Red Hall Primary

Safeguarding Policy

School Details

Safeguarding Governor: Sarah Small

Designated Safeguarding Lead: Julie Davidson/Yvonne Watson

Deputy Safeguarding Lead: Stacy Luxon/Debbie Hayman/Laura Snowdon

2 Year Old Provision Safeguarding Lead: Carly Egglestone

Prevent Single Point of Contact (SPOC): Gillian Marshall

REFERRAL TO DARLINGTON SOCIAL CARE SERVICES - Social Care Screening Service If you have a concern regarding a child, young person you can telephone: Children: 01325 406222

Document History	
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By:	HT and Pupil Well Being Team
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1. Introduction

The health, safety and well-being of all or children are of paramount importance to all the adults who work at Red Hall Primary. They have the right to be safe in our school.

In our school we respect our children. The atmosphere within our school and the ethos we promote is one that encourages children to be valued and listened to. We provide opportunities that enable our children to take and make decisions for themselves.

2. Rationale

Schools have a duty of care towards their pupils acting in loco parentis. Whilst our procedures cannot ensure that child abuse does not occur, all staff have a shared responsibility to ensure that child abuse does not go undetected or unreported. Safeguarding in everybody's responsibility and the welfare of our children is everyone's responsibility.

3. Safeguarding Legislation and Guidance

This policy has been devised in accordance with the following statutory legislation and guidance:

S27 Children Act 1989*, *S175 of the 2002 Education Act*, *section 29 Counter terrorism and Security Act 201*5, *Disqualification under the Children Act 2006 and the guidance contained in ***Working Together to Safeguard Children 2015***, ***Keeping Children Safe in Education 2018***, as well as procedures produced by Darlington Safeguarding Children Board.

4. Related safeguarding policies:

Staff code of conduct – Darlington Borough Council

Supporting pupils with a medical condition

First Aid

E-Safety

Acceptable use policy – mobile phones, mobile devices, cameras

Expectations and choice framework (Red Hall's behaviour management system)

Guiding Principles (Use of Physical Intervention)

Anti-bullying policy

Whistleblowing (within the code of conduct)

SEND Policy

Children missing from education

Safer recruitment

Failure to collect a child

School Visitor's policy and procedure

Personal and intimate care (Suncream / Toileting)

Young Carers policy

Complaints procedure

Early Years Missing or Lost Child Policy

Arrivals and Departures Policy

5. Aims and Objectives

This policy ensures that all staff / volunteers in our school are clear about the actions necessary with regard to a child protection issue. Its aims are:

- For all staff to be aware of the signs and symptoms of child abuse.
- To raise the awareness of all staff and identify responsibility in reporting possible cases of abuse.
- To ensure effective communication between all staff when dealing with child protection issues.
- To lay down the correct procedures for those who encounter an issue of child protection.
- For the school to deal with suspected cases of child abuse efficiently and consistently.
- Ensuring we practice safer recruitment in checking the suitability of staff and volunteers to work with children.
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe.
- Supporting pupils who have been identified as in need of early help or at risk of harm in accordance with his/her agreed Child Protection, Child in Need or Early Help plan.
- Establishing a safe environment in which children can learn and develop.
- To be alert to the possibility of a girl being at risk of female genital mutilation (FGM) or already having suffered FGM (mandatory reporting October 2015).
- Ensure there is a written plan in place that has a clear and agreed procedure to protection a child for children under child protection, Child in need and Looked after children.

We will follow the procedures set out by the Local Safeguarding Children Board and take account of guidance issued by the Department for Education (DfE).

The Governing Body ensures that the school:

- Creates a culture where the welfare of students is paramount and staff feel confident to challenge over any concerns.
- Complies with their duties under legislation - including the Prevent Duty 2015.Contributes to interagency working and plans.
- Takes into account DSCB procedures.
  Has a nominated governor (usually the chair) who liaises with the Designated Officer in the event of an allegation being made against the Head teacher.

- Has an effective safeguarding policy (updated annually and on website) as well as staff behaviour policy (included in the Expectations and choice framework) and both are provided to staff on induction alongside reading the first part of KCSiE. and followed by all staff.
- Has an appropriate response to children who go missing from education and inform and report to the Local Authority when required.
- Appoints a DSL (Designated Safeguarding Lead) who is a member of the senior leadership team, trained every 2 years, and that the responsibilities are explicit in the role holder's job description. The DSL should be given time, funding and training to support this. There should always be cover for this role.
- Has considered how children are taught about safeguarding – PSHE/SRE.
- Has evidence of the child voice and that there are systems in place for feedback and pupils' views.
- Appoints a Designated Looked after Children LAC teacher and ensures appropriate training. Ensure staff have awareness of this group and their needs including contact arrangements.
- Have procedures for dealing with allegations of abuse made against members of staff including allegations made against the Headteacher and allegations against other children. Procedures are in place for referral to the DBS disclosure and barring service.
- Has safer recruitment procedures that include statutory checks on staff suitability to work with children and ensures recording of this. Ensures volunteers are appropriately supervised. Ensures at least one person on appointment panel is safer recruitment trained.
- Develops a training strategy that ensures all staff, including site staff and the Headteacher, receive information about the school's safeguarding arrangements on induction and appropriate child protection training, which is regularly updated in line with any requirements of the LSCB. In addition all staff members should receive regular safeguarding and child protection updates (for example, via email, e-bulletins, staff meetings) as required, but at least annually, to provide them with relevant skills and knowledge to safeguard children effectively.

The Head teacher, who is also the DSL:

- ensures that the child protection policy and code of conduct are implemented and followed by all staff
- allocates sufficient time, annual training, support and resources, including cover arrangements when necessary, to enable the DSL and deputy to carry out their roles effectively, including the assessment of pupils and attendance at strategy discussions and other necessary meetings
- ensures that all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the whistle blowing procedures
- ensures that pupils are provided with opportunities throughout the curriculum to learn about safeguarding, including keeping themselves safe online
- liaises with the Designated Safeguarding Lead where an allegation is made against a member of staff
- ensures that anyone who has harmed or may pose a risk to a child is referred to the Disclosure and Barring Service.
-

DSL responsibilities:

Refer all cases of suspected abuse to the local authority children's social care and:

- The Designated Officer for all cases which concern a staff member. (This will be with the Head teacher – who is the case manager in these cases)
- Disclosure and Barring Service (cases where a person is dismissed or left due to risk/harm to a child); and/or
- Police (cases where a crime may have been committed).
- Liaise with the Head teacher to inform him or her of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations.
- Act as a source of support, advice and expertise to staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies.
- Keeping appropriate records on CPOMS (Child Protection Online Monitoring System) of concerns about a pupil even if there is no need to make an immediate referral.

Training

DSL should be an appropriate senior member of staff who can take a lead responsibility for child protection (including online safety) and has the status and authority to carry out the duties required.

DSL should attend appropriate multi-agency training every two years, In addition the DSL will complete yearly updates via attendance at LSCB briefings, LSCB e bulletins, DSL's Network meetings as required and:

- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments.
- Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so.
- Ensure each member of staff has access to and understands the schools child protection policy and procedures, especially new and part time staff.
- Be alert to the specific needs of children in need, those with special educational needs and young carers.
- Be able to keep detailed, accurate, secure written records of concerns and referrals.
- Obtain access to resources and attend any relevant or refresher training courses.
- Encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school or college may put in place to protect them.

Raising Awareness

The designated safeguarding lead should:

- Ensure the school policies are known and used appropriately:
- Ensure the school child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this.
- Ensure the safeguarding policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school or college in this.
- Link with the local LSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding.
- Where children leave the school ensure their child protection file is transferred to the new school as soon as possible. This should be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained.

The Deputy DSL(s) is appropriately trained and, in the absence of the designated lead, carries out those functions necessary to ensure the ongoing safety and protection of pupils. In the event of the long-term absence of the designated lead, the deputy will assume all of the functions above.

6. Child Protection Procedures

Our policy and procedures rely on a clear distinction between suspected abuse and a cause for concern. It is not the responsibility of school staff to investigate suspected abuse. Staff should not make enquiries of children or guardians and any efforts to do so may prejudice evidence in any subsequent proceedings. However, the school's duty of care requires staff to act as a responsible parent during term time. Should staff have any cause for concern they should feel able to enquire after the child's well-being.

Cause for Concern

Where members of staff see signs that cause concern but there is not sufficient evidence to suspect abuse has occurred they should;

- Record the nature of the concern as soon as possible on CPOMS and follow it up with DSL.
- If necessary, complete a school, 'Record of Concern' (Appendix A), within 24 hours and pass to DSL who will file it in the child's file (locked in YW office).
- If parents, guardians or the child volunteer information, by way of explanation, it should be recorded on CPOMS.
- If other entries are found which reinforce or deepen the cause for concern the matter should be reported to the designated teacher immediately.
- If the incident appears to be isolated, staff may have the opportunity to seek information (with tact and sympathy) of the child or guardians concerned.
- If responses allay the concern they should be entered on the Record of Concern and kept on file
- If responses do not dispel concerns or appear inconsistent with the injuries, these too must be recorded and the designated teacher informed immediately.

Suspected Abuse

All staff must formally record any suspicions of child abuse and report to the designated teacher as soon as possible on the same working day. Staff should note carefully what they observed and when. Signs of physical injury should be described in detail along with their location on the body. Any verbal comments or disclosures made by the child concerned or by an adult involved, about how an injury occurred should be recorded, verbatim if possible, as soon as possible after the comments have been made.

Disclosure

If a child discloses that he/she is the victim of abuse

Do

- Listen carefully, Remain calm
- Take the allegation seriously
- Ensure child's safety
- Reassure the child, but avoid unnecessary physical contact
- Preserve any evidence
- Seek advice
- Record the disclosure and report the incident to the designated teacher

DO NOT

- Overreact
- Promise confidentiality
- Interrogate or lead the child

Referrals

Under normal circumstances the designated teacher will refer any suspected case of child abuse to Social Care. However, any member of staff can make a referral and should do so if they have serious concerns and the designated teacher has not done so.

Initial contact is usually by telephone. Tell the **Children's Access point (CAP) 01325 406222** that you want to make a child protection referral. Have the child's record handy with the details of name, date of birth, address etc.

Make a note of;

- The name of the person you make the referral to
- The date
- The time
- Check the Child Protection File for other referrals and records of concern regarding the child

Follow up the verbal referral immediately using the standard: Child Protection Referral Confirmation Form (Appendix B).

If a member of staff discovers that an act of Female Genital Mutilation appears to have been carried out on a girl under the age of 18, the DSL must report this to the police.

Emergency Procedures

The police are the only agency with statutory powers for the **immediate** protection of children.

If a child is believed to be in danger or imminent risk of harm the designated teacher or any staff member can make a referral direct to the police. Ask for Child and Family Protection Unit. If they are not available tell the person answering that you want to make a child protection referral.

In emergencies, do not delay making a referral. Make it straight away and make it direct to the police.

Confidentiality and sharing information

Staff will only discuss concerns with the Designated Safeguarding Lead, Headteacher or chair of governors (depending on who is the subject of the concern). That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis.

We will normally seek to discuss any concerns about a pupil with their parents. This must be handled sensitively and the DSL will be in the most informed position to make contact with the parent in the event of a concern, suspicion or disclosure.

However, if we believe that notifying parents could increase the risk to the child or exacerbate the problem, advice will first be sought from Children's Access point.

The Seven Golden Rules for Safeguarding Information Sharing 2015

- Data Protection/Human rights laws are not a barrier.
- Be open and honest. (Unless unsafe or inappropriate)
- Seek advice. (Anonymise if necessary)
- Share with consent if appropriate.
- Consider safety and wellbeing.
- Necessary, proportionate, relevant, adequate, accurate, timely and secure.
- Keep a record of decision and reason for it.

Record keeping

All concerns, discussions and decisions made and the reasons for those decisions should be recorded in writing on the CPOMS system used in school. If in doubt about recording requirements, staff should discuss with the designated safeguarding lead.

7. Allegations made against other children - Peer on Peer Abuse

Peer on peer abuse is when a child might have been abused by another child. There is no clear boundary between incidents that should be regarded as abusive and incidents that are more properly dealt with as bullying, sexual experimentation etc. This is a matter of professional judgement. If one child or young person causes harm to another, this should not necessarily be dealt with as abuse: bullying, fighting and harassment between children are not generally seen as child protection issues.

However, any concern must be referred to the DSL particularly if:

• There is a large difference in power (for example age, size, ability, development) between the young people concerned; or

• The perpetrator has repeatedly tried to harm one or more other children; or

• There are concerns about the intention of the alleged perpetrator. If the evidence suggests that there was an intention to cause severe harm to the victim, this should be regarded as abusive whether or not severe harm was actually caused.

- If you have concerns that an incident involves youth produced sexual imagery.

8. Allegations against staff

If a concern is raised that a member of staff may have been involved in the abuse of a child or that child protection concerns are not being handled appropriately, the Headteacher should be informed immediately. Should the Headteacher be the subject of such concern, the allegation should be reported to the Chair of Governors.

Staff may also report their concerns directly to police or Designated Officer if they believe direct reporting is necessary to secure action.

Keeping Children Safe in Education (DfE, 2016) and LSCB procedure will be implemented

Designated Officer at the Local Authority

- **Carol Glasper - LADO (01325 406459)**

LSCB procedure: http://www.darlington.gov.uk/education-and-learning/local-safeguarding-children-board/professionals-and-volunteers/policy,-procedures-and-guidance/

The full procedures for dealing with allegations against staff can be found in *Keeping Children Safe in Education (DfE, 2018)*.

Staff, parents and governors are reminded that publication of material that may lead to the identification of a teacher who is the subject of an allegation is prohibited by law. Publication includes verbal conversations or writing, including content placed on social media sites. We will communicate this to all parties.

If you have concerns about a colleague or safeguarding practice

Staff who are concerned about the conduct of a colleague or safeguarding practice within the school are undoubtedly placed in a very difficult situation.

All staff must remember that the welfare of the child is paramount and staff should feel able to report all concerns about a colleague or the safeguarding practice within the school to the Headteacher. The school's whistleblowing procedure (Darlington Borough Council's Code of Conduct Policy) enables staff to raise concerns or allegations in confidence and for a sensitive enquiry to take place.

Alternatively the NSPCC has launched a **Whistleblowing Helpline** which will provide free advice and support to professionals wanting to raise concerns about how child protection issues are being handled in their own or other organisations: **Tel: 0800 028 0285**

All concerns of poor practice or possible child abuse by colleagues should be reported to the Headteacher. Complaints about the Headteacher should be reported to the Chair of Governors.

Staff may also report their concerns directly to Children's Access Point or the Police if they believe direct reporting is necessary to secure action

Abuse of Position of Trust

All school staff are aware that inappropriate behaviour towards pupils is unacceptable and that their conduct towards pupils must be beyond reproach.

In addition, staff should understand that, under the Sexual Offences Act 2003, it is an offence for a person over the age of 18 to have a sexual relationship with a person under the age of 18, where that person is in a position of trust, even if the relationship is consensual. This means that any sexual activity between a member of the school staff and a pupil under 18 may be a criminal offence, even if that pupil is over the age of consent.

9. Missing Children (CME)

A child going missing from education, which includes within the school day, is a potential indicator of abuse and neglect, including sexual exploitation. Unauthorised absences will be monitored and followed up in line with procedures, particularly where children go missing on repeated occasions. All staff will be aware of the signs of risk and individual triggers including FGM and forced marriage.

All pupils will be placed on admission and attendance registers as required by law.

We will inform the local authority of any child removed from our admission register. We will inform the local authority of any pupil who fails to attend for a continuous period of 10 days or more in line with Darlington procedures.

10. Induction and training

New staff and governors will receive an induction in safeguarding which includes;

- the school's child protection policy,
- details of the DSL, reporting and recording arrangements specific to the school,
- the staff code of conduct and the whistleblowing policy,
- the school's behaviour policy and
- the safeguarding response to children who go missing from education.

Staff will also be required to read 'Part One of Keeping Children Safe in Education 2016. Staff will sign to say they have received this and understood.

It is important that all staff have training to enable them to recognise the possible signs of abuse and neglect and to know what to do if they have a concern. All staff, including site staff and the Headteacher, will be annually trained in Safeguarding.

The DSL will receive training at least bi - annually, including training in inter-agency procedures. They will be supported and encouraged to attend additional training to keep up to date, including forums and multi-agency training offered by LSCB and the Education Safeguarding Officer.

All school staff will receive training minimum every 3 years but new additional training to update staff on changes may be arranged annually.

Governors will receive strategic governor safeguarding training.

All training will be recorded and monitored to flag in advance when updates are required.

Supply staff, volunteers and other visiting staff will be given information on the school Safeguarding Policy and risk assessments on volunteers will be completed.

Helping Children to Keep Themselves Safe

Children are taught to understand relationships, promote British values and respond to and calculate risk through our personal, social, health and economic (PSHE) Sex and Relationships (SRE) education lessons and in all aspects of school life.

Our approach is designed to help children to think about risks they may encounter and have help to work out how those risks might be overcome and the support available to them. Discussions about relationships and risk are empowering and enabling for all children and promote sensible behaviour rather than fear or anxiety. Children are taught how to conduct themselves and how to behave in a responsible manner. Children are also reminded regularly about e-safety and tackling bullying procedures including the legalities and consequences.

The school continually promotes an ethos of respect for children and the emotional health and wellbeing of our students is important to us. Pupils are encouraged to speak to a member of staff in confidence about any worries they may have.

However all our pupils are aware that if they disclose that they are being harmed or that they have, or intend, to harm another that this cannot be kept secret and that information will need to be shared

11. E-safety

All members of staff are trained in and receive regular updates in e-safety and recognising and reporting concerns. (Staff Policy)

Our Acceptable Use policy recognises that internet safety is a whole school responsibility (staff, pupils, parents).

Children and young people may expose themselves to danger, whether knowingly or unknowingly, when using the internet and other technologies. Additionally, some young people may find themselves involved in activities which are inappropriate or possibly illegal.

We therefore recognise our responsibility to educate our pupils, teaching them the appropriate behaviours and critical thinking skills to enable them to remain both safe and legal when using the internet and related technologies.

We will ensure that filters are in place to prevent access to unsuitable sites and we will monitor the use of the school network and internet to ensure that any pupil or staff member attempting to access inappropriate, abusive or harmful material is appropriately advised and/or supported.

12. Photography and use of images

The welfare and protection of our children is paramount and consideration should always be given to whether the use of photography will place our children at risk. Images may be used to harm children, for example as a preliminary to 'grooming' or by displaying them inappropriately on the internet, particularly social networking sites.

For this reason consent is always sought when photographing children and additional consideration given to photographing vulnerable children, particularly Looked after Children or those known to be fleeing domestic violence. Consent must be sought from those with parental responsibility (this may include the Local Authority in the case of Looked after Children).

13. Site security

Visitors to the school are asked to sign in and show necessary ID, and are given a badge, which confirms they have permission to be on site. Parents who are simply delivering or collecting their children do not need to sign in. All visitors are expected to enter through one entrance and observe the school's safeguarding and health and safety regulations to ensure children in school are kept safe. The Headteacher will exercise professional judgement in determining whether any visitor should be escorted or supervised while on site.

14. Complaints Procedure

Our complaints procedure will be followed where a pupil or parent raises a concern about poor practice towards a pupil that initially does not reach the threshold for child protection action. Poor practice examples include unfairly singling out a pupil, belittling a pupil or discriminating against them in some way. Complaints are managed by senior staff, the Headteacher and governors. An explanation of the complaints procedure is included within our school complaints policy.

Complaints from staff are dealt with under the school's complaints and disciplinary and grievance procedures.

15. **Adults working with children**

Our school endeavours to ensure that we do our utmost to employ 'safe' staff by following the guidance in Keeping Children Safe in Education (2016) together with WDSCB and the school's individual procedures.

Recruitment, selection and pre-employment vetting is carried out in accordance with Keeping Children Safe in Education 2016. Including;

- Verifying identity
- Enhanced DBS (disclosure and barring service) check for those in regulated activity
- Verification on mental and physical fitness
- Right to work in UK

- Professional qualifications.

References will be sought before interview so any concerns can be explored.

((For staff in child care provision or directly managing these appropriate checks will also be carried out in accordance with Disqualification under the Childcare Act 2006 statutory guidance.)

At least one member of each recruitment panel will have attended safer recruitment training.

The Single Central Record is maintained in accordance with Keeping Children Safe in Education 2015.

We will obtain written confirmation from supply agencies that agency and third party staff have been appropriately checked.

16. Physical intervention

There may be times when adults in our school, in the course of their duty, use physical intervention to restrain children. Our policy on Physical intervention and Guiding Principles makes clear when such action is appropriate and the form it should take. The Head teacher requires the adult involved in any such incident to report this immediately to them, and to record it using the interventions

All adults in the school receive regular training to raise their awareness of abuse and their knowledge of agreed local child protection procedures.

17. Handling the Media

If approached by the media about an incident the following procedure should be followed to minimize sensationalism:

- Do not respond straight away. Tell them you will get back to them.
- Inform the Headteacher
- Head teacher informs the Communications Team of the LEA and seeks advice and support.
- Check the facts and discuss with colleagues as necessary.
- Either the head or Communications Team prepares a brief statement about the situation, putting the matter in context and emphasizing the positive steps that the school are taking.

Appendix A

Red Hall Record of Concern

RECORD OF CONCERN

Private and Confidential

Date:

Member of staff: Referral to:

Pupil: Year group:

Concerns (reason for initial referral):

Communication / Contact				
Name	**Date / Time**	**Service**	**Form of communication**	**Action**

Outcome: (details of action taken)

Further details if necessary:

Signed: _____

Headteacher:_____

Appendix B - CAP Referral Confirmation Form (Appendix B)

Darlington Children's Services

Multi Agency Referral Form

Every effort should be made to share this referral with those with Parental Responsibility if this is appropriate and safe to do so. In circumstances where this is not possible, please state reasons & make attempts to inform them of content verbally.

1. Child and Family Information

Name of Child:		Gender (M/F):	
Child's address:			
Telephone Number:			
Postcode:		Date of birth/ expected birth date:	
Does the child have a disability? **Yes** ☐ **No** ☐		If **Yes** state the disability:	

2. Child's ethnicity and language

White ☐ White British ☐ White Irish ☐ Gypsy/Roma ☐ Traveller ☐ Any other White background	Black or Black British ☐ African ☐ Caribbean ☐ Any other Black background	Asian or Asian British ☐ Bangladeshi ☐ Indian ☐ Pakistani ☐ Any other Asian background
Mixed/dual background ☐ White and Asian ☐ White and Black African ☐ White and Black Caribbean ☐ Any other mixed background	Chinese and other ☐ Chinese ☐ Any other ethnic group ☐ Not given	Religion First Language Is an interpreter required? **Yes** ☐ **No** ☐

3. Family/ Household Members and Significant Others

Name:	**DOB:**	**Relationship to the child:** ***(State if they have PR)***	**Address:**	**Telephone Number:**

4. Other services involved with the child are:

Agency (e.g. name, address):	**Named person & Role:**	**Telephone Number:**

5. Details of Person Making referral.

Name:			
Role:			
Agency:			
Email Address:			
Postal Address:		Post Code:	
Telephone:		Date:	

Has the referral been discussed with your agency Child Protection Lead?

Yes ☐ No☐ N/A☐

6. Consent

*If a practitioner believes a child is at risk of significant harm they have a duty to make a referral to Children's Services immediately. These referrals do not necessarily require **consent** but it is good practice to inform an adult with parental responsibility that the referral is being made, UNLESS doing so would place the child at further risk of significant harm or may lead to the loss or destruction of evidence of a crime or influencing a child about the disclosure made. For ALL other referrals **consent** should always be sought from an adult with parental responsibility for the child/young person (or the young person themselves if they are competent) before passing information about them to Children's Services.*

Have parents/carers and/or young person been informed of this referral? **Yes**☐ **No** ☐
Do you have consent to make this referral/ to share this information? **Yes** ☐ **No** ☐ If **Yes**, please state who provided consent: Written consent: ☐ Verbal consent: ☐ Date: If **No**, please state why consent was not obtained:

This form has been completed because:

☐ Support is being requested with school attendance, (Children Missing from Education (CME), Welfare checks, unauthorised absence and holiday fines).

☐ This child/ family would benefit from an Early Help Assessment

☐ This family have been assessed through an Early Help Assessment (formerly CAF) and it is believed they would benefit from additional support

☐ It is believed that this child meets the definition of Child In Need

☐ It is believed that this child may be at risk of significant harm

7. Presenting Issues

☐ Absent Parenting
☐ Abuse - Emotional
☐ Abuse - Neglect
☐ Gang Violence children
☐ Homelessness (under 18)
☐ Housing

- Abuse – Physical
- ☐ Abuse – Sexual
- ☐ Adoption Enquiry
- ☐ Adult Mental Health Issues
- ☐ Asylum Seekers – Child
- ☐ Asylum Seekers – Parental
- ☐ Bullying (Physical and Cyber)
- ☐ Child Absent (home or care)
- ☐ Child Death
- ☐ Child Illness
- ☐ Child Left Home Alone
- ☐ Child Mental Health
- ☐ Child Missing from Care
- ☐ Child Missing from Education (CME)
- ☐ Child Missing from Home
- ☐ Child Sexual Exploitation (CSE)
- ☐ Child Shoplifting
- ☐ Child with a Disability
- ☐ Childcare Issues
- ☐ Children Disappearing during Shopping
- ☐ Child's behaviour
- ☐ Domestic Violence
- ☐ Elective Home Education (EHE)
- ☐ Family Dysfunction
- ☐ Family in Acute Stress due to Low Income
- ☐ Female Genital Mutilation (FGM)
- ☐ Fixed Eligibility (e.g. Blue Badges)
- ☐ Fostering Enquiry
- Incarcerated – Child
- ☐ Incarcerated – Parent/Carer/Family Member
- ☐ Information received / request
- ☐ Inter Country Adoption Enquiry
- ☐ Lone Child in Need of Accommodation
- ☐ Mother / Parent Shoplifting
- ☐ Not in Education, Employment or Training (NEET)
- ☐ Notification of Other Local Authority Looked After Child in Darlington
- ☐ Notification of Other Local Authority Child on Child Protection in Darlington
- ☐ Parent / adolescent contact
- ☐ Parent/ Adults Conflict
- ☐ Parental Disability
- ☐ Parental Illness
- ☐ Private Fostering Enquiry
- ☐ Radicalisation
- ☐ School Attendance Issues
- ☐ Self-Harm
- ☐ Sexually Harmful Behaviour
- ☐ Sexually Inappropriate behaviour
- ☐ Socially Unacceptable Behaviour
- ☐ Special Educational Needs
- ☐ Street Robberies by or against a child
- ☐ Subject to immigration control (adults)
- ☐ Substance Misuse - Child
- ☐ Substance Misuse – Parent
- ☐ Teenage Fights
- ☐ Unaccompanied Minor
- ☐ Young Carer

8. Have you consulted the Darlington Continuum of Need Indicators (threshold) and/or Self-harm pathway documents?

Yes ☐ No ☐

Please outline your concerns and why you believe this child is at risk of significant harm or in need of additional services or there is an attendance issue, describing the level and frequency of concern. Include the impact on the child.

(What are you worried about, what is the future danger for this child, any complicating factors?)

9. Outline what services have been provided and the impact on the child. Please outline what services you will continue to provide.

(What is working well, what needs to happen/ change, what can your agency contribute to keep the child safe/ support the child and family?)

Please sign and date this form

Signature: _____

Print Name: _____

Date Signed: _____

It is the responsibility of all agencies who are making enquiries and/ or making referrals about child/ren to inform the parents/ carers or those with parental responsibility that they are making a referral to Children Social Care if it is appropriate and safe to do so.

Referrals relating to risk of significant harm must be made via a telephone call and followed up in writing within 24 hours.

The referral must be sent to:

Secure Email: **childrensaccesspoint@darlington.gcsx.gov.uk**

Telephone: **01325 406222**

Or for Out of Hours, call: **Emergency Duty Team: 08702 402994**

Confidentiality Notice – This information is shared in accordance with Darlington Safeguarding Children Board Information Sharing Protocol, if this form is received in error please contact the referring organisation.

Safeguarding Policy

Appendix C – Current Safeguarding Issues

Definitions, signs and indicators

Safeguarding

Safeguarding and promoting the welfare of children is defined as:-

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- And taking action to enable all children to have the best life chances

Child Protection

Part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Types of Child Abuse

- Physical Abuse
- Sexual Abuse
- Emotional/Psychological Abuse
- Neglect and Non-Organic Failure to Thrive

1. Child Physical Abuse

Definition;

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

Indicators include:

- Fractures and bruises in non-walking children
- Recurrent unexplained injuries or burns
- Pinch bruises or bite bruises
- Bruises around the ears and mouth, black eyes (particularly both)
- Explanation inconsistent injury
- Untreated injuries or lingering illness
- Administration of excessive punishment
- Running Away
- Aggression
- Self-destructive tendencies
- Fear of going home or parents being contacted

- Arms and legs covered in hot weather
- Withdrawal from PE, swimming etc. (refusal to change)
- Fear of medical help/examination
- Frozen watchfulness
- Aggressive bullying behaviour

Common sites for accidental injury;

- Forehead, Nose, Chin
- Elbows, Forearm, Bony spine
- Hi, Knees, Shins

Common sites for non-accidental injury;

- Skull: fracture, bruising or bleeding under skull (from shaking)
- Eyes: bruising (particularly both eyes)
- Ears: pinch or slap marks, bruising
- Cheeks: bruising, finger marks
- Mouth: torn, split, swollen
- Neck: bruising, grasp marks
- Shoulders: bruising, grasp marks
- Chest: bruising, grasp marks
- Upper and inner arms: bruising, grasp marks
- Genitals: bruising
- Back, buttocks, thighs: outline of belt/buckles/scalds/burns
- Knees: grasp marks

Bruises are likely to be:

- Frequent
- Patterned (e.g. finger and thumb mark, outline of implement etc.)
- Old and new in same place (note colour)
- In unusual places (see above)

Burns and scalds are likely to have:

- A clear outline
- Unusual position (e.g. back of hand)
- Indicative shapes (e.g. cigarette burns, bar of electric fire, lighter etc.)

Suspicious injuries include:

- Bite marks
- Fingernail marks
- Large and deep scratches
- Incisions (eg from razor blades)

2. Child Sexual Abuse

Definition:

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.

Sexual abuse is defined as the involvement of dependant, developmentally immature children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent, or violate the social taboos of family roles.

Indicators include:

- Overly compliant behaviour
- Aggressive behaviour
- Hints about sexual activity
- Pseudomature behaviour
- Persistant, inappropriate sexual play with peers, toys or themselves
- Excessive masturbation
- Sexually aggressive behaviour
- Attempts to teach other children about sexual activity
- Detailed and inappropriate understanding of sexual behaviour
- Arriving early for school, leaving late, few if any absences
- Poor peer relationships, inability to make friends
- Lack of trust, particularly with significant others
- Inability to concentrate
- Sudden drop in school performance
- Extraordinary fear of males
- Seductive behaviour with males
- Running away from home
- Regressive, withdrawn behaviour
- Clinical depression, suicidal feelings
- Vaginal discharge and bleeding
- Soreness/injury of the genital/anal areas
- Recurrent urinary tract infections
- Venereal infection
- Pregnancy

3. Child Emotional/Psychological Abuse

Definition:

The severe adverse effects upon behaviour and emotional development caused by persistent coldness, hostility or rejection or sever over-protection towards a child on the part of the parent or carer.

Emotional abuse: The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child 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 a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

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

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

Three types of abuse come under this category:

1. Emotional Neglect: Acts of omission
2. Emotional Assault: The result of persistent verbal attacks by parents or siblings
3. Emotional Abuse: A chronic behaviour pattern that results in the child having a damaged self-image.

Indicators include:

- Speech delay, lack of communication skills
- Low self-esteem
- Learning difficulties, lack of concentration
- Withdrawal, isolation, depression
- Opposition, defiance
- Very passive behaviour
- Self-mutilation
- Compulsive behaviour, rituals and activities
- Pseudomature behaviour
- Running away
- Alcohol, drug, solvent abuse
- Stress symptoms eg bed wetting, soiling, stomach ache (without physical cause)
- Fear of situations

- Eating disorders (over eating, under eating)
- Inappropriate emotional responses
- Obsessive behaviour, rocking, thumb sucking
- Attention seeking

4. Child Neglect and Non-Organic Failure to Thrive

Definition:

Neglect: 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.

The persistent or severe neglect of a child, (for example by exposure to any kind of danger including cold and starvation), which results in serious impairment of the child's health and development.

Failure to thrive is a condition where a child shows medical evidence of a lack of normal physical and/or mental growth and development which has progressed over a period of time. It must be a medically diagnosed as non-organic.

Indicators include:

- Inappropriate clothing (too large/small, summer wear in winter etc)
- Running away
- Constant hunger
- Constant tiredness
- Frequent lateness
- Frequent non-attendance
- Low-self esteem
- Untreated medical problems
- No social relationships
- Compulsive stealing or scavenging
- Poor personal hygiene

Specific safeguarding issues

Keeping children safe from these above risks is a safeguarding matter and should be approached in the same way as safeguarding children from any other risks.

5. Child Sexual Exploitation

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 in exchange for something the victim needs or wants, and/or 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 contact; it can also occur through the use of technology. (DfE Feb 17)

• Children who appear with unexplained gifts or new possessions;

• Children who associate with other young people involved in exploitation;

• Children who have older boyfriends or girlfriends;

• Children who suffer from sexually transmitted infections or become pregnant;

• Children who suffer from changes in emotional well-being;

• Children who misuse drugs and alcohol;

• Children who go missing for periods of time or regularly come home late; and

• Children who regularly miss school or education or do not take part in education.

Grooming

Grooming is when someone builds a relationship with a child to gain their trust for the purposes of sexual abuse or exploitation.

Children and young people can be groomed online or in the real world, by a stranger or by someone they know – for example a family member, friend or professional. Groomer may be female or male. They can be any age

Many children and young people don't understand that they have been groomed; or that what has happened is abuse.

6. Preventing Radicalisation

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

Extremism is defined as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs.

This is part of our wider safeguarding duty. We will intervene where possible to prevent vulnerable children being radicalised. The internet has become a major factor in radicalisation and recruitment.

As with all other forms of abuse, staff should be confident in identifying pupils at risk and act proportionately.

We will work with other partners including the Channel Panel.

The DSL is appropriately trained and be able to offer advice, support and information to other staff.

We will ensure safe internet filters are in place and ensure our pupils are educated in online safety.

7. Private Fostering

A private fostering arrangement is one that is made privately (without the involvement of a local authority) for the care of a child under the age of 16 years (under 18, if disabled) by someone other than a parent or close relative, in their own home, with the intention that it should last for 28 days or more. (*Close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.)

8. Female Genital Mutilation FGM

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

- School staff, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.
- Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon **teachers to report to the police** where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. **Those failing to report such cases will face disciplinary sanctions.**

What staff should do if they are worried about a child

- If a member of staff suspects a child is at risk of, has already undergone, or receives a disclosure about FGM, they must be careful to respond in an appropriate and sensitive manner. Efforts should be made to establish the full facts from the child before any action is taken.
- The member of staff should discuss it with the school's designated safeguarding lead, following the procedures set out in the settings child protection. The staff member must report the matter to the Police and Social Care with support of the designated safeguarding lead.
- School staff should not attempt to investigate the case themselves or attempt to speak to the child's parents as this may place the child at an increased risk of harm.

Indicators

- There is a range of potential indicators that a girl may be at risk of FGM. Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 16-17 of the Multi-Agency Practice Guidelines.

9. Honour Based Violence (HBV)

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

10. Forced Marriage

- Marriage 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, emotional and psychological.
- Lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities for example). Some communities use religion and culture as a way to coerce a person into marriage.

11. Breast Ironing

- Traditional West African Practice involves the pounding of the developing breasts of young girls with hot objects, most commonly stones, spoons and hammers.
- This practice is carried out by girl's mothers or female family members.
- The practice is carried out to remove outward signs of puberty and prevent girls becoming sexually attractive to men.

12. Safeguarding Disabled Children

- Disabled children have exactly the same human rights to be safe from abuse and neglect and to be protected from harm.
- Disabled children do however require additional action. This is because they experience greater risks and 'created vulnerability' as a result of negative attitudes and unequal access to services and resources and because they may have additional needs relating to physical, sensory, cognitive and/or communication impairment.

13. Sexting' or 'youth produced imagery' in schools:

Definition

'Youth produced sexual imagery' refers to young people sharing images that they, or another young person, have created of themselves. The types of incidents which this advice covers are:

- A person under the age of 18 creates and shares sexual imagery of themselves with a peer under the age of 18
- A person under the age of 18 shares sexual imagery created by another person under the age of 18 with a peer under the age of 18 or an adult

- A person under the age of 18 is in possession of sexual imagery created by another person under the age of 18

When an incident involving youth produced sexual imagery comes to the school's attention:

- The incident should be referred to the DSL as soon as possible
- The DSL should hold an initial review meeting with appropriate school staff
- There should be subsequent interviews with the young people involved (appropriate)
- Parents should be informed at an early stage and involved in the process unles there is good reason to believe that involving parents would put the young person at risk of harm
- At any point in the process if there is a concern a young person has been harmed or is at risk of harm a referral should **be made to children's social care and/or the police immediately.**

Link for guidance on signs and indicators of abuse

What to do if you're worried a child is being abused

- https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2

Continuum of Need document;

- **http://www.darlington.gov.uk/education-and-learning/local-safeguarding-children-board/professionals-and-volunteers/**

Links to specific safeguarding issues

http://www.darlington.gov.uk/education-and-learning/local-safeguarding-children-board/professionals-and-volunteers/policy,-procedures-and-guidance/
Child missing from education (CME)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/395138/Children_missing_education_Statutory_guidance_for_local_authorities.pdf

Child missing from home or care

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/271820/Flowchart_when_a_child_goes_missing_from_care.pdf

- child sexual exploitation (CSE) – see also Appendix 1 of the Safeguarding Children procedure https://www.gov.uk/government/publications/what-to-do-if-you-suspect-a-child-is-being-sexually-exploited
- bullying including cyberbullying https://www.gov.uk/government/publications/preventing-and-tackling-bullying
- domestic violence https://www.gov.uk/domestic-violence-and-abuse
- drugs https://www.gov.uk/government/publications/drugs-advice-for-schools
- fabricated or induced illness https://www.gov.uk/government/publications/safeguarding-children-in-whom-illness-is-fabricated-or-induced
- faith abuse https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief
- female genital mutilation (FGM) – see also Appendix 1 of the Safeguarding Children procedure https://www.gov.uk/government/publications/female-genital-mutilation-multi-agency-practice-guidelines
- forced marriage https://www.gov.uk/forced-marriage
- gangs and youth violence https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/226293/Advice_to_Schools_and_Colleges_on_Gangs.pdf
- gender-based violence/violence against women and girls (VAWG) https://www.gov.uk/government/policies/ending-violence-against-women-and-girls-in-the-uk
- mental health https://www.gov.uk/government/publications/the-mental-health-strategy-for-england

- private fostering
  https://www.gov.uk/government/publications/children-act-1989-private-fostering
- radicalisation
  https://www.gov.uk/government/publications/channel-guidance
- sexting
  http://ceop.police.uk/
- teenage relationship abuse
  https://www.gov.uk/government/collections/this-is-abuse-campaign
- trafficking
  https://www.gov.uk/government/publications/safeguarding-children-who-may-have-been-trafficked-practice-guidance

Appendix D

Key Safeguarding Contacts

Social Care

Children's Access Point (CAP)
Telephone: 01325 406222
E-mail: childrensaccesspoint@darlington.gcsx.gov.uk

The Children's Access Point is open during the following hours:
Monday - Thursday: 8:30am - 5pm
Friday: 8:30am - 4:30pm

If you need to get in touch out of office hours, contact the Emergency Duty Team on 08702 402994.

Multi Agency Safeguarding Hub (MASH)
Tel: 01325 742020

Police Non-emergency 101

Area Team - Early help
Deb, Deborah Archer
0 -19 Area Service Coordinator – Area 2
Haughton Road Children's Centre (or McNay St Children's Centre)
McNay Street
Darlington
DL3 6JX
Tel: 01325 487718
e: deborah.archer@darlington.gov.uk
e: deb.archer@darlington.gcsx.gov.uk

Health
School Nurse: Jayne Sparks

Education:
Education Safeguarding Officer/ CME Officer
Joanna Conway,
E-mail Joanna.Conway@darlington.gov.uk 01325 405848

Virtual Head for LAC
Calvin Kipling 01325 406272

LSCB
Designated Officer at the Local Authority

- Carol Glasper - LADO (01325 406459

Prevent contacts
Prevent Team (office hours) 0191 375 2234
Non-urgent enquiries 101
Emergency calls 999

To report illegal information, pictures or videos found on the internet www.gov.uk/report-terrorism.
Anti-terrorist hotline: 0800 789 321

Due Diligence and Counter Extremism Group (DDCEG) Helpline - (020 7340 7264) For education staff and governors to raise concerns relating to extremism directly and in confidence

CHANNEL Panel Chair
Jo Benson, Head of Youth Offending Service
Contact details: 01325 406791

To report illegal information, pictures or videos found on the internet www.gov.uk/report-terrorism.
Anti-terrorist hotline: 0800 789 321

Links to statutory guidance

Counter Terrorism and Security Act 2015

- https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty
- https://www.gov.uk/government/publications/prevent-duty-guidance

FGM

- https://www.gov.uk/government/publications/female-genital-mutilation-guidelines

Keeping children Safe in Education - All education staff should read Part One of this guidance

- https://www.gov.uk/government/publications/keeping-children-safe-in-education--2

Working Together 2015

- https://www.gov.uk/government/publications/working-together-to-safeguard-children--2

Ofsted Briefing

- **https://www.gov.uk/government/publications/inspecting-safeguarding-in-early-years-education-and-skills-from-september-2015**