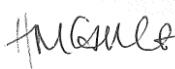





MANOR INFANT SCHOOL & NURSERY

Child Protection Policy

'Valued as Individuals, Inspired as Learners'

Approval By:	Governors
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CHAIR OF GOVERNORS & HEADTEACHER TO COMPLETE	 Helen Castle Head Teacher
Review Approved (signature):	 Sara Denham Chair of Governors
Date Approved:	October 2020

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Policy Statement

This policy is based on the Department for Education's statutory guidance [Keeping Children Safe in Education \(2020\)](#) and [Working Together to Safeguard Children \(2018\)](#), and the [Governance Handbook](#). We comply with this guidance and the arrangements agreed and published by our 3 local safeguarding partners.

This policy is also based on the following legislation:

Section 175 of the [Education Act 2002](#), which places a duty on schools and local authorities to safeguard and promote the welfare of pupils

[The School Staffing \(England\) Regulations 2009](#), which set out what must be recorded on the single central record and the requirement for at least one person conducting an interview to be trained in safer recruitment techniques.

[The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children

Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18

[Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

[The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children

Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children

[Statutory guidance on the Prevent duty](#), which explains schools' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism

The [Childcare \(Disqualification\) and Childcare \(Early Years Provision Free of Charge\) \(Extended Entitlement\) \(Amendment\) Regulations 2018](#) (referred to in this policy as the "2018 Childcare Disqualification Regulations") and [Childcare Act 2006](#), which set out who is disqualified from working with children

Portsmouth City Council-safeguarding in Education (2012)

This policy also meets requirements relating to safeguarding and welfare in the [statutory framework for the Early Years Foundation Stage](#).

Aims

The school aims to ensure that:

- Appropriate action is taken in a timely manner to safeguard and promote children's welfare
- All staff are aware of their statutory responsibilities with respect to safeguarding
- Staff are properly training in recognising and reporting safeguarding issues

The aims of this policy are to provide staff, volunteers and governors with the framework they need to keep children safe and secure in our school and to inform parents and guardians how we will safeguard their children whilst they are in our care.

Specific guidance is available to staff within the procedure documents

We recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.

We make every effort to provide a safe and welcoming environment underpinned by a culture of openness where both children and adults feel secure, able to talk and believe that they are being listened to.

We maintain an attitude of 'it could happen here' where safeguarding is concerned.

DEFINITIONS

Within this document:

Child protection is an aspect of safeguarding but is focused on how we respond to children who have been significantly harmed or are at risk of significant harm. **Child protection** refers to the procedures we use for children at risk of significant harm or who may have been harmed.

The term **staff** applies to all those working for or on behalf of the school, full time or part time, in either a paid or voluntary capacity. This also includes parents and governors.

Child refers to all young people who have not yet reached their 18 birthday. On the whole, this will apply to pupils of our school; however, the policy will extend to visiting children and students from other establishments.

Parent refers to birth parents and other adults in a parenting role for example adoptive parents, step parents, guardians and foster carers.

Abuse could mean neglect, physical, emotional or sexual abuse or any combination of these. Parents, carers and other people can harm children either by direct acts and / or failure to provide proper care. Explanations of these are given within the procedure document.

Neglect is a form of abuse and is 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. Appendix 8 defines neglect in more detail.

Sexting (also known as youth produced sexual imagery) is the sharing of sexual imagery (photos or videos) by children

Children includes everyone under the age of 18.

Principles and Values

- Children have a right to feel secure and cannot learn effectively unless they do so.
- All children have a right to be protected from harm.
- All staff have a key role in prevention of harm and an equal responsibility to act on any suspicion or disclosure that may indicate a child is at risk of harm, either in the school or in the community, taking into account *contextual safeguarding*, in accordance with the guidance.
- We acknowledge that working in partnership with other agencies protects children and reduces risk and so we will engage in partnership working throughout the child protection process to safeguard children.
- Whilst the school will work openly with parents as far as possible, it reserves the right to contact Children's Social Care or the police, without notifying parents if this is believed to be in the child's best interests.

Equality statement

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

We give special consideration to children who:

- Have special educational needs (SEN) or disabilities
- Are young carers
- May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality
- Have English as an additional language
- Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Are asylum seekers
- Are at risk due to either their own or a family member's mental health needs
- Are looked after or previously looked after

The designated safeguarding lead (DSL)

Our DSLs are

Head Teacher: Helen Castle

Deputy Head Teacher: Emma Cornish

Key Stage 1 Lead: Grace Brown

Safeguarding and Attendance Officer: Louise Hampton

The DSLs take lead responsibility for child protection and wider safeguarding.

During term time, the DSLs will be available during school hours for staff to discuss any safeguarding concerns.

The DSLs can also be contacted at any time via email.

The DSLs will be given the time, funding, training, resources and support to:

- Take part in strategy discussions and inter-agency meetings and/or support other staff to do so
- Contribute to the assessment of children
- Provide advice and support to other staff on child welfare and child protection matters
- Refer suspected cases, as appropriate, to the relevant body (local authority children's social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly

The DSLs will also keep the Headteacher informed of any issues, and liaise with local authority case managers and designated officers for child protection concerns as appropriate.

Training

All staff in our school are expected to be aware of the signs and symptoms of abuse and must be able to respond appropriately. Training is provided as required and on an annual basis at the beginning of the academic year. Separate training is provided to all new staff on appointment as part of their induction process. The DSLs will attend training at least every other year to enable them to fulfil their role. Any update in national or local guidance will be shared with all staff in briefings and then captured in the next whole school training. This policy will be updated during the year to reflect any changes brought about by new guidance.

Referral

Following any concerns raised, the DSL will assess the information and consider if significant harm has happened or there is a risk that it may happen. If the evidence suggests the threshold of significant harm, or risk of significant harm has been reached, or if it is not clear if the threshold is met, then the DSL will contact Children's Social Care and if appropriate the police. If the DSL is not available or there are immediate concerns, the staff member will refer directly to Children's Social Care and the police if appropriate.

N.B. The exception to this process will be in those cases of known FGM where there is a mandatory requirement for the teacher to report directly to the police. The DSL should also be made aware.

Generally, the DSL will inform the parents prior to making a referral. However, there are situations where this may not be possible or appropriate, particularly when informing parents or carers may place the child at further risk. If a parent informs us of a concern about their own child, we will inform them of what action we will take with the information they provide.

Confidentiality

- We maintain that all matters relating to child protection are to be treated as confidential and only shared as per the 'Information Sharing Advice for Practitioners' (DfE 2015) guidance.
- There is a lawful basis for child protection concerns to be shared with agencies who have a statutory duty for child protection.
- Timely information sharing is essential to effective safeguarding

- Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children
- The Data Protection Act (DPA) 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe
- If staff need to share ‘special category personal data’, the DPA 2018 contains ‘safeguarding of children and individuals at risk’ as a processing condition that allows practitioners to share information without consent if it is not possible to gain consent, it cannot be reasonably expected that a practitioner gains consent, or if to gain consent would place a child at risk
- Staff should never promise a child that they will not tell anyone about a report of abuse, as this may not be in the child’s best interests
- The government’s [information sharing advice for safeguarding practitioners](#) includes 7 ‘golden rules’ for sharing information, and will support staff who have to make decisions about sharing information
- If staff are in any doubt about sharing information, they should speak to the designated safeguarding lead

As a school we will educate pupils to recognise when they are at risk and how to get help when they need it through:

- The content of the curriculum.
- A school ethos which helps children feel safe and able to talk freely about their concerns, believing that they will be listened to and valued.

Dealing with allegations against staff

If a concern is raised about the practice or behaviour of a member of staff, this information will be recorded and passed to the Headteacher **Helen Castle**. The Local Authority Designated Officer (LADO) will be contacted and the relevant guidance will be followed

If the allegation is against the Headteacher, the person receiving the allegation will contact the LADO or Chair of Governors directly.

Dealing with allegations against pupils

If a concern is raised that there is an allegation of a pupil abusing another pupil within the school, the ‘Peer on Peer Abuse’ guidance will be followed (Annex 6)

Legal context

Section 175 of the education act 2002; the Education (Independent School Standards) Regulations 2014; the Non-Maintained Special Schools (England) Regulations Children Act 2004 & 1989

Guidance

Portsmouth Safeguarding Children Partnership (PSCP) protocols and guidance and their procedures:

Working Together to Safeguard Children (2019)

[Keeping Children Safe in Education \(2020\)](#)

[FGM Act 2003 Mandatory Reporting Guidance \(2016\)](#)

Policy review

As a school, we review this policy at least annually in line with DfE, PSCP and PCC requirements and other relevant statutory guidance.

Roles and responsibilities within Manor Infant School and Nursery

Staff responsibilities

All staff will read and understand part 1 and Annex A of the Department for Education's statutory safeguarding guidance, [Keeping Children Safe in Education](#), and review this guidance at least annually.

All staff have a key role to play in identifying concerns early and in providing help for children. To achieve this, they will be aware of:

- Our systems which support safeguarding, including the child protection and safeguarding policies, the staff code of conduct, the role and identity of the designated safeguarding leads (DSL), the behaviour policy, and the safeguarding response to children who go missing from education
- The early help process (sometimes known as the common assessment framework) and their role in it, including identifying emerging problems, liaising with the DSLs, and sharing information with other professionals to support early identification and assessment
- The process for making referrals to local authority children's social care and for statutory assessments that may follow a referral, including the role they might be expected to play
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), indicators of being at risk from or involved with serious violent crime, FGM and radicalisation
- The importance of children knowing that there are adults in the school who they can approach if they are worried or have concerns.
- Opportunities within the curriculum for children to develop the skills they need to recognise, assess and manage risk appropriately and keep themselves safe.
- Training in order to be aware of and alert to the signs of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), indicators of being at risk from or involved with serious violent crime, FGM and radicalisation
- The fact that "it could happen here" with regards to safeguarding.

Staff will:

- Record their concerns on CPOMS if they are worried that a child is being abused and report these to a DSL as soon as practical that day.
- Be prepared to refer directly to Social Care, and the police if appropriate, if there is a risk of significant harm and the DSLs are not available.
- Follow the allegations procedures (Annex 5) if the disclosure is an allegation against a member of staff.
- Follow the procedures set out by the Portsmouth Safeguarding Children Partnership and take account of guidance issued by the DfE.
- Treat information with confidentiality but never promising to 'keep a secret'.
- Notify the DSLs of any child on a child protection plan or child in need plan who has unexplained absence.
- Have an understanding of Early Help and be prepared to identify and support children who may benefit from early help.
- Liaise with other agencies that support pupils and provide early help.

The Headteacher

The Headteacher is responsible for the implementation of this policy, including:

- Ensuring that staff (including temporary staff) and volunteers are informed of our systems which support safeguarding, including this policy, as part of their induction
- Communicating this policy to parents when their child joins the school and via the school website

- Ensuring that all staff undertake appropriate safeguarding and child protection training and update this regularly
- Acting as the ‘case manager’ in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate
- Ensuring the relevant staffing ratios are met, where applicable
- Making sure each child in the Early Years Foundation Stage is assigned a key person
- Ensure whole school training occurs regularly, with at least annual updates so that staff and volunteers can fulfil their responsibilities knowledgeably.
- Ensure any members of staff joining the school outside the agreed training schedule receive induction prior to commencement of their duties.
- Develop, implement and review procedures in the school that enable the identification and reporting of all cases, or suspected cases, of abuse.

Governing body responsibilities

- Ensure Portsmouth Safeguarding Children Partnership is informed in line with local requirements about the discharge of duties via the bi-annual safeguarding audit.
- Recruitment, selection and induction follows safer recruitment practice including all appropriate checks.
- Allegations against staff are dealt with by the Headteacher. Allegations against the Headteacher are dealt with by the Chair of Governors.
- The governing board will approve this policy at each review, ensure it complies with the law and hold the Headteacher to account for its implementation.
- The governing board will appoint a link governor to monitor the effectiveness of this policy in conjunction with the full governing board. This is always a different person from the DSL.
- The chair of governors will act as the ‘case manager’ in the event that an allegation of abuse is made against the Headteacher, where appropriate
- All governors will read Keeping Children Safe in Education.
- All staff have read and understood part 1 of ‘Keeping Children Safe in Education’ (DfE September 2019)
- Ensure the school and nursery has policies for Child Protection and Safeguarding
- There is a Designated Safeguarding Lead
- The Designated Safeguarding Leads have child protection training every 2 years and is updated annually
- All other staff who work with children have annual training
- A review of its policies and procedures occurs annually

DSL responsibilities *(to be read in conjunction with DSL role description in KCSiE)*

The DSLs takes lead responsibility for child protection and wider safeguarding.

In addition to the role of all staff and the senior leadership team, the DSLs will:

- Provide advice and support to other staff on child welfare and child protection matters
- Take part in strategy discussions and inter-agency meetings and/or support other staff to do so
- Contribute to the assessment of children
- Refer suspected cases, as appropriate, to the relevant body (local authority children’s social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly
- Be aware of the training opportunities and briefings provided by Portsmouth Safeguarding Children Partnership to ensure staff are aware of the latest local guidance on safeguarding

During term time, the DSLs will be available during school hours for staff to discuss any safeguarding concerns. If one of the DSLs is absent, there will always be another DSL on site.

Manor Infant School and Nursery Child Protection Procedures

Overview

The following procedures apply to all staff working in the school and will be covered by training to enable staff to understand their role and responsibility.

The aim of our procedures is to provide a robust framework which enables staff to take appropriate action when they are concerned that a child is being harmed or is at risk of harm.

The prime concern at all stages must be the interests and safety of the child. Where there is a conflict of interest between the child and an adult, the interests of the child must be paramount.

All staff are aware that very young children with those with disabilities, special needs or with language delay may be more likely to communicate concerns with behaviours rather than words. Additionally, staff will question the cause of knocks and bumps in children who have limited mobility which will include children visiting the site as well as those who are pupils. Attention will be given to the Portsmouth Safeguarding Children Partnership Bruising Protocol, including with regards bruising of non-mobile infants.

A DSL will be informed immediately by member of staff, pupil and parent of the school and nursery, other persons, in the following circumstances;

- Suspicion that a child is being harmed
- There is evidence that a child is being harmed

The DSLs will keep a full record of concerns raised and make referrals to Children's Services Social Care/police if necessary.

Governors

Sara Denham (school governor with responsibility Child Protection and Safeguarding), Manor Infant School & Nursery, 02392 820548
sdenham@manor-inf.portsmouth.sch.uk

Role: to liaise with the DSL on matters relating to safeguarding issues, monitor compliance and to participate in the bi-annual review of the policy and any local authority safeguarding audit.

The School and Nursery governor responsible for Child Protection and Safeguarding will also;

- Ensure that the school follows all statutory child protection and safeguarding requirements.
- Monitor the effectiveness of our safeguarding procedures e.g. 'spot check' the single central register, observe pupils using the internet, interview pupils.
- Liaise with members of the school staff who have particular safeguarding responsibilities.
- Oversee the curriculum to ensure that pupils are being taught ways to keep themselves safe appropriate to the age and stage of development.

Teaching and Non-Teaching Staff-Manor Infant School and Nursery procedures

At Manor Infant School & Nursery, all staff will ensure that they have read and understood other relevant documents. These documents are;

- Keeping Children Safe in Education (2020) [Part One and Annex A];
- Staff Code of Conduct
- Safeguarding Policy and Child Protection Policy
- School's Behaviour Policy
- School Policy for Children Missing Education

- 'What to do if you're worried a child is being abused'

We recognise the importance of identifying concerns early and provide help for children to prevent concerns from escalating. We have a responsibility to provide a safe environment in which children learn. We have a responsibility to identify children who may be in need of extra help or who are suffering, or are likely to suffer, significant harm. All staff then have a responsibility to take appropriate action, working with other services as needed.

All staff should:

- Listen to the pupil, keeping calm and offering reassurance.
- Observe bruises or injuries but not ask a child to remove or adjust their clothing.
- If a disclosure is made the child should lead the discussion. Do not press for details by asking questions such as "What did they do next?"
- Listen but do not investigate using questions TEDS – Tell me, Explain to me, Describe to me, Show me
- Accept what the pupil says without challenge and reassure them that they are doing the right thing and that you recognise how hard it is for them.
- Do not blame or criticise either the child or the perpetrator.
- Do not promise confidentiality rather explain that you may have to tell. If you do need to tell explain who you will tell and why.

If a member of staff suspects abuse, spots signs or indicators of abuse, or they have a disclosure of abuse made to them they must:

1. Make an initial record of the information on CPOMS
2. Report it to a DSL immediately
3. A DSL will consider if there is a requirement for immediate medical intervention, however urgent medical attention should not be delayed if a DSL is not immediately available
4. Make an accurate record (which may be used in any subsequent court proceedings) as soon as possible and within 24 hours of the occurrence, of all that has happened, including details of:
 - Dates and times of their observations
 - Dates and times of any discussions in which they were involved
 - Any injuries
 - Explanations given by the child / adult
 - What action was taken
 - Any actual words or phrases used by the child

The records must be signed and dated by the author (or equivalent on electronic based records).

5. In the absence of a DSL, be prepared to refer directly to Children's Social Care (and the police if appropriate) if there is the potential for immediate significant harm

Following a report of concerns the DSL must:

1. Decide whether there are sufficient grounds for suspecting significant harm, in which case a referral must be made to Children's Social Care and the police if it is appropriate. The rationale for this decision should be recorded by the DSL.
2. Normally the school should try to discuss any concerns about a child's welfare with the family and where possible to seek their agreement before making a referral to Children's Social Care. However, in accordance with DfE guidance, this should only be done when it will not place the child at increased risk or could impact a police investigation. Where there are doubts or reservations about involving the child's family, the DSL should clarify with Children's Social Care or the police whether the parents should be told

about the referral and, if so, when and by whom. This is important in cases where the police may need to conduct a criminal investigation. The child's views should also be taken into account.

3. If there are grounds to suspect a child is suffering, or is likely to suffer, significant harm the DSL must contact Children's Social Care via the Inter-Agency Referral Form (IARF) making a clear statement of:
 - the known facts
 - any suspicions or allegations
 - whether or not there has been any contact with the child's family.

If there is indication that the child is suffering significant harm, a call will also be made to Children's Reception Team (CRT) on 08456710271

4. If a child is in immediate danger and urgent protective action is required, the police must be called. The DSL must then notify Children's Social Care of the occurrence and what action has been taken.
5. When a pupil needs *urgent* medical attention and there is suspicion of parental abuse causing the medical need, the DSL should take the child to the accident and emergency unit at the nearest hospital, while Children's Social Care are informed. Advice should be sought from Children's Social Care about informing the parents, remembering that parents should normally be informed that a child requires urgent hospital attention.
6. If there is not a risk of significant harm, the DSL will either actively monitor the situation or consider the Early Help process

MONITORING AND RECORD KEEPING

- All incidents should be written up within the hour. Legally they must be recorded within 24 hours. Written notes must be attached if made separately by scanning and uploading to the child's file
- A body map is available on CPOMS to record any physical harm. When recording bruises/injuries the report should describe the shape, colour and size.
- It is essential that accurate records be made where there are concerns about the welfare of the child.
- Personal data relating to pupils at Manor Infant School & Nursery and their families is stored in line with the school's GDPR Data Protection Policy. In accordance with the GDPR, the school does not store personal data indefinitely; data is only stored for as long as is necessary to complete the task for which it was originally collected.
- Having analysed the information, they have received, the DSL must record reasons for action and communicate this to the appropriate authorities.
- Inter Agency Referral Form is to be used as an aide for the DSL when discussing their concerns with social services or other agencies. A copy of Inter Agency Referral Form must be completed and sent to Social Care within 24 hours of a telephone referral being made about a child protection / or children in need concern. An additional sheet is provided to give further information based on the common assessment framework dimensions.

Recording other information

Information regarding the individual child can be recorded with the date, issue or concern and an action on CPOMS.

Information recorded can consist of:

- police reports
- outside agency involvement and meetings
- concerns raised by parents
- Concerns raised by school staff-e.g. no breakfast, cleanliness, something a child has said.

When this is logged, the class teacher, DSLs, Headteacher, Deputy Headteacher or Inclusion Leader must be alerted via CPOMS

Cases will be checked rigorously on a weekly basis by the Safeguarding and Attendance Officer and twice a half term by the Headteacher.

If a child has an individual safeguarding file this will be indicated on the child's overview on CPOMS.

Individual safeguarding files will include meetings from conferences, outside agency meetings, copies of emails and ongoing work involved with the child and the family.

Information from CPOMS and safeguarding files will be used by the professionals in order to report to external agencies, social workers and the Multi-Agency Safeguarding Hub (MASH).

Supporting Children

Manor Infant School and Nursery recognises that children who are abused or who witness violence may find it difficult to develop a sense of self-worth and to view the world in a positive way. School and nursery may be the only stable, secure and consistent element in the lives of some of the children under our care. The school and nursery, therefore recognises, that such children might display concerning behaviour and will take careful note of the context of such behaviour.

At Manor Infant School and Nursery, we will endeavour to support all our pupils by:

- Establishing and maintaining an ethos which is understood by all staff and which enables children to feel secure and encourages them to talk knowing that they will be listened to.
- Ensuring that all children are taught about keeping safe and know there is an adult in the school whom they can approach if they are worried or in difficulty. The children will be taught how to recognise when they are at risk and how to get help when they need it.
- Encouraging the development of self-esteem and resilience in every aspect of school life including through the curriculum and extra-curricular activities.
- Providing a caring, safe and positive environment within the school.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notify social care as soon as there is a significant concern.
- Ensuring that the Headteacher is the Designated Teacher for Looked After Children (LAC) and post Looked After Children (Post LAC). An up to date list of children who are subject to a care order or are accommodated by the Local Authority is regularly reviewed and updated.
- Notifying Social Care when a child attending the school is privately fostered.
- Providing continuing support to a pupil (about whom there have been concerns) who leaves the school by ensuring that such concerns and school records are forwarded under confidential cover to the DSL at the pupil's new school as a matter of urgency.

Early help

Early help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage years. School staff are particularly important as they are in a position to identify concerns early, provide help for children, and prevent concerns from escalating. All staff have a responsibility to provide a safe environment in which children can learn and all staff should be prepared to identify children who may benefit from early help.

The aim of early help is to prevent an escalation of needs into acute services including social care, special educational needs, health or learning support, to the detriment of children's welfare and increasing costs to the various agencies. It requires a collaborative approach. Staff will be alert to learners who need this level of support as soon as a problem emerges at any point in a child's life and how this differs from a child in immediate danger or at significant risk of harm. This will often begin with sharing observations or initial concerns with the school's Inclusion Leader, Safeguarding and Attendance Officer or Designated Safeguarding Lead who have communication with and access to other services.

Support to staff

- At Manor Infant School and Nursery, we understand that another member of staff or a volunteer may make an allegation against a member of staff. If such an allegation is made, the member of staff witnessing or receiving the allegation will immediately inform the Headteacher. (Annex 6)
- The Headteacher on all such occasions will discuss the content of the allegation with the LADO
- If the allegation made to a member of staff concerns the Headteacher, the teacher concerned will immediately inform the Chair of Governors who will consult with the LADO
- The school has adopted the Portsmouth City Councils Safeguarding Children in Education Framework for managing allegations against staff, a copy of which will be readily available in the school.

Supervision

- We recognise that staff working in the school and nursery who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.

- Through appropriate supervision, we will support such staff by providing an opportunity to talk through their anxieties with a designated colleague and to seek further support as appropriate.
- Where appropriate referral will be made for staff to access support from outside agencies.

Information sharing and confidentiality

Information sharing is essential for effective safeguarding and promoting the welfare of children and young people. Information sharing helps to ensure that an individual receives the right services at the right time and prevents a need from becoming more acute and difficult to meet.

The Data Protection Act (2018) and GDPR do not prevent, or limit the sharing of information for the purposes of keeping children safe. This includes allowing practitioners to share information without consent.

Wherever possible, information should be shared in an appropriate, secure way. Information sharing decisions should be recorded, whether or not the decision is taken to share. If the decision is to share, reasons should be cited including what information has been shared and with whom. If the decision is not to share, it is good practice to record the reasons for this decision and discuss them with the requester. The information will not be kept any longer than is necessary. In some rare circumstances, this may be indefinitely, but if this is the case, there will be a review process scheduled at regular intervals to ensure data is not retained where it is unnecessary to do so.

For further information, please consider using the following:

What to do if you are worried a child is being abused DFE (2006)

4LSCB website; www.4LSCB.org.uk

Portsmouth Safeguarding Children Partnership website www.portsmouthscp.org.uk/
Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers (July 2018)

www.nspcc.org.uk

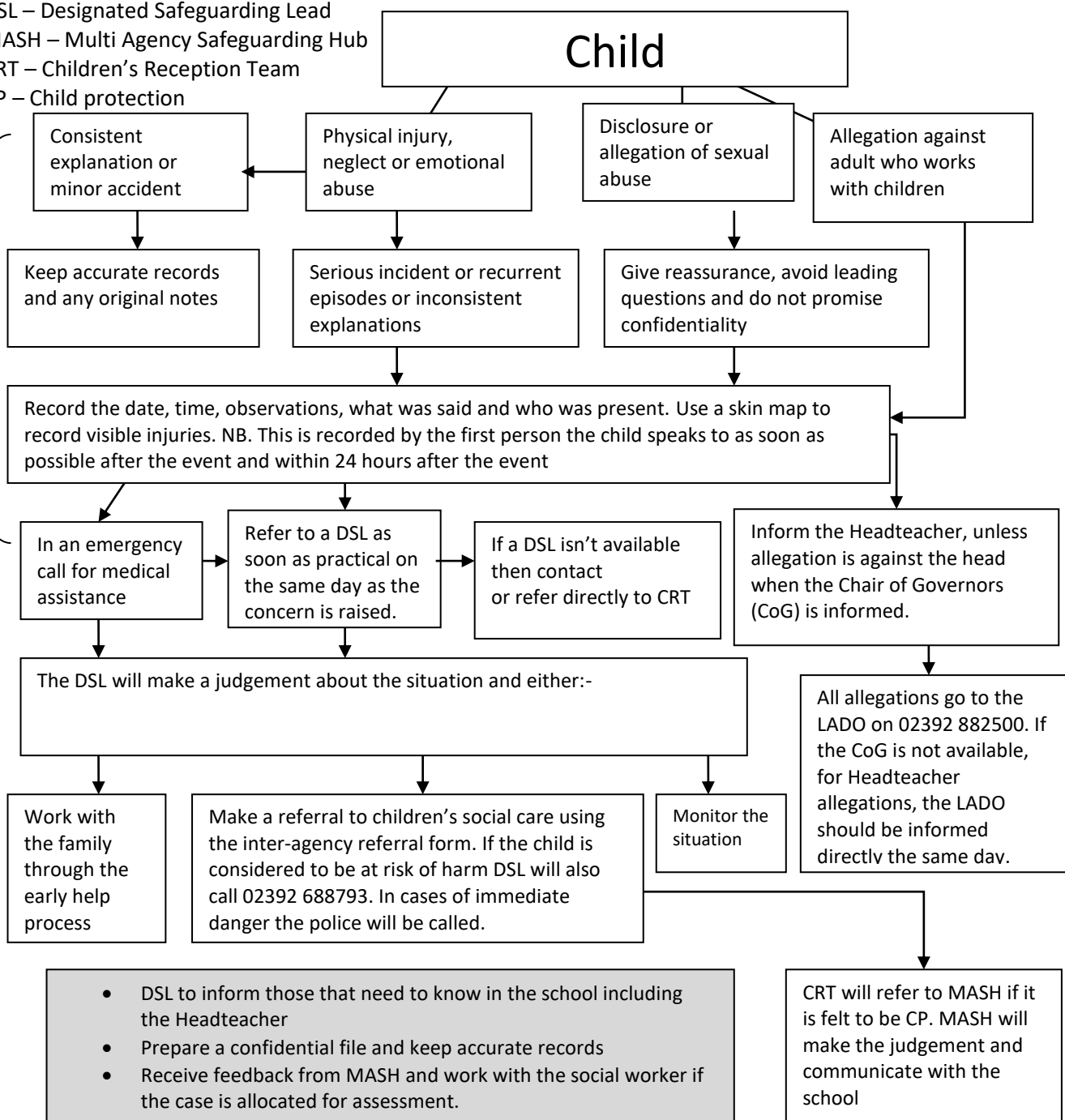
This policy will be reviewed annually

Annex 1

Flowchart for child protection procedures

DSL – Designated Safeguarding Lead
 MASH – Multi Agency Safeguarding Hub
 CRT – Children’s Reception Team
 CP – Child protection

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** In the cases of known FGM, the teacher who was made aware will also make contact with the police*



Annex 2

Dealing with disclosures

All staff should:

A member of staff who is approached by a child should listen positively and try to reassure them. They cannot promise complete confidentiality and should explain that they may need to pass information to other professionals, to help keep the child or other children safe. The degree of confidentiality should always be governed by the need to protect the child.

Additional consideration needs to be given to children with communication difficulties and for those whose preferred language is not English. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

All staff should know who the DSL is and who to approach if the DSL is unavailable. Ultimately, all staff have the right to make a referral to the police or social care directly and should do this if, for whatever reason, there are difficulties following the agreed protocol, e.g. they are the only adult on the school premises at the time and have concerns about sending a child home.

Guiding principles, the seven R's

Receive

- Listen to what is being said, without displaying shock or disbelief
- Accept what is said and take it seriously
- Make a note of what has been said as soon as practicable

Reassure

- Reassure the pupil, but only so far as is honest and reliable
- Don't make promises you may not be able to keep e.g. 'I'll stay with you' or 'everything will be alright now' or 'I'll keep this confidential'
- Do reassure e.g. you could say: 'I believe you', 'I am glad you came to me', 'I am sorry this has happened', 'We are going to do something together to get help'

Respond

- Respond to the pupil only as far as is necessary for you to establish whether or not you need to refer this matter, but do not interrogate for full details
- Do not ask 'leading' questions i.e. 'did he touch your private parts?' or 'did she hurt you?' Such questions may invalidate your evidence (and the child's) in any later prosecution in court
- Do not ask the child why something has happened.
- Do not criticise the alleged perpetrator; the pupil may care about him/her, and reconciliation may be possible
- Do not ask the pupil to repeat it all for another member of staff. Explain what you have to do next and whom you have to talk to. Reassure the pupil that it will be a senior member of staff

Report

- Share concerns with a DSL as soon as possible
- If you are not able to contact a DSL and the child is at risk of immediate harm, contact the children's services department directly

Record

- If possible, make some very brief notes at the time, and write them up as soon as possible on CPOMS
- Scan and upload your original notes onto the incident page

- Record the date, time, place, persons present and noticeable nonverbal behaviour, and the words used by the child. If the child uses sexual 'pet' words, record the actual words used, rather than translating them into 'proper' words
- Complete a body map to indicate the position of any noticeable bruising on CPOMS
- Record facts and observable things, rather than your 'interpretations' or 'assumptions'

Remember

- Support the child: listen, reassure, and be available
- Complete confidentiality is essential. Share your knowledge only with appropriate professional colleagues
- Try to get some support for yourself if you need it

Review (led by DSL)

- Has the action taken provided good outcomes for the child?
- Did the procedure work?
- Were any deficiencies or weaknesses identified in the procedure? Have these been remedied?
- Is further training required?

What happens next?

It is important that concerns are followed up and it is everyone's responsibility to ensure that they are. The member of staff should be informed by the DSL what has happened following the report being made. If they do not receive this information they should be proactive in seeking it out.

If a staff member believes that their concerns have not been referred on or that the child remains at risk, they should initially ask the DSL to reconsider, ensuring that the risks are understood. If this does not result in a satisfactory outcome, or the DSL rationale appears to miss the risk to the child, then the Whistleblowing procedures of the school should be followed. If the DSL is unhappy with the response from Children Social Care, they should consider following the PSCP escalation protocol.

Receiving a disclosure can be upsetting for the member of staff and the schools has a procedure for supporting them after the disclosure. This includes reassurance that they have followed procedure correctly and that their swift actions will enable the allegations to be handled appropriately. The school also has supervision for staff. For some staff, use of an employee-based counselling service may be appropriate.

Allegations against adults who work with children

If you have concerns about a member of staff (including a supply teacher or volunteer), or an allegation is made about a member of staff (including a supply teacher or volunteer) posing a risk of harm to children, speak to the Headteacher. If the concerns/allegations are about the Headteacher, speak to the Chair of Governors, Sara Denham.

Allegations as defined by KCSiE should be reported to the LADO. Complaints or concerns can be managed independently by the school or college under internal procedures.

Complaints could include:-

- Breaches of the Code of Conduct
- Failure to follow policy, procedure or guidance
- Any breach of data protection or confidentiality
- Poor behaviour management
- Inappropriate use of social media
- Misadministration of medication

Concerns could include:-

- Inappropriate use of language, shouting or swearing
- Discussing personal or sexual relationships with, or in the presence, of pupils
- Making (or encouraging others to make) unprofessional comments which scapegoat, demean or humiliate children, or might be interpreted as such.

Allegations Procedure

This procedure should be used in all cases in which it is alleged a member of staff or volunteer in a school, or another adult who works with children has:

- behaved in a way that has harmed a child, 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 he or she would pose a risk of harm to children
- behaved or may have behaved in a way that indicates they may not be suitable to work with children

It applies regardless of whether the alleged abuse took place in the school. Allegations against a teacher who is no longer teaching and historical allegations of abuse will be referred to the police.

We will deal with any allegation of abuse against a member of staff or volunteer very quickly, in a fair and consistent way that provides effective child protection while also supporting the individual who is the subject of the allegation.

Our procedures for dealing with allegations will be applied with common sense and judgement.

In dealing with allegations or concerns against an adult, staff must:

- Report any concerns about the conduct of any member of staff or volunteer to the Headteacher as soon as possible
- If an allegation is made against the Headteacher, the concerns need to be raised with the Chair of Governor as soon as possible. If the Chair of Governors is not available, then the LADO should be contacted directly.

- There may be situations when the Headteacher or Chair of Governors will want to involve the police immediately, if the person is deemed to be an immediate risk to children or there is evidence of a possible criminal offence.
- Once an allegation has been received by the Headteacher or Chair of Governors, they will contact the LADO on 02392 882500 or LADO@secure.portsmouthcc.gov.uk as soon as possible and before carrying out any investigation into the allegation other than preliminary enquiries.
- Inform the parents of the allegation unless there is a good reason not to do so.

In liaison with the LADO, the school will determine how to proceed and if necessary the LADO will refer the matter to Children's Social Care and/or the police.

If the matter is investigated internally, the LADO will advise the school to seek guidance from their personnel/HR provider in following procedures set out in chapter 4 of 'Keeping Children Safe in Education' (2020) and the PSCP procedures.

This should be read in line with the school Whistle Blowing Policy

Annex 4

Sexual violence and sexual harassment between children in schools

Peer on Peer Abuse

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as “banter”, “just having a laugh” or “part of growing up”.

We also recognise the gendered nature of peer-on-peer abuse. However, all peer-on-peer abuse is unacceptable and will be taken seriously.

Most cases of pupils hurting other pupils will be dealt with under our school’s behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns. This might include where the alleged behaviour:

- Is serious, and potentially a criminal offence
- Could put pupils in the school at risk
- Is violent
- Involves pupils being forced to use drugs or alcohol
- Involves sexual exploitation, sexual abuse or sexual harassment, such as indecent exposure, sexual assault, upskirting or sexually inappropriate pictures or videos (including sexting)

If a pupil makes an allegation of abuse against another pupil:

- You must record the allegation and tell the DSL, but do not investigate it
- The DSL will contact the local authority children’s social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence
- The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and any others affected) with a named person they can talk to if needed
- The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate
- If a child is at risk of harm, is in immediate danger, or has been harmed, a referral will be made to Children’s Social Care (02392 668793)

We will minimise the risk of peer on peer abuse by:-

Prevention:

- Taking a whole school approach to safeguarding & child protection
- Providing a clear set of values and standards, underpinned by the school’s behaviour policy and pastoral support system, and by a planned programme of evidence-based content delivered through the curriculum.
- Challenging any form of derogatory or sexualised language or behaviour, including requesting or sending sexual images
- Being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female pupils, and initiation or hazing type violence with respect to boys
- Ensuring our curriculum helps to educate pupils about appropriate behaviour and consent
- Ensuring pupils know they can talk to staff confidentially by [insert your procedures for making pupils aware of this here]
- Ensuring staff are trained to understand that a pupil harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy
- Engaging with specialist support and interventions.

Risk Assessment:-

Following a report, the DSL will make an immediate risk and needs assessment on a case-by-case basis.

The risk assessment will consider;

- The victim, especially their protection and support.
- The alleged perpetrator, their support needs and any discipline action.
- All other children at the school.
- The victim and the alleged perpetrator sharing classes and space at school.

The risk assessment will be recorded and kept under review.

Where there has been other professional intervention and/or other specialist risk assessments, these professional assessments will be used to inform the school's approach to supporting and protecting pupils.

Action: The DSL will consider:-

- The wishes of the victim.
- The nature of the incident including whether a crime has been committed and the harm caused.
- Ages of the children involved.
- Developmental stages of the children.
- Any power imbalance between the children.
- Any previous incidents.
- Ongoing risks.
- Other related issues or wider context.

Options: The DSL will manage the report with the following options:-

- Manage internally
- Early Help
- Refer to Children's Social Care
- Report to the police (generally in parallel with a referral to Social Care)

Ongoing Response:

- The DSL will manage each report on a case by case basis and will keep the risk assessment under review.
- Where there is a criminal investigation into a rape, assault by penetration or sexual assault, the alleged perpetrator should be removed from any classes they share with the victim.
- The DSL will consider how best to keep the victim and perpetrator a reasonable distance apart on school premises and on transport where appropriate.
- Where a criminal investigation into a rape or assault by penetration leads to a conviction or caution, the school will take suitable action. In all but the most exceptional of circumstances, the rape or assault is likely to constitute a serious breach of discipline and lead to the view that allowing the perpetrator to remain in the same school or college would seriously harm the education or welfare of the victim (and potentially other pupils or students).
- Where a criminal investigation into sexual assault leads to a conviction or caution, the school or college will, if it has not already, consider any suitable sanctions in light of their behaviour policy, including consideration of permanent exclusion. Where the perpetrator is going to remain at the school or college, the principle would be to continue keeping the victim and perpetrator in separate classes and continue to consider the most appropriate way to manage potential contact on school and college premises and transport. The nature of the conviction or caution and wishes of the victim will be especially important in determining how to proceed in such cases.
- The victim, alleged perpetrator and other witnesses (children & adults) will receive appropriate support and safeguards on a case-by-case basis.
- The school will take any disciplinary action against the alleged perpetrator in line with behaviour and discipline in schools.
- The school recognises that taking disciplinary action and providing appropriate support are not mutually exclusive actions and will occur at the same time if necessary.

Sexting

Responsibilities when responding to an incident

Staff that are made aware of an incident involving sexting (also known as 'youth produced sexual imagery'), must report it to the DSL immediately.

They must not:

- View, download or share the imagery, or ask a pupil to share or download it. If the imagery has already been viewed by accident, this must be reported to the DSL
- Delete the imagery or ask the pupil to delete it
- Ask the pupil(s) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility)
- Share information about the incident with other members of staff, the pupil(s) it involves or their, or other, parents and/or carers
- Say or do anything to blame or shame any young people involved

Staff should explain that they need to report the incident, and reassure the pupil(s) that they will receive support and help from the DSL.

Initial review meeting

Following a report of an incident, the DSL will hold an initial review meeting with appropriate school staff. This meeting will consider the initial evidence and aim to determine:

- Whether there is an immediate risk to pupil(s)
- If a referral needs to be made to the police and/or children's social care
- If it is necessary to view the imagery in order to safeguard the young person (in most cases, imagery should not be viewed)
- What further information is required to decide on the best response
- Whether the imagery has been shared widely and via what services and/or platforms (this may be unknown)
- Whether immediate action should be taken to delete or remove images from devices or online services
- Any relevant facts about the pupils involved which would influence risk assessment
- If there is a need to contact another school, college, setting or individual
- Whether to contact parents or carers of the pupils involved (in most cases parents should be involved)

The DSL will make an immediate referral to police and/or children's social care if:

- The incident involves an adult
- There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example owing to special educational needs)
- What the DSL knows about the imagery suggests the content depicts sexual acts which are unusual for the young person's developmental stage, or are violent
- The imagery involves sexual acts and any pupil in the imagery is under 13
- The DSL has reason to believe a pupil is at immediate risk of harm owing to the sharing of the imagery (for example, the young person is presenting as suicidal or self-harming)

If none of the above apply then the DSL, in consultation with the Headteacher and other members of staff as appropriate, may decide to respond to the incident without involving the police or children's social care.

Further review by the DSL

If at the initial review stage a decision has been made not to refer to police and/or children's social care, the DSL will conduct a further review.

They will hold interviews with the pupils involved (if appropriate) to establish the facts and assess the risks.

If at any point in the process there is a concern that a pupil has been harmed or is at risk of harm, a referral will be made to children's social care and/or the police immediately.

Informing parents

The DSL will inform parents at an early stage and keep them involved in the process, unless there is a good reason to believe that involving them would put the pupil at risk of harm.

Referring to the police

If it is necessary to refer an incident to the police, this will be done through contacting the local neighbourhood police or dialling 101

Recording incidents

All sexting incidents and the decisions made in responding to them will be recorded. The record-keeping arrangements of using CPOMS also apply to recording incidents of sexting.

Physical Abuse

While a clear focus of peer on peer abuse is around sexual abuse and harassment, physical assaults and initiation violence and rituals from pupils to pupils can also be abusive.

These are equally not tolerated and if it is believed that a crime has been committed, will be reported to the police.

The principles from the anti-bullying policy will be applied in these cases, with recognition that any police investigation will need to take priority.

Pupils with special educational needs and disabilities

We recognise that pupils with special educational needs (SEN) and disabilities can face additional safeguarding challenges. Additional barriers can exist when recognising abuse and neglect in this group, including:

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

Pupils with a Social Worker

Pupils may need a social worker due to safeguarding or welfare needs. We recognise that a child's experiences of adversity and trauma can leave them vulnerable to further harm as well as potentially creating barriers to attendance, learning, behaviour and mental health.

The DSL and all members of staff will work with and support social workers to help protect vulnerable children.

Where we are aware that a pupil has a social worker, the DSL will always consider this fact to ensure any decisions are made in the best interests of the pupil's safety, welfare and educational outcomes. For example, it will inform decisions about:

- Responding to unauthorised absence or missing education where there are known safeguarding risks
- The provision of pastoral and/or academic support

References: –

KCSiE (DfE 2020)

Sexual Violence and Sexual Harassment between Children in Schools and Colleges (DfE 2018)

Brook sexual behaviours traffic light tool

Behaviours: age 0 to 5

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary.

<p>What is a green behaviour? Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability. They are reflective of natural curiosity, experimentation, consensual activities and positive choices</p> <p>What can you do? Green behaviours provide opportunities to give positive feedback and additional information.</p> <p>Green behaviours</p> <ul style="list-style-type: none"> • holding or playing with own genitals • attempting to touch or curiosity about other children's genitals • attempting to touch or curiosity about breasts, bottoms or genitals of adults • games e.g. mummies and daddies, • doctors and nurses • enjoying nakedness • interest in body parts and what they do • curiosity about the differences between boys and girls 	<p>What is an amber behaviour? Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.</p> <p>What can you do? Amber behaviours signal the need to take notice and gather information to assess the appropriate action.</p> <p>Amber behaviours</p> <ul style="list-style-type: none"> • preoccupation with adult sexual behaviour • pulling other children's pants down/skirts up/trousers down against their will • talking about sex using adult slang • preoccupation with touching the genitals of other people • following others into toilets or changing rooms to look at them or touch them • talking about sexual activities seen on TV/online 	<p>What is a red behaviour? Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur</p> <p>What can you do? Red behaviours indicate a need for immediate intervention and action.</p> <p>Red behaviours</p> <ul style="list-style-type: none"> • persistently touching the genitals of other children • persistent attempts to touch the genitals of adults • simulation of sexual activity in play • sexual behaviour between young children involving penetration with objects • forcing other children to engage in sexual play
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This is intended to be used as a guide only. Please refer to the guidance tool at <https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool> for further information

Print date: 01/10/2015 - Brook has taken every care to ensure that the information contained in this publication is accurate and up-to-date at the time of being published. As information and knowledge is constantly changing, readers are strongly advised to use this information for up to one month from print date. Brook accepts no responsibility for difficulties that may arise as a result of an individual acting on the advice and recommendations it contains.

Brook sexual behaviours traffic light tool adapted from Family Planning Queensland. (2012). Traffic Lights guide to sexual behaviours. Brisbane: Family Planning Queensland, Australia.

Behaviours: age 5 to 9 and 9 to 13

All green, amber and red behaviours require some form of attention and response. It is the level of intervention that will vary

What is a green behaviour?

Green behaviours reflect safe and healthy sexual development. They are displayed between children or young people of similar age or developmental ability and reflective of natural curiosity, experimentation, consensual activities and positive choices

What can you do?

Green behaviours provide opportunities to give positive feedback and additional information.

Green behaviours 5-9

- feeling and touching own genitals
- curiosity about other children's genitals
- curiosity about sex and relationships, e.g. differences between boys and girls, how sex happens, where babies come from, same-sex relationships
- sense of privacy about bodies
- telling stories or asking questions using swear and slang words for parts of the body

Green behaviours 9-13

- solitary masturbation
- use of sexual language including swear and slang words
- having girl/boyfriends who are of the same, opposite or any gender
- interest in popular culture, e.g. fashion, music, media, online games, chatting online
- need for privacy
- consensual kissing, hugging, holding hands with peers

What is an amber behaviour?

Amber behaviours have the potential to be outside of safe and healthy behaviour. They may be of potential concern due to age, or developmental differences. A potential concern due to activity type, frequency, duration or context in which they occur.

What can you do?

Amber behaviours signal the need to take notice and gather information to assess the appropriate action.

Amber behaviours 5-9

- questions about sexual activity which persist or are repeated frequently, despite an answer having been given
- sexual bullying face to face or through texts or online messaging
- engaging in mutual masturbation
- persistent sexual images and ideas in talk, play and art
- use of adult slang language to discuss sex

Amber behaviours 9-13

- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- verbal, physical or cyber/virtual sexual bullying involving sexual aggression
- LGBT (lesbian, gay, bisexual, transgender) targeted bullying
- exhibitionism, e.g. flashing or mooning
- giving out contact details online
- viewing pornographic material
- worrying about being pregnant or having STIs

What is a red behaviour?

Red behaviours are outside of safe and healthy behaviour. They may be excessive, secretive, compulsive, coercive, degrading or threatening and involving significant age, developmental, or power differences. They may pose a concern due to the activity type, frequency, duration or the context in which they occur

What can you do?

Red behaviours indicate a need for immediate intervention and action.

Red behaviours 5-9

- frequent masturbation in front of others
- sexual behaviour engaging significantly younger or less able children
- forcing other children to take part in sexual activities
- simulation of oral or penetrative sex
- sourcing pornographic material online

Red behaviours 9-13

- exposing genitals or masturbating in public
- distributing naked or sexually provocative images of self or others
- sexually explicit talk with younger children
- sexual harassment
- arranging to meet with an online acquaintance in secret
- genital injury to self or others
- forcing other children of same age, younger or less able to take part in sexual activities
- sexual activity e.g. oral sex or intercourse
- presence of sexually transmitted infection (STI)
- evidence of pregnancy

This is intended to be used as a guide only. Please refer to the guidance tool at <https://www.brook.org.uk/our-work/the-sexual-behaviours-traffic-light-tool> for further information

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Whistleblowing in a Safeguarding Context

While the school has a separate whistleblowing policy, this is a summary sheet that outlines the process when there is a concern that safeguarding issues have not been reported or followed correctly.

This does not replace the whistleblowing policy and should be read in conjunction with the school policy.

Whistleblowing is a term that is used when staff want to report a concern within their organisation that involves their manager or a person senior to them in the organisation which may prevent them from following the normal reporting systems.

There are a limited number of areas that can be called Whistleblowing, and the policy protects staff from being punished for raising concerns.

Within **Manor Infant School and Nursery**, the Headteacher **Helen Castle** is the senior manager and responsible for all staff. If anyone is concerned that any member of staff within the school is not following safeguarding processes or behaving in a way that is placing children at risk, they should in the first place make the Headteacher aware.

If the concern is about the Headteacher, it should raise this with the Chair of Governors by post, telephone or email

- Chair of Governors, Manor Infant School and Nursery, Inverness Road, Portsmouth, PO1 5QR
- Telephone: 02392 820548
- Email: sdenham@manor-inf.portsmouth.sch.uk

If a member staff would prefer to raise their concerns outside of the school, then they are able to contact the NSPCC whistleblowing line on 0800 028 0285 or email help@nspcc.org.uk for national organisations or make contact with Portsmouth City Council.

If a member of staff believe that another member of the school staff is harming a child (an allegation) and this has been reported to the Headteacher and no / insufficient action has been taken, or the member of staff there are concerns about is the Headteacher, then the LADO must be contacted on 02392 882500 or LADO@secure.portsmouthcc.gov.uk

If staff believe that a child is being abused by individuals outside the school, they are able to make a referral to Children's Social Care by calling 02392 839111 (office hours)

Briefing sheet for temporary and supply staff**For supply staff and those on short contracts in Manor Infant School and Nursery**

While working in Manor Infant School and Nursery and you have a duty of care towards the children here. This means that at all times you should act in a way that is consistent with their safety and welfare.

In addition, if at any time you have a concern about a child or young person, particularly if you think they may be at risk of abuse or neglect, it is your responsibility to share that concern with the school Designated Safeguarding Leads (DSL), **Helen Castle (Head Teacher), Emma Cornish (Deputy Head Teacher), Grace Brown (Key Stage 1 Leader) or Louise Hampton (Safeguarding and Attendance Officer).**

This is not an exhaustive list but you may have become concerned as a result of:

- Observing a physical injury, which you think may have been non-accidental.
- Observing something in the appearance of a child or young person which suggests they are not being sufficiently well cared for.
- Observing behaviour that leads you to be concerned about a child or young person.
- a child or young person telling you that they have been subjected to some form of abuse.

In any of the circumstances listed here, you must write down what you saw or heard, date and sign your account, and give it to a DSL as soon as possible and no longer than 24 hours later. This may be the beginning of a legal process – it is important to understand that legal action against a perpetrator can be seriously damaged by any suggestion that the child has been led in any way.

If a child talks to you about abuse, you should follow these guidelines:

- Rather than directly questioning the child, just listen and be supportive
- Never stop a child who is freely recalling significant events, but don't push the child to tell you more than they wish.
- Make it clear that you may need to pass on information to staff in other agencies who may be able to help – do not promise confidentiality. You are obliged to share any information relating to abuse or neglect.
- Write an account of the conversation immediately, as close to verbatim as possible. Put the date and timings on it, and mention anyone else who was present. Then sign it and give your record to the DSL who should contact Children's Social Care if appropriate.

The school has a policy on safeguarding children and young people which you can find, together with the local procedures to be followed by all staff, in Staff Room.

Remember, if you have a concern, report it to a DSL.

What is child abuse?

The following definitions are taken from *Working Together to Safeguard Children* HM Government (2019). In addition to these definitions, it should be understood that children can also be abused by being sexually exploited, honour-based violence, forced marriage or female genital mutilation. To support the local context, all staff have access to the Portsmouth Safeguarding Children Partnership threshold chart.

Types and definitions 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.

Typical signs of physical abuse are:

- Multiple bruising or bruises and scratches (especially on the head and face)
- Clusters of bruises – e.g., fingertip bruising (caused by being grasped)
- Bruises around the neck and behind the ears – the most common abusive injuries are to the head
- Bruises on the back, chest, buttocks, or on the inside of the thighs
- Marks indicating injury by an instrument – e.g. linear bruising (stick), parallel bruising (belt), marks of a buckle
- Bite marks
- Deliberate burning may also be indicated by the pattern of an instrument or object – e.g. electric fire, cooker, cigarette
- Scalds with upward splash marks or tide marks
- Untreated injuries
- Recurrent injuries or burns
- Bald patches.

In the social context of the school, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when:

- the explanation given does not match the injury
- the explanation uses words or phrases that do not match the vocabulary of the child (adult words)
- no explanation is forthcoming
- the child (or the parent/carer) is secretive or evasive
- the injury is accompanied by allegations of abuse or assault

You should be concerned if the child or young person:

- is reluctant to have parents/carers contacted
- runs away or shows fear of going home
- is aggressive towards themselves or others
- flinches when approached or touched
- is reluctant to undress to change clothing for sport
- wears long sleeves during hot weather
- is unnaturally compliant in the presence of parents/carers.
- has a fear of medical help or attention
- admits to a punishment that appears excessive.

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.

Typical Signs of Emotional Abuse

Developmental issues

- Delays in physical, mental and emotional development
- Poor school performance
- Speech disorders, particularly sudden disorders or changes.

Behaviour

- Acceptance of punishment which appears excessive
- Over-reacts to mistakes
- Continual self-deprecation (I'm stupid, ugly, worthless etc.)
- Neurotic behaviour (such as rocking, hair-twisting, thumb-sucking)
- Self-mutilation
- Suicide attempts
- Drug/solvent abuse
- Running away
- Compulsive stealing, scavenging
- Acting out
- Poor trust in significant adults
- Regressive behaviour – e.g. wetting
- Eating disorders
- Destructive tendencies
- Neurotic behaviour
- Arriving early at school, leaving late

Social issues

- Withdrawal from physical contact
- Withdrawal from social interaction
- Over-compliant behaviour
- Insecure, clinging behaviour
- Poor social relationships

Emotional responses

- Extreme fear of new situations
- Inappropriate emotional responses to painful situations ("I deserve this")
- Fear of parents being contacted
- Self-disgust
- Low self-esteem
- Unusually fearful with adults
- Lack of concentration, restlessness, aimlessness
- Extremes of passivity or aggression

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Characteristics of child sexual abuse:

- it is often planned and systematic – people do not sexually abuse children by accident, though sexual abuse can be opportunistic
- grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent
- grooming the child’s environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Most people who sexually abuse children are men, but some women sexually abuse too.

Indicators of sexual abuse

Physical observations

- Damage to genitalia, anus or mouth
- Sexually transmitted diseases
- Unexpected pregnancy, especially in very young girls
- Soreness in genital area, anus or mouth and other medical problems such as chronic itching
- Unexplained recurrent urinary tract infections and discharges or abdominal pain

Behavioural observations

- Sexual knowledge inappropriate for age
- Sexualised behaviour or affection inappropriate for age
- Sexually provocative behaviour/promiscuity
- Hinting at sexual activity Inexplicable decline in school performance
- Depression or other sudden apparent changes in personality as becoming insecure or clinging
- Lack of concentration, restlessness, aimlessness
- Socially isolated or withdrawn
- Overly-compliant behaviour
- Acting out, aggressive behaviour
- Poor trust or fear concerning significant adults
- Regressive behaviour,
- Onset of wetting, by day or night; nightmares
- Onset of insecure, clinging behaviour
- Arriving early at school, leaving late, running away from home
- Suicide attempts, self-mutilation, self-disgust
- Suddenly drawing sexually explicit pictures
- Eating disorders or sudden loss of appetite or compulsive eating
- Regressing to younger behaviour patterns such as thumb sucking or bringing out discarded cuddly toys
- Become worried about clothing being removed
- Trying to be ‘ultra-good’ or perfect; overreacting to criticism.

Promiscuity

- Sexual approaches or assaults on other children or adults
- Urinary tract infections, sexually transmitted diseases, bleeding or soreness in the genital or anal area
- Bruising to the buttocks, lower abdomen thighs, and genitals and other rectal areas bruises may be confined to grip marks where a child has been held so that abuse can take place
- Drawing or pornographic or sexually explicit images/material or writing.

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.

The nature of neglect

Neglect is a lack of parental care but poverty and lack of information or adequate services can be contributory factors.

Far more children are registered to the category of neglect on child protection plans than to the other categories. As with abuse, the number of children experiencing neglect is likely to be much higher than the numbers on the plans.

Neglect can include parents or carers failing to:

- provide adequate food, clothing and shelter
- protect a child from physical and emotional harm or danger
- ensure adequate supervision or stimulation
- ensure access to appropriate medical care or treatment.

NSPCC research has highlighted the following examples of the neglect of children under 12:

- frequently going hungry
- frequently having to go to school in dirty clothes
- regularly having to look after themselves because of parents being away or having problems such as drug or alcohol misuse
- being abandoned or deserted
- living at home in dangerous physical conditions
- not being taken to the doctor when ill
- not receiving dental care.

Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group.

Neglect is often noticed at a stage when it does not pose a risk to the child. The duty to safeguard and promote the welfare of children (*What to do if You're Worried a Child is Being Abused* DfE 2015) would suggest that an appropriate intervention or conversation at this early stage can address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need.

Neglect is often linked to other forms of abuse, so any concerns school staff have should at least be discussed with the DSL.

Indicators of neglect

The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself. The PSCP neglect toolkit provides a more detailed list of indicators of neglect and is available to all staff

Physical indicators of neglect

- Constant hunger and stealing food
- Poor personal hygiene - unkempt, dirty or smelly
- Underweight
- Dress unsuitable for weather
- Poor state of clothing
- Illness or injury untreated

Behavioural indicators of neglect

- Constant tiredness
- Frequent absence from school or lateness
- Missing medical appointments
- Isolated among peers
- Frequently unsupervised
- Stealing or scavenging, especially food
- Destructive tendencies

Useful contacts

Key Personnel	Name (s)	Telephone No.
DSL	Helen Castle	02392 820548
Deputy DSL(s)	Emma Cornish Grace Brown Louise Hampton	02392 820548
School's named 'Prevent' lead	Helen Castle	02392 820548
Nominated Safeguarding Governor	Sara Denham	02392 820548
Chair of Governors	Sara Denham	02392 820548
Children's Reception Team		08456710271
Out of hours social care		0300 555 1373
Police		101 or in emergencies 999
Safeguarding advisors / Local Authority Designated Officer (LADOs)	Hayley Cowmeadow (LADO)	02392 882500
School nurse	Carly Harris	07768 513136
Children, Families and Education Deputy Director	Mike Stoneman	02392 841712
Early help manager	Duty officer	02392 688793