



Child Protection Policy

*“Safeguarding and promoting the welfare of children is **everyone’s** responsibility. **Everyone** who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all practitioners should make sure their approach is child centred. This means that they should consider at all times, what is in the **best interests** of the child”.*

(Keeping Children Safe in Education – DfE, September 2021)

Approved by the Governing Body Autumn 2022

To be reviewed by the Governing Body in Autumn 2023

Hillview Nursery School
Child Protection Policy
September 2022

Named staff with specific child protection responsibilities

Designated Safeguarding Lead/ Prevent SPOC	Carly Orbell (Mon-Tues) Lisa Orbell (Wed-Fri)	Carly.orbell@harrow.gov.uk Lisa.Orbell@harrow.gov.uk
Deputy Safeguarding Lead	Linda Bolam	linda.bolam@harrow.gov.uk 0208 424 1770
Nominated Governor for Child Protection	Louise Bloomfield	lbloomfield.310@lgflmail.org 0208 424 1770
Chair of Governors	Gemma Williams	gewillia@googlemail.com 0208 424 1770

<p>People Services of the London Borough of Harrow Children's Access Team - MASH</p> <p>The Golden Number Tel: 020 8901 2690</p> <p>Emergency Duty Team (24 hours) Tel: 020 8424 0999</p> <p><u>Always call 999 in an emergency</u></p>	<p>Harrow Safeguarding Children Board</p> <p>Second Floor, Civic Centre, Station Road, Harrow, Middlesex, HA1 2UL Tel: 020 8424 1147/020 8736 6939</p> <p>lscb@harrow.gov.uk</p>
<p>Allegations Manager/ Designated Officer (LADO)</p> <p>Janice Miller Tel: 020 8736 6435 Janice.miller@harrow.gov.uk</p> <p>During Covid this number has changed to 07927 548 268 until further notice. Janice works Mon, Tues, Thurs and Friday. On Wednesday email either neil.harris@harrow.gov.uk OR Shirley.dye@harrow.gov.uk LA will notify when we can revert to office number</p>	<p>DFE Due Diligence and Counter Extremism Group</p> <p>Tel: 020 7340 7264</p>
<p>Other Contacts</p> <p>Crimestoppers Tel: 0800 555 111</p> <p>Childline Tel: 0800 1111</p> <p>NSPCC Tel: 0808 800 5000</p>	

1. POLICY STATEMENT AND AIMS

At Hillview Nursery School we recognise our moral and statutory responsibility to safeguard and promote the welfare of children in accordance with Section 175 of Education Act 2002.

This Child Protection Policy sets out how we discharge our statutory responsibilities. It forms part of a suite of policies and procedures developed and operated by the school with a view to safeguarding and promoting welfare of children in the broadest meaning, namely 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.

Therefore, this policy should be read in conjunction - in particular - with the Safe Recruitment Policy, Code of Conduct/Staff Behaviour Policy, Health and Safety Policy, Children's Behaviour Policy, Special Educational Needs and Disabilities Policy, British Values Policy, Anti-Bullying Policy, Whistleblowing Policy, ICT Acceptable Usage Policy, Mobile Phone policy.

This policy aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- Staff, parents, volunteers and governors are aware about our responsibilities for safeguarding children
- Staff are properly trained in recognising and reporting safeguarding

We are committed to keep children safe regardless of age, disability, gender, racial heritage, religious belief, sexual orientation or identity through a child-centred and coordinated approach. This means that we have adopted a culture of vigilance and maintain an attitude of '**it could happen here**' while considering, at all times, what is in the best interests of a child and acknowledging a child's diverse circumstances.

We make every effort to keep children safe by creating an atmosphere of trust, where both children and adults feel secure. The **Key Person approach** means we already know our key children well and so we will notice any changes in behaviour, demeanour or personality quickly.

We understand the importance of listening to children and taking account their needs, wishes and feelings, monitoring behaviour and sharing information at nursery level, with Children's Services and the police on a need-to-know basis. We also aim to teach children how to be safe at home, in the street or when using the Internet. We will block unsuitable Internet sites and maintain a 'safe use of the Internet' agreement with children and parents.

Our policy applies to all staff; this term refers to all those working for or on behalf of the school, temporary or permanent, in either paid or voluntary capacity, including governors. Concerned parents/carers may also contact the school and its governors. Parents are asked to report any injuries that happen to their child outside the school.

We believe that safeguarding and promoting the welfare is **everyone's** responsibility. **Everyone** who comes into contact with children and their families and carers has a role to play in identifying concerns, sharing information and taking prompt action.

This policy is available publicly either via the school website or upon request.

2. STATUTORY FRAMEWORK

This policy is based on the Department for Education's statutory guidance [Keeping Children Safe in Education \(2021\)](#) and [Working Together to Safeguard Children \(2018\)](#), as well as on departmental advice [What to Do if You Are Worried a Child is Being Abused - Advice for Practitioners, Mental Health and behaviour in schools](#) and the [Governance Handbook](#). We comply with this guidance and the arrangements agreed and published by our 3 local safeguarding partners.

This policy is also based on the following legislation:

- Section 175 of the [Education Act 2002](#), which places a duty on schools and local authorities to safeguard and promote the welfare of pupils
- [The School Staffing \(England\) Regulations 2009](#), which set out what must be recorded on the single central record and the requirement for at least one person conducting an interview to be trained in safer recruitment techniques
- [The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children
- Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18
- [Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM
- [The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children
- Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what ‘regulated activity’ is in relation to children
- [Statutory guidance on the Prevent duty](#), which explains schools’ duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism
- The [Childcare \(Disqualification\) and Childcare \(Early Years Provision Free of Charge\) \(Extended Entitlement\) \(Amendment\) Regulations 2018](#) (referred to in this policy as the “2018 Childcare Disqualification Regulations”) and [Childcare Act 2006](#), which set out who is disqualified from working with children
- [Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers](#) (July 2018)

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

We require that all staff read at least Part 1 of the statutory guidance “Keeping Children Safe in Education” (DFE, September 2021) and we make sure they understand their role and responsibilities.

We are aware of our duty to “have due regard to the need to prevent people being drawn into terrorism”, under the Counter-Terrorism and Security Act, 2015.

We are also aware that there is a mandatory reporting duty with regard to known cases of female genital mutilation (FGM) under section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious crime Act).

We will follow the current procedures as set out in the Harrow Strategic Safeguarding Partnership (HSSP) - <http://www.harrowscb.co.uk>, and in compliance with the London Child Protection Procedures, <http://www.londoncp.co.uk/>.

3. EQUALITY STATEMENT

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

We give special consideration to children who:

- Have special educational needs (SEN) or disabilities
- Are young carers
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers
- Are at risk due to either their own or a family member’s mental health needs
- Are looked after or previously looked after

4. ROLES AND RESPONSIBILITIES

Safeguarding and child protection is **everyone’s** responsibility. This policy applies to all staff, volunteers and governors in the school and is consistent with the procedures of the 3 safeguarding partners. Our policy and procedures also apply to extended school and off-site activities. However, there are identified key adults in schools and in the Local Authority who have specific responsibilities under child protection procedures. The names of those in our school with these specific responsibilities are shown on the front cover sheet of this policy.

4.1 Role of the Governing Board

Governing bodies, proprietors, management committee and their senior leadership teams, especially their designated safeguarding leads, should make themselves aware of and follow the new local arrangements.

The Governing Body will ensure that:

- a. The school has a Child Protection Policy and procedures in place, and the policy is made available to parents on the school website (www.hillviewnurseryschool.co.uk). The governing board will approve this policy at each review, ensure it complies with the law and hold the Headteacher to account for its implementation.
- b. The school operates safe recruitment practices, including appropriate use of references and checks on new staff and volunteers see the school’s “Safer Recruitment” policy for further information).
- c. There are procedures for dealing with allegations of abuse against members of staff, volunteers or other adults who are in contact with children in the nursery.
- d. There is a member of the Nursery School’s senior management team who is designated to take **lead responsibility** for dealing with child protection (the Designated Safeguarding Lead), which should not be delegated.
- e. The DSL undertakes training, in addition to basic child protection, to Level III in multi-agency working that is provided by Harrow Safeguarding Children Board (<http://www.harrowscb.co.uk/>) and has refresher training annually as well as knowledge and skills updates (for example via e-bulletins, meeting other designated safeguarding leads, or taking time to read and digest safeguarding developments), at regular intervals, but at least annually, to keep up with any developments relevant to her role.
- f. All other staff working with the children undertake appropriate training (to standards agreed by HSCB) which is kept up-to-date by refresher training at a minimum of two-yearly intervals, and receive current safeguarding information, at regular intervals, but at least annually.

Temporary staff and volunteers who work with the children are made aware of the nursery’s arrangements for child protection and their responsibilities. New staff joining the nursery will receive child protection training as part of their induction programme.

g. All governors will read “Keeping Children Safe in Education” and receive Child Protection training regularly.

h. Any deficiencies or weaknesses brought to the attention of the Governing Body are addressed without delay and rectified.

i. The Chair of Governors (or, in absence of the Chair, the Vice Chair) deals with any allegations of abuse made against the Headteacher/DSL, in liaison with the Local Authority.

j. Children are taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.

k. There is a **designated Looked After Children LAC teacher** and staff have awareness of this group and their needs including contact arrangements.

l. There is an individual member of the Governing Body who ‘champions’ issues to do with safeguarding children and child protection within the school. This governor will meet termly with the Designated Safeguarding Lead.

4.2 Role of the Headteacher/Designated Safeguarding Lead (DSL)

The Designated Safeguarding Lead will ensure that:

a. The Nursery School’s policies and procedures for Safeguarding and Child Protection are fully implemented and followed by all staff. In particular, the Designated Safeguarding Lead will ensure all staff have read and understood at least Part 1 of “Keeping Children safe in Education” and relevant changes; relevant staffing ratios are met each child in the Early Years Foundation Stage is assigned a key person.

b. Sufficient resources and time are allocated to enable the DSL and other staff to discharge their responsibilities, including taking part in strategy discussions and other inter-agency meetings.

c. All staff and volunteers feel able to raise concerns about poor and unsafe practices in regard to children, and act as the ‘case manager’ in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate.

d. All staff are made aware of the DSL.

e. He/she receives refresher training at two-yearly intervals to keep his/her knowledge and skills up to date.

f. All staff who work with children undertake appropriate training to equip them to carry out their responsibilities for safeguarding children effectively which is kept up to date by refresher training every two years, and receive current safeguarding information at regular intervals, but at least annually.

g. New staff receive a Safeguarding Children induction within 7 working days of commencement of their contract.

h. Temporary staff and volunteers are made aware of the school’s arrangements for safeguarding children within 7 working days of their commencement of work.

i. The Nursery School operates within the legislative framework and recommended guidance.

j. All staff and volunteers are aware of the Harrow Multi-Agency safeguarding procedures and any other relevant local guidance.

k. Effective working relationships are developed with other agencies and services.

l. The appropriate level of response is given to specific concerns about a child e.g. discuss with parents, offer an assessment under the Universal Early Help Assessment (previously known as CAF) or refer to Children’s Services.

m. Accurate safeguarding records relating to individual children are kept separate from the academic file in a secure place, marked 'Strictly Confidential' and are passed securely, should the child transfer to a new provision.

n. The Nursery School attends Child Protection Conferences and contributes to the decision making and delivery of actions planned to safeguard the child.

o. The Nursery School effectively monitors children about whom there are safeguarding concerns, as we recognise concerns tend to grow and may be apparent before someone makes an allegation (KCSIE 2020). The Nursery school will notify Children's Service when there is an unexplained absence of more than two days for a child who is the subject of a child protection plan.

p. Guidance is provided to parents, children and staff about obtaining suitable support.

q. Parents are aware of the safeguarding procedures used and relevant policies.

r. Where an allegation is made against agency/temporary staff the Nursery School will inform the agency of the school "managing allegations" procedures.

4.3 Role of the staff

All staff at Hillview Nursery School will be aware of:

a. Our systems which support safeguarding, including this child protection and safeguarding policy, the staff code of conduct, the role and identity of the designated safeguarding lead (DSL) and the deputy, the behaviour policy, and the safeguarding response to children who go missing from education.

b. The early help process (sometimes known as the common assessment framework) and their role in it, including identifying emerging problems, liaising with the Designated Senior Lead, and sharing information with other professionals to support early identification and assessment.

c. The process for making referrals to local authority children's social care and for statutory assessments that may follow a referral, including the role they might be expected to play.

d. What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals.

e. The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), FGM and radicalisation.

f. How to support children's mental health and wellbeing during Covid-19 through nurture intervention groups.

Section 5 of this policy outlines in more detail how staff are supported to do this.

5. SCHOOL PROCEDURES

Staff, volunteers and governors must follow the procedures set out below in the event of a safeguarding issue.

5.1 If a child is suffering or likely to suffer from harm, or in immediate danger

If a child is in immediate danger or is at risk of harm, a referral should be made to Children's Services and/or the police immediately. Anybody can make a referral. If anyone other than the DSL makes the referral, they should inform the DSL as soon as possible.

<https://www.gov.uk/report-child-abuse-to-local-council>

5.2 If a child makes a disclosure

If a child discloses a safeguarding issue to you, you should:

- Listen to and believe them. Allow them time to talk freely and do not ask leading questions but open-ended: if the case comes to court, the court will need to be convinced that the evidence has not been contaminated by someone putting words/suggestions into the child's mind. Interventions need to be along the lines of: "Tell me how it happened..."/"Would you like to tell me anything more?"/"Go on..." "Well done, you're doing well"
- Stay calm and do not show that you are shocked or upset
- Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- Write up your conversation as soon as possible in the child's own words. Stick to the facts, and do not put your own judgement on it
- Sign and date the write-up and pass it on to the DSL. Alternatively, if appropriate, make a referral to children's social care and/or the police directly (see 5.1), and tell the DSL as soon as possible that you have done so.
- Acknowledge your own feelings and if you feel it necessary, seek help in dealing with your own stress and discuss this with the Designated Safeguarding Lead.

5.3 If you discover that FGM has taken place or a pupil is at risk of FGM

The Department for Education's Keeping Children Safe in Education explains that FGM comprises "all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs".

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as 'female genital cutting', 'circumcision' or 'initiation'.

Possible indicators that a pupil has already been subjected to FGM, and factors that suggest a pupil may be at risk, are set out in appendix 4.

Any teacher who discovers (either through disclosure by the victim or visual evidence) that an act of FGM appears to have been carried out on a **child** must immediately report this to the police, personally. This is a statutory duty, and teachers will face disciplinary sanctions for failing to meet it. Unless they have good reason not to, they should also discuss the case with the DSL and involve children's social care as appropriate.

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

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

Any member of staff who suspects a child is *at risk* of FGM or suspects that FGM has been carried out must speak to the DSL and follow our local safeguarding procedures.

5.4 If you have concerns about a child (as opposed to believing a child is suffering or likely to suffer from harm, or in immediate danger)

Where possible, speak to the DSL first to agree a course of action. If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken. Speak to a member of the senior leadership team and/or take advice from local authority children's social care. You can also seek advice at any time from the NSPCC helpline on 0808 800 5000.

Make a referral to local authority children's social care directly, if appropriate (see 'Referral' below). Share any action taken with the DSL as soon as possible.

Early help

Hillview nursery school strongly believe that early intervention is key when supporting children and families. Parent coffee events in order to build parent partnerships and build trust and supports child development. Parents of children with special educational needs (SEN) are introduced to representatives from Harrow Parent Forum and SENDIAS in order to access support needed. For children who need support with communication, social interactions and emotional support, intervention groups are in place within the nursery 3 days a week in order to develop skills.

If early help is appropriate, the DSL will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.

The DSL will keep the case under constant review and the school will consider a referral to local authority children's social care if the situation does not seem to be improving. Timelines of interventions will be monitored and reviewed.

Referral

If it is appropriate to refer the case to local authority children's social care or the police, the DSL will make the referral or support you to do so.

If you make a referral directly (see section 5.1), you must tell the DSL as soon as possible.

The local authority will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with the local authority if this information is not made available, and ensure outcomes are properly recorded.

If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must follow local escalation procedures to ensure their concerns have been addressed and that the child's situation improves.

5.5 If you have concerns about extremism

If a child is not suffering or likely to suffer from harm, or in immediate danger, where possible speak to the DSL - who is also the Prevent Single Point of Contact (SPOC) - to agree a course of action. If in exceptional circumstances the DSL is not available, this should not delay appropriate action being taken. Speak to a member of the senior leadership team and/or seek advice from local authority children's social care. Make a referral to local authority children's social care directly, if appropriate (see 'Referral' above).

Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include [Channel](#), the government's programme for identifying and supporting individuals at risk of being drawn into terrorism, or the local authority children's social care team.

The Department for Education also has a dedicated telephone helpline, 020 7340 7264, which school staff and governors can call to raise concerns about extremism with respect to a pupil. You can also email counter.extremism@education.gov.uk. Note that this is not for use in emergency situations.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you think someone is in immediate danger or may be planning to travel to join an extremist group or see/hear something that may be terrorist-related.

If staff members have a concern about another staff member, they should follow the procedures in the Whistleblowing Policy and speak to the Prevent Lead.

5.6 Concerns about a staff member or volunteer

If you have concerns about a member of staff or volunteer, or an allegation is made about a member of staff or volunteer posing a risk of harm to children, speak to the Headteacher. If the concerns/allegations are about the Headteacher, speak to the Chair of Governors. See full details at section 12.

The Headteacher/Chair of Governors will then follow the procedures set out in appendix 3, if appropriate.

Where appropriate, the school will inform Ofsted of the allegation and actions taken, within the necessary timescale.

Where an allegation is made against agency/temporary staff the Nursery School will inform the agency of the school “managing allegations” procedures.

5.7 Child on child abuse

Our school may be the only stable, secure and safe place in the lives of children at risk of, or who have suffered harm. However, on occasions their behaviour may be challenging and defiant, or they may instead be withdrawn, or display abusive behaviours towards other children.

Child on child abuse can manifest itself in many ways. This may include bullying (including cyber bullying), on-line abuse, gender-based abuse, ‘sexting’ or sexually harmful behaviour. We do not tolerate any harmful behaviour in school and will take swift action to intervene where this occurs. We use the curriculum and assemblies to help children understand, in an age-appropriate way, what abuse is and we encourage them to tell a trusted adult if someone is behaving in a way that makes them feel uncomfortable. Our school understands the different gender issues that can be prevalent when dealing with peer on peer abuse.

These issues need to be considered with specific reference to the developmental needs of children under 5.

5.8 Whistleblowing

Whistleblowing is defined as ‘*making a disclosure in the public interest*’ and occurs when a worker (or member of the wider school community) raises a concern about danger or illegality that affects others, for example pupils in the school or members of the public.

All staff must be aware of their duty to raise concerns about the attitude or actions of colleagues in line with the school’s Code of Conduct/Whistleblowing policy. The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. See page 2 for contact numbers.

5.9 Private Fostering

Children in foster care fall into two main groups; those looked after by the local authority or independent fostering agencies, and those fostered privately.

Private fostering is different from local authority fostering where carers are approved as foster carers. Private fostering occurs when a child or young person under 16 (under 18 years if disabled), is cared for, and provided with accommodation for 28 days or more, by an adult who is not a relative, by private arrangement between the parent and carer.

The Children Act 1989 defines ‘relative’ in relation to a child as a grandparent, brother, sister, uncle or aunt. They could be a full or half relation, and could be related by marriage. The term also

includes a step-parent. A cohabitee of the mother or father would not qualify as a relative; neither would extended family such as a great aunt/uncle or parent's cousin.

Common examples of private fostering arrangements:

- Children and young people who are sent to this country for education or health care by their birth parents from overseas
- Children or young people whose parents work or study long and/or antisocial hours
- Children or young people who are living with a friend's family as a result of parental separation, divorce or difficulties at home
- A teenager living with the family of a boyfriend or girlfriend

Legal requirements that professionals must do:

Private foster carers are legally required to notify their local authority but many do not, usually because they do not know that they have to. This means that Children's Services are unable to check whether the child is being properly cared for.

Ideally, notification should come from the parent or carer, however, education, health, and other social care professionals can also play an important role, as they are often the people who become aware of private fostering situations.

If Hillview Nursery School are made aware of private fostering we must notify the local authority.

5.10 Young Carers

If Hillview Nursery School are made aware that a child is a young carer of a parent or sibling, or one of their siblings is a young carer, then as part of our wider community commitment, we would signpost the family to Harrow Carers who provide support, advice and training. They can be contacted on 020 8868 5224.

If a child is 17 or under and looks after someone with a physical or mental health problem, they are usually classed as a young carer. There is a whole community of young people facing the same day-to-day issues and Harrow Carers are there to support the carer and family if they live in Harrow.

6. WHEN TO BE CONCERNED

Hillview Nursery School understands that child abuse involves all ways in which a child's development and health are damaged by the actions or inactions of others. Usually, this means by the actions of adults, but sometimes it may be the actions of other children.

All staff are made aware of how to identify and respond to the four main categories of child abuse - physical abuse, emotional abuse, sexual abuse and neglect – and to specific safeguarding issues (Child Sexual Exploitation, Honour Based Violence and FGM, Radicalisation and Terrorism, Children Missing from Education).

We recognise that often the different categories of abuse overlap and many children suffer the effects of a range of destructive behaviours. In such cases, we understand that it is important to note clusters of signs as these may assume more significance than one indicator in isolation. (Refer to Appendix 1).

We are also aware that some children may have an increased risk of abuse because of prejudice and discrimination, isolation, social exclusion, communication issues and/or reluctance on the part of some adults to accept that abuse can occur.

We recognise that children with SEN and disabilities can be disproportionately impacted by behaviours such as bullying without outwardly showing any signs. We acknowledge that additional barriers can exist when recognising abuse and neglect in this group of children.

Therefore, we expect staff to take extra care to be alert for any apparent signs of abuse or neglect and not to assume that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration

The key question which we always ask ourselves when deciding whether or not a child is a victim of abuse is "Is the child suffering or likely to suffer significant harm?"

7. CONFIDENTIALITY

Confidentiality is an issue that needs to be discussed and fully understood by all those working with children, particularly in the context of child protection. A member of staff must never guarantee confidentiality to anyone about a safeguarding concern (including parents/carers or pupils) or promise to keep a secret. In accordance with statutory requirements, where there is a child protection concern, this must be reported to the DSL or deputy and may require further referral and subsequent investigation by appropriate authorities.

Information on individual child protection cases may be shared by the DSL or deputy with other relevant staff members. This will be on a 'need to know' basis only and where it is in the child's best interests to do so.

All staff must be aware that they have a responsibility to share relevant information about the protection of children with other agencies. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision. DFE's advice "Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers" supports staff who have to make decisions about sharing information. If staff are in any doubt about sharing information, they should speak to the DSL, or deputy.

8. RECORDS AND INFORMATION SHARING

Where there are concerns about the safety of a child, the sharing of information in a timely and effective manner between organisations can reduce the risk of harm. Whilst practitioners must have due regard for the Data Protection Act 2018 and the General Data Protection Regulations (GDPR) it is not a barrier to sharing information. Our school is confident of the processing conditions that allow us to store and share information for safeguarding purposes. This allows us to share information without consent, if it is not possible to gain consent or if to gain consent would place a child at risk.

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

Any member of staff receiving a disclosure of abuse or noticing signs or indicators of abuse, will record it as soon as possible, noting what was said or seen, if appropriate, using a body map to record, with the date, time and location. All records will be dated and signed, with the name printed and will include the action taken. This is then presented to DSL or deputy, who will decide on the appropriate action and record it accordingly.

Any records related to child protection are kept in an individual child protection file for that child, separate to the pupil file. All child protection records are stored securely and confidentially and will be retained for 25 years after the pupil's date of birth, or until they transfer to another school or educational setting.

Where a pupil transfers from our school to another school or educational setting including colleges, their child protection records will be forwarded to the new educational setting. These will be marked

'Confidential' and for the attention of the receiving school's DSL with a return address on the envelope so it can be returned to us if it goes astray. We will obtain evidence that the paperwork has been received by the new school and then destroy any copies held in our school.

Where a pupil joins our school, we will request all child protection records from the previous educational establishment if none are received.

9. INTERAGENCY WORK

Schools often hold crucial information and as such our school is an essential partner in strategy discussions, child protection conferences and core groups. Our school will be pro-active and prioritise inter-agency working to contribute to safeguarding children. It is the responsibility of the DSL to ensure that the school is represented at and a report is submitted to any child protection conference for children on the school roll or previously known to them. Where possible and appropriate, any report will be shared in advance with the parents/carers. Whoever represents the school will be fully briefed on any issues or concerns the school has and will be prepared to contribute to the discussions at the meetings.

If a child is subject to a child protection or a child in need plan, the DSL will ensure the child is monitored regarding their school attendance, emotional well-being, academic progress, welfare and presentation. The DSL will ensure the school prioritises attendance at core group meetings and provide appropriate information to contribute to the plan at these meetings. Any concerns about the child protection plan and/or the child's welfare will be discussed and recorded at the child protection conference meeting, unless to do so would place the child at further risk of significant harm. In this case the DSL will inform the child's key worker immediately and then record that they have done so and the actions agreed.

When we become aware that a child or young person who is being, or is going to be, privately fostered our school has a duty under Section 10 of the Children Act 2004 to inform the Local Authority to ensure the appropriate safeguards are in place. The DSL will make appropriate referrals using the Newham Referral pathways.

10. COMMUNICATIONS WITH PARENTS AND CARERS

Where appropriate, we will discuss any concerns about a child with the child's parents. The DSL will normally do this in the event of a suspicion or disclosure.

Other staff will only talk to parents about any such concerns following consultation with the DSL.

If we believe that notifying the parents would increase the risk to the child, we will discuss this with the local authority children's social care team before doing so.

In the case of allegations of abuse made against other children, we will normally notify the parents of all the children involved.

11. SAFER RECRUITMENT

We ensure safer recruitment practices are always followed. DBS checks and checks of identity, background, qualifications, references, medical fitness, overseas checks and permission to work in UK will be made. We ensure that every recruitment panel has at least one member on it who has completed the safer recruitment course and has an up-to-date certificate to that effect.

12. ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS

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

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

This applies to any child with whom the member of staff/volunteer has contact, within their personal, professional or community life.

To reduce the risk of allegations, all staff must be aware of safer working practice and must be familiar with the guidance contained in the school code of conduct or Government document “Guidance for safer working practice for those working with children and young people in education settings’ (Consortium, October 2015). If the concerns are about the Headteacher, then the Chair of Governors, Gemma Williams should be contacted (gewillia@googlemail.com)

In the absence of the Chair of Governors, the Vice Chair should be contacted. The Vice Chair is Claudia Calogero (callas65@gmail.com)

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

The Headteacher will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Designated Officer (previously LADO).

If the allegation meets any of the three criteria set out at the start of this section, contact should always be made with the Designated Officer (previously LADO) without delay.

If it is decided that the allegation meets the threshold for safeguarding, this will take place in accordance with the Harrow Safeguarding Children Board Multi-Agency procedures.

If it is decided that the allegation does not meet the threshold for safeguarding, it will be handed back to the employer for consideration via the school’s internal procedures.

The Headteacher should, as soon as possible, following briefing from the Designated Officer (previously LADO), inform the subject of the allegation.

RECOGNISING THE SIGNS

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet).

They may be abused by an adult or adults or by another child or children.

One or more of the following signs do not necessarily indicate that a child has been abused, but they may alert you to the fact that something is wrong.

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.

The UN Convention on the 'Rights of the Child' 1991 states:

"Children have the right to be protected from all forms of violence. They must be given proper care by those looking after them"

and

"Children have a right not to be punished cruelly or in a way that would belittle them."

SIGNS AND SYMPTOMS

- Unexplained recurrent injuries or burns
- Improbable excuses or refusal to explain injuries
- Wearing clothes to cover injuries, even in hot weather
- Refusal to undress for gym
- Bald patches
- Chronic running away
- Fear of medical help or examination
- Self-destructive tendencies
- Aggression towards others
- Fear of physical contact – shrinking back if touched
- Admitting they are punished, but the punishment is excessive (such as child being beaten every night to 'make him study')
- Fear of suspected abuser being contacted
- Speaking in monosyllables
- Becomes withdrawn
- Afraid to go home

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.

There is an element of emotional abuse in all forms of abuse, but some children may be emotionally abused whilst their physical care may be good.

Key elements of active emotional abuse are:

Criticism – ridicule – withdrawal – rejection – hostility – threat – exploitation

SIGNS AND SYMPTOMS

- Physical, mental and emotional developmental lags
- Sudden speech disorders
- Continual self-deprecation (I'm stupid, 'ugly', 'worthless', etc.)
- Over-reaction to mistakes
- Extreme fear of any new situation
- Inappropriate response to pain ('I deserve this')
- Neurotic behaviour (rocking, hair twisting, self-mutilation)
- Extremes of passivity or aggression
- Threatened or attempted suicide
- Over adaptive behaviour: e.g. too well-mannered
- Compulsively clean or neat
- Learning difficulties
- Low self esteem
- Poor peer relationships

3. 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.

Sexual abuse is the abuse of power in the relationship and the child's inability to give informed consent.

All sexual abuse is damaging but the trauma may be more severe if the abuse is perpetrated by someone close to the child, if violence is involved, if the abuse begins at an early age and is repeated over time and if the child is not supported by the non-abusive parent/carer.

Sexual abuse includes:

- Sexist remarks/suggestions
- Being taught indecent language
- Exposure to indecent material
- Indecent exposure
- Observing sexual activities
- Being forced to touch adults
- Indecent assault
- Digital penetration
- Group sexual activities
- Oral/anal/vaginal intercourse

SIGNS AND SYMPTOMS

- Being overly affectionate or knowledgeable in a sexual way inappropriate to the child's age
- Medical problems such as chronic itching or sexually transmitted diseases
- Other extreme reactions such as depression, self-mutilation, suicide attempts, running away, overdoses, anorexia
- Personality changes such as becoming insecure or clinging
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Sudden loss of appetite or compulsive eating
- Being isolated or withdrawn
- Inability to concentrate

- Lack of trust or fear of someone they know well, such as not wanting to be alone with a babysitter or child-minder
- Starting to wet again; day or night/nightmares
- Become worried about clothing being removed
- Suddenly drawing sexually explicit pictures
- Trying to be 'ultra good' or perfect; over-reacting to criticism
- Hints about secrets they cannot tell
- Withdrawal from peers
- Deterioration in performance at school
- Suicidal thoughts/attempts
- Anger/aggression

4. NEGLECT

Neglect is the persistent failure to meet a child's basic physical, and/or psychological and/or emotional needs, likely to result in the serious impairment of the child's health or development.

SIGNS AND SYMPTOMS

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Untreated medical conditions
- No social relationships
- Compulsive scavenging
- Destructive tendencies
- Pale, listless
- Frequent absence from school
- Arriving very early, leaving late
- Truancy
- Dental problems, squinting at the board
- Carrying parental responsibilities (caring for siblings)

5. CHILD SEXUAL EXPLOITATION (CSE)

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

SIGNS AND SYMPTOMS

There are a number of warning signs that can indicate a child may be groomed for sexual exploitation and behaviours that a child is being sexually exploited. Using the mnemonic "S.A.F.E.G.U.A.R.D" can help consider relevant signs and behaviours:

- Sexual health and behaviour

- Absent from school or repeatedly running away
- Familial abuse and/or problems at home
- Emotional and physical condition
- Gangs, older age groups and involvement in crime
- Use of technology and sexual bullying
- Alcohol and drug misuse
- Receipt of unexplained gifts or money
- Distrust of authority figures

6. HONOUR BASED VIOLENCE

So-called 'honour-based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing.

All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the Designated Safeguarding Lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV

FEMALE GENITAL MUTILATION (FGM) *comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences.*

Victims of FGM are likely to come from a community that is known to practice FGM. Girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

SIGNS AND SYMPTOMS THAT FGM HAS ALREADY TAKEN PLACE

There are a number of indications that a girl or woman has already been subjected to FGM:

- A girl or woman may have difficulty walking, sitting or standing and may even look uncomfortable.
- A girl or woman may spend longer than normal in the bathroom or toilet due to difficulties urinating. A girl may spend long periods of time away from a classroom during the day with bladder or menstrual problems.
- A girl or woman may have frequent urinary, menstrual or stomach problems.
- There may be prolonged or repeated absences from school.
- A prolonged absence from Nursery School or college with noticeable behaviour changes (e.g. withdrawal or depression) on the girl's return could be an indication that a girl has recently undergone FGM.
- A girl or woman may be particularly reluctant to undergo normal medical examinations.
- A girl or woman may confide in a professional.
- A girl or woman may ask for help, but may not be explicit about the problem due to embarrassment or fear.
- A girl may talk about pain or discomfort between her legs.

SIGNS AND SYMPTOMS THAT FGM IS IMMINENT

- It may be possible that families will practice FGM in the UK when a female family elder is around, particularly when she is visiting from a country of origin.
- Staff may hear reference to FGM in conversation, for example a girl may tell other children about it
- A girl may confide that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'.

- A girl may request help from a teacher or another adult if she is aware or suspects that she is at immediate risk.
- Parents state that they or a relative will take the child out of the country for a prolonged period.
- A girl may talk about a long holiday to her country of origin or another country where the practice is prevalent.
- Parents seeking to withdraw their children from learning about FGM.

7. PREVENT OF RADICALISATION

Radicalisation is the process by which a person comes to support terrorism and forms of extremism which lead to terrorism. Extremism is an active or vocal opposition to fundamental British values including but not confined to:

- *Democracy*
- *The rule of law*
- *Individual liberty*
- *Mutual respect and tolerance of those with different faiths and beliefs.*

It is important to be aware that, whilst there is a lot of media coverage regarding Islamic extremism, there are other organisations, including extreme right-wing groups, who can damage society and present a threat to the community. Schools should at all times ensure that their approach to the threat of radicalisation is balanced, calm and proportionate.

The vast majority of children, of whatever background, will not get involved in extremist action and in many cases suspicious behaviour may be a result of other problems e.g. mental health issues, relationship, drug or alcohol problems.

The general risks affecting children and young people may vary from area to area and according to their age. We are aware that there is an increased risk of radicalisation online.

There is no single way to identify an individual who is likely to be susceptible to a terrorist ideology. We need to be alert to changes in children's behaviour, which could indicate that they may be in need of help or protection.

It should also be remembered that outside events, such as tensions in the local community, events in the country of origin, in the case of migrants, or major world events could also disproportionately affect the feelings and actions of young people. All staff should be alert to these events and be ready to help young people understand them, and put them into context.

SIGNS:

- Disclosures of children's exposure to the extremist actions, views or materials of others outside of school, such as in their homes or community groups, especially where pupils have not actively sought these
- Voicing opinions drawn from extremist ideologies and narratives
- Parental reports of changes in behaviour, friendship or actions and requests for assistance
- Glorifying violence, especially to other faiths or cultures
- Out of character changes in dress, behaviour and peer relationships
- Secretive behaviour
- Intolerance of difference, including faith, culture, gender, race or sexuality
- Graffiti artwork or writing that displays extremist themes
- Attempts to impose extremist views or practices on others
- Verbalising anti-Western or anti-British views
- Advocating violence towards others

8. CHILDREN MISSING FROM EDUCATION (CME)

A child going missing from education, particularly repeatedly, can be a warning sign of a range of safeguarding issues. This might include abuse or neglect, such as sexual abuse or exploitation or child criminal exploitation, or issues such as mental health problems, substance abuse, radicalisation, FGM or forced marriage.

There are many circumstances where a child may become missing from education, but some children are particularly at risk. These include children who:

We will follow our procedures for unauthorised absence and for dealing with children who 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. This includes informing the local authority if a child leaves the school without a new school being named, and adhering to requirements with respect to sharing information with the local authority, when applicable, when removing a child's name from the admission register at non-standard transition points.

Staff will be trained in signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns which may be related to being missing, such as travelling to conflict zones, FGM and forced marriage.

If a staff member suspects that a child is suffering from harm or neglect, we will follow local child protection procedures, including with respect to making reasonable enquiries. We will make an immediate referral to the local authority children's social care team, and the police, if the child is suffering or likely to suffer from harm, or in immediate danger.