

# Safeguarding & child protection policy



## Management log

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CEO

## Document history

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V1	September 2018	Judi O'Leary	13 September 2018	13 September 2018	To secure a safeguarding and child protection policy which conforms with KCSiE <sup>1</sup> 2018
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## Related policies

Policy	Website link
Code of conduct (SHINE Take Care charter)	<a href="http://www.shine-mat.com/take-care/">http://www.shine-mat.com/take-care/</a>
Complaints	<a href="http://www.shine-mat.com/business/">http://www.shine-mat.com/business/</a>
Equality	<a href="http://www.shine-mat.com/pupil-welfare/">http://www.shine-mat.com/pupil-welfare/</a>

<sup>1</sup> KCSiE (Keeping Children Safe in Education)

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

Educational visits	Contact individual academies <sup>3</sup>
First aid	Contact individual academies
General Data Protection Regulation (GDPR)	<a href="http://www.shine-mat.com/gdpr/">http://www.shine-mat.com/gdpr/</a>
Health and safety	Contact individual academies
Managing allegations of abuse	<a href="http://www.shine-mat.com/business/">http://www.shine-mat.com/business/</a>
Missing children in education	Contact individual academies
Online safety	Contact individual academies
Sex and relationships education	Contact individual academies
Safer Recruitment	Contact <a href="mailto:admin@shine-mat.com">admin@shine-mat.com</a>
Whistleblowing	<a href="http://www.shine-mat.com/business/">http://www.shine-mat.com/business/</a>

Please note that the version of this document contained at <https://www.shine-mat.com/trust-documents/> is the only version that is maintained.

Any printed copies should therefore be viewed as ‘uncontrolled’ and as such, may not necessarily contain the latest updates and amendments.

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<sup>3</sup><http://www.ironvillecodnorpark.derbyshire.sch.uk/policies/>  
<http://www.langold-dyscarr.org/policies/>  
<http://www.ranskillprimary.co.uk/key-information/policies>  
<https://www.scotholme.com/policies.html>  
<http://www.whitemooracademy.co.uk/policies/>

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## 1. Introduction

1.1 SHINE Multi Academy Trust (SHINE), fully recognises its responsibilities for child protection. Our policy applies to all staff, trustees, local governors and volunteers working in the academies<sup>4</sup> of SHINE.

1.2 SHINE will always act in the best interests of the child. The five main elements of our policy are:

- To ensure we practise safe recruitment in checking the suitability of staff and volunteers to work with the children.
- To raise awareness of child protection issues and equip children with the skills needed to keep them safe.
- To develop and then implement procedures for identifying and reporting cases, or suspected cases, of abuse.
- To support pupils who have been abused in accordance with their agreed child protection plan.
- To establish a safe environment in which children can learn and develop.

1.3 SHINE recognises that because of the day-to-day contact with children, staff are well placed to observe the outward signs of abuse. The Board of Trustees (Board) and academies within SHINE will therefore:

- Establish and maintain an environment where children feel secure, are encouraged to talk and are listened to.
- Ensure children know that there are adults in the academy whom they can approach if they are worried.
- Include opportunities in the Personal, Social, Health and Economic Education (PSHE) curriculum for children to acquire the skills they need to recognise and stay safe from abuse.
- Ensure pupils are taught about safeguarding, including online, through various teaching and learning opportunities, as part of providing a broad and balanced curriculum.

1.4 Following the procedures set out by the Local Safeguarding Children Board<sup>5</sup> and taking into account guidance issued by the Department for Education (DfE) each SHINE academy will:

- Ensure they have a designated senior person for child protection who has received appropriate training and support for this role. (Designated Safeguarding Lead – DSL)
- Ensure they have a nominated governor responsible for child protection within their Local Governing Body (LGB).

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<sup>4</sup> As at approval of this policy, SHINE supports five academies – Ironville and Codnor Park Primary School, Langold Dyscarr Community School, Ranskill Primary School, Scotholme Primary and Nursery School, and Whitemoor Academy.

<sup>5</sup> <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

- Ensure every member of academy staff and LGB knows the name of the designated senior person and their role.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and referring any concerns to the designated senior person responsible for child protection who will help staff decide what to do next.
- Options include managing any support for the child internally via the school's own pastoral support processes; an early help assessment; or a referral for statutory services as the child is in need, suffering or likely to suffer harm.
- If staff are unsure, they should always speak to the DSL. In an emergency or with a genuine concern that appropriate action has not been taken, staff members should speak directly to children's social care. 'If a child is in immediate danger or at risk of harm a referral should be made to children's social care/and or the police immediately. Anyone can make a referral.' (Keeping Children Safe in Education (KCSiE) 2019)
- Notify Social Services if there is an unexplained absence of more than two days of a pupil on a child protection register.
- Develop effective links with relevant agencies and co-operate as required with their enquiries, including attendance at case conferences.
- Keep written records of concerns about children even when there is no need to refer the matter immediately.
- Ensure all records are kept securely, separate from the main pupil file.
- Follow procedures where an allegation is made against a member of staff or volunteer in accordance with the statutory guidance – KCSiE 2019 – and with reference to the Trust's 'Dealing with Allegations' policy. If an allegation of abuse is made against a child, we will follow the Local Safeguarding Children Board procedures and pupils involved will be referred to Social Services. SHINE will advise that the pupils involved are allocated to different social workers.
- Ensure safe recruitment practices are always followed.

1.5 SHINE recognises 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. The SHINE Academies may be the only stable, secure and predictable element in the lives of children at risk. Therefore, their behaviour may be challenging or defiant or they may be withdrawn. The academy will endeavour to support the pupil through:

- The content of curriculum.
- The SHINE ethos which promotes a positive and secure environment and gives pupils a sense of being valued.
- The academy behaviour policy, which ensures that pupils know that some behaviour is unacceptable, but they are valued and not blamed for any abuse that has occurred.

- Liaison with other agencies that support the pupil such as Social Services, Child and Adolescent Mental Health Services (CAMHS).
- Ensuring that, where a child on the child protection register leaves, their information is transferred to the new educational provision immediately and that the child's social worker is informed.

## **2. Ways to recognise child abuse and neglect**

2.1 Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to prevent harm. Children may be abused in a family or an institutional or community setting, by those known to them or, more rarely, by a stranger. Abuse can also take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

## **3. Physical abuse**

3.1 Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to, a child whom they are looking after. A person might do this because they enjoy or need the attention, they get through having a sick child. Physical abuse can be caused through omission or the failure to act to protect.

## **4. Visible signs**

- Injuries to any part of the body.
- Children who find it painful to walk, sit down, or move their jaws, or who are in some other kind of pain.
- Injuries that are not typical of the bumps and scrapes associated with children's activities.
- The child who is frequently injured, even where apparently reasonable explanations are given.

## **5. Behavioural signs**

- Furtive, secretive behaviour.
- Uncharacteristic aggression or withdrawn behaviour.
- Compulsive eating or sudden loss of appetite.
- The child who suddenly exhibits poor co-ordination.
- The child who finds it difficult to stay awake.
- The child who is repeatedly absent.

## 6. What to listen for

- Listen for confused or conflicting explanations of how the injuries were sustained.
- Evaluate carefully what is said and preferably document verbatim.
- Consider if the explanation is in keeping with the nature, age and site of injury.

## 7. Consider

- What do you know about the family?
- Is there a history of known or suspected abuse?
- Has the family been under stress recently?
- Do you have concerns about the family?

## 8. Emotional abuse

8.1 Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve making a child feel or believe that they are worthless or unloved, inadequate or valued only in so far as they meet the needs of another person.

8.2 The recognition of emotional abuse is based on observations over time of the quality of relationships between parent/carer and the child.

## 9. Watch for parent/carer behaviours

- Poor attachment with the child.
- Unresponsive or neglectful behaviour towards child's emotional or psychological needs.
- Persistent negative comments about the child.
- Inappropriate or inconsistent development expectations of the child.
- Dysfunctional family relationships including domestic violence.

## 10. Watch for child behaviour

- Emotional indicators such as low self-esteem, unhappiness, fear, distress and anxiety.
- Behavioural indicators such as attention seeking, withdrawal, insecurity.
- Physical indicators such as failure to thrive/faltering growth, delay in achieving developmental or cognitive or educational milestones.

## 11. Sexual abuse

11.1 Sexual abuse involves forcing or enticing a young person to take part in sexual activities, whether or not the child is aware of, or consents to what is happening. The activities may involve physical contact, including penetrative acts such as rape, buggery or oral sex or non-penetrative acts such as fondling. Sexual abuse may also include non-contact activities or encouraging children to behave in sexually

inappropriate ways. Boys and girls can be sexually abused by males and/or females, by adults and by other young people. This includes people from every walk of life.

11.2 Sexual abuse can take place online and technology can be used to facilitate offline abuse.

11.3 There may be no recognisable signs of sexual abuse, but the following indicators may be signs that a child is or has been sexually abused.

## 12. Physical

- A sign of blood or other discharge on the child's under clothes.
- Awkwardness in walking or sitting down.
- Tummy pains.
- Regression to an early development stage enuresis (bedwetting).
- Tiredness.

## 13. Behavioural

- Extreme variations in behaviour (e.g. anxiety, aggression, or withdrawal).
- Sexually provocative or inappropriate behaviour, or knowledge that is incompatible with the child's age and understanding.
- Drawings and/or written work which are sexually explicit (indirect disclosure).
- Direct disclosure; it is important to recognise that children have neither the experience nor the understanding to be able to make up stories about sexual assault.

## 14. Child sexual exploitation

14.4 Child Sexual Exploitation (CSE) is: sexual exploitation of children and young people under the age of eighteen involving exploitative situations, contexts and relationships where the young person (or third person/s) receives 'something' (e.g., food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or others performing on them, sexual activities. Child Sexual Exploitation can occur through the use of technology without the child's immediate recognition; for example, being persuaded to post images on the internet/mobile phones.

14.2 Staff should also be aware that many children and young people who are victims of sexual exploitation do not recognise themselves as such.

14.3 The children who are most at risk of being targeted by perpetrators are children who:

- Are frequently 'missing' from the academy, home or residential care.
- Are vulnerable due to living in neglectful household.
- Have been separated or trafficked.
- Are unaccompanied and seeking asylum.
- Are living in residential care.

14.4 There are three main types of Child Sexual Exploitation:

14.4.1 **Inappropriate relationships:** Usually involves just one abuser who has power – physical, emotional or financial – or control over a young person. The young person may believe they have a genuine friendship or loving relationship with their abuser.

14.4.2 **Boyfriend/Girlfriend:** Abuser grooms the victim by striking up a normal relationship with them, giving them gifts and meeting in cafes or shopping centres. A seemingly consensual sexual relationship develops but later turns abusive. Victims may be required to attend parties and perform sexual acts with multiple men/women and threatened with violence if they try to seek help.

14.4.3 **Organised exploitation and trafficking<sup>6</sup>:** Victims are trafficked through criminal networks – often between towns and cities – and forced or coerced into sex with multiple adults. They may also be used to recruit new victims. This serious organised activity can involve the buying and selling of young people.

14.5 Staff should report any concerns relating to possible Child Sexual Exploitation to the DSL(s) using the same safeguarding procedure used for all safeguarding concerns within the Academy.

## 15. Children missing from education

15.1 Information below is taken from ‘KCSiE’;

*‘All children, regardless of their circumstances are entitled to a full-time education which is suitable to their age, ability, aptitude and any special educational needs they may have. LAs have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing in education in their area.’*

15.2 SHINE academies will inform the relevant Local Authority (LA) of any pupil who fails to attend their academy regularly, or has been absent without permission for a continuous period of 10 days or more, at such intervals as are agreed between the academy and the LA.

## 16. Neglect

16.1 Neglect is the persistent failure to meet a child’s basic physical and/or psychological needs. It may involve a parent or carer failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

16.2 Indicators of neglect are recognisable in the child, in the parent/carers’ behaviours and within the home environment.

## 17. Physical signs

- Abnormal growth including failure to thrive.

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<sup>6</sup> <https://www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence>

- Underweight or obese.
- Recurrent infection.
- Unkempt dirty appearance.
- Smelly.
- Inadequate/unwashed clothes.
- Hunger.
- Listlessness.

#### 18. Behavioural signs

- Attachment disorders.
- Indiscriminate friendliness.
- Poor social relationships.
- Poor concentration.
- Development delays.
- Low self-esteem.

#### 19. Environmental signs

- Insufficient food, heating and ventilation in the home.
- Risk from animals in the household.
- Inappropriate sleeping arrangements and inadequate bedding.
- Dangerous or hazardous environment.

#### 20. Contextual safeguarding

20.1 'Working Together to Safeguard Children' and KCSiE 2019 both introduce a new concept of contextual safeguarding to describe the risks that children and young people face from their peers or in the wider community including:

- Online safety.
- Sexual Exploitation.
- Criminal exploitation.
- Radicalisation (see section 23).
- Trafficking.

20.2 Schools will identify the greatest risks regarding contextual safeguarding in their particular locality and seek to minimise these risks through their school specific section of this policy. Staff should be alert in noticing any changes in a pupil's behaviour and pass on their concerns by following the Child Protection Policy Procedure in the same way as they would for any safeguarding concern. Staff will always be made aware of such new concepts through their annual training on safeguarding.

## **21. Private fostering**

- 21.1 A private fostering arrangement is one that is made privately (without the involvement of a LA) 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.
- 21.2 A close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and stepparents; it does not include great-aunts or uncles, great-grandparents or cousins.
- 21.3 Parents and private foster carers both have a legal duty to inform the relevant LA at least six weeks before the arrangement is due to start; not to do so is a criminal offence.
- 21.4 Whilst most privately fostered children are appropriately supported and looked after, they are a potentially vulnerable group who should be monitored by the LA, particularly when the child has come from another country. In some cases, privately fostered children are affected by abuse and neglect, or involved in trafficking, Child Sexual Exploitation or Modern Slavery.
- 21.5 Academies have a mandatory duty to report to the LA where they are aware or suspect that a child is subject to a private fostering arrangement. Although academies have a duty to inform the LA, there is no duty for anyone, including the private foster carer or social workers to inform the academy. However, it should be clear to the academy who has parental responsibility.
- 21.6 Academy staff should notify the DSL when they become aware of private fostering arrangements. The DSL will speak to the family or the child involved to check that they are aware of their duty to inform the LA. The academy itself has a duty to inform the LA of the private fostering arrangements.
- 21.7 On admission to the academy, we will take steps to verify the relationship of the adults to the child who is being registered.

## **22. Female Genital Mutilation**

- 22.1 We need to be alert to the possibility of a girl being at risk of Female Genital Mutilation (FGM) or already having suffered Female Genital Mutilation. There is a range of possible indicators that a child or young person may be at risk of Female Genital Mutilation, which individually may not indicate risk but if there are two or more indicators present this could signal a risk.
- 22.2 Victims of Female Genital Mutilation are likely to come from a community that is known to practice FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.
- 22.3 A child may be considered at risk of Female Genital Mutilation if:

- She comes from a community/culture that practices Female Genital Mutilation (usually Kenya, Somalia, Egypt, Eritrea, Nigeria, Ghana, Sierra Leone, Uganda, Ethiopia and Sudan).
- Her mother or older girls in the family have undergone Female Genital Mutilation.
- The family hold a positive attitude towards Female Genital Mutilation; view Female Genital Mutilation as a beneficial tradition worthy of upholding.
- She is isolated.
- Her grandmother is present or has great influence in the family.
- No one has ever raised the issue of Female Genital Mutilation with the child/family or provided accessible/age specific information.
- A girl makes reference to Female Genital Mutilation or exhibits fear/excitement related to the issue. She may verbally request help to stop it happening.
- You receive word that a family intend to take their child(ren) to their country of origin for a significant time period to familiarise them with local traditions, especially if the child falls within the age at which Female Genital Mutilation is more likely to occur when visiting her grandparents in their home country, even though parents may be strongly opposed to the procedure. Numerous reports describe children being taken by grandparents for Female Genital Mutilation while left unattended by parents.
- A child refers to going away for other reasons e.g. 'My mother says I am to go home for a holiday to stay with Grandmother and that I will come back a woman'; 'I am going on holiday and will come back with a sore bottom'.
- Similarly, a child who refers to a female relative visiting for a special ceremony.

22.4 Staff should inform the DSL of any concerns in this area using the academy's reporting system, as stated in this document. The DSL should activate local safeguarding procedures for multi-agency liaison with police and social care. Refer to KCSiE 2019.

## **23. Preventing radicalisation**

### **23.1 The Prevent Duty:**

From 1 July 2015 academies are subject to a duty under section 26 of the Counter-Terrorism and Security Act 2015, in the exercise of their functions to have 'due regard to the need to prevent people from being drawn into terrorism'. This duty is called 'The Prevent Duty'.

23.2 In order for academies to fulfil The Prevent Duty, it is essential that staff are able to identify children who may be vulnerable to radicalisation and know what to do when they are identified. Protecting children from the risk of radicalisation should be seen as part of an academy's wider safeguarding duties and is similar in nature to protecting children from other harms (e.g. neglect or sexual abuse).

- 23.3 SHINE aims to build pupils' resilience to radicalisation by promoting Fundamental British Values through our inclusive ethos, our rigorous Spiritual, Moral, Social and Cultural (SMSC) planning and our Empowering Learning Programme.
- 23.4 There is no single way of identifying an individual who is likely to be susceptible to a terrorist ideology. As with managing other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. Children at risk of radicalisation may display different signs or seek to hide their views. Academy staff should use their professional judgement in identifying children who may be at risk of radicalisation and act proportionately.
- 23.5 'Even young children may be vulnerable to radicalisation by others, whether in the family or outside and display concerning behaviour. The Prevent Duty does not require teachers to carry out unnecessary intrusion into family life but, as with any other safeguarding risk, they must take action when they observe behaviour of concern.' Taken from 'The Prevent Duty'<sup>7</sup>
- 23.6 Staff should follow the Child Protection Policy Procedure to report any concerns to the DSLs as they would for any other safeguarding issues.
- 23.7 The DSLs should decide if it is appropriate to make a referral to the Channel programme<sup>8</sup>. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to be drawn to terrorism.

#### **24. Honour based violence**

- 24.1 So-called 'honour based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such.
- 24.2 Where staff are concerned that a child might be at risk of HBV, they must contact the DSL as matter of urgency.

#### **25. Peer on Peer abuse**

- 25.1 Staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but not be limited to: bullying (including cyber bullying), gender-based violence/sexual assaults/inappropriate sexual play/grooming and sexting.
- 25.2 Abuse should never be tolerated or passed off as 'banter' or part of growing up. Different gender issues can be prevalent when dealing with peer on peer abuse. This could, for example, include girls being sexually touched or assaulted, or boys being subject to initiation-type violence.

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<sup>7</sup> <https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

<sup>8</sup> Guidance on the Channel Programme can be found at <https://www.gov.uk/government/publications/channel-guidance>

25.3 Within SHINE we believe that all children have a right to attend their academy and learn in a safe environment. Children should be free from harm from staff, pupils and volunteers.

25.4 See SHINE's managing allegations of abuse policy for information on how such incidents<sup>9</sup> will be dealt with.

## 26. Upskirting

26.1 Upskirting typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm.

26.2 As Upskirting is a criminal offence, when an upskirting incident comes to the academy's attention:

1. The incident must be referred to the DSL as soon as possible.
2. The DSL should hold an initial review meeting with appropriate academy staff.
3. There should be subsequent interviews with the young people involved (if appropriate).
4. Parents should be informed at an early stage and involved in the process unless there is good reason to believe that involving the parent would put the young person at risk of harm.
5. The DSL should make a referral to young person's social services and the police.

## 27. Sexting

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

1. The incident should be referred to the DSL as soon as possible.
2. The DSL should hold an initial review meeting with appropriate academy staff.
3. There should be subsequent interviews with the young people involved if appropriate.
4. Parents should be informed at an early stage and involved in the process unless there is good reason to believe that involving the parent would put the young person at risk of harm.
5. At any point in the process if there is concern a young person has been harmed or is at risk of harm a referral to young person's social services or the police should be made immediately.

## 28. Early help

28.1 Any child may benefit from early help, but staff should be particularly alert to the potential need of early help with a child who:

- Is disabled and has specific additional needs.

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<sup>9</sup> <https://primarysite-prod-sorted.s3.amazonaws.com/shine-multi-academy-trust/UploadedDocument/618c404d87204a408ce787fcbc73a891/managing-allegations-policy.pdf>

- Has special educational needs (whether or not they have a statutory Education, Health and Care Plan).
- Is a young carer.
- Is frequently missing/goes missing from care or home.
- Is misusing drugs or alcohol.
- Is in a family circumstance presenting challenges for the child such as substance abuse, adult mental health problems.
- Has returned home to family from care.

28.2 SHINE will support its academies in providing a co-ordinated offer of early help when additional needs of children are identified.

## 29. Special Educational Needs and Disabilities

29.1 Children with special educational needs and disabilities (SEND) can face additional safeguarding challenges. Staff should be made aware that additional barriers can exist when recognising abuse and neglect in this group of children. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without exploration.
- Being more prone to peer isolation than other children.
- The potential for children with SEND being disproportionately impacted by behaviours such as bullying without outwardly showing any signs.
- Communication barriers and difficulties in overcoming these barriers.

29.2 Staff within SHINE will be encouraged to understand these barriers to recognition of abuse and treat our pupils with special educational needs and disabilities with 'extra care' in respect to safeguarding.

## 30. Child criminal exploitation: county lines

30.1 Staff within SHINE have also been made aware of the exploitation of children through county lines criminal activity. Drug networks or gangs may groom and exploit children and young people to carry drugs and money from urban areas to suburban and rural areas, market and seaside towns. This may lead to 'missing episodes' when the pupil is absent from school with no explanation.

30.2 Staff will be vigilant in monitoring pupil attendance so that missing episodes are spotted, and concerns passed on appropriately to the DSL as outlined throughout this policy. In this instance the DSL should use the guidance from the Home Office 'Criminal exploitation of children and vulnerable adults: county lines' guidance 2017<sup>10</sup> and take action accordingly.

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<sup>10</sup> <https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines>

### 31. Training requirements

- 31.1 All staff who work with children need to have basic safeguarding training which includes child protection and equips them to recognise and respond to child welfare concerns. The depth and detail of training needed by different groups will vary according to the nature of their role and the extent of their involvement with children.
- 31.2 All staff and governors should receive training when they are first appointed. Staff induction should include an understanding of the child protection policy, code of conduct (Take Care Charter), whistleblowing procedures, role of the DSL and pupil behaviour policy.

### 32. Additional training

- 32.1 As well as their statutory child protection training every three years, all staff are made aware/reminded of the Trust's and individual academies' systems and procedures for reporting safeguarding concerns at the start of every academic year- as well as being reminded/informed of any changes in legislation which have taken place within the year.
- 32.2 Staff have a duty to read any updates/relevant policies and sign to say that they understand their responsibilities in these areas.

### 33. Data Protection Act

- 33.1 The Data Protection Act 2018 and General Data Protection Regulation (GDPR) does not prevent or limit the sharing of information for the purposes of keeping children safe. Fears about sharing information **cannot** be allowed to stand in the way of the need to promote and protect the safety of children.

### 34. Case study

- 34.1 A class teacher found a naked photo of a child (boy aged 11) in an academy tablet. The child said that he had been using the tablet with two other children during lunchtime and they dared him to take a picture of his bottom.
- 34.2 Academy response:
- The academy had no other significant safeguarding concerns about the children or their families. The academy DSL spoke with the LA education safeguarding team and subsequently accessed the local safeguarding children board's guidance regarding underage sexual activity. This guidance indicated that the behaviour was likely to be inappropriate but did not meet the threshold for a referral to children's social care.
  - The academy DSL spoke with the children involved and their parents and advised them on the situation and possible consequences including police and social care involvement. The children were sanctioned in academy for their behaviour and the parents were fully supportive of the academy's approach.

- All members of staff were provided with updated online safety training and a reminder of the academy Online safety and acceptable use policy to ensure that children were not left unsupervised with academy tablets. The academy documented the incident and the action taken in the children's safeguarding records.

### **35. Local guidance**

35.1 All academies within SHINE have approved local guidance which can be accessed via the following links;

- **Ironville and Codnor Park Primary School**  
<http://www.ironvillecodnorpark.derbyshire.sch.uk/policies/>
- **Langold Dyscarr Community School**  
<http://www.langold-dyscarr.org/policies/>
- **Ranskill Primary School**  
<http://www.ranskillprimary.co.uk/key-information/policies>
- **Scotholme Primary and Nursery School**  
<https://www.scotholme.com/key-information1.html>
- **Whitemoor Academy (Primary and Nursery)**  
<http://www.whitemooracademy.co.uk/policies/>

### Management log

<b>Document</b>	Safeguarding & Child Protection – local procedures
<b>Author</b>	Headteacher
<b>Person responsible for the document</b>	Headteacher
<b>Date approved</b>	20 November 2019
<b>Date issued</b>	20 November 2019
<b>Review period</b>	Annually
<b>Next review</b>	Summer 2020
<b>Reviewer</b>	Chair of the LGB on behalf of the LGB

### Document history

Version	Date authored	Author	Date approved	Date issued	Comments
V1	September 2018	Kate Hall	9 October 2018	10 October 2018	To secure local application of the SHINE safeguarding and child protection policy which conforms with KCSiE 2018
V2	November 2019	Kate Hall	20 November 2019	20 November 2019	Reviewed to ensure the local application reflects changes to KCSiE 2019

<b>Designated Safeguarding Leads &amp; Governor</b>	
<b>Name</b>	<b>Contact</b>
<b>Kate Hall - HT</b>	<b>978 1968</b>
<b>Ann Dargavel - SENCo</b>	<b>978 1968</b>
<b>Carl Hollis- DHT</b>	<b>978 1968</b>
<b>Elaine Fox - CoG</b>	<b>0115 876 4540</b>
<b>HEADTEACHER</b>	<b>As above</b>

The Designated Safeguarding Lead (DSL) is responsible for safeguarding and child protection at **Scotholme Primary and Nursery School**. The key role of the DSL is to:

- Manage referrals from school staff or any others from outside the school.
- Work with external agencies and professionals on matters of safety and safeguarding.
- Undertake training;
- Raise awareness of safeguarding and child protection amongst the staff and parents.
- Ensure that child protection information is transferred to the pupil's new school.

**Reporting Concerns – When staff in school have a concern about a child they should: Complete a concern form and contact the DSL in person**  
**In the office – staff to ask**

At **Scotholme** we recognise the possibility that adults working in the school may harm children. Any concerns about the conduct of other adults in the school should be taken to the headteacher without delay (or where that is not possible, the DSL) and concerns about the headteacher should go to the chair of governors who can be contacted by telephone on **0115 876 4540**.

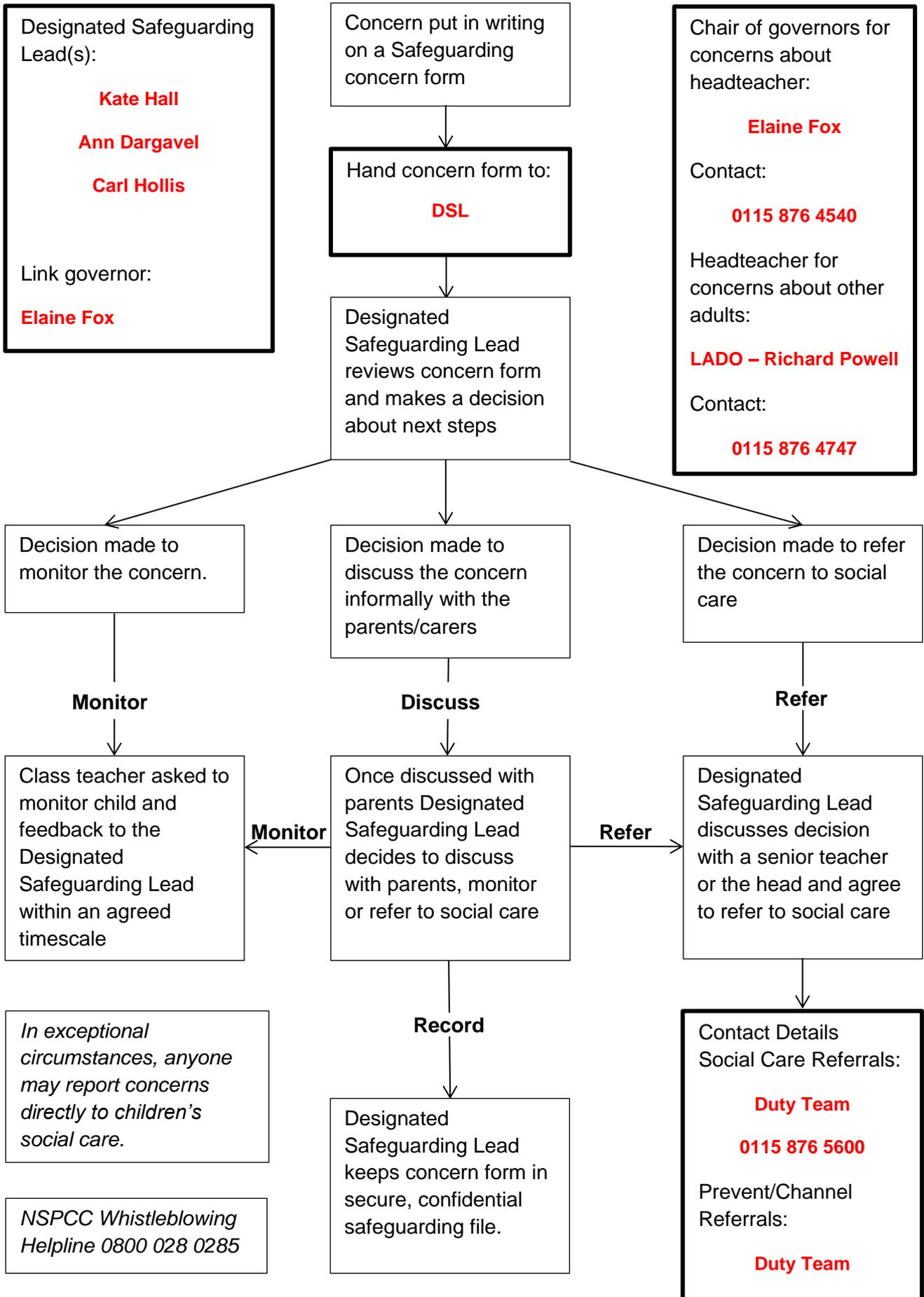
## **WHISTLEBLOWING**

Where there are concerns about the way safeguarding is carried out in the school, staff should refer to the Whistleblowing Policy. A whistleblowing disclosure must be about something that affects the general public such as:

- A criminal offence has been committed, is being committed or is likely to be committed.
- A legal obligation has been breached.
- There has been a miscarriage of justice.
- The health and safety of any individual has been endangered.

**The following flow chart must be completed by the schools DSL in full detailed and followed in safeguarding case within school. Any change to procedure must be noted.**

**FLOW CHART FOR RAISING SAFEGUARDING CONCERNS ABOUT A CHILD**



In the above flowchart changes can be made in any of the steps to assure they are correct for the individual school and the flowchart highlights each step-in safeguarding decisions within the academies.

Please attach an image of the concern forms use within your schools below with labels highlighting the important areas of details.

**Injury Details:**

<b>Front View</b> 	<b>Back view</b> 
--	---

**Outcome**

DSP Name: \_\_\_\_\_ Date Recd: \_\_\_\_\_

Action Taken:  
 No action/ continue to monitor  
 Discussion with carers/ student  
 CAP initiated  
 Referral to Children Social Care  
 Other: \_\_\_\_\_

Signed: \_\_\_\_\_  
Date: \_\_\_\_\_

DSP comments:

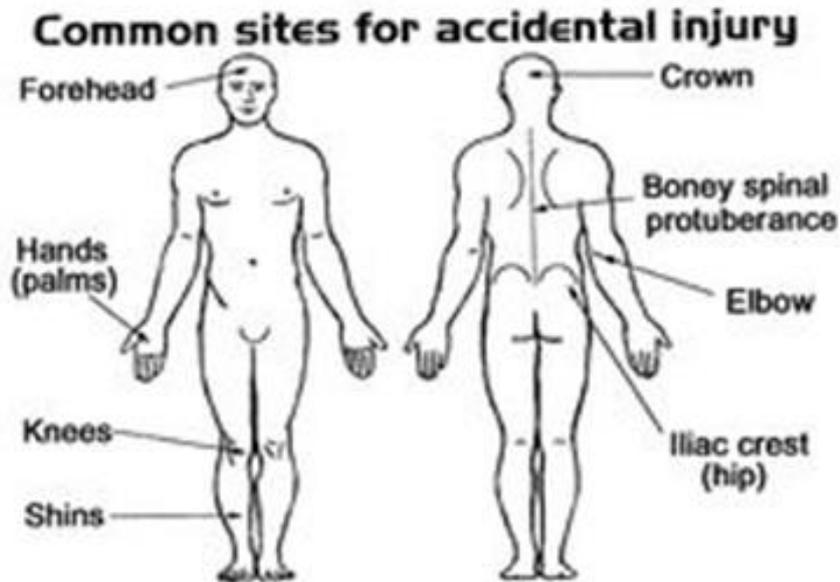
 **Safeguarding Concern Form** 

Name of student: \_\_\_\_\_ DOB: \_\_\_\_\_  
Name of School: \_\_\_\_\_  
Nature of concern:  
 Physical  Sexual  Emotional  Neglect  
 Other: Please specify \_\_\_\_\_  
Concern recorded by: \_\_\_\_\_ Date: \_\_\_\_\_  
Location: \_\_\_\_\_ **Safeguarding** \_\_\_\_\_

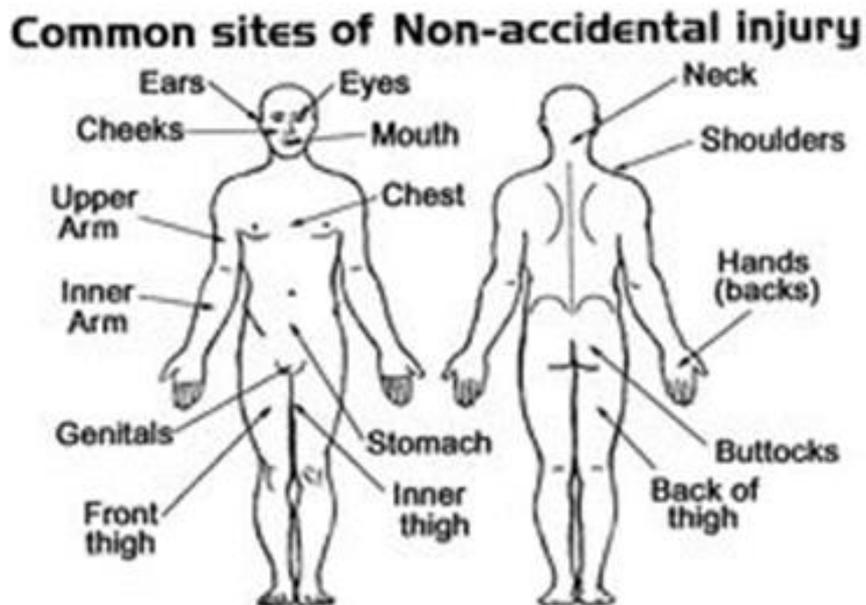
Reasons/Identifying factors of concern/ disclosure:

**Declaration:**  
If applicable, has the young person disclosing been made aware that any information that highlights a 'Risk of Significant Harm' will have to be forwarded to the relevant agency: YES / NO

## Appendix 1 – Common Sites for accidental injury

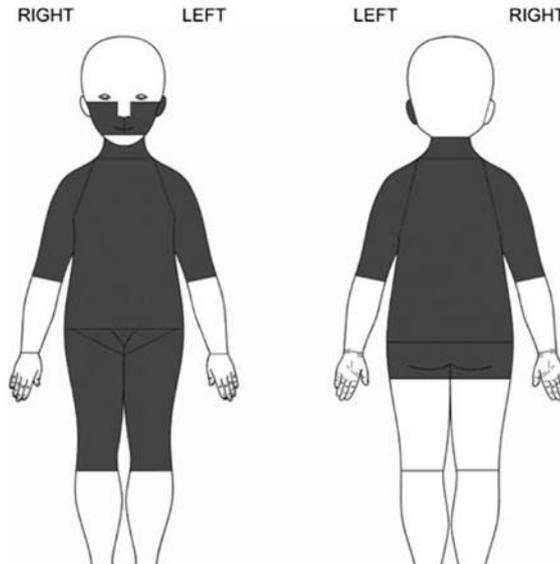


## Appendix 2 – Common sites for Non-accidental injuries



**Appendix 3 – Common sites of bruising in children where physical abuse has occurred.**

**Regions of the body (shaded area) where bruises were significantly more likely to occur in a child with confirmed physical abuse than in one where physical abuse was excluded.**



Safeguarding & Child Protection Policy		
<b>Policy completed by DSL</b>	Date of completion 03/10/2018	Sign – C Hollis
<b>Policy checked by SHINE TEAM</b>	Date **/**/****	Signed Off by ST
<b>Policy Review Date</b>	Date 09/09/2019	Signed Off by ST

## What to do if a Disclosure is made or a Concern is raised?

It is important to note that children should be reassured. However, we cannot promise to keep the information secret. We must make it clear that we will act upon what

A child makes a disclosure or an observation is noted that arouses the suspicion of a member of staff.



Listen to the child carefully and observe their behaviour. Record exactly what the child says in CPOMs but do not question them about details.



Report the disclosure or concern to a DSL (Kate, Carl or Ann), who will make a decision about how to react next.



The concern is noted in CPOMs and either no response is required or further monitoring is required.



The concern is discussed with the child and parents to decide course of action. The outcome of this meeting will decide on next action.

A decision is made to refer the concern to Social Care and the parent is informed IF the child is not deemed at HARM.



Follow up is noted in CPOMs and ongoing careful monitoring of the situation occurs.

The discussion with parents is noted and an agreed course of action decided upon.

Safeguarding Concern form is filled in by member of staff and given to DSL. Action is recorded in the Child Protection Log.



Follow up is noted in CPOMs and continued careful monitoring of the situation occurs.



Child is supported and parents are informed (if there is no risk to the child) that referral will be made.



Referral (MARF) is made to Social Care by DSL and feedback given to member of staff.



Member of staff making concern completes Child Protection Log.



Social Care decide on action and inform school.

**It is important to note that any member of staff can make a referral to Social Care at any time, irrespective of the DSL's decision.**

**Please be aware however that all three DSLs are trained and very experienced in such matters.**

AN EXAMPLE OF A GOOD ENTRY INTO A CPOMs.

**Student** Eve Adams

**Incident** Eve was upset in class and wanted to talk to someone about something from home. Eve told me that she was worried about her parent's new partner, who constantly interrupts phone calls between her and her dad. Eve said her Mum was aware of this and took the phone off Eve and that then there was a lot of shouting. Eve said it happens all the time. Eve is worried as she is due to go to her Dad's house this weekend. I asked her if she had spoken to her mum and/or Dad concerning how it was making her feel. She said that there were both aware, but no one was listening.

I told Eve that I needed to report this to Ms H/Mr H or Ms D. I informed Mr H of the situation and it was agreed to ask mum to come into school. It was agreed that Mr H would speak to Mum concerning Eve's worries.

**Categories**

- Attendance  Behaviour  Bullying  CAF  Child in Need  Child Protection  Contact with Social Worker  Continuum of Need  D.V
- Disabled  EMA  EYST  Grooming  Home Issues  Homophobic  LAC  Medical Issues  Parental Contact
- Pastoral Care Concern  Priority Families  Racial Incident  Referral  Referral to FRT  Safeguarding  SEN
- Verbal and Aggressive Incident  VI

**Linked Student**

**Body Map**

**Alert Staff Members**

Date/Time

Alert Staff Members

Type a colleague's name to alert them to this incident. Colleagues highlighted in red would not normally be able to view this incident.

5 staff will be alerted.

Name	Show Documents	View Actions	Require action	Delete
Rebecca Turner <small>configured alert</small>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Carl Hollis <small>configured alert</small>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Kate Hall <small>configured alert</small>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Ann Dargavel <small>configured alert</small>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Samuel Diamond <small>configured alert</small>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Files**

**Agency Involved**

Further action can be added to the individual incidents:-

*Added Action*

Mr H spoke to Eve's mum after school concerning the school's concerns about Eve. He explained the situation and how this was affecting Eve. Mum said she was aware of the situation but not how much it was upsetting Eve. Mum said she would speak to Eve's Dad separately and explain the school's concerns. School offered any support if it was needed. Eve was happy with this.

*Added Action*

I checked up with Eve this morning about how she was feeling. Eve reported that Mum and Dad had spoken. They also both talked to her. Eve was much happier now.

AN EXAMPLE OF A POOR ENTRY INTO CPOMS.

**Student Eve**

**Incident** Eve was upset in class and wanted to talk to someone about something from home. I told her not to worry as I could keep secrets. Eve told me that she was worried about her parent's new partner, who constantly interrupts phone calls between her and her dad. I told her it was quite difficult when that happened, but parents sometimes did that. I asked her if Dad's new partner was always angry. She told me Dad's new partner gets angry a lot, which having seen her in school, is likely. I asked Eve if she wanted me to sort it out. Eve said yes. I told her not to worry and that I would keep her safe. She didn't want anyone else to know so I agreed.

I spoke to Eve's Mum after school and told her about the situation and how Dad's new partner was creating problems at home for Eve. I told her this needed to be sorted as it was upsetting Eve in school. Mum said she was trying to sort it. I explained that if she did not sort the problem that I would get the social involved.

**Categories**

Attendance
  Behaviour
  Bullying
  CAF
  Child in Need
  Child Protection
  Contact with Social Worker
  Continuum of Need
  D.V
  Disabled
  EMA
  EYST
  Grooming
  Home Issues
  Homophobic
  LAC
  Medical Issues
  Parental Contact
  Pastoral Care Concern
  Priority Families
  Racial Incident
  Referral
  Referral to FRT
  Safeguarding
  SEN
  Verbal and Aggressive Incident
  VI

**Linked student(s)**

Begin typing a student's name

Type a student's name to link them to this incident.

**Body map**

**Date/Time**

**Alert Staff Members**

Begin typing a staff member's name

Type a colleague's name to alert them to this incident. Colleagues highlighted in red would not normally be able to view this incident.

Who should I alert?

**Files**

Click to browse or drag a file to upload

**Agency Involved**

Select Agencies

Add Incident