

CALOW CHURCH OF ENGLAND (V.C.) PRIMARY SCHOOL CHILD PROTECTION AND SAFEGUARDING POLICY

1 Introduction and Context

1.1 Our responsibilities

Calow Primary School fully recognises its responsibilities for child protection and safeguarding, and this policy sets out how the school will deliver these responsibilities.

This policy should be read in conjunction with 'Working Together to Safeguard Children' (2013), which is statutory guidance to be read and followed by all those providing services for children and families, including those in education. The guidance is available via the following link: <http://www.workingtogetheronline.co.uk/index.html>

Furthermore, we will follow the procedures set out by the Derbyshire Safeguarding Children's Board: <http://derbyshirescbs.proceduresonline.com/index.htm>

In accordance with the above procedures, the school carries out an annual audit of its safeguarding provision and sends a copy to the Local Authority as required by the guidance 'Safeguarding and Safer Recruitment' (2007).

1.2 Our Principles

Safeguarding arrangements in our school are underpinned by two key principles:

- safeguarding is everyone's responsibility: all staff, governors and volunteers should play their full part in keeping children safe; and
- a child-centred approach: a clear understanding of the needs and views of children.

1.3 Our Policy

There are 6 main elements to our policy, which are described in the following sections:

- The types of abuse that are covered by the policy;

- The signs of abuse that staff and volunteers should look out for;
- Roles and responsibilities for safeguarding;
- Expectations of staff and volunteers with regard to safeguarding, and the procedures and processes that should be followed, include the support provided to children;
- How the school will ensure that all staff and volunteers are appropriately trained, and checked for their suitability to work within the school;
- How the policy will be managed and have its delivery overseen.

Through implementation of this policy we will ensure that our school provides a safe environment for children to learn and develop.

2 Types of Abuse

2.1 Children who may require early help

Staff and volunteer working within the school should be alert to the potential need for early help for children. Staff and volunteers should consider following the procedures identified for initiating early help (see section 5) for a child who:

- is disabled and has specific additional needs;
- has special educational needs;
- is a young carer;
- is showing signs of engaging in anti-social or criminal behaviour;
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health, domestic violence; and/or
- is showing early signs of abuse and/or neglect.

2.2 Child Abuse

There are four types of child abuse as defined in ‘Working Together to Safeguard Children’ (2013) as follows:

- **Physical abuse** may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child;
- **Emotional abuse** is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child’s emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or ‘making fun’ of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child’s developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone;
- **Sexual abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact or non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children;
- **Neglect** is the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. It may include a failure to:
 - provide adequate food, clothing and shelter,
 - protect a child from physical and emotional harm or danger;
 - ensure adequate supervision (including the use of inadequate care-givers); or
 - ensure access to appropriate medical care or treatment.
 Respond to a child’s basic emotional needs

Bullying is also abusive and will include at least one, if not two, three or all four, of the defined categories of abuse [**refer to school bullying policy**].

3 Signs of Abuse

3.1 Physical abuse

Most children will collect cuts and bruises and injuries, and these should always be interpreted in the context 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.

The physical signs of abuse may include:

- 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;
- 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;
- running away from home.

3.2 Emotional Abuse

Emotional abuse can be difficult to identify as there are often no outward physical signs. Indications may be a developmental delay due to a failure to thrive and grow, however, 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.

3.3 Sexual Abuse

All staff and volunteers should be aware that adults, who may be men, women or other children, who use children to meet their own sexual needs abuse both girls and boys of all ages. Indications of sexual abuse may be physical or from the child's behaviour. 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.

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;
- 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.

3.4 Neglect

It can be difficult to recognise neglect, however its effects can be long term and damaging for children.

The physical signs of neglect may include:

- Being constantly dirty or 'smelly' ;
- constant hunger, sometimes stealing food from other children;
- losing weight, or being constantly underweight;
- inappropriate or dirty clothing.

Neglect may be indicated by changes in behaviour which may include:

- mentioning being left alone or unsupervised;
- not having many friends;
- complaining of being tired all the time;
- not requesting medical assistance and/or failing to attend appointments.

4 Safeguarding Roles and Responsibilities

All staff, volunteers and governors have responsibility for the following:

- Being aware of the Derby and Derbyshire Safeguarding Procedures, <http://derbyshirescbs.proceduresonline.com/index.htm> and ensuring these procedures are followed;

- Listening to, and seeking out, the views, wishes and feelings of children and young people;
- Knowing who the school's designated teacher and governor for child protection are;
- Being alert to the signs of abuse and their need to refer any concerns to the designated teacher;
- Being aware of the Guidance for Safer Working Practice 2009
- Ensuring that their child protection training is up to date, and taking place at least every three years;
- Sharing information and working together to provide children and young people with the help they need;
- Supporting pupils who have been abused in accordance with his/her child protection plan;
- Seeking early help where a child and family would benefit from coordinated support from more than one agency (e.g. education, health, housing, police) to prevent needs escalating to a point where intervention would be needed via a statutory assessment (see section 5.1);
- If at any time it is considered that the child may be a child in need as defined in the Children Act 1989, or that the child has suffered significant harm or is likely to do so, a referral should be made immediately to local authority children's social care (See section 5.2);
- Being aware of the Derby and Derbyshire Safeguarding Children Board's Escalation Policy and Process, which may be followed if a staff member fears their concerns have not been addressed, and of the Confidential Reporting Code;
http://www.derbyshirescb.org.uk/news/newsitems/escalation_policy.asp
- Learning from the outcomes of serious case reviews (see Appendix A).
- Referring to Children Missing from Education (CME), those children who go missing from education, whereabouts unknown, by adhering to guidance and timelines shown on extranet at
https://derbyshire.inthehive.net/extranet/pupil_support/children_missing_from_edu/default.aspx

Governors and school leadership are responsible for:

- Ensuring that we have a designated teacher for child protection, and that they have access to appropriate training;
- Ensuring that we have a nominated governor for child protection and safeguarding, and that they have access to appropriate training;
- Ensuring all staff receive the appropriate training, and keep it up to date (as per Safer Working Practice guidance, 2009);

- Notifying the Children’s Social Care department if there is an unexplained absence of a pupil who is the subject of a child protection plan;
- Managing security within the school and reviewing it annually;
- Ensuring that important policies, such as those for behaviour and bullying, are kept up to date;
- Keeping up to date all child records;
- Having in place effective ways to identify emerging problems and potential unmet needs for individual children and families;
- Ensuring staff and volunteers undergo appropriate checks via the Disclosure and Barring Service (DBS) – see section 5.3;
- Acting on the learning from Serious Case Reviews – see appendix A;
- Ensuring that the curriculum makes best use of PSHE to cover safeguarding issues with children;
- Making this policy available to parents and carers as appropriate;
- Taking leadership responsibility for the school's safeguarding arrangements;
- Ensuring that our staff are competent to carry out their responsibilities for safeguarding and promoting the welfare of children and creating an environment where staff feel able to raise concerns and feel supported in their safeguarding role;
- Ensuring all staff are given a mandatory induction, which includes familiarisation with child protection responsibilities and procedures to be followed if anyone has any concerns about a child's safety or welfare;
- Ensuring all staff have regular reviews of their own practice to ensure they improve over time;
- Ensuring all staff are made aware of the Confidential Reporting Code;
- Creating a culture of listening to children and taking account of their wishes and feelings, both in individual decisions and in the school’s development;
- Ensuring all records are kept up to date and secure.

The designated teacher is: **Mrs. E. McDonald**

The deputy designated teacher is: **Mrs. J.A. Oldale**

The nominated governor for child protection and safeguarding is: **Mrs. G. Pattison**

5 Safeguarding Processes and Procedures

The school will deliver its responsibilities for identifying and acting on early help needs, safeguarding and child protection in line with the policies and procedures identified in the Derbyshire Safeguarding Children's Board policies and procedures guidance, available at:

<http://derbyshirescbs.proceduresonline.com/index.htm>

5.1 Early help

The provision of early help services should form part of a continuum of help and support to respond to the different levels of need of individual children and families – for more information school staff and volunteers can refer to Derbyshire's 'Early Help Offer' at http://www.derbyshire.gov.uk/social_health/children_and_families/support_for_families/default.asp

All initial contacts where staff, governors or volunteers wish to make a request for general advice, information or a service for a child who may be a child with additional or complex needs should be made either by contacting the local Multi-Agency Team. To find your nearest multi-agency team click on the following link <http://www.derbyshire.gov.uk/fidy> or by contacting Call Derbyshire (see section 5.5). The designated teacher should be advised of any such contacts, and where possible and appropriate, it should be discussed with the designated teacher.

In cases where there is no identified Lead Professional within the local Multi Agency Team (MAT), the Call Centre Advisor may provide information and advice or re-direction to other services. This action will be informed by any history of previous involvement with the child and family.

When calls are made to the Call Centre, an Initial Contact will be created for all cases where it is judged the child may have additional or complex needs. This Initial Contact will be then passed to the Senior Practitioner within the Call Centre for screening.

The Senior Practitioner will, within 24 hours, decide which service within children's social care is best placed to meet that child's needs and will be passed to either the multi-agency team or children's social care for assessment. The Call Centre Advisor will be responsible for directing the Initial Contact/Referral to the appropriate team and advising the referrer of the outcome within 24 hours.

If a CAF is recommended then the enquirer referral details will be passed onto the MAT in Derbyshire. If the senior practitioner assesses there is no role the contact will be closed at this point and the referrer notified. The referrer will also be notified which service the information has been passed to for further assessment.

5.2 Referring to Children's Social Care

If at any time it is considered that the child has suffered significant harm or is likely to do so, a referral should be made to Call Derbyshire, e.g. a child having an injury or has made a disclosure of sexual abuse.

When a member of staff or volunteer parent, practitioner, or another person has concerns for a child, and the school are aware that the case is open to the multi-agency team they should discuss with the allocated worker or their manager to request escalation to children's social care. If the child does not at that time have a lead professional or allocated social worker the school should contact Call Derbyshire, where a call handler will collate the information and pass through to the senior practitioner to screen that information and make a decision about intervention.

Schools should ensure they have spoken to the family about their concerns and proposed actions unless to do so would place the child at risk. If a child makes a disclosure or presents with an injury it is imperative that advice is sought immediately prior to the child returning home and as soon as the school become aware of this.

Essential information for making a referral includes:

- Full names and dates of birth for the child and other members of the family;
- Address and daytime phone numbers for the parents, including mobile;
- The child's address and phone number;
- Whereabouts of the child (and siblings);
- Child and family's ethnic origin;
- Child and family's main language;
- Actions taken and people contacted;
- Special needs of the child, including need for an accredited interpreter, accredited sign language interpreter or other language support;
- A clear indication of the family's knowledge of the referral and whether they have consented to the sharing of confidential information;
- The details of the person making the referral.

Other information that may be essential:

- Addresses of wider family members;
- Previous addresses of the family;
- Schools and nurseries attended by the child and others in the household;
- Name, address & phone number of GP/Midwife/Health Visitor/School Nurse;
- Hospital ward/consultant/Named nurse and dates of admission/discharge;
- Details of other children who may be in contact with the alleged abuser;
- Details of other practitioners involved with the family;
- Child's legal status and anyone not already mentioned who has parental responsibility;
- History of previous concerns and any previous CAF or Initial Assessments completed;
- Any other information that is likely to impact on the undertaking of an assessment or Section 47 Enquiry.

5.3 Recruitment of staff and Volunteers

The school will ensure that Safer Recruitment practices are always followed. Every interview panel will have at least one member who has a current certificate in Safer Recruitment. We will check on the identity of candidates, follow up references with referees and scrutinise applications for gaps in employment. We will ensure that safeguarding considerations are at the centre of each stage of the recruitment process.

We will ensure that all staff is aware of government guidance on safer recruitment and that its recommendations are followed. The guidance on the use of new technology is particularly important. This includes advice on safe use of mobile phones and guidance on personal and professional boundaries in emailing, messaging and social networking environments.

The Disclosure and Barring Service (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children.

The DBS are responsible for:

- processing requests for criminal records checks
- deciding whether it is appropriate for a person to be placed on or removed from a barred list

- placing or removing people from the DBS children's barred list and adults' barred list for England, Wales and Northern Ireland

The DBS search police records and, in relevant cases, barred list information, and then issue a DBS certificate to the applicant.

A DBS check will be requested as part of the pre-recruitment checks following an offer of employment, including unsupervised volunteering roles, where the definition of regulated activity is met. The definition can be found in Part V of the Protection of Freedoms Act 2012 and at <https://www.gov.uk/government/publications/dbs-regulated-activity>

The school will follow advice on DBS checks as detailed at: Schools Extranet/Shared Services Centre/Updates.

5.4 Dealing with allegations against staff and volunteers who work with children

Where any member of the school team or any volunteer has concerns that a person has caused harm, or poses a future risk of harm to vulnerable groups, including children they must make a referral to the DBS. This will be done in accordance with guidance available at:

- Schools Extranet/Personnel Handbook/Procedure for Managing Allegations against Staff, Carers and Volunteers, and;
- 'Dealing with Allegations of Abuse Against Teachers and other Staff' (2012) available at: <http://www.education.gov.uk/aboutdfe/statutory/g0076914/dealing-with-allegations-of-abuse/dealing-with-allegations-of-abuse-against-teachers-and-other-staff>

The procedure is outlined in Chapter 6.6 of the Derby City and Derbyshire Safeguarding Children Board Policies and Procedures Manual and detailed in 'The Procedure for Managing Allegations Against Staff, Carers and Volunteers' 2013.

5.5 Important contact details

CALL DERBYSHIRE

Tel: 08456 058 058

Fax: 01629 585 669

Minicom: 01629 585 400

Written referrals should be sent to the appropriate district office:

Chesterfield

West Street

S40 4TZ

Bolsover and N E Derbyshire

High Street

Clay Cross

Chesterfield

S45 9JB

Out of hours Call Derbyshire

Tel: 01773 728222

Fax: 01629 585669

Minicom: 01629 585400

Local Multi-Agency Team

Local MATs can be found at <http://www.derbyshire.gov.uk/fidy>

Police Central Referral Unit

Butterley Hall

Ripley

Derbyshire

DE5 3RS

Tel: 0300 122 8719

Fax: 01773 572074

NSPCC - National Helpline

0808 800 5000

Childline

0800 11 11

6 Management of the Policy

The Governing Body will oversee the policy, ensure its implementation and review its content on an annual basis.

The Headteacher will report on safeguarding activity and progress within the school to the governing body annually.

Signed by:

Chair of Governors

Headteacher

Date:

Appendix A: Learning from Serious Case Reviews (SCRs) and Serious Incident Learning Reviews (SILRs)

Derbyshire Safeguarding Children Board recognises the importance of learning and improving from our experiences in this area. A range of learning and themes from SCRs and SILRs have been identified from our most recent reviews, and from the preceding three years.

We have identified that:

Babies are particularly at risk from abuse and neglect including:

- Shaking
- Co-sleeping
- Domestic abuse
- Methadone used as a soother
- Lack of ante-natal assessment

Teenagers - a quarter of all SCRs/SILRs have been about the serious injury or death of a teenager. Issues include:

- Suicide/self-harm
- Child sexual exploitation (CSE)
- Offending behaviour
- Missing from school, home or care
- Difficult to engage

Parents- the death or serious injury of children and young people often has contributory factors including:

- Substance misuse
- Mental health
- Domestic abuse
- Hostility/non-engagement
- Disguised compliance
- Violent men

It is vital that themes and learning is shared across all agencies to improve practice and increase safeguards to children and young people. The SCR sub committee has identified a number of practice developments for professionals including:

- Information gathering, sharing and recording
- Assessing the complete circumstances of the child and family, including their history
- Critically analysing all information
- Ensuring the needs of the child are paramount above those of the parents
- Seeing a child at home and where they sleep.

[Learning from SCRs leaflet](#)

Specific learning for schools from SCRs nationallyⁱ

- Professionals in all agencies should keep a clear focus on the child
- Clear guidance is required to enable staff to challenge each other, and families, and to escalate any concerns they may have.
- All schools must have robust systems in place for recording injuries or welfare concerns noted on children by staff, and schools must ensure that appropriate actions are taken.
- The role of the designated professional for child protection in schools must be clearly understood and used effectively.

ⁱ DP SCR Coventry Safeguarding Children Board 2013/ KW SCR Birmingham Safeguarding Children Board 2013