image, self-harm, self-hatred Physical discomfort Use drugs or drink to excess Unexplained pregnancy Memory loss Frequent running away Restricted social activities Find excuses not to go home or to a particular place Have recurring nightmares/be afraid of the dark Be unable to concentrate; seem to be in a world of their own Have a 'friend who has a problem' and then tell about the abuse of the friend Sudden changes in school work habits, become truant Withdrawal, isolation or excessive worrying Outbursts of anger or irritability Unexplained sums of money Act in a sexually inappropriate/harmful or seductive way towards others





APPENDIX 2 - KEEPING CHILDREN SAFE IN EDUCATION: INFORMATION FOR ALL SCHOOL AND COLLEGE STAFF (DFE, 2014)

Part one: Safeguarding information for all staff

What school and college staff should know and do

- Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as: protecting children from maltreatment; preventing impairment of children's health or development; ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and taking action to enable all children to have the best outcomes.
- 2. Children includes everyone under the age of 18.
- Where a child is suffering significant harm, or is likely to do so, action should be 3. taken to protect that child. Action should also be taken to promote the welfare of a child in need of additional support, even if they are not suffering harm or are at immediate risk. 2

The role of the school or college

- Everyone who comes into contact with children and their families has a role to play in safeguarding children. School and college staff are particularly important as they are in a position to identify concerns early and provide help for children, to prevent concerns from escalating. Schools and colleges and their staff form part of the wider safeguarding system for children. This system is described in statutory guidance Working Together to Safeguard Children 2013. Schools and colleges should work with social care, the police, health services and other services to promote the welfare of children and protect them from harm.
- 5. Each school and college should have a designated safeguarding lead who will provide support to staff members to carry out their safeguarding duties and who will liaise closely with other services such as children's social care.

The role of school and college staff

6. The *Teacher Standards 2012* ⁴ state that teachers, including headteachers, should safeguard children's wellbeing and maintain public trust in the teaching profession as part of their professional duties.

Such action might be taken under section 47 and section 44 of the Children Act 1989.
 Such action might be taken under section 17 of the Children Act 1989.
 Department for Education guidance: Working Together to Safeguard Children 2013

⁴ The Teachers' Standards apply to: trainees working towards QTS; all teachers completing their statutory induction period (newly qualified teachers [NQTs]); and teachers in maintained schools, including maintained special schools, who are covered by the 2012 appraisal regulations.





All school and college staff have a responsibility to provide a safe environment in which children can learn.

- 7. All school and college staff have a responsibility to identify children who may be in need of extra help or who are suffering, or are likely to suffer, significant harm. All staff then have a responsibility to take appropriate action, working with other services as needed.
- 8. In addition to working with the designated safeguarding lead staff members should be aware that they may be asked to support social workers to take decisions about individual children.

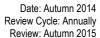
What school and college staff need to know

- 10. All staff members should be aware of systems within their school or college which support safeguarding and these should be explained to them as part of staff induction. This includes: the school's or college's child protection policy; the school's or college's staff behaviour policy (sometimes called a code of conduct); and the designated safeguarding lead.
- 11. All staff members should also receive appropriate child protection training which is regularly updated.

What school and college staff should look out for

- 12. All school and college staff members should be aware of the signs of abuse and neglect so that they are able to identify cases of children who may be in need of help or protection.
- 13. Staff members working with children are advised to maintain an attitude of 'it could happen here' where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.
- 14. There are various expert sources of advice on the signs of abuse and neglect. Each area's Local Safeguarding Children Board (LSCB) should be able to advise on useful material, including training options. One good source of advice is provided on the MSPCC website. Types of abuse and neglect, and examples of specific safeguarding issues, are described in paragraphs 20-25. ⁵
- 15. Knowing what to look for is vital to the early identification of abuse and neglect. If staff members are unsure they should always speak to children's social care.
- 16. A child going missing from education is a potential indicator of abuse or neglect. School and college staff members should follow the school's or college's procedures for

⁵ Department for Education (DfE) <u>training materials on neglect</u>





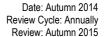
dealing with children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect including sexual abuse or exploitation and to help prevent the risks of their going missing in future. More information can be found in this guidance about children who run away or go missing from home or care.

What school and college staff should do if they have concerns about a child

- If staff members have concerns about a child they should raise these with the school's or college's designated safeguarding lead. This also includes situations of abuse which may involve staff members. The safeguarding lead will usually decide whether to make a referral to children's social care, but it is important to note that any staff member can refer their concerns to children's social care directly. ⁶ Where a child and family would benefit from coordinated support from more than one agency (for example education, health, housing, police) there should be an interagency assessment. These assessments should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989. The early help assessment should be undertaken by a lead professional who could be a teacher, special educational needs coordinator, General Practitioner (GP), family support worker, and/or health visitor.
- 18. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately. Anybody can make a referral. If the child's situation does not appear to be improving the staff member with concerns should press for re-consideration. Concerns should always lead to help for the child at some point.
- 19. It is important for children to receive the right help at the right time to address risks and prevent issues escalating. Research and Serious Case Reviews have repeatedly shown the dangers of failing to take effective action. Poor practice includes: failing to act on and refer the early signs of abuse and neglect, poor record keeping, failing to listen to the views of the child, failing to re-assess concerns when situations do not improve, sharing information too slowly and a lack of challenge to those who appear not to be taking action. 7

Brandon et al, Learning from Serious Case Reviews (SCRs) 2011

Advice on whistleblowing can be found on GOV.UK





Action when a child has suffered or is likely to suffer harm

This diagram illustrates what action should be taken and who should take it when there are concerns about a child. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately.

Anybody can make a referral.

Sharing/recording concerns

An individual with concerns about a child (see NSPCC signs of abuse and neglect) shares these with the designated safeguarding lead who records them.* The individual with concerns may refer to children's social care directly.

Consideration

If referred to them, the designated safeguarding lead considers if an early help assessment** is needed or if s/he should swiftly move to the next step

Referral to children's social care

An individual with concerns or the designated safeguarding lead may make a referral to children's social care

No referral to children's social care

The individual with concerns and/or the designated safeguarding lead should monitor the situation If the child's situation does not appear to be improving the referrer should press for reconsideration

Children's social care consideration

Children's social care decides within one working day what action will be taken, including if an assessment is needed, and feed back to the referrer

Assessment

Children's social care completes the assessment within 45 working days of the referral; it could be a section 17 or 47 assessment;**all schools and colleges should allow local authorities access to facilitate arrangements

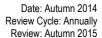
No assessment

If no section 17 or 47*** assessment is recommended an early help assessment** may be recommended and/or onward referral to other specialist or universal services; children's social care will feed back to the referrer

^{*} In cases which also involve an allegation of abuse against a staff member, see part four of this guidance which explains action the school or college should take in respect of the staff member

^{**} Where a child and family would benefit from coordinated support from more than one agency (eg, education, health, housing, police) there should be an inter-agency assessment. These assessments should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989. The early help assessment should be undertaken by a lead professional who could be a teacher, special educational needs coordinator, General Practitioner (GP), family support worker, and/or health visitor.

^{***} Where there are more complex needs, help may be provided under section 17 of the Children Act 1989 (children in need). Where there are child protection concerns local authority services must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989.





Types of abuse and neglect

- 20. **Abuse**: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children.
- 21. **Physical abuse**: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.
- 22. **Emotional abuse**: the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.
- 23. **Sexual abuse**: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Neglect: the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.



Specific safeguarding issues

25. Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example NSPCC offers information for schools and colleges on the TES website and also on its own website www.nspcc.org.uk Schools and colleges can also access broad government guidance on the issues listed below via the GOV.UK website:

- · child sexual exploitation (CSE) see also below
- bullying including cyberbullying
- domestic violence
- drugs
- <u>fabricated or induced illness</u>
- <u>faith abuse</u>
- <u>female genital mutilation (FGM)</u> see also below
- forced marriage
- · gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- private fostering
- <u>radicalisation</u>
- sexting
- teenage relationship abuse
- trafficking

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Further information on Child Sexual Exploitation and Female Genital Mutilation

Child sexual exploitation(CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming.

However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Female Genital Mutilation (FGM): professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 11-12 of the Multi-Agency Practice Guidelines referred to above. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.