

The Designated Safeguarding Lead (DSL) for Balcarras is Liza McCarthy, the Deputy Designated Safeguarding Lead (DDSL) is Jeanette Corinaldi

CHILD PROTECTION

Child protection is the protection of children from violence, exploitation, abuse and neglect. This Child Protection policy outlines the systems and regulations that Balcarras has in place to protect, support and respond to risks for all the children in the care of the school.

AIM

Balcarras is committed to the safeguarding of all pupils in the school. Our aim is to ensure that all pupils are safe in our school and that measures are in place to support any child who is at risk of harm. This policy should be read alongside the School's

- Safeguarding Policy
- Bullying Policy
- Complaints Procedure
- Whistle Blowing Procedure
- Behaviour Policy
- Health and Safety (and Fire) Policy
- SEND and Inclusion Policy

and other relevant documentation.

Balcarras will ensure that:

- All staff are kept up to date with Child Protection issues by formal training taking place every three years.
- Clear reminders of all procedures will be given out to all staff in the INSET session at the start of every academic year.
- The Designated Safeguarding Lead (DSL), Deputy Designated Safeguarding Lead (DDSL) and Heads of Houses (HoHs) will take part in regular formal training sessions.
- All procedures will follow DfE guidance on child protection issues.
- Governors will be kept well informed about procedures through the Governors Community Committee.
- Good monitoring takes place of students identified as at risk.
- The Pastoral Team works closely with outside agencies to share information and coordinate support for the pupil.

PREVENTION

We recognise that high self-esteem, confidence, supportive friends and good lines of communication with a trusted adult help prevention.

The school will therefore:

1. establish and maintain an ethos where children feel secure and are encouraged to talk, and are listened to
2. ensure children know that there are adults in the school whom they can approach if they are worried or in difficulty
3. include in the curriculum, activities and opportunities which equip children with the skills they need to stay safe from abuse and to know who to turn to for help
4. include, in the curriculum, material which will help children develop realistic attitudes to the responsibilities of adult life, particularly with regard to child care and parenting skills
5. keep written records of concerns about children (noting date, event and action taken), even where there is no need to refer the matter to Social Services and other relevant agencies immediately
6. ensure all records are kept secure and in locked locations
7. ensure that if a child who has a child protection plan leaves, their information is transferred to the new school immediately and Social Care is informed
8. adhere to the procedures set out in the KCSIE Part 4, school guidance when any allegation is made against a member of staff
9. ensure the criminal background of applicants for vacant posts are checked before starting in post
10. designate a governor for child protection, who will oversee the school's child protection policy and practice, and provide the necessary training for that governor
11. ensure we practise Safe Recruitment in line with government guidance on all interview panels and by checking the suitability of staff and volunteers to work with children and ensuring any unsuitable behaviour is reported and investigated
12. support all pupils who are on the CP register in accordance with their agreed protection plan
13. ensure procedures are in place to deal with any allegations made against staff, volunteers, supply teachers, contractors or governors

RESPONSE TO CHILD PROTECTION ISSUES

Child protection issues can be very difficult to spot. If in doubt, it is always best to inform the relevant person, and allow them to make the decision about what further action is necessary. **If in doubt, talk to DSL or DDSL!**

If a member of staff has any concerns that a child protection issue may be apparent, then the following procedure will be followed:

- The member of staff should immediately inform the Designated Safeguarding Lead or Deputy Designated Safeguarding Lead
- If the DSL or the DDSL are not available for any reason, then speak to any other HoH immediately

Staff should **not** ask the pupil for details about any suspected abuse, as this will mean that the pupil will rehearse the story, and could lead to complications further down the line.

Staff should **not** promise that any revelations can be kept confidential. Pupils should be reassured that, while information may need to be passed on, it will only be done to support and keep from harm the individual concerned.

Any member of staff with an issue or concern relating to child protection should discuss it with the designated teacher as soon as possible. It should be made clear to the child that confidentiality cannot be guaranteed in respect of child protection issues. Allegations of child abuse must always be given the highest priority and referred immediately to the designated teacher.

The designated teacher will then decide on an appropriate course of action.

If the reporting teacher does not feel happy with the action taken by the DSL, then it is important he/she does pursue the matter, with either Deputy Head, or Headteacher.

ROLE OF DSL

The DSL has responsibility for the following:

- Following all the correct procedures where abuse is disclosed
- Act as a champion of the school's safeguarding policy and procedures
- Informing the relevant external agencies where necessary
- Ensuring that procedures and policies are kept up to date and relevant, as new information is produced, and policies are made available to all necessary parties
- Ensure that staff training is carried out regularly, in line with requirements.
- Liaising with other members of the pastoral team, SMT and other relevant staff to keep staff informed about the measures put into place and the support provided for individuals' cases
- Liaising with parents, carers and guardians about how a child is being supported
- Recognise how to identify signs of abuse and when to make a referral
- Respond appropriately to disclosures or concerns relating to the well-being of a child
- Refer allegations or cases of suspected abuse to the relevant investigating agencies, ensuring they have access to the most relevant up to date information

- Liaise with the Head Teacher to inform them of any issues and ongoing investigations
- Liaise with the Governor with safeguarding responsibilities
- Refer cases to the Channel programme where there is a radicalisation concern as required
- Ensure that relevant, detailed and accurate written records of referrals/concerns are kept and that these are stored securely
- Ensuring that support measures are being followed correctly by staff and support agencies
- Ensure that pupils who are victims of abuse are supported appropriately and sensitively and that all actions from planning and intervention meetings are carried out and monitored
- Liaising with the LA and working cooperatively with other relevant agencies (Working Together to Safeguard Children)
- Undergoing appropriate safeguarding training every two years

When a child goes missing

When a child goes missing the school will follow the “Missing Pupil Protocol” detailed in appendix 2 of the **Safeguarding Policy**.

Consent and Data Sharing

For details on the school’s policy to consent and data sharing, please read the **Safeguarding policy**.

DOMESTIC ABUSE

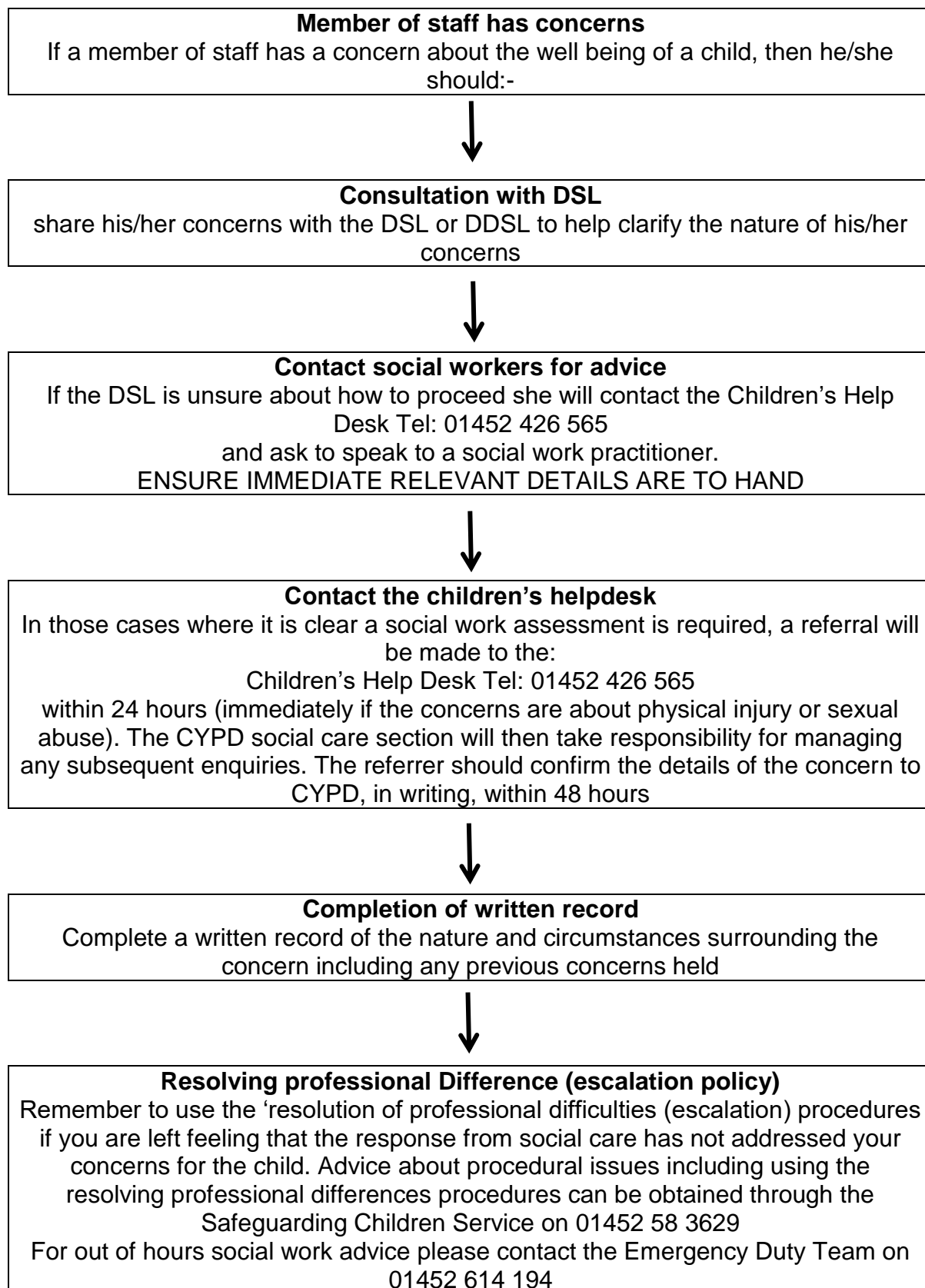
Balcarras School firmly believes that domestic abuse is not acceptable in any situation and will always support any pupil who is involved in any form of domestic abuse. If domestic abuse is suspected, or a case of domestic abuse is reported to the school, the school will always respond according to procedure. Where necessary, the information will always be passed on to the necessary support agencies and legal authorities promptly.

Staff at the school will always inform the DSL or a Head of House whenever they suspect domestic abuse has occurred.

Pupils affected by domestic abuse will be fully supported by the pastoral team and, if necessary, other support agencies can be involved.

Domestic abuse will never be viewed as outside the school’s interest, whenever a pupil is affected by the abuse.

FLOW CHART FOR RESPONSE



CHILD ABUSE DEFINITIONS

There are four types of child abuse. They are defined in the UK Government guidance *Keeping children safe in education; Statutory guidance for schools and colleges, 2019* as follows:

1. Physical abuse
2. Emotional abuse
3. Sexual abuse
4. Neglect

TYPES OF ABUSE AND NEGLECT

Abuse

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children.

Physical abuse

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

Emotional abuse

The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse (Child Sexual Exploitation CSE)

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

Like all forms of child sexual abuse, child sexual exploitation:

1. can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex;
2. can still be abuse even if the sexual activity appears consensual;
3. can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity;
4. can take place in person or via technology, or a combination of both;
5. can involve force and/or enticement-based methods of compliance and may, or may not, be accompanied by violence or threats of violence;
6. may occur without the child or young person's immediate knowledge (through others copying videos or images they have created and posting on social media, for example);
7. can be perpetrated by individuals or groups, males or females, and children or adults. The abuse can be a one-off occurrence or a series of incidents over time, and range from opportunistic to complex organised abuse; and
8. is typified by some form of power imbalance in favour of those perpetrating the abuse. Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, sexual identity, cognitive ability, physical strength, status, and access to economic or other resources.

Neglect

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

SIGNS OF ABUSE

Recognising child abuse is not easy. It is every staff member's responsibility to be alert to whether or not child abuse has taken place or if a child is at significant risk of harm from someone. The following information should help to recognise the signs of possible abuse.

The physical signs of abuse may include:

- unexplained bruising, marks or injuries on any part of the body
- multiple bruises- in clusters, often on the upper arm, outside of the thigh
- cigarette burns
- human bite marks
- broken bones
- scalds, with upward splash marks,
- multiple burns with a clearly demarcated edge.

Changes in behaviour that can also indicate physical abuse:

- fear of parents being approached for an explanation
- aggressive behaviour or severe temper outbursts
- flinching when approached or touched
- reluctance to get changed, for example in hot weather
- depression
- withdrawn behaviour
- running away from home.

Changes in behaviour which can indicate emotional abuse include:

- neurotic behaviour e.g. sulking, hair twisting, rocking
- being unable to play
- fear of making mistakes
- sudden speech disorders
- self-harm
- fear of parent being approached regarding their behaviour
- developmental delay in terms of emotional progress

The physical signs of sexual abuse may include:

- pain or itching in the genital area
- bruising or bleeding near genital area
- sexually transmitted disease
- vaginal discharge or infection
- stomach pains
- discomfort when walking or sitting down
- pregnancy

Changes in behaviour which can also indicate sexual abuse include:

- sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn
- fear of being left with a specific person or group of people
- having nightmares
- running away from home
- sexual knowledge which is beyond their age, or developmental level
- sexual drawings or language
- bedwetting
- eating problems such as overeating or anorexia
- self-harm or mutilation, sometimes leading to suicide attempts
- saying they have secrets they cannot tell anyone about
- substance or drug abuse
- suddenly having unexplained sources of money
- not allowed to have friends (particularly in adolescence)
- acting in a sexually explicit way towards adults

The physical signs of neglect may include:

- constant hunger, sometimes stealing food from other children
- constantly dirty or 'smelly'
- loss of weight, or being constantly underweight
- inappropriate clothing for the conditions.

Changes in behaviour which can also indicate neglect may include:

- complaining of being tired all the time
- not requesting medical assistance and/or failing to attend appointments
- having few friends
- mentioning being left alone or unsupervised

SPECIFIC SAFEGUARDING ISSUES

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example NSPCC offers information for schools and colleges on the TES website and also on its own website www.nspcc.org.uk Schools and colleges can also access broad government guidance on the issues listed below via the GOV.UK website:

- child sexual exploitation (CSE) – see also below
- bullying including cyberbullying
- domestic violence
- drugs
- fabricated or induced illness
- faith abuse
- female genital mutilation (FGM) – see also below
- forced marriage
- gangs and youth violence
- gender-based violence/violence against women and girls (VAWG)
- mental health
- private fostering
- radicalisation
- sexting
- teenage relationship abuse
- trafficking

Further information on Child Sexual Exploitation and Female Genital Mutilation
Child sexual exploitation(CSE) involves exploitative situations, contexts 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 pressure 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.

Female Genital Mutilation (FGM)

Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is 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. 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. Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 11-12 of the Multi-Agency Practice Guidelines. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

Safeguarding: Quick Reference

Everyone in the education service shares an objective to help keep children and young people safe by contributing to:

Providing a safe environment, identifying children and young people who are suffering or likely to suffer significant harm and taking appropriate action.

This guidance has been given to you to make sure you understand what is expected of you. Please seek advice from your Designated Senior Lead (DSL) for Child Protection if you are unclear about anything in this leaflet and keep it in a safe place.

The school DSL is: **Liza McCarthy**
The school DDSL is: **Jeanette Corinaldi**

When and what might I be concerned about?

At any time you might be concerned about information which suggests a child is being neglected or experiencing physical, emotional or sexual harm. You may observe physical signs, notice changes in the child's behaviour or presentation, pick up signs of emotional distress or have a child disclose a harmful experience to you. Harm to a child can be caused by:

- A parent/carer
- A family member/friend
- Another child
- A stranger
- A member of staff/volunteer*

What should I do if a child discloses that s/he is being harmed?

1. Listen

Listen carefully to what is being said to you, do not interrupt.

2. Reassure

Reassure the pupil that it is not their fault. Stress that it was the right thing to tell. Be calm, attentive and non-judgemental. Do not promise to keep what is said a secret. Ask non-leading questions e.g (who, what, when, why and how) to clarify if necessary.

3. Contact Liza or Jeanette (or any other HoH)

Always speak to one of the pastoral team as soon as possible. They will be able to advise you and ensure that all the correct procedures are followed.

What should I do if the alleged abuser is a member of staff working with children?

If your concern is about a staff member or volunteer, you should report this to the most senior person not implicated in the concern, so in most cases the Head Teacher. If however your concern is about the Head Teacher, you should report this to the Chair of Governors. The senior person will then contact the Local Authority Designated Officer (LADO) on 01452 426994 for a discussion.

How do I ensure my behaviour is always appropriate?

Please ask a member of the Senior Leadership Team for school guidance regarding Safer Working Practice. The DCSF have produced guidance entitled 'Safer Working Practice for Adults who work with Children and Young People in Education Settings' (2009) which can be found on the GSCB website www.gscb.org.uk

All staff **must** read:

School policy:

**Safeguarding
Child Protection
Behaviour
Safeguarding and Safer Working Practice
ICT Acceptable Use
Code of Conduct Staff
Keeping Children Safe in Education Part 1**

These can be found at the following location:

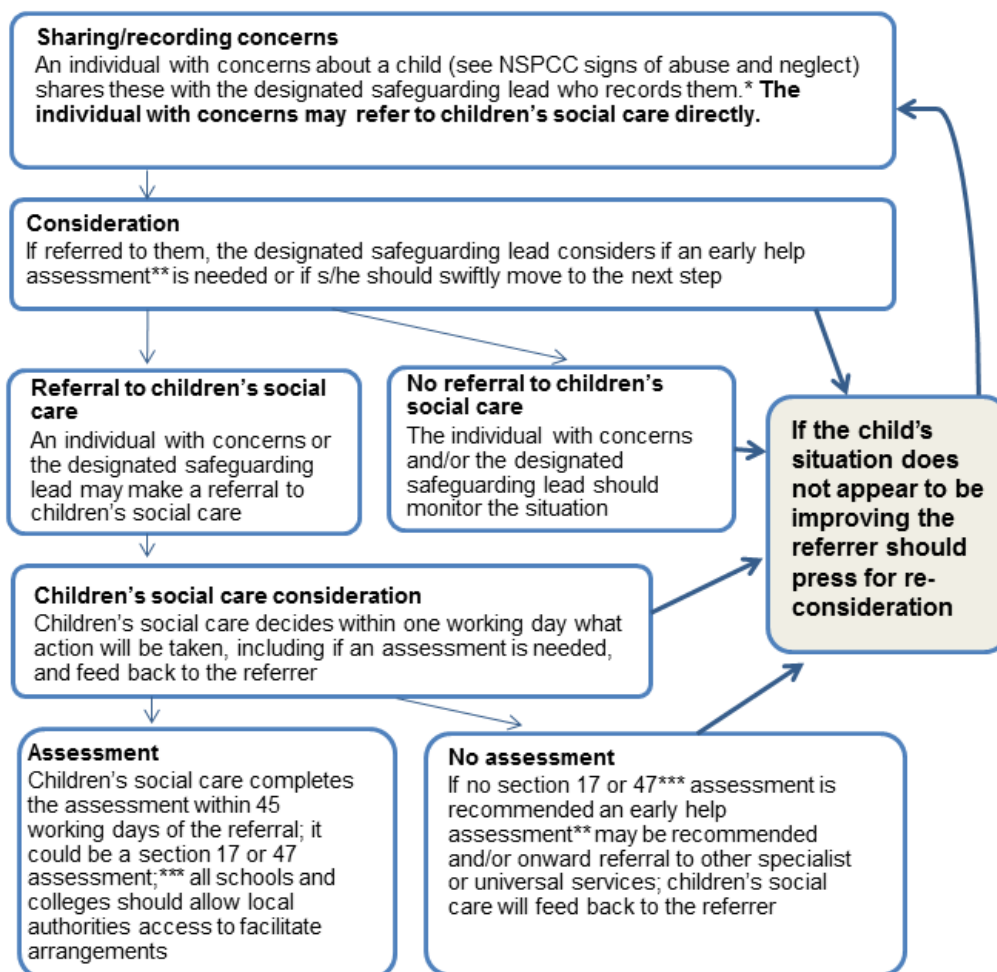
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School Policies

Appendix 1

Action when a child has suffered or is likely to suffer harm

This diagram illustrates what action should be taken and who should take it when there are concerns about a child. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately.

Anybody can make a referral.



* In cases which also involve an allegation of abuse against a staff member, see part four of this guidance which explains action the school or college should take in respect of the staff member

** Where a child and family would benefit from coordinated support from more than one agency (eg, education, health, housing, police) there should be an inter-agency assessment. These assessments should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989. The early help assessment should be undertaken by a lead professional who could be a teacher, special educational needs coordinator, General Practitioner (GP), family support worker, and/or health visitor.

*** Where there are more complex needs, help may be provided under section 17 of the Children Act 1989 (children in need). Where there are child protection concerns local authority services must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989.