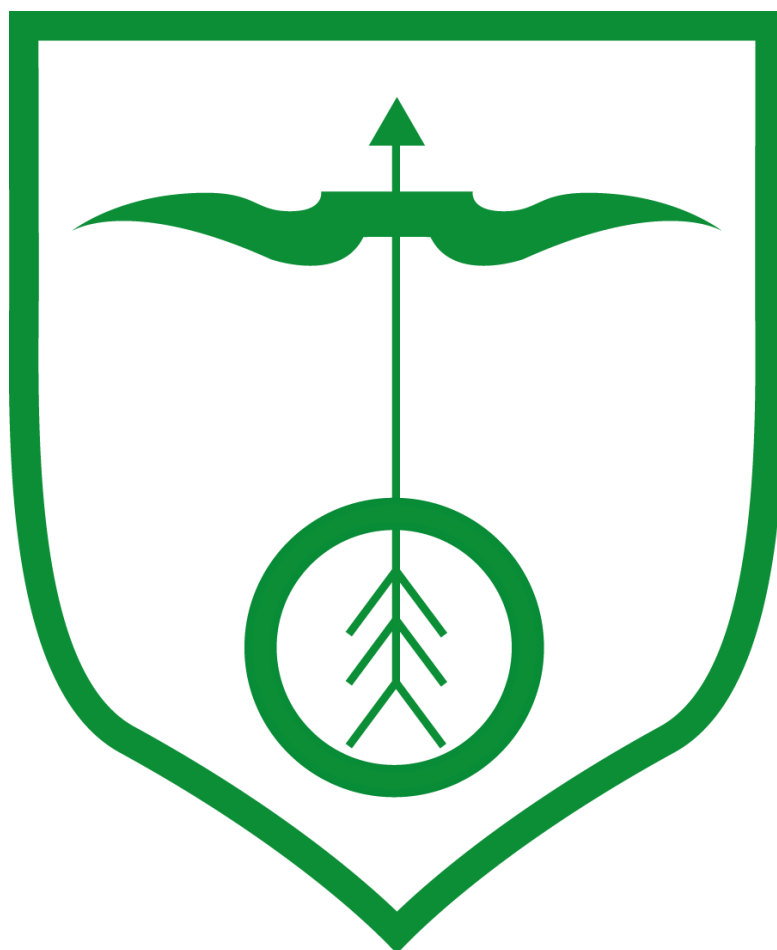


# Robin Hood Primary and Nursery School



## Child Protection Policy

Agreed at Governors meeting: September 2016

Review date: September 2017

# **Robin Hood Primary and Nursery School**

## **Child Protection Policy**

**This policy was updated and adopted in September 2016. It will be reviewed annually.**

**Schools Designated Safeguarding Lead:  
Mr P Boulton (Headteacher)**

**School Deputy Designated Safeguarding Lead:  
Mrs J Smith (Deputy Head)**

**Schools Designated Child Protection Governor:  
Mrs J Paterson**

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### **1. INTRODUCTION**

Children have a fundamental right to be protected from harm and pupils cannot learn effectively unless they feel secure. All staff and governors believe that our school should provide a caring, positive, safe and stimulating environment which promotes the social, physical and moral development of the individual child.

The school will carry out its statutory duties to report suspected abuse and/or neglect to the children's social care department which covers their home address and to assist that department acting on behalf of children in need or enquiring into allegations of child abuse.

The governors and staff of Robin Hood school fully recognise the contribution the school makes to safeguarding children. We recognise that all staff, including volunteers, have a full and active part to play in protecting our pupils from harm.

There are five main elements to our policy:

- Ensuring safer recruitment is practised in checking the suitability of staff and volunteers to work with children;
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe;
- Developing and then implementing procedures for identifying and reporting cases, or suspected cases, of abuse;
- Supporting pupils who have been abused in accordance with their agreed Child Protection Plan (or Child in Need Plan for lower level concerns);
- Establishing a safe environment in which children can learn and develop.

We recognise that because of the day-to-day contact with children, school staff are well placed to observe the outward signs of abuse. The school will therefore:

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to;
- Ensure children know that there are adults in the school whom they can approach if they are worried;
- Include opportunities in the PSHCE curriculum for children to develop the skills they need to recognise and stay safe from abuse.
- Encourage parents and carers to actively discuss concerns about their own child/children or other children with a member of staff.

We will follow the procedures set out by the LSCB and take account of guidance issued by the DfE to safeguard children and promote their welfare:

### **Policy Review**

This policy will be reviewed in full by the Governing Body annually.

Signature ..... Date .....  
Head Teacher

Signature ..... Date .....  
Chair of Governors

## **2. STATUTORY FRAMEWORK**

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

- The Children Act 1989
- The Children Act 2004
- Education Act 2002 (section 175)
- The London Child Protection Procedures (2014)
- Keeping Children Safe in Education (DFE September 2016)
- Keeping Children Safe in Education: information for all school and college staff (DFE 2014) – APPENDIX 2
- Working Together to Safeguard Children (DfE 2015)  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419595/Working\\_Together\\_to\\_Safeguard\\_Children.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf)
- The Education (Pupil Information) (England) Regulations 2005

Working Together to Safeguard Children (DfE 2015) requires all schools to follow the procedures for protecting children from abuse which are established by Kingston and Richmond Safeguarding Children Boards.

## Procedures

Our school procedures for safeguarding children will be in line with LEA and ACPC procedures. We will ensure that:

- ❑ We have a Designated Safeguarding Lead (DSL) who undertakes regular training. (Mr P Boulton - Headteacher)
- ❑ One member of staff who will act in the DSL's absence. (Mrs Smith – Deputy Head)
- ❑ All members of staff develop their understanding of the signs and indicators of abuse. (See Appendix A and B)
- ❑ All members of staff know how to respond to a pupil who discloses abuse. (Appendix D)
- ❑ All parents/carers are made aware of the responsibilities of staff members with regard to child protection procedures. (School website)

Our procedures will be regularly reviewed and up-dated

All new members of staff will be given a copy of our child protection procedures as part of their induction into the school. (Supply teacher pack and staff handbook)

The document “Keeping Children Safe in Education” DFE September 2016 must be read in conjunction with this policy.

### **3. THE DESIGNATED SAFEGUARDING LEAD**

The Designated Safeguarding Lead for Child Protection in this school is:

NAME: Mr P Boulton - Headteacher

The Deputy Designated Safeguarding Lead for Child Protection in this school is:

NAME: Mrs Julie Smith – Deputy Headteacher

The designated leads are responsible for:

- Adhering to LSCB (Local Safeguarding Children Board), LEA and school procedures with regard to referring a child if there are concerns about possible abuse.
- Ensuring all staff are familiar with school and borough guidelines for identifying and reporting abuse, including allegations of abuse against staff.
- Ensuring the school's child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and working with the governing body regarding this.
- Ensuring that all staff, including new and part-time staff, receive foundation training in child protection and providing further Child Protection training every two years.
- Ensuring designated Safeguarding Leads attend training every two years.

- Co-ordinating action and liaising with other agencies and support services over child protection issues.
- Keeping written records of concerns about a child even if there is no need to make an immediate referral.
- Ensuring that all such records are kept confidentially and securely and are separate from pupil records.
- Ensuring that an indication of further record-keeping is marked on the pupil records.
- Ensuring that any pupil currently on a child protection plan, who is absent without explanation for one day, is referred to the allocated social worker.
- Being alert to the specific needs of children in need, those with special educational needs and young carers.
- Encouraging a culture of listening to children and taking account of their wishes and feelings among all staff, in any measures the school may put in place to protect them.
- Ensuring the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school or college in this.
- Ensuring that safeguarding contact details will be kept prominently displayed in the school to ensure that all staff, children and parents have unfettered access to safeguarding support. The policy will be available as a hard copy, as required, including in staff areas.
- Linking with the local LSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding;
- Where children leave the school or college, ensuring their child protection file is copied for any new school or college as soon as possible but transferred separately from the main pupil file.
- Supporting staff with safeguarding and child protection issues generally.

#### **4. GOVERNING BODY**

Keeping Children Safe in Education (DfE September 2016) states:

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

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

In particular the Governing Body via the Nominated Governor for safeguarding must ensure:

The responsibilities placed on governing bodies and proprietors include:

- their contribution to inter-agency working, which includes providing a coordinated offer of early help when additional needs of children are identified;
- ensuring that an effective child protection policy is in place, together with a staff behaviour policy, and that it is reviewed annually;
- appointing a Designated Safeguarding Lead who should undergo child protection training, at Level 3 and a Level 3 refresher every two years;
- prioritising the welfare of children and young people and creating a culture where staff are confident to challenge senior leaders over any safeguarding concerns;
- making sure that children are taught about how to keep themselves safe.

The Child Protection Policy will be reviewed annually and the DSL will provide an update of Safeguarding data at each Governing Body meeting, such as serious incidents, numbers of children looked after or subject to child protection plans, and details of any allegations made against staff or volunteers, and subsequent action, permanent or temporary exclusions, children missing education, or those with concerning attendance records. The report should include an understanding of the special needs of students and matters of diversity and ethnicity.

The Nominated Governor for Safeguarding is: Mrs J Paterson

## **5. SCHOOL STAFF**

All school staff have a responsibility to:

- Report any concerns directly to the DSL member of staff, Mr Pete Boulton, or the Deputy DSL in his absence.
- Be able to identify signs and symptoms of abuse.
- Provide a safe and caring environment in which children can develop the confidence to voice ideas, feelings and opinions. Children should be treated with respect within a framework of agreed and understood boundaries. This is provided through their lessons especially in PSHE, circle time and story times.
- Follow relevant guidelines, including Kingston's Child Protection Procedural Guidelines and the London Child Protection Procedures.
- Know to whom and how to report all allegations against other school staff following the guidelines issued by Kingston Children, Schools and Family department. The Local Authority Designated Officer is Vivien Rimmer E: lado@kingston.gov.uk P: 0208 547 4609
- Be aware of the school whistle blowing policies should they feel any safeguarding issues are being incorrectly managed.
- Monitor and report as required on the welfare, attendance and progress of pupils on the school's Additional Needs Register.
- Keep clear, dated, factual and confidential records of child protection concerns.

Furthermore:

- All temporary staff and supply staff to know the name and school location of the designated staff members for Child Protection

- All volunteers to know the name and school location of the designated staff member for child protection.

## 6. SAFE RECRUITMENT

The Governing Body and school leadership team are responsible for ensuring that the school follows recruitment procedures that help to deter, reject or identify people who might abuse children whether through volunteer or paid employment.

All recruitment panels will have at least one member who has completed Safer Recruitment training. The LSCB offers this level 4 training or alternatively, the NSPCC offers Safer Recruitment training: [http://www.nspcc.org.uk/Inform/trainingandconsultancy/onlinetraining/safer-recruitment-in-education\\_wda103382.html](http://www.nspcc.org.uk/Inform/trainingandconsultancy/onlinetraining/safer-recruitment-in-education_wda103382.html)

The following statement is used on all adverts for new appointments:

*This school is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment.*

### Disqualification

All staff and volunteers will complete an annual return in relation to disclosable information/ convictions/personal matters.

The following guidance will be useful for recruitment panels as they consider references and employment.

Consider if the reference is:

- On headed paper
- From the person from whom you requested it
- From the last two employers
- Signed by the author and that it is an original signature

Furthermore:

- Has someone spoken to the referee?

### DBS (Disclosure and Barring Service)

- An application for a DBS will be made online by the School Business Manager in conjunction with our payroll company, Strictly Education.
- Once a DBS has been completed the employee must provide the original DBS. The school will keep details of the registration number and date of issue.

### Medical Clearance

- All new employees complete a Health Questionnaire.
- If an existing employee takes up a different post they may be subject to another medical clearance depending on the type of work carried out.

### National Insurance Numbers

- All employees require a permanent National Insurance number before they can commence work as opposed to a temporary number
- To obtain this they should call the: National Insurance help line on 01708 814 440, to make an appointment for an 'evidence of identity interview'. At the appointment they should request a form CA5404 which demonstrates that they have had their interview and are just awaiting their NI number. This will be acceptable to commence employment. The employee should be reminded to notify their manager as soon as they have received their permanent number.

### Right to work in the U.K.

The School Business Manager will check an employee's passport to ensure they have a right to work in the UK. A record of this is kept on the Central Record.

See Appendix D for the form which is used to confirm the appointment of staff:

## **7. RECORDS AND MONITORING**

Well-kept records are essential to good child protection practice. Our school is clear about the need to record any concerns held about a child, the status of such records and when copies of these records should be passed to other agencies. Termly Pupil Review meetings take place with all staff to review all the children, share information and to monitor their progress.

Any member of staff receiving a disclosure of abuse or noticing indicators of neglect must make an accurate record as soon as possible, noting what was said or seen, putting the event into context, and giving the date, time and location. All records will be signed and dated and will include the action and advice taken, including any differences of opinion. This should be presented to the DSL.

Any files notes are kept in a confidential place, known to the DSL and/or head and deputy headteacher, in chronological order (separate to pupil records) in this school. All child protection records are stored securely and confidentially and will be retained for 6 years after the last entry. If a pupil transfers from the school, these files will be copied and forwarded to the pupil's new education setting, marked "confidential" and for the attention of the receiving school's DSL.

## **8. SUPPORTING CHILDREN**

It is the responsibility of the DSL to ensure that the school is represented at, and a report is submitted to, child protection conferences, child in need meetings, strategy



meetings, core group meetings, and looked after children reviews. Whoever attends should be fully briefed on any issues or concerns. The school will commit to regular liaison with other professionals and agencies who support families and make a commitment to honest and open communication with families. There is recognition of the additional vulnerability of children with disabilities or special needs, and that children may become vulnerable due to matters of concern in the home environment: domestic abuse, mental health concerns or substance use.

We recognise that a child who is abused or witnesses violence may find it difficult to develop and maintain a sense of self worth. We recognise that a child in these circumstances may feel helpless and humiliated. We recognise that a child may feel self-blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school their behaviour may be challenging or they may be withdrawn. The school will endeavour to support the pupil through:

- The content of the curriculum;
- Well trained staff and volunteers, who are conversant with research, practice and procedures to promote children's welfare and keep them safe, both at home and in the community;
- The school ethos which promotes a positive, supportive and secure environment and gives pupils a sense of being valued;
- The school behaviour policy which is aimed at supporting vulnerable pupils in the school. The school will ensure that the pupil knows that some behaviour is unacceptable but they are valued and not to be blamed for any abuse which has occurred;
- An effective whole school policy against bullying and having measures in place to prevent all sorts of bullying amongst pupils;
- Liaison with other agencies that support the pupil such as Children's Social Care, Child and Adolescent Mental Health Service, Education Welfare Service and Educational Psychology service;
- If a child leaves and the new school is not known, the relevant person in the LA Admissions Team should be alerted so that these children can be included on the database for missing pupils;
- Allowing teachers to use reasonable force to control or restrain pupils under certain circumstances, once they have completed the relevant training. Other people may do so, in the same way as teachers, provided that they have been authorised by the Headteacher to have control or charge of pupils. A member of the Senior Leadership Team will be called to support and take the lead if a child's behaviour is showing any signs of escalating to a level where the child's safety or that of others may be compromised. Calming and defusing behaviour management strategies will always be used first to de-escalate a violent or aggressive incident. Physical restraint will only be used as a last resort in situations where calming and defusing strategies have failed to de-escalate the situation and there is a risk of likely injury to the child concerned or others and/or likely significant damage to property. If there is information to suggest that a child is likely to behave in a way that may require physical control or restraint, a risk assessment is undertaken. (Refer to the policy 'Use of physical restraint', which includes details of the training staff undertake.).

## **9. WHISTLEBLOWING**

All staff must be aware of their duty to raise concerns about the attitude or actions of colleagues in line with the school's code of conduct / whistle-blowing policy. If a member of staff feels that nothing has come of their initial concerns or a situation does not appear to be improving then they must refer their concerns directly to the Single Point of Access.

## **10. WHAT TO DO IF YOU ARE WORRIED ABOUT A CHILD**

### **When there are serious concerns about a child's welfare but no specific evidence of abuse:**

A member of staff may become concerned about a child whose appearance, behaviour, health, academic progress, relationships or demeanour give rise to general worries about his or her care and well-being, but no specific evidence of abuse has occurred. In such cases, the following steps should be taken: **See Flowchart One**

The member of staff should refer to the DSL.

The DSL/ Headteacher should consult with the child's parents/carers, or those with parental responsibility for the child and arrange to meet them as soon as possible in order to discuss the concerns. The DSL should make a written record of what the parents/carers said and how they reacted. If the parents/carers fail to respond to the request to discuss the concerns, that also should be noted.

The DSL/Headteacher should then decide whether the situation warrants a referral to the Single Point of Access (SPA).

The member of staff must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations.

If no referral is made then this decision should be recorded, with reasons and dated. The DSL / Headteacher may decide that the matter should continue to be dealt with internally within the school. This may include, in appropriate cases, advising the parents/carer.

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

The DSL is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. The DSL will provide and/or arrange all staff with safeguarding updates, including additional training.

If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately. Anybody can make a referral.

## **Action to be taken when a child discloses, or a member of staff suspects, that abuse has occurred outside school:**

If a child makes a disclosure to a member of staff (or other adult) that they are suffering or at risk of suffering significant harm, or if a member of staff becomes aware of any information suggesting that child abuse may have occurred or is likely to occur, then the following steps must be taken: **(see Flowchart Two)**

The member of staff to whom the disclosure is made, or who becomes aware of actual or potential abuse, must refer the matter immediately to the DSL.

The DSL should listen to what the child or young person wishes to say in response to the concerns and clarify any matters which are not clear in the child's account but **must not** conduct an in-depth interview or investigation of the allegation. The DSL must explain to the pupil at the outset of such a discussion that no promise of personal confidentiality can be made, even if the child should request this, as this would not be possible if there were a subsequent child protection enquiry. The DSL should explain to the child what could happen next.

The DSL should keep an accurate written and dated record of anything the child has said about the matter and this must be reported immediately to the Headteacher, where the head is not him or herself the DSL. The Headteacher/DSL, will make a referral and / or gain advice from the Single Point of Access (SPA).

If the decision is not to refer, the Headteacher/DSL must officially log the decision, the reasons for it and any subsequent action taken in respect of the child/young person who raised the matter initially.

Where it is decided that the matter should be referred, the school should immediately contact the Single Point of Access (SPA) or known case-holding social worker in the relevant team, depending on the pupil's place of residence. The school should state the cause for concern and any action so far taken.

Where, based on the information available, the Single Point of Access (SPA) decides that it is not appropriate to proceed further with a child protection enquiry, the social worker concerned will provide advice to the school on any other action that may be taken to promote the child's welfare within 24 hours. This could include intervention by other Social Services teams or workers, the Education Welfare Service, The Health Service or voluntary agencies.

Where, based on the information available, Children and Families Services decide that a 'Section 47' investigation is needed, the school will be asked to complete a formal Child Protection Referral Form. A copy of this form is annexed to the main procedure guidance. It should be faxed as soon as possible to the Duty Officer of the relevant SPA, or to the allocated Social Worker if the child already has one. A signed copy should be forwarded immediately afterwards by post.

The enquiry will start within 24 hours of the decision to do so being made. A Child Protection Strategy Discussion will be called, which in appropriate circumstances would involve the Police Child Abuse Investigation Team, to discuss the future

handling of the case. School staff will normally be asked to attend this meeting to provide background information.

One outcome of the Strategy Discussion will be a decision on what information should be shared with the family, and by whom. Consideration will be given to the fact that such information sharing could, in some circumstances, place the child in a position of risk of significant harm, or else could jeopardise a subsequent police investigation into an alleged offence.

The SPA will then have full responsibility for pursuing and concluding the enquiry, and for co-ordinating with the Police Child Abuse Investigation Team, medical personnel and other key workers. They will inform the school and all other key workers involved of subsequent developments.

## **11. ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS**

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

- Behaved in a way that has, or may have harmed a child;
- Possibly committed a criminal offence against/related to a child;
- Behaved towards a child or children in a way which indicates s/he would pose a risk of harm if they work regularly or closely with children.

This applies to any child the member of staff/volunteer has contact within their personal, professional or community life, such as if they had a child protection concerns raised for their own children.

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

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

Actions to be taken include making an immediate written record of the allegation using the informant's words - including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present. This record should be signed, dated and immediately passed on to the Headteacher.

If a child or young person makes an allegation of physical or sexual abuse against a teacher (other than the Headteacher) or a non-teaching member of staff, the following steps must be followed – **see Flowchart Three**

Where the allegation is not made directly to the Headteacher, the person to whom the disclosure is made must immediately inform the Headteacher. If it is the Headteacher against whom the allegation is made, alternative action should be taken as set out at the end of section 10.

The Headteacher should report the matter to the relevant local SPA for the LADO (Local Authority Designated Officer), within 24 hours, who will offer any appropriate advice to the Headteacher and oversee the investigation, including strategy meetings.

Where the Strategy Discussion subsequently decides that a child protection enquiry should not be undertaken, this decision and any subsequent recommendations for other action will be recorded and reported back to the other parties concerned. The Strategy Discussion may decide to recommend that an internal investigation be carried out by the school or Education Service. If this internal investigation discovered other facts of a serious nature, it would always be possible to reconvene another Strategy Discussion. In appropriate circumstances, such cases might be referred to the Quality Assurance sub-group of the LSCB.

Where the Strategy Discussion decides that a child protection or criminal investigation should be pursued, this decision will be recorded and an action plan drawn up. The relevant Social Services locality team will then have full responsibility for pursuing and concluding the enquiry, co-ordinating with the Police Child Protection Team, medical personnel and other key workers. They will inform the school and all key workers involved of subsequent developments.

It is possible that the facts of a case may warrant an investigation of the member of staff concerned under the LA's disciplinary procedures. Such an investigation **must not** be conducted while any formal child protection enquiry or criminal investigation is being pursued.

If the Headteacher is the person against whom the allegation is made, then the procedures set out above must be adapted accordingly. The following alternative steps should be taken – **see Flowchart Four**

Where the Headteacher is also the school's Designated Teacher for child protection, the member of staff to whom the disclosure is made should initially inform only the Nominated Governor (or Chair of Governors), who should then make direct contact with the LADO, who will then advise as to how to take things forward.

Where the Strategy Discussion subsequently decides that a child protection enquiry should not be undertaken, this decision and any subsequent recommendations for other action will be recorded and reported back to the other parties concerned. The Strategy Discussion may decide to recommend that an internal investigation be carried out by the school or Education Service. If this internal investigation discovered other facts of a serious nature, it would always be possible to reconvene another Strategy Discussion. In appropriate circumstances, such cases might be referred to the Quality Assurance sub-group of the Area Child Protection Committee.

Where the Strategy Discussion decides that a child protection or criminal investigation should be pursued, this decision will be recorded and an action plan drawn up. The relevant Social Services locality team will then have full responsibility for pursuing and concluding the enquiry, co-ordinating with the Police Child Protection Team, medical personnel and other key workers. They will inform the school and all key workers involved of subsequent developments.

It is possible that the facts of a case may warrant an investigation of the member of staff concerned under the LA's disciplinary procedures. Such an investigation **must not** be conducted while any formal child protection enquiry or criminal investigation is being pursued, and only following LADO advice.

The School's Designated Child Protection Governor is:

**Name:**

**CONTACT NUMBER:**

Mrs J Paterson  
on 02085467388

She can be contacted via the school office

In absence of the Designated Child Protection Governor the Chair of Governors in this school is:

**NAME:**

**CONTACT NUMBER:**

Mr Mark Callis  
02085467388

He can be contacted via the school office on

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

The Head Teacher will not investigate the allegation itself, or take written or detailed statements, but refer the concern to the LADO (Local Authority Designated Officer) at the relevant SPA.

## **12. ACTIONS WHERE A CHILD HAS SERIOUS INJURIES WHICH REQUIRE IMMEDIATE TREATMENT**

If, within the context of these guidelines, a child has injuries which require immediate treatment, the DSL / Headteacher should arrange for the child to be taken to the casualty department of the nearest hospital. They should inform the hospital that child abuse is suspected. The DSL / Headteacher must also arrange for the parents, or those with parental responsibility, to be informed as soon as possible that the child has been taken to hospital. The subsequent reporting of suspected abuse should follow steps above.

### **13. ACTIONS WHEN CHILDREN ARE NOT COLLECTED FROM SCHOOL AT THE END OF THE DAY**

The child will remain at school if they are not collected;

The Headteacher (or the most senior person to whom they have delegated responsibility) will try to contact the parent/carer using the available telephone numbers;

If the parent/carer is not on the telephone, the school will ring the Duty Education Welfare Officer (DEWO) by 4:15 pm at the latest and ask them to make contact with them. At this stage, the DEWO will confirm with the school whether the SPA be contacted;

In exceptional circumstances, it may be necessary for a child to be taken from school to another appropriate venue (relative/friend etc) while the parent/carer is being located. The DEWO will make further enquiries to identify any possible alternative venue for interim care of the child until the parent/carer is contacted;

If such a venue cannot be found, the DEWO will visit the home address and if the parent/carer is not at home a standard letter will be left asking them to contact the school before 4:45 pm or the appropriate Children & Families Social Work Team after 4:45 p.m. The DEWO will then immediately contact the appropriate SPA to tell them that there may be a child in need of an emergency placement and that the DEWO is bringing the child to them. The DEWO will then transport the child to the appropriate SPA.

### **14. SPECIFIC SAFEGUARDING ISSUES**

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

- [child sexual exploitation \(CSE\)](#) – see also below
- [bullying including cyberbullying](#)
- [domestic violence](#)
- [drugs](#)
- [fabricated or induced illness](#)
- [faith abuse](#)

- [female genital mutilation \(FGM\)](#) – see also below
- [forced marriage](#)
- [gangs and youth violence](#)
- [gender-based violence/violence against women and girls \(VAWG\)](#)
- [mental health](#)
- [private fostering](#)
- [radicalisation](#)
- [sexting](#)
- [teenage relationship abuse](#)
- [trafficking](#)

## **15. FURTHER INFORMATION ON CHILD SEXUAL EXPLOITATION AND FEMALE GENITAL MUTILATION**

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

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

Female Genital Mutilation (FGM): professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal



a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 11-12 of the Multi-Agency Practice Guidelines referred to above. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

A child going missing from education is a potential indicator of abuse or neglect. School and college staff members should follow the school's or college's procedures for dealing with children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect including sexual abuse or exploitation and to help prevent the risks of their going missing in future. More information can be found in the Government document: 'Statutory Guidance on Children who run away or go missing from home or Care' (Jan 2014).

## **16. CONFIDENTIALITY**

- We recognise that all matters relating to child protection are confidential.
- The Head teacher or DSL will disclose any information about a pupil to other members of staff on a need to know basis only.
- All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets.

## **17. SUPPORTING STAFF**

We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting. We will support such staff by providing an opportunity to talk through their anxieties with the DSL and seek further support as appropriate.

## **18. PHYSICAL INTERVENTION**

Our policy on physical intervention/restraint by staff is set out in a separate policy and acknowledges that staff must only ever use physical intervention as a last resort, and that at all times it must be the minimal force necessary to prevent injury to another person.

We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.

Staff who work with children on a regular basis whose needs may require physical intervention will attend restraint training.

## **19. BULLYING**

Our policy on bullying is set out in a separate policy and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures.

## **20. RACIST INCIDENTS**

21. Our policy on racist incidents is set out in a separate policy and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures.

## **22. HEALTH AND SAFETY**

Our Health & Safety policy, set out in a separate document, reflects the consideration we give to the protection of our children both within the school environment and when away from the school when undertaking school trips and visits.

## **23. CURRICULUM**

The school curriculum can play an important part in the protection of children. P.S.H.E. lessons and Circle Time can help pupils to develop more realistic attitudes towards the responsibilities of adult life and they can be equipped with the skills they need to help them stay safe.

## **24. CHILDREN WITH SPECIAL EDUCATIONAL NEEDS**

Children with special educational needs may be especially vulnerable to abuse and staff should take extra care to interpret correctly apparent signs of abuse or neglect. Indications of abuse should be reported as for other pupils.

The school environment should be such that pupils with special educational needs should feel confident and able to discuss their concerns. Whenever possible pupils will be given the chance to express themselves to a member of staff with appropriate communication skills.

## **25. EQUAL OPPORTUNITIES**

All children deserve the opportunity to achieve their full potential. All children have the right to be safeguarded from harm and exploitation whatever their:  
Race, religion, first language or ethnicity  
Gender

Age  
Health or disability  
Location or placement  
Political or immigration status

## Appendix A

### **CATEGORIES OF ABUSE**

Neglect: persistent or severe neglect, or the failure to protect a child from exposure to any kind of danger, including cold or starvation, or extreme failure to carry out important aspects of care, resulting in the significant impairment of the child's health or development, including non-organic failure to thrive.

Physical abuse: physical injury to a child, where there is definite knowledge, or a reasonable suspicion, that the injury was inflicted or knowingly not prevented. This includes, for example, deliberate poisoning, attempted drowning or smothering.

Sexual abuse: the involvement of dependent, developmentally immature children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent, that violate the social taboos of family life or which have been knowingly not prevented by the carer.

Emotional Abuse: the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may involve causing a child to feel frequently frightened or in danger.

Distinction should be made in recording child abuse, between actual abuse and cases where grave concern is indicated. Grave concern should not be used as a criteria to register on its own.

Grave concern reflects a high degree of risk, substantiated by social and/or medical assessments, where there are no grounds for stating that abuse has already taken place.

This concern must state the form of abuse of which the child is felt to be at risk and may include those situations where another child in the household has been harmed or where the household contains a known abuser. It must not be used as a catch-all category.

## Appendix B

# CHARACTERISTICS OF CHILD ABUSE AND COMMON FAMILY CHARACTERISTICS

### Characteristics of Child Abuse

It is vital that all concerned with children should be alert for the first signs of child abuse.

Some bruises and marks may seem insignificant by themselves but repeated injuries, even of a very minor nature, may be symptomatic of a family in crisis and if no action is taken, the children may be injured more seriously.

There are certain parental responses which are a cause for concern (especially of the child has bruising or other marks). These include:

- A delay in seeking medical treatment which is obviously needed.
- An unawareness or denial of injury
- Inappropriate or varying explanations of an injury.
- Constant complaints about a child (realistic or unrealistic).
- Over hasty or violent reaction to a child's naughty or annoying behavior.
- Asking for a child to be removed from home, or indicating difficulties in coping with a child, about whose care there are already doubts.
- Unrealistic expectations of the child.

### Physical abuse and neglect and emotional abuse

Common minor injuries – grounds for suspicion and further consultation.

#### 1. Bruises

- (a) Black eyes
  - (b) Bruising in or around the mouth
  - (c) Grasp marks on arms or chest
  - (d) Finger marks – you may see 3 –4 small bruises on one side of the face and one on the other.
  - (e) Symmetrical bruising – especially on the ears.
  - (f) Outline bruising e.g. belt marks, handprints
  - (g) Linear bruising – particularly on the buttocks or back
  - (h) Bruising on soft tissue with no obvious explanation
  - (i) New and old bruising – especially in the same area e.g. buttocks
- Most falls or accidents produce one bruise on a single surface – usually on a bony protuberance. A child who falls downstairs generally has only one or two bruises. Bruising in accidents is usually on the front of the body as children generally fall forward. In addition there may be marks on their hands if they have tried to break their fall.
  - The following are uncommon sites for accidental bruising:

Back, back of legs, buttocks (except occasionally, along the bony protuberances on the spine)  
Mouth, cheeks, ears  
Stomach, chest  
Under the arm  
Genital rectal area (but ask if the child is learning to ride a bike)  
Neck

## 2. Bites

These can leave clear impressions of the teeth. Human bites are oval or crescent shaped.

## 3. Burns / scalds

It can be very difficult to distinguish between accidental and non-accidental burns, but as a general rule of thumb, burns or scalds with a clear edge are suspicious.

## 4. Scars

Most children have scars, but notice should be taken of an exceptionally large number, of differing aged scars, unusual shaped scars (e.g. round ones from possible cigarette burns) or of large scars resulting from burns or lacerations that have not received medical treatment.

## 5. Bone injuries

A lack of awareness of the presence of a fracture or other injury, or an inability to give a reasonable explanation of its occurrence is highly suggestive of child abuse. A fracture is a painful injury and it is reasonable to expect a parent to clearly recall the incident and to have sought treatment for it. Bone injuries should be suspected if there is localised tenderness, swelling or discoloration over a bone or joint, where there is pain on movement of the affected part, or if the child is failing to move or use the limb normally.

## 6. Features of possible deprivation

- (a) emotional disturbance in the child
- (b) growth failure which responds to a change from their home environment
- (c) developmental delay
- (d) voracious appetite or tendency to eat unusual items
- (e) abnormal responses
- (f) staying frozen in one position for an unnaturally long time

## **Physical Neglect and Failure to Thrive**

A child's growth and development may suffer when it receives insufficient food, care and concern, praise and encouragement, or stimulation. A child who is subject to physical neglect or who is failing to thrive may show some of the following characteristics:

- the child may be short in stature and underweight for his/her chronological age
- skin may be cold and mottled with pinkish or purplish skin-coloring at the extremes
- limbs may be swollen with pitted sores which are slow to heal
- dry, sparse hair, alopecia (hair loss) and general physical debility may also be observed
- child may suffer from 'pot belly' and loose stool, the causes of which could be poor diet, irregular meals and tension
- diarrhea
- voracious appetite – possibly stealing food from others
- child thriving away from home
- unresponsiveness in child
- staying frozen in one position for an unnaturally long time

### **Emotional Abuse/Neglect**

Emotional abuse occurs when a child's basic emotional needs for love, security, praise and recognition are left unmet. Emotional abuse can exist in the absence of physical ill-treatment. Children growing up in an emotionally abusive or rejecting environment find their needs met with indifference, hostility or perhaps worst of all in an inconsistent or unpredictable manner. Parents may be verbally hostile to a child and their attitudes may encompass ridicule, sarcasm, shaming, belittling, frightening, threatening, etc. The results can be irreparable damage to the child's self esteem, with serious implications for any subsequent relationships the child may attempt to make.

In the most extreme cases, children are subjected to cruel treatment and punishments, e.g. being locked up in cold, dark surroundings, or becoming household drudges, having to perform heavy tasks. Basic needs like food, drink and warmth may be withheld or have to be 'earned'. In some families one particular child may be singled out for such treatment, and siblings may be encouraged to be hostile towards or to ostracize him/her. Where emotional abuse is suspected, it is advantageous to obtain expert assessment and opinion through the psychological and psychiatric services.

### **Common family characteristics**

Certain family and social characteristics have been frequently noted in cases of child abuse. Again their presence does not prove that an injury was non-accidental, nor does the absence of any of these characteristics mean there need be no cause for concern. A high concentration will, however, almost certainly indicate that the family is under stress and in need of help, whether an injury to a child has occurred or not.

## Parents

- (a) The parents are lonely and socially isolated
- (b) Their own childhood was deprived and they were abused or rejected by their own parents.
- (c) Their mother had her first baby before she was 20 years old or failed to attend ante-natal clinic or prepare for the birth.
- (d) The parents are both immature and young.
- (e) They show jealousy and rivalry towards the child or expect the child to meet their own emotional needs.
- (f) They have unrealistic and rigid ideas about child development and a lack of understanding of the child's needs and feelings.
- (g) There is a history of marital trouble and / or violence.
- (h) One partner is not the parent of the child.
- (i) The parents are antagonistic to authority, ultra-sensitive or have an unmet need for approval.
- (j) There are problems of drug or alcohol abuse, mental illness or mental subnormality.
- (k) There is a known history of aggressive behavior.

N.B. Articulate, sophisticated parents sometimes mask symptoms.

## The Child

- (a) The child was born prematurely.
- (b) The child was the result of an unwanted pregnancy.
- (c) The child is 'different' in some way (e.g. physically handicapped or different parentage from the rest of the children).
- (d) The child cries a lot (or is thought to cry a lot).
- (e) The child is unresponsive and has an expression of 'frozen watchfulness'.
- (f) The child appears fearful of saying the wrong thing, is over-anxious, fearful of failure or over-ready to relate to adults. The child looks unkempt or dirty.
- (g) Older children show 'role reversal' appearing to look after the parent or trying to protect the parent.

## **Family Circumstances**

Stress can be a very important factor in triggering child abuse e.g. poor housing, moving house, unemployment, low income, ill health, depression, pregnancy, a new baby, bereavement etc. Several stress factors occurring within a short period of time can cause breakdown in otherwise competent and loving families. Stressful circumstances may be particularly important when:

- (a) The family lacks a 'lifeline' in the form of supportive family or friends, able to give practical help and understanding.
- (b) The family has moved several times and has no local roots.
- (c) There is a known history of previously unexplained (or inadequately explained) injuries, or of previous known abuse of this child or other children in the family.
- (d) Where an adult member of the household has previously been responsible for or suspected of being responsible for child abuse in another household.

- (e) The family already has a high concentration of the characteristics previously described.

## **Sexual abuse**

### **How can child sexual abuse be recognised?**

#### PHYSICAL

1. Bruises, scratches, bite marks or other injuries to breasts, buttocks, lower abdomen or thighs.
2. Difficulty in walking or sitting, complaints of pelvic pain.
3. Torn, stained or bloody underclothing or evidence of clothing having been removed (e.g. vest or pants inside out)
4. Semen on skin or clothing.
5. Psychosomatic complaints such as recurrent abdominal pain, severe headaches etc., or hysterical seizures, fainting fits (sometimes mis-diagnosed as epilepsy).

#### BEHAVIOURAL

##### With sexual overtones

1. Child who hints at sexual activity through words, play or drawings; or hints at the presence of severe family conflict, family secrets or puzzling and/or uncomfortable things at home but is fearful of intervention.

(N.B. Sex education classes may lead some children suddenly to question what has been happening to them over a period of years)

2. Child with an excessive pre-occupation with sexual matters and detailed and precocious knowledge of adult sexual behaviour; one who repeatedly engages in age inappropriate sexual play with peers, toys or themselves; child who is sexually provocative or seductive with adults.

(N.B. It is this premature sexualisation of behaviour which may lead to further sexual abuse)

##### General

1. Sudden changes in mood or behaviour including regressive behaviour.
2. Changes in eating patterns such as loss of appetite, faddiness or excessive pre-occupation with food.
3. Loss of self-esteem and desire to make self unattractive, depression, frozen responses.
4. Lack of trust in familiar adults or marked fears of men (especially in female children who have been abused under threat or with force).
5. Pseudo mature or overly compliant behaviour (often masking distress or anger).
6. Disobedient or aggressive or attention seeking or restless, aimless behaviour with poor concentration.

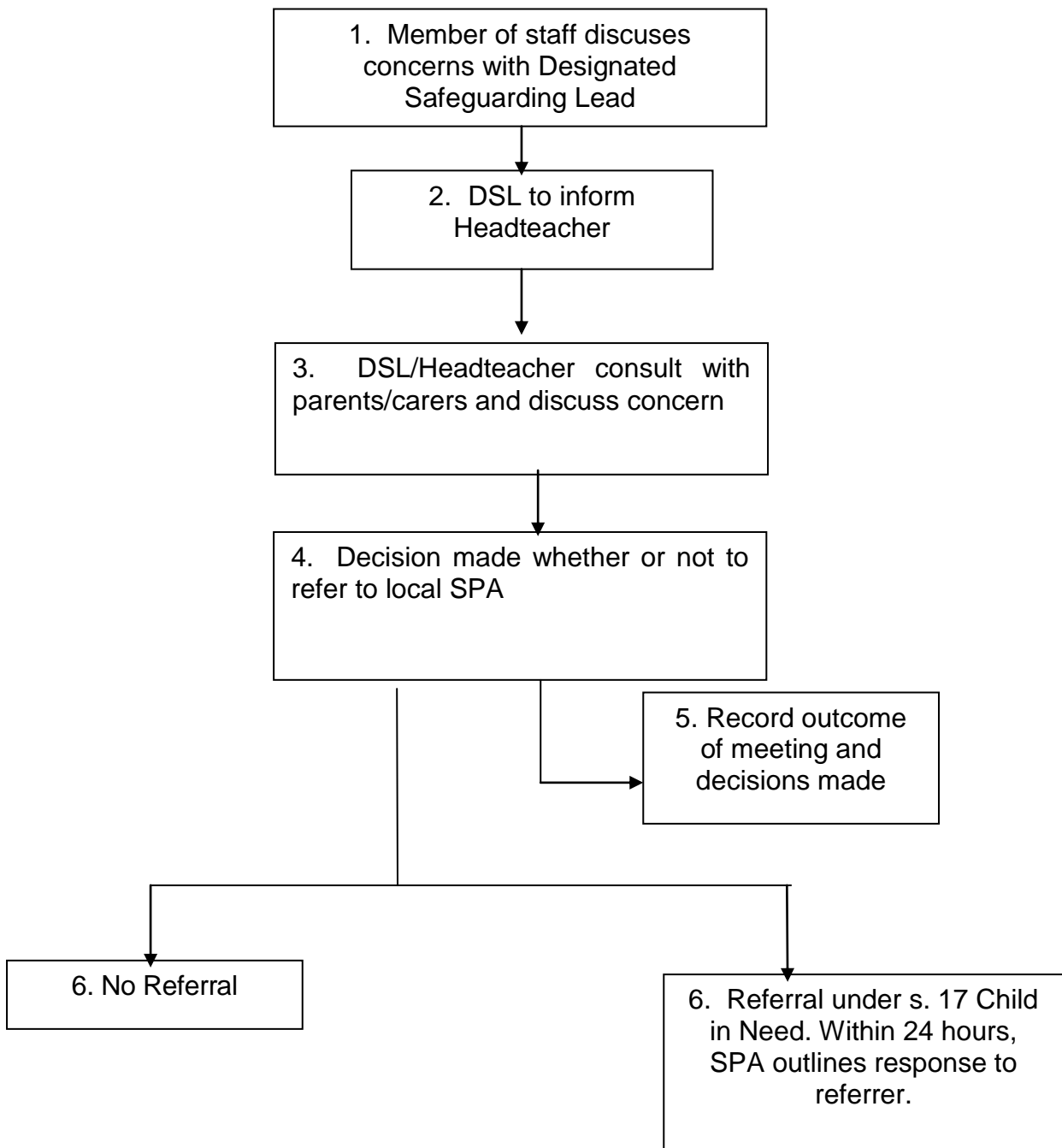


7. Social isolation, long-standing or sudden poor peer relationships. Child withdraws, plays alone, often in a fantasy world.
8. Behaviour indicative of role reversal in the home.

#### In school

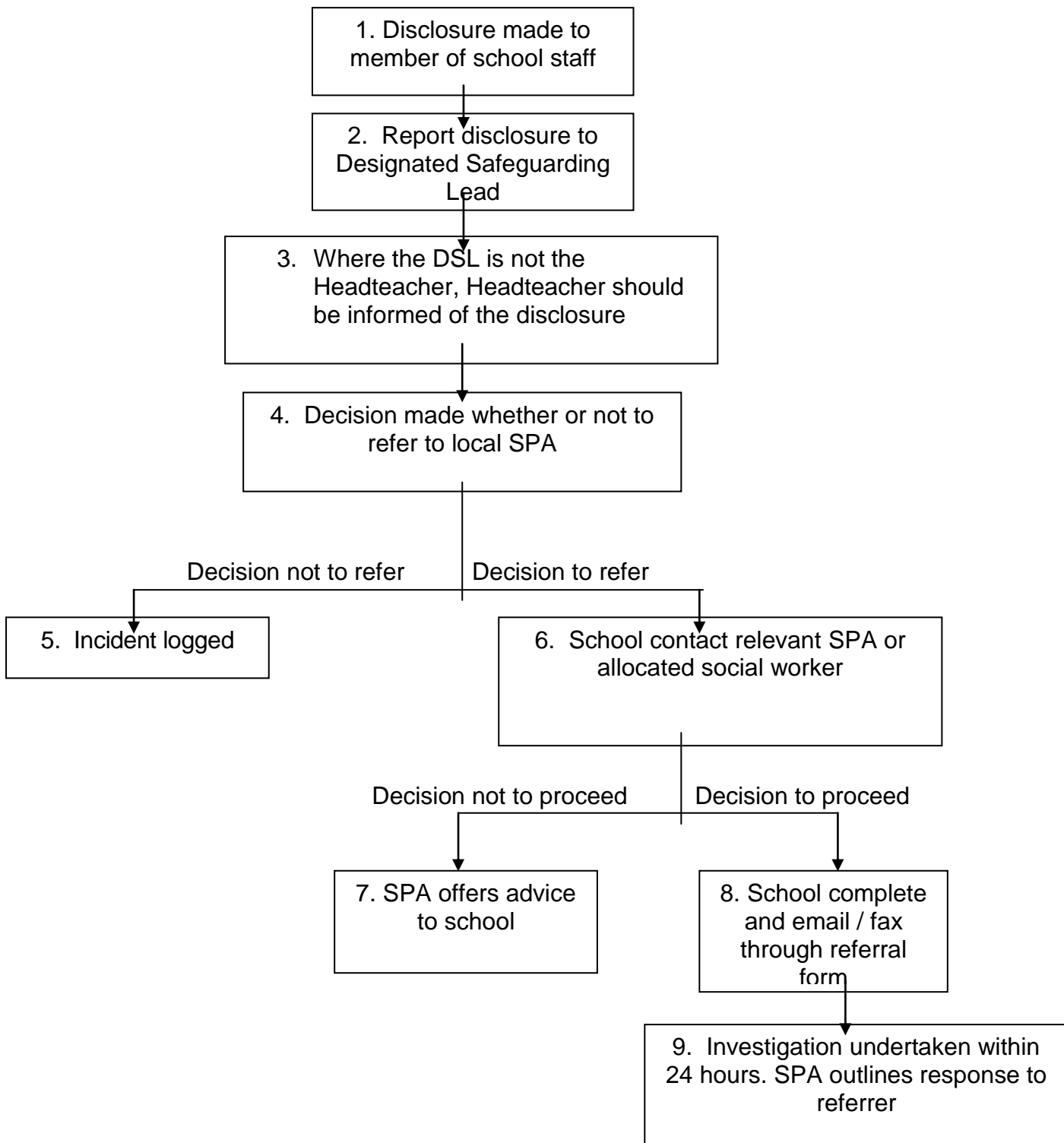
1. Poor peer group relationships and inability to make friends.
2. Inability to concentrate, learning difficulties, or a sudden drop in school performance.  
(N.B. For some sexually abused children school may be a haven – the only place they are allowed to function as a child. They may arrive early, be reluctant to leave and generally perform well.)
3. Marked reluctance to participate in physical activities or to change clothes for PE, games, swimming etc.
4. Regular avoidance of, and marked fear of, school medical examinations.

Flowchart One: When there are serious concerns about a child's welfare but no specific evidence of abuse:

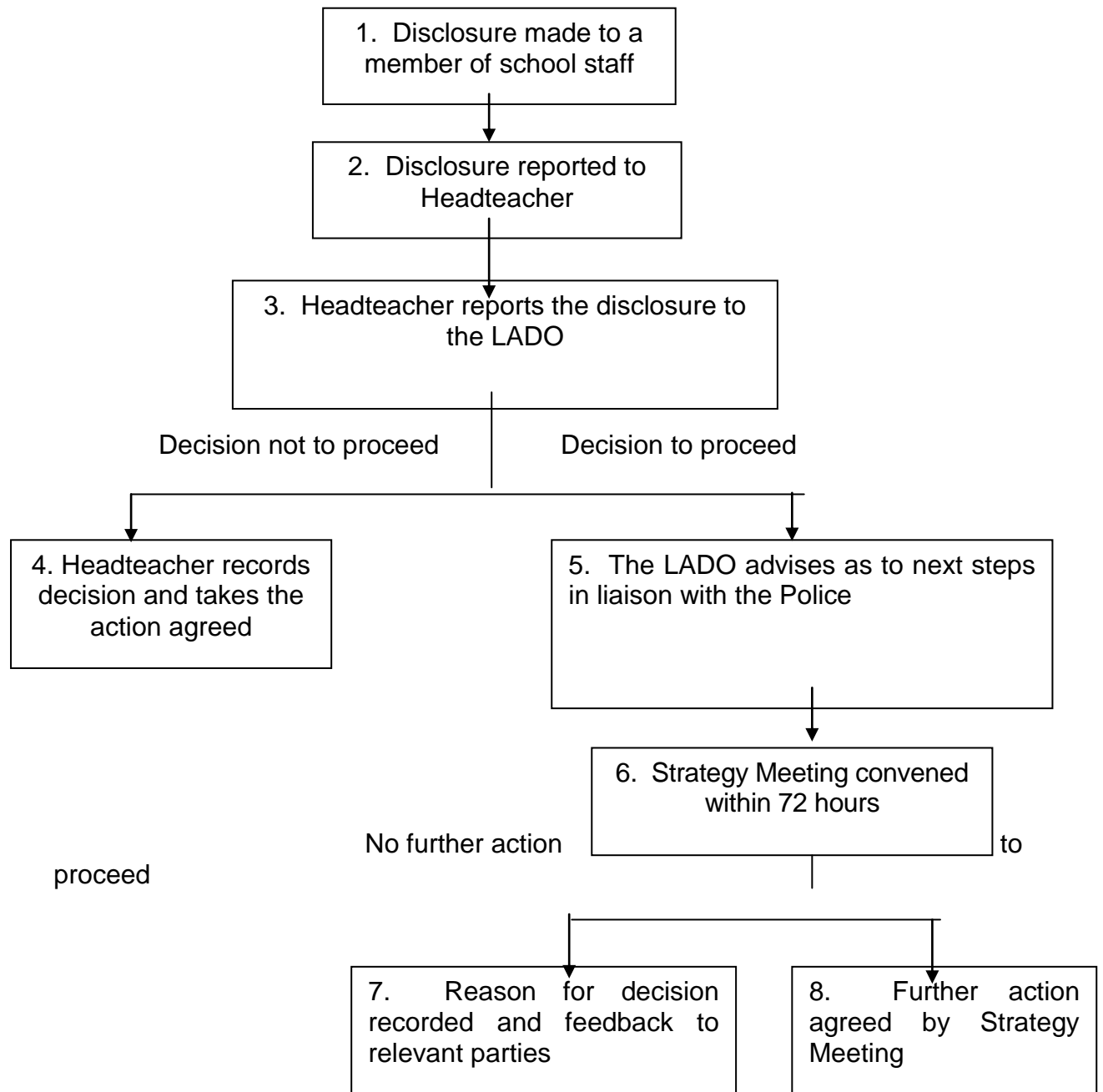


**Flowchart Two:**

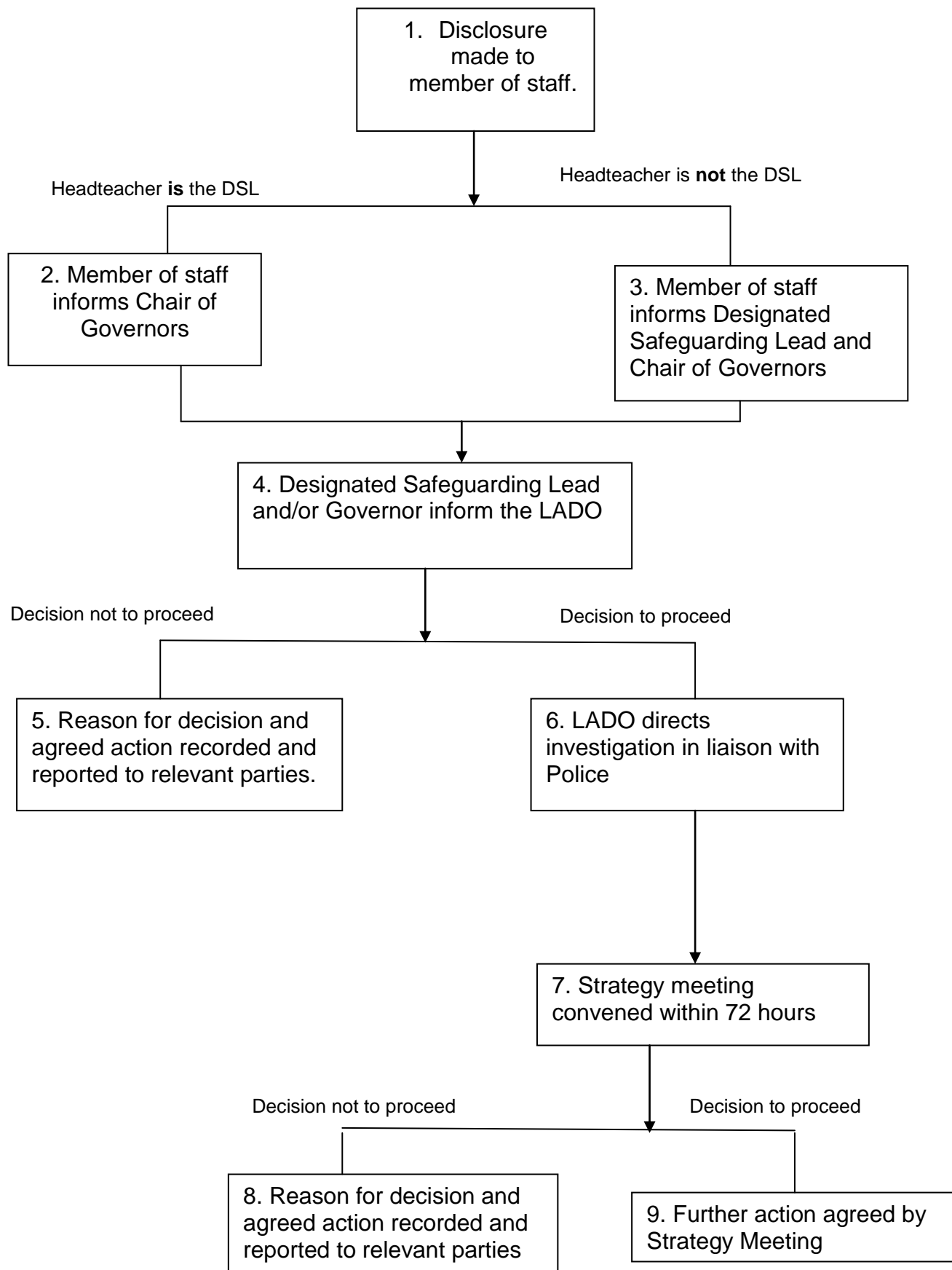
**Action to be taken when child/young person discloses, or a member of school staff suspects, that abuse has occurred outside of school:**



**Flowchart Three: Allegation of abuse by a member of school staff or volunteer (teaching or non-teaching)**



**Flowchart Four:** Referral procedure for when a child/young person discloses to a member of school staff an allegation of abuse by a Head Teacher.



## Child Protection Proforma

Please include the views of both the child and the parent when making this report.

<b>Child's Name:</b>		<b>Date of Birth:</b>	
<hr/>			
<b>Date:</b>		<b>Time:</b>	<b>Place:</b>
<hr/>			
<b>Those Present:</b>			
<hr/>			
<b>Report made by:</b>			
<hr/>			
<b>Incident/Concern:</b>			
<b>Signature:</b> .....		<b>Date:</b>	
<hr/>			
<b>Action Taken (as appropriate):</b>			

**Signature:** .....

Appendix D

Confirmation of Appointment Check List

Name:.....

Post:.....

School:.....

References:

1)..... Date received:.....

Date checked:..... By whom:..... Acceptable: Y / N

2)..... Date received:.....

Date checked:..... By whom:..... Acceptable: Y / N

DBS:  Standard  Enhanced

Does employee have a portable DBS disclosure: Y / N

Date of Issue:..... Is it Acceptable:.....

Disclosure no:.....

Issue Date:.....

List 99 Checked

Medical Clearance: Date Cleared: .....

NI number:     (cannot be Temporary Number)

Does employee have the right to work in the UK: Y / N

I can confirm that all the above clearances are been satisfactory.

Headteacher signature:.....

Date Signed:.....

Please return to Schools HR once completed.

Everyone in the education service shares an objective to help keep children and young people safe by contributing to:

Providing a safe environment for children and young people to learn in education settings; and

Identifying children and young people who are suffering or likely to suffer significant harm, and taking appropriate action with the aim of making sure they are kept safe both at home and at school.

Achieving these aims requires systems designed to:

Prevent unsuitable people working with children and young people;

Promote safe practice and challenge poor and unsafe practice;

Identify instances in which there are grounds for concern about a child's welfare, and initiate/take appropriate action to keep them safe;

Contribute to effective partnership working between all those involved with providing services for children.

Working Together to Safeguard Children (DfE 2015)

## Handling Disclosures of Child Abuse

### Stay calm

Listen carefully to what is said

Do not promise to keep secrets – find an appropriate early opportunity to explain that it is likely that the information will need to be shared with others

Allow the child to continue at his/her own pace

Ask questions for clarification only, and at all time avoid asking questions that suggest a particular answer

Reassure the child /young person that they have done the right thing in telling you

Tell them what you will do next and with whom the information will be shared

Record in writing what was said, as soon as possible, using the child's own words –note date, time and names mentioned, to whom the information was given and ensure that all records are signed and dated.

How your child protection procedures without delay

**REMEMBER: IT IS NOT YOUR DUTY TO INVESTIGATE**

# CHILD PROTECTION PROCEDURES Robin Hood Primary School

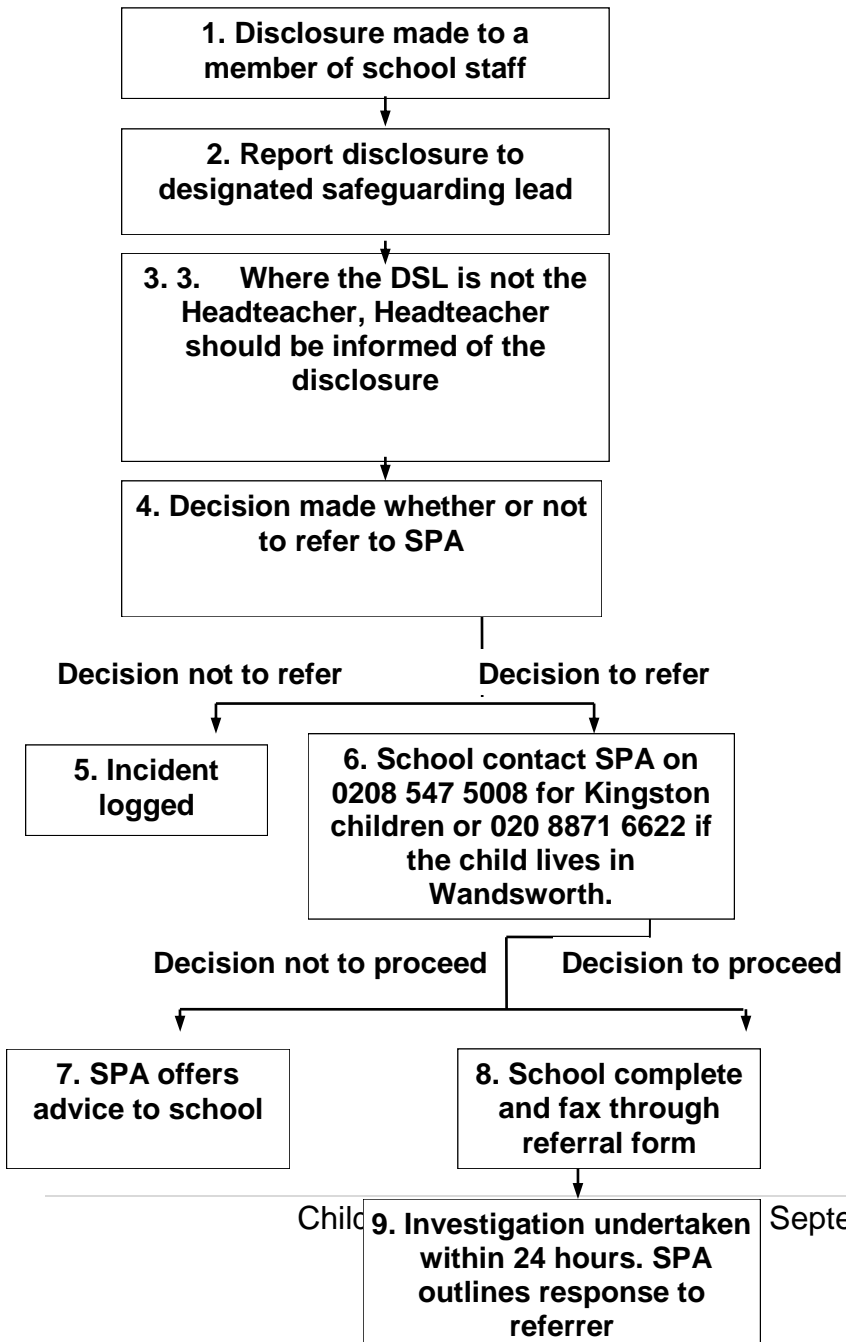


## Managing Allegations and Concerns of Child Abuse

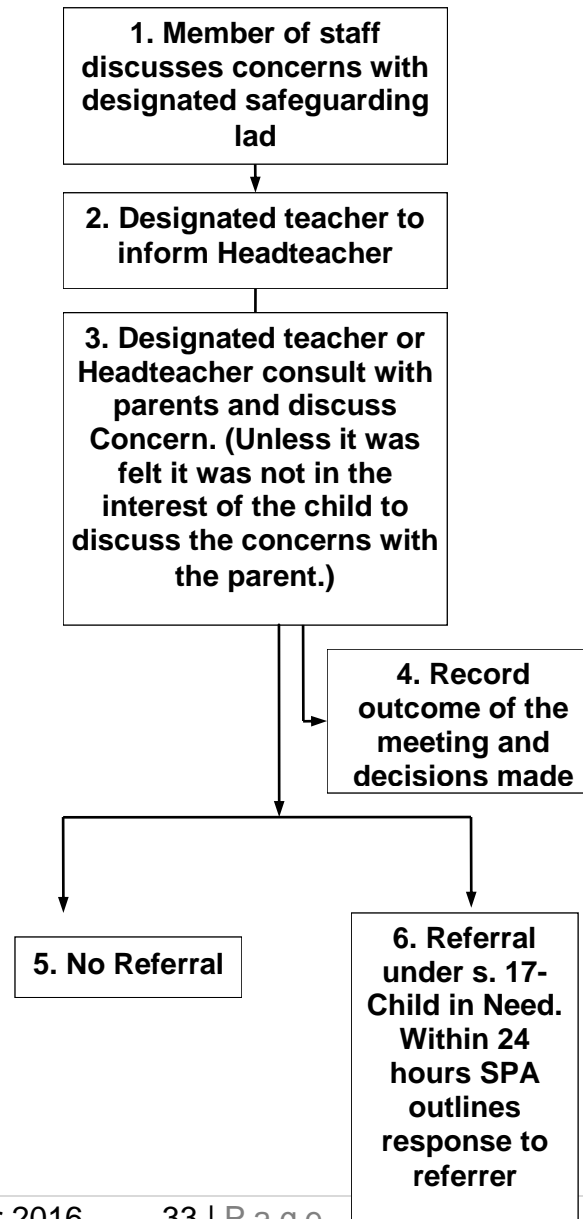
An information leaflet  
for  
School Staff



Action to be taken when a child or young person discloses, or a member of staff suspects, that abuse has occurred outside school:



### Handling Concerns of possible Child Abuse



### CONTACT NUMBERS

The Designated Safeguarding Lead in this school is:

**Mr P Boulton (Headteacher)**

If you worried a child is being hurt or abused, contact **Kingston Single Point of Access (SPA)** on **020 8547 5008**

If you are worried about a child being hurt or abused and you know they are a **Wandsworth resident** contact: **Wandsworth Child Social Services** on **02088716000**

For information and advice about services for young people aged 12+, contact **YOUNG PEOPLE'S SERVICES** on **020 8547 6920**

For information and advice about services for Disabled Children contact **SERVICES FOR DISABLED CHILDREN** on **020 8547 6523**

For Out-Of Hour Services, contact **020 8770 5000**