



CHILD PROTECTION POLICY

Adopted by Governors:

Signed:

Date:

This policy is reviewed annually by the Finance, Premises and Staffing Committee

Review date:

Child Protection and Safeguarding Policy

School Details:

Governer Lead:	Ms. Jean Helme
Head Teacher:	Mr. Brynley Evans
DSL:	Ms. Jo Killarney
Status and Review Cycle:	Statutory Annual
Next Review Date:	Sept 2016

1. Introduction and Aims

- 1.1 This policy has been developed in accordance with the principles and practice established by *the Children Acts 1989 and 2004* and *the Education Act 2002*. It has also been informed by key Government guidance such as: *Working Together to Safeguard Children 2015* and *'Keeping Children Safe in Education July 2015*. Other key documents include:
- *Safeguarding Children and Young People from Exploitation (2009)*
 - *The Protection of Children in England: A progress Report and Plan (2009)*
 - *What to do if you are worried a child is being Abused (2003)*
 - *The Procedures of Birmingham Safeguarding Children Board.*
 - *What to do if you are worried a child is being abused (2015) – Advice for Practitioners*
 - *Serious Crime Act (2015)*
- 1.2 The governors and all staff of Yardleys School take seriously our responsibility under section 175 of the 2002 Education Act to safeguard and promote the welfare of all young people entrusted to our care. We understand that we have a full and active part to play in protecting our students from harm and we consider the child's welfare to be of paramount concern.
- 1.3 The Designated Senior Lead for Child Protection (DSL) who has overall responsibility for Child Protection practice in school is **Mrs Jo Killarney** (Leadership Spine) in association with **Mr. Gurpreet Basra** (Deputy Headteacher). All members of SLT and the majority of the pastoral team are also fully DSL trained.
- 1.4 Yardleys School recognises the contribution it makes to Child Protection and safeguarding. There are three main elements to our policy:
- A. *Prevention* through the teaching and pastoral support offered to students.
 - B. *Procedures* for identifying and reporting causes, or suspected cases, of abuse. Our day to day contact with students means that staff are well placed to observe the outward signs of abuse. Staff are also encouraged to alert the DSL if they notice in the community, any signs that a child may be in danger. All staff are aware that they may raise concerns directly with Children's Social Care services if they wish. Staff are also aware that they may raise safeguarding concerns with other adults.

C. *Support* to students who may have been abused.

- 1.5 Our policy applies to *all* staff and volunteers working in the school and governors. Dinnertime supervisors, counsellors, classroom assistants and secretaries as well as teachers can be the first point of disclosure for a child. Concerned parents may also contact the school. Visitors to the school are informed as to the identity of the DSL and asked to report any indications of abuse or harm.

2. Prevention

- 2.1 We recognise the high self-esteem, confidence, supportive friends and good lines of communication with a trusted adult helps to prevent problems. Yardleys School will therefore:
- a. Establish and maintain an ethos where students feel secure and are *encouraged to talk*, and are *listened to*; *We will foster security, confidence and independence*;
 - b. Ensure students know that there are adults in school whom they can approach if they are worried or in difficulty;
 - c. Include in the *curriculum*, activities and opportunities during PSHE/SMSC activities/vertical tutoring periods which equip students with the skills they need to stay safe from abuse and extremism and to know whom to turn to for help;
 - d. Include, in the *curriculum*, material which will help students develop realistic attitudes to the responsibilities of adult life, particularly with regard to keeping safe.
 - e. We will foster an ethos that promotes British values. Senior staff regularly attend WRAP training and we understand how to identify the signs and report suspected cases of all types of extremism.
 - f. Not allow students to have individual mobile technology in school.
 - g. Ensure that all staff complete the College of Policing "Channel General Awareness" module and that certificates are kept centrally.
- 2.2 We will follow the procedures set out in *The Birmingham LA's Child Protection Manual*.
- 2.3 The role of our school within these published procedures is to contribute to the *identification, referral and assessment* of children in need, including students who may have suffered, be suffering, or who are at risk of suffering *significant harm*
- 2.4 The role of the school in situations where there are serious Child Protection concerns is **NOT** to investigate but to *recognise* and *refer*.

3. Designated Senior Lead Child Protection (DSL)

- 3.1 The DSL is responsible for:
- a. *Co-ordinating*, along with the Headteacher, all Child Protection activity in the school.
 - b. *Liaising* with other agencies such as Children's Services (using the Right Service, Right Time model) CAMHS, YOT and the Police.

- c. Ensuring that LA established *procedures are followed*, including reporting, recording and referral processes.
- d. Acting as a *consultant* for staff to discuss concerns.
- e. Making *referrals* to the MASH (Multi Agency Safeguarding Hub) as necessary and also contacting them for advice. (0121 303 1888).
- f. Notify social services if there is unexplained absence of *more than two days* of a student who is on the Child Protection Plan, LAC or equivalent.
- g. Maintaining a confidential recording system, which is separate from student pastoral files.
- h. Representing or ensuring our school is represented at *inter-agency meetings*, in particular Child Protection conferences and core group meetings. Also to provide reports for such meetings.
- i. Managing and monitoring the school's part in child care/ protection plans.
- j. Organising regular *training* for all school staff.
- k. Liaising with other professionals. Also to liaise with the Governor Lead regularly and to contribute to reports for the governing body.

4. Procedures

4.1 A copy of the LA Child Protection Procedures is kept in the *staff room* and contains details of procedures and the categories and definitions of abuse.

4.2 All staff in school should be aware of the *definitions and signs and symptoms of abuse*.

4.3 There are four categories of abuse. These are:

- Physical Abuse (Including FGM) – We understand that from October 2015 there is a mandatory reporting duty and concerns will be reported to MASH
- Sexual Abuse (Including Child Sexual Exploitation)
- Emotional Abuse (Including Domestic Abuse and Forced Marriage)
- Neglect

4.4 PREVENT RADICALISATION AND EXTREMISM

We encourage students and staff to respect 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 the partisan political views are not promoted in the teaching of any subject in the school and where political views are brought to attention of students, reasonably practicable steps have to been taken to offer a balanced presentation of opposing views to students.

We work in line with the Prevent Duty (2015) and understand that we have a statutory duty to report concerns of suspected extremist behaviour to the MASH and/or counter.extremism@education.gsi.gov.uk

4.5 Safer Recruitment

The school's recruitment and selection procedures are regularly reviewed to ensure that they comply fully with relevant statutory guidance, currently *Keeping Children Safe in Education July 2015*. All prospective employees are checked for identity, criminal records (DBS checks) barred check lists and references. Interview panel always include one or more staff or governors who have taken Safer Recruitment training.

4.6 Whistleblowing

Yardleys School encourages a culture of openness and accountability. Whistleblowing is the disclosure of information which relates to suspected wrongdoing or dangers at work. Any person who has a genuine concern related to suspected wrongdoing or danger affecting any of the schools activities (a whistleblowing concern) should report it under the Whistleblowing Procedure. (See school website).

5. Responding to concerns

- 5.1 Concerns for a student may come to the attention of staff in a variety of ways, for example through observation of behaviour or injuries or disclosure. Any member of staff who has a concern about a student, *however insignificant this might appear to be*, should discuss this with the DSL as soon as is practically possible (it should be the same day). More serious concerns must be reported immediately to ensure that any intervention necessary to protect the child is accessed as early as possible. Where a member of staff has concerns about a child, these should be discussed with the DSL and no one else in the first instance, in the DSL's absence the Headteacher/Deputy should be informed.
- 5.2 If a student makes a disclosure to a member of staff they should:
- Allow the student to make the disclosure *at their own pace* and in their own way
 - If you are shocked by what is being said *try not to show it*
 - *Avoid interrupting* except to clarify what the student is saying
 - *Not ask leading questions or probe* for information that the student does not volunteer.
 - It is our role *to listen not to investigate*. Use open questions such as "is there anything else you want to tell me?" or "Yes?" or "And?"
 - *Reassure* the young person that they have been heard and explain what you will do next and to whom you will talk
 - *Accept* what the student says. Be careful not to burden them with guilt by asking questions such as "why didn't you tell me before?"

- Do *acknowledge* how hard it was for them to tell you this
- Don't criticise the perpetrator, this may be someone they love
- It is important that you *do not make promises* that you cannot keep such as "I'll stay with you all the time" or "It will be alright now"
- *Record* the conversation as soon as possible, using Yardleys School 'Child Protection and Safeguarding' form (this can be found on the staff common area)
- *Inform* the DSL in person or by internal email marked CP-Urgent Referral
- **Remember you cannot promise confidentiality**
 - It is OK to observe bruises but **not** to ask a student to remove or adjust their clothing to observe them
 - Concerns over any form of *extremism*, should also be brought to the attention of the DSL or SLT immediately

6. Record Keeping

6.1 Staff can play a vital role in helping students in need or at risk by effective monitoring and record keeping. Any incident or behavioural change in the young person that gives cause for concern should be recorded.

6.2 It is important that records are *factual* and reflect the words used by the student. Opinion should not be given unless there is some form of evidence base, which can also be quoted. Records must be *signed and dated with timings if appropriate*. It is important to remember that any issues are confidential and staff should know only on a *need to know* basis.

6.3 Information to be recorded:

- Student's name, form and date of birth
- Student in normal context e.g. behaviour, attitude
- The incident(s) which give rise for concern with date(s) and time(s)
- A verbatim record of what the student has said
- If recording bruising/injuries, indicate position, colour, size, shape and time on a body map
- Action taken

Written information should be passed to the DSL. Mr. Evans, Headteacher should always be kept informed of any significant issues.

6.4 Storage of records

The DSL will ensure the records relating to concerns for the welfare or safety of students are *kept separate* from other school files and are *stored securely* (Paper files are stored in a locked,

fire resistant cabinet and electronic files are password protected). Information will be shared on a strictly need to know basis and in line with Child Protection guidance.

7. Referrals to MASH (0121 303 1888) Out of hours emergency number 0121 675 4806 or the Police (101)

- 7.1 It is the responsibility of the DSL to decide when to make a referral to MASH. To help with this decision he may choose to consult with Child Protection within the LA first. Issues discussed during consultations may include the urgency and gravity of the concerns for the student and the extent to which parents/carers are made aware of these. Some concerns may need to be monitored over a period of time before a decision to refer is made and evidence of reasoning for this should be kept on file. In all but the most exceptional cases (possibly where the child may come to further harm, or the integrity of evidence may be compromised) parents/carers will be made aware of the concerns felt.
- 7.2 Referrals to MASH will be made using the Birmingham *MARF* (*multi-agency referral form*). In situations where there are felt to be urgent or grave concerns a telephone referral will be made prior to the form being completed. If a referral is made, the DSL will ensure that the Headteacher and other relevant staff, including the Head of House are informed of this.
- 7.3 If after consultation with the DSL, a member of staff feels that appropriate action is not being taken in respect of his or her concerns for a student they should refer directly to the Headteacher. If the member of staff still has concerns that no appropriate action has been taken they should contact MASH.
- 7.4 If school considers that there are incidents of forced marriage, FGM, domestic abuse, child sexual exploitation or extremism, they may refer directly to the Police/CTU as well as MASH.

8. Post-referral support

- 8.1 We are committed to supporting students once a referral is made. This may involve mentoring or counselling but where necessary advice should be taken from Children's Services. We offer a caring, safe and positive environment.
- 8.2 We will support students by encouraging self-esteem and self-worth. We recognise that a child who has been abused or witnesses violence may feel helpless and humiliated and may blame themselves. We are aware that school may provide the only stability in the lives of children who have been abused or at risk of harm.
- 8.3 We will provide continuing support to a child who leaves school, by copying over appropriate information to the child's new setting.

9. Parent(s) and Carer(s)

- Parents and carers play an *important role* in protecting their children from abuse.
- The school will *work with parents* and carers to support the needs of the child
- We should ensure that parents and carers have an *understanding of the responsibility* placed on the school and staff for child protection by setting out our obligations in the *school prospectus*

10. Children with a Care Plan

The DSL will inform members of staff who have direct pastoral responsibility for students who have a Care Plan. These young people must be *monitored carefully* and the smallest concern should be recorded and an incident sheet passed immediately to the DSL or the Headteacher in the DSL's absence. LAC children have additional vulnerabilities and should be always monitored with extreme care.

11. When a student transfers to another school

- If a student has a Care Plan or equivalent, their social worker will be contacted by the DSL and informed of the transfer. A transfer of records form should always be kept.
- When the student changes schools child protection records will be passed onto the designated teacher at the receiving school
- When the child is moving to another authority, information will be passed on to the next school's designated teacher.
- Where a student is moving on to Post-16 education and there remain concerns about the child's safety, the school will, after discussion with the student, pass on relevant information to the college or provider. This is to ensure a continuity of care where this is deemed to be appropriate.

12. Students with Statements of Special Educational Needs

We recognise that statistically students with behavioural difficulties and emotional problems are most vulnerable to abuse. Staff should therefore be particularly sensitive to signs of abuse.

13. Concerns involving members of staff

Any concerns that involve allegations against a member of staff should be referred immediately to Mr. Evans, Headteacher, or the DSL. The Headteacher will contact the LA immediately in accordance with procedures to discuss and agree further action to be taken in respect of the child and the member of staff.

Where concerns are about the Headteacher a member of staff should contact the *Assistant Director Safeguarding and Development* in line with Birmingham LA procedures. The Headteacher at this stage, should not be alerted to the referral.

Contact numbers of officers:

Schools and Education Services Lead Officer for Child Protection: 0121 303 2280
Child Protection Manager for Schools and Education – Team of Designated Officers: 0121 675 1669

14. Code of practice

- 14.1 All school staff should *take care* not to place themselves in a vulnerable position with relation to child protection. It is always advisable for interviews with individual students or parents to be conducted in view of other adults although there will always be exceptions of this out of necessity. Physical intervention should **only** be used when the student is endangering him/herself or others and events should be recorded and signed by a witness.
- 14.2 All staff should work towards providing an environment and atmosphere for students to enable them to *feel safe to talk*. However, **staff should never promise a student to keep certain information confidential**. It must be explained that staff have certain **duties** to help keep that student safe, which may involve informing others.

15. Bullying

- Yardleys School should have clear policy to prevent bullying and deal with incidents that do occur
- Racist, sexist and homophobic incidents (along with the actions) area available on Sleuth, all incidents are dealt with in line with the School Behaviour Policy.

16. Training Opportunities

- Yardleys School has a *commitment to training* and updates. Time will be given to enable this commitment to be met.
- The DSL is responsible for ensuring staff, including herself; receive training in the areas of Child Protection.

- The DSL will be expected to cascade learning to wider staff via meetings and training slots.

17. Monitoring and Review

- 17.1 All school personnel and governors will have a copy of this policy and will have the opportunity to consider its content prior to approval of the Governing body being formally sought.
- 17.2 This policy Documents sets aside previous policy in this area.
This policy document was updated in September 2015
- 17.3 The policy should be reviewed *annually*.
- 17.4 Review date **September 2016**.

APPENDIX: RECOGNISING THE SIGNS

There are certain symptoms which young people who have suffered abuse are likely to exhibit. Some will lead to *powerful suspicion*; others will simply *suggest a possibility*.

Behavioural

Staff at school see individual students over prolonged periods, and can, over time, notice change in the way they act. We are particularly well placed to notice unusual patterns of behaviour, which may be evidence of different types of abuse.

We underline the word may, because it is of crucial importance that staff should not read into a student's behaviour evidence of what may not be abuse at all, but the result of some quite different factor. None the less, experienced staff have found that the following are types of behaviour which can, taken with other indications, point to the possibility or likelihood that a student has been abused:

- Persistent tiredness
- Aggressive towards adults and peers
- Bullying others
- Sudden switch in mood or behaviour
- Regression to immature behaviour
- Excessive nervousness
- Attention-seeking behaviour

- Deterioration in school work
- Reluctant to participate in PE, games or other activities which involve changing clothes or physical exposure
- Running away from lessons/school or reluctance to go home at the end of school
- Poor school attendance
- Inappropriate conduct towards or relationships with peers and or adults e.g. sexual precocity which cannot be explained by normal natural curiosity
- Compulsive stealing or lying
- Eating problems
- Depression
- Self-injury

Obviously, no student will demonstrate all these signs simultaneously. Some of the behavioural indications listed here are, indeed, mutually exclusive. What is more, none of them, either individually or in combination, inevitably suggest abuse.

But we do need to be alert to the fact that such signs are not inconsistent with child abuse. Where there is no other convincing explanation of unusual patterns of behaviour, we must not rule out its possibility.

Physical

On the fact of it, evidence of physical abuse (which often accompanies or is the culmination of emotional abuse) is easier to identify and assess. But as any experienced teacher will know, young people frequently have accidents which involve minor or major physical injury. Is there any way in which we can judge whether an injury or succession of them is genuinely accidental, or non-accidental and suggestive of abuse? Perhaps the best indication is how parents or adults responsible for the child's care react.

Where an injury is the result of genuine accident, they will almost invariably be willing to discuss it freely with us, and so will the student. Suspicions should be alerted where a child and his/her parents or guardians are reluctant to discuss the injury at all, or where their explanations differ in significant detail or are inconsistent with the severity of the injury.

Here is a list (by no means exhaustive) of the kinds of injury for which we should seek an explanation:

- Multiple bruising and/or bizarre markings on the skin
- Multiple bruising at different stages of resolution
- Bruising or lacerations around the mouth
- Finger and thumb marks on the face, trunk, limbs
- Marks or bruising which appear to have been caused by biting
- Black eyes, particularly where both eyes are affected
- Cigarette burns and other burns or scalds

Suspicions of physical abuse may be intensified if the following factors are also present:

- Information about earlier abuse of the child or other children within the care of the same parents or adults

- A failure by the parent or responsible adult to mention previous injuries
- A history of unexplained or inadequately explained injuries
- Explanations of the injury's causes which are contradictory or implausible
- Delay in seeking medical or other help when that would clearly have been appropriate
- Refusal by parents or responsible adults for the injury and/or its circumstances to be investigated further

Child Sexual Exploitation (CSE)

Child sexual exploitation (CSE) involves exploitative situations, context and relationships where young people receive something (for example: food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressures from peers to have sex, sexual bullying including cyberbullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Typical signs include:

- Underage sexual activity
- Inappropriate sexual or sexualised behaviour
- Sexually risky behaviour
- Repeat sexually transmitted infections
- Repeat pregnancy, terminations, miscarriage
- Receiving unexplained gifts
- Having multiple mobile phones and worrying about losing contact via mobile phone
- Having unaffordable new things (clothes, mobiles, jewellery) or expensive habits (drugs, alcohol)
- Changes in the way they dress
- Going to hotels or other unusual locations to meet friends
- Seen at known places of concern
- Moving around the country, appearing in new towns or cities, not knowing where they are
- Getting in or out of different cars, driven by unknown adults
- Contact with known perpetrators
- Involved in abusive relationships, intimidated and fearful of certain people or situations
- Associating with other young people involved in sexual exploitation
- Recruiting other young people to exploitative situations
- Truancy, exclusion, disengagement with school
- Mood swings, volatile behaviour, emotional distress
- Self-harming, suicide attempts, overdosing, eating disorders
- Drug or alcohol misuse
- Criminal activity/police involvement
- Involved in gangs, gang fights, gang membership
- Injuries from physical assault, physical restraint, sexual assault

Female Genital Mutilation (FGM)

Female genital mutilation (FGM), also known as female genital cutting and female circumcision, is defined by the World Health Organisation (WHO) as “all procedures that involve partial or total removal of the external genitalia or other injury to the female genital organs for non-medical reasons. FGM is practised as a cultural ritual by ethnic groups in 27 countries in sub-Saharan and Northeast Africa, and to a lesser extent in Asia, the Middle East and within immigrant communities elsewhere. It is typically carried out, with or without anaesthesia, by a traditional circumciser using a knife or razor. The age of the girl varies from weeks after birth to puberty; in half the countries for which figures were available in 2013, most girls were cut before the age of five.

The practice involves one or more of several procedure, which vary according to the ethnic group. They include the removal of all or part of the clitoris and clitoral hood; all or part of the clitoris and inner labia and in its most severe form (Infibulation) all or part of the inner and outer labia and the closure of the vagina. In this last procedure, which the WHO calls Type III FGM, a small hole is left for the passage of urine and menstrual blood and the vagina is opened up for intercourse and childbirth. The health effects depend on the procedure but can include recurrent infections, chronic pain, cysts, an inability to get pregnant, complications during childbirth and fatal bleeding.

Around 125 million women and girls in Africa and the Middle East have undergone FGM. Over eight million have experienced Type III, which is most common in Djibouti, Eritrea, Somalia and Sudan. The practice is an ethnic marker, rooted in gender inequality, ideas about purity, modesty and aesthetics, and attempt to control women's sexuality. It is supported by both women and men in countries that practise it, particularly by the women, who see it as a source of honour and authority and an essential part of raising a daughter well.

FGM has been outlawed in most of the countries in which it occurs, but the laws are poorly enforced. There has been an international effort since the 1970's to eradicate the practice and in 2012 the United Nations General Assembly voted unanimously to take all necessary steps to end it,

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** in most countries including the UK.

Circumstances and occurrences that may point to FGM happening:

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child's family being from one of the 'at risk' communities for FGM; Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan).
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate that a child has undergone FGM:

- Prolonged absence from school
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still or looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them, that they are not allowed to talk about

- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated UTI
- Disclosure

Forced Marriage

This is an entirely separate issue from an arranged marriage. Often the marriage takes place abroad, and often the disclosure comes from younger siblings.

Further indicators of abuse

When a young person is the victim of abuse, there are often other behavioural signs which manifest themselves at school e.g.

- An inexplicable failure to thrive
- Poor relationships between a young person and his/her peers including an inability to make friends
- Consistent inability to concentrate, leading to identifiable learning difficulties
- Disobedience, attention-seeking, restlessness or aimless behaviour
- Marked changes in eating patterns
- Regular avoidance of school medical investigations

In addition, there are other signs which may point, with various degrees of certainty, to the possibility of sexual abuse:

- Sudden changes in mood
- Regressive behaviour e.g. sudden onset of bed wetting (adolescent enuresis)
- Lack of trust in adults especially a fear of men
- Hints of sexual activity in a child's conversation, play or drawings which may include pornographic additions or sexually explicit graffiti in exercise books or elsewhere
- Excessive preoccupation with sexual matters, including:
- Precocious knowledge or apparent experience of adult sexual behaviour
- Repeated episodes of sexual play, particularly if they go beyond mere childish curiosity
- Persistent, obsessive self-stimulation

Reminder of Key Contacts

Internal

DSL	Jo Killarney	0121 464 5640
Deputy Head	Gurpreet Basra	0121 464 8314
Headteacher	Brynley Evans	0121 464 5637

External

MASH	0121 303 1888
MASH Out of hours Head	0121 675 4806
West Midlands Police	101
Schools and Education Services Lead Officer for Child Protection	0121 303 2280
Team of Designated Officers	0121675 1669
West Midlands Police – Anti-Terrorist Hotline	0800 789 321
Birmingham & Solihull Women's Aid	0121 685 8687
Child-line	0800 1111
Birmingham Samaritans	0121 666 6644
