Ellwood Community Primary School

Child Protection and Safeguarding Policy

Date Reviewed: September 2021

Next Renew Date: September 2022

September 2020: KCSE updated to Sept 2021

Introduction

Ellwood Primary School is committed to Safeguarding and Promoting the Welfare of all of its pupils. The Governors and staff fully recognise their legal responsibility to safeguard and prioritise the welfare of the pupils. We recognise our duty to work with other agencies to ensure there are robust arrangements to identify, assess and support pupils who may be at risk of harm. The school recognises that all staff, including volunteers and students, have a full and active part to play in protecting our pupils from harm. Safeguarding is the responsibility of everyone.

This policy has been developed in accordance with the principles established by the Children Acts of 2004; the Education Act 2002 and is in line with statutory guidance: 'Working together to safeguard children' (DfE 2018) and 'Keeping children safe in education' (DfE 2021). This policy also takes on board procedures and guidance set out by Gloucestershire Safeguarding Children's Executive (GSCE) (www.gscb.org.uk) and due regards to other legislation and guidance but not limited to the following:

Legislation

- Children Act 1989
- Children Act 2004
- Safeguarding Vulnerable Groups Act 2006
- Sexual Offences Act 2003
- General Data Protection Regulation (GDPR)
- Data Protection Act 2018
- The Childcare (Disqualification) and Childcare Regulations 2018

Statutory Guidance

- HM Government (2013) 'Multi-agency practice guidelines: Handling cases of Forced Marriage'
- DfE (2015) 'The Prevent Duty'
- DfE (2018) 'Disqualification under the Childcare Act 2006'

Non-statutory guidance

- DfE (2015) 'What to do if you're worried a child is being abused'
- DfE (2018) 'Information sharing'
- DfE (2017) 'Child sexual exploitation'
- DfE (2018) 'Sexual violence and sexual harassment between children in schools and colleges'

This policy should be read in conjunction with Ellwood School's Safer Recruitment Policy, Behaviour Policy, Anti-Bullying Policy, Code of Staff Conduct, and Acceptable Use Policy.

Both this policy and other relevant school's policies e.g. Acceptable Use Policy, Keeping Children Safe in Education, Safer Working Practices, Staff Code of Conduct Policy are provided to all new staff on induction. Temporary staff, volunteers and students are also made aware of this policy and are given a summary sheet and leaflet, outlining the school's safeguarding procedures and the names of the Designated Safeguard Lead (DSL) and Deputy Designated Safeguard Lead (DDSL).

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the provision of safe and effective care and taking action to enable all children to have the best life chances.

All staff and Governors believe that our school should provide a caring, positive, safe, nurturing and stimulating environment which promotes the academic, social, physical, emotional and moral development of each and every child.

The aims of this policy are:

- To ensure we care for, nurture and support children in ways that will foster their well-being, safety and confidence.
- To inform all staff, parents and volunteers of the need to safeguard children and of responsibilities, processes and procedures for safeguarding pupils.
- To ensure all staff are aware of the level of responsibility they have in identifying and reporting possible cases of abuse or concerns.
- To set out clearly how we monitor and record information for pupils who we feel are at risk or we are concerned about.
- To develop and maintain a structured procedure within the school, which will be followed by all members of our school community, in cases of suspected abuse.
- To develop and promote effective working relationships and partnerships with pupils, other staff, parents and other agencies, especially the Police and Social Care.
- To ensure that all adults who work in school, with pupils, have had all the necessary safeguard checks and are suitable to work with children.

Commitment

We recognise that some children may be more susceptible and vulnerable to abuse, including children with SEND. We also recognise that children who are abused or neglected or have witnessed violence and abuse may find it difficult to develop a sense of self-worth, develop healthy relationships and to view the world in a positive way. We are aware that the difficulties, anxieties and their emotional state may have an impact on their school work and their behaviour may become more challenging or they may become withdrawn. We strive to support these pupils

in any way we can to ensure they feel safe and their needs are being met in our school environment. This is through additional targeted support for academic work, time with our Family Support Worker (Mrs Charles) <mark>and Mrs Rowley, who</mark> help support SEMH needs or to seek support and advice from other professionals.

Safeguarding relates to:

- Staff Conduct
- Curriculum (PSHE + C, Keeping Safe)
- Managing allegations against staff
- Attendance
- Safe recruitment and selection
- Whistle blowing
- Health and safety
- Behaviour management
- Building design
- Child Protection
- Educational visits
- Data Handling
- E-Safety – internet use and cyber bullying/ Acceptable Use
- Anti-Bullying and hate crimes
- First aid/Medical procedures
- Escalation policy
- CME (Children Missing in Education)
- Drugs
- Complaints
- Confidentiality
- Equal opportunities/ Accessibility Plan
- Inclusion/SEND
- Identification of risk and provision of early help
- Identification and protection of children at risk of; radicalisation (PREVENT), FGM (female genital mutilation), Domestic Violence, gang violence, children who run away, children missing in education, hate crime, sexting, trafficking, CSE (child sexual

exploitation), honour based violence, private fostering, gender based violence, drug concerns, mental health concerns

(There may be other areas that are not mentioned here).

<div align="center">**Child abuse can take a variety of forms;**</div>

Physical abuse involves: hitting, slapping, kicking, misuse of medication, undue restraint, shaking or other treatment of a child that can cause actual bodily harm.

Sexual abuse involves: forcing or enticing a child into sexual activities whether or not the child is aware of what is happening. This includes non-contact situations such as viewing child abuse images. It includes CSE (Child sexual exploitation).

Emotional abuse involves: persistent emotional ill-treatment of children, such as frightening them, or putting them in situations of danger. It is also an abuse to convey to children the feeling they are worthless or unloved.

Neglect involves: failure to provide an adequate level of care (e.g. food, warmth and failure to access medical care or services), acts of omission are also a form of abuse.

Abuse can be adult to child but we are also aware of the risks and dangers of peer to peer abuse e.g sexual abuse, sexual engagement in a relationship (consent or non-consensual), bullying, cyber bullying and physical harm/abuse. This should not be passed off as banter and needs to be addressed.

For more detailed information regarding the categories of abuse and indicators, please see **Appendix 1 'Signs of Abuse'.**

Appendix 1a Continuum of need

Appendix 2 gives more information related to current high profile safeguarding issues that could arise and which people need to be aware of.

<div align="center">*3. Procedures*</div>

The school's procedures for safeguarding children will be in line with the Gloucestershire Children's safeguarding executive (GCSE) procedures (GCSE- please see the live website for further information - www.gscb.org.uk). However, we will take into account good guidance published from other sources and use our common sense and professional judgement.

If anyone thinks a child or young person is at immediate risk of significant harm they should contact social care children's helpdesk (MASH -Multi-agency safeguard hub) on: 01452 426565 or in an emergency always call 999. In the case of needing medical help fast dial 111

We will ensure that:

- The school has a DSL (designated safeguard lead) who is a designated member of staff with responsibility for Safeguarding and Child Protection. This is the Head Teacher (Mrs Milford). The deputy DSLs (DDSL – deputy designated safeguard lead) are the deputy Headteacher (Mrs N Marshall), Mrs Charles (FSW) and Miss Peart are also trained as a DDSL.
- Job descriptions are in place for the DSL and DDSL. Trained staff know their roles and responsibilities and they are made clear.
- The Headteacher, Deputy Headteacher and a Governor are trained in safer recruitment
- All members of staff have received Child Protection training (at least every 3 years, most every 2 years) and can identify potential risks, refer to the DSL and seek advice where needed.
- An Early Help Safeguarding Offer is available and made known to staff and is available to parents. This can be found on our school website alongside our Safeguard Policy or requested from the office.
- There is an up-to-date code of conduct for staff which is read by all staff.
- All members of staff update and continue to develop their understanding of the signs and indicators of abuse and have regular training and information disseminated to them.
- All staff are able to identify children who may be vulnerable to radicalisation and what to do when identified. All teachers, TAs (Teaching Assistants) and MDSs (Mid day supervisors) have carried out "PREVENT" online training.
- All members of staff know how to respond to a child/young person who discloses abuse or concerning comments or behaviour. Details are given to staff and are available on the Safeguard board in the staff room, on the school website, in this policy and in the Volunteer and Visitor's guide.
- Parents/carers are made aware of the responsibilities of school personnel with regards to child protection procedures.
- Staff have an enhanced DBS, are prohibition checked, barred list checked, identity checked, professional qualifications checked, and have been checked with reference to oversees working. Leadership roles are subject to a 128 check. These are all on the SCR (single central record). (Only teachers have prohibition and barred checking)
- Governors have an enhanced DBS and 128 check.
- Volunteers are also DBS checked, if they take part in regulated activities.
- Parents can access our Safeguarding Policy on the school website or request a copy from the school office.
- We strive to contact families on the first day of an absence to see why a child is not at school, by 9.30 a.m. and will keep trying throughout the day. If child on child protection register, we will contact their social worker.
- If no contact or reason for absence is given, as a school, we inform the Local Authority of any child absent without permission for 10 days or more (or earlier if concerns arise).
- If no contact or reason for absence is given, as a school, we inform the Local Authority of any child absent without permission for 10 days or more (or earlier if concerns arise).

- Staff are aware of FGM (Female Genital Mutilation) and the procedure to follow if they have a concern relating to this. All staff have completed the FGM Home Office online training. The Headteacher attended face to face training.
- Staff are aware of the vulnerable pupils in school.
- Staff will deal promptly with peer to peer abuse or difficulties.
- Concerns or observations are recorded on "my concern" system and these may help to build a picture over time and <mark>can be updated regularly to keep chronologies about a child, action taken and outcomes.</mark>

Responsibilities

All staff responsible for safeguarding children:

- Should avoid any conduct which would lead any reasonable person to question their motivation and intentions
- Are responsible for their own actions and behaviour
- Work in an open, safe and transparent way
- Work in a professional manner with other colleagues and build good working relationships and trust
- Identify signs and symptoms of abuse
- In the case of FGM (female genital mutilation), staff will personally report the disclosure to the police
- Know how to find the referral information or contact details and make a referral if needed to the DSL or Social Care.
- Seek support and advice from the Head Teacher, DSL, DDSL and Social Care for a pupil if incidents have caused concern
- Teachers will report a concern on 'My Concern' (Schools Safeguard recording program). These concerns are then followed up by the DSL/DDSL or nominated member of staff.
- Other staff will complete 'cause for concern' form – Appendix 3 if there is a concern and they are unable to access my concern.
- Record any incidents or actions made and subsequent action and follow up (Appendix 4) or a referral to the DSL if concerns are not immediate dangers.
- Apply the same professional standards regardless of gender, sexuality or religion
- Be aware of confidentiality practice
- Are aware that breaches of the law and other professional guidelines could result in criminal or disciplinary action being taken against them
- <mark>Ensure pupils are aware what to do and promote measures to prevent bullying of any kind, including cyber, prejudice based and discriminatory bullying.</mark>
- The school uses SWGFL (South West Grid for Learning) boost to ensure that our pupils are protected from harmful on line material and ensure pupils are aware of online safety and dangers. We hold regular Internet Safety <mark>workshops in including sexting (at age appropriate</mark>

==information) , consensual sharing of images or content. We highlight; content, contact, conduct and commerce (online gaming/gambling).==

- ==Have an awareness of the issues caused by online abuse and the impact on mental health and well-being.==
- Help to ensure their own knowledge of safeguarding issues and procedures are up to date.
- Should distinguish between a concern, risk of harm or immediate danger
- Take peer on peer abuse seriously and strive to minimise peer on peer abuse in a number of ways. Staff are made aware of the possibilities of peer on peer abuse, children have access to the school's Family Support Worker, to whom they are able to share concerns relating to abuse, or other worries. The school's PSHE ==and RSE== curriculum covers areas such as healthy relationships, stranger danger, online safety, bullying and friendships. Worry boxes are available for pupils to put in any concerns they have. We have an up to date behaviour and anti-bullying policy and we have internet safety workshops for pupils, staff and parents relating to internet safety. Staff realise that incidents of peer on peer abuse are serious and need to be taken seriously.

The Designated Safeguard Lead (DSL) is Mrs Milford – The Headteacher (head@ellwood.gloucs.sch.uk) and the Deputy Designated Safeguard Leads (DDSL) are Mrs Marshall (n.marshall@ellwood.gloucs.sch.uk), Mrs Charles (FSW) (m.charles@ellwood.gloucs.sch.uk) and Miss Peart (c.peart@ellwood.gloucs.sch.uk) and they are responsible for:

- ==Engage and raising== awareness of their role of responsibilities with staff, parents and children.
- Ensuring their training is up to date (every 2 years multi-agency).
- Ensuring the safeguard policy is made public, accessible and work with the Governing Body to review the policy annually.
- Ensuring transition and sharing of information is smooth and forwarded in a timely manner
- Providing an annual report to Governors promptly, detailing any changes, training, number of incidents/cases of CP and have a section on the Headteacher's Report to Governors.
- Adhering to Local Authority (LA) guidance and school procedures with regard to referring a child, if there are concerns about possible abuse.
- Update 'My Concern' regularly and record concerns and follow up.
- Keeping written records of concerns about a child, even if there is no need to make an immediate referral and maintain a 'watchful eye'.
- ==Aware of the long term impact abuse can have on an individual and the trauma they may suffer.==
- ==Ensure staff have read part one of KCSE 2021 and Annexe B (para 54).==
- ==Co-ordinate support for children who have welfare, safeguard and child protection concerns and needs.==

- If referrals are made to Social Care – follow up.
- Ensuring that all such records are kept confidentially and securely and are separate from student records. This information should be shared with relevant professionals and during transitions e.g. secondary school/new school.
- Representing the school at Child Protection meetings.
- Ensuring that Social Care is informed if any child on the child protection register is absent without explanation.
- Ensuring staff receive induction and regular training and support in all elements of safeguarding including; identifying signs of abuse, Early Help, Prevent Duty, FGM.
- The DDSL should inform the DSL/HT of any safeguarding issues especially under section 47 of the Children's Act 1989 and Police investigation.
- Ensuring policy and associated documents are known by staff and updated.
- Encouraging vigilance within the school.
- Providing and signposting CPD for staff.
- Support pupils with a social worker by monitoring and promoting their attainment, wellbeing and social development.
- To support pupil's mental health and have awareness of trauma and how this can impact on children and how it can be linked to safeguarding.

Governing Body:

- The Governing Body 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 school or colleges are effective and comply with the law at all times.
- ==Mrs Cornock is the Safeguard Governor.==
- The monitoring and evaluation of the child protection training that staff receive.
Reviews aspects of safeguarding children/working practices and any further developments, which are required.
- Annually review the Child Protection and Safeguard Policy.
- Monitor Safeguarding procedures with school e.g. Health and Safety Audit, Safeguard Audit and SCR ==(Single Central Record) and files.==

<u>**Safe Practice in School**</u>

Ellwood Primary School will ensure that:

- The school complies with current safe practice guidance and safer working practices to ensure that pupils are safe.
- The school has this Safeguarding Child Protection Policy in place in accordance with Local Authority guidance and locally agreed inter-agency procedures, and the policy is made available to parents on request, displayed on our website and available for staff in the school's handbook and in the staffroom. We also use other guidance to inform us.

- The school operates safer recruitment procedures and makes sure that all appropriate checks are carried out on staff and volunteers who work with children; and that any panel involved in the recruitment of staff has at least one member who has undertaken the LA or equivalent Safer Recruitment Training.
- The school has procedures for dealing with allegations of abuse against staff and volunteers, which comply with guidance from the Local Authority and locally agreed inter-agency procedures.
- Conduct based on trust, transparency and openness.
- Listen to the child – through conversations, lessons, parental views, questionnaires and conferencing.
- Promote that we are a 'telling school' and children know who they can talk to if they have any concerns.
- A nominated Governor responsible for Safeguarding (Mrs Cornock) will ensure that the school adhere to the policy and support the DSL when necessary.
- Mrs Milford and Miss Peart are designated CiC (Children in Care) lead/ LAC (Looked after children) lead.
- Miss Peart supports with safeguarding across the school.
- Ensure children are aware of how to safe online.
- The Headteacher of the school is designated as the DSL/DDSL for child protection issues, providing advice and support to other staff, liaising with the Local Authority and working with other agencies. The DDSL (Mrs Marshall) is a member of the SLT and Mrs Charles (FSW) is also a Governor.
- As a school we promote the principles and aims of the Gloucestershire Encompass Model and support the Key Adults in our school to fulfil the requirements of the Gloucestershire Encompass Protocol.
- We recognise the sensitive nature of the information that may be provided and will ensure that this is retained in accordance with the principles of data protection.
- The school will review annually the workload for the DSL by reviewing tasks related to child protection work undertaken.
- Staff, including the Head Teacher, undertake appropriate child protection training which is updated regularly in line with GSCB guidance.
- They remedy, without delay, any deficiencies or weaknesses regarding child protection arrangements.
- They will refer to the Early Help document (Appendix 5) if deemed necessary or suitable if a child or family member have a vulnerability e.g medical/exploitation/mental health difficulty/prison/offender/SEND/violence or absence.
- The Chair of Governors is nominated to be responsible for liaising with the LA and /or partner agencies in the event of allegations of abuse being made against the Head Teacher

- The school review their policies and procedures annually and provide information to the LA about them and about how the above duties have been discharged through the annual Safeguard Audit.
- Staff will be vigilant of the vulnerable children and pay particular attention to vulnerable children who may not be able to communicate easily or express their needs (Speech and Language difficulties, SEND, Physical).
- Report to the Local Authority any child absence of more than 10 days. Reasonable attempts will be made on the first day to contact families to see why the child is not at school. If a child is known to social care, the Social Worker will be contacted.
- Pupils have the opportunity to speak to an adult if they are worried or concerned about keeping safe or can put concerns in the worry box for the FSW to read.
- Pupils can tell an adult if they are being abused by an adult or by a peer or a peer is making them feel unhappy or unsafe. The RSE curriculum promotes this.
- We liaise and work with safeguarding partners and contribute to multi agency working.
- If the school facilities are hired by outside organisations, we expect the that they have safeguard procedures in place.
- Staff have the opportunity to train in mental health.

The Head Teacher will ensure that:

- The Governing Body receives yearly awareness training in respect of their roles and responsibilities in regard to Child Protection/Safeguarding.
- Safeguarding is an item on the agenda in staff meetings and governor meetings.
- The Governing Body adopts appropriate policies and procedures to safeguard children at Ellwood Primary School.
- Policies and procedures are implemented by all staff and volunteers.
- Parents/carers are made aware each autumn term of the safeguarding policies that are in place and who the DSL and DDSL are.
- Sufficient resources and time are allocated to carry out Safeguarding Children/Child Protection effectively.
- There is a DSL/DDSL for Ellwood Primary School Mrs Milford (DSL), Mrs Marshall, Mrs Charles (DDSL) and Miss Peart, who have received appropriate training for this important role. Ensure staff and volunteers have a safeguarding induction.
- All staff and adults working in the school understand their safeguarding children responsibilities and are able to voice their concerns if they feel a child is vulnerable or at risk.
- Staff are aware of the "whistle blowing" protocol and escalation policy and understand they must voice their concern of any individual working practices that are deemed unsafe, unprofessional or not happy with a response.

- The school develops effective working partnerships with relevant agencies and cooperates as required in regard to safeguarding children matters, including attendance at child protection conferences and other related meetings.
- The school provides appropriate reports for child protection meetings.
- All information and records are kept confidentially and securely. In a hard copy or on 'My Concern'.
- Recruitment and vetting procedures are followed in all appointments of staff including those working in the school in a voluntary/unpaid capacity.
- Site security is in place with all visitors required to identify themselves, then sign in and sign out when leaving the school and are supervised appropriately, if needed.
- Organise Safeguarding training.
- All staff can liaise with Social Care if needed and deliver in-house training and deliver in-house training and updates.
- Keep children's records and store them safely.

The DSL and DDSL (in her absence) liaise with Social Care and other agencies if abuse is suspected or to find out more or share information.

The main responsibilities for the DSL (if not the HT/DDSL if the HT is not available) are:

- To attend and represent the school at child protection meetings and if she is not available, ask the deputy to attend.
- To securely and confidentially store child protection files and monitor 'My Concern'.
- Share information when needed.
- To adhere to and follow procedures outlined in the Local Safeguarding Children's Executive Board Procedures and KCSE (2021) document.
- To help identify signs and symptoms of abuse.
- Refer suspected cases of abuse to Social Care/Police.
- Ensure all staff receive child protection awareness and training.
- To raise awareness of child safety issues and safeguarding within the school.
- Ensure that the school has an up-to-date Safeguard and child protection policy, which is consistent with the GSCE procedures. The policy should be reviewed annually.
- To develop good working relationships/links with Social Care and other relevant professionals.
- To raise awareness of their role and responsibilities with staff, parents and children.
- To meet with staff, if they have concerns and offer support.

The school community will:

- Establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.
- Ensure that all children know where there is an adult in the school whom they can approach if they are worried or in difficulty.

- Include in the curriculum opportunities for PSHE+C/RSE, which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help.
- Strive to keep up to date with new information.
- Seek opportunities for our children to know how to keep safe e.g. plays/assemblies/visits/visitors.
- Remain vigilant and be a 'telling' school.

Ellwood Primary Prevention

We recognise that our school plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults and an ethos of protection. Ellwood Primary staff and the Governing Body also recognise that because of the day to day contact with children, staff are well placed to observe the outward signs of abuse or other issues impacting a child (e.g. self-harm, low self-esteem, low-mood).

The school community will therefore:
- Utilise the expertise of PCSO assemblies, NSPCC workshops, CEOP workshops, Police, Road Safety, Fire Safety and Cycling Proficiency talks.
- Ensure that all children know there is an adult in school whom they can approach if they are worried or in difficulty. E.g. Teacher, FSW or HT.
- Include opportunities across the curriculum, including in the curriculum (explicit SMSC/PSHE/SRE topics), provide support (and telephone helplines). In particular, this will include anti-bullying work, e-safety, child exploitation, feeling safe.
- Include opportunities in the curriculum to prepare for transitions. Transitions can be a time of great anxiety, so considering additional emotional support that some young people may need is important to keep children safe; e.g. teaching confidence and staying safe in more independent travel situations is also important.
- Encouraging self-esteem and assertiveness through the curriculum, whilst not condoning aggression or bullying.
- Liaising and working with all other services and agencies involved in safeguarding or supporting children where appropriate.
- Seeking Early Help for young people when concerns become apparent or notifying social care (via MASH team) as soon as there is a significant concern.
- Have a School ethos which promotes and supports pupil's awareness of dangers and staying safe. A positive, supportive and secure environment gives pupils a sense of being valued. Our motto is 'Believe, Achieve, Belong'.
- Liaison with other agencies that support the pupil such as social care, Children and Young People Service (CYPS), Targeted Support Team, Education, Performance and Inclusion Team (EPI Team), Educational Psychology Service and the Advisory Teaching Service (ATS).
- Ensuring that, where a pupil who has a child protection plan leaves, their information is transferred to the new school immediately or as soon as reasonably possible and that the child's social worker is informed. We meet with secondary school staff prior to pupils leaving us.

Ellwood Community Primary School has a number of systems and procedures to try and prevent safeguarding incidents.

- We have a Family Support Worker (FSW), Mrs Charles and Mrs Rowley are on hand to listen to children, who appear low in mood or ask for help. The children are all aware of the role which Mrs Charles/Mrs Rowley play and can ask to see them as needed; either by asking them, the class teacher or by putting a card in the box in the Hub. Mrs Milford (HT) is also available to talk to if children are upset or worried.

- Staff also recognise that children who have been abused or witness violence may feel helplessness, humiliation and some sense of blame. Ellwood Primary may be the only stable, secure and predictable element in the lives of children at risk. Their behaviour may be challenging and defiant or they may be withdrawn.

Early Help (please see appendix 5 for the school's early help offer) All staff are aware of the early help.

The school recognises that early identification of risk is key to safeguarding all children/young people and adults. Staff receive regular updates on potential risks such as: Drugs, Mental health, Domestic Abuse, Honour Based Violence, Forced Marriage, Female Genital Mutilation, Child Sexual Exploitation and Extremism and know what to do should they identify a person at risk. The DSL (Head Teacher) is responsible for coordinating the offer of Early Help and this can be found on the school website or requested from the Head Teacher.

There is universal help for all our families in Gloucestershire. The Gloucester family information Service (GFIS) provides advice on childcare, finances parenting and education. They may be contacted on: 0800 542 0202 or 01452 427 362 or familyinfo@gloucestershire.gov.uk or www.glosfamilies.org

The GSCE may also be contacted at www.gscb.org and offers useful information with regards to keeping children safe.

Ellwood Community Primary School offers support for all pupils and families. Staff are available to discuss any concerns or signpost families to other organisations. Parents can talk to their child's class teacher, Headteacher, SENCO (Miss Peart / Mrs Woodhouse) or the Family Support Worker (FSW). The school office may be contacted on 01594 833232

We support our pupils through our curriculum: PSHE+C (Personal, Social, Health, Education +Citizenship) lessons, SRE (Sex, Relationship Education) and SMSC (Social, Moral, Spiritual, Cultural) development. These cover topics such as drugs, relationships, internet safety, anti-bullying, bereavement, healthy living and resilience; this helps to enable children to make informed decisions.

There are a number of screening tools and useful toolkits that can help identify issues.

The Child Protection Referral Process

There is a safeguarding noticeboard in the school staffroom or more information can be obtained through the live GSCE website (www.gscb.org.uk)

Ellwood Primary School Staff (teaching, volunteers and support) will report any concerns they have about a child's safety to the DSL/DDSL.

They will 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 and explanation given, which appears inconsistent or suspicious
- Any behaviours which give rise to suspicions that a child may have suffered harm (e.g. 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 disclosure of abuse from any person
- Any concerns regarding person(s) who may pose a risk to children (e.g. living in a household with children present)
- Raise the concern with their line manager, DSL or DDSL
- Complete a concern form and log concerns.

Process

The DSL or other trained member of staff, in the first instance, will ring the helpdesk (The Front Door) if URGENT and ask to speak to a duty worker for advice or will make a referral to the Children's Social Care, The MASH Team/Front Door on 01452 426565. They will then complete and send the MARF (Multi Agency Service Request Form) within 48 hours as written confirmation of the verbal request.

They will speak to parents/carers (if it does not put the child at further risk or impact on a police investigation.

- If a referral is made to MASH team basic information is given. School will then be asked to complete a MARF (*Multi Agency Referral Form)* and email the form or complete online. This is passed on to a social work team and the caller will be contacted by a social worker within 24 hours (unless there are immediate risks in which case the professional will put through to a social work team straight away). The social work team will discuss whether the referral is appropriate and what action can/will be taken.
- In the case of a referral direct to social care a MARF should also be completed. If accepted the referral will lead to an Initial Assessment to determine whether there is suspected actual harm or likely significant harm. The Strategy Discussion is convened

by the appropriate child Assessment team where there is suspected actual harm or likely significant harm (within 10 days of referral):

- Child in need of services are required when there are health or development concerns or a child is disabled. These are determined through a core assessment and are appropriate when the child is judged not to be at risk of significant harm or any previous concerns have been resolved.
- Child in need of Protection. A Section 47 enquiry is required when it is judged there is suspected actual harm or likely significant harm to the child - the case is then passed onto the Safeguarding Team. A core assessment is carried out and it may be decided that Child Protection Conference is required, which should then be held within 15 working days.
- However, where a professional has assessed using the Levels of Intervention Guidance (see www.gscb.org) that a child or young person has complex needs and they feel that a specialist assessment from Children's Social Care is needed, they should complete the MARF but do not need to contact the Children and Families Helpdesk before sending it through.
- If professionals would like to speak to someone for advice and guidance relating to their concerns, then support is available from their local Child Assessment Team.
- If a child already has an allocated Social Worker then they can be contacted directly and it is not necessary to complete the MARF.
- Refer to the Child Protection flow chart – available on school website or in the staffroom.

If a child makes a disclosure:
"Record of Discussion Form" – see Appendix 3 (which can be found in the staffroom or staff handbook.)

During the Disclosure
- A 'Record of Discussion Form' will be completed at the time of disclosure. Forms, clearly displayed in the Staff Room and a copy is in the Staff Handbook and available to volunteers and supply staff.
- Respect the child by listening to what he/she has to say and taking what the child says seriously. Believe what the child is telling you.
- Provide a safe environment.
- Tell the child he/she is doing the right thing and that you will do what you can to help them.
- Reassure them they haven't done anything wrong and will be supported and kept safe. Remind them that it is not a problem they have reported it and they will not be made to feel ashamed.
- Reassure the child that he/she did nothing wrong.
- Listen and don't make assumptions. Listen more than you talk, and avoid advice giving or problem solving. Don't put "words in the child's mouth" or assume you know what he/she means or are going to say. Let the child use language they are comfortable with. Let the child set the pace, don't rush them, give them time.
- Listen to the child, letting them explain what happened in his or her own words. The voice of the child is important.

- Limit questioning to only the following questions if the child has not already provided you with the information. Refrain from interrogating, limit questions, especially leading questions, which means a question in which you provide a possible answer - Did this or that happen? Were you at school?
- When reporting child abuse to the appropriate authorities, it is important to have the following information: what happened, when it happened, where it happened, who did it and their relationship to the child. You will be asked for some identifying information such as your name, address, where you work, and how the child disclosed. All of your identifying information will be kept confidential.

Example questions:
• What happened?
• When did it happen?
• Where did it happen?
• Who did it?
• How do you know them? (If the relationship of the abuser is unclear)

- Make no promises. Don't tell the child that you won't tell anyone what they tell you. Explain that you might need to speak to other people to ensure that they are safe.
- Document exact quotes – write exactly what the child tells you.
- Be supportive, not judgmental. Don't talk negatively.
- Have an understanding about abuse and neglect. Know the four kinds of child abuse: physical, emotional, sexual, and neglect.
- Teachers will then update the information on 'My Concern' and upload any relevant documents.

If needed complete a referral to DSL. If a member of staff thinks a child is at immediate risk of significant harm and is unable to immediately speak to the DSL or DDSL, they should contact (The MASH Team) on 01452 426565 or in an emergency call 999. Any such referral should be reported to the DSL or DDSL as soon as possible after referral.
You may be asked:

- Nature of the concern.
- Name, address, DOB of child.
- Any information about previous concerns/information and any current information.

Following up referrals

- The agency to which the referral was made eg. Social Care, should inform the referrer of their action. Where this does not happen promptly the referrer should re contact the agency to which it made the referral to be assured that action is being taken or that alternative support is being recommended.
- If after a referral the child's situation does not appear to be improving, the DSL should press for a re-consideration.

- It is essential that the school remains actively involved in support and plans even where another agency is taking the lead whether at early help, child in need or child protection level.
- Where there is a difference of opinion with another agency and this cannot be resolved the LSCB Escalation policy should be used.
  http://www.gscb.org.uk/media/1224/escalation_policy_may_2014-60436.pdf

Safeguarding Information for Students/Pupils

All children in our school know who they can talk to if they have any worries or concerns, in particular Class teacher, TA, Headteacher or Mrs Charles (FSW) and Mrs Rowley. Pupils receive information about how they can stay safe in different environments and situations. We regularly talk about this in P.S.H.E lessons (keeping safe), Life Bus, Internet Safety, Childline Visits, NSPCC, PCSO access to Teens in Crisis and individually with pupils through discussions with our family support worker (Mrs M Charles) and Mrs Rowley. Children are made aware of the member of staff with responsibility for child protection. We regularly inform pupils of whom they might talk to, both in and out of the school, their right to be listened to and heard and what steps can be taken to protect them from harm. [There are specific lessons taught that are designed to help keep pupils safe].

Supporting Children/Young People and their Families

We strive to offer stability and consistency in pupils lives. For some children school may be the only routine and environment they feel emotionally safe and secure in.

The school will support all students by:

- Encouraging self-esteem and self-assertiveness, without condoning aggression or bullying.
- Working with and supporting families and signposting parents.
- Promoting a caring, safe and positive environment within the school, where all feel safe and secure and listened to.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying Children's Social Care when there is a significant concern.
- Having an informative curriculum.
- Signpost and liaise with other agencies.
- Enabling time with the Head Teacher, Class Teacher, Teaching assistant or the Family Support Worker (Mrs Charles) to discuss issues and worries.
- Ensuring that appropriate information is forwarded confidentially to the child's new school or placement.
- Have regular class and group discussions through; through school council, pupil conferencing, anti-bullying, PCSO, NSPCC workshops and CEOP workshops etc.

- Take each case on a case by case basis – not one size fits all. Take in contributing factors e.g disability, SEND, victim of abuse and home circumstances.
- Offer support for children and their families, if needed, even if they don't meet the child protection threshold.

Confidentiality

The school recognises that all matters relating to Safeguarding and Child Protection are confidential. However we will always share information, if relevant, and needs to be shared with regards to safety of pupils. The Data Protection Act 2018 & GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe.

The DSL and deputy DSL will disclose any information about a student 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.

We will always try to share information with parents if we have a concern or make a referral unless it would put a child at further risk or hinder a police investigation. All staff must be aware that they cannot promise a child to keep secrets.

Child protection records are kept securely in a locked cabinet in the HT office. Only the HT, FSW and DDSL can access them. 'My Concern' is password protected and can only be accessed by nominate staff members.

Supporting Staff

Ellwood Primary School recognises 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.

The school will support such staff by providing an opportunity to talk through their anxieties or concerns with the DSL and to seek further support as appropriate. Supervision will be offered and provided if needed.

Allegations Against Staff (allegations made against/concerns raised)

It is possible that a student may make an allegation against a member of staff. This could meet a safeguard concern threshold, could be a low level concern or not be upheld.

If such an allegation is made, the member of staff receiving the allegation will immediately inform the Head Teacher. The Head Teacher on all such occasions will discuss the content of all allegations with the Local Authority Designated Officer (LADO) and will follow their advice.

If the allegation concerns the Head Teacher, the member of staff will immediately inform the Chair of Governors (Mrs Ulyatt), who will consult with the Local Authority Designated Officer (LADO) on 01452 426994. Ellwood Primary School will follow the school's procedures for Allegations of Abuse against Staff, a copy of which will be available from the school office. The incident will be reported and recorded correctly. This will be factual and not opinions. If it is a substantial allegation it will referred correctly following the allegations policy.

Ellwood Community Primary School has a separate Whistleblowing Policy. All staff should be aware of their duty to raise concerns, where they exist, about the attitude, behaviour or actions of colleagues if causing real concern. There is a separate Whistle Blowing Policy available from the school office.

All staff should take care not to place themselves in a vulnerable position with a child. Where possible, work with individual pupils or parents should be conducted in view of other adults e.g. doors left open if alone with children.

Guidance about conduct and safe practice, including the safe use of mobile phones by staff and volunteers will be given during induction and included in the staff handbook.

If staff need to consult outside school they should contact the LADO in the first instance. There is also a NSPCC Whistleblowing helpline on 0800 028 0285 or help@nspcc.org.uk This is helpful for people who are worried about raising an issue in the school. If staff have a concern about any practice, policies or procedures they are encouraged to speak out.

Safer Recruitment

Safer recruitment is a vital aspect of Child Protection. The school has a separate Safer Recruitment policy, which follows guidance from The Children's Workforce Development Council (CWDC). The recruitment process at Ellwood primary Schools follows the correct procedures such as; job description and person specification available, shortlisting criteria, interview questions planned in advance, gaps in employment investigated, safeguard checks and questions, references, relevant checks, right to work in UK and enhanced DBS checks.

In line with Government guidance, at least one recruiter will have been safer recruitment trained and will and be involved in the complete selection process. At Ellwood primary School, we strive to have all recruiters trained in safer recruitment.

Accredited recruiters: Mrs D Milford, Mrs N Marshall, Mrs Charles and Mrs H Cornock (Vice Chair of Governors).

Staff read and sign to say they have read and understood the 'Safer Working Practices' and relevant sections in KCSE 2021 document. There also a number of other sag=regarding documents which staff read.

No member of staff or volunteer in a regulated activity will be left alone with children until the enhanced DBS check has been carried out.

Prevent Duty

The school has due regard to the need to prevent people from being drawn into Terrorism (Prevent Duty), as part of our wider safeguarding duties. We promote fundamental British Values; challenging extremism within a safe place. The Head Teacher receives training through the CHANNEL program in order to recognise the signs of radicalisation and how to act upon them. All staff have completed an online module helping them to understand why pupils may be drawn in to radicalisation and what they can do if they have concerns.

Peer on Peer abuse

This should not be passed off as banter. Peer on peer abuse relates to abuse such as: sexual consensual or not, cyber bullying, face to face bullying, prejudice based. Staff are trained to recognise this and work with the child/ren, families and other professionals such as the police, early help or social care. The NCSCC has useful information: https://learning.nspcc.org.uk/child-abuse-and-neglect/peer-on-peer-sexual-abuse

Partnership with Parents

The school works in partnership with parents to educate and keep children safe from harm. Parents are made aware of who to contact if they have concerns regarding the Safeguarding of their or any other child. We are committed to working with parents positively, openly and honestly. We strive to share with parents any concerns we may have about their child, unless to do so may place a child at risk of harm. Parents are made aware of our policy via the school website and updates in our newsletters. Parents can also view this policy on request from the school office.

Partnerships with Others and Multi-Agency Working

The school recognises that it is essential to establish positive and effective working relationships with other agencies. We have close links with social care, other local schools, Teens in Crisis, CYPS, EP, school nurse, targeted support team, families first, ATS, Toucan, NSPCC, Police, PCSO and other professionals. There is a joint responsibility on all these agencies to share information to ensure the safeguarding of all children.

Physical Intervention

Our policy on physical intervention 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 the child, other children or another person. We

complete a physical restraint form after an event to record the incident. We understand that using physical restraint may be stressful for a child. We have a number of staff, that are trained in Team Teach. ==The child's needs will be taken in to account e.g SEND/SEMH needs and a risk assessment will be undertaken if needed.==

Local Authority Offer of Early Help

The local authority has an Early Help in the locality, with a link available on the school website. Services involved include the Family Information Service (access to online directory of services www.glosfamiliesdirectory.org.uk). Through the Early Help hub, the school will be able to access Forest Families First Plus to support families.

Appendix 6 gives useful websites that may help.

<u>**Monitoring, Evaluation and Review**</u>

The Governing Body will review this policy annually and assess its implementation and effectiveness.

Signed ;   D.Milford

Reviewed: September 2021

Due for review : September 2022

Ellwood Primary School

APPENDIX 1 – SIGNS OF ABUSE

CATEGORIES OF ABUSE AND INDICATORS OF HARM

1. **Physical Abuse**
2. **Emotional Abuse (including Domestic Abuse)**
3. **Neglect**
4. **Sexual Abuse**

Signs of Abuse in Children:
The following non-specific signs may indicate something is wrong:
- Significant change in behaviour
- Extreme anger or sadness/withdrawn or very quiet
- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour

Risk Indicators
The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:
- Must be regarded as indicators of the possibility of significant harm
- Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
- May require consultation with and / or referral to Social Care

The absence of such indicators does not mean that abuse or neglect has not occurred. In an abusive relationship the child may:
- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:
- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about /to the child and may fail to provide attention or praise (high criticism/low warmth environment).

- Be absent or misusing substances.
- Persistently refuse to allow access on home visits.
- Be involved in domestic abuse.
- Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

1.PHYSICAL ABUSE

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.

Indicators in the child

Bruising

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non- accidental unless there is evidence or an adequate explanation provided:
- Bruising in or around the mouth
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Linear bruising at any site, particularly on the buttocks, back or face
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks to the upper arms, forearms or leg
- Petechae haemorrhages (pinpoint blood spots under skin) commonly associated with slapping, smothering/suffocation, strangling and squeezing

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child will have had a fracture without the carers being aware of the child's distress.

If the child is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.

There are grounds for concern if:
- The history provided is vague, non- existent or inconsistent

- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture caused symptoms such as swelling, pain or loss of movement

Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.

Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

Mouth Injuries

Tears to the frenulum (tissue attaching upper lip to gum) often indicates force feeding of a baby or a child with a disability. There is often finger bruising to the cheeks and around the mouth. Rarely, there may also be grazing on the palate.

Poisoning

Ingestion of tablets or domestic poisoning in children under 5 is usually due to the carelessness of a parent or carer, but it may be self -harm even in young children.

Fabricated or Induced Illness

Professionals may be concerned at the possibility of a child suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:
- Discrepancies between reported and observed medical conditions, such as the incidence of fits
- Attendance at various hospitals, in different geographical areas
- Development of feeding / eating disorders, as a result of unpleasant feeding interactions
- The child developing abnormal attitudes to their own health
- Non-organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
- Speech, language or motor developmental delays
- Dislike of close physical contact
- Attachment disorders
- Low self esteem
- Poor quality or no relationships with peers because social interactions are restricted
- Poor attendance at school and under-achievement

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child. A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite. **Children and young people who have dog bites should always be referred to the Multi Agency Safeguarding Hub for further investigation.**

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds. Scalds are the most common intentional burn injury recorded.

Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, linear burns from hot metal rods or electrical fire elements, burns of uniform depth over a large area, scalds that have a line indicating immersion or poured liquid.

Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

The following points are also worth remembering:
- A responsible adult checks the temperature of the bath before the child gets in.
- A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
- A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, or unusually shaped, may suggest abuse.

Emotional/behavioural presentation
- Refusal to discuss injuries
- Admission of punishment which appears excessive
- Fear of parents being contacted and fear of returning home
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather
- Fear of medical help
- Aggression towards others
- Frequently absent from school
- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury

Indicators in the parent
- May have injuries themselves that suggest domestic violence
- Not seeking medical help/unexplained delay in seeking treatment
- Reluctant to give information or mention previous injuries
- Absent without good reason when their child is presented for treatment
- Disinterested or undisturbed by accident or injury
- Aggressive towards child or others
- Unauthorised attempts to administer medication
- Tries to draw the child into their own illness
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
- Parent/carer may be over involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care
- May appear unusually concerned about the results of investigations which may indicate physical illness in the child
- Wider parenting difficulties may (or may not) be associated with this form of abuse
- Parent/Carer has convictions for violent crimes
-

Indicators in the family/environment
- Marginalised or isolated by the community/other family members
- History of mental health, alcohol or drug misuse or domestic violence
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, mental health disorders or false allegations of physical or sexual assault or a culture of physical chastisement.

2. EMOTIONAL ABUSE

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 cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

<u>Indicators in the Child</u>

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Aggressive behaviour towards others
- Child scapegoated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a 'loner' – difficulty relating to others
- Over reaction to mistakes
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- Self- harm
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/solvent abuse
- Chronic running away
- Compulsive stealing
- Low self-esteem
- Air of detachment – 'don't care' attitude
- Social isolation – does not join in and has few friends
- Depression, withdrawal
- Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention
- Low self- esteem, lack of confidence, fearful, distressed, anxious
- Poor peer relationships including withdrawn or isolated behaviour

Indicators in the parent

- Domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse.
- Abnormal attachment to child e.g. overly anxious or disinterest in the child Scapegoats one child in the family
- Imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection.
- Wider parenting difficulties may (or may not) be associated with this form of abuse.

Indicators of in the family/environment

- Lack of support from family or social network
- Marginalised or isolated by the community
- History of mental health, alcohol or drug misuse or domestic violence
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement

NEGLECT

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. Neglect may occur during pregnancy as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carer failing to:
- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or • ensure access to appropriate medical care or treatment.

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

<u>**Indicators in the child**</u>

Physical presentation

- Failure to thrive or, in older children, short stature
- Frequent hunger
- Dirty, unkempt condition
- Inadequately clothed, clothing in a poor state of repair
- Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold
- Swollen limbs with sores that are slow to heal, usually associated with cold injury
- Abnormal voracious appetite
- Dry, sparse hair
- Recurrent / untreated infections or skin conditions e.g. severe nappy rash, eczema or persistent head lice / scabies/ diarrhoea
- Unmanaged / untreated health / medical conditions including poor dental health. Frequent accidents or injuries.

Development

- General delay, especially speech and language delay
- Inadequate social skills and poor socialisation

Emotional/behavioural presentation

- Attachment disorders
- Absence of normal social responsiveness
- Indiscriminate behaviour in relationships with adults
- Emotionally needy
- Compulsive stealing
- Constant tiredness
- Frequently absent or late at school
- Destructive tendencies
- Thrives away from home environment
- Aggressive and impulsive behaviour
- Disturbed peer relationships
- Self-harming behaviour

<u>**Indicators in the parent**</u>

- Dirty, unkempt presentation
- Inadequately clothed
- Inadequate social skills

Indicators in the family/environment

- History of neglect in the family
- Family marginalised or isolated by the community
- Family has history of mental health, alcohol or drug misuse or domestic violence History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Family has a past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement. Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
- Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- Lack of opportunities for child to play and learn

4. SEXUAL ABUSE

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Indicators in the child

Physical presentation

- Urinary infections, bleeding or soreness in the genital or anal areas
- Recurrent pain on passing urine or faeces
- Blood on underclothes
- Sexually transmitted infections
- Vaginal soreness or bleeding

- Pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Emotional/behavioural presentation

- Makes a disclosure.
- Demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
- Inexplicable changes in behaviour, such as becoming aggressive or withdrawn
- Self-harm, eating disorders, self-mutilation and suicide attempts
- Poor self-image, self-harm, self-hatred
- Reluctant to undress for PE
- Running away from home
- Poor attention /concentration (world of their own)
- Sudden changes in school work habits
- Withdrawal, isolation or excessive worrying
- Inappropriate sexualised conduct
- Sexually exploited or indiscriminate choice of sexual partners
- Wetting or other regressive behaviours e.g. thumb sucking
- Draws sexually explicit pictures
- Depression

Indicators in the parents
- Comments made by the parent/carer about the child
- Lack of sexual boundaries
- Wider parenting difficulties or vulnerabilities
- Grooming behaviour
- Parent is a sex offender

Indicators in the family/environment

- Marginalised or isolated by the community
- History of mental health, alcohol or drug misuse or domestic violence.
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.
- Family member is a sex offender.

Sexual Abuse by Young People

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children. Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is "acting out" which may derive from other sexual situations to which the child or young person has been exposed.

If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base.

Assessment

In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

- **Equality** – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies
- **Consent** – agreement including all the following:
  - Understanding what is proposed based on age, maturity, development level, functioning and experience
  - Knowledge of society's standards for what is being proposed
  - Awareness of potential consequences and alternatives

- Assumption that agreements or disagreements will be respected equally
- Voluntary decision
- Mental competence
- **Coercion** – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Child Sexual Exploitation

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders

- drug or alcohol misuse

- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Children Sexual Exploitation can happen to BOYS and GIRLS. Please use the CSE screening tool and talk to the DSL if you have concerns.
Child Sexual Exploitation (CSE): http://www.gov.uk/government/publications/what-to-do-if-you-suspect-a-child-is-being-sexually-exploited

**Abuse and Neglect and Children with Special Educational Needs:**
Children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. It is important that all education recognise the fact that 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 disproportionally impacted by things like bullying-without outwardly showing any signs; and
• communication barriers and difficulties in overcoming these barriers.

The neglect toolkit is also very useful to use and helps to understand the signs of neglect and the support that may be needed:
http://www.schoolsnet-bulletin-board/gloucestershire-child-neglect-toolkit/

Appendix 1a: Continuum of Need windscreen:

35
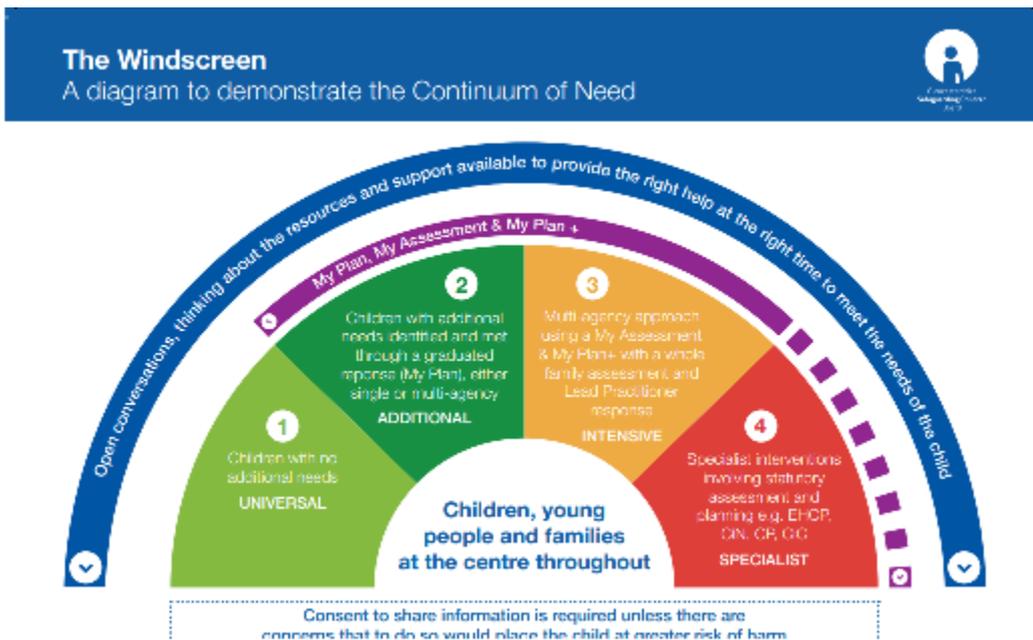
Appendix 2: Further information on current high-profile safeguarding issues

<u>**Forced Marriage (FM)**</u>

This is an entirely separate issue from arranged marriage. It is a human rights' abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. We should never attempt to intervene directly as a school or through a third party. **Schools should involve the police straight away.**

Violence Against Women and Girls

VAWG is an equality and human rights issue.
Violence against women is a violation of women's fundamental human rights:

- The right not to be treated in an inhuman way
- The right to respect for private and family life (including the right to physical and psychological integrity)
- The right to life

VAWG Includes:

- Domestic violence
- Forced marriage
- Honour-based violence
- Female genital mutilation
- Rape and sexual offences
- Prostitution
- Trafficking
- Child abuse
- Pornography

Violence against women shall be understood to encompass, but not be limited to, the following:

(a) Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, nonspousal violence and violence related to exploitation;

(b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutes and elsewhere, trafficking in women and forced prostitution.

(c)   Physical, sexual and psychological violence perpetrated or condoned by the state, wherever it occurs.

Honoured based Violence

This can include FGM and Forced Marriage (see both below)

It means "Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators".

Forced Marriage (FM)

This is an entirely separate issue from arranged marriage. It is a human rights' abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. We should never attempt to intervene directly as a school or through a third party. **Schools should involve the police straight away.**

Female Genital Mutilation (FGM) – signs of

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM. FGM is sometimes known as 'female genital cutting' or 'female circumcision.' Communities tend to use local names referring to this practice, including 'sunna'.

As of October 2015 Mandatory reporting is in place for FGM. There is a statutory duty placed on teachers, along with social workers and healthcare professionals to PERSONALLY report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have taken been carried out on a girl under 18 years old. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence and they should not be examining pupils but the same definition of what is meant by "to discover that an act of FGM appears to have been carried out" is used for all professionals to whom this mandatory reporting applies. **In addition report to the DSL. All staff would report FGM to the police personally.**

What is FGM?

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl – social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Is FGM legal?

- FGM is internationally recognised as a violation of human rights of girls and women.

It is illegal in most countries including the UK.

Circumstances and occurrences that may point to FGM happening:

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leone, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

A sign that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Difficulty sitting still, looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group

- Reluctance to take part in physical activity
- Repeated urinal tract infection
- Disclosure

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action **without delay**. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

Further information on Trafficking

Child trafficking is a form of child abuse where children are recruited and moved to be exploited, forced to work or sold. They are often subject to multiple forms of exploitation including: child sexual exploitation, benefit fraud, forced marriage, domestic servitude including cleaning, childcare and cooking, forced labour in agriculture or factories, criminal activity such as pickpocketing, begging, transporting drugs, working on cannabis farms, selling pirated DVDs , bag theft.

Traffickers trick, force or persuade children to leave their homes and then move them to another location. Trafficked children are often controlled with violence and threats and may be kept captive, resulting in long lasting and devastating effects on their mental and physical health. It is not easy to identify trafficked children, but you may notice unusual behaviour or events that just don't add up. Both boys and girls are victims of trafficking. Trafficked children may be from the UK or have been moved from another country. Poverty, war or discrimination can put children more at risk of trafficking. Traffickers may promise children education or respectable work, or persuade parents that their child can have a better future in another place. It can be very difficult to identify a child who has been trafficked, as they are deliberately hidden and isolated. They may be scared, or they may not realise that they are a victim or are being abused. While there may not be any obvious signs of distress or harm, a trafficked child is at risk and may experience physical abuse, emotional abuse and/or neglect.

Many children are trafficked in to the UK from abroad, but children can also be trafficked from one part of the UK to another. Even a child being moved from one side of the street to a different address for a short period of time with the intent of exploitation would be identifiable as a trafficking crime. Any suspicion of trafficking must be reported to the LADO and the Police without delay.

Further information on Radicalisation (in line with the PREVENT DUTY)

From 1st July 2015 specified authorities, including **all** schools are subject to the duty under section 26 of the Counter-Terrorism and Security Act 2015 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.

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism. To reduce the risk from terrorism we need not only to stop terrorist attacks but also to prevent people becoming terrorists. This is one objective of Prevent, part of CONTEST, the Government's strategy for countering international terrorism. All the terrorist groups who pose a threat to us seek to radicalise and recruit people to their cause. The aim of Prevent is to stop people becoming or supporting terrorists, by challenging the spread of terrorist ideology, supporting vulnerable individuals, and working in key sectors and institutions. Work to safeguard children and adults, providing early intervention to protect and divert people away from being drawn into terrorist activity, is at the heart of the Prevent strategy. Supporting vulnerable individuals requires clear frameworks – including guidance on how to identify vulnerability and assess risk, where to seek support and measures to ensure that we do not ever confuse prevention and early intervention with law enforcement. Channel is a key element of the Prevent strategy. It is a multi-agency approach to protect people at risk from radicalisation. Channel uses existing collaboration between local authorities, statutory partners (such as the education and health sectors, social services, children's and youth services and offender management services), the police and the local community to identify individuals at risk of being drawn into terrorism; assess the nature and extent of that risk; and develop the most appropriate support plan for the individuals concerned. Channel is about safeguarding children and adults from being drawn into committing terrorist-related activity. It is about early intervention to protect and divert people away from the risk they face before illegality occurs.

Domestic Violence

What is domestic violence?

Domestic violence is an incident or pattern of incidents of controlling, coercive, threatening, degrading, and violent behaviour, including sexual violence, in the majority of cases by a partner or ex – partner, but also by a family member or carer. It is very common. In the majority of cases is it experienced by woman and is perpetrated by men, however men can also be abused by woman. This needs to remembered and taken seriously.

Domestic abuse can include, but is not limited to, the following:
- Coercive control (a pattern of intimidation, degradation, isolation and control with the use or threat of physical or sexual violence)
- Psychological and/or emotional abuse [2]
- Physical or sexual abuse
- Financial or economic abuse
- Harassment and stalking
- Online or digital abuse

- Gloucestershire Police, Gloucestershire County Council and Gloucestershire Safeguarding Children Board work collaboratively to support victims and their families of domestic violence. This is called Gloucestershire Encompass. Their ambition is to ensure that all incidents of domestic abuse are shared with schools, not just those where an offence can be identified. In our school the DSL/DDSL receives information about any abusive DV incidents directly via our encompass@ email address. This email is sent by a SER (senior education researcher). The school is than able to support the child and family, as needed. The information will be recorded on My Concern.

  If you, or someone you know, is a victim of domestic abuse find out how to report domestic abuse.

- GDAS (Gloucestershire Domestic Abuse Report) - **01452 726 570 telephone or email support@gdass.org.uk**
- If you are in immediate danger, call 999 and ask for the police.
- If you are in danger and unable to talk on the phone, call 999 and listen to the questions from the operator and, if you can, respond by coughing or tapping on the handset.
- **Call 999 from a mobile**
- If prompted, press 55 to Make Yourself Heard and this will transfer your call to the police.
- Pressing 55 only works on mobiles and does not allow police to track your location.
- **Call 999 from a landline**
- If the operator can only hear background noise and cannot decide whether an emergency service is needed, you will be connected to a police call handler.
- If you replace the handset, the landline may remain connected for 45 seconds in case you pick up again.
- When 999 calls are made from landlines, information about your location should be automatically available to the call handlers to help provide a response.
- **If you are deaf or can't verbally communicate**

  You can register with the emergencySMS service. Text REGISTER to 999. You will get a text which tells you what to do next. Do this when it is safe so you can text

  National Domestic Abuse Helpline - free confidential support 24 hours a day to victims and those who are worried about friends/loved ones - Phone/TypeTalk: 0808 2000 247
  or use the form on their website to book a safe time for a call from the team

Disclosure Scheme – Clare's Law

This scheme will enable members of the public to have "Right to ask" police if their current partner poses a risk to them in terms of their history of domestic abuse. It also enables professionals to raise a "Right to know" request through the police where we feel a person may be at risk of domestic abuse by an individual whose criminal history is unknown to the partner, but where we have some reasonable concern/knowledge about the individuals past. A right to ask can also be made by a third person-e.g., a parent/relative/friend who is concerned. In these cases if a disclosure is to be made, it will only be made to the person who needs to know i.e., the victim.
Ellwood school is made aware of any MARC's (Multi-Agency Risk Assessment Conference) through Health.

Indicators of vulnerability to radicalisation:

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

2. **Extremism** is defined by the Government in the Prevent Strategy as: Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

3. **Extremism is defined by the Crown Prosecution Service as: The demonstration of unacceptable behaviour by using any means or medium to express views which:**

- **Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;**
- **Seek to provoke others to terrorist acts;**
- **Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or**
- **Foster hatred which might lead to inter-community violence in the UK.**

4. There is no such thing as a "typical extremist": those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.

5. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff is able to recognise those vulnerabilities.

6. Indicators of vulnerability include:

- Identity Crisis – the student / pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
- Personal Crisis – the student / pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
- Personal Circumstances – migration; local community tensions; and events affecting the student / pupil's country or region of origin may contribute to a

sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;

- Unmet Aspirations – the student / pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;
- Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration.
- Special Educational Need; students / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.

7. However, this list is not exhaustive, nor does it mean that all young people experiencing the   above are at risk of radicalisation for the purposes of violent extremism.

8. **More critical risk factors could include**:

- Being in contact with extremist recruiters;
- Accessing violent extremist websites, especially those with a social networking element; Possessing or accessing violent extremist literature;
- Using extremist narratives and a global ideology to explain personal disadvantage;
- Justifying the use of violence to solve societal issues;
- Joining or seeking to join extremist organisations; and
- Significant changes to appearance and / or behaviour;
- Experiencing a high level of social isolation resulting in issues of identity crisis and or personal crisis.

Staff should be alert to any warning signs of radicalisation and hold an attitude of 'it could happen here.'

Hate Crime

At Ellwood school we are committed to taking prejudice based incidents seriously, ensuring they are recorded, monitored and reported as necessary.

Hate crime or hate incidents is a form of bullying directed towards an individual or group because of their identity or perceived identity. Hate Crime can be identified in many forms of bullying such as but not limited to; disability, race, religion or belief, sexual orientation and transgender identity. In Gloucestershire this also includes age, gender and alternative subcultures such as homeless.

It is recognised that Hate Incidents/Crimes can be more impactive on the victim than standard bullying because they have been attacked on account of "who they are", and element of their core identity.

Support is available from Victim Support for school guidance, and/or one-to-one support and advocacy with pupils and their families (0808 281 0112 www.victimsupport.org.uk). Restorative Gloucestershire can provide support with embedding restorative practice into schools, to tackle harmful bullying behaviours, reduce exclusion levels and/or prevent unnecessary criminalisation (01452 754 542 www.restorativegloucestershire.co.uk)

Parental Substance Misuse and the Impact on children and young people

The experience of children living with, and affected by, parental substance use has become widely known as "Hidden Harm", following the report by the UK Advisory Council on Misuse of Drugs in 2003. The phrase "Hidden Harm" encapsulates the 2 key features of that experience: the children are often not known to services; and they suffer harm in a number of ways through physical and emotional neglect, exposure to harm and poor parenting (Aberlour 2006). Bottling It Up (2006) exposed similar concerns with children whose parents misuse alcohol and that insufficient attention was being paid to this group of children despite increased concern being raised by agencies.
The children of substance misusing parents are "not at risk" or "in need" solely by virtue of parental substance misuse. Unfortunately substance misuse by parents can be a contributing factor in the abuse or neglect of their child.

Private Fostering

It is a legal requirement for families looking after someone else's child for more than 28 days to notify Gloucestershire Children and Families Helpdesk on 01452 426565.
Private fostering covers a diverse range of situations. Most educational settings will have children who are privately fostered, although the school/setting may not be aware that a child is privately fostered.
Common private fostering situation include:
- African, Aisan and Afro Caribbean children with parents or families overseas
- Black and minority ethnic children with parents working or studying in the UK and living with a host family
- Asylum seeking and refugee children
- Trafficked children
- Local children living apart from their families, perhaps because the family has broken down
- Adolescents estranged from their parents
- Children attending Language Schools
- Children attending independent who do not return home for holiday periods
- Children living with host families for a variety of reasons, possibly to learn English or to receive medical treatment in the UK
- Back door adoptions

Mental Health
Primary Care professional and Mental Health

Primary health believes:
- In the fundamental uniqueness of each individual;
- That everyone has the right and ability to achieve wellbeing;
- In enabling and supporting people maximum potential;
- That solutions are found at local level, created by communities and driven by champions
Primary health works to:
- Listen to service users and their carers so that services can be designed to meet their needs

- Ensure all Primary Carers have the core skills to deal with poor wellbeing or mental health issues
- Provide suitable training for primary carers from experiences primary carers
- Work with researchers to understand what is effective, whether within NICE guidelines or not
- Lobby for better teaching of primary care mental health education measure success through outcomes that matter in people's lives

Gloucestershire NHS Trust for Mental Health

We liaise with children and Young PeopleService (CYPS) to help our pupils and families who have mental health concerns.

http://www.2gether.nhs.uk/professionals-working-with-children-and-young-people

Fabricated, Induced Illness and Abuse of Medication

There are three main ways of the carer fabricating or inducing illness in a child. These are not mutually exclusive and include:
- **Fabrication** of signs and symptoms. This may include fabrication of past medical history;
- **Fabrication** of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents;
- **Induction** of illness by a variety of means

Gangs and Youth Violence – The Avenger Task Force

The Avenger Task Force is a new initiative led by police, set to revolutionise the approach to gangs in Gloucestershire.

The multi-agency project, involving representatives from Gloucestershire Constabulary, Gloucestershire City Council and Gloucestershire County Council's Youth Support Teams, aims to reduce the number of youngsters involved in gangs by offering support to those who are or may be vulnerable.

Child Criminal Exploitation (CCE) is where an individual or group uses their position of power to take advantage of a **child or young person under the age of 18 and coerces, controls, manipulates or deceives them into criminal activity**. This could be: In exchange for something the victim needs or wants such as money, clothes, mobile phones.

Violent crimes – (county lines/cuckooing)

Children could be at risk from violent crime, or involved with serious violent crime. Signs that need to be looked out for could be; change in friendships, absence from school, relationships with older individuals or groups, decline in performance, signs of self-harm, more money or gifts given by others, signs of assault or unexplained injuries. Further advice can be obtained from the Home office's "Preventing youth violence and gang involvement and its criminal exploitation of children and vulnerable adults: county lines guidance" (DfE, 2019a). **County Lines** is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas (within the UK), using dedicated mobile phone lines or other form of "deal line". They are likely to exploit children and adults to move (and store) the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons. **Cuckooing** is a form of crime in which drug dealers take over the home of a vulnerable person in order to use it as a base for drug dealing. Cuckooing is becoming an increasingly

common problem in the South of England. Criminal gangs are targeting the homes of vulnerable people to be used for drug dealing – a process known as "cuckooing" (after the bird that invades other bird's nests) and victims are often left with little choice but to cooperate. Dealers often approach the vulnerable person offering free drugs to use their home for dealing or in some instances after providing 'free' drugs, will then force the person to deal for them in order to 're-pay' their drug debts. These criminals are selective about who they target, a lot of the time victims are lonely, isolated, frequently drug users themselves and are already known to the police. Victims can include older people, those suffering from mental or physical health problems, female sex workers, single mums and those living in poverty. Victims may suffer from other forms of addiction, such as alcoholism. Once they gain control, gangs move in with the risk of domestic abuse, sexual exploitation and violence. Children as well as adults are used as drug runners. It's common for gangs to have access to several addresses. They move quickly between vulnerable people's homes for just a few hours, a couple of days or sometimes longer. "Cuckooing" means the criminals can operate from a property rather than the street, which is out of sight from the police making it an attractive option. They can then use the premises to deal drugs from, which is difficult for the police to monitor because they often will only stay for a short period of time. These gangs may use accommodation in rural areas, including serviced apartments, holiday lets, budget hotels and caravan parks. Some vulnerable adults may be forced to leave their homes, making themselves homeless and leaving the gangs free to sell drugs in their absence.

What are the signs of cuckooing?
Signs that 'cuckooing' may be going on at a property include:
- An increase in people entering and leaving
- An increase in cars or bikes outside
- Possible increase in anti-social behaviour
- Increasing litter outside
- Signs of drugs use
- Lack of healthcare visitors

Allegations of abuse made against other pupils

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as "banter" or "part of growing up".
Most cases of pupils hurting other pupils will be dealt with under our school's behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns. This might include where the alleged behaviour:
- Is serious, and potentially a criminal offence
- Could put pupils in the school at risk
- Is violent
- Involves pupils being forced to use drugs or alcohol

- Involves sexual exploitation or sexual abuse, such as indecent exposure, sexual assault, or sexually inappropriate pictures or videos (including sexting)

If a pupil makes an allegation of abuse against another pupil: You must tell the DSL and record the allegation, but do not investigate it.
- The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence
- The DSL will put a risk assessment into place for all children involved – with a named person they can speak to if needed
- The DSL will contact the Children and Adolescent Mental Health Services (CAMHS), if appropriate

We will minimise the risk of peer-on-peer abuse by:
- Challenging any form of derogatory or sexualised language or behaviour
- Being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female pupils and initiation or hazing type violence with respect to boys
- Ensuring our curriculum helps to educate pupils about appropriate behaviour and consent
- Ensuring pupils know they can talk to staff confidentially
- Ensuring staff are trained to understand that a pupil harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy

"Upskirting"

The definition of upskirting is "taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm" (DFE, 2019a). This is a criminal offense.

Useful references

Department for Education (DfE) (2019a) Keeping children safe in education: statutory guidance for schools and colleges. London: Department for Education https://assets.publishing.service.gov.uk/government/uploads/system/uploads/att achment_data/file/828312/Keeping_children_safe_in_education.pdf

Department for Education (DfE) (2019b) Keeping children safe in education: statutory guidance for schools and colleges: part one: information for all school and college staff. London: Department for Education

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/att achment_data/file/828587/Keeping_children_safe_in_education_part_one.pdf

Department for Education (DfE) (2019c) Teaching online safety in school. London: Department for Education https://assets.publishing.service.gov.uk/government/uploads/system/uploads/att achment_data/file/811796/Teaching_online_safety_in_school.pdf

Independent Schools Inspectorate (ISI) (2019) Inspection framework. London: Independent Schools Inspectorate https://www.isi.net/site/downloads/1.1%20Handbook%20Inspection%20Framew ork%202018-09.pdf

Ofsted (2019a) The education inspection framework. London: Ofsted https://assets.publishing.service.gov.uk/government/uploads/system/uploads/att achment_data/file/801429/Education_inspection_framework.pdf

Ofsted (2019b) Inspecting safeguarding in early years, education and skills settings. London: Ofsted https://www.gov.uk/government/publications/inspecting-safeguarding-in-earlyyears-education-and-skills-from-september-2015/inspecting-safeguarding-inearly-years-education-and-skills-settings

The Relationships Education, Relationships and Sex Education and Health Education (England) Regulations 2019 https://www.legislation.gov.uk/ukdsi/2019/9780111181997

Contact the NSPCC's Knowledge and Information Service with any questions about child protection or related topics:

Tel: 0116 234 7246 | Email: learning@nspcc.org.uk | Twitter: @NSPCCLearning

Appendix 3

Record of Incidents/Discussion Raising Concerns

(Please see attachment for guidance)

Child's name: D.O.B.

Date of Report:

Factual account of what happened, where and who was present using the child's own words:

Your response:

Name (printed):   Signature :

Job Title: Date & Time of Record:

Follow up e.g briefed staff member/discussed concern and actions/outcome:

Name (printed):   Signature :

Job Title: Date & Time of Record:

If a child makes a disclosure:

  (Please complete the "Record of Discussion Form", which can be found in the staffroom or staff handbook.)

During the Disclosure

- Respect the child by listening to what he/she has to say and taking what the child says seriously. Believe what the child is telling you.
- Provide a safe environment
- Tell the child he/she is doing the right thing and that you will do what you can to help them.
- Reassure the child that he/she did nothing wrong.
- Listen and don't make assumptions. Listen more than you talk, and avoid advice giving or problem solving. Don't put words in the child's mouth or assume you know what he/she means or are going to say. Let the child use language they are comfortable with. Let the child set the pace, don't rush them.
- Do not interrogate. Don't ask the child a lot of questions, especially leading questions, which means a question in which you provide a possible answer - Did this or that happen? Were you at school?
- Listen to the child, letting them explain what happened in his or her own words.
- Limit questioning to only the following questions if the child has not already provided you with the information:

• What happened?
• When did it happen?
• Where did it happen?
• Who did it?
• How do you know them? (If the relationship of the abuser is unclear)

- Make no promises. Don't tell the child that you won't tell anyone what they tell you. Explain that you might need to speak to other people to ensure that they are safe.
- Document exact quotes – write exactly what the child tells you.
- Be supportive, not judgmental. Don't talk negatively.
- Have an understanding about abuse and neglect. Know the four kinds of child abuse: physical, emotional, sexual, and neglect.
- When reporting child abuse to the appropriate authorities, it is important to have the following information: what happened, when it happened, where it happened, who did it and their relationship to the child. You will be asked for some identifying information such as your name, address, where you work, and how the child disclosed. All of your identifying information will be kept confidential.

Appendix 4

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Ellwood Community Primary School

Safeguarding Referral Form for Safeguarding DSL/DDSL

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ELLWOOD RECORD OF PUPIL CONCERN			
Child's Name:			
Child's DOB:			
Male/Female:	Ethnic Origin:	Disability Y/N:	Religion:
Date:			
Your account of the concern: (what was said, observed, reported and by whom – attach notes if necessary)			
Additional information: (your opinion, context of concern/disclosure, previous concerns)			
Your response or action: (what did you do/say following the concern, speak to or refer to)			
Your name:			
Your signature:			
Your position in school:			
Date and time of this recording:			
Action and response of the DDSL/DSL Signature: _____ Date: _____			

Appendix 5

Ellwood Primary School - Early Help Offer

Ellwood Primary School will use the procedures and guidance set out in the 'Gloucestershire Safeguarding Children Handbook for DSL in Educational Settings'. www.gscb.org.uk

Through this, we will follow the guidance from the DFE 'Keeping Children Safe in Education' 2019.

We will use Families First Plus team's offer of Early Help systems and procedures to keep children safe. We will intervene as early as possible to prevent families and pupils reaching crisis point and the need for statutory intervention.

Our document 'Gloucestershire's offer of Early Help' sets out the policies and procedures available to Gloucestershire schools. Please refer to this document. The school Safeguarding and Child Protection policies need to be read in conjunction with this policy. We will contact the Families First Plus social care team: Helen Hays or Sylvia Dolan (social workers) on 01452 328048 for advice if needed.

As a school:

- We will provide a supportive caring ethos where children are treated as individuals and their difficulties treated sensitively.
- We will build positive relationships with parents so they feel able to ask for help.
- We will provide opportunities for children to express their concerns.
- We will keep written logs, where there may be a slight concern, so that any patterns may be identified and tackled before things escalate.
- We, as a staff, will talk to each other to ensure we have a full picture of any difficulties a family might be facing.
- We will call in external agencies, including Social Services, Family Lives, Teens in Crisis, Domestic Abuse Support, Winston's Wish, Toucan, Behaviour Support to provide early intervention and support.

Our school will support all children by raising awareness of the signs and symptoms of:

1. Child sexual exploitation (CSE)
    - We will use the Gloucestershire constabulary CSE screening tool as a check list, if we have any concerns. www.gscb.org.uk
    - LA contact 01242 276846 (CSE team)
    - We will raise awareness through the Pink/ PSHE Curriculum
    - We will contact MASH team 01452 426565
    - Awareness of useful websites: Barnardos, Pace UK, www.national working group.org, www.paceuk.info

2. Children missing in Education
   - We will work with the missing persons co-ordinator, Christine Pfister (contact 101)
   - We will use the GCC Protocol on Partnership working when children and young people run away and go missing from home or care
   - We will contact the LA if a pupil does not attend school after 10 consecutive days and we have concerns of their wellbeing.
   - The school administrator will contact the parents/carers by 9:30am, if we have an unexplained absence

3. Bullying including cyber bullying
   - We will listen to the voice of the child
   - Being a School where children understand that it is right to ask for help if they are in trouble or worried about bullying, abuse or any other concern. We are a "TELLING" school.
   - We will be proactive in dealing with any accusations or incidents of bullying
   - We will repond to non-verbal communication such as anti-social behaviour
   - We will use sections of the CEOP resources as part of the teaching resources to raise awareness of on-line bullying
   - Parents are invited to parent awareness session led by CEOP trained representatives
   - CPO visits in all classes to discuss all forms of bullying (age appropriate to the year groups)
   - NSPCC delivers workshops to year Y5/6 pupils
   - Pupils raised awareness of Child Line 0800 1111
   - www.ghll.org.uk has good resources linked to behaviour, safety and self esteem.
   - If anyone has serious concerns about a pupil with regards to suicide/death they should phone 999

4. Domestic violence
   - Gloucestershire Police, Gloucestershire County Council and Gloucestershire Safeguarding Children Board have worked in conjunction to create 'Gloucestershire Encompass'. If there is an incident of DV (domestic violence) the night before, a SER (senior education researcher) will receive information from the police that a DV has occurred and the school will be notified by phone or by email using the school's encompass email address. The DSL/DDSL will be made aware of the incident and then will respond and monitor the children in school. The information will have recorded on My concern.
   - We will listen to the voice of the child
   - We will contact the Contact Early Help 01452 328048

- They will then refer to safeguarding professionals working within the Gloucestershire Multi-agency Safeguarding Hub (MASH). MASH coordinator Claire.Connolly@gloucestershire.gov.uk
- Gloucestershire Domestic Abuse support Service www.gdass.org.uk 0845 602 9035 (GDAS)
- DARP was developed in order to provide a multi-agency response to referrals of domestic abuse where children are involved.
- Contact Strategic County Domestic abuse and Sexual Violence Co-ordinator faye.kamara@gloucestershire.pnn.police.uk 01242 247933
- Monitor attendance
- Attend TAC meetings
- Understanding of MARAC (Multi-agency risk assessment conference)
- We are aware that unborn babies can also be vulnerable and we would follow guidance from the GGSB

5. Drugs
- Contact Early Help 01452 328048 for the Social Care Team
- www.infobuzz.co.uk provides individual and targeted support relating to drugs and emotional health issues.

6. Fabricated or induced illness
- Contact Early Help 01452 328048

7. Faith abuse
Contact Early Help 01452 328048

8. Female genital mutilation (FGM)
DSLs and other members of staff will complete the on-line Home Office training – e modules
Staff aware of FGM
We have a legal duty to refer any concerns to the LA
We will raise awareness through the GHLL Pink Curriculum
We will contact MASH team or the LADO - Nigel Hatton
Attendance of pupils is monitored

9. Forced marriage
We are all aware that it is illegal and a form of abuse
Staff will report concerns
Attendance of pupils will be monitored
We refer to the LA Forced Marriage leaflet
If we have concerns we will call MASH team 01452 426565

10. Gangs and youth violence

Pupils will complete the GHLL online pupil survey which will inform the school of any issues

Contact Early Help 01452 328048

DSL will inform GSB if concerned

11. Mental health

Our values each term will promote respect, emotional intelligence, resilience, perseverance, trust and compassion

The pupils will complete the GHLL biannual on-line pupil survey so that we are informed of any worries or concerns our pupils have.

We will discuss concerns through the GHLL Pink Curriculum, assemblies and PSHE lessons

Our SMSC policy will promote health and wellbeing

We receive alerts from GCSB and GHLL

Staff will attend GHLL training when needed

Our Family Support Worker Supports our vulnerable pupils

Referrals to relevant professionals e.g. CYPS/Social Care/School Nurse

13. Private fostering

www.gloucestershire.gov.uk/fostering 01242 532613

private.fostering@gloucstershire.gov.uk/privatefostering

14. Preventing Radicalisation

From 1st July 2015 we are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, to have a due regard to the need to prevent people from being drawn into terrorism.

DFE Advice for schools on the Prevent Duty: all staff will read and complete on-line training

SLT staff have completed the on-line prevent training to raise awareness

HT has attended training form Channel/DFE

Teaching of British values and our school ethos and values will raise awareness in pupils

We would contact the Prevent Lead for GCC, social care or the police.

Prevent: Notice, Check, Share

Channel Panel: Alison Williams chairs the panel

Prevent refers: Adam.large@gloucestershire.pnn.police.uk (for referrals or for more information)

15. Sexting

Included as part of the safeguarding policies for staff and pupils

Juniors are made aware of this through PHSE and safety teaching and internet safety sessions. We have PCSO and police visits who talk to older pupils about this

16. Trafficking

We will contact the LADO, Nigel Hatton, to discuss any concerns.

We also liaise and work closely with Social Care, other professionals and attend TAC meetings (team around the child). We signpost and offer advice to parents, if needed, through the HT, SENco and the FSW. Both parents and pupils have access to our family support worker. Staff are aware of the escalation policy and would use this if they felt the need.

17. **_Serious violence and sexual violence_**

Staff are aware that serious violence can occur in primary age children and that there are factors which may increase the likelihood; male, persistence absence, permanently excluded, previous child maltreatment, ACES (adverse childhood experiences), involved in offending e.g robbery or theft. The sexual violence and harassment document: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/719902/Sexual_violence_and_sexual_harassment_between_children_in_schools_and_colleges.pdf is a good document to find more information. Most of the time staff will overhear conversations between children rather than being told directly.

17. Child abduction

Child abduction happens and this could be through court and custody battles, modern day slavery and cyber crime. https://www.legislation.gov.uk/ukpga/1984/37/contents

Appendix 6;

Drugs
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/270169/drug-adviceforschools.pdf
Fabricated or induced illness
https://www.gov.uk/government/publications/safeguarding-children-in-whom-illness-is-fabricated-or-induced
Faith abuse
https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief
Forced marriage
https://www.gov.uk/forced-marriage
Gangs and youth violence
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/226293/Advice_to_Schools_and_Colleges_on_Gangs.pdf
Gender-based violence/violence against women and girls [VAWG]

https://www.gov.uk/government/policies/ending-violence-against-women-and-girls-in-the-uk

Mental health

https://www.gov.uk/government/publications/the-mental-health-strategy-for-england

Private fostering

https://www.gov.uk/government/publications/children-act-1989-private-fostering

Sexting

http://ceop.police.uk/

Teenage relationship abuse/peer on peer abuse

https://www.gov.uk/government/collections/this-is-abuse-campaign

https://learning.nspcc.org.uk/child-abuse-and-neglect/peer-on-peer-sexual-abuse

Trafficking

https://www.gov.uk/government/publications/safeguarding-children-who-may-have-been-trafficked-practice-guidance

www.nspcc.org.uk

www.GOV.UK

http://www.gscb.org.uk/article/113294/Gloucestershire-procedures-and-protocols