

# Child Protection Policy



## 1. Introduction

- 1.1 This document is a statement of the aims and strategies for the protection of pupils from harm within The Pegasus Academy Trust.
- 1.2 The schools, staff, parents and governors share a common responsibility to keep our children safe. This is emphasised in the Children's Act 1989 which states that the welfare of the child is paramount. The schools have a statutory responsibility in the area of child protection to recognise abuse and to refer concerns about abuse to the appropriate agency, i.e. social services, police or the NSPCC. We take seriously the responsibility to protect and safeguard the welfare of the children and young people entrusted to our care.
- 1.3 The **designated child protection officers** who have overall responsibility for child protection are the **Lynne Sampson (Executive Headteacher), Paul Robins, Nina Achenbach and Sharon Russell (Heads of School), Debbie Butler and Karen Hammond (Assistant Headteachers) and Emma Chang (Inclusion Manager)**. Any member of staff, governor or parent should contact them if there is a concern about a particular child. If the suspicions in any way involve the designated officer, then the report should be made in the first instance to Richard Hill, the Chair of the Board of Directors.

## 2. Our aims

- 2.1 This policy is supported by the aims of the Academy Trust but we strive particularly to provide:
  - a) An ethos in which all children feel safe, secure, valued and respected
  - b) A place where children can feel confident to talk openly and be sure of being listened to
  - c) Support for children, parents and staff in difficult situations relating to child protection.
- 2.2 We will tackle racial discrimination, promote equality of opportunity and promote good race relations between diverse ethnic groups.

## 3. Ways of achieving these aims

- 3.1 Children are taught to understand the need for 'being safe' and ways in which they can help to protect themselves.
- 3.2 The police schools' liaison officers visit the schools annually to talk to the children on such issues as 'Stranger Danger', etc.
- 3.3 The Trust's behaviour policy encourages positive reinforcement of good behaviour and defines clearly what is, and is not, acceptable behaviour.
- 3.4 The Trust follows a personal and social education programme that gives children the opportunity to consider and discuss many aspects of life, helping them to understand the dangers of abuse and how they can be protected. Opportunity is given for children to voice their feelings and understand that it is right to say 'No' in certain situations. Classes use 'circle time' (timetabled once a week) as a valuable method of discussing difficult issues amongst children.

- 3.5 During the school day the children are supervised at all times. Duty teachers and teaching assistants supervise them before school and during playtime, and lunchtime supervisors care for them during their lunch break with duty teachers as support. Each class teacher takes responsibility for their class at the end of the day until every child has left, or passes that responsibility onto another member of staff.
- 3.6 All visitors who come into one of the schools, including parents, must come through the main entrance and report to the office, signing their name in the visitors' book with their time of arrival and departure.
- 3.7 We pride ourselves on fostering a friendly, welcoming relationship with parents at our schools. The Heads of School have an 'open door' policy whereby parents may come to talk to them about their concerns when the need arises. If there is an issue concerning child protection, it is hoped they will feel free to talk openly to them or a member of the teaching staff.
- 3.8 All action taken is in line with the Area Child Protection Committee (ACPC) procedures, the LA procedures, where relevant, and the DfES Circular 10/95 guidelines.

#### **4. Signs and symptoms of abuse**

- 4.1 All staff in the Trust including non-teaching staff and voluntary helpers should be aware of the signs and symptoms of abuse. A referral should be made if there are signs that a) the child is likely to suffer significant harm in the future or b) the child may already have suffered abuse or neglect. If in doubt, raise the concern with one of the designated officers.
- 4.2 Definitions for referral:
  - a) Abuse and neglect
  - b) Physical abuse
  - c) Emotional abuse
  - d) Sexual abuse

Appendix A gives a clear definition of these areas.

- 4.3 The **Pan London Child Protection Procedures** is kept in each school and contains details of procedure and also outlines signs and symptoms of abuse.

#### **5. Procedures and record keeping**

- 5.1 Any member of staff receiving a disclosure of abuse from a child, or noticing signs or symptoms of possible abuse in a child, will make written notes as soon as possible (e.g. within an hour), writing down exactly what was said or seen, putting the scene into context, and giving the time and location. Dates and times of events should be recorded as accurately as possible, together with a note of when the record was made. The written note must then be given to one of the designated child protection officers who may ask the member of staff to complete a Child Protection Expression of Concern Form, a copy of which is attached to this policy.
- 5.2 All hand-written notes will be kept, even if they are subsequently typed up in a more formal report.
- 5.3 It is the responsibility of the designated child protection officer to decide when to make a referral to Social Services. Some concerns may need to be monitored over a period of time before a decision to be referred is made.

**5.4** If after consultation a member of staff feels that appropriate action is not being taken s/he may refer directly to Social Services, but must inform one of the Executive Headteachers that they are doing so.

**5.5** Any concerns that involve allegations against a member of staff should be referred immediately to one of the designated officers who will contact the LA to discuss and agree further action to be taken in respect of the child and the member of staff.

## **6. The child protection register**

**6.1** The designated officer will inform members of staff who have direct pastoral responsibility (i.e. class teachers) of children whose names are on the child protection register. These children must be monitored very carefully and the smallest concern should be recorded on an incident sheet and passed immediately to one of the designated officers.

**6.2** When a child who is on the register leaves one of the schools, the designated officer will inform the child's new school immediately and discuss with the child's key worker the transfer of any confidential information the school may hold.

## **7. The role of the Designated Officer**

**7.1** The designated officer shall ensure that s/he is fully conversant with the ACPC Child Protection Procedures and will co-ordinate action on child abuse within school, ensuring that staff are aware of their own responsibilities in relation to child protection.

**7.2** S/he is responsible for referring individual cases of suspected abuse to the social services department, and for liaising with the social services department and other agencies on these and other general issues relating to child protection.

**7.3** S/he has responsibility for organising training on all aspects of child protection within The Academy Trust and acts as a point of reference on child protection issues for other staff.

**7.4** S/he will ensure that The Academy Trust is represented at child protection conferences or, failing that, that a report is submitted to the conference from the school/s.

**7.5** S/he will also ensure that any recommendations made by the conference, which involve school staff, are carried out as agreed at the conference.

**7.6** Should the alleged perpetrator of abuse be a member of staff, the designated officer will consult in line with LA guidelines.

## **8. Code of practice**

**8.1** All Academy staff should take normal precautions not to place themselves in a vulnerable position with relation to child protection. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults. Physical restraint should only be used when a child is endangering him/herself or others and such events should be recorded and signed by a witness.

**8.2** Staff should never promise a child to keep certain information confidential. It must be explained that staff have certain duties to help keep that child safe, which may involve informing others.

**8.3** Appendix B "Guidance for Teachers: Handling disclosure of abuse" is useful guidance relating to what to do if you suspect abuse.

**9. Monitoring and review**

- 9.1** The procedures in this policy will be monitored in the light of any new information and guidance which becomes available. It was developed and approved by the governing bodies at Whitehorse Manor Infant and Junior Schools during the Spring Term 2002. Any subsequent changes will be reported annually to the local governing bodies, together with a report on training and on the number of incidents (without details or names).
- 9.2** The policy is reviewed annually at the start of each academic year by all staff within The Pegasus Academy Trust.

## **Appendix A – Working together to safeguard children**

### **A1 Abuse and Neglect**

**A1.1** Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting; by those known to them or, more rarely, by a stranger.

### **A2 Physical Abuse**

**A2.1** Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer feigns the symptoms of, or deliberately causes ill health to a child whom they are looking after. This situation is commonly described using terms such as factitious illness by proxy or Munchausen syndrome by proxy.

### **A3 Emotional Abuse**

**A3.1** Emotional abuse is the persistent emotional ill-treatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may feature age or developmentally inappropriate expectations being imposed on children. It may involve 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 ill-treatment of a child, though it may occur alone.

### **A4 Sexual Abuse**

**A4.1** Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, whether or not the child is aware of what is happening. The activities may involve physical contact, including penetrative (e.g. rape or buggery) or non-penetrative acts. They may include non-contact activities, including the extent of premeditation, the degree of threat and coercion, sadism, and bizarre or unusual elements. A child's ability to cope with the experience of sexual abuse, once recognised or disclosed, is strengthened by the support of a non-abusive adult carer who believes the child, helps the child understand the abuse, and is able to offer help and protection.

**A4.2** A proportion of adults who sexually abuse children have themselves been sexually abused as children. They may also have been exposed as children to domestic violence and discontinuity of care. However, it would be quite wrong to suggest that most children who are abused will inevitably go on to become abusers themselves.

### **A5 Neglect**

**A5.1** Severe neglect of young children is associated with major impairment of growth and intellectual development. Persistent neglect can lead to serious impairment of health and development, and long-term difficulties with social functioning, relationships and educational progress. Neglect can also result, in extreme cases, in death.

## **A6 The concept of significant harm**

**A6.1** The Children Act 1989 introduced the concept of significant harm as the threshold that justifies compulsory intervention in family life in the best interests of children. The local authority is under a duty to make enquiries, or cause enquiries to be made, where it has reasonable cause to suspect that a child is suffering, or likely to suffer significant harm (s.47). A court may only make a care order (committing the child to the care of the local authority) or supervision order (putting the child under the supervision of a social worker, or a probation officer) in respect of a child if it is satisfied that:

- a) The child is suffering, or is likely to suffer, significant harm; and
- b) That the harm or likelihood of harm is attributable to a lack of adequate parental care or control (s.31).

**A6.2** There are no absolute criteria on which to rely when judging what constitutes significant harm. Consideration of the severity of ill-treatment may include the degree and the extent of physical harm, the duration and frequency of abuse and neglect, and the extent of premeditation, degree of threat and coercion, sadism, and bizarre or unusual elements in child sexual abuse. Each of these elements has been associated with more severe effects on the child, and/or relatively greater difficulty in helping the child overcome the adverse impact of the ill-treatment. Sometimes, a single traumatic event may constitute significant harm, e.g. a violent assault, suffocation or poisoning. More often, significant harm is a compilation of significant events, both acute and long-standing, which interrupt, change or damage the child's physical and psychological development. Some children live in family and social circumstances where their health and development, are neglected. For them, it is the corrosiveness of long-term emotional, physical or sexual abuse that causes impairment to the extent of constituting significant harm. In each case, it is necessary to consider any ill-treatment alongside the family's strengths and supports.

**A6.3** To understand and establish significant harm, it is necessary to consider:

- a) The family context.
- b) The child's development within the context of their family and wider social and cultural environment.
- c) Any special needs, such as a medical condition, communication difficulty or disability that may affect the child's development and care within the family.

## **A7 "Good enough parenting"**

### **A7.1 Basic physical care**

Including adequate food and rest, protection from danger, etc.

### **A7.2 Affection**

Physical contact, cuddling, patience, allowing for annoying behaviour, approval, etc.

### **A7.3 Security**

Consistent patterns of care and daily routine, a predictable environment, etc.

### **A7.4 Stimulation of innate potential**

By praise, encouragement, responsiveness to child's questions and play, etc.

**A7.5 Guidance and control**

To teach adequate social behaviour, discipline within child's comprehension, positive role modelling, etc.

**A7.6 The development of 'responsibility'**

Age/developmentally appropriate self-care, decision making, allowing mistakes which the child may learn from, etc.

**A7.7 Age appropriate development of independence**

Providing increasing opportunities for the child to take steps out from the family and into society; the development of the child as a separate person.

## **Appendix B - Guidance for teachers: Handling disclosure of abuse**

### **B1 The perspective**

- B1.1** To state clearly at the outset, not all children are subjected to abuse. This guidance should be used to assist all staff in enabling children to keep themselves safe and to be more self confident, assertive and communicative about things that are hurtful to them or make them feel uncomfortable.
- a) Child abuse is a phenomenon that currently affects many children, irrespective of culture and economic group. It can take many forms and can have far-reaching affects on children's growth and development.
  - b) Teachers have a vital role to play in both the prevention and detection of abuse.
  - c) Teachers are in a unique position to observe children's behaviour over time, and they often develop close and trusting relationships with the pupils in their tutor groups.
  - d) Teachers may well be the first to suspect that something is amiss when an individual behaves atypically, withdraws from social contacts with others, shows anxiety or stress symptoms in school or appears unusually distressed, confused or disturbed.
  - e) The psychological symptoms of sexual or emotional abuse are more difficult to identify but no less real than obvious physical signs of abuse such as bruising or burn marks.
  - f) Teachers and other adults in school should have their suspicions aroused, for example, if a child suddenly starts to steal in school, conveys a knowledge or experience of abusive acts through language, drawings or play, or discloses information.
  - g) None of these things, by themselves, can be taken to mean that a child is definitely being abused, but they should signal to the teacher that further enquiries should be made. This is especially the case where there are reasons to believe that a family situation is vulnerable.
  - h) Teachers may also find themselves being sought out by a child, a parent or relative, neighbour or family friend, as the focus for disclosure of abuse.
  - i) It is absolutely critical that all teachers are aware of the procedures adopted by the school, key staff to be informed, and the LA's Child Protection Procedures when disclosures are made.

### **B2 Some dos and don'ts**

#### **B2.1 Do:**

- a) Reassure the child or adult that it is the right thing to do to tell a trusted person.
- b) Attempt to ascertain the facts (who, where, when).
- c) Tell the child that you believe them.
- d) Tell the child that you will need to involve others in ensuring that the child will, in the future, and explain who needs to be involved and why and what will happen next.
- e) Offer ongoing support.
- f) Choose a place to talk where you will not be interrupted. This allows you to give your undivided attention and confirms for the child that what they have to say is important.
- g) Follow the schools internal policy for Child Protection in terms of communication both within school and to other agencies. Follow the Area Child Protection Procedures and the Authority's Child Protection Procedures.
- h) Record facts objectively and accurately (time, date, signature).
- i) Look after yourself by ensuring that you can talk to someone about your feelings. Dealing with child abuse is stressful and distressing.



## **B2.2 Do not**

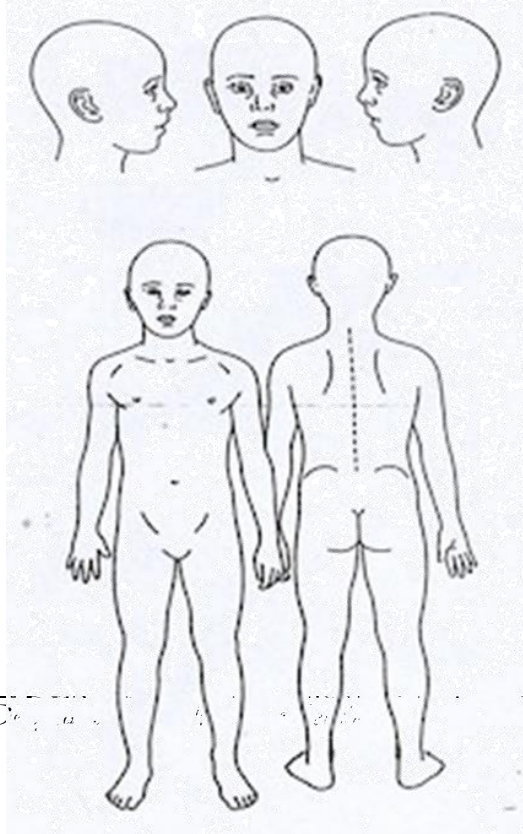
- a) Promise confidentiality that you cannot keep. The child has already experienced a breach of trust from the adult who abused them.
- b) Make false promises or reassurances to the child about what will happen next. Children cope best with honesty, and again should not be exposed to further breaches of trust.
- c) Interrupt or stop the child during a disclosure. Let them finish talking before you attempt to inform or involve others.
- d) Ask leading questions or sympathise inappropriately. Children should not be pressed to tell more than they choose or be questioned any more than is strictly necessary. It is for others to further the investigation.



## Child Protection Expression of Concern Form

Pupil's name:	
Year group/ D.O.B:	Date and time:
Reported by:	Role:
Disclosure made? <input type="checkbox"/> between: _____ and _____  Cause for concern? <input type="checkbox"/> Concern raised  by: _____	
Person(s) present <i>(including their role e.g. pupil, teacher, lunchtime supervisor etc.):</i>	
Circumstances:	
Please write a factual account of what has happened: <ul style="list-style-type: none"> <li>ensure account is <u>factual</u> and does not include any assumptions or opinions</li> <li>indicate any <u>exact</u> phrases spoken with speech marks</li> </ul>	
Print name _____ Sign _____ Date: _____  (complete skin map on next sheet if necessary)	

Use the skin map below (if necessary) to record any visible injuries to the child. You can make additional annotations if needed. *NOTE: under no circumstances must anyone ask the child to undress*



**Report/ Action** *(to be completed by a E...)*