



Bohunt School Safeguarding/ Child Protection Policy

Key staff: Simon Tanner, Gillian Tanton, Neil Pittaway (DSL), Victoria Elms, Natalie Moffatt, Gemma Ward and Neil Strowger

Philosophy

All young people have the right to be protected from abuse. Bohunt School fully recognises its responsibility for child protection.

Purposes

Our policy applies to all staff, governors and volunteers working at Bohunt. There are four main elements to our policy.

1. We promote an atmosphere where students feel secure and realise their viewpoints are valued, developing awareness of child protection issues and equipping students to keep them safe.
2. We provide suitable support and guidance for students who have been abused, in accordance with their child protection plan.
3. We ensure that we practice safe recruitment in checking the suitability of staff and volunteers to work with children.
4. We have clear procedures and systems for identifying and reporting cases of abuse, including appropriate training for all staff. We ensure that these approaches are consistent with other educational providers who work with our students. **(See Appendix 1-Procedures/Support Information).**

Bohunt School recognises that because of our day to day contact with children, school staff are well placed to observe the outward signs of abuse. The school will do the following:-

- Establish and maintain an environment where children feel secure, are encouraged to talk, and are listened to.
- Ensure that children know that there are adults that they can speak to if they are worried.
- Include opportunities in PSHE/PSRE to develop knowledge and skills to recognise and stay safe from abuse.

We will follow the procedures set out by the Local Safeguarding Children's Boards and The Local Authority, and take account of guidance issued by the DFE:

- Ensure that the Governing Body understand their responsibilities under S.175 of the Education Act 2002

- Ensure that there is a Designated Safeguarding Lead who is known to all staff , receives appropriate training for the role and provides training at least every three years to staff (including Catering and Cleaning staff), volunteers and Governors where appropriate. **(See Appendix 2-Role of the DSL)**
- Ensure that Bohunt's Child Protection obligations are set out in the School Prospectus
- Develop effective links with relevant agencies, including attendance and Child Protection Case Conferences.
- Notify allocated social worker if a Looked after Child or Child on the Child Protection Register has unauthorised absence from school.
- Keep written records of concern that are kept securely and separately in a locked location.
- Follow Statutory advice and procedures in the event of an allegation against a member of staff or volunteer **(See Appendix 3- Notification Form)**
- Ensure that safe selection and recruitment practices are always observed.

We recognise that children who are abused or witness abuse may have a low sense of self worth. Bohunt School may be the only stable, secure and predictable element in the lives of children at risk. As a result their behaviour may be particularly challenging. At Bohunt we will endeavour to support the student through:-

- the content and flexibility in the curriculum. For example, recognising the emergence of additional threats to students wellbeing, such as online behaviours.
- the school ethos, founded on a positive, supportive environment with excellent relationships between staff and students,
- the Inclusion Policy which will support vulnerable children in school,
- liaison with other external agencies to support students ,
- ensuring that Child Protection Records are transferred accordingly when a child leaves the school,
- ensuring that, where a student is on the Child Protection Register, the information is transferred to the new school immediately and the child's Social Worker is informed
- Treating all disclosures with the strictest confidence

We will ensure that the policy is reviewed annually in line with LSCB and DfE Guidance

Appendix 1-Procedures and support Information

All staff have a duty to report suspicions, concerns, or disclosures of abuse to students directly to the DSL or Headteacher as quickly as possible.

Where there is a disclosure or clear evidence of abuse then the DSL or Headteacher will report it directly to Social Services.

Receiving Information

When a student makes a disclosure of abuse in confidence, the member of staff will need to display tact and sensitivity in responding to the disclosure. While the student has to be reassured, he/she must be made aware of the need for action which will involve other adults being informed.

Leading questions should not be used. For example say: "Tell me what has happened" rather than, "Did they do x to you?"

Never stop a student who is freely recalling significant events.

Unless there are extenuating circumstances the student should not retell their story to another member of staff.

N.B. In discussing matters of a personal nature care should be taken to minimise the likelihood of allegations against a member of staff.

Recording Disclosures / Discussions with Students

The member of staff reporting the disclosure must record what happened at the earliest opportunity (within 24 hours) and pass it to the DSL. The report can be written on an incident sheet and should include the following:

- date and time of disclosure
- names of people present
- details of any injury
- explanation and action taken
- Signs of any physical injury should be described in detail and sketched using a copy of the skin map
- Any comments made by the student or by an adult who might be the abuser, about how the injury occurred should be recorded, preferably quoting the words actually used
- A record should be kept of all subsequent events/behaviour which are relevant

It is possible that the notes from a discussion with a student may be used in any subsequent court proceedings.

The same procedure for recording information should be followed where there are concerns or suspicions of abuse. A decision will then be made by the DSL to report the matter to Social Services or monitor the matter internally.

Allegations of Abuse Made Against a Member of Staff

Any allegations must be reported to the Headteacher immediately (See Appendix 3_

RECOGNITION OF CHILD ABUSE

GENERAL COMMENTS

Children can be harmed either by deliberate acts or by a failure to provide proper care, or both. Children may suffer neglect, emotional, physical or sexual abuse or a combination of such types of abuse.

NEGLECT

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 misuse. Once a child is born, neglect may involve a parent or carer failing to provide adequate food and clothing, shelter including exclusion from home or abandonment. Failure to protect a child from physical and emotional harm or danger. Failure to ensure adequate supervision including the use of inadequate caretakers. Failure to ensure access to appropriate medical care or treatment.

EMOTIONAL ABUSE

Persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children they are worthless or unloved, inadequate, or valued only in so far 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 the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child's participation in normal social interaction. It may also involve seeing or hearing the ill-treatment of another, e.g. domestic abuse. It may involve serious bullying (including cyber-bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

PHYSICAL ABUSE

It is important that a professional who sees an injury on a child takes careful note of how the injury allegedly happened, including the informant, the date, time, place, sequence of events, nature of injury etc. The assessment of the plausibility of the explanation should be a medical judgement - other professionals should not make this decision.

Although children do have a variety of accidents, the most common types of injury they sustain are usually different from the injuries caused by abuse. Differences in the sites of injuries are illustrated on the skin map.

The following situations, in cases of physical injury, should cause concern about the possibility of physical abuse:

1. No explanation.
2. Inappropriate explanation, e.g. description of a minor accident with a major injury.
3. Different explanations given to different enquirers.
4. Parents touchy or defensive, compared with genuine accidents when parents are usually distressed and blame themselves.
5. Delay in seeking treatment.
6. Child states that a particular adult hurt him, or one parent accuses another.

The following injuries should cause concern about the possibility of physical abuse because they are at classic sites or fit recognisable patterns (e.g. human hand marks, human bite marks):

General

Multiple injuries of various types and ages.

Bruising and Skin Marks

1. Black eyes - these cannot be caused by a fall on a flat surface - two black eyes are particularly suspect, especially if the lids are swollen and tender or there is no bruise to the nose or forehead.
2. Bruised ears, sometimes with bleeding from the ear canal from a ruptured eardrum.
3. Bruises of upper lip, torn frenulum of upper lip and injuries under the tongue.
4. Bruising around mouth or child (may have finger bruises up to 3 or 4 on one side and one on the other).
5. Flat hand marks, particularly on cheeks, buttocks and lateral thighs.
6. Bruises on scalp and "bald patches".
7. Finger bruises on shoulders, upper arms or on the trunks or legs of babies.
8. Linear marks or bruises - often seen on buttocks or backs of thighs.
9. Bruises or weals curving around the body. Sometimes buckle or loop marks noted.
10. Bizarre-shaped bruises with sharp borders, e.g. from hair brush, comb, slipper.
11. Bruises on abdomen - unlikely to be accidental.
12. Ligature and choke marks - red mark or bruising around wrist, ankles or neck (in the latter area may be due to sudden pulls on tee shirt).
13. Bite mark - 2 crescent shaped marks or bruises. If more than 3 cm apart they may be caused by an adult or older child.
14. Human nail marks - these show piled up skin at the end of the marks and are unlike abrasions from falls on rough surfaces or may just be linear bruises.

NOTE:

Approximate age of bruises from their appearance.

<u>Appearance</u>	<u>Age</u>
Swollen, tender	0 - 2 days
Red, blue, purple	0 - 5 days
Green	5 - 7 days
Yellow	7 - 10 days
Brown	10 - 14 days or longer
Cleared	2 - 4 weeks

Burns

1. Scalds - glove or stocking scalds to hands and/or feet caused by dunking in water.
2. Scalded buttocks - children cannot scald their buttocks accidentally without also scalding their feet and legs.
3. Splash marks - look at direction of splash to see if it is compatible with story or might indicate hot liquid being thrown at child.
4. Cigarette burns - small circular burns most typically on the back of hands or forearms, seen in clusters and often of different ages.
5. Contact burns - child held against heaters, iron, cookers – well demarcated burns following contours of hot objects.

Bone and Joint Injuries

These can be caused by direct blows, twists (from swinging a child round by one limb) or throwing against hard objects.

Poisoning

Non-accidental poisoning should be suspected in bizarre episodes of ill health or unconsciousness or when poisoning involves more than one child.

Other Injuries

Certain injuries may only be detected upon examination by doctors.

Sexual Abuse

Children of all ages, boys and girls, can be victims of sexual abuse.

This abuse often comes to light in a veiled way, for children are reluctant to tell. Many kinds of sexual abuse do not leave any signs of physical injury.

Children may try to tell others that they are being sexually abused. They may do this by hinting in words, play or drawings of sexual activities to "test the waters". If the adult response is empathic they may wish to reveal more, but if the response is angry or evasive, they may remain silent and not try again.

If a child exhibits several signs or types of behaviour as listed below, or a pattern emerges of when or how a child exhibits such signs, the possibility of sexual abuse should be considered. **But it must be emphasised** that the following behaviours are descriptions of some very common conditions of childhood indicating that the child is distressed, but only rarely will they be caused by sexual abuse.

1. Sudden change in mood or behaviour.
2. Change in eating patterns: loss of appetite, faddiness or excessive preoccupation with food.
3. Severe sleep disturbance with fears, vivid dreams or nightmares, sometimes with overt or veiled sexual content.
4. Withdrawal and depression, learning failure, mutilation, self injury, suicidal attempts.
5. Temper, aggression, disobedience and attention-seeking, anxiety or restless behaviour.
6. Lack of trust in familiar adults.
7. Girls takes over the mothering role in the family whether or not the mother is present.
8. Absconding; requests to leave home.

Sexualised conduct or inappropriate sexual knowledge in children may be due to direct sexual abuse or other forms of sexual abuse, such as from observing others or watching pornographic videos. The following are **possible indications** of sexual abuse:

1. Continual open masturbation; aggressive, inappropriate and explicit drawing and sex play (masturbation and some exploration are a normal part of growing up, but it is the type and persistence of these activities that cause concern).
2. Precocious knowledge of adult sexual behaviour.
3. A boy or girl who behaves in a sexually precocious way.
4. Requests for contraceptive information are rare but may be a cry for help, as may be anxieties about pregnancy or sexually transmitted disease.

5. Inappropriate displays of affection, e.g. parent and child behaving more like lovers.
6. Marked fear of men.
7. Fear of undressing.

Some physical conditions may also be indicators of sexual abuse, but not necessarily so:

1. Difficulty in walking or sitting.
2. Pain on passing water.
3. Recurrent urine infections.
4. Soiling.
5. Recurrent bed wetting.
6. Psychosomatic problems such as recurrent tummy ache or headache.

Protecting Children from Radicalisation

In order for schools and childcare providers 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 schools' and childcare providers' wider safeguarding duties, and is similar in nature to protecting children from other harms (e.g. drugs, gangs, neglect, sexual exploitation), whether these come from within their family or are the product of outside influences.

Schools and childcare providers can also build pupils' resilience to radicalisation by promoting fundamental British values and enabling them to challenge extremist views. It is important to emphasise that the Prevent duty is not intended to stop pupils debating controversial issues. Schools should provide a safe space in which children, young people and staff can understand the risks associated with terrorism and develop the knowledge and skills to be able to challenge extremist arguments. Schools are expected to promote the spiritual, moral, social and cultural development of pupils and, within this, fundamental British values. It is important that pupils are also taught about the diverse national, regional, religious and ethnic identities in the United Kingdom and the need for mutual respect and understanding.

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. School staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately.

Effective engagement with parents / the family is also important as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms.

As with other online risks of harm, every teacher needs to be aware of the risks posed by the online activity of extremist and terrorist groups.

What to do if you have a concern

If you have a concern about a particular pupil, you should follow our normal safeguarding procedures.

Female Genital Mutilation

Definition:

Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. It's also known as "female circumcision" or "cutting", and by other terms such as sunna, gudniin, halalays, tahur, megrez and khitan, among others. FGM is usually carried out on young girls between infancy and the age of 15, most commonly before puberty starts. It is illegal in the UK and is child abuse. It's very painful and can seriously harm the health of women and girls. It can also cause long-term problems with sex, childbirth and mental health.

At Bohunt will believe that all our pupils should be kept safe from harm. Female Genital Mutilation affects girls particularly from north African countries, including Egypt, Sudan, Somalia and Sierra Leone. Although our school has no/few children from these backgrounds and consider girls in our school safe from FGM, we will continue to review our policy annually.

What to do if you have a concern

If you have a concern about a particular pupil, you should follow our normal safeguarding procedures.

Child Sexual Exploitation

We recognise that child sexual exploitation is a high profile issue both nationally and locally.

Bohunt School recognises that the child sexual exploitation can cause a great deal of harm to a child, including physically, emotionally, educationally and socially. Where it exists it can also cause harm to communities including our school. Child sexual exploitation can happen in a number of ways to both boys and girls, for example it can happen in the virtual world through various social media and this can still cause significant harm.

It can happen through inappropriate relationships such as older boy/girlfriends or through parties, gangs or organised abuse. Some children will be particularly vulnerable to being exploited, for example if they have had a chaotic upbringing or if they are in care or go missing, involved in gangs or being bullied. We recognise however that any child can become a target for exploitation, particularly where the internet and social media are involved. This is because the normal life events that go with being a child or teenager in today's age can be a challenge and make them susceptible to being groomed and exploited. As an Academy we recognise that prevention is the best position with regard to CSE.

We seek to support children to develop confidence and build resilience. We will endeavour to support their age appropriate knowledge and raise awareness and understanding of what CSE is, to understand the risks of CSE and to spot the warning signs for themselves and also their friends and peers and by doing so keep safe. If prevention is not possible we aim to identify children who are at risk of, or being exploited very early.

Early intervention is key to effectively working with the child to prevent or reduce the level of risk. Once they have been groomed some children will find it difficult to withdraw from their abusers and we need to contribute to helping to protect them. Some children feel that they are in a relationship with these people. We commit to working with our inter-agency partners to safeguard and protect children. Much of this work will be through our PDT sessions, IT and Science. An important part of educating our children is focussing on what is a healthy relationship and issues of consent. We want to have a culture where the welfare of children is actively promoted and staff and pupils are vigilant. As part of this children will feel listened to and safe.

What to do if you have a concern

If you have a concern about a particular pupil, you should follow our normal safeguarding procedures.

Appendix 2-The Role of the Designated Safeguard Lead (DSL)

This role is currently carried out by Neil Pittaway; the Deputy Child Protection Liaison Officers are, Natalie Moffatt, Gillian Tanton, Gemma Ward, Simon Tanner, and Neil Strowger. The duty of the DSL is to:

- liaise with Children's Services;
- co-ordinate information from Social Services regarding young persons on the school roll who are either in care or subject to an order following child protection proceedings;
- keep records of cases of suspected abuse reported to Children's Services and any current notes;
- ensure all staff, including newly appointed staff, are aware of the procedures for child protection;
- be available to provide advice to staff on the interpretation of County Council and School Procedures;
- share with other members of staff expertise or information gained from INSET.
- Understand how Local Safeguarding Children's Boards (LSCB) operates, including effective engagement in Child Protection Conferences

Appendix Three- ALLEGATIONS OR CONCERN ABOUT A PERSON WORKING WITH CHILDREN

This form has been designed to help all agencies working with children record and refer information if it is alleged that a person who works with children has:

- Behaved in a way that has harmed, or may have harmed, a child
- Possibly committed a criminal offence against, or related to, a child; or
- Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

Every agency that employs or places people to work with children should designate a senior manager to deal with allegations against staff and volunteers. In the event of an allegation being made that meets any of the above criteria, the manager should complete this form* and **without delay** either fax or e-mail it to Disclosure and Barring (DBS). The manager should then telephone the DBS (0870 9090811) immediately to discuss the next course of action.

When receiving an allegation:

- Treat it seriously and keep an open mind
- **Do not** investigate
- **Do not** make assumptions or offer alternative explanations
- **Do not** promise confidentiality
- Record the details using the child/adult's own words
- Note time/date/place of incident(s), persons present and what was said
- Sign and date the written record
- Do not tell the member of staff/volunteer if this might place the child at risk of significant harm or jeopardise any future investigation

Further information about the procedure to be followed can be found in:

- Keeping Children Safe in Education
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/550511/Keeping_children_safe_in_education.pdf
- Hampshire Safeguarding Children Procedures Section 9
<http://4lscb.proceduresonline.com/hampshire/index.html>
- Working Together to Safeguarding Children: Paragraphs 6.20 – 6.30 & Appendix 5
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Tgether_to_Safeguard_Children.pdf
- Safeguarding Children and Safer Recruitment in Education Chapter 5
<https://www.education.gov.uk/consultations/downloadableDocs/Safeguarding%20Children%20Guidance.pdf>
- HR procedures for dealing with allegations against a member of staff or volunteer

Referrer Details	
Name:	Job Title
Organisation:	
Address:	
Tel No(s):	E-mail:

Child's Details		
Name:		
Date of Birth:	Ethnicity	M/F:

Home address:
School:
Additional information e.g. disability, communication or other special needs; previous child protection concerns

Parent/Carer Details	
Name:	
Home address:	Tel No(s):

Member of Staff / Volunteer concerned		
Name:		
Date of Birth:	Ethnicity	Tel. no(s)
Job Title:	Employment status	
Employer:		
Home Address:		
Additional information e.g. employment history; previous concerns raised:		
If suspended please give date and reasons:		

Details of allegation/concern – Please include date(s), time(s) and places
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Has a parent/carers been informed? If yes please give reason.

Has the member of staff or volunteer been informed? If yes, please give reason.

Action taken within organisation

Action by DBS

Signature of Referrer	Date	Time

Child Protection Policy ratified by Governors: October 2017
Next review: Autumn 2018