



## Elevate Child Protection and Safeguarding Policy

<b>IF A CHILD IS IN IMMEDIATE DANGER OR IS AT RISK OF HARM</b>	<b>ALLEGATIONS AGAINST STAFF AND VOLUNTEERS PROCEDURE</b>
<p><b>If a child is in immediate danger or is at risk of harm telephone the Customer Contact Centre 01609 780780 and/or the police (101 or 999) <u>immediately</u>.</b></p> <p><b>ANYONE CAN MAKE A REFERRAL. Where referrals are not made by the designated safeguarding lead (DSL), the DSL should be informed as soon as possible that a referral has been made.</b></p> <p><b>IF, AT ANY STAGE, A CHILD'S SITUATION DOES NOT APPEAR TO BE IMPROVING, ALERT THE DSL/CONTACT CUSTOMER CONTACT CENTRE TO PRESS FOR ACTION.</b></p>	<p>These procedures should be used in respect of all cases in connection with the person's employment or voluntary activity where it is alleged that a person who works with children has:</p> <ul style="list-style-type: none"> <li>▮ Behaved in a way that has harmed a child, or may have harmed a child</li> <li>▮ Possibly committed a criminal offence against or related to a child, or</li> <li>▮ Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children</li> </ul> <p><b>The Head should telephone: Elevate's compliance officer on 077695 82025; and the Duty LADO on 01609 532477 within 1 day.</b></p>

**To be read and signed by everyone employed by Elevate**

The Trust Board of Elevate Multi Academy Trust has agreed this Policy and as such, it applies to their Academies.

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<b>DESIGNATED SAFEGUARDING GOVERNOR</b>	Raj Lodh
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## Safeguarding is Everyone’s Responsibility

### Introduction:

Safeguarding and promoting the welfare of children is defined in Keeping Children Safe in Education, September 2018, 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;
- Taking action to enable all children to have the best outcomes.

**Child protection** is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm

Children includes everyone under the age of 18.

This Child Protection and Safeguarding Policy is for staff, parents, Trustees, governors, volunteers and the wider academy community.

This Safeguarding & Child Protection Policy is available on the Academy website, and is reviewed and ratified annually by the board of Trustees or as events, or legislation requires. Any deficiencies or weaknesses identified will be remedied without delay.

It forms part of the safeguarding arrangements for Elevate and their Academies. It should be read in conjunction with the policies, statutory framework and documents set out in the Appendix 2.

### Equality statement

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children’s diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.



We give special consideration to children who:

- Have special educational needs or disabilities;
- Are young carers;
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality;
- Have English as an additional language;
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence;
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation; • Are asylum seekers;

## Legislation and statutory guidance

This policy is based on the Department for Education's statutory guidance, [Keeping Children Safe in Education \(KCSIE\) 2018](#) and [Working Together to Safeguard Children \(WTTSC 2018\)](#), and the [Governance Handbook](#). We comply with this guidance and the procedures set out by our Local Safeguarding Children partnership.

This policy is also based on the following legislation:

Part 3 of the schedule to the [Education \(Independent School Standards\) Regulations 2014](#), which places a duty on academies and independent schools to safeguard and promote the welfare of pupils at the school

[The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children

Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18

[Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

[The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children

Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children

Statutory [Guidance on the Prevent duty](#), which explains schools' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism

Guidance for safer working practice for those working with children and young people in education settings (GSWP) (Safer Recruitment Consortium October 2015)



NYCSB Procedures:  
NYCSB – professional resolutions

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

The policy conforms to locally agreed inter-agency procedures and has been ratified by the LSCP Education Reference Group. It is available to all interested parties on our website and on request from the main school office. It should be read in conjunction with other relevant policies and procedures and KCSiE.

The [Childcare \(Disqualification\) Regulations 2018](#) and [Childcare Act 2006](#), which set out who is disqualified from working with children

This policy also meets requirements relating to safeguarding and welfare in the [Statutory framework for the Early Years Foundation Stage](#).

This policy also complies with our funding agreement and Articles of Association.

### **Roles and responsibilities:**

All adults working with or on behalf of children have a responsibility to protect them and to provide a safe environment in which they can learn and achieve their full potential. However, there are key people within Elevate’s Academies (*see front sheet*) and the Local Authority who have specific responsibilities under child protection procedures.

### **The Trustees/Local Governing Bodies(LGB):**

<b>Full responsibilities for governors and Trustees are set out in KCSIE 2018</b>
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The Trustees and the LGBs ensure that the policies, procedures and training in Elevate and their Academies are effective and comply with the law. They ensure that all required policies relating to safeguarding are in place and that this child protection and safeguarding policy reflects statutory and local guidance and is reviewed at least annually.

The LGB of each of Elevate’s Academies will ensure:

- a. There is a nominated Safeguarding governor, who has undergone the relevant training;
- b. There is a named designated safeguarding lead and 1 deputy safeguarding lead and a third nominated person if the DSL and deputy DSL are both unavailable. Their qualifications are current;
- c. Their Academy contributes to inter-agency working, in line with statutory and local guidance. It ensures that information is shared and stored appropriately and in accordance with statutory requirements;
- d. That all staff members undergo safeguarding and child protection training at induction and that it is then regularly updated. All staff members receive regular safeguarding and child



- protection updates, at least annually, to provide them with the relevant skills and knowledge to keep our children safe;
- e. Ensures that children are taught about safeguarding, including online, ensuring that that appropriate filters and monitoring systems for online usage are in place. Our children will be taught how to keep themselves safe through teaching and learning opportunities as part of a broad and balanced curriculum;
  - f. Their Academy leadership teams are responsible for ensuring they follow recruitment procedures that help to deter, reject or identify people who might abuse children. It adheres to statutory responsibilities to check adults working with children and has recruitment and selection procedures in place. It ensures that volunteers are appropriately supervised in their Academy;
  - g. The link governor or Chair will annually carry out the Safeguarding Audit with the Head. A copy will be sent to the Trustees.
  - h. The LGB, along with the Academy's senior leadership team, are responsible for satisfying themselves and obtaining written assurances from any relevant Academy lettings and alternative/off site providers and provisions that their safeguarding arrangements are secure and in keeping with KCSIE. **Insert name of Academy** use the following alternative or off-site providers and have written evidence of safeguarding arrangements – **(please complete)**

### **The Designated Safeguarding Lead (DSL) (Deputy and 3<sup>rd</sup> nominated person):**

**Full responsibilities of DSL are set out in Appendix B of KCSIE which the DSL, deputy DSL and 3<sup>rd</sup> nominated person will have read and comply.**

The DSL in each Academy takes lead responsibility for managing child protection referrals, safeguarding training and raising awareness of all child protection policies and procedures. They ensure that everyone in their Academy (including temporary staff, volunteers and contractors) is aware of these procedures and that they are followed at all times. They act as a source of advice and support for other staff (on child protection matters) and ensure that timely referrals to the Customer Contact Centre/LADO are made in accordance with current procedures. They work with the Local Authority and other agencies as required.

If for any reason the DSL is unavailable, the Deputy Designated Safeguarding Lead will act in their absence. If both the DSL and deputy DSL are unavailable the 3<sup>rd</sup> nominated person will act as the lead.

### **The Head teacher:**

- Works in accordance with the requirements upon their Academy staff;
- Ensures that all safeguarding policies and procedures adopted by Elevate and the LGB are followed by their staff, temporary staff and volunteers;
- Will carry out an annual Safeguarding Audit with the link governor or LGB Chair;
- Ensure the current policy appears on the website and informs new parents of the policy;



- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate.

**Academy staff:** Everyone in Elevate's Academies has a responsibility to provide a safe learning environment in which our children can learn. Staff are prepared to identify children who may benefit from early help and understand their role within this process. This includes identifying any emerging problems so appropriate support may be provided and liaising with the DSL to report any concerns.

#### **Central Staff:**

Any centralised Elevate staff not assigned to an individual Academy will report any concerns to the DSL of the Academy to which the concerns are related.

**All staff members, volunteers, Trustees and governors have signed a copy of this policy to confirm they are aware of and follow academy processes (as set out in this policy) and are aware of how to make a referral to Customer Contact Centre/LADAO if there is a need to do so.**

#### **Training:**

- The DSL (and Deputies) undertake appropriate child protection training at least every two years.
- The Head teacher, all staff members, volunteers, Trustees and governors receive appropriate child protection training which is regularly updated and in line with advice from Elevate and the Local Authority.
- In addition, all staff members receive safeguarding and child protection updates as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.
- Records of any child protection training undertaken is kept for all staff and governors.
- Each Academy ensures that the DSL (and Deputies) also undertakes training in interagency working and other matters as appropriate.
- The Head teacher will attend appropriate safeguarding training at least every three years.



### Children in Specific Circumstances:

Elevate and their Academies are aware of the signs of abuse and neglect so they are able to identify children who may be in need of help or protection.

**For further guidance please read KCSIE Part 1 Annex A**

### Children with Additional Needs:

Elevate and their Academies recognise that while all children have a right to be safe, some children *may* be more vulnerable to abuse e.g. those with a disability or special educational need, those living with domestic violence or drug/alcohol abusing parents, etc.

**Exclusions:** When the Academy is considering excluding, either fixed term or permanently, a vulnerable pupil and/or a pupil who is either subject to a S47 Child Protection plan or there are/have previously been child protection concerns, they will undertake an informed (multi-agency where other professionals are involved) risk-assessment prior to making the decision to exclude. In the event of a one-off serious incident resulting in an immediate decision to permanently exclude, the risk assessment must be completed prior to convening a meeting of the Governing body.



### **Children with Special Educational Needs and Disabilities:**

Elevate and their Academies understand that children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children.

This can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- children with SEN and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs;
- communication barriers and difficulties in overcoming these barriers.

SEN and children with disabilities, where necessary, will be given additional resources, time and support to discuss any concerns they may have.

### **Disabled Children:**

When working with children with disabilities, practitioners need to be aware that additional possible indicators of abuse and/or neglect may also include:

- A bruise in a site that might not be of concern on an ambulant child such as the shin, might be of concern on a non-mobile child
- Not getting enough help with feeding leading to malnourishment
- Poor toileting arrangements
- Lack of stimulation
- Unjustified and/or excessive use of restraint
- Rough handling, extreme behaviour modification e.g. deprivation of liquid medication, food or clothing, disabling wheelchair batteries
- Unwillingness to try to learn a child's means of communication
- Ill-fitting equipment e.g. callipers, sleep boards, inappropriate splinting;
- Misappropriation of a child's finances
- Invasive procedures

### **Peer on Peer Abuse:**

Elevate and their Academies may be the only stable, secure and safe element in the lives of children at risk of, or who have suffered harm. Nevertheless, whilst at their Academy, their behaviour may be challenging and defiant, or they may instead be withdrawn, or display abusive behaviours towards other children.

Elevate and their Academies recognises that some children may abuse their peers and any incidents of peer on peer abuse will be managed in the same way as any other child protection concern and will follow the same procedures.



Peer on peer abuse can manifest itself in many ways. This may include bullying (including cyber bullying), criminal and sexual exploitation, initiation/hazing and inappropriate/harmful sexualised behaviours on-line abuse, gender-based abuse, 'sexting' or sexually harmful behaviour.

Abuse is abuse and should never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up".

Elevate does not tolerate any harmful behaviour in their Academies and will take swift action to intervene where this occurs. They use lessons and assemblies to help children understand, in an age-appropriate way, what abuse is and to encourage them to tell a trusted adult if someone is behaving in a way that makes them feel uncomfortable.

Elevate and their Academies understand the different gender issues that can be prevalent when dealing with peer on peer abuse (see Anti-Bullying Policy, Behaviour Policy for further information).

Any concerns around peer on peer abuse must be reported and recorded in line with the child protection procedures outlined in this policy. The DSL is responsible on responding to such concerns in keeping with NYCC protocols. The DSL is responsible for providing support to any victims, and the perpetrators.

We will ensure that the needs of children and young people who abuse others will be considered separately from the needs of their victims.

Children and young people who abuse others will be responded to in a way that meets their needs as well as protecting others within the Academy community through a multi-agency risk assessment.

Where child sexual exploitation, or the risk of it, is suspected, frontline practitioners should complete a cause for concern form and pass onto the designated member of staff for child protection.

The Academy will work in partnership with parents / carers and other agencies as appropriate. This includes facilitating return to home interviews as requested.

Elevate and their Academies will support victims, perpetrators and any other child affected by peer on peer abuse in accordance with the processes set out in **Sexual violence and sexual harassment between children in schools and colleges, as updated May 2018.**

### Children Missing from Education:



### **Children Missing Education – Statutory guidance for local authorities (DfE September 2016).**

All children, regardless of their age, ability, aptitude and any SEN they may have are entitled to a full-time education. Elevate and their Academies recognise that a child missing education is a potential indicator of abuse or neglect and will follow the Academy procedures for unauthorised absence and for children missing education. Parents should always inform us of the reason for any absence. Where contact is not made, a referral may be made to another appropriate agency (Missing Education and Child Employment Service, Social Care or Police).

Each Academy must inform their Local Authority of any child who fails to attend their Academy regularly or has been absent without Academy permission for a continuous period of 10 days or more.

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

**Reference: Child Sexual Exploitation. Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation (DfE 2017)**

‘Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.’

Elevate and their Academies are alert to the signs and indicators of a child becoming at risk of, or subject to, CSE and will take appropriate action to respond to any concerns.

The DSL is the named CSE Lead in each Academy on these issues and will work with other agencies as appropriate.

### **Female Genital Mutilation (FGM):**

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to female genital organs. It is illegal in the UK and a form of child abuse.

As of October 2015, the Serious Crime Act 2015 (Home Office, 2015) introduced a duty on **teachers** (and other professionals) to notify the police of known cases of female genital mutilation where it appears to have been carried out on a girl under the age of 18.

Elevate and their Academies will operate in accordance with the statutory requirements relating to this issue, and in line with existing local safeguarding procedures.

The duty above does not apply in cases where a pupil is *at risk* of FGM or FGM is suspected but is not known to have been carried out. Staff should not examine pupils.



**Any other member of staff** who discovers that an act of FGM appears to have been carried out on a **pupil under 18** must speak to the DSL and follow our local safeguarding procedures.

**Any member of staff** who suspects a pupil is *at risk* of FGM must speak to the DSL.

### Forced marriage:

A forced marriage is one entered into without the full consent of one or both parties. It is where violence, threats or other forms of coercion is used and is a crime. Elevate staff understand how to report concerns where this may be an issue.

### Prevention of radicalisation:

**KCSIE 2018 pages 83 to 85.**

As of July 2015, the [Counter-Terrorism and Security Act \(HMG, 2015\)](#) placed a new duty on schools and other education providers. Under section 26 of the Act, schools are required, in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”. This duty is known as the PREVENT duty.

**For Further guidance please read The Prevent Duty**

The Duty requires Academies to:

- teach a broad and balanced curriculum which promotes spiritual, moral, cultural, mental and physical development of pupils and prepares them for the opportunities, responsibilities and experiences of life and must promote community cohesion;
- be safe spaces in which children / young people can understand and discuss sensitive topics, including terrorism and the extremist ideas that are part of terrorist ideology, and learn how to challenge these ideas;
- be mindful of their existing duties to forbid political indoctrination and secure a balanced presentation of political issues.

**CHANNEL** is a national programme which focuses on providing support at an early stage to people identified as vulnerable to being drawn into terrorism. Our staff understand how to identify those who may benefit from this support and how to make a referral.

**For CHANNEL Guidance go to [http://ncalt.com/channel\\_general\\_awareness](http://ncalt.com/channel_general_awareness)**

### Domestic (Family) Abuse and/or sexual violence:

Domestic or Family Abuse adversely affects children, whether or not it is significant enough to warrant action under Child Protection Procedures. When a member of staff becomes aware that a child may be living in a household where there is emotional, physical or sexual violence, they



should refer the concern to the DSL who will attempt to find out whether the family are receiving help and who will consider contacting the referral or advice lines below.

A designated DASV trained person should be named in each Academy.

### Signs of Abuse:

#### **Working together to safeguard children DFE 2018 and KCSIE 2018 Annex A**

Recognising child abuse is not easy. It is not Elevate's staff responsibility to decide whether child abuse has taken place or if a child is at significant risk of harm from someone. Their responsibility and duty, is to follow the procedures set out in this policy and to act in order that the appropriate agencies can investigate and take any necessary action to protect a child.

Elevate staff will use the following information to be more alert to the signs of possible abuse:

### Physical Abuse:

Most children will collect cuts and bruises as part of the rough-and-tumble of daily life. Injuries should always be interpreted in light of the child's medical and social history, developmental stage and the explanation given. Most accidental bruises are seen over bony parts of the body, e.g. elbows, knees, shins, and are often on the front of the body. Some children, however, will have bruising that is more than likely inflicted rather than accidental.

Important indicators of physical abuse are bruises or injuries that are either unexplained or inconsistent with the explanation given, or visible on the 'soft' parts of the body where accidental injuries are unlikely, e.g. cheeks, abdomen, back and buttocks. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern, although this can be more complicated with burns, as these are often delayed in presentation due to blistering taking place sometime later.

- Unexplained bruising, marks or injuries on any part of the body;
- Multiple bruises- in clusters, often on the upper arm, outside of the thigh;
- Cigarette burns;
- Human bite marks;
- Broken bones;
- Scalds, with upward splash marks;
- Unaccountable covering of limbs, even in hot weather;
- Fear of going home or parents being contacted;
- Fear of medical help;
- Fear of changing for PE;
- Multiple burns with a clearly demarcated edge.

### Changes in behaviour that can also indicate physical abuse:



- Fear of parents being approached for an explanation;
- Aggressive behaviour or severe temper outbursts;
- Flinching when approached or touched;
- Reluctance to get changed, for example in hot weather;
- Depression;
- Withdrawn behaviour.

### **Emotional Abuse:**

Emotional abuse can be difficult to measure, as there are often no outward physical signs. There may be a developmental delay due to a failure to thrive and grow, although this will usually only be evident if the child puts on weight in other circumstances, for example when hospitalised or away from their parents' care. Even so, children who appear well-cared for may nevertheless be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of children not being allowed to mix or play with other children.

### **Changes in behaviour which can indicate emotional abuse include:**

- Neurotic behaviour e.g. sulking, hair twisting, rocking;
- Being unable to play;
- Fear of making mistakes;
- Sudden speech disorders;
- Self-harm;
- Fear of parent being approached regarding their behaviour;
- Developmental delay in terms of emotional progress

### **Sexual Abuse:**

Adults who use children to meet their own sexual needs abuse both girls and boys of all ages, including infants and toddlers. Usually, in cases of sexual abuse it is the child's behaviour that may cause concern, although physical signs can also be present. In all cases, children who tell about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

It is also important to remember that it not just adult men who sexually abuse children – there are increasing numbers of allegations of sexual abuse of children against women and sexual abuse can also be perpetrated by other children or young people.

### **The physical signs of sexual abuse may include:**

- Pain or itching in the genital area;
- Bruising or bleeding near genital area;
- Sexually transmitted disease;



- Vaginal discharge or infection;

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- Stomach pains;
- Discomfort when walking or sitting down;
- Pregnancy.

**Changes in behaviour which can also indicate sexual abuse include:**

- Sudden or unexplained changes in behaviour e.g. becoming aggressive or Withdrawn;
- Fear of being left with a specific person or group of people;
- Having nightmares;
- Running away from home;
- Sexual knowledge which is beyond their age, or developmental level;
- Sexual drawings or language;
- Bedwetting;
- Eating problems such as overeating or anorexia;
- Self-harm or mutilation, sometimes leading to suicide attempts;
- Saying they have secrets they cannot tell anyone about;
- Substance or drug abuse;
- Suddenly having unexplained sources of money;
- Not allowed to have friends (particularly in adolescence);
- Acting in a sexually explicit way towards adults;

**Neglect:**

Neglect can be a difficult form of abuse to recognise, yet have some of the most lasting and damaging effects on children.

**The physical signs of neglect may include:**

- Constant hunger, sometimes stealing food from other children;
- Constantly dirty or 'smelly';
- Loss of weight, or being constantly underweight; Inappropriate clothing for the conditions.

**Changes in behaviour which can also indicate neglect may include:**

- Complaining of being tired all the time;
- Not requesting medical assistance and/or failing to attend appointments;
- Having few friends;
- Mentioning being left alone or unsupervised.

**Bullying:**

Bullying is not always easy to recognise as it can take many forms. A child may encounter bullying attacks that are:

- Physical: pushing, kicking, hitting, pinching and other forms of violence or threats;
- Verbal: name-calling, sarcasm, spreading rumours, persistent teasing;
- Emotional: excluding (sending to Coventry), tormenting, ridiculing, humiliating.

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### **Persistent bullying can result in:**

- Depression;
- Low self-esteem;
- Shyness;
- Poor academic achievement;
- Isolation;
- Threatened or attempted suicide.

### **Signs that a child may be being bullied can be:**

- Coming home with cuts and bruises;
- Torn clothes;
- Asking for stolen possessions to be replaced;
- Losing dinner money;
- Falling out with previously good friends;
- Being moody and bad tempered;
- Wanting to avoid leaving their home;
- Aggression with younger brothers and sisters;
- Doing less well at school;
- Sleep problems;
- Anxiety;
- Becoming quiet and withdrawn;

These definitions and indicators are not meant to be definitive, but only serve as a guide to assist Elevate and their Academies. It is important too, to remember that many children may exhibit some of these indicators at some time, and that the presence of one or more should not be taken as proof that abuse is occurring. There may well be other reasons for changes in behaviour such as a death or the birth of a new baby in the family or relationship problems between parents/carers. In assessing whether indicators are related to abuse or not, the authorities will always want to understand them in relation to the child's development and context.

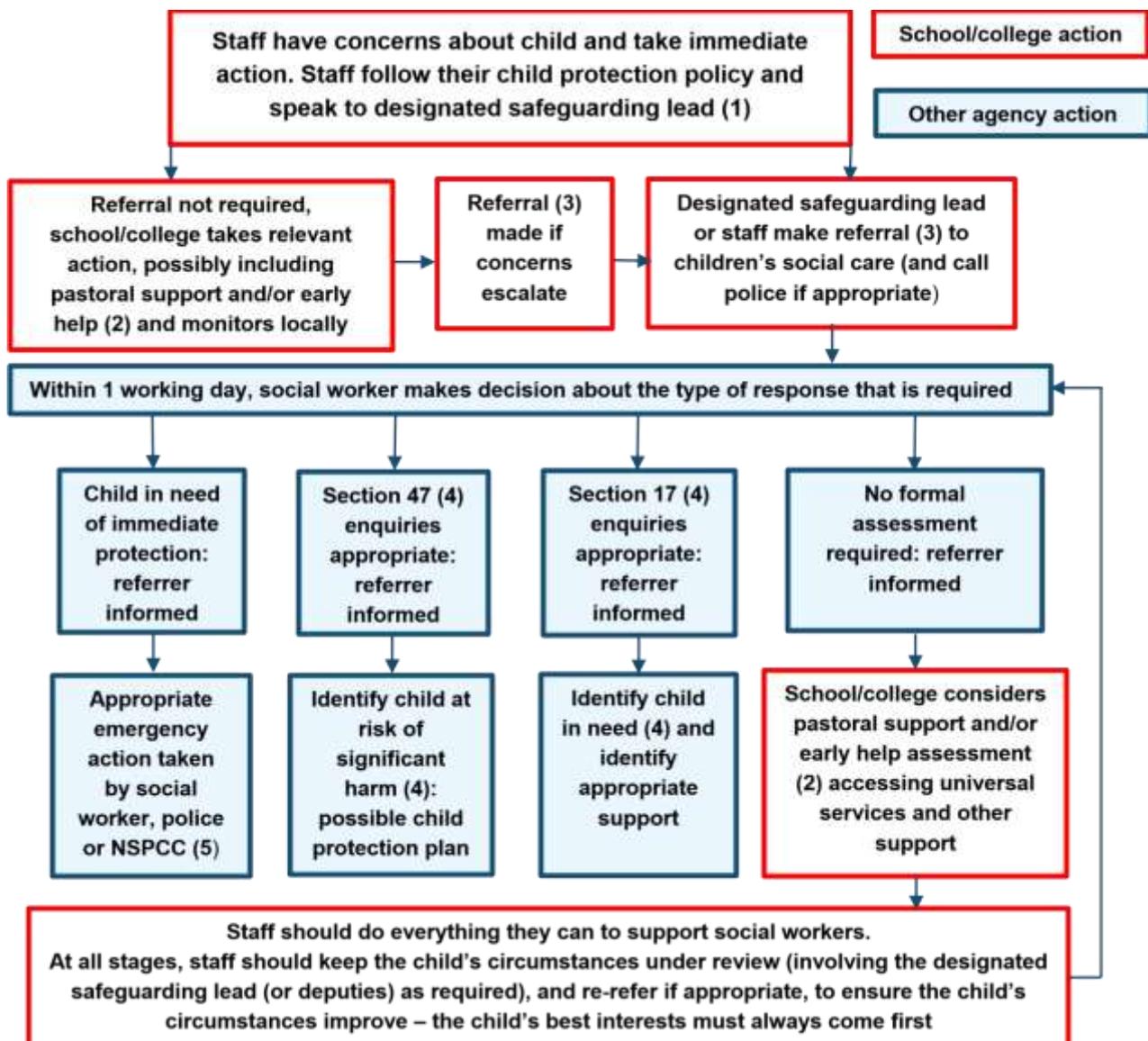
### **Responses from parents:**

Research and experience indicates that the following responses from parents may suggest a cause for concern across all four categories:

- An unexpected delay in seeking treatment that is obviously needed;
- An unawareness or denial of any injury, pain or loss of function (for example, a fractured limb);
- Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development;
- Reluctance to give information or failure to mention other known relevant injuries;
- Frequent presentation of minor injuries;

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- Unrealistic expectations or constant complaints about the child; Alcohol misuse or other drug/substance misuse;
- Parents request removal of the child from home; • Violence between adults in the household.

**Procedures:**



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- All staff have a duty to recognise concerns and maintain an open mind.

**Accordingly, all concerns indicating possible abuse or neglect will be recorded and discussed with the DSL (or in their absence with the person who deputises) prior to any discussion with parents.**

### **Staff must immediately report:**

- any suspicion that a child is injured, marked, or bruised in a way which is not readily attributable to the normal knocks or scrapes received in play;
- any explanation given which appears inconsistent or suspicious;
- any behaviours which give rise to suspicions that a child may have suffered harm (e.g. significant changes in behaviour, worrying drawings or play);
- any concerns that a child may be suffering from inadequate care, ill treatment, or emotional maltreatment;
- any concerns that a child is presenting signs or symptoms of abuse or neglect;
- any significant changes in a child's presentation, including non-attendance;
- any hint or disclosure of abuse or neglect received from the child, or from any other person, including disclosures of abuse or neglect perpetrated by adults outside of the family or by other children or young people;
- any concerns regarding person(s) who may pose a risk to children (e.g. staff in school or person living in a household with children present) including inappropriate behaviour e.g. inappropriate sexual comments; excessive one-to-one attention beyond the requirements of their usual role and responsibilities; or inappropriate sharing of images;
- any concerns relating to peer to peer abuse;
- any concerns relating to youth produced sexual imagery (sexting) (see Appendix 1)

### **Responding to Disclosure:**

Disclosures or information may be received from children, parents or other members of the public. Elevate and their Academies recognises that those who disclose such information may do so with difficulty, having chosen carefully to whom they will speak. Accordingly, staff will handle disclosures with sensitivity.

Such information cannot remain confidential and staff will immediately communicate what they have been told to the DSL and make a contemporaneous record. If in doubt about recording requirements staff should discuss with the DSL

### **Principles:**

Staff will not investigate but will, wherever possible, elicit enough information to pass on to the DSL in order that s/he can make an informed decision of what to do next.

### **Staff will:**

- Stay calm;
- Listen to and take seriously any disclosure or information that a child may be at risk of harm;

- Try to ensure that the person disclosing does not have to speak to another member of staff; • Clarify the information;
- Never enter into a pact of secrecy with the child. Assure her/him that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why;
- Tell her/him that you believe them. Children very rarely lie about abuse; but s/he may have tried to tell others and not been heard or believed;
- Tell the child that it is not her/his fault;
- Listen and remember;
- Try to keep questions to a minimum and of an 'open' nature e.g. 'Can you tell me what happened?' rather than 'Did x hit you?';
- Not ask leading questions;
- Try not to show signs of shock, horror or surprise;
- Not express feelings or judgements regarding any person alleged to have harmed the child;
- Explain sensitively to the person that they have a responsibility to refer the information to the senior designated person;
- Reassure and support the person as far as possible;
- Explain that only those who 'need to know' will be told;
- Explain what will happen next and that the person will be involved as appropriate and be informed of what action is to be taken.
- Praise the child for telling you. Communicate that s/he has a right to be safe and protected.
- Be aware that the child may retract what s/he has told you. It is essential to record all you have heard.
- At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.
- As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

### **Action by the DSL (or Deputy DSL/3<sup>rd</sup> nominated person in their absence):**

The following actions will be taken where there are concerns about significant harm to any child, including where there is already an open case to Children's Social Care, (e.g. Looked after Child)

### **Following any information raising concern, the DSL will consider:**

- Any urgent medical needs of the child;
- Whether to make an enquiry to the Customer Contact Centre 01609 780780 to establish if the child is or has been subject of a Child Protection Plan;
- Discussing the matter with other agencies involved with the family;
- Consulting with appropriate persons e.g. Prevention Service, Children's Social Care Numbers set out below;
- The child 's wishes and any fears or concerns they may have.

### **Early Help:**

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Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early help can also prevent further problems arising; for example, if it is provided as part of a support plan where a child has returned home to their family from care, or in families where there are emerging parental mental health issues or drug and alcohol misuse.

Effective early help relies upon local organisations and agencies working together to:

- identify children and families who would benefit from early help;
- undertake an assessment of the need for early help;
- provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child.

Elevate staff understand that any child may benefit from early help but will be particularly alert to the potential need for early help for a child who:

- is disabled and has specific additional needs;
- has special educational needs (whether or not they have a statutory Education, Health and Care Plan);
- is a young carer;
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups; • is frequently missing/goes missing from care or from home;
- is at risk of modern slavery, trafficking or exploitation;
- is at risk of being radicalised or exploited;
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;
- is misusing drugs or alcohol themselves

If early help is appropriate, the designated safeguarding lead (or deputy) will lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner. Any such cases should be kept under constant review and consideration given to a referral to children's social care for assessment for statutory services, if the child's situation does not appear to be improving or is getting worse.

DSL (or deputy) can make a referral for early help support services by contacting the customer contact centre 01609 780780 or get advice from the Area Prevention Managers.

This is a link to the Early help offer in North Yorkshire.

<https://www.northyorks.gov.uk/support-children-young-people-and-their-families>

**NYS CB Procedures for Referrals for children: see Appendix 5**

**CONTACT NUMBERS:**

**PREVENTION SERVICE**

Advice and Support from Area Prevention Managers

**West**

Craven	Caroline Porter	01609 532412
Ripon & Rural Harrogate	Jon Coates	01609 532323
Harrogate Town & Knaresborough	Rachel Yeadon	01609 533446

**Central**

Richmondshire	Vanessa Handley	01609 535682
Hambleton	Sharon Britton	01609 536468
Selby Town	Pat Scully	01609 532385 Rural
Selby	David Fincham	01609 534022

**East**

Whitby & The Moors	Diane Leith	01609 532479
Ryedale	Simon Osman	01609 798167
Scarborough Town	Liz White	01609 533139
Scarborough South & Filey	Simone Wilkinson	01609 532927

**Advice and Referral**

**CHILDREN AND FAMILIES' SERVICE**

Customer Contact Centre 01609 780780  
[Social.care@northyorks.gov.uk](mailto:Social.care@northyorks.gov.uk)

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For advice please ask to speak to a Team Manager in the Customer Service Centre

Emergency Duty Team 01609 780780

NORTH YORKSHIRE POLICE 101  
(Ask for the Serious Crime Team in your area)

### **SAFEGUARDING UNIT**

Safeguarding/Designated Officers for Managing Allegations (LADOs)

#### **Then decide:**

- Wherever possible, to talk to parents, unless to do so may place a child at risk of significant harm, impede any police investigation and/or place the member of staff or others at risk;
- Whether to make a referral to Children and Families' Service because a child is suffering or is likely to suffer significant harm and if this needs to be undertaken immediately;

#### **OR**

- Not to make a referral at this stage;
- If further monitoring is necessary;
- If it would be appropriate to undertake an assessment (e.g. CAF) and/or make a referral for other services

All information and actions taken, including the reasons for any decisions made, will be fully documented. All referrals to Children and Families' Service will be accompanied by a standard referral form. This can be downloaded via NYSCB:

<http://www.safeguardingchildren.co.uk/worried-about-child>

#### **Action following a child protection referral:**

It is the responsibility of all staff to safeguard children. It is the role of the DSL (or appropriately trained Deputy DSL.) to attend multi-agency meetings and provide reports for these. Other staff in school, however, may be asked to contribute.

#### **The DSL will:**

- make regular contact with Children's Social Care;
- contribute to the Strategy Discussion and all assessments;
- provide a report for, attend and contribute to any subsequent Child Protection Conference;
- if the child has a Child Protection Plan, contribute to the Child Protection Plan and attend Core Group Meetings and Review Child Protection Conferences;
- where possible, share all reports with parents prior to meetings;

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- where in disagreement with a decision made e.g. not to apply Child Protection Procedures or not to convene a Child Protection Conference, follow the NYSCB procedures;  
<http://www.safeguardingchildren.co.uk/professionals/professional-resolutions>
- where there is significant information in respect of a child subject to a Child Protection Plan, immediately inform the key worker or their manager in Children's Social Care e.g. any significant changes or concerns, departures from the CP plan, child moves/goes missing/is removed from school or fails to attend school

### **Recording and monitoring of child protection:**

**Child protection and safeguarding records will be held securely, with access being restricted to the DSL and their deputies, head teacher and in cases of Early Help, the nominated lead professional, if this is not a designated safeguarding lead.**

#### **The Academy will record:**

- Information about the child: name (aka) address, dob., those with parental responsibility, primary carers, emergency contacts, names of persons authorised to collect from the Academy, any court orders, if a child is or has been subject to a CP Plan;
- Key contacts in other agencies including GP details;
- Any disclosures/accounts from child or others, including parents (and keep original notes);
- Significant contacts with carers/other agencies/professionals;
- All concerns, discussions, decisions, agreements made and actions taken and the reasons for these (dated, timed and signed, to include the name and agency/title of the person responsible/ spoken to), the plan to protect the child and arrangements for monitoring/review

#### **All records should be objective and include:**

- Statements, facts and observable things (what was seen/heard);
- Diagram indicating position, size and colour of any injuries (not photograph);
- Words child uses, (not translated into 'proper' words);
- Non-verbal behaviours

All C.P. documents will be retained in a 'Child Protection' file, separate from the child's main file. This will be locked away and only accessible to the Head teacher and DSL. The file will be transferred as soon as possible to any school or setting the child moves to, clearly marked 'Child Protection, Confidential, for attention of DSL.' The file will be transferred separately from the main pupil file, ensuring secure transit and obtaining confirmation of receipt. The final school will retain the C.P. file until the child's 25th birthday.

If the child goes missing from education or is removed from roll to be educated at home then any Child Protection file should be copied and the copy sent to the:  
Safeguarding Unit Manager, County Hall, Northallerton, DL7 8AE.

When sharing confidential information about a member of staff or child, Elevate and their Academies has regard to its responsibilities under the Data Protection Act (DPA) 2018, GDPR

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and where relevant, the Education (Pupil Information) (England) Regulations 2005 and the Freedom of Information Act 2000. <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharingadvice>

### **School will monitor:**

Any cause for concern including where there could be serious child welfare concerns e.g.

- Injuries/marks
- Attendance
- Changes e.g. mood/ academic functioning
- Relationships
- Language
- Behaviour
- Demeanour and appearance
- Statements, comments
- Medicals
- Stories, 'news', drawings
- Response to P.E./Sport
- Family circumstances
- Parental behaviour/ care of child

The DSL will review all monitoring arrangements in the timescale and manner determined by circumstances, recorded and clearly understood by all concerned

### **Supporting the Child and Partnership with Parents and Carers:**

- Elevate and their Academies recognises that the child's welfare is paramount, however good child protection practice and outcome relies on a positive, open and honest working partnership with parents and carers;
- Whilst Elevate and their Academies may, on occasion, need to make referrals without consultation with parents and carers, they will make every effort to maintain a positive and supportive working relationship with them whilst fulfilling our duties to protect any child
- A secure, caring, supportive and protective relationship for the child will be provided;
- Children will be given a proper explanation (appropriate to age & understanding) of what action is being taken on their behalf and why;
- Elevate and their Academies will endeavour always to preserve the privacy, dignity and right to confidentiality of the child, parents and carers. The DSL will determine which members of staff 'need to know' personal information and what they 'need to know' for the purpose of supporting and protecting the children.

### **All action is taken in accordance with the following guidance:**

- Keeping Children Safe in Education (DfE, 2018)
- Working Together to Safeguard Children (DfE, 2018)

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- The PREVENT Duty - Counter-Terrorism and Security Act (HMG, 2015)

When new staff, volunteers or regular visitors join Elevate or their Academies they are informed of the safeguarding arrangements in place and the name of the DSL (and deputies) and how to share concerns with them.

Any member of staff, volunteer or visitor to any of Elevate's Academies who receives a disclosure or allegation of abuse, or suspects that abuse may have occurred **must** report it immediately to the DSL (or, in their absence, the deputy DSL or 3<sup>rd</sup> nominated person).

If a member of staff continues to have concerns about a child and feels the situation is not being addressed or does not appear to be improving, the staff member concerned should press for reconsideration of the case with the DSL.

**Refer to NYSCB Professional Resolutions**

Safeguarding contact details are displayed at the front of this policy and in each Academy to ensure that all staff have unfettered access to safeguarding support.

### **Professional Confidentiality:**

Confidentiality is an issue which needs to be discussed and fully understood by all those working with children, particularly in the context of child protection. A member of staff, volunteer or visitor must never guarantee confidentiality to a child and will not agree with a child to keep a secret as, where there is a child protection concern, this must be reported to the DSL and may require further investigation by appropriate authorities.

All staff members are informed of relevant information in respect of individual cases regarding child protection on a 'need to know basis' only.

Any information shared with a member of staff in this way is held treated confidentially.

### **Records and Information Sharing:**

Advice for practitioners providing safeguarding services to children, young people, parents and carers – DFE 2018.

Where there are concerns about the safety of a child, the sharing of information in a timely and effective manner between organisations can reduce the risk of harm. Whilst the Data Protection Act 2018 and GDPR place duties on organisations and individuals to process personal information fairly and lawfully, it is not a barrier to sharing information where the failure to do so would result in a child or vulnerable adult being placed at risk of harm. Similarly, human rights concerns, such as respecting the right to a private and family life would not prevent sharing where there are real safeguarding concerns. Fears about sharing information cannot be allowed to stand in the way of the need to safeguard and promote the welfare of children at risk of abuse or neglect.

Well-kept records are essential to good child protection practice. Elevate and our Academies are clear about the need to record any concern held about a child or children within their academies, the status of such records and when these records should be shared with other agencies.

### Information Sharing:

- If a child transfers from one of our Academies to another school, their child protection records will be forwarded to the new educational setting within 15 days. This is a legal requirement set out under regulation 9 (3) of 'The Education (Pupil Information – England) Regulations 2005. These will be marked 'Confidential' and for the attention of the receiving school's DSL, with a return address on the envelope so it can be returned to us if it goes astray. A copy of the chronology must be retained for audit purposes.
- Where there is an existing risk management plan/assessment in place for behaviours that are deemed potentially harmful to the child or others (i.e self-harming or harmful sexualised behaviour), this information must be shared with the destination provision **prior** to the child starting so that appropriate care and control measures can be put in place to mitigate the potential of any risk of further harm occurring. The DSL should also consider if it would be appropriate to share any information with the new school or college in advance of a child leaving, for example prior to a transfer programme.
- Where a child leaves a school before statutory school leaving age, the child protection file must be transferred to the new school or college. There is no need to keep written or electronic copies of the child protection records, therefore these must be deleted from electronic systems once the successful transfer has been confirmed. The exception to this rule will be in any of the following instances:
  - Pupil records should be transferred in a secure manner, for example, through secure electronic file transfer or by hand. When hand-delivering pupil records, a list of the names of those pupils whose records are being transferred and the name of the school/college they are being transferred to must be made and a signature obtained from the receiving school/college as proof of receipt. When sending records through secure electronic file transfer, a delivery and read receipt of the transfer must be retained for audit purposes.
  - If a child moves from the Academy, child protection records will be forwarded onto the named DSL at the new school, with due regard to their confidential nature. Good practice suggests that this should always be done with a face to face handover between designated staff or a verbal conversation is had over the telephone if a face to face handover is not possible. A signed receipt of file transfer or an electronic delivery and read receipt (*delete as appropriate*) must be obtained for audit purposes by the delivering Academy.
- **Re permanent exclusion:** If a pupil is permanently excluded and moves to an alternative or specialist provision, child protection records will be forwarded onto the relevant organisation

in accordance with the 'The Education (Pupil Information – England) Regulations 2005, following the above procedure for delivery of the records.

- **Home schooling:** If a parent chooses to electively home educate (EHE) their child, the head teacher must complete and submit the Common Transfer File (CTF) which are uploaded to S2S using the DFE Secure Access Website: <https://sa.education.gov.uk/idp/Authn/UserPassword/>
- **By post:** If sending by post, children records should be sent “Special Delivery”. A note of the special delivery number should also be made to enable the records to be tracked and traced via Royal Mail.
- **Audit:** For audit purposes a note of all pupil records transferred or received should be kept in either paper or electronic format. This will include the child’s name, date of birth, where and to whom the records have been sent, and the date sent and/or received. A copy of the child protection chronology will also be retained for audit purposes and kept securely.
- **DSL leaves:** When a DSL member of staff resigns their post or no longer has child protection responsibility, there should be a full face to face handover/exchange of information with the new post holder. In exceptional circumstances when a face to face handover is unfeasible, it is the responsibility of the head teacher to ensure that the new post holder is fully conversant with all procedures and case files.
- All DSLs receiving current (live) files or closed files must keep all contents enclosed and not remove any material.
- All receipts confirming file transfer must be kept in accordance with the recommended retention periods. For further information refer to the archiving section.

### Archiving and Destruction of Documents:

Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse, will make an accurate record as soon as possible noting what was said or seen (if appropriate, using a body map to record see Appendix 3), giving the date, time and location. All records will be dated and signed and will include the action taken. This is then presented to the DSL (or Deputies), who will decide on appropriate action and record this accordingly.

Any records related to child protection are kept in a child protection file (which is separate to the pupil file) in chronological order. All child protection records are stored securely and confidentially and will be retained for 25 years after the child’s date of birth.

**Destruction of Documents:** Where records have been identified for destruction, they should be disposed of securely at the end of the academic year (or as soon as practical before that time). Records which have been identified for destruction should be confidentially destroyed. This is

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because they will either contain personal or sensitive information, which is subject to the requirements of Data Protection legislation or they will contain information which is confidential to the Academy or the Local Education Authority. Information should be shredded (or deleted as appropriate) prior to disposal or confidential disposal can be arranged through private contractors. For audit purposes the Academy should maintain a list of records which have been destroyed and who authorised their destruction. This can be kept securely in either paper or an electronic format.

## **Working with Parents and Other Agencies to Protect Children:**

### **Parents/carers:**

- Should be aware that the Academy will take any reasonable action to safeguard the welfare of its children. In cases where the Academy has reason to be concerned that a child may be suffering significant harm, ill treatment or neglect or other forms of harm, staff have no alternative but to follow the North Yorkshire Safeguarding Child Board and contact NYCC LADO to discuss their concerns.
- In keeping with KCSIE, the Academy will endeavour wherever possible to obtain at least two emergency contacts for every child in the Academy in case of emergencies, and in case there are welfare concerns at the home.
- In general, the Academy will discuss concerns with parents/carers before approaching other agencies and will seek to inform parents/carers and receive their consent when making a referral to another agency. Appropriate staff will approach parents/carers after consultation with the DSL. The exception to this rule will be in situations where a member of staff has reasonable cause to believe that informing parents/carers of a referral to another agency may increase the risk of significant harm to the child.
- Parents/carers are informed about Elevate's Safeguarding & Child Protection policy through: school prospectus, website, newsletters etc. A safeguarding & child protection statement is prominent in the Academy foyer/reception area.

### **Interagency Working:**

It is the responsibility of the DSL to ensure that each Academy is represented at, and that a report is submitted to, any child protection conference called for children on the Academy roll or previously known to them. Where possible and appropriate, any report will be shared in advance with the parent(s) / carer(s). Whoever attends will be fully briefed on any issues or concerns the Academy has and be prepared to contribute to the discussions at the conference.

If a child is subject to a Child Protection or a Child in Need plan, the DSL will ensure the child is monitored regarding their Academy attendance, emotional well-being, academic progress, welfare and presentation. If the Academy is part of the core group, the DSL will ensure the Academy is represented, provides appropriate information and contributes to the plan at these meetings. Any concerns about the Child Protection plan and / or the child's welfare will be discussed and recorded at the core group meeting, unless to do so would place the child at

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further risk of significant harm. In this case the DSL will inform the child's key worker immediately and then record that they have done so and the actions agreed.

### **Allegations About Members of the Workforce:**

All staff members are made aware of the boundaries of appropriate behaviour and conduct. These matters form part of staff induction and are outlined in the Staff Code of Conduct.

Elevate and their Academies work in accordance with statutory guidance and the Local Authority in respect of allegations against an adult working with children (in a paid or voluntary capacity).

**For further guidance: *NYCC/Leeds managing-allegations against staff***

**These procedures should be used in respect of all cases in connection with the person's employment or voluntary activity where it is alleged that a person who works with children has:**

- └ Behaved in a way that has harmed a child, or may have harmed a child;**
- └ Possibly committed a criminal offence against or related to a child, or**
- └ Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children.**

Elevate and their Academies have processes in place for reporting any concerns about a member of staff (or any adult working with children).

**Any concerns about the conduct of a member of staff will be referred to the Head teacher (or the Deputy Head teacher in their absence). This role is distinct from the DSL as the named person should have sufficient status and authority in the Academy to manage employment procedures.** Staffing matters are confidential and the Academy must operate within statutory guidance around Data Protection.

**Head teacher:** Where the concern involves the Head teacher, it should be reported direct to the Chair of Governors.

Elevate procedures require that, where an allegation against a member of staff is received, the Head teacher, senior named person or the Chair of Governors must inform:

1. Elevate's compliance officer on **077695 82025**, unless that person is the subject of the allegation, or where their relationship with the subject could compromise their independence, in which cases it should be reported to the CEO; and
2. The duty Local Authority Designated Officer (LADO) in the Children's Workforce Allegations Management Team within one working day.  
**NYCC LADO: 01609 532477.**

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However, wherever possible, contact with the LADO should be made immediately as they will then advise on how to proceed and whether the matter requires Police involvement. This will include advice on speaking to children and parents and HR. The LADO will provide an objective view.

**Elevate and their Academies will not carry out any investigation before speaking to the LADO.**

If there is an immediate risk, appropriate actions may need to be taken e.g. urgent involvement of police, removal of member of staff, securing evidence or urgent medical attention.

Staff who become aware of an allegation about a person from another agency should report this to their agency's Safeguarding Lead without delay who should in turn inform the LADO straight away.

If requested by LADO a referral should be sent to them using the LADO Referral Form which can be downloaded giving as much detail as possible.

**<http://www.safeguardingchildren.co.uk/worried-about-child>**

Completed LADO Referral Forms should be emailed using secure mail (e.g. gcsx, pnn, cjsm, nhs.net, egress, etc.) to [social.custodian@northyorks.gcsx.gov.uk](mailto:social.custodian@northyorks.gcsx.gov.uk).

Egress users please email to [safeguardingunit@northyorks.gov.uk](mailto:safeguardingunit@northyorks.gov.uk). If you do not have secure email please contact 01609 532477.

The LADO will consult, as appropriate, with Children's Social Care and/or the Police to consider:

If a CSC or a police response may be appropriate and if a Strategy Meeting and/or an Evaluation Meeting needs to be held;

If the allegation should be managed solely by the employer (with the proviso that, if further information comes to light suggesting a child protection response or criminal response may be necessary, then a further consultation will take place).

**Procedure/Initial Action:**

- The person who has received an allegation or witnessed an event MUST immediately inform the

Head teacher and make a record and have regard to Elevate's whistleblowing procedure; • In the event that an allegation is made against the Head teacher the matter will be reported to the Chair of Governors who will proceed as the 'head teacher';

- The head teacher will take steps, where necessary, to secure the immediate safety of children and any urgent medical needs; • The member of staff will not be approached at this stage unless it is necessary to address the immediate safety of children;
- The Head teacher may need to clarify any information regarding the allegation, however no person will be formally interviewed or asked to write a formal statement at this stage;

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- The Head teacher will consult with the Duty LADO (01609 532477) in order to determine if it is appropriate for the allegation to be dealt with by Elevate or if there needs to be a referral to social care and/or the police for investigation;
- Consideration will be given throughout to the support and information needs of children, parents and staff;
- The head teacher will inform the Chair of Governors of any allegation.

### **DBS:**

The Academy has a legal duty to refer to the DBS anyone who has harmed or poses a risk of harm, to a child or vulnerable adult where:

- The harm test is satisfied in respect of that individual;
- The individual has received a caution or conviction for a relevant offence, or if there is reason to believe that the individual has committed a listed relevant offence, and;
- The individual has been removed from working (paid or unpaid) in regulated activity, or would have been removed had they not left.

Referrals should be made as soon as possible, and ordinarily on conclusion of an investigation, when an individual is removed from working in regulated activity, which could include being suspended, or is redeployed to work that is not regulated activity.

### **EYFS:**

Where an Early Years' provider is registered with OFSTED, the provider must inform Ofsted of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere). The provider must also notify Ofsted of the action taken in respect of the allegations. These notifications must be made as soon as is reasonably practicable, but at the latest within 14 days of the allegations being made.

Please also see additional requirements in the EYFS 2017.

### **Whistleblowing:**

Whistleblowing is 'making a disclosure in the public interest' and occurs when a worker (or member of the wider school community) raises a concern about danger or illegality that affects others, for example children in the Academies or members of the public.

All staff are made aware of the duty to raise concerns about the attitude or actions of staff in line with the Elevate's Code of Conduct / Whistleblowing policy.

Elevate and their Academies want everyone to feel able to report any child protection / safeguarding concerns. However, for members of staff who feel unable to raise these concerns internally, they can call the NSPCC whistleblowing helpline on: 0800 028 0285 (line is available from 8:00 AM to 8:00 PM, Monday to Friday) or email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

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Parents or others in the wider school community with concerns can contact the NSPCC general helpline on: 0808 800 5000 (24 hour helpline) or email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

The Head of Internal Audit, Veritau can be contacted by writing a letter in a sealed envelope marked Strictly Private and Confidential, addressed to:

Max Thomas (Head of Internal Audit)

Veritau Ltd

County Hall

Racecourse Lane

Northallerton

North Yorkshire DL7

8AL

or by telephoning (01609) 532143. In addition there is a direct and confidential whistleblowing hotline number (01609) 760067, which is available 24 hours a day.

## Safer Recruitment and Selection:

### KCSIE 2018 Part 3

Elevate and their Academies pay regard to the Protection of Freedoms Act 2012; the Childcare (Disqualification) Regulations 2009 and NYCC Schools' Recruitment procedures and guidance (login required).

Elevate and their Academies ensure that all appropriate measures are applied in relation to everyone who works in or on behalf of Elevate who are likely to be perceived by the children as a safe and trustworthy adult.

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Safer recruitment practice includes scrutinising applicants, verifying identity and academic or vocational qualifications, obtaining professional and character references, checking previous employment history and ensuring that a candidate has the health and physical capacity for the job. When undertaking interviews, Elevate has regard to the principles of Value Based Interviewing [www.nspcc.org.uk](http://www.nspcc.org.uk)

Where appropriate, Elevate and their Academies undertake checks of/has regard to:

- the Disclosure and Barring Service (DBS) Children's
- the Teacher prohibition list and has regard to
- the requirements of the Childcare (Disqualification)
- Regulations 2009
- any Section 128 direction

### Disclosure of convictions:

All Elevate staff are made aware:

- that they are required to notify their line manager of any convictions or cautions during employment with Elevate or receive a Penalty Notice for Damage or Penalty Notice for Disorder. For those who drive on business at any point during their employment (Authority's vehicle or own vehicle), this includes all motoring offences dealt with through the courts and penalty points on driving licences - whether awarded by a court or through fixed penalty notices;
- about the expectations of their conduct including where their relationships and associations both within and outside the work place, including on line, may have implications for the safeguarding of children in the Academy;

All Elevate staff will inform school immediately of any change in their circumstances that may affect their suitability to work with children.

Staff employed to provide childcare are made aware that they are expected to disclose any convictions, cautions, court orders, reprimands and warnings which may affect their suitability to work with children (whether received before or during their employment at the school/setting) or any circumstances which could lead to consideration of disqualification.

Statutory changes, underpinned by regulations, are that:

- Academies must keep a single central record detailing a range of checks carried out on their staff, including supply staff, and teacher trainees on salaried routes and all member of the proprietor body.
- an Enhanced DBS check is obtained for **all** new paid appointments at Elevate; • an Enhanced DBS check is obtained for volunteers further to a risk assessment; considering the regularity, frequency, duration and nature of contact with children and the level of supervision of the volunteer by another person engaging in regulated activity; • Elevate will ensure that any contracted staff are DBS checked where appropriate;

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- Elevate will ensure that a check of any teacher prohibitions, including interim orders, is made on all teachers;
- all new appointments to Elevate who have lived outside the UK are subject to additional checks as appropriate;
- Independent schools: S.128 checks for persons in management roles;
- Elevate and their Academies must satisfy themselves that agency and third-party staff have undergone the necessary checks;
- identity checks must be carried out on all appointments to Elevate before the appointment is made;
- On line materials available on NSPCC website

### Private Fostering:

[www.safeguardingchildren.co.uk/admin/uploads/practice-guidance/private-fostering-pg.pdf](http://www.safeguardingchildren.co.uk/admin/uploads/practice-guidance/private-fostering-pg.pdf) For further information see the LSCB practice guidance

Under the Private Fostering Arrangements (2005), professionals who come into contact with children, for example teachers, religious leaders, health care staff are under a duty to inform the Children and Families Service about any private fostering arrangements they are made aware of. To make a notification of a private fostering arrangement professionals should call 01609 780780. (North Yorkshire)

Private fostering is when children and young people under the age of 16 years or under 18 if they are disabled, are cared for on a full time basis by a person who is not their parent, who does not have parental responsibility or who is not a "close relative" for 28 days or more. Close relatives are defined as:

- grandparents
- brothers and sisters
- uncles and aunts, or
- step-parents (if married to the partner or in civil partnership)

There are many circumstances in which an unmarried partner becomes the carer for a child. A parent's unmarried partner is not a step-parent in this context. It is a common misunderstanding and parents/carers are often unaware of the legal requirements to notify the local authority of a private fostering arrangement.

### Curriculum:

#### Elevate and their Academies are committed to ensuring:

- that children are aware of behaviour towards them that is not acceptable, how they can keep themselves safe and how to complain.
- All children know that their Academy has a DSL with responsibility for child protection and know who this is.

## Academy logo

- The Academies will inform children of whom they might talk to, both in and out of their Academy, their right to be listened to and heard and what steps can be taken to protect them from harm.
- There are opportunities in the curriculum, for example through the Personal, Social, Health Education (PSHE) curriculum and by providing an age-related, comprehensive curriculum, for children to be taught about aspects of safeguarding to develop the knowledge and skills they need to recognise and stay safe from abuse, including on-line safety.

**This is done by:**

- developing healthy relationships and awareness of domestic violence, bullying, child sexual orientation, gender-based violence, hate, relationship abuse, faith abuse and abuse ;
- recognising and managing risks including online, including cyber bullying and online grooming for sexual exploitation and radicalisation enabling children to become safe and responsible users of technologies and the impact of new technologies on sexual behaviour, for example sexting and accessing pornography;
- enabling children to develop knowledge, skills and attitudes consistent with the promotion of fundamental British values;
- recognising how pressure from others can affect their behaviour, including the risks of radicalisation to extremist behaviour;
- ensuring children have the opportunity to discuss controversial issues and develop tolerance and respect for others;
- raising awareness of female genital mutilation and forced marriage; ○ making available appropriate local and online advice.

Additional aspects of safeguarding included in the curriculum are risks associated with:

- substance misuse; ○ gangs and youth violence; ○ mental health; ○ water, fire, roads and railways.

### **Elevate and their Academies:**

- Have updated the curriculum aspects of related policies to ensure that they are aligned to this Child Protection and Safeguarding policy. This includes the Academies online safety, sex and relationships, substance misuse, smoke-free policy and anti-bullying policies.
- Recognise the statutory duty, since April 2014, to publish information about the content of their PSHE curriculum on their websites.
- Recognise the importance of using age appropriate curriculum resources and ensuring that there is a safe climate for learning which includes the setting of ground rules.

Parents /carers are invited to view any resources and discuss any concerns they have over any curriculum content within our PSHE curriculum provision. Arrangements can be made by contacting the Head teacher of their Academy in the first instance.

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Training needs of staff are regularly reviewed to ensure that staff who are delivering safeguarding aspects of PSHE or online safety have the appropriate knowledge and skills.

- Monitor and evaluate the impact of the safeguarding taught curriculum provision through Elevate's and their Academies based monitoring and evaluation processes which include lesson observation, work scrutiny, feedback from children, staff and parents/carers, data from the bi-annual Growing Up in North Yorkshire survey.

### **Visitors:**

Elevate and their Academies shall use the Elevate safeguarding and fire safety leaflet template which will be handed to visitors when they register their presence at the Academy office.

## Appendix 1:

### Sexting: how to respond to an incident

An overview for all teaching and non-teaching staff in schools and colleges



This document provides a brief overview for frontline staff of how to respond to incidents involving 'sexting'.

**All** such incidents should be reported to the Designated Safeguarding Lead (DSL) and managed in line with your school's safeguarding policies.

The DSL should be familiar with the full 2016 guidance from the UK Council for Child Internet Safety (UKCCIS), ***Sexting in Schools and Colleges: Responding to Incidents and Safeguarding Young People***, and should **not** refer to this document instead of the full guidance.

#### What is 'sexting'?

In the latest advice for schools and colleges (UKCCIS, 2016), sexting is defined as **the production and/or sharing of sexual photos and videos of and by young people who are under the age of 18**. It includes nude or nearly nude images and/or sexual acts. It is also referred to as 'youth produced sexual imagery'.

'Sexting' does not include the sharing of sexual photos and videos of under-18 year olds with or by adults. This is a form of child sexual abuse and must be referred to the police.

#### What to do if an incident involving 'sexting' comes to your attention Report it to your Designated Safeguarding Lead (DSL) immediately.

- **Never** view, download or share the imagery yourself, or ask a child to share or download – **this is illegal**.
- If you have already viewed the imagery by accident (e.g. if a young person has showed it to you before you could ask them not to), report this to the DSL.
- **Do not** delete the imagery or ask the young person to delete it.
- **Do not** ask the young person(s) who are involved in the incident to disclose information regarding the imagery. This is the responsibility of the DSL.
- **Do not** share information about the incident to other members of staff, the young person(s) it involves or their, or other, parents and/or carers.
- **Do not** say or do anything to blame or shame any young people involved.
- **Do** explain to them that you need to report it and reassure them that they will receive support and help from the DSL.

If a 'sexting' incident comes to your attention, report it to your DSL. Your school's safeguarding policies should outline codes of practice to be followed.

#### For further information

Download the full guidance [Sexting in Schools and Colleges: Responding to Incidents and Safeguarding Young People](http://www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis) (UKCCIS, 2016) at [www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis](http://www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis).

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**Appendix 2:** List of policies and documents linked to this policy

Keeping Children Safe in Education 2018  
Academy Behaviour policy  
Academy Anti Bullying policy  
Academy staff behaviour policy/code of conduct  
Elevate Children Missing in Education policy  
Elevate Complaints policy  
Elevate Whistleblowing policy

Guidance for Safer working practices  
NYCC Managing Allegations against staff

### Appendix 3: e.g. of Safeguarding Leaflet:

**Key Academy Contacts:**

**Head teacher:**

**Child Protection & Complaints:**

**Health & Safety:**

**Chair of Governors:**

**Chair of Trustees:**

**CEO:**

Academy, Address

Telephone number:

Email:

Website:

Elevate Multi Academy Trust  
Halfpenny Lane, Knaresborough,  
North Yorkshire HG5 0SL  
Registered Number: 10814201

**Please report any Child Protection or Health & Safety concerns to the Main Academy Office IMMEDIATELY.**

**Accidents:** must be reported to the Main Academy Office where an Accident Report Form can be completed.

**Fire Alarm:** If the fire alarm sounds, please make your way out of the building calmly and promptly by following the green FIRE EXIT signs.

**Nuts:** Nuts are not allowed on these premises.

**Smoking:** is not permitted on any part of these premises.

**Please remember to sign out and return your visitors badge to the Main Academy Office before leaving the premises, even if you are due to return on the same day.**

ACADEMY LOGO

## WELCOME TO NAME ACADEMY

A member of Elevate Multi Academy Trust

### A Guide for Visitors and Volunteers

#### Safeguarding Health & Safety

Meadowside Academy recognises and promotes their responsibilities for Child Protection and Health & Safety.

#### Visitor Procedures

All visitors must sign in at Main Academy Office

- All visitors will be issued with a visitor's badge which must be displayed at all times.
- Visitors may be asked to provide identification.
- Visitors will be asked to remain under the supervision of a designated member of staff.
- All visitors must sign out at the Main Academy Office before leaving.

Visitors wishing to see a particular member of staff should contact the Academy to make an appointment. If you are seeking an urgent appointment please report to the Main Reception and we will arrange for you to see a member of staff.

#### North Star Visitors

- All visitors from an Alliance School MUST wear their school ID Badge in addition to a Visitor's badge.
- Visitors without their school ID badge will be asked for identification.

#### E-Safety

**Mobile Phones:** to protect our children please do not have your phone out or use it during your time at our Academy. If this is an issue please contact a member of staff on arrival.

**Photographs:** under no circumstances should you take photographs of our children whilst at our Academy.

**Child Protection:** Our children are frequently reminded about personal safety and child protection issues. If staff or children approach you, please confirm you are visiting the Academy and show them your Visitors badge.

Should you have a Child Protection concern, please report this to the Main Academy Office immediately so they may inform the Designated Person for Child Protection

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Child abuse happens to all children regardless of gender, culture, religion, social background and those with or without a disability.

### **Visitor Code of Conduct**

- Treat everyone with respect;
- Act as a positive role model at all times, displaying high standards in the use of language, manner, punctuality and preparation;
- Remember someone else may misinterpret your actions no matter how well intended;
- Inform a member of staff of any inappropriate behaviour;
- Follow the instructions given to you by the class teacher if you are working with children and respect the guidance of the teacher at all times;
- Ensure you are visible by a member of staff if you are with children;
- Never share personal information with a child. If a child tries to share these details with you, you should inform the class teacher as soon as possible;
- If you are concerned about the conduct of a member of staff during your visit you should inform a key Academy contact;
- Do not leave equipment unattended; • Keep information confidential.

### **Health and Safety**

**Fire:** Please make yourself aware of the nearest fire exit when you arrive.

In the event of a fire alarm please use the nearest fire exit and make yourself known to a member of staff. Do not enter the building again unless you are informed by a member of staff that it is safe to do so.

**Accidents and Illness:** Should you have an accident or feel unwell during your visit, please report to the Main Academy Office. If you are unable to make your way to the office please inform a staff member. All accidents will be logged in the accident book.

**Comfort Break:** Should you require a comfort break during your visit a member of staff will be happy to direct you to our adult facilities.

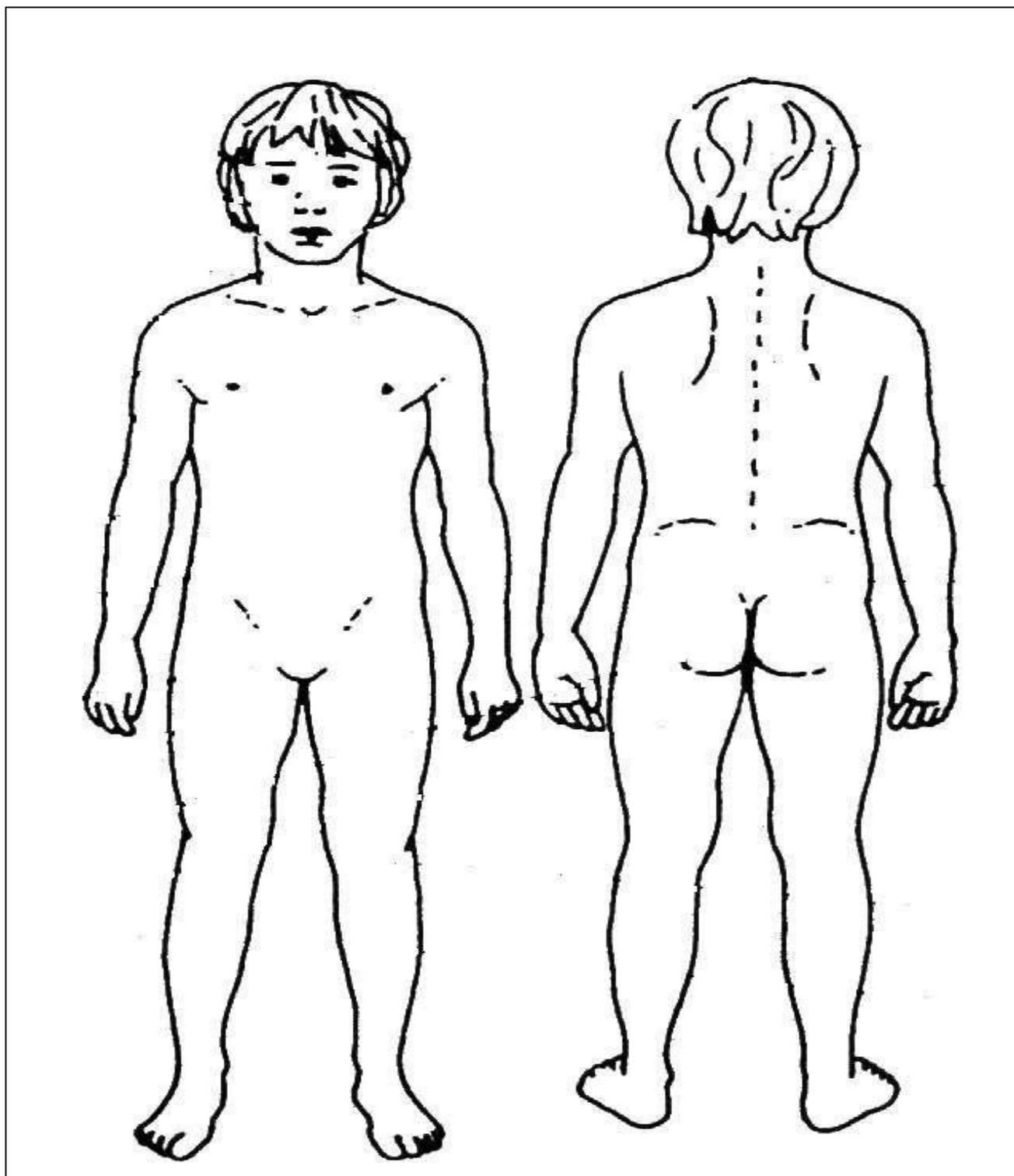
### **Pupil Behaviour**

During your visit you might observe a child struggling to manage their behaviour. We would like to reassure you that staff have been trained to manage these situations keeping the child, themselves and others safe. You can help by moving away. Please be aware that a member of staff may ask you to leave the room until the situation has calmed.

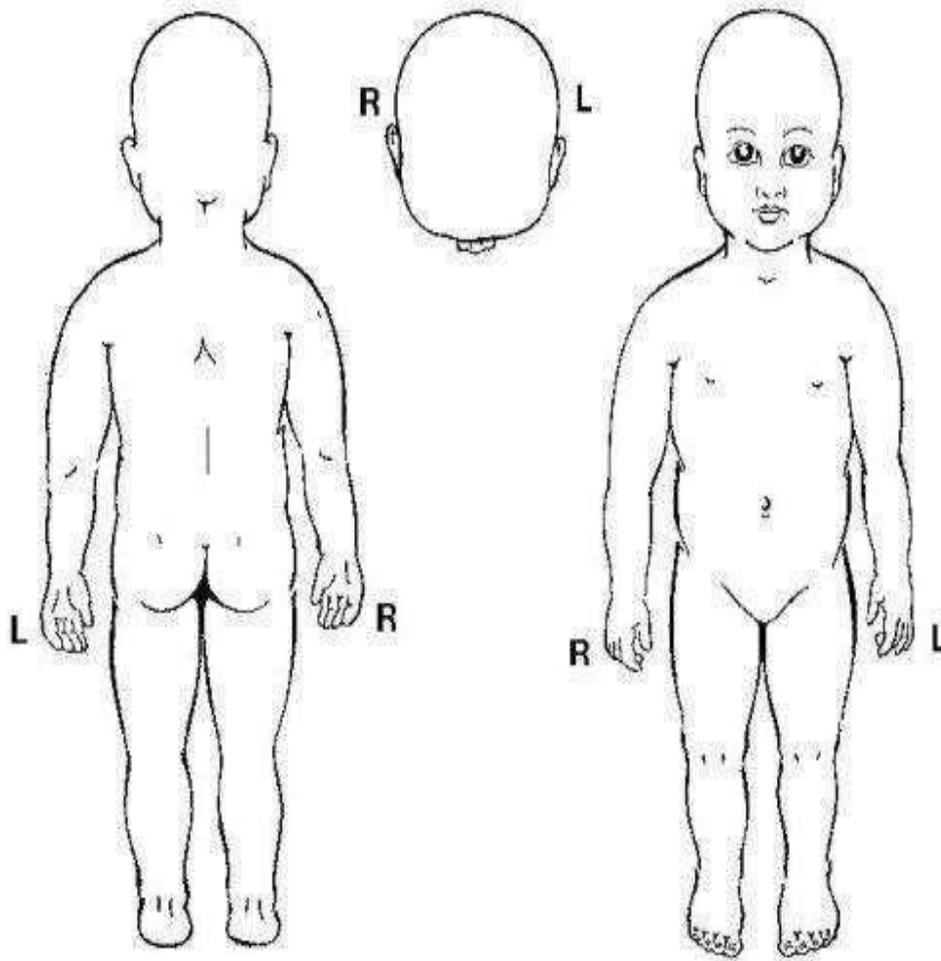
**A copy of the Trust's Child Protection and Safeguarding policy is available upon request from the Main Academy Office.**

## Appendix 4 – Body Maps

### Child body map



## Baby/infant Body Map



## Appendix 5:

### **NYSCB: Referral Process – for children**

#### **Immediate Referrals to North Yorkshire Children and Families Service**

Where there are significant immediate concerns about the safety of a child or children, professionals should contact the Customer Contact Centre on (01609) 780780 and make a referral, or contact the police on 999.

#### **North Yorkshire County Council Customer Contact Centre**

All contacts to the North Yorkshire County Council (NYCC) Customer Contact Centre relating to children are initially passed to the Customer Contact Centre Screening Team by the Specialist Advisors. This team screen all of these contacts.

The Customer Contact Centre Screening Team is made of a Team Manager, Assistant Team Manager and Social Workers. There is also a Prevention Service worker attached to this team and a Police representative. This team will decide the most appropriate outcome for the management of the contact that has been received. The contact may be passed to the appropriate prevention service, children's social care team, the disabled children's service or be redirected to another alternative and appropriate service. Relevant advice and information will be given to the referrer as required.

#### **Coordinated Early Intervention**

Children and their families who receive early support are less likely to develop difficulties that require intervention through a statutory assessment under the Children Act 1989. A common assessment (CAF) is completed with the agreement of parents so that prevention services can work with the family to identify what help the child and family might need to reduce an escalation of needs.

Upon receipt of the referral to the Children and Families Service, the Prevention Service in the local team, the relevant Area Prevention Manager will allocate the assessment to a Family Outreach Worker.

The Family Outreach Worker should clarify with the referrer, the nature of the concerns and how and why they have arisen.

The child and family must be informed of the action to be taken.

The Family Outreach Worker should contact the family within three working days.

#### **The Common Assessment Framework (CAF)**

Children, young people and families experience a range of needs at different times in their lives. The common assessment framework is a way of working out what extra support a child may need and how best to provide it. This assessment will be concluded within a **maximum of 20 working days**. At the conclusion of the assessment if the outcome is for Prevention Services to be provided, a plan will be produced which is reviewed on a six weekly cycle. The framework means that children, young people and families only have to tell their story once and have one main point of contact.

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The framework is used when:

- A professional is worried about how well a child or young person is progressing. For example, they may have concerns about their health, development, welfare, behaviour or progress in learning;
- A child or young person, or their parent or carer, raises a concern with a professional; or
- A child's or young person's needs are unclear, or are broader than an individual service can address.

The framework assessment is a voluntary process and a professional must get consent from the child or young person and/or their parent or carer before completing the assessment. The assessment form records:

- What is going well for the child and their family
  - What are the difficulties faced by the child and their family and
  - What interventions may be needed to enable the child and their family to overcome their difficulties
- Protocols and guidance are in place in North Yorkshire in relation to criteria for referral. Common Assessments are focussed on 'Level Two: Coordinated Early Intervention' on the spectrum of need as defined by the North Yorkshire Safeguarding Children's Board (NYSCB). More information may be found in the Vulnerability Checklist, which can be found on the NYSCB website.

Completing a common assessment should:

- Enable the professional to identify the child's needs;
- Potentially provide a structure for systematic gathering and recording of information;
- Record evidence of concerns and a base line for measuring progress in addressing them; Potentially provide a framework for a referral discussion to Children's and Families Service for an assessment or to another service for a specialist assessment.

Where the plan involves other agencies a multi-agency meeting may be required to coordinate these actions.

The lead worker responsible for the co-ordination of the plan is able, where required to coordinate multi-agency meetings involving the family and relevant agencies.

- A multi-agency meeting (often referred to as a Team Around the Child or TAC meeting) to coordinate intervention services for the child and their family.
- Families, including children and young people, will be invited to attend and supported to participate fully in the meetings.
- Prior to the meeting, all agencies and partnerships will consider the Common Assessment Framework areas in order to provide any relevant information they hold on the named child/ children.
- The multi-agency action plan will be completed for each child at the meeting. A lead professional will be identified for the implementation of each action plan, taking into account any views from the child, young person or family.
- A review date will be set for the action plan.
- If as a result of the assessment or action planning meeting, it is identified that the child requires a specific specialist service, e.g. specialist health service, the common assessment information will be passed to that service as part of the referral.
- If the case transfers to another service lead, relevant information and case management responsibility will be passed to the appropriate service.

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### **Children's Social Care Locality Allocation Meetings**

Children's Social Care Locality Allocation Meetings provide an opportunity to bring together professionals from the Children and Families Service (Children's Social Care and Prevention) to discuss cases that are being considered to step up and down between services. These discussions may lead to:

- Advice being given
- A case being escalated to or de-escalated from children's social care or the arranging of a multi-agency meeting (see below), or a case being transferred to another agency.

### **Sharing information, confidentiality and consent**

Common assessments cannot be undertaken without consent. Consent should be written, informed and explicit, clearly explaining the process, the information that will be shared and with whom and options to refuse, limit or withdraw consent and any implication that may have on service delivery.

Information held on a common assessment, action plan and correspondence will be held for six years after the completion of the intervention, and then securely destroyed. The date of destruction will be recorded. Where the lead professional's agency's retention periods are longer than six years records will be held in line with statutory guidance (e.g. where a child that becomes looked after, information held by Children's Social Care relating to this child will be retained for 75 years after case closure in line with statutory guidance).

Information to be shared with another agency will usually require explicit consent but where there are concerns for the welfare or safety of the child, the need for consent changes where it is believed that a child has or is likely to suffer:

- Significant harm and/or;
- Has developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent).

### **The Lead Professional**

The lead worker performs three core functions:

- To act as a single point of contact for the child or family;
- To co-ordinate the delivery of the actions agreed;
- To reduce overlap and inconsistency in the services received.

Many professionals working with children already undertake these functions as part of their role.

A lead worker is accountable to their agency for their delivery of their actions within the plan.

They are not responsible or accountable for the actions of other agencies within the plan.

### **Referrals to Children's Social Care and the Disabled Children's Service**

All individuals working with children have a duty and responsibility to report any child protection allegations and concerns which come to their attention.

The Children Act 1989 identifies the Local Authority requirement to provide services for children in need for the purposes of safeguarding and promoting their welfare. Local Authorities undertake assessments of the needs of individual children to determine what services to provide and action to take.

A 'child in need' is defined under the Children Act 1989 as a child who is unlikely to achieve or maintain a satisfactory level of health or development, or their health and development will be significantly impaired, without the provision of services; or a child who is disabled. In these cases, assessments by a social worker are carried out under Section 17 of the Children Act

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1989. Children in need may be assessed under Section 17 of the Children Act 1989 in relation to their special educational needs, disabilities, as a carer, or because they have committed a crime.

Concerns about maltreatment may be the reason for a referral to Children's and Families Service/Disabled Children's Service or concerns may arise during the course of providing services to the child and family. In these circumstances, the Children and Families Service/Disabled Children's Service must initiate enquiries to find out what is happening to the child and whether protective action is required. The Local Authority, with the help of other organisations as appropriate, also have a duty to make enquiries under Section 47 of the Children Act 1989 if they have reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm, to enable them to decide whether they should take any action to safeguard and promote the child's welfare. There may be a need for immediate protection whilst the assessment is carried out.

Some children in need may require accommodation because there is no one who has parental responsibility for them, or because they are alone or abandoned. Under Section 20 of the Children Act 1989, the Local Authority has a duty to accommodate such children in need in their area. Following an application under Section 31A, where a child is the subject of a care order, North Yorkshire County Council, as a corporate parent, must assess the child's needs and draw up a care plan which sets out the services which will be provided to meet the child's identified needs.

If it is unclear whether a child is suffering or likely to suffer significant harm, discussions should be held with your agency's child protection advisor and or with the North Yorkshire County Council Customer Service Centre.

### **Responsibilities of the Referrer to the Children and Families Service/Disabled Children's Service**

If a child is suffering from an apparent serious injury or medical condition, attention must be sought immediately from Accident and Emergency (dialing 999 where appropriate). Where abuse is alleged or suspected, the initial response to the child should be limited to listening carefully to what the child says in order to:

- Clarify the concerns;
- Offer reassurance about how s/he will be kept safe and;
- Explain what action will be taken.

Although it is appropriate to ask a child how an injury occurred, the child must not be pressed for information, led or cross-examined or given false assurances of absolute confidentiality. Such well-intentioned actions could destroy the trust of the child and prejudice police investigations, especially in cases of sexual abuse.

Children and young people need to understand how they will be involved in decision making and the planning processes. They should be helped to understand what key processes are, how they work and that they can contribute to decisions about their future in accordance with their age and understanding. However, they should understand that whilst their wishes and feelings will be taken into account, ultimately, decisions will be taken in the light of all available information contributed by themselves, professionals, their parents and other family members and significant adults. Children of sufficient age and understanding often have a clear perception of what needs to happen to ensure their safety and welfare.

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### **Informing parents of the need to make a referral**

It is good practice to be open and honest at the outset with the parents/carers about concerns, the need for a referral, information sharing between agencies and the accompanying need for making an enquiry in respect of whether a child is subject to a Child Protection Plan. All reasonable efforts should be made to inform parents/carers prior to making the referral; however, a referral should not be delayed if you are unable to discuss the concerns with the parents.

Where the child expresses a wish for his or her parents not to be informed, their views should be taken seriously and a judgement made based on the child's age and understanding, as to whether the child's wishes should be followed.

Concerns must not be discussed with parents/carers before making a referral where:

- Discussion would put a child at risk of significant harm
- Discussion would impede a Police investigation or social work enquiry
- Sexual abuse is suspected
- Organised or multiple abuse is suspected
- Fictitious illness or induced illness is suspected
- Contact with the parents/carers would place you or others at risk
- It is not possible to contact parents/carers without causing undue delay in making the referral

In such cases advice should be sought from Children's & Families Service/Disabled Children's Service and/or the Police.

### **Making a Referral**

If you are worried about a child or a young person under the age of 18, you should contact the Children and Families Service through the Customer Contact Centre. Anyone can make a referral if you are worried about any child and think they may need support or are a victim of neglect or abuse, whether as a member of the public or as a professional.

Professionals in all agencies have a responsibility to refer a child to Children's Social Care (part of the Children and Families Service)/Disabled Children's Service when it is believed or suspected that a child:

- Has suffered significant harm and /or;
- Is likely to suffer significant harm and/or;
- Has developmental and welfare needs which are likely only to be met through provision of family support services (with agreement of the child's parent).

If your concern is outside of normal office hours, you should contact the emergency duty team.

#### **During Office Hours**

By Phone: 01609 780780

Email: [children&families@northyorks.gov.uk](mailto:children&families@northyorks.gov.uk)

#### **Outside Office Hours**

Emergency Duty Team (for evenings, weekends and bank holidays): 01609 780780

Further details can be found at the following address:

<https://www.northyorks.gov.uk/contact-us-out-hours>

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A written confirmation of the referral must be completed and submitted **within 24 hours**. Where possible, North Yorkshire Children and Young People's Service request that you use their "[Universal Referral Form](#)" to ensure that all relevant information is provided to ensure that the referral can be progressed as effectively as possible.

### **Download the "[Universal Referral Form](#)" on NYSCB website**

When contacting the Customer Contact Centre the referrer should:

- Clearly identify themselves, their agency/relationship with the child(ren) and family,
- Give details of where they can be contacted.
- Provide as much relevant family information as possible and, clearly stating the name of the child, the parents/carers and any other children known to be in the household, the dates of birth and addresses, any previous addresses known, ethnicity and religious status (if known)
- Provide details of any special needs or communication needs of either the child or any family member
- State why they feel the child is suffering, or is likely to suffer, significant harm.
- Share their knowledge and involvement of the child(ren) and family
- Share their knowledge of any other agency involved
- Indicate the child's, parent's/carer's knowledge of the referral and their expectations •  
Ensure they record within their agency files the concerns and action taken

Where referrals from members of the public are concerned, the advisor in the Customer Service Centre who is taking the referral information is responsible for ensuring that consent is sought from the referrer to disclose his/her name.

If consent is refused, the name of the referrer is not to be disclosed to the family or to other professionals.

The position is to be made clear and recorded by the person taking the referral.

### **Customer Contact Centre Screening Team**

When taking a referral, the case will be passed to the designated Customer Contact Centre Screening Team Specialist Officer who will establish as much of the following information as possible:

- Full names (including aliases and spelling variations), date of birth and gender of the child(ren);
- Family address and ( where relevant) school/ nursery attended;
- Identity of those with parental responsibility;
- Names and dates of birth of all household members;
- Ethnicity, first language and religion of the children and parents;
- Any special needs of children or parents;
- Any significant/important recent or historical events/incidents in the child or family's life;
- Cause of concern including details of any allegations, their sources, timing and location;
- Child's current location and emotional and physical condition;
- Whether the child needs immediate protection;
- Details of the alleged perpetrator, if relevant;
- Referrer's relationship and knowledge of the child and parents;
- Known involvement of other agencies/ professionals; and
- Information regarding parental knowledge of, and agreement to, the referral.

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The Customer Contact Centre Screening Team will carry out an initial screening of the referral and identify the most appropriate course of action. This may include (but not limited to):

- Transfer to the Prevention Service (within two working days of the referral)
- Referral to Children's Social Care (within one working day of the referral)
- Link to an existing referral, (within one working day of the referral)
- Referral to another agency (within one working day of the referral)
- The provision of information or advice (within five working days of the referral)
- No further action

Depending on the initial screening of the case, the Customer Contact Centre Screening Team will record the information on the Children's Social Care Case Management System as either a contact or a referral.

Where it is intended that Children's Social Care/Disabled Children's Service will take action in relation to the information forwarded to the Customer Contact Centre Screening Team a referral to the relevant team in Children's Social Care/Disabled Children's Service is raised.

In all cases the Customer Contact Centre Screening Team will record the decision making rationale on the Children's Social Care Case Management System to ensure that a full record of decisions is maintained and the referrer will be informed of the outcome of that decision.

### **Referrals to the Emergency Duty Team (EDT)**

The Emergency Duty Team accepts all referrals where concerns regarding significant harm of a child are raised outside of normal working hours.

Referrals to EDT are generally taken over the telephone. The referrer should supply as much detail as possible and EDT will input the information directly onto the Children's Social Care Case Management System where a child or young person is known to Children's Social Care/Disabled Children's Service. Where a child is not known to Children's Social Care/Disabled Children's Service, the EDT will make a direct referral to the Customer Service Centre Screening Team to be included on the system when staff return to duty.

Depending on the content of the referral and the information received, the action taken by EDT will vary.

Where there are child welfare concerns the EDT member receiving the referral will consult with the EDT Manager or Team Manager on duty, and then make all the enquiries of relevant agencies that are available, checking records wherever possible.

The EDT Manager/ Team Manager may make any necessary immediate child protection enquiries after initiating a strategy meeting/discussion.

Where there are child protection concerns, as a minimum the EDT Manager or Team Leader will convene a Strategy Discussion. This must involve the Police and Health where possible. It is recognised that in such emergency situations relevant information from agencies involved with the child may be obtained via verbal checks made with those agencies and may include any other agencies known to the family that are working at the time. Enquiries will be undertaken by EDT when circumstances suggest this is required immediately.

If concerns are raised about a child subject to a Child Protection Plan from another local authority or there are immediate child protection concerns for a child visiting North Yorkshire, the EDT will contact that local authority immediately. Responsibility for conducting any child protection enquiries will remain with the EDT until arrangements are made with the other relevant local

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authority for them to progress any further action. The North Yorkshire EDT will take immediate action to secure the safety of the child or young person.

### **Referrals received by Children's Social Care**

Upon receipt of the referral in the local team, the relevant Children's Social Care Manager will allocate the assessment to a Social Worker.

Where the manager identifies that a strategy meeting is required the local Team Manager will take steps to convene a strategy meeting and record the decision and reasons on the Children's Social Care Case Management system.

The social worker should clarify with the referrer, the nature of the concerns and how and why they have arisen.

The child and family must be informed of the action to be taken.

The Social Worker should see the child as soon as possible if the decision is taken that the referral requires further assessment.

Where requested to do so by Children's Social Care/Disabled Children's Service, professionals from partner agencies, such as housing, and those in health organisations have a duty to cooperate (under section 27 of the Children Act 1989) by assisting Children's Social Care in carrying out its functions.

### **Action to be taken when a child is referred**

Where there is a risk to the life of a child or a likelihood of serious immediate harm, Social Workers or the police should use their statutory child protection powers to act immediately to secure the safety of the child.

For children who are in need of immediate protection, action must be taken by the social worker or the police if removal is required, as soon as possible after the referral has been made to Local

Authority children's social care (sections 44 and 46 of the Children Act 1989). An Emergency Protection Order, made by the court, gives authority to remove a child and places them under the protection of the applicant.

When considering whether emergency action is necessary an agency should always consider the needs of other children in the same household or in the household of an alleged perpetrator. The local authority in whose area a child is found in circumstances that require emergency action (the first authority) is responsible for taking emergency action.

If the child is looked after by, or the subject of a child protection plan in another authority, the first authority must consult the authority responsible for the child. Only when the second local authority explicitly accepts responsibility (to be followed up in writing) is the first authority relieved of its responsibility to take emergency action.

### **Multi-Agency Working**

Planned emergency action will normally take place following an immediate strategy discussion. Social workers or the police should:

- Initiate a strategy discussion to discuss planned emergency action. Where a single agency has to act immediately, a strategy discussion should take place as soon as possible after action has been taken
- See the child (this should be done by a practitioner from the agency taking the emergency action) to decide how best to protect them, and

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- Before initiating legal action advice must be taken from the Local Authority's Legal Advisor.

### **Assessment of a Child Under the Children Act 1989**

Assessments should determine whether the child is in need, the nature of any services required and whether any specialist assessments should be undertaken to assist Children's Social Care in its decision making.

Following acceptance of a referral by the relevant Social Work team, a social worker will be allocated by the relevant local team manager who will lead a multi-agency assessment under Section 17 of the Children Act 1989. The Local Authority has a duty to ascertain the child's wishes and feelings and take account of them when planning the provision of services. Assessments should be carried out in a timely manner reflecting the needs of the individual child, but must be completed within **a maximum of 45 working days** from the point of referral. The relevant social work manager will conduct a formal review of the assessment at 10 working days from the point of referral.

Where the relevant social work team decides to provide services, a multi-agency child in need plan should be developed which sets out which agencies will provide which services to the child and family. The plan should set clear measurable outcomes for the child and expectations for the parents. The plan should reflect the positive aspects of the family situation as well as the weaknesses.

Where information gathered during an assessment results in the social worker suspecting that the child is suffering or likely to suffer significant harm, the local authority should hold a strategy discussion to enable it to decide, with other agencies, whether to initiate enquiries under Section 47 of the Children Act 1989. Please see the NYSCB Strategy Discussion Procedures.

### **Role of the Social Worker**

It is the role of the Social Worker to:

- Lead on an assessment and complete it in line with the locally agreed protocol according to the child's needs and within **a maximum of 45 working days** from the point of referral into Children's Social Care;
- See the child within a timescale that is appropriate to the nature of the concerns expressed at referral, according to an agreed plan;
- Conduct interviews with the child and family members, separately and together as appropriate. Initial discussions with the child should be conducted in a way that minimises distress to them and maximises the likelihood that they will provide accurate and complete information, avoiding leading or suggestive questions;
- Record the assessment findings and decisions and next steps following the assessment;
- Inform, in writing, all the relevant agencies and the family of their decisions and of the plan for providing support, if the child is identified as a child in need; and
- Inform the referrer of what action has been or will be taken.

### **Role of the Social Work Manager**

It is the role of the Social Work Manager to:

- Conduct a formal review of the progress of the assessment **no later than 10 working days from the point of referral**;
- Agree with the Social Worker the provision of any services and an interim plan as required;
- Agree with the Social Worker the assessment findings, decisions and next steps following the assessment and authorise the outcome of the referral and any other actions to be taken

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- Record the decision and reasons for the decision on the Children's Social Care Case Management System

### **Role of the Police**

It is the role of the Police to assist other agencies to carry out their responsibilities where there are concerns about the child's welfare, whether or not a crime has been committed. If a crime has been committed, the police should be informed by the local authority children's social care.

### **Role of all involved professionals**

It is the role of all involved professionals to:

- Be involved in the assessment and provide further information about the child and family;  
and
- Agree further action including what services would help the child and family and inform local authority children's social care if any immediate action is required.