



**Safeguarding Children Policy
(including Child Protection)**

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Name	L.Graham/ S.Davies	Signature	
Designation	Director/ Head of Care	Date	September 2018



**Our Place Schools
Safeguarding Children Policy
(including Child Protection)**

Policy Statement: The Children’s Homes (England) Regulations 2015
‘The protection of children standard 12.–(1) The protection of children standard is that children are protected from harm and enabled to keep themselves safe.’

School Details:

Address:
Our Place Schools
The Orchard,
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Safeguarding Officers:

Safeguarding Governor: To be confirmed
Designated Safeguarding Officer (Care): Sarah Davies
Deputy Safeguarding Officer (Care): Lena Graham
Prevent Single Point of Contact (SPOC): Sarah Davies
Designated Safeguarding Officer (Education): Charlotte Duke
Deputy Safeguarding Officer (Education): Lauren Tallis

1. Introduction

1.1. This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002; and in line with government publications the 'Teachers' Standards' 2012, 'Working Together to Safeguard Children' 2018, 'Keeping Children Safe in Education' 2018.

1.2. Our Place Schools fully recognises its moral and statutory responsibilities for safeguarding and promoting the welfare of children.

1.3. Our policy applies to all staff, governors and volunteers working in the school.

1.4. There are five main elements to our policy:

- 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;
- Developing and then implementing procedures for identifying and reporting cases, or suspected cases, of abuse;
- 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.

1.5 We recognise that because of the day to day contact with children, Our Place Schools staff are well placed to identify concerns early and to observe the outward signs of abuse.

1.6 Our Place Schools will therefore:

- Establish and maintain an environment where children feel safe, secure, valued and respected and are encouraged to talk, believing they will be listened to;
- Ensure children know that there are adults in the Our Place Schools whom they can approach if they are worried;
- Include opportunities in the curriculum, specifically through PSHE and ICT, for children to develop the skills they need to recognise and stay safe from abuse and to know who they should turn to for help.

1.7 We seek to ensure that the child's wishes and feelings are taken into account when determining what action to take and what services to provide to protect children from harm. To this end we will:

- Ensure there are systems in place for children to express their views and give feedback e.g. through school/class councils, safety questionnaires, participation in Keyworker meetings, participation in anti-bullying and e-safety events;
- Ensure that the child's thoughts/wishes and feelings are recorded on all referrals where possible

2. Procedures

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

2.2 The school will:

- Ensure it has a senior leader nominated as Designated Safeguarding Officer (DSO) who has received appropriate training and support for this role;
- Ensure it has a member of staff who will act in the absence of the DSO (deputy DSO);
- Ensure it has a nominated governor responsible for safeguarding children;
- Ensure every member of staff (including temporary and supply staff and volunteers) and the governing body knows the name of the DSO and understands their role;
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and neglect (indicators of abuse are set out in Appendix 1), including the specific issues of Female Genital Mutilation (FGM) - see Appendix 2, Child Sexual Exploitation (CSE) - see separate policy (Safeguarding Children from Sexual Exploitation (CSE)), Children Missing Education (CME) and Radicalisation and Extremism (Prevent Duty - Appendix 3), Peer on Peer Abuse and maintain an attitude of 'it could happen here';
- Ensure all staff and volunteers understand their responsibility for referring any concerns to the DSO or Head Teacher in a timely manner and are aware that they may raise concerns directly with Children's Social Care Services if they believe their concerns have not been listened to or acted upon;
- Ensure that parents have an understanding of the responsibility placed on Our Place Schools staff for child protection by setting out its obligations in the service prospectus and publishing its policy on Our Place Schools website;
- Produce a lettings policy which ensures the suitability of adults working with children at Our Place Schools site when required;
- Ensure that community users organising activities for children are aware of, and understand the need for compliance with, the Our Place Schools child protection guidelines and procedures;
- Ensure that the duty of care towards its young people and staff is promoted by raising awareness of illegal, unsafe and unwise behaviour and assist staff to monitor their own standards and practice;
- Be aware of and follow procedures set out by the DfE and the WSCB where an allegation is made against a member of staff or volunteer, including making a referral to the DBS and/or National College for Teaching and Leadership if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have been had they not resigned;
- Operate safer recruitment practice, ensuring that at least one member on every recruitment panel has completed safer recruitment training.

2.3 Our procedures will be regularly reviewed and updated.

3. Training

- 3.1 When staff join Our Place Schools they will be informed of the safeguarding children arrangements in place. They will be given a copy of this policy including its Annexes, part 1 of Keeping Children Safe in Education, the school's code of conduct and the leaflet 'Safer Working Practice for Staff in Education Settings' and told who the DSO is and who acts in their absence.
- 3.2 All staff will receive induction in safeguarding children. The induction programme will include basic child protection information relating to signs and symptoms of abuse, how to manage a disclosure from a child, when and how to record a concern about the welfare of a child and advice on safe working practice, this is delivered as a one day internal course by our Training Manager who delivers a Worcester Safeguarding Children Board (WSCB) approved course.
- 3.3 All volunteers, supply staff and regular visitors to our school will be told where our policy is kept, given the name of the DSO and informed of the school's procedures in reporting concerns.
- 3.4 All staff will receive training in child protection and safe working practice, updated every three years, in line with LSCB guidance.
- 3.5 Staff with specific responsibility for safeguarding children will undertake both single and inter-agency training at a level suitable to their role and responsibilities, updated every two years.
- 3.6 Staff with leadership responsibilities, including DSO's, will undertake further relevant training in safeguarding related issues such as CSE, Radicalisation (WRAP training), Management of Allegations of Abuse and cascade the learning from this training to the rest of the staff. Furthermore all school staff will undertake online Prevent (WRAP training) - <https://www.elearning.prevent.homeoffice.gov.uk/>

4. Responsibilities

- 4.1 The Governing Body will nominate a member to be responsible for safeguarding children and liaise with the DSO and/or Head Teacher in matters relating to safeguarding. It will ensure that:
 - safeguarding policies and procedures are in place, available to parents on the school website or by other means and reviewed annually;
 - an annual report on the effectiveness of the school's safeguarding procedures is presented to the governing body and submitted to WSCB to meet s175/157 requirements;
 - any weaknesses brought to its attention relating to safeguarding are remedied without delay.
 - it complies with all legislative duties, including the duty to report suspected or known cases of FGM, the duty to prevent young people from being drawn into terrorism (WRAP/Prevent), sexting (Appendix 4), Honour based Violence (Appendix 4) and CSE (see separate CSE Policy).

4.2 The Heads of each department will ensure that the Safeguarding policies and procedures are fully implemented and followed by all staff and that sufficient resources are allocated to enable the DSO and other staff to discharge their responsibilities with regard to child protection.

4.3 The DSO will co-ordinate action on safeguarding and promoting the welfare of children within the Our Place Schools setting. The DSO is responsible for:

- Organising child protection induction training for all newly appointed staff and whole staff training, refreshed at least every 3 years;
- Undertaking, in conjunction with the Headteacher and Safeguarding Governor, an annual audit of safeguarding procedures, using the County safeguarding checklist or similar;
- Referring a child to the Early Help Hub or Children's Social Care as appropriate, when there are concerns about possible abuse and neglect;
- Referring a child to the Channel Panel when there are concerns about possible radicalisation or involvement in extremist groups;
- Keeping written records of concerns about children, including the use of body maps, even where there is no need to refer the matter immediately;
- Ensuring all child protection records are kept securely, separate from the main pupil file, and in locked locations;
- Ensuring that all child protection files are transferred in a safe and timely manner when a child moves settings, both between and across phases, within and out of county;
- Notifying the key worker if there is an unexplained absence of more than two days of a pupil who is subject to a child protection plan;
- Monitoring unauthorised absence, particularly where children go missing on repeated occasions, reporting concerns in line with 'missing children' procedures;
- Developing effective links with relevant agencies and other professionals and cooperate as required with their enquiries regarding safeguarding matters including co-operation with serious case reviews, attendance at strategy meetings, initial and review child protection conferences, core group and child in need review meetings;
- Contributing to assessments and providing a report to initial and review conferences which has been shared with parents first;
- Co-ordinating a programme of safety, health and well-being through the curriculum, including issues of protective behaviours, healthy relationships, staying safe on-line, and the promotion of fundamental British values.

5. Managing a Disclosure

5.1 Teachers and other staff in Our Place Schools are in a unique position to observe children's behaviour over time and often develop close and trusting relationships with pupils. If a child discloses directly to a member of staff, the following procedures will be followed:

- Listen carefully to what is said; • Ask only open questions such as:
 - 'Tell me what happened.'
 - 'Please explain what you mean when you say'
 - 'Can you describe the person?' or 'Can you describe the place?'
- Do not ask questions which may be considered to suggest what might have happened, or who has perpetrated the abuse, e.g. 'Did your Dad hit you?'
- Do not force the child to repeat what he/she said in front of another person;
- Do not begin an investigation - for example by asking the child to record what happened in writing or taking a photograph of any injuries;
- Report immediately to the DSO and complete a hand-written record as soon after the disclosure as possible and in any case within 24 hours, using the child's words as far as possible. Use body maps to record any observed injuries.

5.2 Where a child discloses safeguarding allegations against another pupil in the same setting, the DSO should refer to the local procedures on the WSCB website (section 2.11) and seek advice from the Access Centre before commencing its own investigation or contacting parents where appropriate as identified in the care plan

6. Information Sharing & Confidentiality

- 6.1 We recognise that all matters relating to child protection are confidential.
- 6.2 The Headteacher or DSO will disclose any information about a pupil to other members of staff on a need to know basis only.
- 6.3 All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- 6.4 All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or well-being.

7. Communication with Parents

- 7.1 We recognise that good communication with parents is crucial in order to safeguard and promote the welfare of children effectively.
- 7.2 We will always undertake appropriate discussion with parents, where appropriate as identified in the care plan, prior to involvement of another agency **unless to do so would place the child or an adult at further risk of harm or would impede a criminal investigation.**

7.3 We will ensure that parents have an understanding of the responsibilities placed on the school and staff to safeguard children and their duty to co-operate with other agencies in this respect.

8. Record Keeping

8.1 Any member of staff receiving a disclosure of abuse from a child or young person, or noticing signs or symptoms of possible abuse, will make notes as soon as possible (within the hour, if possible) writing down exactly what was said, using the child's own words as far as possible. All notes should be timed, dated and signed, with name printed alongside the signature. Concerns will be recorded using the school's safeguarding children recording system.

8.2 All records of a child protection nature will be passed to the DSO including case conference or core group minutes and written records of any concerns. Child protection records are kept securely and transferred in a safe and timely manner when a child moves school.

8.3 The DSO will maintain and regularly audit the school's child protection records and ensure that each stand-alone file includes a chronology of significant events.

9. Supporting Children

9.1 We recognise that children who are abused or witness violence may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame.

9.2 We acknowledge that school may be the only stable, secure and predictable element in the lives of children who have been abused or who are at risk of harm.

9.3 We are aware that research shows that at school their behaviour may be challenging and defiant or they may be withdrawn.

9.4 The school will endeavour to support all children by:

- Encouraging self-esteem and self-assertiveness through the curriculum, as well as promoting respectful relationships, challenging bullying and humiliating behaviour;
- Promoting a positive, supportive and secure environment giving pupils a sense of being valued;
- A consistently applied school behaviour policy which is aimed at supporting vulnerable pupils. The school will ensure that the pupil knows that some behaviour is unacceptable but that they are valued and not to be blamed for any abuse which has occurred;
- Liaising with other agencies that support the pupil such as Children's Social Care

Services, Child and Adult Mental Health Service (CAMHS), Educational Psychology Service and those agencies involved in the safeguarding of children;

- The use of Early Help Services, through the Early Help Hub, when appropriate;
- Notifying Children's Social Care Services immediately there is a significant concern;
- Providing continuing support to a child about whom there have been concerns who leaves the school by ensuring that appropriate information is forwarded under confidential cover to the child's new setting.

10. Supporting and Supervision of Staff

- 10.1 We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting.
- 10.2 We will support such staff by providing an opportunity to talk through their anxieties with the DSO and to seek further support such as counselling or regular supervision, as appropriate.
- 10.3 We will enable supervision for the DSO through the company meetings, direct consultation with the Senior Adviser or advanced social work practitioners in order to promote best practice and challenge unsatisfactory or poor practice.
- 10.4 In order to reduce the risk of allegations being made against staff, and ensure that staff are competent, confident and safe to work with children, they will be made aware of safer working practice guidance and will be given opportunities in training to develop their understanding of what constitutes safe and unsafe behaviour.

11. Safer Recruitment and Selection of Staff

- 11.1 The school has a written recruitment and selection policy statement and procedures linking explicitly to this policy. The statement is included in all job advertisements, publicity material, recruitment websites, and candidate information packs.
- 11.2 The recruitment process is robust in seeking to establish the commitment of candidates to support the school's measures to safeguard children and to identify, deter or reject people who might pose a risk of harm to children or are otherwise unsuited to work with them.
- 11.3 All staff working within our school who have substantial access to children have been checked as to their suitability, including verification of their identity, qualifications and a satisfactory barred list check, enhanced DBS check and a right to work in the UK.
- 11.4 Our governors are subject to an enhanced DBS check without barred list check, in line with Worcestershire recommendation.
- 11.5 The school maintains a single central record of recruitment checks for audit purposes.

- 11.6 Any member of staff working in regulated activity prior to receipt of a satisfactory DBS check will not be left unsupervised and will be subject to a risk assessment.
- 11.7 Volunteers who are not working in regulated activity, will be supervised at all times.
- 11.8 DSO's and selected other staff involved in recruitment and interviewing have completed NSPCC 'Safer Recruitment Training' and at least one person interviewing for any position will have completed this training.

12. Allegations against staff

- 12.1 We acknowledge that a pupil may make an allegation against a member of staff.
- 12.2 If such an allegation is made, which meets the criteria as identified in Part 4 of Keeping Children Safe in Education, the member of staff receiving the allegation will immediately inform the DSO and the Headteacher, unless the allegation concerns the Headteacher, in which case the Chair of Governors will be informed immediately.
- 12.3 The Headteacher (or Chair of Governors) on all such occasions will discuss the content of the allegation with the LA's Senior Adviser for Safeguarding Children in Education or the Local Authority Designated Officer (LADO), prior to undertaking any investigation.
- 12.4 The school will follow the DfE and LA procedures for managing allegations against staff, a copy of which is readily available in the school.
- 12.5 The case manager will be guided by the Senior Adviser and/or LADO in all matters relating to the case, including suspension, sharing of information and any follow up investigation.

13. Whistleblowing

- 13.1 We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.
- 13.2 All staff should be aware of their duty to raise concerns, where they exist, about the attitude or actions of colleagues using the school's confidential reporting (whistleblowing) policy.
- 13.3 Whistleblowing concerns about the Headteacher should be raised with the Chair of Governors.

14. Complaints or Concerns expressed by Pupils, Parents, Staff or Volunteers

- 14.1 We recognise that listening to children is an important and essential part of safeguarding them against abuse and neglect. To this end, any expression of dissatisfaction or disquiet in relation to an individual child will be listened to and acted upon in order to safeguard his/her welfare.
- 14.2 We will also seek to ensure that the child or adult who makes a complaint is informed not only about the action the school will take but

also the length of time that will be required to resolve the complaint. The school will also endeavour to keep the child or adult regularly informed as to the progress of his/her complaint. Our Place Schools complaints procedures are readily available.

15. Positive Physical Intervention

- 15.1 Our policy on positive handling is set out in our behaviour policy/a separate policy and acknowledges that staff must only ever use physical intervention as a last resort, and that at all times it must be the minimal force necessary to prevent injury or damage to property.
- 15.2 We understand that physical intervention of a nature that causes injury or distress to a child may be considered under management of allegations or disciplinary procedures.
- 15.3 Staff who are likely to need to use physical intervention will be appropriately trained in the MAPA technique, or equivalent.
- 15.4 All incidences of physical intervention will be recorded in accordance with the MAPA recommended procedures.
- 15.5 We recognise that touch is appropriate in the context of working with children and all staff have been given 'safe working practice' guidance to ensure they are clear about their professional boundaries.

16. Abuse of Position of Trust

- 16.1 We recognise that as adults working in the school, we are in a relationship of trust with pupils in our care and acknowledge that it could be considered a criminal offence to abuse that trust.
- 16.2 We acknowledge that the principle of equality embedded in the legislation of the Sexual Offenders Act 2003 applies irrespective of sexual orientation: neither homosexual nor heterosexual relationships are acceptable within a position of trust.
- 16.3 We recognise that the legislation is intended to protect young people in education who are over the age of consent but under 18 years of age.

17. Children Missing Education (CME)

- 17.1 We recognise that a child going missing from education is a potential indicator of abuse or neglect.
- 17.2 Our procedures for dealing with children that go missing from education are based on the LA and LSCB procedures.
- 17.3 We will ensure that we follow these procedures for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including

sexual exploitation, and to help prevent the risks of their going missing in future.

- 17.4 We will ensure that we report children missing education to the LA CME officer, in line with statutory requirements.

18. Radicalisation and Extremism

- 18.1 We encourage pupils to respect the fundamental British values of democracy, the rule of law, individual liberty and mutual respect, and tolerance of those with different faiths and beliefs. We ensure that partisan political views are not promoted in the teaching of any subject in the school and where political issues are brought to the attention of the pupils, reasonable steps have been taken to offer a balanced presentation of opposing views to pupils.
- 18.2 We value freedom of speech and the expression of beliefs/ideology as fundamental rights underpinning our society's values. Both pupils and teachers have the right to speak freely and voice their opinions. However, freedom comes with responsibility and free speech that is designed to manipulate the vulnerable or that leads to violence and harm of others goes against the moral principles in which freedom of speech is valued. Free speech is not an unqualified privilege; it is subject to laws and policies governing equality, human rights, community safety and community cohesion.
- 18.3 We seek to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.
- 18.4 DSO for school and care have had Prevent Awareness Training and all school staff will undertake online Prevent (WRAP training) - <https://www.elearning.prevent.homeoffice.gov.uk/>
- 18.5 Further information relating to Prevent Duties can be found in Appendix 3.

19. Racist Incidents

- 19.1 Our policy on racist incidents is set out in a separate policy and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We maintain a log of racist incidents through the use of 'concern' forms.

20. Anti-Bullying

- 20.1 Our policy on anti-bullying is set out in a separate policy and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. All incidences of bullying, including cyber-bullying, racist, homophobic and gender-

related bullying, will be dealt with in accordance with our anti-bullying policy. We recognise that children with special needs and/or disabilities are more susceptible to being bullied. We maintain a log of bullying incidents in school.

21. E-safety

- 21.1 All members of staff are trained in and receive regular updates in e-safety and recognising and reporting concerns.
- 21.2 Our Acceptable Use policy recognises that internet safety is a whole school responsibility (staff, pupils, parents).
- 21.3 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.
- 21.4 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.
- 21.5 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.

22. Photography and use of images

- 22.1 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.
- 22.2 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).

23. Health & Safety

- 23.1 Our Health & Safety policy, set out in a separate document, reflects the consideration we give to the safeguarding of our children both within the school environment and when away from the school, for example when undertaking school trips and visits.
- 23.2 Risk Assessments are undertaken and reviewed regularly, in respect of site security, risk of children being drawn into terrorism or exposed to

extremist behaviour, risk to and from children displaying harmful behaviour.

24. Safe Environment

- 24.1 The school undertakes appropriate risk assessments and checks in respect of all equipment and of the building and grounds in line with local and national guidance and regulations concerning health and safety.
- 24.2 The school has adequate security arrangements in place in respect of the use of its grounds and buildings by visitors both in and out of school hours.
- 24.3 Visitors to the school, for example visiting speakers, theatre groups or curriculum specialists, will be appropriately checked and vetted, to ensure they are not linked to extremist groups or promoting extremist or other harmful material.

25. Challenge and Escalation

- 25.1 We recognised that professional disagreements may arise between any agencies and resolving problems is an integral part of co-operation and joint working to safeguard children.
- 25.2 As part of our responsibility for safeguarding children, we acknowledge that we must be prepared to challenge each other if we feel that responses to concerns, assessments or the way in which plans are implemented are not safeguarding the child and promoting their welfare.
- 25.3 We are aware of the WSCB escalation procedures for raising concerns in respect of poor practice and recognise our responsibility to utilise these as and when necessary, in the interests of safeguarding and promoting the welfare of children.

26. Monitoring and Evaluation

26.1 Our Safeguarding Children policy and procedures will be monitored and evaluated by:

- Completion of the annual safeguarding audit;
- Completion and return to the LA of the annual safeguarding report to the Governing Body;
- Quality monitoring surveys and questionnaires;
- Discussions with children and staff;
- Scrutiny of data and risk assessments;
- Scrutiny of the school's single central record of recruitment checks;
- Scrutiny of Governing Body minutes;

- Monitoring of logs of bullying/racist/behaviour incidents and PPI records;
- Supervision of staff involved in child protection;
- Case file audits undertaken by the DSO.

27. Other Relevant Policies

27.1 The Governing Body's statutory responsibility for safeguarding the welfare of children goes beyond basic child protection procedures.

27.2 The duty is now to ensure that safeguarding permeates all activity and functions. This policy therefore complements and supports a range of other policies, for instance:

- Child Sexual Exploitation Policy
- Complaints Procedure
- Behaviour Management
- Anti-Bullying, including cyber-bullying
- Positive Physical Intervention
- Trips and Visits
- Administration of Medicines and First Aid
- Health and Safety
- Intimate Care
- Sex and Relationships Education
- Equal Opportunities
- E-safety and Acceptable Internet Use
- Whistleblowing (Confidential Reporting)

27.3 The above list is not exhaustive but when undertaking development or planning of any kind the school will need to consider safeguarding matters.

Internal Safeguarding Officer(s) Contact Information

Safeguarding Governor: To be confirmed

Designated Safeguarding Lead (Care): Sarah Davies

Deputy Safeguarding Lead (Care): Lena Graham

Prevent Single Point of Contact (SPOC): Sarah Davies

Designated Safeguarding Lead (Education): Charlotte Duke

Deputy Safeguarding Lead (Education): Lauren Tallis

Designated Safeguarding Lead for Child Protection (Care)

Sarah Davies directorofcandg@ourplaceschools.com

Deputy Designated Safeguarding Lead (Care)

Lena Graham director@ourplaceschools.com

Designated Safeguarding Lead for Child Protection (Education)

Charlotte Duke headofeducation@ourplaceschools.com

Deputy Designated Safeguarding Lead (Education)

Lauren Tallis seniordeputyheadofeducation@ourplaceschools.com

Prevent Single Point of Contact

Sarah Davies directorofcandg@ourplaceschools.com

Governor responsible for safeguarding children

To be confirmed

Director

Lena Graham director@ourplaceschools.com

Chair of Governors

Frances Winslow

Address:

Our Place Schools

The Orchard,

Bransford,

Worcester WR6 5JE

Phone: [01886 833378](tel:01886833378)

Email. admin@ourplaceschools.com

Useful contact details:

Access Centre: The point of contact for Children's Social Care services in Worcestershire is the Access Centre. All enquires and referrals regarding issues of possible child protection, where a child is thought to be at immediate risk, should be made to the Access Centre by telephone:

01905 768054 Monday to Friday 8.30am to 5.00pm 01905 768020 (evenings and weekends)
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You can also make referrals to the Access Centre online, when there is no immediate risk to a child.

Police Call 999 in an emergency, e.g. when a crime is in progress, when there is danger to life or when violence is being used or threatened.

For less urgent issues call local police on 101.

You can also ask Police to carry out a 'safe and well' check if you have significant concerns for the child's safety.

LADO (Jon Hancock) 01905 843311 / 07809 586225 or admin support (Sue) - 01905 846221

LADO (James Borland) 01905 846383

Education Adviser (Denise Hannibal) 01905 844436 / 07815 875069

Family Front Door 01905 822666

The Stronger Families Team 01905 766796

Appendix 1: Recognition of Children at Risk of Abuse and Neglect

Child abuse can be physical, sexual, emotional or neglectful. Recognition of signs and symptoms is dependent upon professionals being open to the possibility of non-accidental injury or other forms of abuse and sharing any possible concerns.

It is the responsibility of professionals to report concerns, NOT to decide whether it is or is not child abuse.

When all agencies share concerns about the child and family with social services, informed decisions can be reached and appropriate assistance can be made available if necessary. Professional concerns about “false allegations” need to be set aside as the need to protect the child must be paramount.

Indicators of physical abuse

Most healthy children will collect bruises or other injuries from time to time. Accidental bruises will usually occur on the skin where it is covering bony prominence (e.g. shin, forehead, elbow, and hipbone). Also, a very small number of children may suffer from rare conditions, like haemophilia or brittle-bone disease, which makes them more susceptible to bruising and fractures.

Bruising that suggests the possibility of physical child abuse includes:

- bruising in children who are not independently mobile
- bruising in babies
- bruises that are seen away from bony prominences
- bruises to the face, back, abdomen, arms, buttocks, ears and hands
- multiple bruises in clusters
- multiple bruises of uniform shape
- bruises that carry an imprint - of an implement or cord
- bruises with *petechiae* (dots of blood under the skin) around them.

Non-accidental injury indicators:

Burns and scalds have:

- clear outline
- no or few splash marks
- unusual positions
- indicative shapes (e.g. cigarette, electric fire).

Injuries may be suspicious if:

- bite marks
- large and deep scratches
- incisions. Fractures if:
 - numerous
 - unreported
 - healed at different times
 - child under two.

Other Indicators of Abuse:

- Delay in seeking medical attention
- No explanation or inadequate explanation of injuries
- Child/parent/witness reports abuse
- Changing explanation of injuries
- Recurrent injuries - particularly if forming a pattern (e.g. always on Mondays)
- Inadequate parental concern
- Multiple injuries that occurred at different dates
- Child may be failing to thrive for no apparent reason.

Possible Behavioural Indicators of Abuse:

- Fear of adults generally or of certain adults in particular
- Poor peer relationships
- Social isolation and withdrawal
- Aggression and acting out/pseudo maturity
- Frozen awareness (a combination of a lack of expression, lethargy and watchfulness)
- Detachment or indiscriminate attachment
- Eating disorders
- Sleep disturbance
- Running away
- Sudden changes in behaviour or poor school performance
- Psychosomatic complaints
- Self-destructive behaviour (self-mutilation, substance abuse and suicide).

Risk Factors Associated with Physical & Emotional Abuse

Parental	Child	Social - linked to stress factors
Drug and alcohol misuse	Has a disability	Unemployment
Mental illness	Demanding as a baby	Bad housing
Isolation or lack of support	Under 2's are consistently the most vulnerable	No income
Young parents	Child or siblings previously on child protection register	Domestic violence
Lack of attachment/unresponsive to child's needs	Premature birth or poor feeders/sleepers	Unwanted pregnancy
Lax and inconsistent parenting	Poor bonding	Recent accident/ill-health
History of violence/abuse of children	Failure to thrive	
Inappropriate expectation		
Abused themselves		

While none of these indicators would be 100% diagnostic of abuse in itself, each would be a cause for some concern that would need to be explored with the family and with other agencies.

Indicators of child sexual abuse:

A child's verbal allegations must always be treated with the greatest respect. Children are entitled to be listened to, and to have their allegations treated seriously. Although there can be occasions when children invent allegations, as a result of adult pressures or for a variety of other reasons, research suggests that such fabricated allegations are rare and that children are in fact more likely to claim they are not being assaulted when they are, than vice versa. Once concerns are reported it is important that the indicators are weighed in terms of significance and in the context of the child's life, before the assumption is made that the child is or has been sexually assaulted. Some indicators take on greater or lesser weight depending on the child's age. It is essential you do not question the child but record carefully what is said and contact Social Services. Do not discuss with a suspected abuser.

Indicators suggesting that there is a high likelihood of sexual abuse:

- The child's own verbal allegation ("disclosure") that an assault has occurred
- Physical symptoms for which the only explanation is sexual activity, including genital tearing, sexually transmitted diseases, and pregnancy in younger children
- Children's sexual abuse of other children
- Suicide attempts
- Compulsive masturbation in an inappropriate setting
- Vivid details of sexual activity in talk/play/drawings, showing awareness of penetration, ejaculation, oral or anal sex (younger children).

Indicators suggesting cause for concern and a need to investigate - in order to find a satisfactory explanation:

- Pregnancy and sexually transmitted diseases
- Drug and alcohol abuse
- Persistent running away
- Sexualised stories/poems
- Self-mutilation
- Chronic urinary/vaginal infections or soreness
- Exposure of genitals
- Eating disorders
- Clinical depression
- Unexplained money or gifts
- Fear of particular people or situations
- Obsessional behaviour
- Developmental regression.

Appendix 2: Female Genital Mutilation (FGM)

From 31st October 2015 school staff along with doctors, nurses and midwives have been required to report cases of female genital mutilation (FGM) to the police. We are also required to report to Social Services, girls who are considered to be 'at risk' of FGM.

The rules apply in England and Wales when girls under 18 say they have been cut or staff recognise the signs.

The government is committed to ending the "abusive and illegal practice" within a generation.

UNDERSTANDING THE ISSUES AROUND FGM

FGM is illegal in the UK. For the purpose of the criminal law in England, Wales and Northern Ireland, FGM is mutilation of the labia majora, labia minora or clitoris.

FGM is prevalent in 28 African countries as well as in parts of the Middle East and Asia. It is estimated that approximately 103,000 women aged 15-49 and approximately 24,000 women aged 50 and over who have migrated to England and Wales are living with the consequences of FGM. In addition, approximately 10,000 girls aged under 15 who have migrated to England and Wales are likely to have undergone FGM.

FGM is practised by families for a variety of complex reasons but often in the belief that it is beneficial for the girl or woman.

FGM constitutes a form of child abuse and violence against women and girls, and has severe short-term and long-term physical and psychological consequences.

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies. The practice causes severe pain and has several immediate and long-term health consequences, including difficulties in childbirth also causing dangers to the child.

The age at which girls undergo FGM varies enormously according to the community. **The procedure may be carried out when the girl is newborn, 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 and therefore girls within that age bracket are at a higher risk.

Any person found guilty of an offence under the Female Genital Mutilation Act 2003 is liable to a maximum penalty of 14 years imprisonment or a fine, or both.

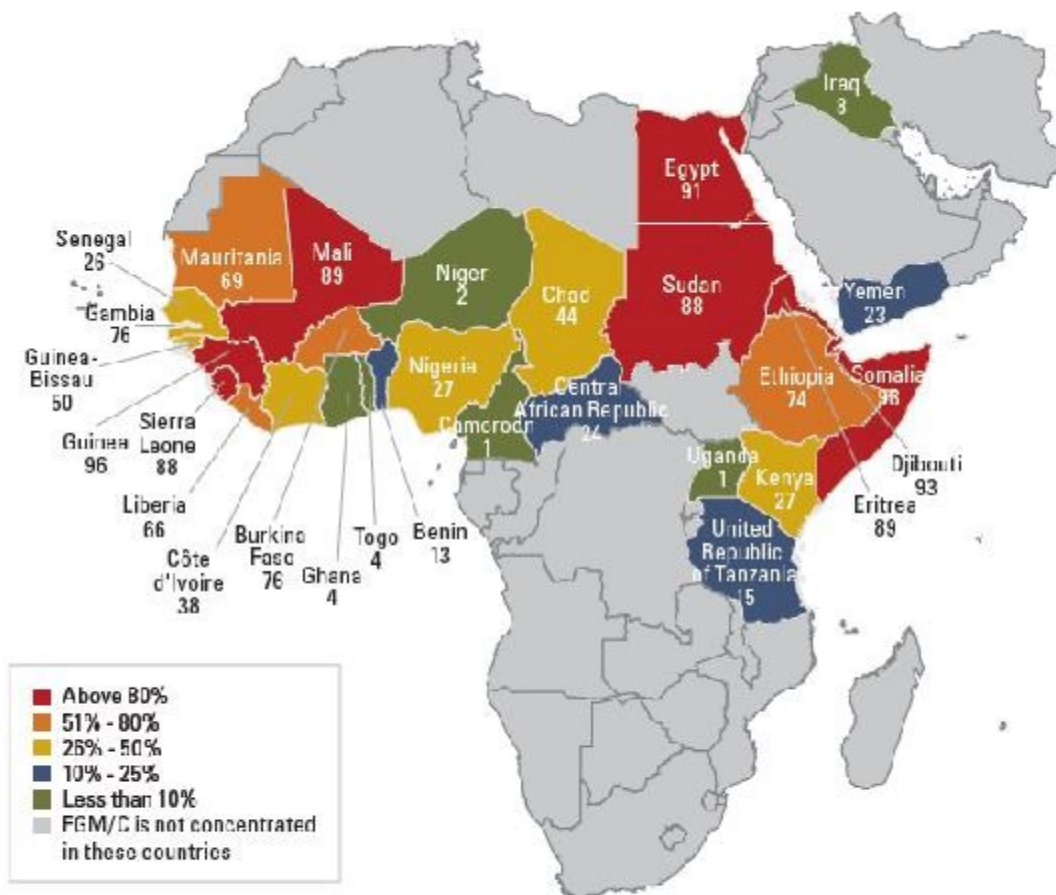
FGM is a deeply rooted tradition, widely practised mainly among specific ethnic populations in Africa and parts of the Middle East and Asia, which serves as a complex form of social control of women's sexual and reproductive rights.

The World Health Organization estimates that between 100 and 140 million girls and women worldwide have experienced female genital mutilation and around 3 million girls undergo some form of the procedure each year in Africa alone. See below for African countries' prevalence.

FGM has also been documented in communities in **Iraq, Israel, Oman, the United Arab Emirates**, the Occupied Palestinian Territories, India, Indonesia, Malaysia and Pakistan.

PREVALENCE OF FGM AMONG WOMEN AGED 15-49 IN AFRICA AND THE MIDDLE EAST

(Source: UNICEF (July 2013), global databases based on data from Multiple Indicator Cluster Survey, Demographic and Health Survey and other national surveys, 1997-2012.)



IDENTIFYING GIRLS AND WOMEN AT RISK

Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl or woman being at risk of FGM, or already having undergone FGM. There are a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person.

Victims of FGM are likely to come from a community that is known to practise FGM.

Provided that the mutilation takes place in the UK, the nationality or residence status of the victim is irrelevant.

Professionals should also note that the girls and women at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

SPECIFIC FACTORS THAT MAY HEIGHTEN A GIRL'S OR WOMAN'S RISK OF BEING AFFECTED BY FGM

There are a number of factors in addition to a girl's or woman's community or country of origin that could increase the risk that she will be subjected to FGM:

The position of the family and the level of integration within UK society - it is believed that communities less integrated into British society are more likely to carry out FGM.

Any girl born to a woman who has been subjected to FGM must be considered to be at risk of FGM, as must other female children in the extended family.

Any girl who has a sister who has already undergone FGM must be considered to be at risk of FGM, as must other female children in the extended family.

Any girl withdrawn from Personal, Social and Health Education or Personal and Social Education may be at risk as a result of her parents wishing to keep her uninformed about her body and rights.

INDICATIONS THAT FGM MAY BE ABOUT TO TAKE PLACE SOON

The age at which girls undergo FGM varies enormously according to the community. **The procedure may be carried out when the girl is newborn, during childhood or adolescence, at 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 and therefore girls within that age bracket are at a higher risk.

It is believed that **FGM happens to British girls in the UK as well as overseas** (often in the family's country of origin). Girls of school age who are subjected to FGM overseas are thought to be taken abroad at the start of the school holidays, particularly in the summer holidays, in order for there to be sufficient time for her to recover before returning to her studies.

There can also be clearer signs when FGM is imminent:

It may be possible that families will practise FGM in the UK when a female family elder is around, particularly when she is visiting from a country of origin.

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A professional may hear reference to FGM in conversation, for example a girl may tell other children about it (See below for commonly used terms in different languages).

A girl may confide that she is to have a 'special procedure' or to attend a special occasion to 'become a woman'.

A girl may request help from a teacher or another adult if she is aware or suspects that she is at immediate risk.

Parents state that they or a relative will take the child out of the country for a prolonged period.

A girl may talk about a long holiday to her country of origin or another country where the practice is prevalent (see Section 2.5 for the nationalities that traditionally practise FGM).

Parents seeking to withdraw their children from learning about FGM.

INDICATIONS THAT FGM MAY HAVE ALREADY TAKEN PLACE

It is important that professionals look out for signs that FGM has already taken place so that:

- the girl or woman affected can be supported to deal with the consequences of FGM.
- enquiries can be made about other female family members who may need to be safeguarded from harm.
- criminal investigations into the perpetrators, including those who carry out the procedure, can be considered to prosecute those breaking the law and to protect others from harm.

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

- A girl or woman may have difficulty walking, sitting or standing and may even look uncomfortable.
- A girl or woman may spend longer than normal in the bathroom or toilet due to difficulties urinating.

TERMS USED FOR FGM IN OTHER LANGUAGES

Country	Term used for FGM	Language
CHAD - the Ngama Sara subgroup	Bagne Gadja Niaka	Mandinka
GAMBIA	Kuyungo Musolula	Mandinka Mandinka
GUINEA-BISSAU	Fanadu di Mindjer	Kriolu
EGYPT	Thara	Arabic

	Khitan	Arabic
	Khifad	Arabic
ETHIOPIA	Megrez	Amharic
	Absum	Harrari
ERITREA	Mekhnishab	Tigreña
IRAN	Xatna	Farsi
KENYA	Kutairi	Swahili
	Kutairi was	Swahili
NIGERIA	Ibi/Ugwu	Igbo
	Didabe fun omobirin/ ila kiko fun omobirin	Yoruba
SIERRA LEONE	Sunna	Soussou
	Bondo	Temenee
		Mendee
Bondo/sonde		
	Bondo	Mandinka
	Bondo	Limba
SOMALIA	Gudiniin	Somali
	Halalays	Somali
SUDAN	Qodiin	Somali
	Khifad	Arabic
	Tahoor	Arabic
TURKEY	Kadin Sunneti	Turkish

Appendix 3: Prevent Duty

From 1st July 2015, schools and education providers have been required to prevent young people from being drawn into terrorism. Staff must know how to identify children who are at risk of radicalisation and what to do if children are identified.

Staff should be aware of the following:

- **British Values**

“Democracy, the rule of law, equality of opportunity, freedom of speech and the rights for all men and women to live free from persecution of any kind”.

- **Extremism**

“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”.

- **Radicalisation**

“the process by which a person comes to support terrorism and forms of extremism leading to terrorism”.

What should I do if I have a concern?.....

Notice → Check → Share concerns

- Refer concern to the school’s Safeguarding Officers.
- Safeguarding officer considers options that include seeking advice from Safeguarding Helpdesk. Duty social worker will advise (eg Social Care involvement; CP referral; school-based intervention; Channel referral via police*)

Channel

Channel is a programme that uses a multi-agency approach to protect vulnerable people by:

- Identifying individuals at risk (people of all ages).
- Assessing the nature and extent of that risk.
- Developing the most appropriate support plan for the individuals concerned.

The *Channel Vulnerability Assessment Framework* is used to guide decisions about whether an individual needs support to address their vulnerability to being drawn in to terrorism as a consequence of radicalisation.

Stage 1: Engagement with a group, cause or ideology (psychological hooks)

- Feelings of grievance and injustice
- Feeling under threat
- A need for identity, meaning and belonging
- A desire for status
- A desire for excitement and adventure
- A need to dominate and control others
- Susceptibility to indoctrination
- A desire for political or moral change
- Opportunistic involvement
- Family or friends involvement in extremism
- Being at a transitional time of life
- Being influenced or controlled by a group
- Relevant mental health issues

Stage 2 : Intent to cause harm

Not all those who become engaged by a group, cause or ideology go on to develop an intention to cause harm, so this dimension is considered separately. Intent factors describe the mind-set that is associated with a readiness to use violence and address what the individual would do and to what end. They can include:

- Over-identification with a group or ideology
- ‘Them and Us’ thinking
- Dehumanisation of the enemy
- Attitudes that justify offending
- Harmful means to an end
- Harmful objectives

Stage 3 : Capability to cause harm

Not all those who have a wish to cause harm on behalf of a group, cause or ideology are capable of doing so, and plots to cause widespread damage take a high level of personal capability, resources and networking to be successful. What the individual is capable of is therefore a key consideration when assessing risk of harm to the public. Factors can include:

- Individual knowledge, skills and competencies
- Access to networks, funding or equipment
- Criminal Capability

Appendix 4: Definitions - Sexting, Honour Based Violence

Sexting

The term 'sexting' is derived from texting and refers to the sending of sexually provocative material (including photos, videos and sexually explicit text) from modern communication devices or applications, such as mobile phones, tablets, email, social networking sites and instant messaging services.

Our Place Schools deems sexting as inappropriate and unsafe behaviour which threatens the social, emotional and/or physical safety of pupils. Sexting can result in the humiliation, bullying and harassment of pupils.

The school has a responsibility to prevent sexting and the dissemination of inappropriate or offensive material and to educate both students and staff about both the legal and social dangers of sexting.

The 'distribution of an intimate image' or to 'threat to distribute an intimate image' is an offence under the law. The offence applies to the distribution of images of anyone under 18 years of age, and the distribution of images of adults without consent. The offence for distribution carries a penalty of up to two years in prison and the offence of threatening to distribute carries a penalty of up to one year in prison.

All staff members are required to notify the DSO upon becoming aware that sexting by, or featuring, a pupil is likely to have occurred.

Honour Based Violence (HBV)

HBV is a collection of practices used to control behaviour within families to protect perceived cultural or religious beliefs and honour. Violence can occur when offenders perceive that a relative has shamed the family or community by breaking their 'code of honour'. Honour Based Violence cuts across all cultures and communities: Turkish, Kurdish, Afghani, South Asian, African, Middle Eastern, South and Eastern European for example. This is not an exhaustive list. Where a culture is heavily male dominated, HBV may exist.

Appendix 5: Roles and Responsibilities of the Single Point of Contact (SPOC)

As the SPOC for your organisation you will be responsible for:

- Ensuring that other staff in the organisation are aware that you are the SPOC in relation to protecting individuals from radicalisation and involvement in terrorism;
- Maintaining and applying a good understanding of the relevant guidance in relation to preventing individuals from becoming involved in terrorism, and protecting them from radicalisation by those who support terrorism or forms of extremism which lead to terrorism;
- Raising awareness about the role and responsibilities of the organisation in relation to protecting individuals from radicalisation and involvement in terrorism;
- Raising awareness within the organisation about the safeguarding processes relating to protecting individuals from radicalisation and involvement in terrorism;
- Acting as the first point of contact within the organisation for case discussions relating to individuals who may be at risk of radicalisation or involved in terrorism;
- Making referrals of individuals at risk to Greater Manchester Police or the Channel Coordinator as appropriate in line with the safeguarding policy;
- Collating relevant information from your organisation in relation to referrals of vulnerable children and young people or adults into the Channel process;
- Attending Channel meetings as necessary and carrying out any actions as agreed;
- Reporting progress on actions to the Channel Co-ordinator; and
- Sharing any relevant additional information in a timely manner

