



TRUST·ED
Schools' Partnership

Stokesay Primary School Safeguarding and Child Protection Policy (includes Prevent Duty)

This policy & procedure has been agreed by the following professional associations / trade unions representing School Based Staff

- *National Union of Teachers*
- *National Association of Schoolmasters Union of Women Teachers*
- *Association of Teachers and Lecturers*
- *National Association of Head Teachers*
- *Association of School and College Leaders*
- *Unison*
- *GMB*

FREQUENCY OF REVIEW: Every year

COMMITTEE: Local Governing Body

APPROVED: Autumn Term 2020

AUTHOR: Human Resources, Shropshire Local Authority

DATE OF NEXT REVIEW: Autumn Term 2021 (unless there is a material change)

Adopted by the Stokesay Primary School Local Governing Body

Signed _____
Chair of Local Governing Body

Dated _____

Signed _____
Headteacher

Dated _____

Safeguarding Children - Child Protection Policy and Procedure

The following policy is written to show how Stokesay Primary School responds to safeguarding / child protection issues by assuming the pupil is living in Shropshire. The Designated Safeguarding Lead (DSL) is also familiar with the need to modify referrals where the pupil lives in Wolverhampton or Staffordshire.

At Stokesay Primary School, we believe that it is always unacceptable for a child or young person to experience abuse of any kind and recognise that safeguarding the welfare of **all** children and young people is everyone's responsibility. We follow Shropshire Safeguarding Community Partnership (SSCP) procedure guidance and acknowledge that the welfare of the child is paramount.

At Stokesay Primary School, it is our duty to respond promptly and appropriately to all concerns, incidents or allegations of abuse or neglect of a child. We work in partnership with children, young people, their parents, carers and other agencies. Our statutory duties and supporting guidance are set out in The Safeguarding and Welfare Requirements in the Compulsory Childcare Register, Working Together to Safeguard Children 2018 and Keeping Children Safe in Education (KCSiE) 2020. Safeguarding and promoting the welfare of children is defined for the purposes of this policy as:

- Protecting children from maltreatment;
- Preventing impairment of children's mental and physical health or development;
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best outcomes

Stokesay Primary School will also have regard to:

- **The Children Act 1989 and 2004** - Safeguarding and promoting the welfare of children is defined as; protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.

Section 3 (5) of the Children Act 1989 states that the law empowers anyone who has care of a child to do all that is reasonable in the circumstances to safeguard his/her welfare.

- **Counter-terrorism and Security Act 2015** – preventing people being drawn into terrorism and promotion of British values to ensure children are kept safe from radicalisation
- **Female Genital Mutilation Act 2003 – Serious Crime Act 2015** - mandatory reporting of FGM from 31st October 2015
- During COVID-19, Stokesay Primary School have developed a Safeguarding and Child Protection Addendum to ensure that additional safeguarding measures have been put in place. Staff are to refer to the Addendum for specific procedures during COVID-19, as well as following this policy.

Adult Roles

All staff (including students and volunteers) at Stokesay Primary School are familiar with the definitions and signs and symptoms of abuse or neglect stated in Working Together to Safeguard Children March 2015 as set out in [SSP Contacts and Definitions Handout](#)

All staff are aware of their individual roles in safeguarding and promoting the welfare of children including their responsibility to be alert to any issues for concern in the child's life at home or elsewhere. We ensure that all staff (including students and volunteers) undergo an induction process where they are given copies of the procedures they must follow if they suspect abuse or neglect. On-going support is provided through regular supervision and appraisals to ensure these policies and procedures are put into practice to protect children.

As part of induction, training will include the school's behaviour policy and the school's procedures for managing children who are missing education, as well as the staff code of conduct, and the Child Protection Policy. Keeping Children Safe in Education since 2020 Part 1 must be read by all members of the staff; everyone working with children must also be issued with Annex A. Designated Safeguarding Leads, Senior Leaders and members of the Governing Body should read KCSIE 2020 in its entirety.

All staff are expected to update their child protection training at least every three years. In addition all staff members should receive regular safeguarding and child protection updates (for example, via email, e-bulletins, staff meetings) as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively. Child protection training will be completed every 3 years by a qualified Child Protection Instructor. Our DSL will update their child protection/safeguarding training every two years and has specific responsibilities as listed in Appendices A and B.

The DSL who will take the lead for safeguarding and child protection issues is Mr Paul O'Malley.

The deputy DSLs are Karen Hadley, Sue Austin, and Simon Ansell.

The safeguarding link governor who oversees this work is Mr Jamie White.

Record Keeping

When a concern about a child's welfare or safety is raised it will be discussed with the DSL and recorded. The DSL will make a decision about whether the concern should be shared with another agency (see **decision making** below) or kept on record in case future concerns arise. The reason for the decision will be noted alongside the record.

All records will be stored on CPOMS or in a separate confidential file in a locked, secure place with restricted access. When a student transfers to another school/setting within this or another authority, the confidential information held is forwarded under confidential cover and separate from the student's main file to the DSL for child protection in the receiving school/setting immediately.

This should be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained (Appendix C).

Information is shared as necessary to protect children from harm. We follow the guidance in the HMG 2015 guide '*Information sharing: advice for practitioners providing safeguarding services to children, young people, parents and carers*' and the HMG 2015 guide '*What to do if you are worried a child is being abused*'.

When information is being accumulated prior to possible referral, we will start a chronology of events (see Appendix D). The DSL will regularly review all child protection chronologies to decide if the accumulation of events is having a detrimental impact on a child and must be referred to Compass¹. If the DSL decides not to refer, the reason will be noted on the child's chronology.

Decision making – 'Accessing the right service at the right time'

We take a holistic approach to safeguarding all children in our care and recognise that different families need a different level of support at different times. To enable us to recognise at which level a family might require support, we use the Shropshire Safeguarding Community Partnership's *Multi-agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire*. [Shropshire Threshold Document](#)

¹ *Compass is the single point of contact for receiving new enquiries regarding concerns for the welfare or protection of children and young people in Shropshire.*

This guidance identifies four levels to ensure all children receive the support and intervention they need to achieve a positive life experience. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of parents and carers and we aim to develop good, professional relationships to ensure that we have a shared understanding of each child's needs.

It should be noted that if parents demonstrate a lack of co-operation or appreciation about the concerns we identify this may, in itself, raise the level of the need and required level of action.

Level 1 – Universal

Children with no additional needs and where there are no concerns. Typically, these children are likely to live in a resilient and protective environment where their needs are met. These children will require no additional support beyond that which is universally available.

We anticipate that by working closely with parents and sign-posting families to other universal services within our community that we can meet the needs of children and families at this level.

At this level parents will always be consulted before any action is taken.

Level 2 – Children in need of Early Help

These children can be defined as needing some additional support without which they would be at risk of not meeting their full potential. Their identified needs may relate to their health, educational, or social development, and are likely to be short term needs. If ignored these issues may develop into more worrying concerns for the child or young person. These children will be living in greater adversity than most other children or have a greater degree of vulnerability than most if their needs are not clear, not known or not being met a lead professional will coordinate a whole family assessment and plan around the child.

Sometimes in discussion with parents and carers and through our observations and records we may think a child and their family could benefit from additional support from outside agencies to ensure he/she reaches his/her full potential. This process is known as Early Help. We have knowledge of the different agencies which may be able to offer support and we will work with parents and carers to decide which support would be most appropriate for their family. We will work with parents to complete any Early Help referral forms required to access this support. If we are unsure of where to access support we will contact Compass for advice.

Further information about Early Help can be found at: <http://www.shropshire.gov.uk/early-help/>

At this level parents will always be consulted before we contact another agency and their written consent gained before any action is taken.

Level 3 –children with complex needs

This level applies to those children identified as requiring targeted support. It is likely that for these children their needs and care are compromised. Only a small fraction of children will fall within this band. These children will be those who are vulnerable or experiencing the greatest level of adversity.

Children with additional needs: These children are potentially at risk of developing acute/ complex needs if they do not receive early targeted intervention.

Sometimes in discussion with parents and carers and through our observations and records we realise that a child and their family have a number of needs which are preventing a child from reaching his/her full potential. In this case we will discuss the situation with parents and carers and try to identify each area of concern so that a range of other agencies can come together to offer support to the family. With parental consent we will complete an Early Help assessment and contact Compass to help us identify and co-ordinate a range of other agencies. This multi-agency response will require a lead professional who may be a member of our staff.

At this level parents will always be consulted before we contact another agency and their written consent gained before any action is taken.

Level 4 – children with acute specialist needs/ child protection

These are children whose needs and care at the present time are likely to be significantly compromised thereby requiring assessment under Section 47 or Section 17 of the Children Act 1989. These children may become subject to a child protection plan and need to be accommodated (taken into care) by Children's Social Care either on a voluntary basis or by way of Court Order. Section 17- 1989 Children Act states a child shall be taken to be in need if: (a) He is unlikely to achieve or maintain, or to have the opportunity of achieving or maintaining, a reasonable standard of health or development without the provision for him of services by a local authority under this Part; (b) His health or development is likely to be significantly impaired, or further impaired, without the provision for him of such services; or (c) He is disabled.

Sometimes in discussion with parents and carers and through our observations and records we realise that a child is at risk of significant harm (see below) and we must take emergency action to ensure that a child is kept safe. If the Designated Lead is unsure whether or not the concern meets this threshold he/she may discuss the case with an Early Help Social Worker.

There are no absolute criteria on which to rely when judging what constitutes significant harm. Sometimes a single violent episode may constitute significant harm but more often it is an accumulation of significant events, both acute and longstanding, which interrupt damage or change the child's development.

It may be:

- *the child is at risk of serious harm from others or themselves and requires skilled risk assessment and protection;*
- *the child or young person is likely to put others at risk or harm, distress or loss and a response needs to take account of the individual's interests and wellbeing of others;*
- *the child's circumstances, including their health, finances, living conditions or social situation, are likely to cause them or others serious harm, social exclusion or reduction of life chances;*
- *the situation requires assessment of, and intervention in unpredictable emotional, psychological, intra-family or social factors and responses;*
- *the circumstances are such that there are significant risks in both intervening and not intervening, when a fine judgement is required*

Careful analysis and interpretation of information will enable practitioners and families to:

- *think about what is important and identify needs or difficulties;*
- *explain why these have come about;*
- *understand the impact of strengths and pressures on the child or young person;*
- *reach agreement about what needs to be improved;*
- *agree the priority issues, aims and goals in terms of improving the child's wellbeing;*
- *agree desired outcomes.*

Consider:

- *What is the lived experience of the child?*
- *When and how are the child's needs not being met?*
- *What are the effects on the child's current development and long term effects?*
- *What are the child's needs, wishes and feelings regarding intervention and likely outcomes?*

(Taken from: Multi-agency Guidance on Threshold Criteria to help support Children, Young People and their Families in Shropshire 2017) [Shropshire Threshold Document](#)

Partnership with families

A copy of this policy is made available to all parents prior to their child joining Stokesay Primary School as well as details of the complaints procedure. In general any concerns will be discussed with parents and we will offer support.

All conversations, whatever the outcome, should be recorded appropriately in order to show that they took place, identify what was agreed and evaluate how effectively they enabled needs to be met. In this way quality conversations can demonstrate their impact on successful practice, including improvements in decision making and joint working. Conversations should continue in order to inform the on-going planning and reviewing.

Practitioners working with families at a Universal, Early Help or Targeted level will need to get the consent of the family before any information is held or shared with other agencies. If the practitioner does not gain the family's consent and in future has ongoing concerns, they should consider contacting Compass for advice and guidance.

With the exception of child protection matters, referrals to Compass cannot be accepted without parents having been consulted first.

Consent is not required for child protection referrals where it is suspected that a child may be suffering or be at risk of suffering significant harm; however, the referring practitioner, would need to inform parents or carers that you are making a referral, unless to do so may:

- Place the child at increased risk of Significant Harm; or
- Place any other person at risk of injury; or
- Obstruct or interfere with any potential Police investigation; or
- Lead to unjustified delay in making enquiries about allegations of significant harm.

The child's interest must be the overriding consideration in making such decisions. Decisions should be recorded.

If consent is withheld by the parent, this could lead to one of the following options:

- If it is felt that the child's needs can be met through Early Help, then discussion with the family should take place about the completion of an Early Help Assessment and provision of services through an Early Help Plan. Early help consultations are available from the Early Help Advisors for support in managing these situations.
- Another agency, familiar with the child and family, to make the approach about information sharing to the family.
- No assessment should take place. The rationale for this decision will be recorded on the concerns form.
- The combination of the concerns and the refusal to consent to enquiries being made may result in the concerns being defined as child protection concerns. In this case, information sharing may proceed without parental consent. The consultation and the decision to proceed without consent must be recorded on the case papers.

If a child has actually been injured or is in imminent danger of being injured then we will contact the emergency services, medical or police, immediately on 999.

When making a level 4 referral to Compass we will ensure we have a record of all details required detailed on a [Shropshire Multi-Agency Referral Form](#)

Specific legal duties to report

New legislation has recognised and criminalised the following types of abuse and placed duties on education settings to report offences to the authorities:

- **Radicalisation and the Prevent Duty**

The government set out its definition of British values in the 2015 Prevent Strategy – this promotes the values of:

- democracy
- the rule of law
- individual liberty
- mutual respect
- tolerance of those of different faiths and beliefs

Stokesay Primary School promotes these values to ensure that children build resilience.

If a member of staff has a concern about a particular pupil/s they should follow Stokesay Primary' normal safeguarding procedures, including discussing with the school's DSL as set out in the Child Protection / Safeguarding policy.

The DSL should contact West Mercia Prevent Team:

Detective Sergeant Stuart Clark
01386 591835

and

PC Manjit Sidhu
01386 591815

The Prevent Team email is: prevent@warwickshireandwestmercia.pnn.police.uk

- **Female Genital Mutilation (FGM)**

If we become aware of any cases where girls are at risk of FGM or have actually been harmed, we will contact the Police immediately and follow up with a referral to Compass to ensure that we are meeting our reporting duties. Please refer to <https://www.gov.uk/government/publications/female-genital-mutilation-leaflet>

We may not seek parental consent if this may put the girl at increased risk.

- **Domestic abuse and honour based violence**

Children living in households where there is domestic abuse which could be coercion or violence, including honour based violence, could be at significant risk of harm. We will seek support for victims and their children through Compass.

Depending on the level of risk, we may or may not consult parents before contacting Compass.

Specific safeguarding issues

To ensure that our children and young people are protected from harm, we need to understand what types of behaviour constitute abuse and neglect (Appendix A). Staff are made aware of specific safeguarding issues (listed below) through child protection training, reading up to date guidance such as Keeping Children Safe in Education September 2020 and accessing SSCP procedures at <http://www.safeguardingshropshireschildren.org.uk>

All staff are made aware that mental health problems can, in some cases, be an indicator of abuse. The DSL is also the Mental Health Lead and this helps to ensure that referrals are made to services, such as Bee U and Compass, if there are safeguarding concerns relating to mental health issues.

Children may need a Social Worker, due to safeguarding or welfare needs. Local authorities will share this information with the school, and the DSL will hold and use this information, so that decisions can be made in the best interests of child's safety, welfare and educational outcomes.

Schools and settings are to ensure that the DSL is continually updated in all areas below. They must be familiar with the referral pathways and specific toolkits and guidance available on the SSCP website.

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example information for schools, colleges and early years settings can be found on the TES, MindEd and the NSPCC websites. Staff can access government guidance as required on the issues listed below via GOV.UK and other government websites.

- Bullying including cyberbullying
 - Child Criminal Exploitation: County Lines
 - Child missing from education, home or care
 - Child sexual exploitation (CSE)
 - Children and the court system
 - Children with family members in prison
 - Domestic violence
 - Drugs
 - Health and Wellbeing eg fabricated or induced illness, medical conditions, mental health and behaviour
 - Faith based abuse
 - So called honour-based abuse (including Female Genital Mutilation and Forced Marriage)
 - Gangs and youth violence
 - Gender-based violence/violence against women and girls (VAWG)
 - Homelessness
 - Hate
 - Missing children and adults' strategy
 - Private fostering
 - Preventing radicalisation
 - Relationship abuse
 - Peer on Peer Abuse / child on Child Abuse eg Sexting (youth produced sexual imagery), Sexual Violence and Sexual Harassment
 - Trafficking
 - Private Fostering
 - Online safety
- **Peer on Peer Abuse**

Staff should recognise that children are capable of abusing their peers. Abuse is abuse and should never be tolerated or passed off as "banter" or "part of growing up". Victims of peer abuse should be supported as they would be if they were the victim of any other form of abuse, in accordance with this policy.

Peer on peer abuse occurs when a young person is exploited, bullied and/or harmed by their peers who are the same age or similar age. Peer-on-peer abuse can relate to various forms of abuse (not just sexual abuse and exploitation, some forms of peer on peer abuse are:

- **Sexting**

Sexting is when someone sends or receives a sexually explicit text, image or video.

This includes sending 'nude pics', 'rude pics' or 'nude selfies'. Pressuring someone into sending a nude picture can happen in any relationship and to anyone, whatever their age, gender or sexual preference.

However, once the image is taken and sent, the sender has lost control of the image and these images could end up anywhere. By having in their possession, or distributing, indecent images of a person under 18 on to someone else, young people are not even aware that they could be breaking the law as stated as these are offences under the Sexual Offences Act 2003.

- **Initiation/Hazing**

Hazing is a form of initiation ceremony which is used to induct newcomers into an organisation such as a private school, sports team etc. There are a number of different forms, from relatively mild rituals to severe and sometimes violent ceremonies.

The idea behind this practice is that it welcomes newcomers by subjecting them to a series of trials which promote a bond between them. After the hazing is over, the newcomers also have something in common with older members of the organisation, because they all experienced it as part of a rite of passage. Many rituals involve humiliation, embarrassment, abuse, and harassment.

- **Prejudiced Behaviour**

The term prejudice-related bullying refers to a range of hurtful behaviour, physical or emotional or both, which causes someone to feel powerless, worthless, excluded or marginalised, and which is connected with prejudices around belonging, identity and equality in wider society – in particular, prejudices to do with disabilities and special educational needs, ethnic, cultural and religious backgrounds, gender, home life, (for example in relation to issues of care, parental occupation, poverty and social class) and sexual identity (homosexual, bisexual, transsexual).

- **Teenage relationship abuse**

Teenage relationship abuse is defined as a pattern of actual or threatened acts of physical, sexual, and/or emotional abuse, perpetrated by an adolescent (between the ages of 13 and 18) against a current or former partner. Abuse may include insults, coercion, social sabotage, sexual harassment, threats and/or acts of physical or sexual abuse. The abusive teen uses this pattern of violent and coercive behaviour, in a heterosexual or same gender relationship, in order to gain power and maintain control over the partner.

It is vital that staff at Stokesay Primary School understand that the child who is perpetrating the abuse may also be at risk of harm. Staff should make every effort to ensure that the perpetrator is also treated as a victim and undertake assessments to conclude this. Sensitive work must be undertaken with the child who is perpetrating, by helping them to understand the nature of their behaviour and the effect it has on others may prevent abuse as a whole.

Staff must be able to use their professional judgement in identifying when what may be perceived as "normal developmental childhood behaviour" becomes abusive, dangerous and harmful to others. Designated leads may need to consult with the SSCP Threshold document to help with their decision making as well as Brook Traffic Light Tool. www.brook.org.uk/training/wider-professional-training/sexual-behaviours-traffic-light-tool/

Safeguarding children with special educational needs and disabilities

It is recognised that children with special educational needs or disabilities (SEND) can present additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group of children. These can include: assumptions that indicators of possible abuse such as behaviour, mood and injury, relate to the child's impairment without further exploration; children with SEND can be disproportionately impacted by issues such as bullying, without necessarily showing outward signs; communication barriers.

It is important, therefore, to be particularly sensitive to these issues when considering any aspect of the welfare and safety of such children, and to seek professional advice where necessary.

Children Missing Education

All children, regardless of their circumstances, are entitled to a full time education, which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area. Effective information sharing between parents, schools, colleges and local authorities is critical to ensuring that all children are safe and receiving suitable education.

A child going missing from education is a potential indicator of abuse or neglect and such children are at risk of being victims of harm, exploitation or radicalisation. School and college staff should follow their procedures for unauthorised absence and for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of going missing in future. Where reasonably possible, the school will hold at least two emergency contacts for every child in the school in case of emergency and in case there are welfare concerns at home.

Schools and colleges should put in place appropriate safeguarding policies, procedures and responses for children who go missing from education, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, female genital mutilation and forced marriage. Further information about children at risk of missing education can be found in the Children Missing Education guidance or Shropshire Council Learning Gateway.

There are many reasons why we want young children to have regular attendance at Stokesay Primary School. As well as supporting their learning and development, we want to try to make sure that children are kept safe, their wellbeing is promoted and they do not miss out on their entitlements and opportunities. In a small minority of cases, good attendance practice may also lead to the earlier identification of more serious concerns for a child or family and may have a vital part to play in keeping a child or other family members safe from harm.

At Stokesay Primary School, we have procedures for recording and following up any unexplained non-attendance and know how to respond to different problems and where to access advice, support or whom to alert if concerns arise.

Safeguarding children who are Looked After

Staff are aware the most common reason for children becoming looked after is because of abuse and/or neglect. Appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. Appropriate staff members also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The designated safeguarding lead has details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

The designated teacher for looked after children will work with the Local Authority to promote the educational achievement of registered pupils who are looked after or who have left care through adoption, special guardianship, child arrangement orders or who are adopted from state care outside of England and Wales.

The appointment of a designated teacher is a statutory requirement for governing bodies of maintained schools and proprietors of academies.

The Designated Safeguarding Lead should have details of the child's social worker and the name of the virtual head teacher. The Designated Safeguarding Lead should work closely with the designated teacher.

Injuries

At the beginning of each session or school day parents are requested to notify us of any accidents, incidents or injuries which may affect their child before leaving him/her at school. A note will be made of any existing injuries and how the injury was received will be recorded. A body map may be used to indicate any marks/bruises (see Appendix E) and this should be referred to in the Multi-agency referral form (MARF).

Any serious injury occurring in the school/setting e.g. broken bone, is reported to Health and Safety Executive (HSE) via RIDDOR. This is also reported to Ofsted within 14 days (see Appendix F).

Safe use of ICT and mobile phones

It is essential that children are safeguarded from potentially harmful and inappropriate online material. At Stokesay Primary School, we ensure that there are appropriate filters and appropriate monitoring systems in place.

Where children are being asked to learn online at home, the school will follow advice from the Department of Education; Safeguarding and Remote Education.

The use of mobile phones and other electronic devices such as computers, tablets, and game devices is commonplace. However, as a society, we are beginning to recognise that although these devices have brought great benefit we also need to ensure that we help children to understand there are dangers and how to keep themselves safe. This includes:

- Keeping personal details secure
- Understanding that not all content is appropriate, truthful or legal
- What to do if they do accidentally access inappropriate or illegal content
- What to do if they are upset by something they receive
- What to do if they are going to physically meet someone they have met on-line

Teaching staff are able to use their personal mobile phones during their break times. During working hours they must be kept out of the reach of children and parents in a secure area accessible only to staff. All staff are made aware of their duty to follow this procedure, and to challenge anyone not adhering to it.

Visitors are asked to refrain from mobile 'phone use at school.

Very occasionally, and with the Headteacher's permission, important contact details of the children are kept on a mobile 'phone, for example: when students with medical needs are taken out of school on trips.

We believe that photographs validate children's experiences and achievements and are a valuable way of recording milestones in a child's life. Parental permission for the different ways in which we use photographs is gained as part of the initial registration at Stokesay Primary School. We take a mixture of photos that reflect the pre-school environment, sometimes this will be when children are engrossed in an activity either on their own or with their peers. In order to safeguard children and adults and to maintain privacy, cameras are not to be used during intimate care situations by adults or children.

The IT systems at Stokesay Primary School have anti-virus software and students are taught how to be 'safe on line' as part of ICT lessons and in assemblies.

Through induction, staff and volunteers are made aware of our 'acceptable use of technology' policy both at home and in the workplace. If any staff or volunteers breach this policy then we will take disciplinary action which may result in a referral to the Disclosure and Barring Service.

Escalating / de-escalating concerns

Just because a child is assessed at a point in time as meeting a certain threshold criteria does not mean that they always will. An assessment is an on-going process, not an event; children's needs often change over time. The DSL will maintain an overview of all children with a plan to ensure children's needs are being met at the right level of intervention. Of central importance in understanding where a child's needs might lie on this continuum, is the cooperation and engagement of the parents and carers – a lack of co-operation or appreciation about the concern may of itself raise the level of the need and required response.

Children's Social Work and Safeguarding Step Down Guidance.

The impact of abuse

The impact of child abuse should not be underestimated. Many children do recover well and go on to lead healthy, happy and productive lives, although most adult survivors agree that the emotional scars remain, however well buried. For some children, full recovery is beyond their reach, and the rest of their childhood and their adulthood may be characterised by anxiety or depression, self-harm, eating disorders, alcohol and substance misuse, unequal and destructive relationships and long-term medical or psychiatric difficulties.

Taking action

Key points to remember for taking action are:

- in an emergency take the action necessary to help the child, for example, call 999
- report your concern to the DSL immediately
- if the DSL is not able to be contacted ensure action is taken to report the concern to children's social care
- do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- complete a record of concern
- seek support for yourself if you are distressed.

If you suspect a child is at risk of harm

There will be occasions when you suspect that a child may be at serious risk, but you have no 'real' evidence. The child's behaviour may have changed, their artwork could be bizarre or you may have noticed other physical but inconclusive signs. In these circumstances, you should try to give the child the opportunity to talk. The signs you have noticed may be due to a variety of factors and it is fine to ask the child if they are alright or if you can help in any way.

The welfare concern form (see Appendix G(i)) is used to record these early concerns (staff should use welfare concern form Appendix G(ii)). If the child does begin to reveal that they are being harmed you should follow the advice in the section 'If a child discloses information to you'.

If, following your conversation, you remain concerned, you should discuss your concerns with the designated person.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate actions should be taken, following the procedures set out in this policy and by speaking with the DSL.

If a child tells you that they have been abused

It takes a lot of courage for a child to tell someone that they are being neglected and / or abused. They may feel ashamed, particularly if the abuse is sexual, their abuser may have threatened what will happen if they tell, they may have lost all trust in adults, or they may believe, or have been told, that the abuse is their own fault.

If a child talks to you about any risks to their safety or wellbeing you will need to let them know that **you must** pass the information on – you are not allowed to keep secrets. The point at which you do this is a matter for professional judgement. If you jump in immediately the child may think that you do not want to listen, if you leave it till the very end of the conversation, the child may feel that you have misled them into revealing more than they would have otherwise.

During your conversation with the child:

- Allow them to speak freely.
- Remain calm and do not over react – the child may stop talking if they feel they are upsetting you.
- Give reassuring nods or words of comfort – ‘I’m so sorry this has happened’, ‘I want to help’, ‘This isn’t your fault’, ‘You are doing the right thing in talking to me’.
- Do not be afraid of silences – remember how hard this must be for the child.
- Under no circumstances ask investigative questions – such as how many times this has happened, whether it happens to siblings too, or what does the child’s mother think about all this.
- At an appropriate time tell the child that in order to help them you must pass the information on.
- Do not automatically offer any physical touch as comfort. It may be anything but comforting to a child who has been abused.
- Avoid admonishing the child for not disclosing earlier. Saying ‘I do wish you had told me about this when it started’ or ‘I can’t believe what I’m hearing’ may be your way of being supportive but the child may interpret it that they have done something wrong.
- Tell the child what will happen next. The child may agree to go with you to see the designated person. Otherwise let them know that someone will come to see them before the end of the day.
- Report verbally to the designated person.
- Write up your conversation as soon as possible on the record of concern form and hand it to the designated person.
- Seek support if you feel distressed.

Refer to Appendix G(i) for NSPCC record of concern.

Prevention in the Curriculum

Stokesay Primary School recognises the importance of developing pupils’ awareness of behaviour that is unacceptable towards them and others, and how they can help keep themselves and others safe.

Relationships Education and Relationship and Sex Education and/or PSHE programmes *in each key stage* provide personal development opportunities for pupils to learn about keeping safe and who to ask for help if their safety is threatened. As part of developing a healthy, safer lifestyle, pupils are taught to, for example:

- Safely explore their own and others’ attitudes.
- Recognise and manage risks in different situations and how to behave responsibly.
- Judge what kind of physical contact is acceptable and unacceptable and at what age.
- Recognise when pressure from others (including people they know) threatens their personal safety and well-being and develop effective ways of resisting pressure; including knowing when and where to get help.
- Use assertiveness techniques to resist unhelpful pressure.
- The importance of Internet safety

Managing allegations of abuse made against staff (this includes apprentices and supply teachers), students or volunteers (see Appendices G(i) and G(ii))

Allegations which might indicate that a person would pose a risk of harm to children if they continue to work in regular or close contact with children in their present position will be taken seriously. We have a duty to inform Ofsted of any serious allegations made against a person which suggests he or she has:

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

We also have a duty of care towards our staff. We provide support for anyone facing an allegation and provide employees with a named contact if they are suspended. It is essential that any allegations of abuse made against members of staff or volunteers are dealt with very quickly, in a fair and consistent way that provides effective protection for the child and at the same time supports the person who is the subject of the allegation.

In the first instance the DSL will meet with the Headteacher to consider the nature, content and context of the allegation and agree a course of action. The Headteacher will then contact the Local Authority Designated Officer (LADO) to confirm the course of action.

If there are concerns about a staff member, then this should be referred to the Headteacher. Where there are concerns about the Headteacher, this should be referred to the Chair of the Local Governing Body. Staff may consider discussing any concerns with the school's DSL and make any referral via them.

The LADO may ask for additional information, such as previous history, whether the child or their family have made similar allegations previously and the individual's current contact with children. There may be situations when the LADO will want to involve the police immediately, for example if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.

The initial sharing of information and evaluation may lead to a decision that no further action is to be taken in regard to the individual facing the allegation or concern; in which case this decision and a justification for it will be recorded by both the Headteacher and the LADO, and agreement reached on what information should be put in writing to the individuals concerned and by whom. The Headteacher will then consider with the LADO what action should follow both in respect of the individual and those who made the initial allegation.

If further action is required, we will follow the advice of the LADO and co-operate with any investigations. We will follow instructions about what can be disclosed to the accused and whether he/she should be suspended whilst further investigations take place. This is not an indication of admission that the alleged incident has taken place, but is to protect the staff as well as children and families throughout the process. Clear advice will be given to workers on the process of investigation by other agencies. We will follow advice about how to inform families about the allegation.

In all cases, we will notify Ofsted within 14 days of the allegations first being made and inform them about what actions are being taken by completing the on-line form.

If the member of staff/volunteer is found to be a risk to children and vulnerable adults, the Disclosure & Barring Service will be notified.

If an allegation is made against the DSL, the Headteacher will make the referral.

If we are aware of the details of a child who has or may have been harmed by a member of staff or volunteer, we will contact Compass to make a referral to seek support for the child.

There is a legal requirement for employers to make a referral to the DBS where they think that an individual has engaged in conduct that harmed (or is likely to harm) a child; or if a person otherwise poses a risk of harm to a child.

[SAFEGUARDING VULNERABLE GROUPS ACT 2006](#)

Whistleblowing

Whistle blowing is a mechanism by which adults can voice their concerns in good faith, without fear of repercussion. Any behaviour by colleagues that raises concern regardless of source will be recorded and reported to the designated practitioner or appropriate agency. A Whistle Blowing Policy is available to all staff.

Recruiting Staff

We provide adequate and appropriate staffing resources to meet the needs of children.

Job adverts and application packs make reference to our safeguarding policy and procedures.

Applicants for posts are clearly informed that positions are exempt from the Rehabilitation of Offenders Act 1974. We ensure that we meet our responsibilities under the Safeguarding Vulnerable Groups Act 2006.

Where applicants are rejected because of information that has been disclosed, we will inform the applicant about their right to know and to challenge incorrect information.

We comply with the Safeguarding and Welfare Requirements in the Compulsory Childcare Register and Keeping Children Safe in Education 2020 in respect of references and Enhanced Disclosure and Barring Service checks for staff and volunteers to ensure that no disqualified or unsuitable person works with or has access to the children. This includes disqualification by association, where a registered provider or a childcare worker may also be disqualified because they live in the same household as another person who is disqualified, or because they live in the same household where a disqualified person is employed.

Keeping Children Safe in Education 2020 states that schools will be required to complete a risk assessment for each volunteer to decide whether they need to do an enhanced DBS check or not. (Note that even if it is decided an enhanced DBS is to be requested, if the volunteer is not in regulated activity, then schools are not legally allowed to do a barred list check).

We have procedures for recording the details of visitors, including prospective candidates, to the school and ensure that we have control over who comes in to the premises so that no unauthorised person has unsupervised access to the children.

Where pupils are placed in an alternative provision, the school should obtain a written statement from the provider that they have completed all the vetting and barring checks on their staff that are necessary.

Staff Supervision (including students and volunteers)

In order to ensure that all staff are alert to any issues for concern, staff receive regular training and updates in safeguarding and child protection through a range of training and supervision activities. This includes both formal and informal supervision, annual appraisals, staff meetings and access to SSCP approved training. Individual supervision offers staff an opportunity to receive coaching to improve their practice with children and address any issues resulting in poor performance. Individual supervision also provides a safe space in which to raise any concerns they may have about the conduct of other adults connected with the setting.

Staff supervision is also used to ensure that all staff remain suitable to work with children. This means staff are required to inform their manager of any medication they are taking and provide medical evidence that this will not impair their ability to look after children properly. Staff are also required to disclose any information, which may lead to their disqualification as outlined in Keeping Children Safe in Education 2020.

Resolution of Professional disagreements

Resolution of professional disagreements

When practitioners are working together in the complex business of safeguarding children there will inevitably be occasions when there are professional differences of opinion or concerns about practice decisions, actions or lack of actions to a referral, assessment or the progress of child's plan. In these circumstances, practitioners have a duty to take action to address professional disagreements as soon as they arise in a way that is appropriate and proportionate

Examples of case-specific professional disagreements include:

- When there is disagreement about the response to a referral made by one agency to another agency or service (e.g. decision making).
- When there is disagreement about the outcome of an assessment.

- When there is serious concern about the implementation of a child's Plan and disagreement about how this should be addressed (e.g. agreed actions not being followed through).
- When there is serious concern about the effectiveness of a child's Plan in bringing about the necessary changes and disagreement about how this should be addressed (e.g. drift/delay).
- When there is disagreement over the sharing of information in a particular case.

Designated Safeguarding Leads and managers will consult with the procedures for resolving professional disagreements by accessing it on the West Midlands Child Protection Procedures website. Designated Safeguarding Leads will record any actions taken and outcomes on file.

Appendix A

The role of the Designated Safeguarding Lead

In carrying out any of the role set out below, the role of the Designated Safeguarding Lead should be guided by two important principles. First, following the Children Act 1989, the principle that the welfare of the child should be paramount. Second, the principle that confidentiality should be respected as far as possible (without compromising the first principle).

It is **essential** that designated safeguarding leads are familiar with the content of the following key documents:

- Department for Education (DfE's) statutory guidance for schools and colleges, 'Keeping Children Safe in Education' 2020
- Working Together to Safeguard Children' 2018
- Ofsted Inspecting safeguarding in early years, education and skills settings
- The Prevent duty July 2015
- Early Years Foundation Stage Statutory Framework 2017 (EYFS)
- Shropshire Safeguarding Community Partnership (SSCP) Threshold Guidance Document

The Designated Safeguarding Lead must:

- Be a senior member of staff, from the school **leadership team**.
- Take **lead responsibility** and is accountable for safeguarding and child protection, (lead responsibility must never be delegated).
- Be fully conversant with the Shropshire Safeguarding Community Partnership (SSCP) child protection (CP) procedures and to co-ordinate action on child abuse within school, ensuring that all staff are aware of their responsibilities in relation to CP.
- Provide supervision and guidance to deputy designated safeguarding leads.
- Ensure that all deputy designated safeguarding leads are trained to the same standard as themselves.
- Should liaise with designated staff for Looked After Children (LAC) and 14-19 placements.
- Refer individual cases of suspected abuse to relevant Local Authority (LA) Children Services area (following SSP guidelines) and to liaise with them and other agencies on individual cases and on general issues relating to CP.
- Undertake "Prevent" awareness training and lead on this within the school and must assume responsibility for organising training on all aspects of CP within school, and to act as a school-based resource on CP issues for staff. In greater detail, this involves the following:
 - Ensuring that all staff, both teaching and non-teaching, know about, and have access to the SSCP procedures for CP and that all cases of suspected abuse are reported in the correct way.
 - Supporting staff who make referrals to LA children's social care.

- Referring cases to the Channel programme where there is a radicalisation concern as required.
- Supporting staff who make referrals to the Channel programme
- Referring cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service (DBS) as required and ensuring that the Designated Officer in the Local Authority (LADO) is informed.
- Referring cases where a crime may have been committed to the Police as required
- Ensuring that all staff have regular child protection updates (at least annually)
- Ensuring that all teaching and non-teaching staff attend Shropshire Safeguarding Children Board endorsed child protection awareness training every three years.
- Ensuring all Deputy Designated Safeguarding Leads regularly update their child protection training (at least annually) and attend Shropshire Safeguarding Community Partnership endorsed child protection update training every two years
- Ensuring the school is compliant with the 'Prevent' duty requirements so that:
 - All staff are trained in awareness of "Prevent".
 - All teachers are trained in "Prevent" curriculum requirements including British Values.
 - The school can demonstrate the impact on the pupils of promoting British Values.
 - The Deputy Designated Safeguarding Leads are clear about their lead role in respect of "Prevent" and the process of a "Prevent" referral.
 - The job description of the Deputy Designated Safeguarding leads also includes the "Prevent" duty.
 - The e-safety policy and the child protection policy clearly state the "Prevent" duty.
 - Help promote educational outcomes by sharing information about the welfare, safeguarding and child protection issues that children, including children with a social worker, are experiencing, or have experienced, with teachers and school/college leadership team.

Working with others. The Designated Safeguarding lead must:

- Liaise with the Headteacher or Principal to inform him or her of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations.
- As required, liaise with the "case manager" and the LADO if relevant i.e. if there are safeguarding or child protection concerns relating to a staff member.
- Liaise with staff (especially pastoral staff, school nurses, IT technicians, SENCOs and Senior Mental Health Leads) on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies
- Should liaise with the three safeguarding partners and work with other agencies in line with Working Together 2018.
- Lead on or participate in Early Help Multi-Agency interventions

Training – The Designated Safeguarding Lead must:

- Ensure that they and any deputies should undergo training to provide them with the knowledge and skills required to carry out the role.
- Ensure that they and any deputies, in addition to the formal training set out above, should refresh their knowledge and skills (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, but at least annually, to allow them to understand and keep up with any developments relevant to their role so they:
- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments.
- Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and can attend and contribute to these effectively when required to do so.
- Ensure each member of staff has access to and understands the school child protection policy and procedures, especially new and part time staff.
- Are alerted to the specific needs of children in need, those with special educational needs and young carers.
- Can keep detailed, accurate, secure written records of concerns and referrals.
- Are aware of the guidance that is available in respect of Female Genital Mutilation (FGM) and should be vigilant to the risk of it being practised and inform the Police if they suspect a child has suffered FGM (this is a legal requirement for all Teachers; Serious Crime Act 2015).
- Encourage a culture of listening to children and taking account of their wishes and feelings.

Child protection files

- The DSL should also consider if it would be appropriate to share any information with the new school or college in advance of a child leaving
- Ensure that all child protection files are stored securely and accessed only by authorised individuals compliant with the Data Protection Act 1998 and GDPR.
- Where children leave the school, ensure their child protection file is transferred to the new school or college as soon as possible and is transferred separately and securely from the main pupil file, and ensure that confirmation of receipt is obtained.

Availability

During term time, the designated safeguarding lead should ensure that they (or a deputy) are always available (during school hours) for staff in the school to discuss any safeguarding concerns.

This list is not exhaustive, further detailed information on the Role of DSL can be found in KSCIE 2020 guidance Annex B.

Appendix B

The role of the Deputy Designated Safeguarding Lead

In carrying out any of the role set out below, your role of **'Deputy'** Designated Safeguarding Lead should be guided by two important principles. First, following the Children Act 1989, the principle that the welfare of the child should be paramount. Second, the principle that confidentiality should be respected as far as possible (without compromising the first principle).

It is **essential** that **'Deputy'** designated safeguarding leads are familiar with the content of the following key documents:

- the Department for Education's (DfE's) statutory guidance for schools and colleges, 'Keeping Children Safe in Education' 2019
- 'Working Together to Safeguard Children' 2018
- Ofsted Inspecting safeguarding in early years, education and skills settings 2019
- The Prevent duty July 2015
- Shropshire Safeguarding Partnership (SSP) Threshold Guidance Document
- Early Years Foundation Stage Statutory Framework 2017 (EYFS)

As **'Deputy'** Designated Safeguarding Lead you:

- Should be an experienced member of staff, from the school.
- Must take **responsibility** for safeguarding and child protection.
- Should be fully conversant with the SSP child protection (CP) procedures and act on child abuse within school.
- Provide support and guidance to all members of staff
- Should liaise with designated staff for Looked After Children (LAC) and 14-19 placements.
- Are responsible for referring individual cases of suspected abuse to relevant Local Authority (LA) Children Services area (following SSP guidelines) and to liaise with them and other agencies on individual cases and on general issues relating to CP.
- Should undertake "Prevent" awareness training and support with this within the school.
- Will have responsibility to act as a school-based resource on CP issues for staff.
- In greater detail, this involves the following:
 - Supporting staff, both teaching and non-teaching, to have access to the SSCP procedures for CP and that all cases of suspected abuse are reported in the correct way.
 - Supporting staff who make referrals to local authority children's social care.
 - Referring cases to the "Channel" programme where there is a radicalisation concern as required.
 - Supporting staff who make referrals to the "Channel" programme.

- Supporting the school to be compliant with the 'Prevent' duty requirements so that:
 - all staff are trained in awareness of "Prevent"
 - You are clear about your supporting role in respect of "Prevent" and the process of a "Prevent" referral.

Working with others – as **DEPUTY** Designated Safeguarding Lead, you will:

- Liaise with the senior Designated Safeguarding Lead, Headteacher or Principal to inform him or her of issues especially on-going enquiries under section 47 of the Children Act 1989 and police investigations.
- As required, liaise with the "case manager" and the Designated Officer in the Local Authority (LADO) for child protection concerns.
- Liaise with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies. Act as a source of support, advice and expertise for staff.

Training

- As **DEPUTY** designated safeguarding lead, you should ensure that you undergo training to provide yourself with the knowledge and skills required to carry out your role.
- As **DEPUTY** designated safeguarding lead, you should ensure that in addition to the formal training set out above, your knowledge and skills continue to be refreshed (this might be via ebulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, but at least annually, to allow you to understand and keep up with any developments relevant to your role so you:
- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments.
- Have a working knowledge of how Local Authorities conduct a child protection case conference and a child protection review conference and can attend and contribute to these effectively when required to do so.
- Are alert to the specific needs of children in need, those with special educational needs and young carers.
- Can keep detailed, accurate, secure written records of concerns and referrals.
- Are aware of the guidance that is available in respect of Female Genital Mutilation (FGM) and should be vigilant to the risk of it being practised
- Inform the Police if they suspect a child has suffered FGM (this is a legal requirement for all Teachers; Serious Crime Act 2015)

Availability

During term time, you should ensure that you are available (during school hours) for staff in the school to discuss any safeguarding concerns.

This list is not exhaustive, further detailed information on the Role of DSL can be found in KSCIE 2020 guidance Annex B.

Appendix C

FILE TRANSFER RECORD AND RECEIPT

PART 1: To be completed by sending / transferring school or college

NAME OF CHILD:	
DOB:	
NAME OF SCHOOL SENDING CP FILE:	
ADDRESS OF SCHOOL SENDING CP FILE:	
METHOD OF DELIVERY:	BY HAND SECURE POST ELECTRONICALLY
DATE FILE SENT:	
NAME OF DSL TRANSFERRING FILE:	
NAME OF PERSON TRANSFERRING TO:	
SIGNATURE:	

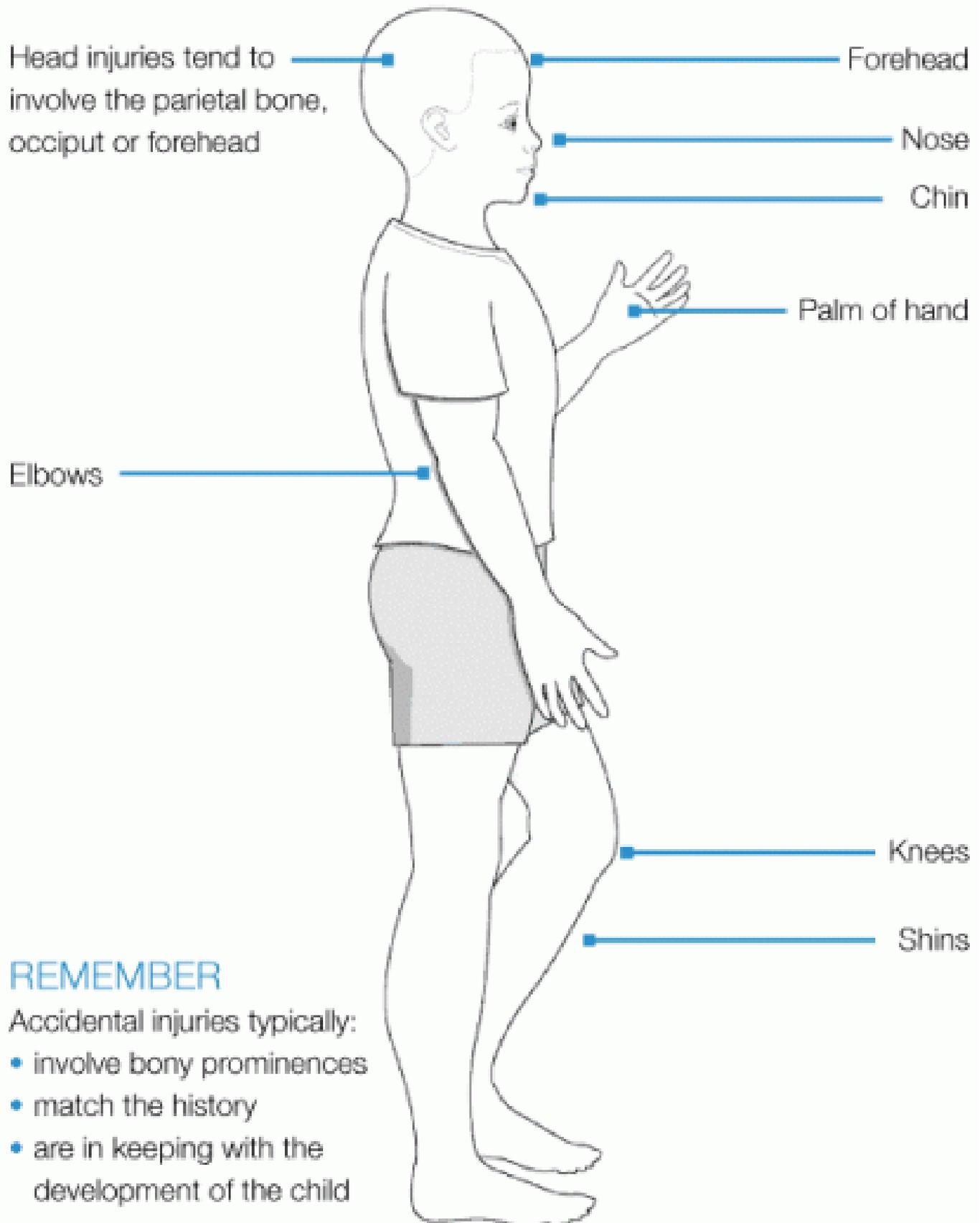
PART 2: To be completed by receiving school or college

NAME OF SCHOOL RECEIVING FILE:	
ADDRESS OF SCHOOL RECEIVING FILE:	
DATE RECEIVED:	
NAME OF PERSON RECEIVING FILE:	
DATE CONFIRMATION OF RECEIPT SENT:	
SIGNATURE:	

Receiving School: Please complete Part 2 and return this form to the Designated Safeguarding Lead listed in Part 1 above. You are advised to keep a copy for your own reference.

Appendix E

Body map 1



REMEMBER

Accidental injuries typically:

- involve bony prominences
- match the history
- are in keeping with the development of the child

Body Map 2

Ears – especially pinch marks involving both sides of the ear

The “triangle of safety” (ears, side of face, and neck, top of shoulders): accidental injuries in this area are unusual

Inner aspects of arms

Back and side of trunk, except directly over the bony spine

Black eyes, especially if bilateral

Soft tissues of cheeks

Intra-oral injuries

Forearms when raised to protect self

Chest and abdomen

Any groin or genital injury

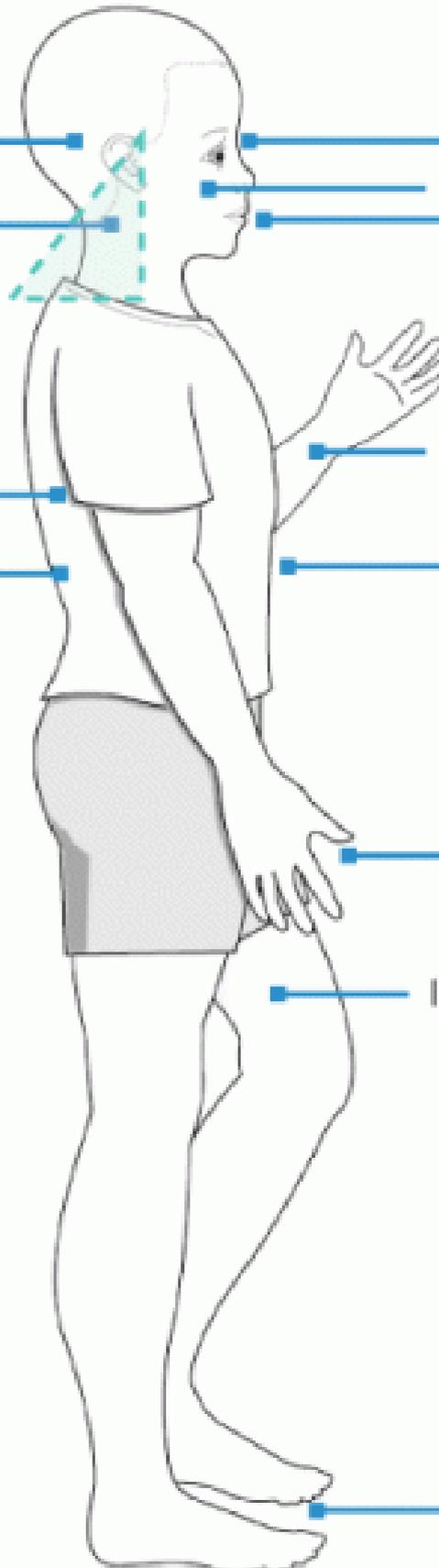
Inner aspects of thighs

Soles of feet

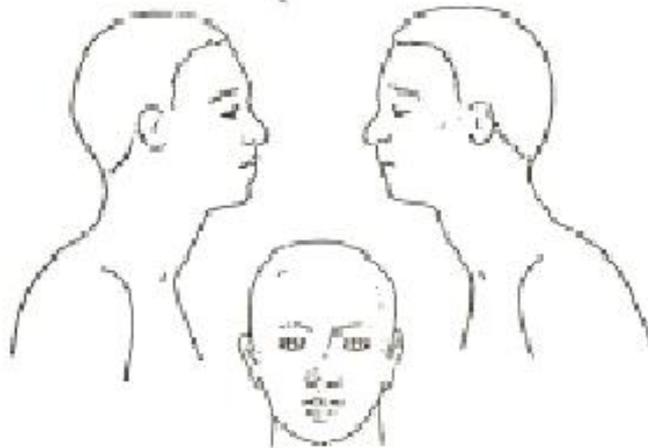
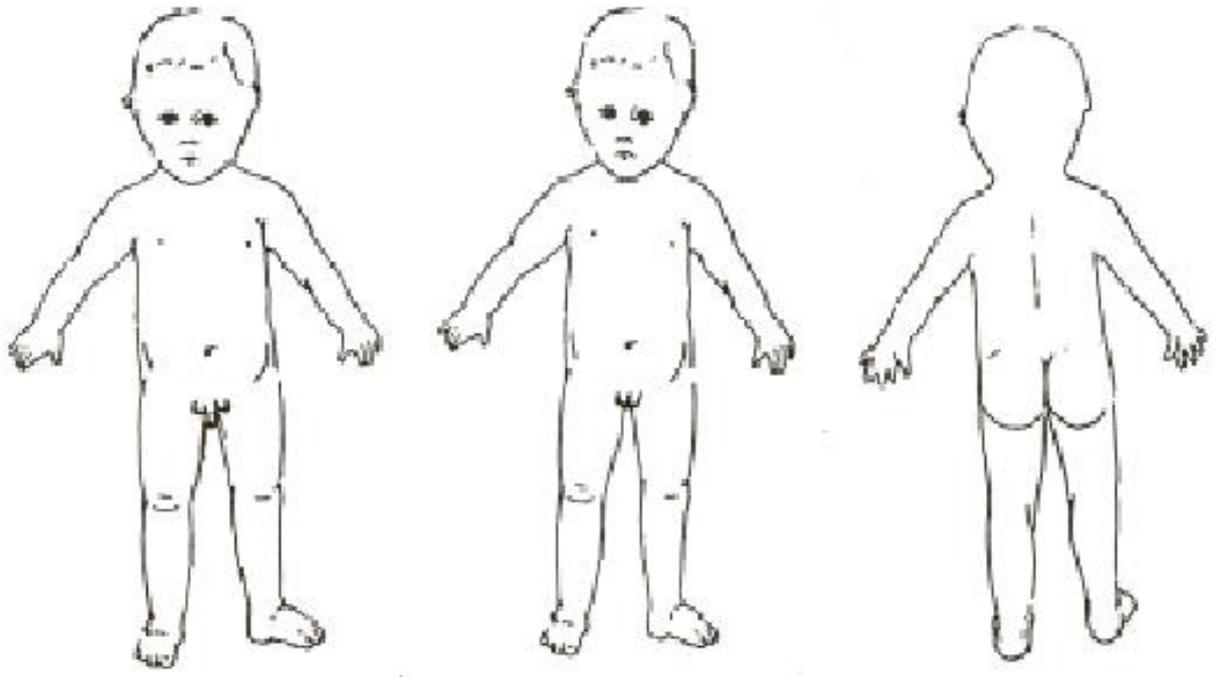
REMEMBER

Concerns are raised by:

- injuries to both sides of the body
- injuries to soft tissue
- injuries with particular patterns
- any injury that doesn't fit the explanation
- delays in presentation
- untreated injuries



Body Map 3



Appendix F

Serious accidents, injuries and deaths - what you must notify to Ofsted:

- the death of a child while on the premises, or later, as the result of something that happened while the child was in your care
- death or serious accident or serious injury to any other person on your premises (Childcare Register only)
- serious injuries (please see the section below for the definition of serious injuries)
- where a child in your care is taken to hospital (to an Accident and Emergency Department for more than 24 hours), either directly from your provision, or later, as the result of something that happened while the child was in your care
- any significant event which is likely to affect the suitability to care for children.

Serious injuries are defined as:

- broken bones or a fracture
- loss of consciousness
- pain that is not relieved by simple pain killers
- acute confused state
- persistent, severe chest pain or breathing difficulties
- amputation
- dislocation of any major joint including the shoulder, hip, knee, elbow or spine
- loss of sight (temporary or permanent)
- chemical or hot metal burn to the eye or any penetrating injury to the eye
- injury resulting from an electric shock or electrical burn leading to
- unconsciousness, or requiring resuscitation or admittance to hospital for more than 24 hours
- any other injury leading to hypothermia, heat-induced illness or
- unconsciousness; or requiring resuscitation; or requiring admittance to
- hospital for more than 24 hours
- unconsciousness caused by asphyxia or exposure to harmful substance or
- biological agent
- medical treatment, or loss of consciousness arising from absorption of any
- substance by inhalation, ingestion or through the skin
- medical treatment where there is reason to believe that this resulted from
- exposure to a biological agent, or its toxins, or infected material.

You are not required to inform Ofsted of minor injuries, but you must keep a record of these incidents. You are also not required to inform Ofsted of general appointments to hospital or routine treatment by a doctor, such as the child's general practitioner, that is not linked to, or is a consequence of, a serious accident or injury.

Minor injuries are defined as:

- | | | |
|---------------------------------|--------------------------|--|
| • sprains, strains and bruising | • wound infections | • insect and animal bites |
| • minor cuts and grazes | • minor burns and scalds | • minor eye injuries |
| | • minor head injuries | • minor injuries to the back, shoulder and chest |

Appendix G

The Local Authority Designated Officer (LADO)

Duty to refer

In addition to informing Ofsted, the Designated Lead for Safeguarding or senior manager has a duty to refer any concerns to the LADO where it is alleged that a person who works* with children has:

- Behaved in a way that has harmed a child, or may have harmed a child - whether the alleged abuse occurred on or off the premises where the childcare takes place;
- Possibly committed a criminal offence against or related to a child;
- Behaved towards a child or children in a way that indicates he/she is unsuitable to work with children such as excessive one-to-one attention beyond the requirements of their usual role; or
- Displayed inappropriate behaviour such as inappropriate sexual comments, inappropriate sharing of images, or displays violent or aggressive behaviour.

Responsibility would also include reporting applications to work or volunteer with children and young people from adults who are barred from doing so as this poses a potential risk of significant harm to children and young people.

The LADO should be informed of ALL allegations that come to a Senior Manager's attention within 1 working day of the manager becoming aware of the allegation.

In cases where the nature of the allegation has not required immediate referral to the Compass or the Police, the Senior Manager and the LADO will make a decision jointly as to whether such a referral is necessary and who will make it.

The LADO should also be informed of any allegations that are made directly to the police or Compass.

It is important that even apparently less serious allegations are seen to be followed up objectively by someone independent of the organisation concerned. This is why the LADO should be informed of ALL allegations that come to the employers' attention.

The role of the Local Authority Designated Officer

The LADO will advise the employer of any action that may be necessary, whether an investigation will take place, and if so what form the investigation will take.

It is their role to provide on-going advice and liaison and to monitor the progress of cases. This may include:

- Advising the employer on next steps, such as the need to inform the child's parents; advice on dismissal or suspension of the member of staff accused; the decision as to whether or not the case will be investigated and by whom.

- Regularly monitoring the progress of cases to ensure that they are dealt with as quickly as possible consistent with a fair and thorough process.
- Liaising with the employer to provide advice and support when required/requested.
- Oversight and management of individual cases.

If an allegation is substantiated and the employer dismisses the person or ceases to use that person's services, the employer should consult with the LADO about whether a referral to the Disclosure and Barring Service is required.

Referral to the LADO should form part of your disciplinary and whistleblowing procedures.

The role of the setting's Designated Lead for Safeguarding

The Designated Lead for Safeguarding or the senior manager making the referral will be expected to play a key role in the investigative process and follow the advice given by the LADO. This may involve:

- Gathering any additional information which may have a bearing on the allegation, for instance: previous concerns, care and control incidents and so on;
- Providing the subject of the allegation with information and advising them to inform their union or professional body;
- Attending Strategy Meetings where required;
- Liaising with the LADO;
- Ensuring that risk assessments are undertaken where and when required;
- Ensuring that effective reporting and recording systems are in place which allow for the tracking of allegations through to the final outcome;
- Should the allegation be unfounded, giving consideration to a referral either to Compass or the police if the allegation is deemed to be deliberately malicious or invented.

Record keeping

It is important that employers keep a clear and comprehensive summary of any allegations made, details of how the allegation was followed up and resolved. This record should be placed on the person's confidential personnel file with a copy given to the individual. The record should be kept at least until the person reaches retirement or for ten years if that would be longer. The purpose of the record is to enable accurate information to be given in response to any future request for a reference. Details of allegations that are found to be malicious should be removed from personnel records.

Further information

SSP Inter Agency Child Protection Procedures - chapter 4.1 Managing Allegations Against Adults Working with Children & Young People:

http://westmerciaconsortium.proceduresonline.com/chapters/p_all_against_adults.html

*The term 'works with children' refers to any individual employed to work with children or acting in a voluntary capacity.