



WEMBLEY PRIMARY SCHOOL

## Child Protection Policy

*Like the phoenix we  
Rise to our challenges  
Strengthen our Learning and Shine  
in our community*

*At Wembley Primary School we have the right to  
Article 19: Be Safe*

### Agreed by Governors

**Date of last review:** September 2018 Agreed by Governors at  
FGB on Tuesday 16<sup>th</sup> October

**Date of next review:** September 2019

**Designated Safeguarding Lead** Deputy Headteacher (A. Taylor-Kent)

The Deputy Headteacher, Annmarie Taylor-Kent is the named person for Child Protection at Wembley Primary School. (Designated Safeguarding Lead-DSL)  
The Deputy Designated Safeguarding Lead is Simon Barr (Deputy Headteacher)  
Ingrid Yarde (Chair of Governors) is the Safeguarding Link Governor.

This policy is a part of school's overall  
**SAFEGUARDING CHILDREN**  
Policy and practices

This policy is to be read in conjunction with the Dfe publication (September 2018)  
'Keeping Children Safe in Education: information for all school and college staff',  
'Working together to safeguard Children'

And 'Guidance for Safer working Practice for Adults who work with Children and  
Young People in Education Settings' (March 2009)-Appendix 7

This policy will be reviewed by the Full Governing Body on an annual basis

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## 1. Introduction

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the circumstances consistent with the provision of safe and effective care and taking action to enable all children have the best outcomes (KCSE 2018)

The 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 Safer Recruitment Policy, Behaviour Policy, Physical Intervention Policy, Anti-Bullying Policy, Whistleblowing Policy, Acceptable Use of ICT, Online Safety Policy, Health and Safety Policy, Intimate Care Policy and The Code of Conduct for Staff.**

**All staff must read The Department for Education: Keeping Children Safe in Education Part 1 September 2018.** Staff that work directly with children should also read Annex A.

## 2. Statutory Framework

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

- The Children Act 1989
- The Children Act 2004 (amendment to 1989 policy) provides a framework for the care and protection of children
- Education Act 2002 (section 175 +157) which places a duty on schools.
- Brent Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures
- Keeping Children Safe in Education: information for all schools and college staff (DFE September 2018)
- Working together to Safeguard Children (DfE 2018)
- Female Genital Mutilation Act 2003 (section 74. Serious Crime Act 2015)
- 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) Regulations 2009 and Childcare Act 2006, which set out who is disqualified from working with children

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

### 3. Aims and Objectives

At Wembley Primary School we are committed to safeguarding children and young people and we expect everyone who works in our school to share this commitment.

Adults in our school take all welfare concerns seriously and encourage children and young people to talk to us about what worries them.

We always act in the best interests of children. We aim to create a **culture of vigilance**.

The educational and personal development of all pupils will be enhanced if they are in a valuing and caring environment. We all have a duty and a responsibility to respect and safeguard the rights of our pupils in the wider community.

Our Aims and Objectives also include-

- To raise awareness of individual responsibilities in identifying and reporting possible cases of abuse
- To provide systematic means of monitoring, recording and reporting of concerns and cases
- To provide guidance on recognising and reporting suspected child abuse
- To emphasise the need for good levels of communication between all members of staff
- To ensure that there is a structured procedure within the school to be followed by all members of the school community in cases of suspected abuse
- To develop and promote effective working relationships with other agencies .
- To ensure that all adults within our school who have substantial access to children have been recruited and checked as to their suitability in accordance with Part Three of 'Keeping Children Safe in Education' ( DfE September 2018)
- To ensure all members of the school community are treated with dignity and respect.

### 4. 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 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

## 5. Key Roles and Responsibilities

The **Designated Safeguarding Lead** is the Deputy Headteacher, **Anmarie Taylor-Kent** .

In her absence the Deputy Headteacher, Simon Barr should be approached.

The Designated Safeguarding Lead is responsible for;

- co-ordinating action within the school and liaising with Social Care and other agencies over cases of abuse and suspected abuse
- Contribute to the assessment of children
- acting as a source of advice within the school
- ensuring that staff are familiar with the policy and procedures
- referral of individual cases of suspected abuse
- liaising with agencies about individual cases
- organising training on child protection within the school
- Ensure every member of staff and volunteers has access to and understands the school's safeguarding policy and procedures.

The Designated Safeguarding Lead and the deputy will receive appropriate training every two years. (Level 3)

### Teaching Staff and Support Staff

All staff will read and understand part 1 and Annex A of the Department for Education's statutory safeguarding guidance, [Keeping Children Safe in Education](#), and review this guidance at least annually.

All staff will be aware of:

- Our systems which support safeguarding, including the staff [code of conduct](#) the role of the designated safeguarding lead (DSL), the behaviour policy, and the safeguarding response to children who go missing from education
- The early help process (sometimes known as the common assessment framework) and their role in it, including identifying emerging problems, liaising with the DSL, and sharing information with other professionals to support early identification and assessment
- 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
- 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
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), FGM and radicalisation.

All staff need to be alert to the signs of abuse as detailed in this policy. They should report any concerns immediately to the designated lead (see appendix 3). If in doubt they should consult with the designated lead.

It is our duty to observe outward signs of abuse, changes in behaviour and failure to develop.

All school staff will receive appropriate safeguarding training which is updated every three years so that they are knowledgeable and aware of their role in the early recognition of indicators of abuse or neglect and of the appropriate procedures to follow. The Designated Lead will carry update training whenever new members of staff join the team.

Staff must apply the procedures detailed below for responding to a suspected case remembering that:

- You cannot promise confidentiality.
- Information should only be shared with those who need to know.
- It is important to stay calm and reassuring.
- The needs and safety of the child must always come first.

## **Non-Teaching Staff**

Non-teaching staff, volunteers and visitors may also be approached by children or have concerns. They should follow the same procedure as teaching staff in seeking referral at the earliest opportunity to the Designated Safeguarding Lead. (Annmarie Taylor-Kent)

**Early Help**-All staff need to identify learners who may benefit from early help. Early help means providing support as soon as a problem emerges at any point in a child's life. These are the vulnerable children in schools. All staff should be aware of their local early help process and understand their role in it. Part of this duty involves understanding the difference between a safeguarding concern and a child in immediate danger or at significant risk of harm.

## **Governors**

**The named governor for child protection is Ingrid Yarde** who takes leadership responsibility for the School's safeguarding arrangements. The chair of governors will act as the 'case manager' in the event that an allegation of abuse is made against the headteacher, where appropriate.

Our Governing Body will have access to safeguarding training. Our named Governor for safeguarding will have access to additional training at least two years to support the Headteacher in managing allegations against staff and volunteers who work with children and young people and to support the annual review of this policy, in order to keep it updated in line with local and national guidance /legislation

## 6. TYPES OF ABUSE (See appendix 1 for further definitions and signs).

There are four main types of abuse and these are:

- Physical abuse including FGM (Female Genital Mutilation)
- Emotional abuse including domestic violence
- Sexual
- Neglect

### Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using terms such as factitious illness by proxy or uncaused syndrome by proxy.

### Female Genital Mutilation (FGM)

On 31 October 2015, a **mandatory duty for teachers to report known cases of female genital mutilation (FGM) came into force.**

Procedural information on the new duty published by the Home Office explains that 'known' cases of FGM are where a girl informs the person that an act of FGM has been carried out on her, or where the person observes signs appearing to show that an act of FGM was carried out on a girl.

FGM involves procedures that include the partial or total removal of the external female genital organs for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. It is acknowledged that some FGM practising families do not see it as an act of abuse, however it is illegal in the UK and suspicions of FGM having already taken place or knowledge of girls at risk must be reported. It is also against the law to groom or prepare a girl to have any type of FGM. FGM is known by a number of names, including 'female genital cutting', 'the cut', 'circumcision' or 'initiation'. The age at which girls undergo FGM varies enormously according to the community. **The procedure may be carried out when the girl is new-born, during childhood or adolescence, just before marriage or during the first pregnancy.** However, the majority of cases of FGM are thought to take place between the ages of 5 and 8 years old and therefore girls within that age bracket are at a higher risk. FGM is a deeply rooted tradition, widely practised mainly among specific ethnic populations in Africa and parts of the Middle East and Asia. FGM has also been documented in communities in **Iraq, Israel, Oman, the United Arab Emirates, Palestine, India, Indonesia, Malaysia and Pakistan.**

## **Emotional abuse**

Emotional abuse is the persistent emotional ill-treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill-treatment of a child, though it may occur alone. Emotional abuse also happens when a child is subjected to witnessing domestic abuse between both or one of his/her parents.

## **Domestic Abuse - Emotional abuse continued**

Domestic abuse is any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality. A child who is subjected to domestic abuse either through directly observing it or is exposed to its effects is emotionally scarred and is under a lot of stress. Domestic Abuse chips away at feelings of self-worth and independence. Domestic abuse can also include *verbal abuse* such as yelling, name-calling, blaming, and shaming. It can also include controlling behaviours like financial control, Isolation and intimidation; these are all aspects of emotional abuse. The physical, psychological and emotional effects of domestic abuse on children can be severe and long-lasting. Some children become withdrawn and find it difficult to communicate, others may act out the violence or aggression they have witnessed, or blame themselves for the abuse. All children living with abuse are under a great deal of stress and need support.

## **Honour Based Violence**

Honour Based Violence encompasses crimes which have been committed to protect or defend the honour of the family and/or community including 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.

## **Breast Ironing**

Breast Ironing is practiced in some African countries, notably Cameroon. Girls aged between 9 and 15 have hot pestles, stones or other implements rubbed on their developing breast to stop them growing further. In the vast majority of cases breast ironing is carried out by mothers or grandmothers and the men in the family are unaware. Estimates range between 25% and 50% of girls in Cameroon are affected by breast ironing, affecting upto 3.8 million women across Africa.

## **Forced Marriage**

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats, or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological.

If a member of staff suspects that a pupil is being forced into marriage, they will speak to the pupil about their concerns in a secure and private place. They will then report this to the DSL.

## **Sexual Abuse including Child Sexual Exploitation (CSE)**

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery) or non-penetrative acts. They may include non-contact activities, such as involving children in looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.

## **Child Sexual Exploitation (CSE)**

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical activity. Child sexual exploitation does not always involve physical contact, it can also occur through the use of technology.

Indicators of child sexual exploitation may include;

- Acquisition of money, clothes, mobile phones, etc. without plausible explanation;
- Gang-association and/or isolation from peers/social networks;
- Exclusion or unexplained absences from school, college or work;
- Leaving home/care without explanation and persistently going missing or returning late;
- Excessive receipt of texts/phone calls
- Returning home under the influence of drugs/alcohol
- Inappropriate sexualised behaviour for age/ sexually transmitted infections
- Evidence of /suspicions of physical or sexual assault
- Relationships with controlling or significant older individuals or groups
- Concerning use of internet or other social media
- Increasing secretiveness around behaviours;and
- Self-harm or significant changes in emotional well-being

## **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. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

## **7. Children of Substance Misusing Parents/Carers**

Misuse of drugs and/or alcohol is strongly associated with Significant Harm to children, especially when combined with other features such as domestic violence.

When the school receives information about drug and alcohol abuse by a child's parents/carers they will follow appropriate procedures.

This is particularly important if the following factors are present:

- Use of the family resources to finance the parent's dependency, characterised by inadequate food, heat and clothing for the children
- Children exposed to unsuitable caregivers or visitors, e.g. customers or dealers
- The effects of alcohol leading to an inappropriate display of sexual and/or aggressive behaviour
- Chaotic drug and alcohol use leading to emotional unavailability, irrational behaviour and reduced parental vigilance
- Disturbed moods as a result of withdrawal symptoms or dependency
- Unsafe storage of drugs and/or alcohol or injecting equipment
- Drugs and/or alcohol having an adverse impact on the growth and development of the unborn child

## **8. Preventing Radicalisation and Extremism**

(Refer to DfE The Prevent Duty-Departmental advice for schools and childcare providers June 2015)

### **Definitions:**

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Extremism is defined by HM Government as ‘vocal or active opposition to fundamental British Values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of faiths and beliefs; and/or calls for the death of members of our armed forces, whether in this country or overseas.’

The Counter-Terrorism and Security Act, which received Royal Assent on 12 February 2015, places a duty on specified authorities, including local authorities and childcare, education and other children’s services providers, in the exercise of their functions, to have due regard to the need to prevent people being drawn into terrorism (“the Prevent duty”). The Counter-Terrorism and Security Act places a duty on local authorities to have a Channel panel in place. (ref:DFE The Prevent Duty June 2015)

We are aware of the potential indicating factors that a child is vulnerable to being radicalised or exposed to extreme views, including peer pressure, influence from other people or the internet, bullying, crime and anti-social behaviour, family tensions, race/hate crime, lack of self-esteem or identity, prejudicial behaviour and personal or political grievances.

Our curriculum promotes respect, tolerance and diversity. Children are encouraged to share their views and to understand that they are entitled to have their own different beliefs which should not be used to influence others. We strive to equip our pupils with confidence, self-belief, respect and tolerance as well as setting high standards and expectations for themselves.

Children are taught how to stay safe when using the internet and are encouraged to recognise that people are not always who they say they are online. They are taught to seek adult help if they are upset or concerned about anything they read or see on the internet.

### **If you have concerns about extremism**

If a child is not at immediate risk of harm, where possible, speak to the DSL first to agree a course of action. Alternatively, make a referral to local authority children’s social care directly if appropriate.

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, that 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](mailto: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
- Think someone may be planning to travel to join an extremist group
- See or hear something that may be terrorist-related.

## 9. Children with special educational needs and disabilities

Additional barriers can exist when recognising abuse and neglect in this group of children.

This can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's impairment without further exploration;
- Assumptions that children with SEN and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs;
- Communication barriers and difficulties
- Reluctance to challenge carers , (professionals may over empathise with carers because of the perceived stress of caring for a disabled child)
- Disabled children often rely on a wide network of carers to meet their basic needs and therefore the potential risk of exposure to abusive behaviour can be increased.
- A disabled child's understanding of abuse.
- Lack of choice/participation
- Isolation

## 10. Peer on peer abuse

Education settings are an important part of the inter-agency framework not only in terms of evaluating and referring concerns to Children's Services and the Police, but also in the assessment and management of risk that the child or young person may pose to themselves and others in the education setting.

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse. When considering whether behaviour is abusive, it is important to consider:

- Whether there is a large difference in power (for example age, size, ability, development) between the young people concerned; or
- whether the perpetrator has repeatedly tried to harm one or more other children; or
- Whether there are concerns about the intention of the alleged perpetrator.

Peer on peer abuse can manifest itself in many ways and different gender issues can be prevalent. Severe harm may be caused to children by abusive and bullying behaviour of other children, which may be physical, sexual or emotional and can include gender based violence/ sexual assaults, sexting, teenage relationship abuse, peer-on-peer exploitation, serious youth violence, sexual bullying or harmful sexual behaviour.

Staff should recognise that children are capable of abusing their peers and should not be tolerated or passed off as “banter” or “part of growing up”.

In order to minimise the risk of peer on peer abuse the school:

- Provides a developmentally appropriate PSHE curriculum which develops students understanding of acceptable behaviour and keeping themselves safe.
- Have systems in place for any student to raise concerns with staff, knowing that they will be listened to, believed and valued.
- Develop robust risk assessments where appropriate (e.g. Using the Risk Assessment Management Plan and Safety and Support Plan tools).
- Have relevant policies in place (e.g. behaviour policy).

## **11. School Based Child Protection Meetings**

The Headteacher, Deputy Headteachers the SENCO and Assistant Headteachers will meet once a term to discuss on-going child protection issues, new cases and to review cases being monitored. The meetings will follow a standing agenda:

- Review cases
- New cases
- Action planning from a child protection conference
- INSET
- Support for staff
- Review of policy

## **12. School Management of Child Abuse Concerns**

Any member of staff who suspects or has evidence of or receives a disclosure **MUST** take appropriate action as detailed below.

In the case of disclosure staff should **LISTEN** carefully, allowing the pupil to talk in an environment where you are unlikely to be disturbed. See Appendix 2 for guidance on handling a disclosure.

Where staff receive information that causes them concern they should seek clarification from the child with tact and sympathy. **STAFF SHOULD NOT GIVE UNDERTAKING OF ABSOLUTE CONFIDENTIALITY**-see Appendix 2. All information should be recorded on the child protection referral form-see appendix 3, in a factual, non-emotive and non-judgemental way. The recording must be a clear, precise, factual account of the observation. The body charts must be used if appropriate to the case. **THE RECORDING MUST BE COMPLETED THAT DAY OR AS SOON AFTER THE EVENT AS POSSIBLE.**

In the cases of receiving information or disclosure it is important to note that the member of staff should only speak to the pupil who gave the disclosure.

Following the receipt of this information, the member of staff **MUST** take the following steps immediately:

- Tell the Designated Safeguarding Lead (Annmarie Taylor-Kent) and share the written referral.
- The Designated Lead will consult with any staff individually who may have knowledge of the child's welfare, and pool available information.

Staff noting other indicators such as those listed below should discuss their concerns with the Designated Lead who will advise on appropriate action:

- Marks on the child's body
- Unusual/different behaviour (including academic)
- Mood changes
- Puzzling statements or stories from the child
- Information from others
- If requested by another agency, for example following a child protection conference

### **Outcome of school based referral**

There are 2 possible outcomes to a school based referral:

- Actions taken within school/Case to be monitored within school

- A referral to social services which may result in
  1. The school being asked to contact parents
  2. Social Services investigating the allegation and deciding on appropriate action.
  3. A decision is made that no further action is taken.

## **Recording**

Persons responsible for recording

- All teachers
- Other school staff
- Other LA staff in regular contact with the child

Once an allegation has been received and the school based referral procedure undertaken then the Designated Lead will inform staff of the need to monitor.

When the need for ongoing recording and monitoring of a student has been identified the following should be recorded

- Patterns of attendance
- Changes in mood
- Changes in classroom functioning
- Relationships-with peers, adults
- Behaviour
- Statements, comments, stories, news, drawings
- General demeanour and appearance
- Home/family changes
- Medical
- Response to PE/Sport
- Injuries/marks past and present

## **The Information Collected**

The Designated Lead will keep a running record of information received from staff through the Child Protection monitoring form (appendix 3). This information will be written down and handed to the Designated Lead.

To ensure the safety and confidentiality of information, all child protection records will be kept securely locked in the Deputy Headteacher's room (Annmarie Taylor-Kent). Records will not be kept on a computer.

Access to records will be decided by the Designated Lead on a need to know basis.

When a child transfers or leaves school the Designated Lead will be responsible for forwarding records.

## **Child Protection**

All information from social services will be received and stored by the Designated Lead. Information will then be shared at the school's protection meeting and action decided.

All staff will be informed of pupils subject to a Child Protection Plan or a Child in Need Plan.

Details of individual cases on the register will be shared on a need to know basis.

When a pupil on the register leaves or moves school it will be the responsibility of the Designated Lead to advise services

## **Confidentiality**

Information sharing is vital to safeguarding and promoting the welfare of children and young people. A key factor identified in many serious case reviews (SCRs) has been a failure by practitioners to record information, to share it to understand its significance and then take appropriate action.

We recognise that all matters relating to child protection are confidential; the headteacher or DSL will disclose personal information about a pupil to other members of staff on a need to know basis only.

All staff are aware that they have a professional responsibility to share information with other agencies in order to safeguard children. All staff are aware they cannot promise to keep secrets which might compromise the child's safety or well-being, or that of another. Timely information sharing by all staff is essential to effective safeguarding.

## **Child Protection Conferences**

The Designated Lead or another member of the senior leadership team will attend.

Class teachers may be asked to attend core group meetings. Teachers will be expected to write reports.

Class teachers will also be asked to write reports for case conferences.

## **Working with Parents**

It is the commitment of Wembley Primary to work in partnership with parents. The welfare of pupils however, is paramount and it is the duty of staff to safeguard all pupils. Child protection concerns, therefore, will always be responded to in accordance with the policy before a discussion with parents

## **Support for Pupils**

Pupils will be taught about their rights to personal safety and the support services available to them both within and outside school through

- PSHE lessons
- School assembly
- Outside speakers
- Posters around the school

## **Supporting Vulnerable Children**

We recognise that abuse or witnessing violence may have an adverse impact on those children which may last into adulthood without appropriate intervention and support.

The school may be the only stable, secure and predictable element in the lives of children at risk. Nevertheless, when at school their behaviour may be challenging and defiant or they may become withdrawn.

We recognise that some vulnerable children may develop abusive behaviours and that these children may need to be referred on for appropriate support and intervention.

### **The school will support the pupil through:**

- Curricular opportunities to encourage self-esteem and self-motivation
- An ethos that actively promotes a positive, supportive and safe environment and values the whole community
- The school's behaviour policy will support vulnerable pupils in the school. All staff agree on a consistent approach, which focuses on the behaviour of the child but does not damage the pupil's sense of worth. The school will ensure that the pupil knows that some behaviour is unacceptable but s/he is valued and not to be blamed for any abuse which has occurred.
- Liaison with other agencies which support the pupil such as Social Care, Child and Adolescent Mental Health Services or Locality Teams.
- A commitment to develop productive and supportive relationships with parents/carers
- Recognition that children living in a home environment where there is domestic abuse, drug or alcohol abuse or mental health issues are vulnerable and in need of support and protection; they may also be young carers

- Monitoring and supporting pupil's welfare, keeping records and notifying Social Care
- When a pupil who is subject to a child protection plan leaves, information will be transferred to the new school immediately. The Lead Social Worker from Social Care will also be informed.

## **13. TRAINING**

The Designated Lead and Deputy Lead will complete level one and level two training-working together to safeguard children-Brent Iscb and level 3 training. Level 3 training will be updated every two years. Staff training will take place every three years with refreshers every year. The induction of new staff and volunteers will include sharing the child protection policy and other safeguarding policies. (See Induction Policy)

### **14a. PREVENTING UNSUITABLE PEOPLE WORKING WITH CHILDREN**

The school will operate safer recruitment practices including ensuring appropriate DBS and reference checks are undertaken according to the government guidance "Keeping Children Safe in Education" and the Local Authority guidance in this area. The school will keep an up-to-date record of Staff and Governors who have undertaken Safer Recruitment training.

Under Section 75 of the Childcare Act 2006, individuals are disqualified from childcare provision if they have committed certain specified offences. Staff may also be disqualified "by association" if they are living or working in the same household as a person who is disqualified. This applies to any member of staff employed in early years childcare (up to the age of 5) or later years childcare (up to the age of 8) in nursery, primary or secondary school settings or the management of such settings. Staff are expected to sign a self-declaration form to confirm that they are not "disqualified by association." A record of the self-declaration will be kept on the school's Single Central Record.

### **14b Checking the identity and suitability of visitors**

All visitors will be required to verify their identity to the satisfaction of staff. If the visitor is unknown to the setting, we will check their credentials and reason for visiting before allowing them to enter the setting. Visitors should be ready to produce identification.

Visitors are expected to sign in on our entry system and wear a visitor's badge.

All visitors to our setting, including visiting speakers, will be accompanied by a member of staff at all times. We will not invite into the school any speaker who is known to disseminate extremist views, and will carry out appropriate checks to ensure that any individual or organisation using school facilities is not seeking to disseminate extremist views or radicalise pupils or staff.

## 15. Allegations against a staff member or volunteer

This section of this policy applies to all cases in which it is alleged that a current member of staff or volunteer has:

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

It applies regardless of whether the alleged abuse took place in the school. Allegations against a teacher who is no longer teaching and historical allegations of abuse will be referred to the police.

We will deal with any allegation of abuse against a member of staff or volunteer very quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

Our procedures for dealing with allegations will be applied with common sense and judgement.

If such an allegation is made, the member of staff receiving the allegation will **immediately** inform the headteacher.

The headteacher on all such occasions will discuss the content of the allegation with the local authority Lead Officer for Child Protection.

If the allegation made by a member of staff concerns the Headteacher, the designated teacher will immediately inform the Chair of Governors who will consult with the LAs Lead Officer for Child Protection.

The school will follow the Brent LSCB Policy on managing allegations made against staff and Volunteers working with Children and Young People.

To reduce the risk of allegations, all staff should be aware of safer working practice and should be familiar with the guidance contained in the staff handbook, school code of conduct or Government document '*Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings*'.-Appendix 5

### Suspension

Suspension will not be the default position, and will only be considered in cases where there is reason to suspect that a child or other children is/are at risk of harm, or the case is so serious that it might be grounds for dismissal. In such cases, we will only suspend an individual if we have considered all other options available and there is no reasonable alternative.

Based on an assessment of risk, we will consider alternatives such as:

- Redeployment within the school so that the individual does not have direct contact with the child or children concerned

- Providing an assistant to be present when the individual has contact with children
- Redeploying the individual to alternative work in the school so that they do not have unsupervised access to children
- Moving the child or children to classes where they will not come into contact with the individual, making it clear that this is not a punishment and parents have been consulted

## Definitions for outcomes of allegation investigations

- **Substantiated:** there is sufficient evidence to prove the allegation
- **Malicious:** there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive
- **False:** there is sufficient evidence to disprove the allegation
- **Unsubstantiated:** there is insufficient evidence to either prove or disprove the allegation (this does not imply guilt or innocence)

## Procedure for dealing with allegations

In the event of an allegation that meets the criteria above, the headteacher (or chair of governors where the headteacher is the subject of the allegation) – the ‘case manager’ – will take the following steps:

- Immediately discuss the allegation with the designated officer at the local authority. This is to consider the nature, content and context of the allegation and agree a course of action, including whether further enquiries are necessary to enable a decision on how to proceed, and whether it is necessary to involve the police and/or children’s social care services. (The case manager may, on occasion, consider it necessary to involve the police *before* consulting the designated officer – for example, if the accused individual is deemed to be an immediate risk to children or there is evidence of a possible criminal offence. In such cases, the case manager will notify the designated officer as soon as practicably possible after contacting the police)
- Inform the accused individual of the concerns or allegations and likely course of action as soon as possible after speaking to the designated officer (and the police or children’s social care services, where necessary). Where the police and/or children’s social care services are involved, the case manager will only share such information with the individual as has been agreed with those agencies
- Where appropriate (in the circumstances described above), carefully consider whether suspension of the individual from contact with children at the school is justified or whether alternative arrangements such as those outlined above can be put in place. Advice will be sought from the designated officer, police and/or children’s social care services, as appropriate

- **If immediate suspension is considered necessary**, agree and record the rationale for this with the designated officer. The record will include information about the alternatives to suspension that have been considered, and why they were rejected. Written confirmation of the suspension will be provided to the individual facing the allegation or concern within 1 working day, and the individual will be given a named contact at the school and their contact details
- **If it is decided that no further action is to be taken** in regard to the subject of the allegation or concern, record this decision and the justification for it and agree with the designated officer what information should be put in writing to the individual and by whom, as well as what action should follow both in respect of the individual and those who made the initial allegation
- **If it is decided that further action is needed**, take steps as agreed with the designated officer to initiate the appropriate action in school and/or liaise with the police and/or children's social care services as appropriate
- Provide effective support for the individual facing the allegation or concern, including appointing a named representative to keep them informed of the progress of the case and consider what other support is appropriate.
- Inform the parents or carers of the child/children involved about the allegation as soon as possible if they do not already know (following agreement with children's social care services and/or the police, if applicable). The case manager will also inform the parents or carers of the requirement to maintain confidentiality about any allegations made against teachers (where this applies) while investigations are ongoing. Any parent or carer who wishes to have the confidentiality restrictions removed in respect of a teacher will be advised to seek legal advice
- Keep the parents or carers of the child/children involved informed of the progress of the case and the outcome, where there is not a criminal prosecution, including the outcome of any disciplinary process (in confidence)
- Make a referral to the DBS where it is thought that the individual facing the allegation or concern has engaged in conduct that harmed or is likely to harm a child.
- We will inform Ofsted of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises (whether the allegations relate to harm or abuse committed on the premises or elsewhere), and any action taken in respect of the allegations. This notification will be made as soon as reasonably possible and always within 14 days of the allegations being made.

If the school is made aware that the secretary of state has made an interim prohibition order in respect of an individual, we will immediately suspend that individual from teaching, pending the findings of the investigation by the National College for Teaching and Leadership.

Where the police are involved, wherever possible the **Governing Body** will ask the police at the start of the investigation to obtain consent from the individuals involved to share their statements and evidence for use in the school's disciplinary process, should this be required at a later point.

## Timescales

- Any cases where it is clear immediately that the allegation is unsubstantiated or malicious will be resolved within 1 week

- If the nature of an allegation does not require formal disciplinary action, we will institute appropriate action within 3 working days
- If a disciplinary hearing is required and can be held without further investigation, we will hold this within 15 working days

## **Specific actions**

### **Action following a criminal investigation or prosecution**

The case manager will discuss with the local authority's designated officer whether any further action, including disciplinary action, is appropriate and, if so, how to proceed, taking into account information provided by the police and/or children's social care services.

### **Conclusion of a case where the allegation is substantiated**

If the allegation is substantiated and the individual is dismissed or the school ceases to use their services, or the individual resigns or otherwise ceases to provide their services, the case manager and the school's personnel adviser will discuss with the designated officer whether to make a referral to the DBS for consideration of whether inclusion on the barred lists is required.

If the individual concerned is a member of teaching staff, the case manager and personnel adviser will discuss with the designated officer whether to refer the matter to the NCTL to consider prohibiting the individual from teaching.

### **Individuals returning to work after suspension**

If it is decided on the conclusion of a case that an individual who has been suspended can return to work, the case manager will consider how best to facilitate this.

The case manager will also consider how best to manage the individual's contact with the child or children who made the allegation, if they are still attending the school.

### **Unsubstantiated or malicious allegations**

If an allegation is shown to be deliberately invented, or malicious, the headteacher, or other appropriate person in the case of an allegation against the headteacher, will consider whether any disciplinary action is appropriate against the pupil(s) who made it, or whether the police should be asked to consider whether action against those who made the allegation might be appropriate, even if they are not a pupil.

## **Confidentiality**

The school will make every effort to maintain confidentiality and guard against unwanted publicity while an allegation is being investigated or considered.

The case manager will take advice from the local authority's designated officer, police and children's social care services, as appropriate, to agree:

- Who needs to know about the allegation and what information can be shared
- How to manage speculation, leaks and gossip, including how to make parents or carers of a child/children involved aware of their obligations with respect to confidentiality
- What, if any, information can be reasonably given to the wider community to reduce speculation

- How to manage press interest if, and when, it arises
- 

## Record-keeping

The case manager will maintain clear records about any case where the allegation or concern meets the criteria above and store them on the individual's confidential personnel file for the duration of the case. Such records will include:

- A clear and comprehensive summary of the allegation
- Details of how the allegation was followed up and resolved
- Notes of any action taken and decisions reached (and justification for these, as stated above)

If an allegation or concern is not found to have been malicious, the school will retain the records of the case on the individual's confidential personnel file, and provide a copy to the individual. We will retain these records at least until the individual has reached normal pension age, or for 10 years from the date of the allegation if that is longer.

The records of any allegation that is found to be malicious will be deleted from the individual's personnel file.

## References

When providing employer references, we will not refer to any allegation that has been proven to be false, unsubstantiated or malicious, or any history of allegations where all such allegations have been proven to be false, unsubstantiated or malicious.

## Learning lessons

After any cases where the allegations are *substantiated*, we will review the circumstances of the case with the local authority's designated officer to determine whether there are any improvements that we can make to the school's procedures or practice to help prevent similar events in the future.

This will include consideration of (as applicable):

- Issues arising from the decision to suspend the member of staff
- The duration of the suspension
- Whether or not the suspension was justified
- The use of suspension when the individual is subsequently reinstated. We will consider how future investigations of a similar nature could be carried out without suspending the individual

## 16. Children missing from education

A child going missing from education is a potential indicator of abuse or neglect, and such children are at risk of being victims of harm, exploitation or radicalisation.

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

- Are at risk of harm or neglect
- Come from Gypsy, Roma, or Traveller families
- Come from the families of service personnel
- Go missing or run away from home or care
- Are supervised by the youth justice system
- Cease to attend a school
- Come from new migrant families

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 in immediate danger or at risk of harm.

## **17. Non-collection of children**

If a child is not collected at the end of the session/day, we will:

- Try to contact parents/carers/named people on the contact list. All children must have at least two emergency contact numbers.
- If we are unable to contact anyone on the emergency contact list we will contact social services (The Brent Family Front Door-020 8937 4300)
- There will always be two members of SLT present at the end of a day.

## **18. Mobile phones and cameras**

Staff are allowed to bring their personal phones to school for their own use, but will limit such use to non-contact time when pupils are not present. Staff members' personal phones will remain in their bags or cupboards during contact time with pupils.

Staff will not take pictures or recordings of pupils on their personal phones or cameras.

We will follow our school policy which reflects the General Data Protection Regulations when taking and storing photos and recordings for use in the school.

## **Parents and Carers**

Parents and Carers will be made aware of the policy in our school prospectus and reminders in newsletters. Copies of the policy will be available on request and on the school's website.

## **Monitoring**

The Headteacher, Deputyhead and SENCO and designated Governor for child protection will review the effective implementation of this policy. This will be done through interviews, looking at documents and speaking to Teachers and other staff and volunteers.

## **Review**

The policy will be reviewed annually with staff and Governors

**Next review date-September 2019**

### WHAT SIGNS MAY A CHILD EXHIBIT IF THEY ARE A VICTIM OF ABUSE?

#### PHYSICAL ABUSE

**DEFINITION:** 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 feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using terms such as factitious illness by proxy or Uncaused syndrome by proxy.

#### Indicators in the child

##### **Bruising**

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

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

## **FEMALE GENITAL MUTILATION (FGM) IS PHYSICAL ABUSE**

### **WHAT SIGNS MAY A CHILD EXHIBIT IF THEY ARE A VICTIM OF FGM?**

**DEFINITION:** FGM involves procedures that include the partial or total removal of the external female genital organs for cultural or other non-therapeutic reasons. The practice is medically unnecessary, extremely painful and has serious health consequences, both at the time when the mutilation is carried out and in later life. FGM is against the law except when performed by a registered medical profession on medical or mental health grounds. It is also illegal for someone to arrange for a child to go abroad with the intention of having her circumcised.

### **SIGNS**

- Difficulty walking, sitting or standing
- Spending longer than normal in the bathroom or toilet due to difficulties urinating.
- Fracture or dislocation of legs/arms as a result of restraint

- Spend long periods of time away from a classroom during the day with bladder or menstrual problems
- Severe pain in groin area
- Haemorrhage
- Being withdrawn - emotional and psychological shock (exacerbated by having to reconcile being subjected to the trauma by loving parents, extended family and friends);
  - Urinary infections
- Detached / isolated
- Change in physical appearance/dress & body language
- Withdrawn aggressive
- Unable to form relationships with adults
- Changes in attitude, personality or behaviour
- Changes in interaction with others
- Feelings shown through writing or art work
- Peer group problems
- Extremes of emotion
- Underachieving

## **EMOTIONAL ABUSE**

**DEFINITION:** Emotional abuse is the persistent emotional ill-treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill-treatment of a child, though it may occur alone. Children witnessing domestic abuse between the parents or carers is also emotional abuse.

### ***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 cyber bullying), 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.

## **DOMESTIC ABUSE IS EMOTIONAL ABUSE**

### **WHAT SIGNS MAY A CHILD EXHIBIT IF THEY ARE A VICTIM OF DOMESTIC ABUSE?**

**DEFINITION:** Domestic abuse is any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality. A child who is subjected to domestic abuse either through directly observing it or is exposed to its effects is affected emotionally and is under a lot of stress.

### **SIGNS**

- Disproportionate reactions ( overly apprehensive, tearful, angry or fearful)
- Withdrawn or quiet
- Negative relationships with opposite sex (children and peers)
- Aggression or bullying
- Tantrums
- Vandalism
- Problems in school, truancy,
- Difficulty with speech problems that were not there before
- Difficulties with learning
- Attention needing
- Struggle to make or keep friendships
- Reluctance to come to school
- Reluctance to go home with parents
- Aggressive comments or language (sometimes not expected for that age)
- Self-harming
- Nightmares or insomnia
- Bed-wetting
- Anxiety, depression, fear of abandonment
- Feelings of inferiority
- Constant colds, headaches, mouth ulcers, asthma, eczema
- Seem afraid or anxious to please

- Need for constant acceptance
- Be possessive over friends or belongings.

## **SEXUAL ABUSE**

### **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  
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.

## **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 socialisation

### **Emotional/behavioural presentation**

Attachment disorders

Absence of normal social responsiveness

Indiscriminate behaviour in relationships with adults

Emotionally needy

Compulsive stealing

Constant tiredness

Frequently absent or late at school

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, and 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

## Appendix 2

### Responding to the Child

When a child first reveals abuse the staff member should:

1. listen carefully to what the child says;
2. reassure the child that they are not to blame and were right to tell;
3. acknowledge the child's feelings;
4. ask questions that help them give more details if they wish, but do not lead (care must be taken in asking and interpreting children's responses to questions about indications of abuse or volunteers information that amounts to that. Staff should be aware of the way in which they talk to a child could have an effect on the evidence that is put forward if there are subsequent criminal proceedings. They should not ask leading questions as this can later be interpreted as putting ideas into the child's mind. They should, therefore, not ask questions which encourages the child to change his or her version of the events in any way, or impose the teacher's own assumptions. For example, staff should say "tell me what has happened" rather than "did they do x to you?" The main task at this stage is to listen to the child, and not interrupt if he or she is freely recalling significant events, and to make a note of the discussion to pass on to the designated teacher.
5. reassure the child that adults will ensure they are protected
6. make a written record as soon as possible after talking to the child.

### Confidentiality

If a child asks for confidentiality, i.e. that the staff member doesn't tell anyone about the abuse, it may need to be explained that the child is being 'hurt' then staff have to tell someone else so that the hurting is stopped, Victims of abuse may be intimidated or blame themselves and not necessarily able to judge what should happen.

## **RESPONDING TO PARENTS**

There is a difficult balance to strike between respecting parents' rights and ensuring children are protected. Child-care legislation stresses that the child's welfare is paramount so it may be necessary to cause distress to parents in order to better protect those children who may be abused.

Staff should avoid assuming or expressing blame to parents. Nor should they believe that the parents are not the sort of people who would abuse. Rather they should gather as much information as the school has and decide, on that evidence, if referral should be made. The investigation must be conducted with an open mind. It is not a criminal enquiry. It is an attempt to find out what happened.

### **Contacting Parents**

Social services must be contacted before parents are told of the concern of the school. This is especially important in cases of sexual abuse where advance warning to abusers may lead to intimidation and further harm being done to the child. Even in cases of physical abuse, it is best that Social Services check what information they may hold on the case from other sources, i.e. GP, Health Visitor, and Police. This may influence how a current concern is evaluated and whether parents should get advance notice of Social Services contact.

At the time of referral teachers should decide with the Social Services the stage at which the School can discuss the matter with parents. An open honest approach is always productive and likely to help the school's future relationship with parents.

**Record of Concern**

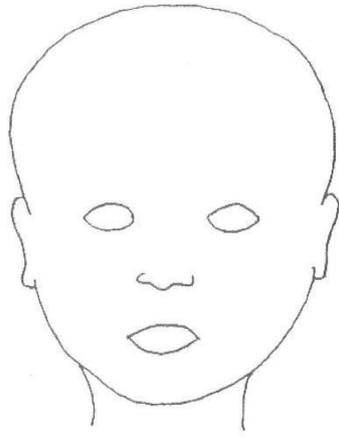
Child's name:	Class:	Date and time of concern:	
Your name and position at school:	Your signature:	Date and time of this recording:	
Your account of the concern (what was said, observed, reported and by whom. Give as much detail as possible; continue on the next page if necessary or attach relevant documents):			
Your response and actions taken: ( what did you do/say following the concern)			
Action and response of DLP (e.g. decision regarding child, inform and contact parents, referral to children services)			
Date and time	Action	Name and signature	Outcome

## Checklist for Referral

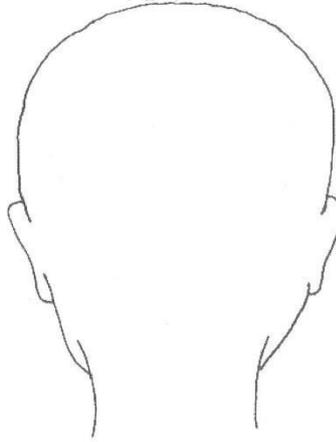
1. Child clearly identified-full name
2. Name, designation and signature of the person completing the record populated.
3. Ensure dates and times are included.
4. This is a factual record.
5. Ensure that the concern is in sufficient detail.
6. Use child's own words (swear words, insults and intimate vocabulary should be written down verbatim.)
7. The record should be free of jargon.
8. The record should be written in a professional manner.
9. The record includes an attached completed body map (if relevant) to show any visible injuries

**Body Chart 1**

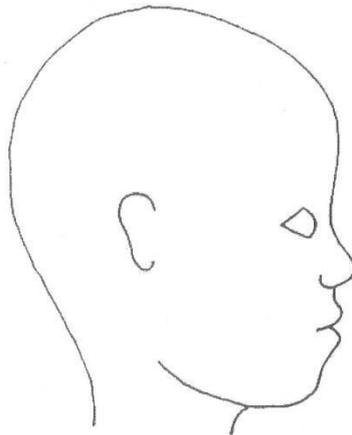
First Name:	Last Name:	Date and time:
-------------	------------	----------------



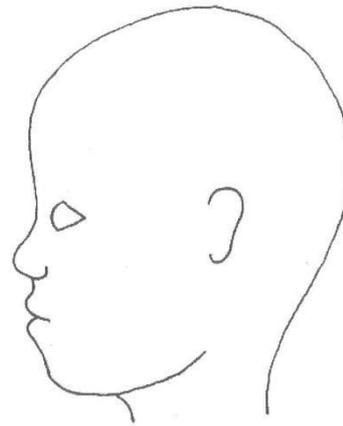
FRONT



BACK



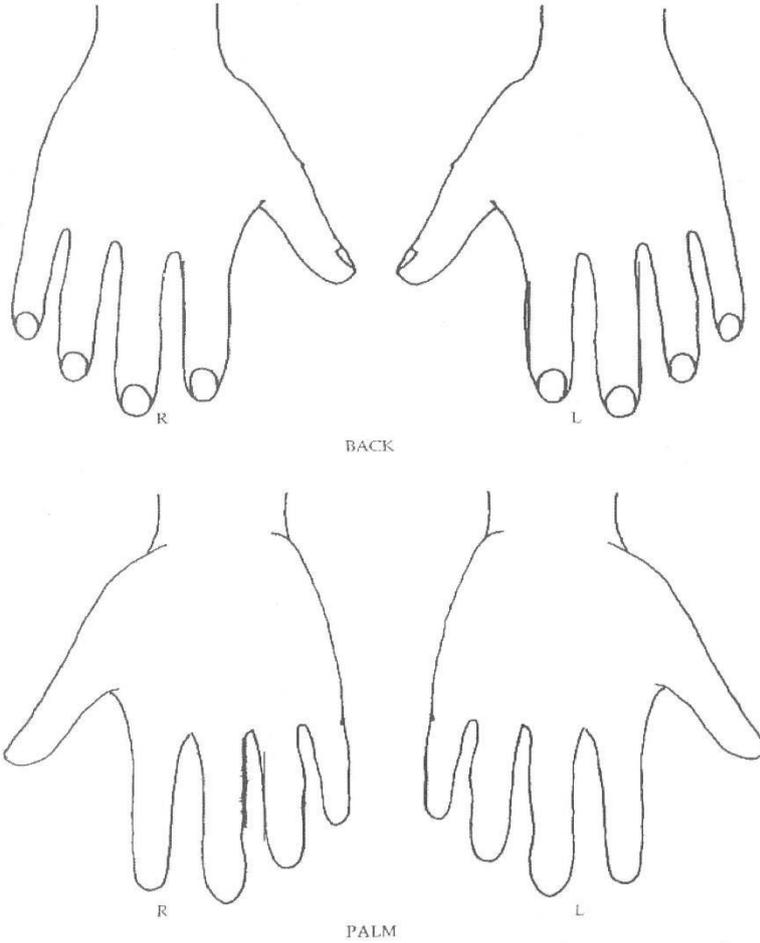
RIGHT



LEFT

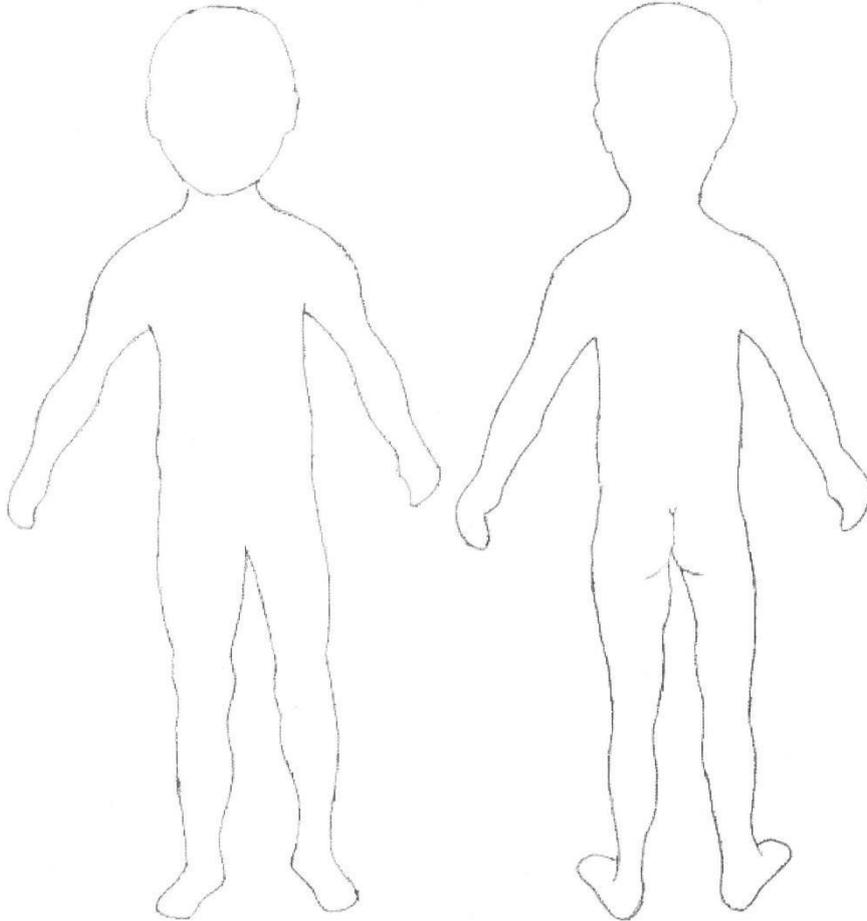
## Body Chart 2

First Name:	Last Name:	Date and time:
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### Body Chart 3

First Name:	Last Name:	Date and time:
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## Appendix 4: Contacts

The Brent Family Front Door 020 8937 4300

Local Authority Designated Officer (LADO) [brent.lado@brent.gov.uk](mailto:brent.lado@brent.gov.uk)

Local Safeguarding Children Board 020 8937 4299

### **Weblinks**

#### **Department for Education (DfE)**

[www.gov.uk](http://www.gov.uk)

#### **Brent LSCB. (including training around Safeguarding and Safer Recruitment)**

[www.brentlscb.co.uk](http://www.brentlscb.co.uk)

#### **Keeping Children Safe**

[www.ceop.gov.uk](http://www.ceop.gov.uk)

[www.missdorothy.com](http://www.missdorothy.com)

[www.anti-bullyingalliance.org](http://www.anti-bullyingalliance.org)

[www.kidscape.org.uk](http://www.kidscape.org.uk)

[www.childline.org.uk](http://www.childline.org.uk)

[www.nspcc.org.uk](http://www.nspcc.org.uk)

[www.ceop.org.uk/thinkuknow](http://www.ceop.org.uk/thinkuknow)

[www.childnet-int.org](http://www.childnet-int.org)

[www.kidsmart.org.uk](http://www.kidsmart.org.uk)

[www.teachernet.gov.uk/childprotection](http://www.teachernet.gov.uk/childprotection)

## **Appendix 5**

Guidance for Safer Working Practice for Adults who work with Children and Young People in Education settings.

### **Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings.**

March 2009

*Updated from an original document produced by a DCSF network of Advisors*  
department for  
**children, schools and families**

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For further information, please contact your Safeguarding Advisor in your local Government Office or the Local Authority Designated officer (LADO) in the Safeguarding unit of your local council.

## Section 1: Overview

### 1.1. Background

All adults who come into contact with pupils in their work have a duty of care<sup>3</sup> to safeguard and promote their welfare.

The Children Act 2004, through the Stay Safe outcome of the Every Child Matters Change for Children programme<sup>4</sup>, places a duty on schools/services to safeguard<sup>5</sup> and promote the well-being of pupils. This includes the need to ensure that all adults who work with or on behalf of pupils are competent, confident and safe to do so.

The vast majority of adults who work with children act professionally and aim to provide a safe and supportive environment which secures the well-being and very best outcomes for pupils in their care. However, it is recognised that in this area of work tensions and misunderstandings can occur. It is here that the behaviour of adults can give rise to allegations of abuse being made against them. Allegations may be malicious or misplaced. They may arise from differing perceptions of the same event, but when they occur, they are inevitably distressing and difficult for all concerned. Equally, it must be recognised that some allegations will be genuine and there are adults who will deliberately seek out, create or exploit opportunities to abuse children. It is therefore essential that all possible steps are taken to safeguard pupils and ensure that the adults working with them are safe to do so.

Some concerns have been raised about the potential vulnerability of adults in this area of work. It has been suggested that there is a need for clearer advice about what constitutes illegal behaviour and what might be considered as misconduct. This document has been produced in response to these concerns and provides practical guidance for anyone who works with, or on behalf of pupils regardless of their role, responsibilities or status. It seeks to ensure that the duty to promote and safeguard the wellbeing of children is in part, achieved by raising awareness of illegal, unsafe and inappropriate behaviours.

Whilst every attempt has been made to cover a wide range of situations, it is recognised that this guidance cannot cover all eventualities. There may be times when professional judgements are made in situations not covered by this document, or which directly contravene the guidance given by their employer. It is expected that in these circumstances adults will always advise their senior colleagues of the justification for any such action already taken or proposed.

It is also recognised that not all adults who work with pupils work as paid or contracted employees. The principles and guidance outlined in this document still apply and should be followed by any adult whose work brings them into contact with pupils.

The guidance contained in this document has due regard to current legislation and statutory guidance. It has been updated from a previous 2006 version.

<sup>3</sup> The duty which rests upon an individual to ensure that all reasonable steps are taken to ensure the safety of a child or young person involved in any activity, or interaction for which that individual is responsible. Any person in charge of, or working with pupils in any capacity is considered, both legally and morally, to owe them a duty of care

<sup>4</sup> [www.everychildmatters.gov.uk](http://www.everychildmatters.gov.uk)

<sup>5</sup> Process of protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables them to have optimum life chances... Working Together to Safeguard Children: 2006 HM Government

## 1.2. What to do if you are worried a child is being abused<sup>6</sup>

Everyone working with pupils should be familiar with local procedures and protocols for safeguarding the welfare of pupils. Adults have a duty to report any child protection or welfare concerns to a designated member of staff in their school/service and/or report any concerns to the local social care office. Anyone who has concerns or is in doubt should refer to the document "What To Do If You're Worried a Child Is Being Abused" and follow that guidance.

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<sup>6</sup> What to do If You are Worried a Child is Being Abused HM Government 2008

## Section 2: Using the Guidance

### 2.1. Status of Document

This guidance document was originally commissioned by the Department for Children, Schools and Families<sup>7</sup>. (DCSF). It does not replace or take priority over advice or codes of conduct produced by employers or national bodies, but is intended to both supplement and complement any such documents.

The document should also complement existing professional procedures, protocols and guidance which relate to specific roles, responsibilities or professional practices within an Education setting.

### 2.2. Purpose of Guidance

It is important that all adults working with children understand that the nature of their work and the responsibilities related to it, place them in a position of trust. This practice guidance provides clear advice on appropriate and safe behaviours for all adults working with children in paid or unpaid capacities, in all settings and in all contexts. The guidance aims to:

- keep children safe by clarifying which behaviours constitute safe practice and which behaviours should be avoided;
- assist adults working with children to work safely and responsibly and to monitor their own standards and practice;
- support managers and employers in setting clear expectations of behaviour and/or codes of practice relevant to the services being provided;
- support employers in giving a clear message that unlawful or unsafe behaviour is unacceptable and that, where appropriate, disciplinary or legal action will be taken;
- support safer recruitment practice;
- minimise the risk of misplaced or malicious allegations made against adults who work with pupils;
- reduce the incidence of positions of trust being abused or misused.

Employers should be familiar with, and know how to access, their Local Safeguarding Children Board's policy and procedures for managing allegations against staff.

### 2.3. Underpinning Principles

- The welfare of the child is paramount.<sup>8</sup>
- It is the responsibility of all adults to safeguard and promote the welfare of pupils. This responsibility extends to a duty of care for those adults employed, commissioned or contracted to work with pupils.
- Adults who work with children are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions.
- Adults should work and be seen to work, in an open and transparent way.

<sup>7</sup> Previously DFES

<sup>8</sup> Children Act 1989

- The same professional standards should always be applied regardless of culture, disability, gender, language, racial origin, religious belief and/or sexual identity.
- Adults should continually monitor and review their practice and ensure they follow the guidance contained in this document.

## 2.4. Definitions

For ease of reading, references are often made to "school". This term is interchangeable with all other types of educational establishments e.g. FE Institutions, Sixth Form Colleges, Pupil Referral Units.

**Pupils/Students/Children and Young people:** Throughout this document references are made to "pupils, students and children and young people". These terms are interchangeable and refer to children who have not yet reached their 18<sup>th</sup> birthday.

**Adults:** References to 'adults' or 'volunteers' refer to any adult who is employed, commissioned or contracted to work with or on behalf of pupils in either a paid or unpaid capacity.

**Headteacher/Manager:** These terms refers to those adults who have responsibility for managing staff and/or services including the supervision of employees and/or volunteers at any level.

**Employer:** The term 'employer' refers to the school/service which employs, or contracts to use the services of individuals in pursuit of the goals of that school/service. In the context of this document, the term 'employer' is also taken to include 'employing' the unpaid services of volunteers.

**Safeguarding:** Process of protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables children to have optimum life chances and enter adulthood successfully<sup>9</sup>.

**Duty of Care:** The duty which rests upon an individual or school/service to ensure that all reasonable steps are taken to ensure the safety of a child or young person involved in any activity or interaction for which that individual or school/service is responsible. Any person in charge of, or working with pupils in any capacity is considered, both legally and morally to owe them a duty of care.

## 2.5. How to Use the Document

This document is relevant to both individuals and schools/services working with or on behalf of pupils. Where an individual works independently and does not work as part of a school/service references made to the 'senior manager' should be taken to refer to parents or those with parenting responsibilities.

Each section provides general guidance about a particular aspect of work undertaken with pupils with, in the right hand column, specific guidance about which behaviours should be avoided and which are recommended. Some schools/services may need to adapt or add to the guidance to meet their specific practices or contexts. There are also variations of this document which have been written specifically for a generic audience or have been adapted for specific agencies. The diagram in Appendix 1 illustrates how the guidance could be used as a basis for developing specific agency guidance. Appendix 2 provides a visual framework for understanding how the document fits with safer recruitment and selection and procedures and those which relate to disciplinary proceedings.

<sup>9</sup> Working Together to Safeguard Children 2006. HM Government (WT 2006)

It is recommended that schools/services use this guidance to develop and promote safer working practice by ensuring that all employees and volunteers are made aware of its contents, have access to the document and understand the expectation that they will work to it.

Incorporating the use of this document in recruitment and selection processes will help to prevent and deter unsuitable people from working with children and young people. Providing employees and volunteers with clear guidance on appointment and revisiting this guidance through induction, supervision, performance management, training programmes etc, will also help to ensure a safer children's workforce. Headteachers, Chairs and Governing bodies will be better placed to deal with unsuitable or inappropriate behaviour if their expectations have been made clear and reinforced throughout a person's employment and there is evidence that this has been done.

Individuals should follow this guidance in their day to day practice. It should also be referred to when taking on new work, different duties or additional responsibilities.

## Section 3: Guidance for Safe Working Practice

### 1. Context

Staff working in education settings have a crucial role to play in shaping the lives of young people. They have a unique opportunity to interact with children and young people in ways that are both affirming and inspiring. This guidance has been produced to help adults establish the safest possible learning and working environments which safeguard children and young people and reduce the risk of adults working with them being falsely accused of improper or unprofessional conduct.

*This means that these guidelines:*

- apply to all adults working in education settings whatever their position, role, or responsibilities may provide guidance where an individual's suitability to work with pupils has been called into question.

### 2. 'Unsuitability'<sup>10</sup>

The guidance contained in this document is an attempt to identify what behaviours are expected of adults who work with pupils. Adults whose practice deviates from this guidance and/or their professional or employment-related code of conduct may bring into question their suitability to work with pupils or children and young people in any capacity.

*This means that adults should:*

- have a clear understanding about the nature and content of this document
- discuss any uncertainties or confusion with their Headteacher or line manager
- understand what behaviours may call into question their suitability to continue to work with children and young people.

### 3. Duty of Care

Teachers and other education staff are accountable for the way in which they exercise authority; manage risk; use resources; and protect pupils from discrimination and avoidable harm.

*This means that adults should:*

- understand the responsibilities, which are part of their employment or role, and be aware that sanctions will be applied if these provisions are breached
- always act, and be seen to act, in the child's best interests
- avoid any conduct which would lead any reasonable person to question their motivation and intentions
- take responsibility for their own actions and behaviour

All staff, whether paid or voluntary, have a duty to keep young people safe and to protect them from sexual, physical and emotional harm. Children have a right to be safe and to be treated with respect and dignity. It follows that trusted adults are expected to take reasonable steps to ensure the safety and well-being of pupils. Failure to do so may be regarded as professional neglect.

The duty of care is, in part, exercised through the development of respectful, caring and professional relationships between staff and pupils and behaviour by staff that demonstrates integrity, maturity and good judgement.

The public, local authorities, employers and parents have legitimate expectations about the nature of professional involvement in the lives of pupils. When individuals accept a role that involves working with children and young people, they need to understand and acknowledge the

*This means that employers should:*

<sup>10</sup> WT 2006 Chapter 6, page 153.

responsibilities and trust inherent in that role.

Employers have a duty of care towards their employees under the Health and Safety at Work Act 1974<sup>11</sup> which requires them to provide a safe working environment for staff and guidance about safe working practices. Thus, employers have a duty of care for the well-being of employees and to ensure that employees are treated fairly and reasonably in all circumstances. Staff who are subject to an allegation should therefore be supported and the principles of natural justice applied

The Health and Safety Act 1974 also imposes a duty on employees<sup>12</sup> to take care of themselves and anyone else who may be affected by their actions or failings. An employer's duty of care and the staff duty of care towards children should not conflict. This 'duty' can be demonstrated through the use and implementation of these guidelines.

The Governing Body of a school controls the use of the school premises both during and outside school hours, except where a trust deed allows a person other than the governing body to control the use of premises, or a transfer of control agreement has been made.

Where the Governing Body provides services or activities directly under the supervision or management of school staff the school's arrangements for safeguarding must be followed.

#### 4. Confidentiality

Members of staff may have access to confidential information about pupils in order to undertake their every day responsibilities. In some circumstances staff may be given highly sensitive or private information. They should never use confidential or personal information about a pupil or her/his family for their own, or others' advantage (including that of partners, friends, relatives or other schools/services). Information must never be used to intimidate, humiliate, or embarrass the pupil.

Confidential information about a child or young person should never be used casually in conversation or shared with any person other than on a need-to-know basis. In circumstances where the child's identity does not need to be disclosed the information should be used anonymously.

There are some circumstances in which a member of staff may be expected to share information about a child, for example when abuse is alleged or suspected. In such cases, individuals have a duty to pass information on without delay,

- *foster a culture of openness and support*
- *ensure that systems are in place for concerns to be raised*
- *ensure that there is in place effective recording systems which confirm discussions, decisions and the outcomes of any actions taken.*
- *ensure that staff are not placed in situations which render them particularly vulnerable*
- *ensure that all staff are aware of expectations, policies and procedures*

*This means that Governing Bodies should:*

- *ensure that appropriate safeguarding and child protection policies and procedures are adopted, implemented and monitored in school*
- *ensure that, where services or activities are provided by another body, the body concerned has appropriate safeguarding policies and procedures*

*This means that adults:*

- *be clear about when information can be shared and in what circumstances it is appropriate to do so*
- *are expected to treat information they receive about pupils in a discreet and confidential manner*
- *should seek advice from a senior member of staff if they are in any doubt about sharing information they hold or which has been requested of them*
- *need to know to whom any concerns or allegations should be reported*

<sup>11</sup> Health and Safety at Work Act 1974 Part I, Section. 2 (1) and (2)

<sup>12</sup> Health and Safety at Work Act 1974 Part I, Section.7

but only to those with designated child protection responsibilities.

If a member of staff is in any doubt about whether to share information or keep it confidential he or she should seek guidance from a senior member of staff. Any media or legal enquiries should be passed to senior management.

The storing and processing of personal information about pupils is governed by the Data Protection Act 1998. Employers should provide clear advice to staff about their responsibilities under this legislation.

The booklet "What To Do If You're Worried A Child Is Being Abused"<sup>13</sup> contains further guidance<sup>14</sup> on sharing information to protect children.

## 5. Making a Professional Judgement

This guidance cannot provide a complete checklist of what is, or is not appropriate behaviour for adults in all circumstances. There may be occasions and circumstances in which adults have to make decisions or take action in the best interests of the child or young person which could contravene this guidance or where no guidance exists. Individuals are expected to make judgements about their behaviour in order to secure the best interests and welfare of the children in their charge. Such judgements should always be recorded and shared a member of the senior management team and with the parent or carer. In undertaking these actions individuals will be seen to be acting reasonably.

Adults should always consider whether their actions are warranted, proportionate and safe and applied equitably.

*This means that where no specific guidance exists adults should:*

- *discuss the circumstances that informed their action, or their proposed action, with the Headteacher, senior member of the team and the parent/carer.*
- *report any actions which could be mis-interpreted to their senior manager*
- *always discuss any misunderstanding, accidents or threats with a senior manager*
- *record any areas of disagreement about course of action taken and if necessary referred to a higher authority*
- *ensure they have copies of records which confirm decisions, discussions and reasons why actions were taken.*

## 6. Power and Positions of Trust

As a result of their knowledge, position and/or the authority invested in their role, all adults working in education settings are in positions of trust in relation to the young people in their care. Broadly speaking, a relationship of trust can be described as one in which one party is in a position of power or influence over the other by virtue of their work or the nature of their activity. It is vital for all those in positions of trust to understand the power this can give them over those they care for and the responsibility they must exercise as a consequence of this relationship.<sup>15</sup> A relationship between an adult and a child or young person

*This means that adults should not:*

- *use their position to gain access to information for their own or others' advantage*
- *use their position to intimidate, bully, humiliate, threaten, coerce or undermine pupils*
- *use their status and standing to form or promote relationships which are of a sexual nature, or which may become so*

<sup>13</sup> What to Do if you are Worried that a Child is Being Abused. Department of Health May 2003

<sup>14</sup> [www.doh.gov.uk/safeguardingchildren/index.htm](http://www.doh.gov.uk/safeguardingchildren/index.htm)

<sup>15</sup> Caring for Young People and the Vulnerable. Guidance for Preventing Abuse of Trust Home Office

is not a relationship between equals. There is potential for exploitation and harm of vulnerable young people. Adults therefore have a responsibility to ensure that an unequal balance of power is not used for personal advantage or gratification.

Adults should always maintain appropriate professional boundaries and avoid behaviour which might be misinterpreted by others. They should report and record any incident with this potential.

Where a person aged 18 or over is in a specified position of trust<sup>16</sup> with a child under 18, it is an offence for that person to engage in sexual activity with or in the presence of that child, or to cause or incite that child to engage in or watch sexual activity.

## 7. Propriety and Behaviour

All adults working with pupils have a responsibility to maintain public confidence in their ability to safeguard the welfare and best interests of pupils. It is therefore expected that they will adopt high standards of personal conduct in order to maintain the confidence and respect of their colleagues, pupils or students public in general and all those with whom they work.

There may be times, for example, when an adult's behaviour or actions in their personal life come under scrutiny from local communities, the media or public authorities. This could be because their behaviour is considered to compromise their position in their workplace or indicate an unsuitability to work with pupils. Misuse of drugs, alcohol or acts of violence would be examples of such behaviour.

Adults in contact with pupils should therefore understand and be aware, that safe practice also involves using judgement and integrity about behaviours in places other than the work setting.

The behaviour of an adult's partner or other family members may raise similar concerns and require careful consideration by an employer as to whether there may be a potential risk to pupils in the workplace.

## 8. Dress and Appearance

A person's dress and appearance are matters of personal choice and self-expression. However adults should dress in ways which are appropriate to their role and this may need to be different to how they dress when not at work.

Adults who work with pupils should ensure they are dressed

*This means that adults should not:*

- *behave in a manner which would lead any reasonable person to question their suitability to work with children or act as a role model.*
- *make, or encourage others to make, unprofessional personal comments which scapegoat, demean or humiliate, or which might be interpreted as such*

*This means that adults should:*

- *be aware that behaviour in their personal lives may impact upon their work with pupils*
- *follow any codes of conduct deemed appropriate by their school/service*
- *understand that the behaviour and actions of their partner (or other family members) may raise questions about their suitability to work with pupils*

*This means that adults should wear clothing which:*

- *is appropriate to their role*
- *is not likely to be viewed as offensive, revealing, or sexually*

<sup>16</sup> Sexual Offences Act 2003. Sect 16-19 re-enacts and amends offence of abuse of position of trust

appropriately for the tasks and the work they undertake.

Those who dress in a manner which could be considered as inappropriate could render themselves vulnerable to criticism or allegations.

- provocative*
- *does not distract, cause embarrassment or give rise to misunderstanding*
- *is absent of any political or otherwise contentious slogans*
- *is not considered to be discriminatory and is culturally sensitive*

## 9. The Use of Personal Living Space<sup>17</sup>

No child or young person should be in or invited into, the home<sup>18</sup> of an adult who works with them, unless the reason for this has been firmly established and agreed with parents/ carers and a senior manager or Headteacher.

It is not appropriate for any school/service to expect or request that private living space be used for work with pupils. Neither is it appropriate for school authorities to expect or request that private living space be used to see pupils for e.g. discussion of reports, academic reviews, tutorials, pastoral care or counselling. If these activities are required, management should ensure that appropriate accommodation is found elsewhere in the school.

Under no circumstances should pupils assist with chores or tasks in the home of an adult who works with them. Neither should they be asked to do so by friends or family of that adult.

*This means that adults should:*

- *be vigilant in maintaining their privacy and mindful of the need to avoid placing themselves in vulnerable situations*
- *challenge any request for their accommodation to be used as an additional resource for the school or school/service*
- *be mindful of the need to maintain professional boundaries*
- *refrain from asking pupils/students to undertake personal jobs or errands*

## 10. Gifts, Rewards and Favouritism

All adults should be aware of their school or school/service guidance on rewards including arrangements for the declaration of gifts received and given.

The giving of gifts or rewards to pupils should be part of an agreed policy for supporting positive behaviour or recognising particular achievements. In some situations, the giving of gifts as rewards may be accepted practice for a group of children, whilst in other situations the giving of a gift to an individual child or young person will be part of an agreed plan, recorded and discussed with senior manager and the parent or carer.

It is acknowledged that there may be specific occasions when adult working with a child or young person may consider it appropriate to give a child or young person a small personal gift of insignificant value. This is only acceptable practice where, in line with the agreed policy, the adult has first discussed the giving of the gift and the reason for it, with the Headteacher, senior manager and the parent or carer and the action is recorded. Any gifts should be given openly and

*This means that adults should:*

- *be aware of their school/service's policy on the giving and receiving of gifts*
- *ensure that gifts received or given in situations which may be misconstrued are declared*
- *generally, only give gifts to an individual young person as part of an agreed reward system*
- *where giving gifts other than as above, ensure that these are of insignificant value*
- *ensure that all selection processes which concern pupils are fair and that wherever practicable these are undertaken and agreed by more than one member of staff*

<sup>17</sup> See also Section 13 Social Contact

<sup>18</sup> This includes any home or domestic settings used or frequented by the adult

not be based on favouritism. Adults need to be aware however, that the giving of gifts can be misinterpreted by others as a gesture either to bribe or 'groom'<sup>19</sup> a young person.

Staff should exercise care when selecting pupils for school teams, productions, trips and/or specific work tasks in order to avoid perceptions of favouritism or injustice. Similar care should be exercised when pupils are excluded from an activity. Methods of selection and exclusion should always be subject to clear, agreed criteria.

Care should also be taken to ensure that adults do not accept any gift that might be construed as a bribe by others, or lead the giver to expect preferential treatment.

There are occasions when children, young people or parents wish to pass small tokens of appreciation to adults e.g. on special occasions or as a thank-you and this is acceptable. However, it is unacceptable to receive gifts on a regular basis or of any significant value.

### 11. Infatuations

Occasionally, a child or young person may develop an infatuation with an adult who works with them. These adults should deal with these situations sensitively and appropriately to maintain the dignity and safety of all concerned. They should remain aware, however, that such infatuations carry a high risk of words or actions being misinterpreted and should therefore make every effort to ensure that their own behaviour is above reproach.

An adult, who becomes aware that a child or young person is developing an infatuation, should discuss this at the earliest opportunity with a Headteacher, senior manager and parent/carer so appropriate action can be taken to avoid any hurt, distress or embarrassment.

*This means that adults should:*

- *report and record any incidents or indications (verbal, written or physical) that suggest a child or young person may have developed an infatuation with a member of staff*
- *always acknowledge and maintain professional boundaries*

### 12. Communication with Pupils (including the Use of Technology)

In order to make best use of the many educational and social benefits of new technologies, pupils need opportunities to use and explore the digital world, using multiple devices from multiple locations. It is now recognised that that e.safety risks are posed more by behaviours and values than the technology itself.<sup>20</sup> Adults working in this area must therefore ensure that they establish safe and responsible online behaviours. This means working to local and national guidelines on acceptable user policies.<sup>21</sup> These detail the

*This means that schools/services should:*

- *have in place an Acceptable Use policy (AUP)*
- *continually self-review e.safety policies in the light of new and emerging technologies*
- *have a communication policy which specifies acceptable and permissible modes of*

<sup>19</sup> 'grooming' – the act of gaining the trust of a child so that sexual abuse can take place.

<sup>20</sup> AUPs in Context: Establishing safe and responsible online behaviours

<sup>21</sup> [www.becta.org.uk/publications/aupsincontext](http://www.becta.org.uk/publications/aupsincontext)

way in which new and emerging technologies may and may not be used and identify the sanctions for misuse. Learning Platforms are now widely established and clear agreement by all parties about acceptable and responsible use is essential.

Communication between pupils and adults, by whatever method, should take place within clear and explicit professional boundaries. This includes the wider use of technology such as mobile phones text messaging, e-mails, digital cameras, videos, web-cams, websites and blogs. Adults should not share any personal information with a child or young person. They should not request, or respond to, any personal information from the child/young person, other than that which might be appropriate as part of their professional role. Adults should ensure that all communications are transparent and open to scrutiny.

Adults should also be circumspect in their communications with children so as to avoid any possible misinterpretation of their motives or any behaviour which could be construed as grooming. They should not give their personal contact details to pupils including e-mail, home or mobile telephone numbers, unless the need to do so is agreed with senior management and parents/carers. E-mail or text communications between an adult and a child/young person outside agreed protocols may lead to disciplinary and/or criminal investigations. This also includes communications through internet based web sites.

Internal e-mail systems should only be used in accordance with the school/service's policy.

Further information can be obtained from <http://www.becta.org.uk/>

### 13. Social Contact

Adults should not establish or seek to establish social contact with pupils for the purpose of securing a friendship or to pursue or strengthen a relationship. If a pupil or parent seeks to establish social contact, or if this occurs coincidentally, the member of staff should exercise her/his professional judgement in making a response. There will be occasions when there are social contacts between pupils and staff, where for example the parent and teacher are part of the same social circle. These contacts however, will be easily recognised and openly acknowledged.

Nevertheless, there must be awareness on the part of those working with children and young people that some social contacts, especially where these are not common knowledge can be misconstrued as being part a grooming process. This can also apply to social contacts made through outside interests or through the staff member's own family.

#### *communication*

*This means that adults should:*

- *ensure that personal social networking sites are set at private and pupils are never listed as approved contacts*
- *never use or access social networking sites of pupils.*
- *not give their personal contact details to pupils, including their mobile telephone number*
- *only use equipment e.g. mobile phones, provided by school/service to communicate with children, making sure that parents have given permission for this form of communication to be used*
- *only make contact with children for professional reasons and in accordance with any school/service policy*
- *recognise that text messaging should only be used as part of an agreed protocol and when other forms of communication are not possible*
- *not use internet or web-based communication channels to send personal messages to a child/young person*

*This means that adults should:*

- *have no secret social contact with pupils or their parents*
- *consider the appropriateness of the social contact according to their role and nature of their work*
- *always approve any planned social contact with children or parents with senior colleagues,*
- *advise senior management of any social contact they have with a child or a parent with who whom they work, which may give rise to concern*
- *report and record any situation, which may place a child at risk or which may compromise the school/service or their own professional standing*
- *be aware that the sending of personal communications such as birthday or*

It is recognised that staff can support a parent who may be in particular difficulty. Care needs to be exercised in those situations where the parent comes to depend upon the staff member for support outside their professional role. This situation should be discussed with senior management and where necessary referrals made to the appropriate support agency.

#### 14. Sexual Contact

All adults should clearly understand the need to maintain appropriate boundaries in their contacts with pupils. Intimate or sexual relationships between children/young people and the adults who work with them will be regarded as a grave breach of trust. Allowing or encouraging a relationship to develop in a way which might lead to a sexual relationship is also unacceptable.

Any sexual activity between an adult and the child or young person with whom they work may be regarded as a criminal offence and will always be a matter for disciplinary action. All children and young people are protected by specific legal provisions in this respect regardless of whether the child or young person consents or not. The sexual activity referred to does not just involve physical contact including penetrative and non-penetrative acts. It may also include non-contact activities, such as causing children to engage in or watch sexual activity or the production of pornographic material. 'Working Together to Safeguard Children'<sup>22</sup> defines sexual abuse as "forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening".

There are occasions when adults embark on a course of behaviour known as 'grooming' where the sole purpose is to gain the trust of a child, and manipulate that relationship so sexual abuse can take place. Adults should be aware that consistently conferring inappropriate special attention and favour upon a child might be construed as being part of a 'grooming' process and as such will give rise to concerns about their behaviour.

#### 15. Physical Contact

There are occasions when it is entirely appropriate and proper for staff to have physical contact with pupils, but it is crucial that they only do so in ways appropriate to their professional role.

A 'no touch' approach is impractical for most staff and will in some circumstances be inappropriate. When physical contact is made with pupils this should be in response to their needs at the time, of limited duration and appropriate to their age,

*faith cards should always be recorded and/or discussed with line manager.*

- *understand that some communications may be called into question and need to be justified.*

*This means that adults should not:*

- *have sexual relationships with pupils*
- *have any form of communication with a child or young person which could be interpreted as sexually suggestive or provocative i.e. verbal comments, letters, notes, electronic mail, phone calls, texts, physical contact*
- *make sexual remarks to, or about, a child/young person*
- *discuss their own sexual relationships with or in the presence of pupils*

*This means that adults should:*

- *ensure that their relationships with pupils clearly take place within the boundaries of a respectful professional relationship*
- *take care that their language or conduct does not give rise to comment or speculation. Attitudes, demeanour and language all require care and thought, particularly when members of staff are dealing with adolescent boys and girls.*

*This means that adults should:*

- *be aware that even well intentioned physical contact may be misconstrued by the child, an observer or by anyone to whom this action is described*
- *never touch a child in a way which may be considered indecent*
- *always be prepared to report and explain actions and accept that all*

<sup>22</sup> Working Together to Safeguard Children. A guide to interagency working to safeguard and promote the welfare of children HM Government 2006

stage of development, gender, ethnicity and background. Appropriate physical contact in schools will occur most often with younger pupils.

It is not possible to be specific about the appropriateness of each physical contact, since an action that is appropriate with one child in one set of circumstances may be inappropriate in another, or with a different child. Staff should therefore, use their professional judgement at all times.

Physical contact should never be secretive, or for the gratification of the adult, or represent a misuse of authority. If a member of staff believes that an action could be misinterpreted, the incident and circumstances should be recorded as soon as possible in the school's incident book and, if appropriate, a copy placed on the child's file.

Physical contact, which occurs regularly with an individual child or young person, is likely to raise questions unless the justification for this is part of a formally agreed plan (for example in relation to pupils with SEN or physical disabilities). Any such contact should be the subject of an agreed and open school policy and subject to review. Where feasible, staff should seek the child's permission before initiating contact. Staff should listen, observe and take note of the child's reaction or feelings and – so far as is possible – use a level of contact and/or form of communication which is acceptable to the child for the minimum time necessary.

The general culture of 'limited touch' should be adapted, where appropriate, to the individual requirements of each child. Children with special needs may require more physical contact to assist their everyday learning. The arrangements should be understood and agreed by all concerned, justified in terms of the child's needs, consistently applied and open to scrutiny.

It is recognised that some children may seek inappropriate physical contact. Adults should be particularly aware of this especially when it is known that a child has suffered previous abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to some actions being misinterpreted. In all circumstances where a child or young person initiates inappropriate physical contact, it is the responsibility of the adult to sensitively deter the child and help them understand the importance of personal boundaries. Such circumstances must always be reported and discussed with a senior manager and the parent/carer.

- physical contact be open to scrutiny*
- *not indulge in horseplay*
  - *always encourage children, where possible, to undertake self-care tasks independently*
  - *work within Health and Safety regulations*
  - *be aware of cultural or religious views about touching and always be sensitive to issues of gender*
  - *understand that physical contact in some circumstances can be easily misinterpreted*

*This means that schools/services should:*

- *ensure they have a system in place for recording incidents and the means by which information about incidents and outcomes can be easily accessed by senior management*
- *make adults aware of relevant professional or school/service guidance in respect of physical contact with children and meeting medical needs of pupils where appropriate*
- *be explicit about what physical contact is appropriate for adults working in their setting*
- *provide staff, on a "need to know" basis, with relevant information about vulnerable pupils in their care*
- *make staff aware of most recent government guidance in respect of physical contact with pupils<sup>23</sup> and meeting medical needs of children and young people in school<sup>24</sup>.*

<sup>23</sup> Section 93 of the Education and Inspections Act 2006

<sup>24</sup> Managing Medicines in schools and early years settings: DCSF/Department of Health 2005

## 16. Other Activities that require Physical Contact

Some adults who work in certain settings, for example sports, drama or outdoor activities or teach specific subjects such as PE or music, will have to initiate some physical contact with children, for example to demonstrate technique in the use of a particular piece of equipment, adjust posture, or perhaps to support a child so they can perform an activity safely or prevent injury. Such activities should be carried out in accordance with existing codes of conduct, regulations and best practice.

Physical contact should take place only when it is necessary in relation to a particular activity. It should take place in a safe and open environment i.e. one easily observed by others and last for the minimum time necessary. The extent of the contact should be made clear to the parent/carer and once agreed, should be undertaken with the permission of the child/young person. Contact should be relevant to their age or understanding and adults should remain sensitive to any discomfort expressed verbally or non-verbally by the child.

Guidance and protocols around safe and appropriate physical contact are provided by national school/service, for example sports governing bodies or major arts school/service, or the school employing school/service and should be understood and applied consistently. Any incidents of physical contact that cause concern or fall outside of these protocols and guidance should be reported to the senior manager and parent or carer.

It is good practice if all parties clearly understand at the outset, what physical contact is necessary and appropriate in undertaking specific activities. Keeping parents/carers, pupils informed of the extent and nature of any physical contact may also prevent allegations of misconduct or abuse arising.

## 17. Behaviour Management

All pupils have a right to be treated with respect and dignity even in those circumstances where they display difficult or challenging behaviour.

Adults should not use any form of degrading treatment to punish a child. The use of sarcasm, demeaning or insensitive comments towards pupils is not acceptable in any situation. Any sanctions or rewards used should be part of a behaviour management policy which is widely publicised and regularly reviewed.

The use of corporal punishment is not acceptable and is unlawful in schools. Whilst there may be a legal defence for parents who physically chastise their children, this does not extend, in any circumstances, to those adults who work with

*This means that adults should:*

- *treat children with dignity and respect and avoid contact with intimate parts of the body*
- *always explain to a child the reason why contact is necessary and what form that contact will take*
- *seek consent of parents where a child or young person is unable to do so because of a disability.*
- *consider alternatives, where it is anticipated that a pupil might misinterpret any such contact,*
- *be familiar with and follow recommended guidance and protocols*
- *conduct activities where they can be seen by others*
- *be aware of gender, cultural or religious issues that may need to be considered prior to initiating physical contact*

*This means that schools/services should:*

- *have up to date guidance and protocols on appropriate physical contact in place that promote safe practice and include clear expectations of behaviour and conduct.*
- *ensure that staff are made aware of this guidance and that safe practice is continually promoted through supervision and training.*

*This means that adults should:*

- *not use force as a form of punishment*
- *try to defuse situations before they escalate*
- *inform parents of any behaviour management techniques used*
- *adhere to the school/service's behaviour management policy*
- *be mindful of factors which may impact upon a child or young person's behaviour e.g. bullying, abuse and where necessary take appropriate action*

or on behalf of pupils.

Where children display difficult or challenging behaviour, adults must follow the behaviour policy outlined by their school or service and use strategies appropriate to the circumstance and situation. The use of physical intervention can only be justified in exceptional circumstances and must be used as a last resort when other behaviour management strategies have failed.

Where a child has specific needs in respect of particularly challenging behaviour, a positive handling plan may be drawn up and agreed by all parties. Only in these circumstances should an adult deviate from the behaviour management policy of the school/service.

## 18. Use of Control and Physical Intervention

There are circumstances in which adults working with children displaying extreme behaviours can legitimately intervene by using either non-restrictive or restrictive physical interventions. This is a complex area and adults and school/service must have regard to legislation<sup>25</sup> and government guidance<sup>26,27</sup> in the development and implementation of their own policies and practice.

The use of physical intervention should, wherever possible, be avoided. It should only be used to manage a child or young person's behaviour if it is necessary to prevent personal injury to the child, other children or an adult, to prevent serious damage to property or in what would reasonably be regarded as exceptional circumstances. When physical intervention is used it should be undertaken in such a way that maintains the safety and dignity of all concerned

The scale and nature of any physical intervention must be proportionate to both the behaviour of the individual to be controlled and the nature of the harm they may cause. The minimum necessary force should be used and the techniques deployed in line with recommended policy and practice.

Under no circumstances should physical force or intervention be used as a form of punishment. The duty of care which applies to all adults and school/service working with pupils requires that reasonable measures are taken to prevent children being harmed. The use of unwarranted physical force is likely to constitute a criminal offence.

In settings where restrictive physical interventions may need

*This means that schools/services should:*

- *have in place appropriate behaviour management policies*
- *where appropriate, develop positive handling plans in respect of an individual child or young person.*

*This means that adults should:*

- *adhere to the school/service's physical intervention policy*
- *always seek to defuse situations*
- *always use minimum force for the shortest period necessary*
- *record and report as soon as possible after the event any incident where physical intervention has been used.*

*This means that schools/services should:*

- *have a policy on the use of physical intervention in place that complies with government guidance and legislation and describes the context in which it is appropriate to use physical intervention*
- *ensure that an effective recording system is in place which allows for incidents to be tracked and monitored*
- *ensure adults are familiar with the above*
- *ensure that staff are appropriately trained*

<sup>25</sup> Education and Inspections Act 2006 (93)

<sup>26</sup> The use of force to control or restrain pupils: non statutory guidance for schools in England (DCSF 2007)

<sup>27</sup> Screening and searching pupils for weapons: guidance for school staff (DCSF 2007)

to be employed regularly, i.e. where adults are working with children with extreme behaviours associated with learning disability or autistic spectrum disorders, the employer should have a policy on the use of such intervention, as part of a wider behaviour management policy. Individual care plans, drawn up in consultation with parents/carers and where appropriate, the child, should set out the strategies and techniques to be used and those which should be avoided. Risk assessments should be carried out where it is foreseeable that restrictive physical intervention may be required.

In all cases where physical intervention is employed the incident and subsequent actions should be documented and reported. This should include written and signed accounts of all those involved, including the child or young person. The parents/carers should be informed the same day.

### 19. Children and Young People in Distress

There may be occasions when a distressed child needs comfort and reassurance and this may involve physical contact. Young children, in particular, may need immediate physical comfort, for example after a fall, separation from parent etc. Adults should use their professional judgement to comfort or reassure a child in an age-appropriate way whilst maintaining clear professional boundaries.

Where an adult has a particular concern about the need to provide this type of care and reassurance, or is concerned that an action may be misinterpreted, this should be reported and discussed with a senior manager and parents/carers.

*This means the adult should:*

- *consider the way in which they offer comfort and reassurance to a distressed child and do it in an age-appropriate way*
- *be circumspect in offering reassurance in one to one situations, but always record such actions in these circumstances*
- *follow professional guidance or code of practice*
- *never touch a child in a way which may be considered indecent*
- *record and report situations which may give rise to concern from either party*
- *not assume that all children seek physical comfort if they are distressed*

### 20. Intimate Care

Some job responsibilities necessitate intimate physical contact with children on a regular basis, for example assisting young children with toileting, providing intimate care for children with disabilities or in the provision of medical care. The nature, circumstances and context of such contact should comply with professional codes of practice or guidance and/or be part of a formally agreed plan, which is regularly reviewed. The additional vulnerabilities that may arise from a physical or learning disability should be taken into account and be recorded as part of an agreed care plan. The emotional responses of any child to intimate care should be carefully and sensitively observed, and where necessary, any concerns passed to Headteacher or senior managers and parents/carers.

*This means that adults should:*

- *adhere to the school/service's intimate care guidelines or code of practice*
- *make other staff aware of the task being undertaken*
- *explain to the child what is happening*
- *consult with senior managers and parents/carers where any variation from agreed procedure/care plan is necessary*
- *record the justification for any variations to the agreed procedure/care plan and share this information with parents*

All children have a right to safety, privacy and dignity when contact of a physical or intimate nature is required and depending on their abilities, age and maturity should be encouraged to act as independently as possible.

The views of the child should be actively sought, wherever possible, when drawing up and reviewing formal arrangements. As with all individual arrangements for intimate care needs, agreements between the child, parents/carers and the school/service must be negotiated and recorded.

## 21. Personal Care

Young people are entitled to respect and privacy at all times and especially when in a state of undress, changing clothes, bathing or undertaking any form of personal care. There are occasions where there will be a need for an appropriate level of supervision in order to safeguard young people and/or satisfy health and safety considerations. This supervision should be appropriate to the needs and age of the young people concerned and sensitive to the potential for embarrassment.

Adults need to be vigilant about their own behaviour, ensure they follow agreed guidelines and be mindful of the needs of the pupils with whom they work.

## 22. First Aid and Administration of Medication

Health and safety legislation places duties on all employers to ensure appropriate health and safety policies and equipment are in place and an appropriate person is appointed to take charge of first-aid arrangements. Any employee may volunteer to undertake this task but it is not a contractual requirement and appropriate training should be given before an individual takes on a role which may require administering first aid or medication.

Some pupils may need medication during school hours. In circumstances where children need medication regularly a health care plan should be drawn up to ensure the safety and protection of pupils and staff. With the permission of parents, children should be encouraged to self administer medication or treatment including, for example any ointment, sun cream or use of inhalers.

If a member of staff is concerned or uncertain about the amount or type of medication being given to a pupil, this should be discussed with the appropriate senior colleague at the earliest opportunity. When administering first aid, wherever possible, staff should ensure that another adult is present, or aware of the action being taken. Parents should

- ensure that any changes to the agreed care plan are discussed, agreed and recorded.

*This means that adults should:*

- avoid any physical contact when children are in a state of undress
- avoid any visually intrusive behaviour
- where there are changing rooms announce their intention of entering

*This means that adults should not:*

- change in the same place as children
- shower or bathe with children
- assist with any personal care task which a child or young person can undertake by themselves

*This means that schools/services should:*

- ensure staff understand the extent and limitations of their role in applying basic care and hygiene tasks for minor abrasions and understand where an injury requires more experienced intervention
- ensure there are trained and named individuals to undertake first aid responsibilities
- ensure training is regularly monitored and updated
- always ensure that arrangements are in place to obtain parental consent for the administration of first aid or medication

*This means that adults should:*

- adhere to the school/service's policy for administering first aid or medication
- comply with the necessary reporting requirements

always be informed when first aid has been administered.

There should be due regard to current guidance.<sup>28,29</sup>

- *make other adults aware of the task being undertaken*
- *explain to the child what is happening.*
- *always act and be seen to act in the child's best interests*
- *report and record any administration of first aid or medication*
- *have regard to any health plan which is in place*
- *always ensure that an appropriate health/risk assessment is undertaken prior to undertaking certain activities*

### 23. One to One Situations

Every organisations working with or on behalf of children and young people should consider one to one situations when drawing up their policies. This includes schools and other education settings.

It is not realistic to state that one to one situations should never take place. It is however, appropriate to state that where there is a need, agreed with a senior manager and/or parents/carers, for an adult to be alone with a child or young person, certain procedures and explicit safeguards must be in place. Adults should be offered training and guidance in the use of any areas of the workplace which may place themselves or children in vulnerable situations.

One to one situations have the potential to make child/young person more vulnerable to harm by those who seek to exploit their position of trust. Adults working in one to one settings with pupils may also be more vulnerable to unjust or unfounded allegations being made against them. Both possibilities should be recognised so that when one to one situations are unavoidable, reasonable and sensible precautions are taken. Every attempt should be made to ensure the safety and security of pupils and the adults who work with them.

There are occasions where managers will need to undertake a risk assessment in relation to the specific nature and implications of one to one work. These assessments should take into account the individual needs of the child/young person and the individual worker and any arrangements should be reviewed on a regular basis.

Pre-arranged meetings with pupils away from the school premises should not be permitted unless approval is obtained from their parent and the Headteacher or other senior colleague with delegated authority.

*This means that adults should:*

- *ensure that when lone working is an integral part of their role, full and appropriate risk assessments have been conducted and agreed.*
- *avoid meetings with a child or young person in remote, secluded areas,*
- *always inform other colleagues and/or parents/carers about the contact(s) beforehand, assessing the need to have them present or close by*
- *avoid use of 'engaged' or equivalent signs wherever possible. Such signs may create an opportunity for secrecy or the interpretation of secrecy*
- *always report any situation where a child becomes distressed or angry to a senior colleague*
- *carefully consider the needs and circumstances of the child/children when in one to one situations*

<sup>28</sup> DfES/DOH Managing Medicine in Schools and Early Years Ref 1448-2005 DCL-EN March 2005

<sup>29</sup> DfES Guidance for First Aid in School 1988.

<http://www.teachernet.gov.uk/wholeschool/healthandsafety/firstaid/>

## 24. Home Visits

All work with pupils and parents should, wherever possible, be undertaken in the school or other recognised workplace. There are however occasions, in response to urgent or specific situations where it is necessary to make one-off or regular home visits.

In these circumstances it is essential that appropriate policies and related risk assessments are in place to safeguard pupils and the adults who work with them.

A risk assessment should include an evaluation of any known factors regarding the child/young person, parents and others living in the household. Risk factors such as hostility, child protection concerns, complaints or grievances can make adults more vulnerable to an allegation. Specific consideration should be given to visits outside of 'office hours' or in remote or secluded locations. Following an assessment, appropriate risk management measures should be in place before visits are agreed. Where little or no information is available, visits should not be made alone.

Where a programme of work is to be undertaken in the home an appropriate works space should be provided and a written work plan/contract should be agreed with the pupil and parent. This should include: clear objectives; content; timing; and duration of sessions; ground-rules; child protection and confidentiality statements. The plan should take into account the preferences of pupil and parent. There should also be an agreement that the parent or other suitable adult will remain in the home throughout the session.

Where the situation is such that changes in agreed work arrangements are required, a quick assessment will be necessary to determine if the session can continue. The Headteacher or line manager should then be informed as soon as is practically possible. Emergency situations should be reported to the police or social care and to the Headteacher/parent as appropriate.

## 25. Transporting Pupils

In certain situations e.g. out of school activities, staff or volunteers may agree to transport children. A designated member of staff should be appointed to plan and provide oversight of all transporting arrangements and respond to any difficulties that may arise.

Wherever possible and practicable it is advisable that transport is undertaken other than in private vehicles, with at least one adult additional to the driver acting as an escort. There will be occasions when adults are expected or asked to transport children as part of their duties. Adults, who are

*These means that adults should:*

- agree the purpose for any home visit with senior management, unless this is an acknowledged and integral part of their role e.g. home tutors
- adhere to agreed risk management strategies
- always make detailed records including times of arrival and departure and work undertaken
- ensure any behaviour or situation which gives rise to concern is discussed with their manager and, where appropriate action is taken
- never make a home visit outside agreed working arrangements

*This means that employers should:*

- ensure that they have home visit and lone-working policies of which all adults are made aware. These should include arrangements for risk assessment and management
- ensure that all visits are justified and recorded
- ensure that adults are not exposed to unacceptable risk
- ensure that adults have access to a mobile telephone and an emergency contact person

*This means that all school/service:*

- should have appropriate policies for transporting pupils

*This means that adults should:*

- ensure they are fit to drive and free from any drugs, alcohol or medicine which is likely to impair judgement and/or ability to drive
- be aware that the safety and welfare

expected to use their own vehicles for transporting children should ensure that the vehicle is roadworthy, appropriately insured and that the maximum capacity is not exceeded.

It is a legal requirement that all passengers should wear seat belts and it is the responsibility of the staff member to ensure that this requirement is met. Adults should also be aware of current legislation and adhere to the use of car seats for younger children. Where adults transport children in a vehicle which requires a specialist license/insurance e.g. PCV or LGV<sup>30</sup> staff should ensure that they have an appropriate licence and insurance to drive such a vehicle.

It is inappropriate for adults to offer lifts to a child or young person outside their normal working duties, unless this has been brought to the attention of the line manager and has been agreed with the parents/carers.

There may be occasions where the child or young person requires transport in an emergency situation or where not to give a lift may place a child at risk. Such circumstances must always be recorded and reported to a senior manager and parents/carers.

## 26. Educational Visits and After-School Activities

Adults should take particular care when supervising pupils on trips and outings, where the setting is less formal than the usual workplace. Adults remain in a position of trust and need to ensure that their behaviour remains professional at all times and stays within clearly defined professional boundaries.

Where out of school activities include overnight stays, careful consideration needs to be given to sleeping arrangements. Children, young people, adults and parents should be informed of these prior to the start of the trip. In all circumstances, those organising trips and outings must pay careful attention to ensuring safe staff/child ratios and to the gender mix of staff especially on overnight stays.

Health and Safety arrangements require members of staff to keep colleagues/employers aware of their whereabouts, especially when involved in activities outside the usual workplace.

## 27. Photography and Videos

Working with pupils may involve the taking or recording of images. Any such work should take place with due regard to the law and the need to safeguard the privacy, dignity, safety and well being of pupils. Informed written consent from parents or carers and agreement, where possible, from the

*of the child is their responsibility until they are safely passed over to a parent/carer*

- *record details of the journey in accordance with agreed procedures*
- *ensure that their behaviour is appropriate at all times*
- *ensure that there are proper arrangements in place to ensure vehicle, passenger and driver safety. This includes having proper and appropriate insurance for the type of vehicle being driven*
- *ensure that any impromptu or emergency arrangements of lifts are recorded and can be justified if questioned*

*This means that adults should:*

- *always have another adult present in out of workplace activities, unless otherwise agreed with a senior manager*
- *undertake risk assessments in line with their school/service's policy where applicable*
- *have parental consent to the activity*
- *ensure that their behaviour remains professional at all times(see section 7)*
- *never share beds with a child/pupils.*
- *not share bedrooms unless it involves a dormitory situation and the arrangements have been previously discussed with senior manager, parents and pupils*

*This means that adults should:*

- *be clear about the purpose of the activity and about what will happen to the images when the activity is*

<sup>30</sup> For further information see [www.dvla.gov.uk](http://www.dvla.gov.uk)

child or young person, should always be sought before an image is taken for any purpose.

Careful consideration should be given as to how activities involving the taking of images are organised and undertaken. Care should be taken to ensure that all parties understand the implications of the image being taken especially if it is to be used for any publicity purposes or published in the media, or on the Internet. There also needs to be an agreement as to whether the images will be destroyed or retained for further use, where these will be stored and who will have access to them.

Adults need to remain sensitive to any children who appear uncomfortable, for whatever reason, and should recognise the potential for such activities to raise concerns or lead to misunderstandings.

It is not appropriate for adults to take photographs of children for their personal use.

It is recommended that when using a photograph the following guidance should be followed:

- if the photograph is used, avoid naming the pupil
- if the pupil is named, avoid using their photograph
- schools should establish whether the image will be retained for further use
- images should be securely stored and used only by those authorised to do so.

## 28. Access to Inappropriate Images and Internet Usage

There are no circumstances that will justify adults possessing indecent images of children. Adults who access and possess links to such websites will be viewed as a significant and potential threat to children. Accessing, making and storing indecent images of children is illegal. This will lead to criminal investigation and the individual being barred from working with pupils, if proven.

Adults should not use equipment belonging to their school/service to access adult pornography; neither should personal equipment containing these images or links to them be brought into the workplace. This will raise serious concerns about the suitability of the adult to continue to work with children.

Adults should ensure that pupils are not exposed to any inappropriate images or web links. School/service and adults need to ensure that internet equipment used by children have the appropriate controls with regards to access. e.g. personal passwords should be kept confidential.

*concluded*

- *be able to justify images of children in their possession*
- *avoid making images in one to one situations or which show a single child with no surrounding context*
- *ensure the child/young person understands why the images are being taken and has agreed to the activity and that they are appropriately dressed.*
- *only use equipment provided or authorised by the school*
- *report any concerns about any inappropriate or intrusive photographs found*
- *always ensure they have parental permission to take and/or display photographs*

*This means that adults should not:*

- *display or distribute images of children unless they have consent to do so from parents/carers*
- *use images which may cause distress*
- *use mobile telephones or any other similar devices to take images of children*
- *take images 'in secret', or taking images in situations that may be construed as being secretive.*

*This means that schools/services should*

- *have clear e-safety policies in place about access to and use of the internet*
- *make guidance available to both adults and pupils about appropriate usage.*

*This means that adults should:*

- *follow their school/service's guidance on the use of IT equipment*
- *ensure that children are not exposed to unsuitable material on the internet*
- *ensure that any films or material shown to pupils are age appropriate*

Where indecent images of children or other unsuitable material are found, the police and Local Authority Designated Officer (LADO) should be immediately informed. Adults should not attempt to investigate the matter or evaluate the material themselves, as this may lead to evidence being contaminated which in itself can lead to a criminal prosecution.

## 29. Overnight Supervision and Examinations

There are occasions during exam periods when timetables clash and arrangements need to be made to preserve the integrity of the examination process. In these circumstances, staff may be asked to volunteer to supervise students perhaps in their own homes.

Most Local Authorities, professional bodies and teaching unions do not endorse this practice. Where there are no staff volunteers, the examination awarding bodies allow for alternative supervisory arrangements to be made.

*This means that:*

- a full health and safety risk assessment should have been undertaken
- all members of the household should have the appropriate checks made.
- all arrangements should be made in partnership and agreement with the student and parents/carers
- arrangements involving one to one supervision should be avoided wherever possible.
- staff should have regard to any guidance that exists
- as much choice, flexibility and contact with 'the outside world', should be incorporated into any arrangement so far as is consistent with appropriate supervision
- whenever possible, independent oversight of arrangements should be made
- any situation which gives rise to complaint, disagreement or misunderstanding should be reported
- LEAs and schools should ensure that all arrangements reflect a duty of care towards pupils and staff

## 30. Curriculum

Many areas of the curriculum can include or raise subject matter which is sexually explicit, or of an otherwise sensitive nature. Care should be taken to ensure that resource materials cannot be misinterpreted and clearly relate to the learning outcomes identified by the lesson plan. This plan should highlight particular areas of risk and sensitivity and care should especially be taken in those areas of the curriculum where usual boundaries or rules are less rigorously applied, ie drama

The curriculum can sometimes include or lead to unplanned discussion about subject matter of a sexually explicit or otherwise sensitive nature. Responding to pupils' questions can require careful judgement and staff may wish to take guidance in these circumstances from a senior member of

*This means that adults should:*

- have clear written lesson plans
- take care when encouraging pupils to use self expression, not to overstep personal and professional boundaries
- be able to justify all curriculum materials and relate these to clearly identifiable lessons plans.

*This means that adults should not:*

- enter into or encourage inappropriate discussions about sexual activity or any behaviours which may offend or

staff.

Care should also be taken to abide by the governing body's required policy on sex and relationships education and the wishes of parents. Parents have the right to withdraw their children from all or part of any sex education provided (but not from the biological aspects of human growth and reproduction necessary under the science curriculum)

### 31. Whistle blowing

Whistle blowing is the mechanism by which adults can voice their concerns, made in good faith, without fear of repercussion. Each employer should have a clear and accessible whistle blowing policy that meets the terms of the Public Interest Disclosure Act 1998. Adults who use whistleblowing procedure should be made aware that their employment rights are protected.

Adults should acknowledge their individual responsibilities to bring matters of concern to the attention of senior management and/or relevant external agencies. This is particularly important where the welfare of children may be at risk.

### 32. Sharing Concerns and Recording Incidents

Individuals should be aware of their school/service's child protection procedures, including procedures for dealing with allegations against adults. All allegations must be taken seriously and properly investigated in accordance with local procedures and statutory guidance. Adults who are the subject of allegations are advised to contact their professional association.

In the event of any allegation being made, to someone other than a manager, information should be clearly and promptly recorded and reported to a senior manager without delay.

Adults should always feel able to discuss with their line manager any difficulties or problems that may affect their relationship with pupils so that appropriate support can be provided or action can be taken.

It is essential that accurate and comprehensive records are maintained wherever concerns are raised about the conduct or actions of adults working with or on behalf of pupils.

*harm others*

*This means that schools/services should:*

- *ensure they have appropriate whistle-blowing policies in place*
- *ensure that they have clear procedures for dealing with allegations against staff which are in line with their Local Safeguarding Children Board's procedures.*

*This means that adults should:*

- *report any behaviour by colleagues that raises concern regardless of source*

*This means that adults:*

- *should be familiar with their school/service's system for recording concerns*
- *should take responsibility for recording any incident, and passing on that information where they have concerns about any matter pertaining to the welfare of an individual in the workplace*

*This means that schools/services:*

- *should have an effective, transparent and accessible system for recording and managing concerns raised by any individual in the workplace*

## APPENDIX 1

This (Education) document has now been adapted for use by a generic audience and other versions are being developed which relate to specific disciplines/agencies.



## APPENDIX 2

This generic document can be used to support safer recruitment and selection practices, induction and on-going training programmes and where necessary, disciplinary and child protection procedures.

