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Safeguarding Child Protection Policy

(Updated March 2017)

Date ratified:	28 th March 2017
Governors/Committee Meeting:	Strategic Steering Committee
Signature of Chair:	
SLT Lead:	D Partington

Areas covered in this policy

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FIR VALE SCHOOL

Safeguarding Child Protection Policy

Summary of Key Points

1. The Designated Safeguarding Lead (DSL) is Dougal Partington and the Designated Safeguarding Deputy (DSD) is Daniel Ramsey. Please refer any concerns to them. They will liaise with Children's Services, Police, NSPCC and other parties as necessary. They will link with all appropriate parties to deal with matters arising.
2. All relevant documents are available in DRa's office.
3. Response to a concern that a child may be at risk: Discuss your concern with DPA/DRA or if not available member of SLT.
4. Response to an allegation of abuse:
 - Make time to talk to the child (inform SLT member if cover is required)
 - Take the child seriously
 - Do not ask leading questions
 - Do not promise not to tell or to keep secrets
 - Inform DPA/DRA using the proper reporting procedures (Behaviour watch- see appendix 1)

NB: If the allegation refers to a member of staff; please refer this directly to the Headteacher. In the event the allegation is against the Headteacher refer this directly to the Senior Deputy who will then refer to the Chair of Governors.

5. Recording information/reporting concerns:

When expressing a concern, or relaying an allegation, you must enter details using the Behaviour watch on line system.

6. Feedback

You will be given feedback relating to your concerns. It may be appropriate for you to be involved in any case conference which may follow. However, only the DSL/DSD should make the referral to Children's Services, and in general they will attend Case Conferences

7. Confidentiality

Confidentiality is vital at all stages. Please do not discuss child protection issues relating to specific children with anyone other than those named above, unless this has been agreed.

KEY CONTACTS WITHIN THE SCHOOL 2016-2017

DESIGNATED SAFEGUARDING LEAD:

NAME: DOUGAL PARTINGTON (DPA)
CONTACT DETAILS: OFFICE SITUATED NEXT TO THE LEARNING ZONE
EXTENSION NUMBER: 1141

DEPUTY DESIGNATED CHILD PROTECTION CO-ORDINATOR:

NAME: DANIEL RAMSEY (DRA)
CONTACT DETAILS: OFFICE SITUATED ON THE GROUND FLOOR OPPOSITE THE DINING ROOM
EXTENSION NUMBER: 1122

NOMINATED GOVERNOR FOR CHILD PROTECTION:

NAME: USMA SAEED
CONTACT DETAILS: usmasaeed@hotmail.co.uk

KEY CONTACTS WITHIN THE LOCAL AUTHORITY

The **Safeguarding Children Advisory Service** is able to provide advice and consultancy.

CONTACT DETAILS

The Advisory Service is available for Practitioners Monday to Friday, 9am to 5pm.

Telephone: 0114 205 3535

E-mail: safeguardingchildrenadvice@sheffield.gov.uk

REFERRAL TO CHILDREN SOCIAL CARE SERVICES

Where schools have **URGENT** and **IMMEDIATE** concerns for the safety and welfare of a child or young person during office hours telephone 0114 2039591

To make **URGENT** referrals **OUT OF OFFICE HOURS** telephone 0114 2734855

For all **NON-URGENT** referrals and enquiries telephone 0114 2734855

FIR VALE ACADEMY

Safeguarding (Child Protection) Policy

Fir Vale Academy is committed to providing a safe and secure environment for children, staff and visitors and promoting a climate where children and adults will feel confident about sharing any concerns that they may have about their own safety or the well-being of others.

The purpose of this policy is to ensure the children and young people who come into contact with Fir Vale Academy are safeguarded from harm or maltreatment. The policy provides staff with guidance on procedures that they should adopt in the event that they suspect a child or young person may be experiencing, or be at risk, of harm. Fir Vale Academy's safeguarding policy draws upon the principles of the DfE guidance: 'Keeping Children Safe in Education' (KCSIE), 2016, 'Working Together to Safeguard Children', 2015, and 'What to do if you're worried a child is being abused', 2015. Fir Vale Academy follows the procedures set out by Sheffield Safeguarding Children's Board (SSCB) in cases of suspected child abuse. The procedures can be found at www.safeguardingsheffieldchildren.org.uk.

The policy is applicable to all on and off-site activities undertaken by students whilst they are the responsibility of the School.

RESPONSIBILITIES AND IMMEDIATE ACTION

All adults working in this School (including visiting staff, volunteers and students on placement) are required to report instances of actual or suspected child abuse or neglect to the Designated Person with responsibility for child protection.

The Designated Safeguarding Lead (DSL) is: Dougal Partington (DPA)

The Designated Safeguarding Deputy (DSD) is: Daniel Ramsey (DRA)

The Designated Person is also the first point of contact for external agencies that are pursuing Child Protection investigations and co-ordinates the School's representation at CP conferences and Core Group meetings (including the submission of written reports for conferences). When an individual concern/incident is brought to the notice of the Designated Person, they will be responsible for deciding upon whether or not this should be reported as a safeguarding issue. Where there is any doubt as to the seriousness of this concern, or disagreement between the Designated Person and the member of staff reporting the concern, advice will be sought from the Deputy Designated Person, the LA's Lead Officer for Safeguarding.

Fir Vale Academy is committed to working with parents open and honestly. Any referral made to Children's Services or the Police will be shared with parents beforehand, unless the concern involves alleged or suspected sexual abuse or the Designated Person has reason to believe that informing the parent at this stage might compromise the safety of the child or a staff member. In circumstances where a child has an unexplained or suspicious injury that requires urgent medical attention, the CP referral process should not delay the administration of First Aid or emergency medical assistance. **If a student is thought to be at immediate risk because of parental violence, allegation of family violence within the household, alcohol / substance abuse, mental illness or threats to remove the child during the school day, for example, urgent Police intervention will be requested.**

Where a child sustains a physical injury or is distressed as a result of reported chastisement or alleges that they have been chastised by the use of an implement or substance, this will immediately be reported for Children's Services/ police investigation. Referrals to Children's Services are recorded within the child's safeguarding file.

All parents applying for places at this School will be informed of our safeguarding responsibilities and the existence of this policy. In situations where students sustain injury or are otherwise affected by an accident or incident whilst they are the responsibility of the School, parents will be notified of this as soon as possible.

Fir Vale School recognises the need to be alert to the risks posed by strangers or others (including the parents or carers of other students) who may wish to harm children and will take all reasonable steps to lessen such risks.

VULNERABLE STUDENTS

Particular vigilance will be exercised in respect of students who have a child protection plan and any incidents or concerns involving these children will be reported immediately to Children's Services. If the student in question is a Looked After Child, this will also be brought to the notice of the Designated Teacher with responsibility for children in Local Authority care (Dougal Partington, DPa).

If a student discloses that they have witnessed domestic violence or it is suspected that they may be living in a household that is affected by family violence, this will be referred to the Designated Person as a child protection issue. The School acknowledges the additional needs for support and protection of children who are vulnerable by virtue of disability, homelessness, refugee/asylum seeker status, the effects of substance abuse within the family, those who are young carers, mid-year admissions and students who are excluded from school.

We acknowledge that children who are affected by abuse or neglect may demonstrate their needs and distress through their words, actions, behaviour, demeanour, school work or other children. The School has a strong commitment to an anti-bullying policy and will consider all coercive acts and inappropriate child on child behaviour and sexual activity within a Child Protection context.

Where it comes to our notice that a child under the age of 13 is, or may be, sexually active, whether or not they are a student of this school, this will result in an immediate referral to Children's Services. In the case of a young person between the ages of 13 and 16, an individual risk assessment will be conducted in accordance with the South Yorkshire Safeguarding Board's Child Protection procedures. This will determine how and when information will be shared with parents and the investigating agencies.

TRAINING

Whole-School in-service training on safeguarding issues will be organised on at least a three yearly basis and the last CP training session for all staff took place during a staff training day in February 2015. All newly recruited staff (teaching and non-teaching) will undergo safeguarding training as part of their induction to the school within 4 weeks of start of employment. The Designated Person (and their Deputies) will attend the LA's dedicated induction course and then yearly refresher training.

RECRUITMENT AND VETTING

Fir Vale School is committed to the process of becoming a Safe Organisation. Safe recruitment processes are followed in line with 'Keeping Children Safe in Education', 2016. All staff recruited to the school will be subject to appropriate identity, qualification and health checks and the right to work in the UK. References will be verified and Disclosure and Barring Service checks (DBS) will be completed before staff are appointed and commence their duties. DBS checks on all staff will be updated on a 3-5 yearly cycle managed by the school. Key staff will undertake safer recruitment training to ensure that correct procedures and policy is followed. This School will only use employment agencies that can demonstrate that they positively vet and ensure that DBS checks are in place and are on the annual update service. Any Agency that supplies staff will report the misconduct of temporary or agency staff to the School. Staff joining the School on a permanent or temporary basis will be made aware of this policy.

The school keeps a single central record which is the register of all DBS checks.

VOLUNTEERS

In line with 'Keeping Children Safe in Education', 2016, any parent or other person/organisation engaged by the school to work in a voluntary capacity with students will be subjected to all reasonable vetting procedures and Disclosure and Barring Service Checks (DBS) if they carry out regulated activities in school. Where it is not appropriate to DBS check volunteers, they may be asked to provide references and will be asked to sign a declaration that they have not been convicted of any criminal or disciplinary offence which could preclude their employment as a worker with children. Volunteers will work under the direct supervision of an established staff member and will be subject to the same code of conduct as paid employees of the school. Volunteers will at no time be given responsibility for the personal care of students. Voluntary sector groups that operate within this school or provide off-site services for our students or use school facilities, will be expected to adhere to this policy or operate a policy that is compliant with the procedures adopted by Sheffield Safeguarding Children Board. Premises lettings are

subject to acceptance of this requirement. Visitors to the school will be asked for photographic ID and if they have a DBS in place. All visitors will be met and escorted by a member of staff and will not be allowed access to students without the presence of a member of school staff. Only visitors with photographic ID and those who have been DBS checked will have access to students unsupervised.

RESPONDING TO SUSPICION OR ALLEGATIONS OF ABUSE

There are clear procedures when responding to:

- suspicions of abuse
- allegations of abuse

In both situations it is vital to make a detailed record, including student name, form, any relevant dates and times, any other people who were present when the allegation was made, the actions taken by you, anything which you have been told and so on. The record should be dated and should include the time at which it was written. Records should be as factual as possible. Recording concerns are to be done using the Behaviour watch System (see Appendix 1).

Once completed using the Behaviour Watch System the account of suspicion or allegation will automatically be sent via real time notification to the Headteacher, Deputy Headteacher, DSL and DSD for action and inclusion in the child's safeguarding file. Copies should not be kept.

a) Suspicion of Abuse

You may develop a concern that a student may be suffering, or likely to suffer, harm. She/he may exhibit certain of the signs listed, or his/her behaviour may change with no satisfactory explanation. Share your concerns with DPA/DRA, who will discuss with you the appropriate course of action.

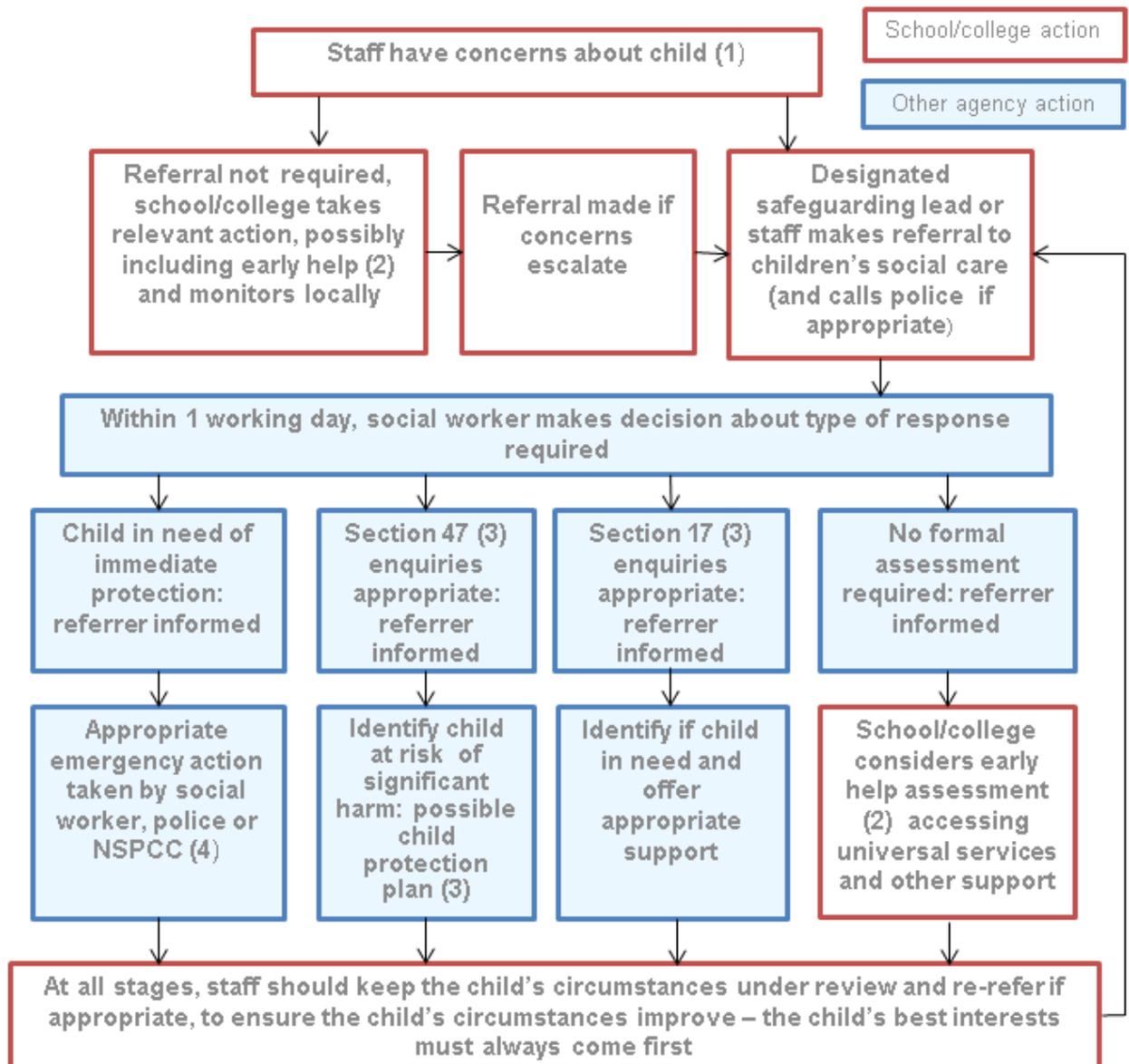
b) Allegation of Abuse

If a student tells you that she/he is suffering significant harm or his/her explanation of physical injury is that it has been caused by someone else this is an allegation of abuse. Any allegation will need to be investigated by Children Service's or NSPCC and/or the police.

What to do:

1. Take the child seriously.
2. Make time straight away for the child to talk to you in private. If this presents difficulties over cover for a class, inform any member of SLT.
3. When talking with the child:
 - stay calm and reassuring
 - explain that you cannot promise to keep what the child tells you a secret
 - tell the child you might need to get someone else to help
 - allow the child time and space to talk
 - listen to, and take seriously what the child tells you. Tell them that whatever the circumstances, they are not to blame.
 - Do not interrogate the child, but check out in a non-leading way that you are receiving a correct message.
 - Reassure the child that they have done the right thing in telling someone
 - Ask the child if they have told anyone else
 - Do not make any promises to the child
4. Inform DSL or DSD (DPA or DRA)
5. Write down everything the child told you, date and time the account
6. As the person the child has entrusted in disclosing the information it may be appropriate for you to continue to support the child, for example by being involved with any case conference that may follow. You will be kept informed as to the outcome of any disclosure
7. Confidentiality is vital. The DSL and Head will decide which other staff, if any, needs to know of the case.
8. Do not contact anyone with parental responsibility until agreed by the investigating agency.

Actions where there are concerns about a child



DEFINITION OF ABUSE (taken from Working Together to Safeguard Children, 2015)

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. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). 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.

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.

Emotional Abuse

The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

It may involve conveying to 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 cyber bullying), 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, though it may occur alone.

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.

Recognising Signs of Abuse

It is important to note that these lists are possible indicators of abuse. Many of these signs could have other explanations.

1. Signs of Physical Abuse

- injuries (bruises, welts, cuts, burns, bite marks, fractures, etc.) that are not consistent with the explanation offered (e.g. extensive bruising to one area)
- presence of several injuries (3+) that are in various stages of healing
- repeated injuries over a period of time
- injuries that form a shape or pattern that may look like the object used to make the injury (e.g. buckle, hand, iron, teeth, cigarette burns)
- facial injuries in infants and preschool children (e.g. cuts, bruises, sores, etc.)
- injuries not consistent with the child's age and development
- bald patches on child's head where hair may have been torn out
- repeated poisonings and/or accidents

2. Signs of Emotional Abuse

- bed-wetting or bed soiling that has no medical cause
- frequent psychosomatic complaints, headaches, nausea, abdominal pains
- admission of punishment which appears excessive
- over reaction to mistakes
- has deprived physical living conditions compared with other children in the family
- dressed differently from other children in the family
- fear of new situations
- self harm
- fear of parents being contacted
- continual self depreciation
- running away
- alcohol or substance misuse

3. Signs of Neglect

- abandonment
- lack of shelter
- unattended medical and dental needs
- consistent lack of supervision
- ingestion of cleaning fluids, medicines, etc.
- consistent hunger
- nutritional deficiencies
- inappropriate dress for weather conditions
- poor hygiene

- persistent (untreated) conditions (e.g. scabies, head lice, diaper rash, or other skin disorders)
- developmental delays (e.g. language, weight)
- irregular or nonattendance at school or child care
- not registered in school
- not attending school

4. Signs of Sexual Abuse

- fatigue due to sleep disturbances
- sudden weight change
- cuts or sores made by the child on the arm (self-mutilation)
- recurring physical ailments
- difficulty in walking or sitting
- unusual or excessive itching in the genital or anal area due to infection(s)
- torn, stained or bloody underwear
- sexually transmitted disease(s)
- pregnancy
- injuries to the mouth, genital or anal areas (e.g. bruising, swelling, sores, infection)

Child Sexual Exploitation (CSE)

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

This definition of CSE is defined in the Department for Education Child Sexual Exploitation: definition and guide for practitioners February 2017.

CSE Online

When sexual exploitation happens online, young people may be persuaded, or forced, to:

- send or post sexually explicit images of themselves
- take part in sexual activities via a webcam or smartphone
- have sexual conversations by text or online.

Abusers may threaten to send images, video or copies of conversations to the young person's friends and family unless they take part in other sexual activity.

Images or videos may continue to be shared long after the sexual abuse has stopped.

Grooming is when someone builds an emotional connection with a child to gain their trust for the purposes of sexual abuse or exploitation. Children and young people can be groomed online or in the real world, by a stranger or by someone they know - for example a family member, friend or professional. Groomers may be male or female. They could be any age. Many children and young people don't understand that they have been groomed, or that what has happened is abuse.

Potential indicators of CSE include:

- Acquisition of money, clothes, mobile phones etc without plausible explanation
- Gang-association and/or isolation from peers/social networks
- Exclusion or unexplained absences from school, college or work
- Leaving home/care without explanation and persistently going missing or returning late
- Excessive receipt of texts/phone calls
- Returning home under the influence of drugs/alcohol
- Inappropriate sexualised behaviour for age/sexually transmitted infections
- Evidence of/suspicions of physical or sexual assault

- Relationships with controlling or significantly older individuals or groups
- Multiple callers (unknown adults or peers)
- Frequenting areas known for sex work
- Concerning use of internet or other social media
- Increasing secretiveness around behaviours
- Self-harm or significant changes in emotional well-being

Forced Marriage/ Honour Based Violence (FM/ HBV)

The CPS, ACPO and support groups have a common definition of HBV:

"'Honour based violence' is a crime or incident which has or may have been committed to protect or defend the honour of the family and/or community."

A Forced Marriage (FM) is a marriage conducted without the valid consent of one or both parties and where duress is a factor. FM is now a specific offence under s121 of the Anti-Social Behaviour, Crime and Policing Act 2014 which came into force on 16 June 2014.

Signs that a child may be at risk of being forced into marriage may include:

- absence and persistent absence
- request for extended leave of absence and failure to return from visits to county of origin
- surveillance by siblings or cousins
- fear about forthcoming school holidays
- decline in behaviour, engagement, performance or punctuality
- poor exam results
- being withdrawn from school by those with parental responsibility and not being provided with suitable education at home
- not allowed to attend extra-curricular activities
- sudden announcement of engagement to a stranger
- prevented from going on to further/ higher education

Sexting

The UK Council for Child Internet Safety (UKCCIS) Education Group has produced advice for schools and colleges on responding to incidents of 'sexting.' The advice aims to support them in tackling the range of issues which these incidents present including responding to disclosures, handling devices and imagery, risk assessing situations and involving other agencies. The advice also contains information about preventative education, working with parents and reporting imagery to providers. This advice is non-statutory and should be read alongside the Department for Education's Keeping Children Safe in Education statutory guidance and non-statutory Searching, Screening and Confiscation advice for schools.

More information can be found at: <https://www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis>

Female Genital Mutilation (FGM)

Female genital mutilation refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. The practice is illegal in the UK.

FGM is very harmful. It causes long-term mental and physical suffering, difficulty in giving birth, infertility and even death. It has been estimated that over 20,000 girls under the age of 15 are at risk of female genital mutilation (FGM) in the UK each year, and that 66,000 women in the UK are living with the consequences of FGM. However, the true extent is unknown, due to the "hidden" nature of the crime. The girls may be taken to their countries of origin so that FGM can be carried out during the summer holidays, allowing them time to "heal" before they return to school. There are also worries that some girls may have FGM performed in the UK.

a) Principles

The following principles have been adopted by Fir Vale School in relation to identifying and responding to students at risk of, or who have experienced, FGM, and their parent(s):

- The safety and welfare of the student is paramount;
- All agencies act in the interests of the rights of the child - UN Convention (1989);
- FGM is illegal in the UK;
- FGM is not a matter that can be left to be decided by personal preference - it is an extremely harmful practice. Practitioners should not let fears of being branded 'racist' or 'discriminatory' weaken the protection required by vulnerable students;
- An accessible, acceptable and sensitive approach must underpin interventions;
- It is acknowledged that some FGM-practising families do not see it as an act of abuse. However, FGM has severe significant physical and mental health consequences both in the short and long term, and must not be excused, accepted or condoned;
- As an often embedded 'cultural practice', engagement with families and communities will be required to achieve a long-term abandonment and eradication of FGM;
- All decisions or plans should be based on good quality assessments and be sensitive to the issues of race, culture, gender, religion and sexuality; and should avoid stigmatising the student affected, and the practicing community, as far as possible given the other principles above.

There are no health benefits to FGM. Removing and damaging healthy and normal female genital tissue interferes with the natural functions of girls' and women's bodies.

Immediate effects

- severe pain
- shock
- bleeding
- wound infections, including tetanus and gangrene, as well as blood-borne viruses such as HIV, hepatitis B and hepatitis C
- inability to urinate
- injury to vulval tissues surrounding the entrance to the vagina
- damage to other organs nearby, such as the urethra (where urine passes) and the bowel

FGM can sometimes cause death.

Long-term consequences

- chronic vaginal and pelvic infections
- abnormal periods
- difficulty passing urine, and persistent urine infections
- kidney impairment and possible kidney failure
- damage to the reproductive system, including infertility
- cysts and the formation of scar tissue
- complications in pregnancy and newborn deaths
- pain during sex and lack of pleasurable sensation
- psychological damage, including low libido, depression and anxiety (see below)
- flashbacks during pregnancy and childbirth
- the need for later surgery to open the lower vagina for sexual intercourse and childbirth

Psychological and mental health problems

Case histories and personal accounts taken from women indicate that FGM is an extremely traumatic experience for girls and women, which stays with them for the rest of their lives.

Young women receiving psychological counselling in the UK report feelings of betrayal by parents, as well as regret and anger.

Justifications of FGM:

- Custom and tradition;
- Family honour;

- Hygiene and cleanliness;
- Preservation of virginity/chastity;
- Social acceptance especially for marriage;
- The mistaken belief that it is a religious requirement;
- A sense of belonging to the group and conversely the fear of social exclusion.

Signs and Indicators

Some indicators that Female Genital Mutilation may be about to or has already taken place:

If a family originates from a country that is known to practice Female Genital Mutilation and:

- A conversation with a student may refer to Female Genital Mutilation i.e. she may express anxiety about a “special procedure” or event that is to take place;
- A prolonged absence from school and a noticeable change in the child’s behaviour on their return, including a reluctance or inability to take part in physical activity;
- A prolonged family trip to the country of origin;
- A student may spend long periods of time away from class for toilet breaks during the day - perhaps indicating bladder or menstrual problems. They may have difficulty walking, sitting or standing.
- A midwife/obstetrician/gynaecologist/general practitioner may become aware that Female Genital Mutilation has occurred when treating a female patient and may pass that information on to school. This should trigger concern for other females in the household.
- In addition to a family history of Female Genital Mutilation and the position of the family and the level of integration within UK society - it is believed that communities less integrated into British society are more likely to carry out FGM - any girl withdrawn from Personal, Social and Health Education may be at risk as a result of her parents wishing to keep her uninformed about her body and rights.

Referral and Assessment

Staff who are concerned a student may have been or are about to be subject to FGM must complete a Safeguarding/Child Protection Concern immediately, using the same process as a student with an non-accidental injury.

Staff may use the ‘on-call’ system to relieve them of their classroom duties and report immediately to the DSL Dougal Partington or DSD Daniel Ramsey.

The DSL/ DSD will then continue with the investigation by speaking to the student, relevant safeguarding agencies and possibly the family.

When investigating concerns regarding FGM, the DSL and DSD will act within the following principles and those listed under section 2:

- The student may wish to be interviewed by a practitioner of the same gender;
- They may not want to be seen by a practitioner from their own community;
- Any interpreter should be appropriately trained in relation to FGM and should not be a family member, not be known to the individual, and not be an individual with influence in the individual’s community. This is because the student may feel embarrassed to discuss sensitive issues in front of such people and there is a risk that personal information may be passed on to others in their community and place them in danger;
- A swift communication with the Safeguarding Board will be established to seek clarity and advice where needed and to share information regarding FGM within a speedy timeframe, to ensure optimum safety of the student;
- Fir Vale Academy will work with all relevant agencies to ensure any decisions and plans made are in the best interests of the student and ensure their safety;
- All decisions or plans should be based on good quality assessments and be sensitive to the issues of race, culture, gender, religion and sexuality; and should avoid stigmatising the student affected, and the practicing community, as far as possible given the other principles above.

NB These lists are possible indicators of abuse. Many of these signs could have other explanations.

Taken from "Kidscape" by Michelle Elliott.

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon **teachers** along with regulated health and social care professionals in England and Wales, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions.

Teachers **must** personally report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has a good reason not to, they should also still consider and discuss any such case with the school or college's designated safeguarding lead and involve children's social care as appropriate.

Understanding and Recognising Risks and Vulnerabilities of Radicalisation

Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by many means.

These can include through the influence of family members or friends and/or direct contact with extremist groups and organisations or, increasingly, through the internet. This can put a young person at risk of being drawn into criminal activity and has the potential to cause Significant Harm. The risk of radicalisation is the product of a number of factors and identifying this risk requires that staff exercise their professional judgement, seeking further advice as necessary. It may be combined with other vulnerabilities or may be the only risk identified.

Potential indicators include:

- Use of inappropriate language;
- Possession of violent extremist literature;
- Behavioural changes;
- The expression of extremist views;
- Advocating violent actions and means;
- Association with known extremists;
- Seeking to recruit others to an extremist ideology.

Any concerns regarding radicalisation will be reported to the DSL or DSD who will then make a decision as to next steps. This may involve contacting parents, Children's Services or the Police. If in doubt, concerns will be discussed with the Prevent Engagement Officers (0114 296 4275).

Expert and professional organisations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example, information for schools and colleges can be found on the TES, MindEd and the NSPCC websites.

CHILDREN MISSING FROM EDUCATION

A child is considered to be missing from education if they are of compulsory school age (5-16) and:

- Are not on a school roll
- Are not receiving suitable education otherwise than at a school
- Have been out of educational provision for a substantial period of time

Some circumstances can leave children at more risk of not receiving education, including:

- Young people involved in crime
- Children living in women's refuges
- Children of homeless families
- Young runaways
- Children who are asylum seekers or whose family are refugees
- Children in new immigrant families, who may not have a fixed address
- Teenage mothers
- Children permanently excluded from school, particularly those excluded illegally, e.g. for problematic behaviour or offending

Not attending school will potentially increase a student's exposure to crime, substance misuse, pregnancy and mental health problems.

The 'Children Missing from Education Team', CYPS will:

- ✓ Identify, monitor and locate all school aged children who are not on a school roll
- ✓ Link with other agencies to ensure that all children missing from education are promptly identified & re-engaged with educational provision
- ✓ Implement procedures to locate students who leave the city with an unknown destination

Children Missing Education Statutory Guidance for Local Authorities, September 2016 outlines school responsibilities as:

- Schools must enter pupils on the admission register at the beginning of the first day on which the school has agreed, or been notified, that the pupil will attend the school. If a pupil fails to attend on the agreed or notified date, the school should undertake reasonable enquiries to establish the child's whereabouts and consider notifying the local authority at the earliest opportunity.
- Schools must monitor pupils' attendance through their daily register. Schools should agree with their local authority the intervals at which they will inform local authorities of the details of pupils who fail to attend regularly, or have missed ten school days or more without permission. Schools should monitor attendance closely and address poor or irregular attendance. It is important that pupils' poor attendance is referred to the local authority. Where a pupil has not returned to school for ten days after an authorised absence or is absent from school without authorisation for twenty consecutive school days, the pupil can be removed from the admission register when the school and the local authority have failed, after jointly making reasonable enquiries, to establish the whereabouts of the child. This only applies if the school does not have reasonable grounds to believe that the pupil is unable to attend because of sickness or unavoidable cause.
- Schools must also arrange full-time education for excluded pupils from the sixth school day of a fixed period exclusion. This information can be found in the Exclusion from maintained schools, academies and pupil referral units in England statutory guidance.
- Maintained schools have a safeguarding duty¹⁸ in respect of their pupils, and as part of this should investigate any unexplained absences. Academies and independent schools have a similar safeguarding duty¹⁹ for their pupils. Further information about schools' safeguarding responsibilities can be found in the Keeping children safe in education statutory guidance.

Ofsted recommends that all schools should:

- Keep travellers on role at their 'base school'
- Follow agreed procedures for exclusions
- Maintain communication with the Local Authority about absence, exclusion & taking pupils off role
- Have safeguarding policies & processes that give due weight to children and young people missing from education and their potential vulnerability
- DO NOT advise pupils to stay home without an official exclusion as it is unlawful & places the pupil at risk

When the school is aware/suspects that a child may be missing from education **WE CONTACT**

Children Missing from Education Team:

Floor 3, Howden House, 1 Union Street
Sheffield, S1 2SH

Tel: 0114 2736462; Fax: 0114 2735470

Email: ed-missingchildren@sheffield.gov.uk

Further information:

WWW.SHEFFIELD.GOV.UK/EDUCATION/INFORMATION-FOR-PARENTSCARERS/AT-SCHOOL/ATTENDANCE.HTML

EDUCATIONAL VISITS

Adults should take care supervising students on trips & outings, where the setting is less formal than the usual workplace. Adults are in a position of trust and their behaviour should remain professional at all times.

The owners/managers of establishments used for visits from educational settings are responsible for ensuring that:

- They comply with health & safety regulations
- The setting & equipment is fit for purpose
- Their staff are trained in safeguarding and have appropriate DBS checks completed

Prior to booking any visit or trip, consider issues around staff and volunteer:

- Suitability
- Having received appropriate & up to date safeguarding training
- Understanding of 'abuse of trust'
- Having up to date DBS checks

The Educational Visits Coordinator must be informed & obtain permission from:

- The Governing Body in principle, including assurance about risk assessments
- SLT for approval for each trip to go ahead

The school should also ensure/consider:

- Specific safeguarding issues relating to a child/young person included on the trip
- Security and surveillance is appropriate
- Separate bedrooms for boys and girls
- Location of staff bedrooms allow ensure adequate supervision of children
- Staff to child ratios and gender issues
- Fire practice, health & safety issues and risk assessment of the visit including travel
- Intimate care & personal hygiene issues
- First aid person needed on every trip

Day Visits:

- If the venue is a large public attraction with no specialist activities undertake a pre-visit to gauge the suitability of the venue before making any arrangements
- If the venue has an element of adventure use the Local Authority 'Provider Form' (on the Thornbridge website) to seek assurances from the owner/manager
- A Group Risk Assessment must be carried out by you for the children visiting from your setting

Overnight stays:

- Separate bedrooms for boys and girls
- Location of staff bedrooms to ensure adequate supervision

For all trips, permission is required from a person with parental responsibility.

INFORMATION SHARING AND CONFIDENTIALITY

Information sharing is essential to enable early intervention & preventative work, safeguarding & promoting welfare & for public protection.

People need to be confident that their personal information is kept safe and secure and that practitioners maintain privacy, whilst sharing information appropriately.

Practitioners need to be clear about when they can share information lawfully, especially in early intervention and preventative work where information sharing decisions may be less clear than in safeguarding or child protection situations.

Education settings hold a great deal of information about children, young people and their families, some of which is very personal/private. They should inform students and their families, through a leaflet or their prospectus, about how they store and use information in all systems they use, e.g. SIMS, EMS.

Common sense decision-making:

- Share information at an early stage as part of preventative or early intervention work
- Understand what:
 - Is and isn't confidential
 - Can be shared 'in the public interest'
 - Should be recorded and where
- **Always** share information about possible or actual significant harm with the Police or Children's Social Care, and if you aren't sure, ring and ask for advice

Basic principles:

- Respect confidentiality and privacy but don't use it as an excuse not to take action
- Reassure young people and their families about why you want to share information if they are concerned
- Do not promise to keep any information confidential or secret
- If in doubt seek advice from Children's Social Care, the police or the:
- **Sheffield Safeguarding Children Advisory Service, Mon-Fri, 9-5pm, tel 2053535**
- The DSL/DSD must be made aware of all child protection concerns immediately
- Follow the **7 Golden Rules for information sharing** below

1. Remember that **the Data Protection Act** is not a barrier to sharing information but provides a framework to ensure that personal information about living persons is shared appropriately.
2. **Be open and honest** with the person (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice** if you are in any doubt, without disclosing the identity of the person where possible.
4. **Share with consent where appropriate** and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, that lack of consent can be overridden in the public interest. You will need to base your judgement on the facts of the case.
5. **Consider safety and well-being:** Base your information sharing decisions on considerations of the safety and well-being of the person and others who may be affected by their actions.
6. **Necessary, proportionate, relevant, accurate, timely and secure:** Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those people who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
7. **Keep a record** of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose.

Reproduced from *Information Sharing: Guidance for practitioners and managers* (DCSF 2008, p.11)

STAFF CODE OF CONDUCT

All staff (paid and voluntary) are expected to adhere to a code of conduct in respect of their contact with students and their families. Children will be treated with respect and dignity and no punishment, detention, restraint, sanctions or rewards are allowed outside of those detailed in the School's Behaviour Management Policy. Whilst it would be unrealistic and undesirable to preclude all physical contact between adults and children, staff are expected to exercise caution and avoid placing themselves in a position where their actions might be open to criticism or misinterpretation. Where incidents occur which might otherwise be mis-construed, or in the exceptional circumstances where it becomes necessary to physically restrain a student for their own protection or others' safety, this will be appropriately recorded and reported to the Head teacher and parents. Any physical restraint used will comply with DCSF and LA guidance.

Except in cases of emergency, First Aid will only be administered by qualified First Aiders. If it is necessary for the child to remove clothing for First Aid treatment, there will, wherever possible, be another adult present. If a child needs help with toileting, or washing after soiling themselves, another adult should be present or within earshot. If a male member of staff is providing any form of intimate care, a female colleague will be present. All First Aid treatment and non-routine changing or personal care will be recorded and shared with parents/carers at the earliest opportunity.

For their own safety and protection, staff should exercise caution in situations where they are alone with students. Other than in formal teaching situations; musical instrument tuition, for example, the door to the room in which the teaching, counselling or meeting is taking place should be left open. Where this is not practical because of the need for confidentiality, another member of staff will be asked to maintain a presence nearby and a record will be kept of the circumstances of the meeting. Where possible, rooms used for the teaching or counselling of students will have clear and unobstructed glass panels in the doors.

School staff should also be alert to the possible risks that might arise from social contact with students outside of the School. Home visits to students should only take place with the knowledge and approval of the Head teacher. Visits/telephone calls by students to the homes of staff members should only occur in exceptional circumstances and with the prior knowledge and approval of the Head teacher. Any unplanned contact of this nature or suspected infatuations or "crushes" will be reported to the Head teacher. Staff will not disclose their personal telephone numbers and email addresses to students or parents.

COMPLAINTS/ALLEGATIONS MADE AGAINST STAFF

Fir Vale School takes seriously all complaints made against members of staff. Procedures are in place for students, parents and staff to share any concern that they may have about the actions of any member staff or volunteer. All such complaints will be brought immediately to the attention of the Head teacher (or Deputy Head teacher), in order that they may activate the appropriate procedures. If the allegation concerns alleged minor physical mishandling or verbal abuse, this will normally be dealt with under the school's Complaints Procedure.

If the allegation is of physical assault, the Head teacher will take action in accordance with school's complaints procedure, unless one of the following criteria applies:

- The allegation is one of actual bodily harm – i.e. an injury has necessitated first aid or medical treatment.
- There is reason to suspect parental instigation or collusion.
- The allegation has been reported to the Police or Social Services by the child or parent.
- The child is Looked After in Local Authority Care.
- The child has a Child Protection Plan.
- The child has a disability or EHC plan.
- The member of staff concerned has been subject to previous complaints.
- The allegation is one of sexual abuse.

In these cases, advice will be sought from the LA Lead Officer (or the Social Services Duty Manager) with a view to a Strategy Meeting or Discussion being held in accordance with SSCB procedures. This process will agree upon the appropriate course of action and the time-scale for investigations.

In considering whether or not a referral to Social Services is appropriate, the Head teacher may seek advice from the Chair of Governors, the LA's Lead Officer and human resources advisers. Parents should also be advised of their independent right to make a formal complaint to the Police. Temporary staff will be subject to the same procedures.

If the complaint concerns alleged abuse by the Head teacher, this should be brought to the attention of the Deputy Designated Person, who will inform the Chair of Governors and the LA's Lead Officer.

The Chair of Governors is: Usma Saeed
The Vice-chair is: Richard Edwards

The LA's Designated Officer is: Steve Hill
Contact details: 0114 205 3535

RECORDS

Brief and accurate written notes will be kept of all incidents and child protection or child in need concerns relating to individual students. This information may be shared with other agencies as appropriate. Parental and child consent will be sought before sending referrals to Children's Social Care. If consent is

withheld, consideration will be given to the potential impact of this for the child. The School will follow LA and DCSF guidance on information sharing and confidentiality.

Child protection records are not open to students or parents. CP records are securely kept by the Designated Person, separately from educational records, and can only be accessed by the Designated Person, their Deputy and the Headteacher of the School.

If a student is withdrawn from the School having not reached the normal date of transfer; due to a family move or any other reason, all efforts will be made to identify any new address and the School to which they are being admitted and to ensure that their educational records are sent without delay to that School. If the parent/carer fails to provide this information, an urgent referral will be made to the Children Missing from Education Team in order that they might make further enquiries. **A child's name will only be removed from the School's Admissions Register in accordance with LA procedures.**

The content of CP Conference or Review reports prepared by the School will be shared with the parents/carer in advance of the meeting.

The school will require documentary proof as to the identity of students presented for admission. If there is any doubt as to the identity of a student, advice will be sought from the LA and other statutory agencies, as appropriate. We will maintain accurate records of those with Parental Responsibility and emergency contacts. Students will only be released to the care of those with Parental Responsibility or someone acting with their written consent.

SAFETY AND SECURITY IN THE SCHOOL

No internal doors to classrooms will be locked whilst students are present in these areas.

Doors that are secured physically or by constant staff supervision or video surveillance will control entry to school premises. Authorised visitors to the school will be logged into and out of the premises and a system is in place to ensure these visitors wear their identity badges or be issued with school visitor badges. Unidentified visitors will be challenged by staff or reported to the Head teacher or School office.

The presence of suspicious strangers seen loitering near the school or approaching students will be reported to the Police and LA with a view to alerting other local schools through appropriate systems.

PHOTOGRAPHING CHILDREN

Parents, carers or relatives may only take still or video photographic images of students in school or on school organised activities with the prior consent of the school and then only in designated areas. If parents do not wish their children to be photographed or filmed and express this view in writing, their rights will be respected. Staff are not permitted to take photos or videos of students on their personal mobile phones, computers, laptops or ipads.

CURRICULUM

Fir Vale School acknowledges the important role that the curriculum can play in the prevention of abuse and in the preparation of our students for the responsibilities of adult life and citizenship. It is expected that all curriculum leaders will consider the opportunities that exist in their area of responsibility for addressing personal safety issues. As appropriate, the PSHE curriculum will be used to build resilience, help students to keep safe and to know how to ask for help if their safety is threatened. As part of developing a healthy, safer lifestyle, students will be taught, for example:

- to recognise and manage risks in different situations and then decide how to behave responsibly;
- to judge what kinds of physical contact are acceptable and unacceptable;
- to recognise when pressure from others (including people they know) threatens their personal safety and well-being; including knowing when and where to get help;
- to use assertiveness techniques to resist unhelpful pressure.

All computer equipment and Internet access within the School will be subject to appropriate “parental controls” and Internet safety rules.

WORKING IN PARTNERSHIP WITH PARENTS:

It is our policy to work in partnership with parents or carers to secure the best outcomes for our children. We will therefore communicate as clearly as possible about the aims of this School:

- We will try to use clear statements in our brochures and correspondence.
- We will involve parents and students in the development of Codes of Conduct and Equalities and Behaviour Management policies.
- We will liaise with agencies in the statutory, voluntary and community sectors that are active in supporting families.
- We will be aware that we have parents/carers who do not have English as their first language.
- We will make available to parents our safeguarding policy
- We will keep parents informed as and when appropriate.

FAMILY COMMON ASSESSMENT FRAMEWORK

Relevant staff will use the FCAF as a tool for early intervention to help assess needs at an earlier stage and then work with the family, alongside other agencies to meet them.

The framework is based on the requirement to gain a holistic understanding of the child/young person by assessing:

- the child's needs
- parental capacity to meet those needs
- the impact of wider family and environmental factors on the child and parenting capacity.

The FCAF is NOT for when there is concern that a child may have been harmed or at risk of significant harm. Follow procedures as discussed earlier in this policy.

All relevant staff will:

- Complete a FCAF whenever appropriate to do so i.e. poor attendance, at risk of permanent exclusion, poor health, involvement in or risk of offending, depression, housing issues, substance misuse etc.

- Work with children and parents to agree how information will be used and shared.
- On completion of a FCAF determine and deliver interventions to meet identified needs. To do this, the member of staff in question may need to share the FCAF with other agencies.

All FCAFs must be shared and discussed with DPA/DRA and will need to be kept centrally in DRA'S office.

COMPLAINTS & MONITORING

All complaints arising from the operation of this policy will be considered under the School's complaint procedure, with reference to the LA's Lead Officer as necessary.

The Governing Body of the School will consider safeguarding issues and their implications for this policy on an annual basis. For this item, the Head teacher will report upon the Safeguarding Annual Report, training undertaken by School staff and Governors and any changes in legislation or national/local guidance.

Otherwise, this policy will be reviewed and updated in September 2017.

FIR VALE SCHOOL SAFEGUARDING POLICY

Signed to acknowledge governing body acceptance and adoption

_____ **Chair of Governors** _____ **Date**

_____ **Head teacher** _____ **Date**

_____ **Designated Person** _____ **Date**

RELATED POLICIES

- Recruitment Policy
- Health & Safety including safe handling of medicines
- Equality Policy
- Behaviour Policy
- E-Safety Policy
- Anti-Bullying Policy
- Work Related working
- PSHE Policy
- Staff Code of Conduct
- Whistle Blowing procedure
- Positive Handling Policy
- Home Visits Policy

Safeguarding Form

Select student

Completing New Safeguarding Form generates emails to the Headteacher, Designated Safeguarding Lead and Designated Safeguarding Deputy.