

SHERRARDSWOOD SCHOOL

CHILD PROTECTION POLICY

(This policy and procedures apply to all pupils at the school, including EYFS and is in accordance with locally agreed inter-agency procedures)

INTRODUCTION

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the provision of safe and effective care and optimising children's life chances.

This Child Protection Policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the school.

In particular this policy should be read in conjunction with the Safer Recruitment Policy, Behaviour Policy, Physical Intervention Policy and Anti-Bullying Policy.

Purpose of a Child Protection Policy

To inform staff, parents, volunteers and governors about the school's responsibilities for safeguarding children. To enable everyone to have a clear understanding of how these responsibilities should be carried out.

Hertfordshire Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures

The school follows the procedures established by the Hertfordshire Safeguarding Children Board; a guide to procedure and practice for all agencies in Hertfordshire working with children and their families.

School Staff & Volunteers

School staff and volunteers are particularly well placed to observe outward signs of abuse, changes in behaviour and failure to develop because they have daily contact with children.

All school staff and volunteers will receive safeguarding children training, so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse or neglect and of the appropriate procedures to follow. This training is refreshed every three years.

Mission Statement

Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to when they have a worry or concern.

Establish and maintain an environment where school staff and volunteers feel safe, are encouraged to talk and are listened to when they have concerns about the safety and well being of a child.

Ensure children know that there are adults in the school whom they can approach if they are worried.

Ensure that children who have been abused will be supported in line with a child protection plan, where deemed necessary.

Include opportunities in the PSHE curriculum for children to develop the skills they need to recognise and stay safe from abuse.

Contribute to the five Every Child Matters Outcomes: -

- Be healthy
- Stay safe
- Enjoy and achieving
- Make a positive contribution
- Achieve economic well-being

STATUTORY FRAMEWORK

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

- The Children Act 1989
- The Children Act 2004
- Education Act 2002 (section 175)
- HSCB Inter-agency Child Protection and Safeguarding Children Procedures (2010)
- Safeguarding Children and Safer Recruitment in Education (DfES 2006)
- Working Together to Safeguard Children (HM Government 2010)

Working Together to Safeguard Children (HM Government 2010) requires all schools to follow the procedures for protecting children from abuse which are established by the Hertfordshire Safeguarding Children Board.

Schools are also expected to ensure that they have appropriate procedures in place for responding to situations in which they believe that a child has been abused or are at risk of abuse - these procedures should also cover circumstances in which a member of staff is accused of, or suspected of, abuse.

Safeguarding Children and Safer Recruitment in Education (DfES 2006) places the following responsibilities on all schools:

- Schools should be aware of and follow the procedures established by the Hertfordshire Safeguarding Children Board
- Staff should be alert to signs of abuse and know to whom they should report any concerns or suspicions
- Schools should have procedures (of which all staff are aware) for handling suspected cases of abuse of pupils, including procedures to be followed if a member of staff is accused of abuse, or suspected of abuse
- A Designated Senior Person should have responsibility for co-ordinating action within the school and liaising with other agencies
- Staff with designated responsibility for child protection should receive appropriate training

Safeguarding Children and Safer Recruitment in Education (DfES 2006) also states:

“All parents need to understand that schools and FE colleges have a duty to safeguard and promote the welfare of children who are their pupils or students, that this responsibility necessitates a child protection policy and procedures, and that a school or FE college may need to share information and work in partnership with other agencies when there are concerns about a child’s welfare.”

The Governors/management and staff of Sherrardswood School fully recognise the contribution the Policy makes to safeguarding children. We recognise that all staff, including volunteers, have a full and active part to play in protecting our children from harm.

All staff and Governors/management believe that we should provide a caring, positive safe and stimulating environment which promotes the social, physical and moral development of the individual child.

The aims of this policy are:

- to support the child’s development in ways that will foster security, confidence and independence;
- to raise the awareness of all staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse;
- to provide a systematic means of monitoring children known or thought to be at risk of harm;
- to emphasise the need for good levels of communication between all members of staff and staff of appropriate agencies;

- to operate a structured procedure which will be followed by all members of staff in cases of suspected abuse;
- to develop and promote effective working relationships with other agencies, especially the Police and Social Services;
- to ensure that all adults within our school who have access to children have been checked as to their suitability;

PROCEDURES

We will ensure that:

- we have a designated member of staff (the Headmistress) who undertakes regular Child Protection training including working with other agencies every two years;
- we have a named Governor (Gena Edwards) responsible for child protection;
- all members of staff will undertake regular Child Protection training (every three years);
- all members of staff develop their understanding of the signs and indicators of abuse;
- all members of staff know how to respond to a child who discloses abuse;
- all staff appointments follow our Safer Recruitment Policy and all staff employed by Sherrardswood School, any Governors, supply staff and contract catering staff will be vetted and have enhanced CRB checks.
- all parents/carers are made aware of the responsibilities of staff members with regard to child protection procedure;

RESPONSIBILITIES:

THE DESIGNATED SENIOR PERSON/S

The Designated Senior Person for Child Protection in this school is:

NAME: MRS LYNDA CORRY (HEADMISTRESS)

The Deputy Designated Senior Person for Child Protection, with Early Years child protection training and with lead responsibility for safeguarding children within the Early Years setting and liaising with local statutory children's agencies, as appropriate is:

NAME: MRS CHARLOTTE NOLAN (SENCo LOCKLEYS)

It is the role of the Designated Senior Person for Child Protection to:

- Ensure that he/she receives refresher training at two yearly intervals

to keep his or her knowledge and skills up to date

- Ensure that all staff who work with children undertake appropriate training to equip them to carry out their responsibilities for safeguarding children effectively and that this is kept up to date by refresher training at three yearly intervals
- Ensure that new staff receive a safeguarding children induction within 7 working days of commencement of their contract
- Ensure that temporary staff and volunteers are made aware of the school's arrangements for safeguarding children within 7 working days of their commencement of work.
- Ensure that the school operates within the legislative framework and recommended guidance
- Ensure that all staff and volunteers are aware of the HSCB Inter-agency Child Protection and Safeguarding Children Procedures
- Ensure that the Head Teacher is kept fully informed of any concerns
- Develop effective working relationships with other agencies and services
- Decide upon the appropriate level of response to specific concerns about a child e.g. discuss with parents, offer an assessment under the Common Assessment Framework (CAF) or refer to Children, Schools and Families social care.
- Liaise and work with Hertfordshire CSF social care, safeguarding and child protection teams over suspected cases of child abuse.
- Ensure that 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
- Submit reports to, ensure the school's attendance at child protection conferences and contribute to decision making and delivery of actions planned to safeguard the child
- Ensure that the school effectively monitors children about whom there are concerns, including notifying Hertfordshire CSF social care when there is an unexplained absence of more than two days for a child who is the subject of a child protection plan
- Provide guidance to parents, children and staff about obtaining suitable support

THE GOVERNING BODY

The Governing Body has overall responsibility for ensuring that there are sufficient measures in place to safeguard the children in their establishment. It is recommended that a nominated governor for child protection is appointed to take lead responsibility.

The nominated governor for child protection is:

NAME: Mrs Gena Edwards
Chair of the Education and Personnel Committee

In particular the Governing Body must ensure:

- Child protection policy and procedures
- Safe recruitment procedures
- Appointment of a DSP who is a senior member of school leadership team
- Relevant safeguarding children training for school staff/volunteers is attended
- Safe management of allegations in line with Hertfordshire Safeguarding procedures and by working in close partnership with them
- Deficiencies or weaknesses in safeguarding arrangements are remedied without delay
- A member of the Governing Body (usually the Chair) is nominated to be responsible in the event of an allegation of abuse being made against the Head Teacher
- Safeguarding policies and procedures are reviewed annually and information provided to the local authority about them and about how the above duties have been discharged

SUPPORTING CHILDREN

We recognise that a child who is abused or witnesses violence may find it difficult to develop and maintain a sense of self worth. We recognise that a child in these circumstances may feel helpless and humiliated. We recognise that a child may feel self blame.

- We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.

- We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.
- We will support all children by:
 - encouraging self-esteem and self-assertiveness whilst not condoning aggression or bullying;
 - promoting a caring, safe and positive environment within the school;
 - liaising and working together with all other local support services and those local agencies involved in the safeguarding of children (CSF at County Hall Hertford);
 - notifying the above as soon as there is a significant concern;
 - providing continuing support to a child about whom there have been concerns who leaves Sherrardswood School by ensuring that appropriate information is forwarded under confidential cover to the child's new school;

CONFIDENTIALITY

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in schools. Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

- We recognise that all matters relating to Child Protection are confidential. The Headmistress or designated member of staff will disclose any information about a child to other members of staff on a 'need to know' basis only.
- All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- All staff must be aware that they cannot promise a child to keep secrets. If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality – instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe.

SCHOOL PROCEDURES - STAFF RESPONSIBILITIES

If any member of staff is concerned about a child he or she must inform the Designated Senior Person.

The member of staff must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations. (Pro-forma is available in Teachers' Only area of the Intranet)).

The Designated Senior Person will decide whether the concerns should be referred to CSF social care, safeguarding and child protection teams. If it is decided to make a referral to CSF social care this will be done with prior discussion with the parents, unless to do so would place the child at further risk of harm.

Particular attention will be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a child protection plan and a written record will be kept.

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

WHEN TO BE CONCERNED

All staff and volunteers should be aware that the main categories of abuse are:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

All staff and volunteers should be concerned about a child if he/she presents with indicators of possible significant harm – **see Appendix 1 for details.**

Generally, in an abusive relationship the child may:

- Appear frightened of the parent/s or other household members e.g. siblings or others outside of the home
- Act in a way that is inappropriate to her/his age and development (full account needs to be taken of different patterns of development and different ethnic groups)
- Display insufficient sense of 'boundaries', lack stranger awareness

- Appear wary of adults and display 'frozen watchfulness'

DEALING WITH A DISCLOSURE

If a child discloses that he or she has been abused in some way, the member of staff / volunteer should:

- Listen to what is being said without displaying shock or disbelief
- Accept what is being said
- Allow the child to talk freely
- Reassure the child, but not make promises which it might not be possible to keep
- Not promise confidentiality – it might be necessary to refer to Children Schools and Families
- Reassure him or her that what has happened is not his or her fault
- Stress that it was the right thing to tell
- Listen, only asking questions when necessary to clarify
- Not criticise the alleged perpetrator
- Explain what has to be done next and who has to be told
- Make a written record (see Record Keeping)
- Pass the information to the Designated Senior Person without delay

COMMUNICATION WITH PARENTS

Sherrardswood School will:

- Undertake appropriate discussion with parents prior to involvement of another agency unless to do so would place the child at further risk of harm.
- Ensure that parents have an understanding of the responsibilities placed on the school and staff for safeguarding children.

10. RECORD KEEPING

When a child has made a disclosure, the member of staff/volunteer should:

- Make brief notes as soon as possible after the conversation. Use the school record of concern sheet wherever possible. (pro-forma available on the Hertfordshire Grid for Learning)
- Not destroy the original notes in case they are needed by a court
- Record the date, time, place and any noticeable non-verbal behaviour and the words used by the child
- Draw a diagram to indicate the position of any injuries
- Record statements and observations rather than interpretations or assumptions

All records need to be given to the Designated Senior Person promptly. No copies should be retained by the member of staff or volunteer. The Designated Senior Person will make contact with the CSF safeguarding and child protection team.

SUPPORTING STAFF

- We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting.
- We will support such staff by providing an opportunity for them to talk through their anxieties with the designated member of staff and to seek further support as appropriate and, where necessary, at the school's expense.

ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS

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

- Behaved in a way that has, or may have harmed a child
- Possibly committed a criminal offence against/related to a child
- Behaved toward a child in a way which indicates s/he is unsuitable to work with children

This applies to any child the member of staff/volunteer has contact with in the personal, professional or community life. See Appendix 2 for procedures.

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

Actions to be taken include making a written record of the allegation using the informant's words - including time, date and place where the alleged incident took place, what was said and anyone else present. This record should be signed and dated and immediately passed on to the Headmistress.

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 Headmistress will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to Hertfordshire CSF social care in consultation with the Local Authority Designated Officer (07920 283106/07795 288271/01992 556986).

If it is decided that the allegation meets the threshold for further action through the HSCB Inter-agency Child Protection and Safeguarding Children Procedures, the Headmistress must immediately make a referral to CSF social care on 0300 123 4043.

If it is decided that the allegation does not meet the threshold for referral to CSF social care, the Head Teacher and Local Authority Designated Officer will consider the appropriate course of action, e.g. joint evaluation meeting, internal investigation.

Ofsted will be informed (via the ISI office) as soon as is practicable but within 14 days, following any allegations of serious harm or abuse by any person living, working or looking after children on the school premises, whether that allegation relates to harm or abuse committed on the premises or elsewhere.

The Headmistress should, as soon as possible, **following briefing** from the Local Authority Designated Officer inform the subject of the allegation.

For further information see:

HSCB Inter-agency Child Protection and Safeguarding Children Procedures (2010)

Section 4.1.1 [Managing Allegations Against Adults who work with Children and Young People](#)

If the concerns are about the Headmistress, then the Chair of Governors should be contacted. The Chair of Governors in this school is:

NAME:

CONTACT NUMBER:

Currently in the process of appointment

In the absence of the Chair of Governors, the Vice Chair should be contacted. The Vice Chair in this school is:

NAME:

Mr Adrian Bagg

CONTACT NUMBER:

See Bursar immediately

RAISING CONCERNS

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.

All staff should be aware of their duty to raise concerns, where they exist, about the attitude or actions of colleagues.

PHYSICAL INTERVENTION

Staff must only use physical intervention as a last resort, and at all times such intervention will exercise the minimal force necessary to prevent injury to another person.

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

BULLYING

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

RACIST INCIDENTS

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

PREVENTION

We recognise that Sherrardswood School plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults and supportive friends within our ethos of protection.

The whole school community will therefore:

- establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to;
- ensure that all children know there is an adult in the school whom they can approach if they are worried or in difficulty;
- include in the curriculum opportunities for personal and social development, which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help;

HEALTH AND SAFETY

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

APPENDIX 1 - INDICATORS OF HARM

PHYSICAL ABUSE

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Indicators in the child

Bruising

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non accidental unless there is evidence or an adequate explanation provided:

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

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It

is unlikely that a child will have had a fracture without the carers being aware of the child's distress.

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

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement

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

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

Mouth Injuries

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

Poisoning

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

Fabricated or Induced Illness

Professionals may be concerned at the possibility of a child suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:

- Discrepancies between reported and observed medical conditions, such as the incidence of fits
- Attendance at various hospitals, in different geographical areas
- Development of feeding / eating disorders, as a result of unpleasant feeding interactions

- The child developing abnormal attitudes to their own health
- Non organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
- Speech, language or motor developmental delays
- Dislike of close physical contact
- Attachment disorders
- Low self esteem
- Poor quality or no relationships with peers because social interactions are restricted
- Poor attendance at school and under-achievement

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

A medical/dental opinion, preferably within the first 24 hours, should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

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

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

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

The following points are also worth remembering:

- A responsible adult checks the temperature of the bath before the child gets in.
- A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.

- A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks

Scars

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

Emotional/behavioural presentation

Refusal to discuss injuries

Admission of punishment which appears excessive

Fear of parents being contacted and fear of returning home

Withdrawal from physical contact

Arms and legs kept covered in hot weather

Fear of medical help

Aggression towards others

Frequently absent from school

An explanation which is inconsistent with an injury

Several different explanations provided for an injury

Indicators in the parent

May have injuries themselves that suggest domestic violence

Not seeking medical help/unexplained delay in seeking treatment

Reluctant to give information or mention previous injuries

Absent without good reason when their child is presented for treatment

Disinterested or undisturbed by accident or injury

Aggressive towards child or others

Unauthorised attempts to administer medication

Tries to draw the child into their own illness.

Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault

Parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids

Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care.

May appear unusually concerned about the results of investigations which

may indicate physical illness in the child

Wider parenting difficulties, may (or may not) be associated with this form of abuse.

Parent/carer has convictions for violent crimes.

Indicators in the family/environment

Marginalised or isolated by the community

History of mental health, alcohol or drug misuse or domestic violence

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Indicators in the child

Developmental delay

Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment

Aggressive behaviour towards others

Child scapegoated within the family

Frozen watchfulness, particularly in pre-school children

Low self esteem and lack of confidence

Withdrawn or seen as a 'loner' - difficulty relating to others

Over-reaction to mistakes

Fear of new situations

Inappropriate emotional responses to painful situations

Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)

Self harm

Fear of parents being contacted

Extremes of passivity or aggression

Drug/solvent abuse

Chronic running away

Compulsive stealing

Low self-esteem

Air of detachment – 'don't care' attitude

Social isolation – does not join in and has few friends

Depression, withdrawal

Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention

Low self esteem, lack of confidence, fearful, distressed, anxious

Poor peer relationships including withdrawn or isolated behaviour

Indicators in the parent

Domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse.

Abnormal attachment to child e.g. overly anxious or disinterest in the child

Scapegoats one child in the family

Imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection.

Wider parenting difficulties, may (or may not) be associated with this form of abuse.

Indicators of in the family/environment

Lack of support from family or social network.

Marginalised or isolated by the community.

History of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

NEGLECT

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

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

Once a child is born, neglect may involve a parent or carer failing to:

- **provide adequate food, clothing and shelter (including exclusion from home or abandonment);**
- **protect a child from physical and emotional harm or danger;**
- **ensure adequate supervision (including the use of inadequate care-givers); or**
- **ensure access to appropriate medical care or treatment.**

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

Indicators in the child

Physical presentation

Failure to thrive or, in older children, short stature

Underweight

Frequent hunger

Dirty, unkempt condition

Inadequately clothed, clothing in a poor state of repair

Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold

Swollen limbs with sores that are slow to heal, usually associated with cold injury

Abnormal voracious appetite

Dry, sparse hair

Recurrent / untreated infections or skin conditions e.g. severe nappy rash, eczema or persistent head lice / scabies/ diarrhoea

Unmanaged / untreated health / medical conditions including poor dental health

Frequent accidents or injuries

Development

General delay, especially speech and language delay

Inadequate social skills and poor socialization

Emotional/behavioural presentation

Attachment disorders

Absence of normal social responsiveness

Indiscriminate behaviour in relationships with adults

Emotionally needy

Compulsive stealing

Constant tiredness

Frequently absent or late at school

Poor self esteem

Destructive tendencies

Thrives away from home environment

Aggressive and impulsive behaviour

Disturbed peer relationships

Self harming behaviour

Indicators in the parent

Dirty, unkempt presentation

Inadequately clothed

Inadequate social skills and poor socialisation

Abnormal attachment to the child .e.g. anxious

Low self esteem and lack of confidence

Failure to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene

Failure to meet the child's health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy

Child left with adults who are intoxicated or violent

Child abandoned or left alone for excessive periods

Wider parenting difficulties, may (or may not) be associated with this form of abuse

Indicators in the family/environment

History of neglect in the family

Family marginalised or isolated by the community.

Family has history of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Family has a past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals

Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating

Lack of opportunities for child to play and learn

SEXUAL ABUSE

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

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

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Indicators in the child

Physical presentation

Urinary infections, bleeding or soreness in the genital or anal areas

Recurrent pain on passing urine or faeces

Blood on underclothes

Sexually transmitted infections

Vaginal soreness or bleeding

Pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father

Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Emotional/behavioural presentation

Makes a disclosure.

Demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit

Inexplicable changes in behaviour, such as becoming aggressive or

withdrawn

Self-harm - eating disorders, self mutilation and suicide attempts

Poor self-image, self-harm, self-hatred

Reluctant to undress for PE

Running away from home

Poor attention / concentration (world of their own)

Sudden changes in school work habits, become truant

Withdrawal, isolation or excessive worrying

Inappropriate sexualised conduct

Sexually exploited or indiscriminate choice of sexual partners

Wetting or other regressive behaviours e.g. thumb sucking

Draws sexually explicit pictures

Depression

Indicators in the parents

Comments made by the parent/carer about the child.

Lack of sexual boundaries

Wider parenting difficulties or vulnerabilities, may (or may not) be associated with this form of abuse

Grooming behaviour

Parent is a sex offender

Indicators in the family/environment

Marginalised or isolated by the community.

History of mental health, alcohol or drug misuse or domestic violence.

History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

Family member is a sex offender.

Appendix 2

Handling Allegations about Safeguarding Children (Child Protection)

Allegations about the safeguarding and protection of children must be handled in accordance with statutory guidance and the procedures of the Hertfordshire Safeguarding Children Board (HSCB), published in March 2007. The relevant statutory guidance is in chapter 5 of “Safeguarding Children and Safer Recruitment 2006” and appendix 5 of “Working Together to Safeguard Children 2006”. These documents can be accessed, respectively, at

<http://publications.teachernet.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DFES-04217-2006&>

<http://www.everychildmatters.gov.uk/resources-and-practice/IG00060/>

These procedures are no longer limited to allegations involving “significant harm/risk of significant harm”. Any allegation that an employee or volunteer has:

- behaved in a way that has, or may have, harmed a child;
- possibly committed a criminal offence against or related to a child;
- behaved towards a child in a way that indicates that he/she is unsuitable to work with children must be dealt with in accordance with HSCB procedures.

The role of the Local Authority Designated Officer (LADO) is crucial in handling all allegations of this kind (not just in relation to schools). The LADO has a statutory duty to ensure that allegations about safeguarding are handled properly and expeditiously.

The key points for a Commissioning Manager – either the Headmistress or the Chair of Governors – to follow are:

- a) Read and understand section 10 “Allegations against those working with children” of the HSCB Child Protection Procedures – March 2007 (a copy is held in every school)
- b) Inform the LADO **within one working day** of any allegation that comes to the school’s attention and that meet the criteria above, the information to include the name of the employee and the name, address and date of birth of the pupil(s)/student(s), where relevant.
- c) Whilst a preliminary assessment of the available evidence can be made in order to inform the referral in b) no attempt should be made to carry out an investigation

- d) A strategy meeting, normally arranged within 2 working days of the allegation, will determine whether the allegation should be investigated by the police or by some other agency or by the school under its disciplinary procedure
- e) If the matter is handed back to the school, whether at the first strategy meeting or at some later stage, the school must take account of the recommendations of the strategy meeting and must liaise with the LADO about the next steps.

The Investigation

Alleged instances of misconduct should be acted upon promptly.

Following a complaint or allegation, it will, in many cases, be clear that a formal investigation is required. However, in some cases, a preliminary assessment of the readily available evidence will be appropriate to determine what has happened and whether a formal investigation is required. Once a decision has been made, normally by the Headmistress, that a formal investigation is needed, the employee should be informed in writing of the nature of the complaint.

The first stage of the process is to conduct a formal impartial investigation of the alleged misconduct, in order to establish the facts as far as possible and whether or not there is a case to answer.

If, from the outset, there is a suspicion of child abuse or such a suspicion arises during the course of the school investigation, the investigation must be put on hold and the Local Authority Designated Officer informed.

The employee should be informed in writing of the nature of the complaint and receive copies of any letters or documents, which led the Commissioning Manager to believe an investigation was necessary. Normally this will occur at the outset of the investigation except where the Commissioning Manager believes that the conduct of the investigation might thereby be prejudiced. In those circumstances the employee will be informed at the earliest suitable time.

Where the complaint or allegation concerns the Headmistress, the Chair of Governors should seek advice from the school's employment /HR adviser.

Conducting the Investigation

- a) The Investigating Officer will impartially investigate thoroughly the facts of the matter, including the employee's version of events. The employee must be informed that he/she has the right to be accompanied by his/her trade union representative or a work colleague

at an investigatory interview. Any information gained by the Investigating Officer when questioning the employee will be noted and will be presented in any subsequent disciplinary proceedings

- b) The investigation should be completed as quickly as is reasonably possible in the circumstances after the employee has been informed of the investigation
- c) All those questioned must be told that if their evidence is to be accepted, it will need to be in either the form of a signed written statement and that the employee concerned will receive a copy, or by oral testimony at a formal hearing attended by the employee affected. Those completing a written statement may be required to attend. During an investigation, it may be necessary to question a large number of people, not all of whom will be called to give evidence
- d) When statements are taken, the dates and any names quoted should be written out in full. All written statements should be signed by the interviewee with the date of the interview
- e) Evidence from staff must be in the form of written statements.
- f) In cases involving sexual misconduct or harassment, ensure a manager of the same gender as the person allegedly offended against is brought in to assist any investigation (it may be necessary to bring in a manager from outside the school in order to meet this requirement)

Statements from Pupils

- This is a delicate area where the search for truth needs to be conducted in such a way as to avoid causing emotional harm to the pupil whose evidence is required. Care needs to be taken to ensure that the pupil does not, as far as possible, feel intimidated by the process. This is particularly true for a pupil who might have been the subject of the alleged misconduct
- An important requirement for the protection of children is that children should not be interviewed more than once. If, therefore, a child has already been interviewed by the police or by a social care agency in the course of an investigation into the same or similar allegations, then the interview statements must be requested from the other agency and used in the school's investigation
- Where a formal investigation is underway, the parent/carer of the pupil should always be informed and invited to attend the interview with their child. The parent/carer should be informed that an incident is being investigated and that the pupil's evidence may be used if it proves necessary to hold a formal disciplinary hearing. The pupil will not be required to attend the hearing to give evidence in person

- Where the Investigating Officer is not well-known to the pupil, for example, if the Investigating Officer is from outside the school, consideration should be given to asking the school's Designated Senior Person (DSP) for Child Protection to carry out this part of the investigation. The point here is that the pupil should feel able to speak frankly and, as far as is possible, in a situation that is not intimidating. The DSP will have received specialist training that will assist the search for the truth
- In any event, when interviewing pupils, the Investigating Officer should consider being accompanied by a second adult, whose role is to ensure that a complete and accurate record is taken. However, the points in the first bullet point are key.
- The Investigating Officer, taking into account the age and capabilities of the pupil, should ask the pupil to write down an account of what happened. Where this is not practicable, the investigating officer should write the account for the pupil and check carefully that the account accurately records what the pupil wishes to say. It is likely to be particularly helpful for the Investigating Officer to prepare questions in advance
- The Investigating Officer, in questioning the pupil, should aim to seek clarification of what the pupil saw and experienced. Leading questions must be avoided, but it is important to record the pupil's account of what happened, where and when and who else might have been present during the incident under investigation.
- The pupil's account must, like any witness statement, indicate the time, date and place at which the account was written plus the names and roles of all those present at the interview.

Financial Irregularity

- a) If a case involves alleged financial irregularity, corruption or fraud, Internal Audit **must** be contacted at the earliest possible opportunity and kept informed, without alerting the employee at this stage. At this stage, consideration will be given to police involvement and Internal Audit must be consulted before a decision is made
- b) Internal Audit will determine whether the matter should be referred to the police.

Misuse of School Computers and Allied Equipment

- a) If there are suspicions that an employee is misusing school computers (e.g. by accessing or downloading inappropriate material), the Headmistress will carry out an initial assessment of the circumstances, without alerting the employee at this stage. The school's Area HR

- Manager can advise on how to get equipment removed and examined for evidence
- b) The LADO will determine whether the matter should be referred to the police.

Conclusion of the Investigation

- a) The Investigating Officer will give a report of his/her investigation to the Commissioning Manager. If there is no evidence of misconduct, no further action will be taken and the employee will be informed of this in writing as soon as possible. The employee, who may be accompanied by a work colleague or his/her trade union or professional association representative, should be offered a debriefing meeting within a reasonable period.
- b) If, after investigation, there is evidence of misconduct, the Commissioning Manager will arrange a disciplinary hearing