

**Hospital and Home Learning
Centre
Policy for
Safeguarding and
Child Protection**

Reviewed by Chair of Governors, Judith Ward on 23/03/2017

HHE Learning Centre recognises its responsibilities for safeguarding children and protecting them from harm.

Safeguarding is what we do for all children, and child protection is what we do for children who have been harmed or are at significant risk of being harmed.

This Policy will be reviewed by the Management Committee on an annual basis or more frequently if required. The Head Teacher will make interim amendments highlighted in yellow to update the policy following any statutory guidance or operational need.

All parents/carers are made aware of HHE Learning Centre’s responsibilities with regard to child protection procedures and how we will safeguard and promote the welfare of their children through the publication of HHE Learning Centre’s safeguarding and child protection policy on the school web-site.

Date of last review: *March 2017*

Date of next review: *March 2018*

Safeguarding and Child Protection is everyone’s responsibility, please pass any concerns to the Designated Safeguarding Lead or Deputy Leads verbally in the first instant and then in writing (should they be unavailable please report your concerns to one of the Additional Designated Leads). Safeguarding concerns about the Head Teacher should be passed on to the Designated Management Committee Member.

If you think a child is in immediate danger Don't delay – call the police on 999, or call NSPCC 0808 800 5000.

Role	Name	Contact Details
Designated Management Committee Member	Judith Ward (Agreed at Governors meeting on 13/11/16)	0115 9153862
	Matt Day (Agreed at Governors meeting on 13/11/16)	0115 9153862
Designated Senior Lead	David Blackley	0115 9153862
Designated Deputy Lead (Thorneywood and Home)	Linda Chambers	0115 9153862
Designated Deputy Lead (CHS)	Eleanor Tweedie	0115 9709753
Additional Designated Leads	Carol Lindsay (Thorneywood)	0115 9153862
	Arti Pearson (Thorneywood)	0115 9153862
	Susie Pace (CHS)	0115 9709753
	Craig Matthews (CHS)	0115 9709753
LA Child Protection Contact/LADO	Gillian Quincey	0115 8764744

1.0 Introduction

Our policy applies to all staff, governors and volunteers working in HHE Learning Centre. We have developed this policy in consultation with the Nottingham City Safeguarding Children Board (<http://www.nottinghamcity.gov.uk/children-and-families/safeguarding-children/>) and in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002, and in line with government publications: 'Working Together to Safeguard Children' 2015, Revised Safeguarding Statutory Guidance 2 'Framework for the Assessment of Children in Need and their Families' 2000, 'What to do if You are Worried a Child is Being Abused' 2003, 2006, 2015. The guidance reflects, 'Keeping Children Safe in Education' September 2016 and 'Working together to safeguard children' DfE March 2015.

- 1.1 The Management Committee takes seriously its responsibility under section 175 of the Education Act 2002 to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements within our school to identify, assess, and support those children who are suffering harm.
- 1.2 We recognise that all adults, including temporary staff¹, volunteers and governors, have a full and active part to play in protecting our pupils from harm, and that the child's welfare is our paramount concern.
- 1.3 We recognise that safeguarding incidents could happen anywhere and staff should be alert to any possible concerns raised in this school.
- 1.4 We believe that our school should provide a safe place where children can learn. We provide a caring, positive safe and stimulating environment that promotes the social, physical and moral development of the individual child.
- 1.5 The aims of this policy are:
 - 1.5.1 To support the child's development in ways that will foster security, confidence and independence.
 - 1.5.2 To provide an environment in which children and young people feel safe, secure, valued and respected, and feel confident, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
 - 1.5.3 To raise the awareness of all teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse verbally without delay and in writing as soon as possible (See Appendices for more guidance)
 - 1.5.4 To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the school, contribute to assessments of need and support packages for those children.
 - 1.5.5 To emphasise the need for good levels of communication between all members of staff.
 - 1.5.6 To develop a structured procedure within the school which will be followed by all members of the school community in cases of suspected abuse.
 - 1.5.7 To develop and promote effective working relationships with other agencies, especially the Police and Social Care.

¹ Wherever the word "staff" is used, it covers ALL staff on site, including ancillary supply and self-employed staff, contractors, volunteers working with children etc., and governors

- 1.5.8 To ensure that all staff working within our school who have substantial access to children have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory DBS check (according to guidance), and a central record is kept for audit.

2.0 Safe School, Safe Staff

2.1 We will ensure that:

- 2.1.1 All members of the Management Committee understand and fulfil their responsibilities, namely to ensure that:
- There is a Safeguarding and Child Protection policy together with a staff behaviour (code of conduct) policy which is reviewed every year
 - The school operates safer recruitment procedures by ensuring that there is at least one person on every recruitment panel that has completed Safer Recruitment training.
 - The school complies with Department of Education guidance 'Keeping Children Safe in Education' (October 2015 and September 2016) in relation to Disqualification by Association.
 - The school has procedures for dealing with allegations of abuse against staff and volunteers and to make a referral to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned.
 - The Head Teacher is the designated Safeguarding Lead (DSL), there are two Deputy Safeguarding Leads (Deputy Head Teachers) and Additional Leads on each site who have DSL training. They will respond to safeguarding concerns in the absence of the DSL.
 - The DSLs have undertaken DSL 'new to role' training and will have a training course every 2 years and ensure they receive the regular updates from the LA. The DSLs has experience working with a wide range of agencies.
 - All other staff have Initial Safeguarding Training and regular updates at least every year with regular updates through minuted team meetings. SLT will have Safer Recruitment training updated at least every five years or sooner if there are changes in legislation.
 - Any weaknesses in Child Protection are remedied immediately.
 - A member of the Management Committee, is nominated to liaise with the LA on Child Protection issues and in the event of an allegation of abuse made against the Head Teacher
 - Child Protection policies and procedures are reviewed annually and that the Child Protection policy is available on the school website and at the school office on request
 - The Management Committee considers how children may be taught about safeguarding. This is part of a broad and balanced curriculum covering relevant issues through personal social health and economic education (PSHE) and/or through sex and relationship education (SRE) as appropriate for our setting.
 - That enhanced DBS checks are in place for Chair of the Management Committee.

- 2.1.2 The Head Teacher and Deputy Head Teachers have completed safer recruitment training (currently on-line on the DfE website) this will be renewed every 5 years
- 2.1.3 All members of staff and volunteers are provided with child protection awareness information at induction. New staff are inducted by the Deputy Safeguarding Leads who will provide them with the HHELC and site induction packs and explain the safeguarding procedures.
The pack will include
- The safeguarding policy and child protection policy
 - The code of conduct
 - Part one of Keeping Children Safe in Education and Annex A (They will be asked to sign to say they have read and understood the information in the pack)
- 2.1.4 All other staff and members of the management committee, have child protection awareness training, updated at least annually, to maintain their understanding of the signs and indicators of abuse and know how to respond to a pupil should they make a disclosure.
- 2.1.5 All members of staff, volunteers, and members of the management committee know how to respond to a pupil who discloses abuse
- 2.1.6 All parents/carers are made aware of the responsibilities of staff members with regard to child protection procedures through publication of this policy on the website.
- 2.1.7 Community users organising activities for children are aware of the school's child protection guidelines and procedures.
- 2.1.8 We will ensure that child protection type concerns or allegations against adults working in the school are referred to the LADO² for advice, and that any member of staff found not suitable to work with children will be notified to the Disclosure and Barring Service (DBS)³ for consideration for barring, following resignation, dismissal, or when we cease to use their service as a result of a substantiated allegation, in the case of a volunteer.
- 2.2 Our procedures will be regularly reviewed and up-dated.
- 2.3 The name of the Designated Safeguarding Leads, Deputy Safeguarding and additional Safeguarding Leads, are clearly advertised at the appropriate sites within the school.
- 2.2 All new members of staff will be given a copy of our safeguarding and child protection policy, with the safeguarding team's names clearly displayed, as part of their induction into the school. They will read KCSIE part one and Annex A and the school code of conduct and whistle blowing policy.
- 2.3 The policy is available publicly on the school website hard copies are available on request from the school office. Parents/carers are made aware of this policy and their entitlement to have a copy of it via the school website
- 2.4 We recognise our pupils are particularly vulnerable when using the internet and online safety is taken seriously. We have filtering and monitoring systems in place however the IT systems put in place aims not to 'overblock' access to educational materials. In

² LADO Local Authority Designated Officer for allegations against staff. AEO Area Education Officer

³ Contact the LADO for guidance in any case

addition, we have an e-Safety Policy and acceptable use policy together with e-safety guidance on our web-site.

3.0 Responsibilities

- 3.1 The designated DSL is responsible for: Ensuring that all staff have read and understood Keeping Children Safe in Education part 1 and know their responsibilities in relation to their safeguarding responsibilities. All staff who work directly with pupils will have read and understood Appendix A which provides more detail about issues such as children missing in education and the duty to share information, child sexual exploitation, forced marriage and breast ironing, honour based violence (HBV) including female genital mutilation (FGM), there is now a statutory duty to report suspected FGM. All staff are aware of how to recognise and their duty to prevent radicalisation.
- 3.2 At HHELC we recognise the particularly vulnerabilities of those pupils with SEND and the additional barriers that can exist when recognising abuse and neglect in this group of children. Indicators of possible abuse should be identified early and not assumed to be related to a child's SEND. Staff training in this area is key.
- 3.3 Referring a child if there are concerns about possible abuse, to the Local Authority, and acting as a focal point for staff to discuss concerns. Referrals should be made in writing, following a telephone call using the MARF form and/or email to the duty desk and Children and Families Direct. Keeping written records of concerns about a child even if there is no need to make an immediate referral (known at HHELC as a 'C' file). Training supports teachers to know how to identify when a child may need early help and report this to the DSL who will take 'early help action'.
- 3.4 Ensuring that all 'C' files are kept confidentially and securely and are separate from pupil records, until the child's 25th birthday, and are copied on to the child's next school or college and signed for.
- 3.5 Ensuring that an indication of the existence of the additional 'C' file in is marked on the pupil records.
- 3.6 Liaising with other agencies and professionals.
- 3.7 Ensuring that either they or the staff member attend case conferences, core groups, or other multi-agency planning meetings, contribute to assessments, and provide a report which has been shared with the parents when possible.
- 3.8 Ensuring that any pupil currently with a child protection plan who is absent in the educational setting without explanation for two days is referred to their key worker's Social Care Team.
- 3.9 Organising child protection induction, and training with updates at least annually, for all school staff. Ensure that training includes consideration of peer on peer abuse, so called 'honour-based' violence including FGM which must be reported to the police and an understanding of how those children with SEND will have additional vulnerabilities. Staff will be able to recognise the difference between pupils who need 'early help' whilst others are in immediate danger.
- 3.10 Informing staff of the referral process which follows when concerns have been raised. Making staff aware that they can make a direct referral to social care if they are not satisfied with the actions which have been taken.

- 3.11 Informing the LA if any pupil is missing from school for 10 consecutive days or more without the school's permission.
- 3.12 Informing the LA if they become aware of a private fostering arrangement. (A private fostering arrangement is one that is made privately without the involvement of a local authority for the care of a child under the age of 16 years [under 18, if disabled] by someone other than a parent or close relative, in their own home, with the intention that it should last for 28 days or more. A close family relative is defined as a 'grandparent, brother, sister, uncle or aunt' and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.
- 3.13 Parents and private foster carers both have a legal duty to inform the relevant local authority at least six weeks before the arrangement is due to start; not to do so is a criminal offence.
- 3.14 Whilst most privately fostered children are appropriately supported and looked after, they are a potentially vulnerable group who should be monitored by the local authority, particularly when the child has come from another country. In some cases privately fostered children are affected by abuse and neglect, or be involved in trafficking, child sexual exploitation or modern-day slavery.
- 3.15 Schools have a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to a private fostering arrangement. Although schools have a duty to inform the local authority, there is no duty for anyone, including the private foster carer or social workers to inform the school. However, it should be clear to the school who has parental responsibility.
- 3.16 School staff should notify the designated safeguarding lead when they become aware of private fostering arrangements. The designated safeguarding lead will speak to the family of the child involved to check that they are aware of their duty to inform the LA. The school itself has a duty to inform the local authority of the private fostering arrangements.
- 3.17 On admission to the school, we will take steps to verify the relationship of the adults to the child who is being registered.
- 3.18 The DSL will provide an annual report for the Management Committee, detailing any changes to the policy and procedures; training undertaken by the DSL, and by all staff and governors; number and type of incidents/cases, and number of children on the child protection register (anonymised).
- 3.19 Roles and Responsibilities of Home Schools - Whilst the HHELC will always put the child first, the home school holds the responsibility for Safeguarding at times when the student is not timetabled to attend or be tutored by HHELC Staff. Schools are to be made aware of this responsibility in writing at the on-set of any dealings through Home Tuition, the Fairmead and Hilltop Groups. This is to be reiterated in writing together with student timetables at subsequent reviews. Letters should be signed and acknowledged by the Home School key staff member and our own area lead.

4.0 Single Central Record

4.1 The school holds a Single Central Record of all recruitment and vetting checks. It indicates whether or not the following pre appointment checks have been completed:

- 4.1.1 Identity checks
- 4.1.2 Qualification checks for any qualifications legally required for the job e.g. QTS, NPQH, registration with the GTC
- 4.1.3 A prohibition from teaching check
- 4.1.4 Checks of permission to work in the UK
- 4.1.5 DBS enhanced disclosure including barred list check for those working with children.
- 4.1.6 Obtain a separate barred list check if an individual is working in regulated activities before their DBS is available.
- 4.1.7 Verify the candidates mental and physical fitness to carry out their work responsibilities.
- 4.1.8 Further overseas criminal records check where appropriate. (see KCSIE)
- 4.1.9 Employment history written evidence should be sought along with referenced for all applicants including internal ones. Open references should not be relied upon and if an applicant is not currently employed as a teacher their most recent employer should be contacted to confirm reasons for leaving.
- 4.1.10 There is a legal duty to refer to the DBS anyone who has harmed or who poses a risk of harm to a child or vulnerable adult or has been convicted or cautioned for a listed relevant offence.

4.2 The Single Central Record includes:

- 4.2.1 All staff who are employed to work at the school.
- 4.2.2 All staff who are employed as supply staff either through the school or through an agency.
- 4.2.3 All people who the school has chosen to work in regular contact with children. This includes volunteers, management committee members, and people brought into the school to provide additional teaching or instruction for pupils e.g. sports coaches.
- 4.2.4 It is the responsibility of the Head Teacher to ensure that the Single Central Record is up to date.
- 4.2.5 Volunteers (All regular volunteers at HHELC are required to hold an enhanced DBS disclosure. We define regular as at least once a week. At no time will a volunteer be left unsupervised with children, even with a full DBS check)
- 4.2.6 Management Committee Members (all management committee members at HHELC are required to hold an enhanced DBS disclosure).
- 4.2.7 Supply Staff (all supply staff at HHELC are required to hold an enhanced DBS disclosure. The school undertakes all of the relevant checks for staff employed directly by the school just as for other employed staff. Agencies supply the DBS numbers of all agency supply staff in writing prior to commencement of their work. When agencies supply staff, the school will check the identity of the person on arrival).
- 4.2.8 Building Contractors (children and young people are not allowed in places where building contractors are working for health and safety reasons, so these workers should have no contact with children. Should the occasion arise where contractor's staff come into contact with children, they will be required to hold an enhanced DBS disclosure and be subject to the same identity checks as the school staff. They will also be accompanied at all times in this instance).
- 4.2.9 Public Sector Staff

4.2.10 Visitors to the school in a professional capacity such as psychologists, nurses, dentists, centrally employed teachers (e.g. sensory support staff) will not need to be DBS checked by the school as their employing organisation will have carried out the necessary checks. These staff will be asked to provide proof of identity when visiting the school.

4.2.11 Records of appropriate training and a separate section for former staff.

4.3 The ultimate responsibility for maintaining and managing Child Protection Records lies with the Designated Safeguarding Lead.

5.0 Supporting Children and Young People

5.1 We recognise that a child who is abused or witnessed violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.

5.2 We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.

5.3 We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

5.4 We encourage self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.

5.5 Promoting a caring, safe and positive environment within the school.

5.6 We liaise with and work closely together with all other support services and those agencies involved in the safeguarding of children.

5.7 We notify Social Care as soon as there is a significant concern.

5.8 We provide continuing support to a child about whom there have been concerns who leaves the school by ensuring that appropriate information is copied under confidential cover to the child's new setting and ensuring the school medical records are forwarded as a matter of priority.

6.0 Confidentiality

- 6.1 We recognise that all matters relating to child protection are confidential.
- 6.2 The DSL or Deputy DSLs will disclose any information about a child to other members of staff on a need to know basis only.
- 6.3 All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- 6.4 All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.
- 6.5 We will always undertake to share our intention to refer a child to Social Care with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with the LADO on this point.

7.0 Supporting Staff

- 7.1 We recognise that staff working in the school 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.
- 7.2 We will support such staff by providing an opportunity to talk through their anxieties with the DSL and to seek further support as appropriate.

8.0 Allegations Against Staff

- 8.1 All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults (in the case of home tutors and those working in hospital side rooms any situation should be carefully risk assessed).
- 8.2 All Staff should be aware of local guidance on Behaviour Issues, and the school's own Behaviour policy.
- 8.3 Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at induction.
- 8.4 We understand that a pupil may make an allegation against a member of staff.
- 8.5 If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children, the member of staff receiving the allegation or aware of the information, will immediately inform the Head Teacher.
- 8.6 The Head Teacher on all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO).

- 8.7 If the allegation made to a member of staff concerns the Head Teacher, the person receiving the allegation will immediately inform the Chair of the Management Committee who will consult as in 8.6 above, without notifying the Head Teacher first.
- 8.8 The school will follow the local procedures for managing allegations against staff. Under no circumstances will we send a child home, pending such an investigation, unless this advice is given exceptionally, as a result of a consultation with the LADO.
- 8.9 Suspension of the member of staff, excluding the Head Teacher, against whom an allegation has been made, needs careful consideration, and the Head Teacher will seek the advice of the LADO and HR Consultant in making this decision.
- 8.10 In the event of an allegation against the Head Teacher, the decision to suspend will be made by the Chair of Governors with advice as in 8.9 above.

N.B. Any allegations against hospital or associated staff will be reported to the Head Teacher who will in turn follow the appropriate NHS guidance and/or inform the Police.

9.0 Allegations Against Another Pupil

- 9.1 Peer on Peer Abuse - we recognise that children can pose a threat either physical, mental or sexual to other children. This includes sexting, sexual abuse or initiation behaviours. At HHELC the risk of peer on peer abuse is minimised by policies and procedures which are detailed in our Behaviour and Discipline Policy. Any allegations of such abuse will be investigated and dealt with by the area Lead Teachers and Senior Leadership team as a matter of urgency. If appropriate other agencies will be informed. Peer on peer abuse will never be tolerated or passed off as 'banter'. School policies relating to pupil behaviour should also be reviewed alongside a school's Safeguarding and Child Protection Policy to ensure peer on peer abuse is recognised and effectively managed throughout the school.
- 9.2 If an allegation is made against another pupil or if sexualised behaviour is identified, the school will follow the local procedures for managing allegations. A full risk assessment will be completed.
- 9.3 The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.
- 9.4 If an act appears to have been inappropriate, there may be a need for some form of behaviour management or intervention. For some children, educative inputs may be required to address the behaviour.

10.0 Whistleblowing

- 10.1 We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.
- 10.2 All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues. If it becomes necessary to consult outside the school, they should speak in the first instance, to the LADO following the Whistleblowing Policy.
- 10.3 Whistle-blowing re the Head Teacher should be made to the Chair of the Management Committee whose contact details are readily available to staff.

11.0 Physical Intervention

- 11.1 We acknowledge that staff must only ever use physical intervention when a child is endangering him/herself or others or causing, attempting to cause significant damage to property, and that at all times it must be the minimal force necessary to prevent injury to another person. It must be noted that this does not mean that a 'hierarchy' or responses needs to be followed. The first resort may well be the highest level physical intervention, depending upon the circumstances. In our sector it must be recognised that handling can be extremely damaging both physically and/or mentally so must always be a last resort and school staff must defer to medical staff whenever possible.
- 11.2 Such events should be recorded in the numbered Physical Intervention Book.
- 11.3 Staff who are likely to need to use physical intervention will be appropriately trained in 'Team Teach' techniques or those used by the Adolescent Unit at Thorneywood if more appropriate (details of this training will be held on the single central record).
- 11.4 We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.
- 11.5 We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.
- 11.6 Physical Handling should not be attempted at the Children's Hospital School or on the wards and should always be deferred to NHS staff.

12.0 Anti-Bullying

- 12.1 Our school statement on anti-bullying is set out within the school's behaviour policy and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms of bullying such as cyber, racist, homophobic and gender related bullying. All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse.

12.2 We keep a record of bullying incidents, any incidents should be recorded on a HHELC Incident Form and submitted for further action.

13.0 Racist Incidents

13.1 Our policy on racist incidents is set out separately, and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures.

13.2 We keep a record of racist incidents any incidents should be recorded on A HHELC Incident Form and submitted for further action.

14.0 Prevention

14.1 We recognise that the school plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults, supportive friends and an ethos of protection.

14.2 We recognise that Looked After Children have additional vulnerabilities and their welfare is monitored closely.

14.3 The school community will therefore:

14.3.1 Work to establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.

14.3.2 Include regular consultation with children e.g. 1:1, participation in events, regular reviews, feedback on each session.

14.3.3 Ensure that all children and young people know there is an adult in the school whom they can approach if they are worried or in difficulty.

14.3.4 Include safeguarding across the curriculum, including PSHE, opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help. In particular, this will include anti-bullying work, e-safety and work clearly linking to our core values.

14.3.5 Ensure all staff are aware of school guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.

15.0 Health and Safety

15.1 Our Health & Safety policy, set out in a separate document, reflects the consideration we give to the protection of our children both physically within the school environment, and when away from the school and when undertaking school trips and visits.

16.0 Monitoring and Evaluation

16.1 Our Safeguarding and Child Protection Policy / Procedures will be monitored and evaluated by:

- Management Committee visits to the school
- SLT 'drop ins' and discussions with children and staff
- Pupil surveys and questionnaires

- Scrutiny of Attendance data
- Scrutiny of range of risk assessments
- Scrutiny of Management Committee minutes
- Scrutiny of Team Meeting Minutes
- Logs of bullying/racist/behaviour incidents for SLT and Management Committee to monitor
- Review of parental concerns and parent questionnaires

Included within the policy are a number of appendices that help with the identification and reporting of concern:

- Appendix 1 Recognising the signs of Child Abuse
- Appendix 2 Forced Marriage
- Appendix 3 Preventing Radicalisation
- Appendix 4 Discussing Concerns
- Appendix 5 The Concern File
- Appendix 6 Template: Front Sheet
- Appendix 7 Template: Chronology
- Appendix 8 Template: Detailed Concerns
- Appendix 9 Template: Concerns Shared by Others
- Appendix 10 Body Map Guidance for HHE Learning Centres and Body Map Template
- Appendix 11 Template: Safeguarding Children Data Base
- Appendix 12 Template: HHE Learning Centre's Safeguarding Action Plan

Links to other HHELC Policies

This policy, together with the following, should be read alongside and in conjunction with other policies regarding the safety and welfare of children. These together make up the suite of policies to safeguard and promote the welfare of children in The HHE Learning Centre.

- Physical intervention/positive handling
- Behaviour and Discipline Policy
- Attendance of Students and Safety Policy
- Anti-Bullying
- Equality Opportunities
- Disability Equality Action Plan
- Special Educational Needs and disability policy
- HHELC eSafety Policy
- Guide to safety
- Acceptable use of Photography
- ICT Acceptable use policy
- Lone working policy and Risk Assessment Checklist
- Confidentiality Policy
- Guidance on Visitors
- Staff Induction Policy
- Health and Safety Policy

Appendix 1

Recognising signs of child abuse

Categories of Abuse:

- Physical Abuse and FGM
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse and sexual exploitation
- Neglect

Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness
- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour
- Child Sexual Exploitation
- Child missing from Education.

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

- Must be regarded as indicators of the possibility of significant harm
- Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
- May require consultation with and / or referral to Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the child may:

- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances

- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents/carers are uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a “cry for help” and if ignored could lead to a more serious injury)
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

Bruising

Children can have accidental bruising, but the following must be considered as non-accidental unless there is evidence or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child. A medical opinion should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements

- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
- Indiscriminate attachment or failure to attach
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a “loner” – difficulty relating to others

Recognising Signs of Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self-mutilation and suicide attempts
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is not disclosed
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Sexual Abuse by Young People

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children.

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is "acting out" which may derive from other sexual situations to which the child or young person has been exposed.

If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base.

Assessment

In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

- Equality – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies
- Consent – agreement including all the following:

- Understanding that is proposed based on age, maturity, development level, functioning and experience
- Knowledge of society's standards for what is being proposed
- Awareness of potential consequences and alternatives
- Assumption that agreements or disagreements will be respected equally
- Voluntary decision
- Mental competence
- Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Child Sexual Exploitation

This is when young people receive something as a result of engaging in sexual activities. It may range from relationships which appear to be 'consensual' to organised gangs. This can happen face to face or through the internet.

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether

- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting.

Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
- A child seen to be listless, apathetic and irresponsible with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Appendix 2

Forced Marriage (FM)

This is an entirely separate issue from arranged marriage. It is a human rights abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. Never attempt to intervene directly as a school or through a third party.

Female Genital Mutilation (FGM)

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM. It is a mandatory duty of teachers, health workers and social workers to report to the police if they discover FGM may have taken place.

What is FGM?

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons. 4 types of procedure:

- Type 1 Clitoridectomy – partial/total removal of clitoris
- Type 2 Excision – partial/total removal of clitoris and labia minora
- Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia
- Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl – social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Is FGM legal?

FGM is internationally recognised as a violation of human rights of girls and women. It is illegal in most countries including the UK. There is a mandatory duty to report any disclosures of FGM about a female under 18.

Circumstances and occurrences that may point to FGM happening:

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad

- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinal tract infection
- Disclosure

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action without delay.

Preventing Radicalisation

From the 1 July 2015 all schools must have regard for the 'prevent duty'. All staff have undertaken prevent training in January 2016.

We are aware of our duty to:

- assess the risk of children being drawn into terrorism and terrorist ideology,
- work closely with other agencies if we are concerned that a young person may be at risk of radicalisation,
- train staff about the risks of radicalisation and
- develop robust IT policies to ensure unsuitable materials are not being accessed and young people learn about how they might be at risk and what to do if they are worried.

The DSL understands how to make a referral to the Channel programme if appropriate. Channel is a programme which focuses on providing support at an early stage to people who are identified as being vulnerable to being drawn into terrorism. It provides a mechanism for schools to make referrals if they are concerned that an individual might be vulnerable to radicalisation.

Appendix 3

Preventing Radicalisation

The Education and Inspections Act 2006 schools have a duty to promote community cohesion. Over the last few years, global events have led to a growth of extremist viewpoints, including advocacy of violent extremism. Schools have an important part to play in both educating children and young people about extremism and recognising when students start to become radicalised. In March 2015, new statutory duties were placed on schools by the Counter Terrorism and Security Act 2015 which means they must work to prevent children being drawn into extremism.

Safeguarding children from all risks of harm is an important part of a school's work and protecting them from extremism is one aspect of that.

Statutory Duties

- The duty to prevent children and young people being radicalised is set out in the following documents:
- Counter Terrorism and Security Act 2015
- Keeping Children Safe in Education 2015 / 16
- Prevent Duty Guidance 2015
- Working Together to Safeguard Children 2015
- Non-statutory Guidance
- Promoting fundamental British values as part of SMSC in schools: DfE
- Departmental advice for maintained schools 2014

Extremism is defined in the 2011 Prevent strategy as vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.

Radicalisation refers to the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups. British Values are democracy, the rule of law, individual liberty and mutual respect and tolerance of those with different faiths and beliefs.

Roles and Responsibilities

Role of the Governing Body

It is the role of the Governing Body to ensure that the school meets its statutory duties with regard to preventing radicalisation. The Governing Body has a nominated person, Barbara MacCarthy (Management Committee member with responsibility for safeguarding children) who will liaise with the Head Teacher and other staff about issues to do with protecting pupils from radicalisation.

Role of the Head Teacher

It is the role of the Head Teacher to:

- ensure that the school and its staff respond to preventing radicalisation on a day-to-day basis

- ensure that the school's curriculum addresses the issues involved in radicalisation
- ensure that staff conduct is consistent with preventing radicalisation

Role of Designated Safeguarding Leads

It is the role of the designated safeguarding leads to:

- ensure that staff understand the issues of radicalisation, that they are able to recognise the signs of vulnerability or radicalisation and know how to refer their concerns
- receive safeguarding concerns about students who may be vulnerable to the risk of radicalisation or are showing signs of radicalisation
- make referrals to appropriate agencies with regard to concerns about radicalisation
- liaise with partners, including the local authority and the police
- report to the Governing Body on these matters

Role of staff

- It is the role of staff to understand the issues of radicalisation, that they are able to recognise the signs of vulnerability or radicalisation and know how to refer their concerns.

Curriculum

HHELC is committed to ensuring that our students are offered a broad and balanced curriculum that aims to prepare them for life in modern Britain. We encourage our students to be inquisitive learners who are open to new experiences and are tolerant of others. Our values support the Development of the whole child as a reflective learner within a safe respectful learning environment. Teaching the school's core values alongside the fundamental British values supports quality teaching and learning, whilst making a positive contribution to the development of a fair, just and civil society.

Internet Safety

The internet provides students with access to a wide-range of content, some of which is harmful. Extremists use the internet, including social media, to share their messages. The filtering systems used at HHELC blocks inappropriate content, including extremist content. Where staff, students or visitors find unblocked extremist content they must report it to a senior member of staff (See ICT Acceptable Use Policy). Home tutors must be extremely vigilant with regard to working on the internet whilst in the home on unfiltered network and should at no time leave a student unsupervised while logged onto any technology.

Staff Training

Staff will be given training as part of their initial safeguarding training and refresher training to help them understand the issues of radicalisation, so that they are able to recognise the signs of vulnerability or radicalisation and know how to refer their concerns. The Designated safeguarding Officer and Deputy Designated Safeguarding Officers will undertake the Home Office developed 'Workshop to raise awareness of Prevent (WRAP) training.

Signs of vulnerability

There are no known definitive indicators that a young person is vulnerable to radicalisation, but there are number of signs that together increase the risk. Signs of vulnerability include:

- underachievement
- being in possession of extremist literature
- poverty
- social exclusion
- traumatic events
- global or national events
- religious conversion
- change in behaviour
- extremist influences
- conflict with family over lifestyle
- confused identify
- victim or witness to race or hate crimes
- rejection by peers, family, social groups or faith

Recognising Extremism

Early indicators of radicalisation or extremism may include:

- showing sympathy for extremist causes
- glorifying violence, especially to other faiths or cultures
- making remarks or comments about being at extremist events or rallies outside school
- evidence of possessing illegal or extremist literature
- advocating messages similar to illegal organisations or other extremist groups
- out of character changes in dress, behaviour and peer relationships (there are also very powerful narratives, programmes and networks that young people can come across online so involvement with particular groups may not be apparent)
- secretive behaviour
- online searches or sharing extremist messages or social profiles
- intolerance of difference, including faith, culture, gender, race or sexuality
- graffiti, art work or writing that displays extremist themes
- attempts to impose extremist views or practices on others
- verbalising anti-Western or anti-British views
- advocating violence towards others

Referral Process

Staff and visitors to HHELC must refer all concerns about pupils who show signs of vulnerability or radicalisation to the Designated Safeguarding Officer or the Deputy Safeguarding Officer using the usual methods for reporting other safeguarding concerns. When there are significant concerns about a pupil, the Designated Safeguarding Officer in liaison with the Head Teacher will make a referral to the appropriate body.

Appendix 4

Discussing Concerns

All members of staff, volunteers and governors will know how to respond to a pupil who discloses abuse, and will be familiar with procedures to be followed.

If a child chooses to tell a member of staff about alleged abuse, there are a number of actions that staff will undertake to support the child:

- The key facts will be established in language that the child understands and the child's words will be used in clarifying/expanding what has been said.
- No promises will be made to the child e.g. to keep secrets.
- Staff will stay calm and be available to listen.
- Staff will actively listen with the utmost care to what the child is saying.
- Question normally without pressurising and only using open questions. **Leading questions should be avoided as much as possible.**
- Staff will not put words in the child's mouth but note the main points carefully.
- A full written record will be kept by the staff and all duly signed, dated including the time the conversation with the child took place, outline what was said, the child's body language, etc.
- It is not appropriate for staff to make children write statements about abuse that may have happened to them.
- Staff will reassure the child and let them know that they were right to inform them and inform the child that this information will now have to be passed on.
- The Designated Person for the HHE Learning Centre will be immediately informed, unless the disclosure has been made to them.

Appendix 5

The Concern File

A 'concern' file will be commenced by the Designated Lead or the Deputy Designated Leads in HHE Learning Centre in the event of:

- A referral to Children's Social Care.
- A number of minor concerns on the child's main Learning Centre file.
- Any child open to social care.

Within a child's 'concern' file there will be a:

- Front sheet.
- Chronology.
- A record of concern in more detail and body map where appropriate.
- A record of concerns and issues shared by others.

HHE Learning Centre will keep written records of concerns about children even where there is no need to refer the matter to Children's Social Care (or similar) immediately but these records will be kept within the separate concerns file.

It is essential that accurate records are kept up to date and reviewed regularly by the Designated Person in HHE Learning Centre to evidence and support actions taken by staff in discharging their safeguarding arrangements. Original notes will be retained (but clearly identified as such) as this is a contemporaneous account and are important if there are any criminal proceedings arising from current or historical allegations of abuse or neglect.

It is important to appreciate that files may be taken for the purpose of external scrutiny for example for a serious case review or for audit.

Timely and accurate recording will take place when there are any issues regarding a child. A recording of each and every episode/incident/concern/activity regarding that child, including telephone calls to other professionals, needs to be recorded on a chronology kept within the confidential file for that child. This will include any contact from other agencies who may wish to discuss concerns relating to a child. Actions will be agreed and roles and responsibility of each agency will be clarified and outcomes recorded. The chronology will be brief and log activity; the full recording will be on a record of concern.

More detailed recording on the record of concern will be signed and dated and include an analysis, taking account of the holistic needs of the child, and any historical information held on the child's file. Support and advice will be sought from social care, whenever necessary. In this way a picture can emerge and this will assist in promoting an evidence based assessment and any action that needs to be taken. Discussion with all relevant parties can lead to a decision being made. This may include no further action, whether a CAF should be undertaken, or whether a referral should be made to Children's Social Care in line with the NCC Pathway to Provision document.

Such robust practice across child protection and in safeguarding and promoting the welfare of children will assist HHE Learning Centre to identify early any concerns and this may prevent future harm.

The Designated Person in HHE Learning Centre will ensure a systematic means of monitoring children known or thought to be at risk of harm (through the concern file and through an ongoing dialogue with staff), and will ensure that we contribute to assessments of need and support multi-agency plans for those children. The concern file can be active or non-active in terms of monitoring i.e. a child is no longer LAC, subject to a child protection plan or CAF and this level of activity can be recorded on the front sheet as a start and end date. If future concerns then arise it can become active again and indicated as such on the front sheet and through the use of the chronology to review this as new information arises.

If the child moves to another school, the concern file must be sent or taken, as part of the admission/transition arrangements, to the Designated Person at the new establishment/school. There will be a timely liaison between the Designated Person in HHE Learning Centre and the Designated person in the new school/establishments in order to ensure a smooth and safe transition for the child.

APPENDIX 6

Concern File - INFORMATION/FRONT SHEET

Name:		DOB:	Class/Form:	Ethnicity
Home Address:			Telephone:	
			e mail:	
Status of file and dates:				
OPEN				
CLOSED				
TRANSFER				
Any other child protection records held in HHE Learning Centre relating to this child/child closely connected to him/her?				
YES/NO WHO?				
Members of household				
Name	Age/DOB	Relationship to child	Homework	Contact No
Significant Others (relatives, friends, childminders, etc)				
Name	Relationship to child	Address	Tel No	
Other Agency Involvement				
Name of officer/person	Role and Agency	Status of Child i.e. CAF/PPP/LAC/CiN	Tel No	Date

APPENDIX 7

Concern File - Chronology

CONFIDENTIAL

Sheet Number:

Complete for all incidents of concern including where a 'logging the concern' sheet has not been completed. If one has been completed then add a note to this chronology to cross reference (significant information may also be added).

Name:		
DOB:		Form:
Date	Information/Details of concerns or contact	Print Name and Signature

APPENDIX 8

Logging a concern about a child's safety and welfare

Part 1 (for use by any staff)

Pupil's Name:	Date of Birth:	FORM:
Date and Time of Incident:	Date and Time (of writing):	
Name: Print:	Signature:	
Job Title:		
Note the reason(s) for recording the incident.		
Record the following factually: Who? What (if recording a verbal disclosure by a child use their words)? Where? When (date and time of incident)? Any witnesses?		
Professional opinion where relevant (how and why might this have happened)?		
Note actions, including names of anyone to whom your information was passed.		
Any other relevant information (distinguish between fact and opinion).		

**Check to make sure your report is clear to someone else reading it.
Please pass this form to your designated person for child protection.**

Part 2 (for use by Designated Person/Deputy Designated Person)

<p>Time and date information received by DP, and from whom.</p>	
<p>Any advice sought by DP (date, time, name, role, organisation and advice given).</p>	
<p>Action taken (referral to children's social care/monitoring advice given to appropriate staff/CAF etc) with reasons.</p> <p>Note time, date, names, who information shared with and when etc.</p>	
<p>Parent's informed Y/N and reasons.</p>	
<p>Outcome</p> <p>Record names of individuals/agencies who have given you information regarding outcome of any referral (if made).</p>	
<p>Where can additional information regarding child/incident be found (e.g. pupil file, serious incident book)?</p>	
<p>Should a concern file be commenced if not already one? Why?</p>	
<p>Signed</p>	
<p>Printed Name</p>	

APPENDIX 9

Logging concerns/information shared by others external to the HHE Learning Centre (Pass to designated person/Deputy Designated Person)

Pupil's Name:	Date of Birth:
	Form:
Date and Time of Incident:	Date and Time of receipt of information:
	Via letter / telephone etc?
Recipient (and role) of information:	
Name of caller/provider of information:	
Organisation/agency/role:	
Contact details (telephone number/address/e-mail)	
Relationship to the child/family:	
Information received:	
Actions /Recommendations for HHE Learning Centre:	
Outcome:	
Name:	
Signature:	
Date and time completed:	
Counter Signed by Designated Person	
Name:	
Date and time:	

FOR USE BY DSO/Deputy DSO ONLY

APPENDIX 10

Body Map Guidance for HHE Learning Centre

Body Maps should be used to document and illustrate visible signs of harm and physical injuries.

Always use a black pen (never a pencil) and do not use correction fluid or any other eraser.

Do not remove clothing for the purpose of the examination unless the injury site is freely available because of treatment.

When you notice an injury to a child, try to record the following information in respect of each mark identified e.g. red areas, swelling, bruising, cuts, lacerations and wounds, scalds and burns:

- Exact site of injury on the body, e.g. upper outer arm/left cheek
- Size of injury - in appropriate centimetres or inches.
- Approximate shape of injury, e.g. round/square or straight line
- Colour of injury - if more than one colour, say so.
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere?
- Is there a scab? / any blistering? / any bleeding?
- Is the injury clean? or is there grit/fluff etc?
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the child feel hot?
- Does the child feel pain?

Importantly the date and time of the recording must be stated as well as the name and designation of the person making the record. Add any further comments as required.

A copy of the body map should be kept on the child's concern file.

BODYMAP

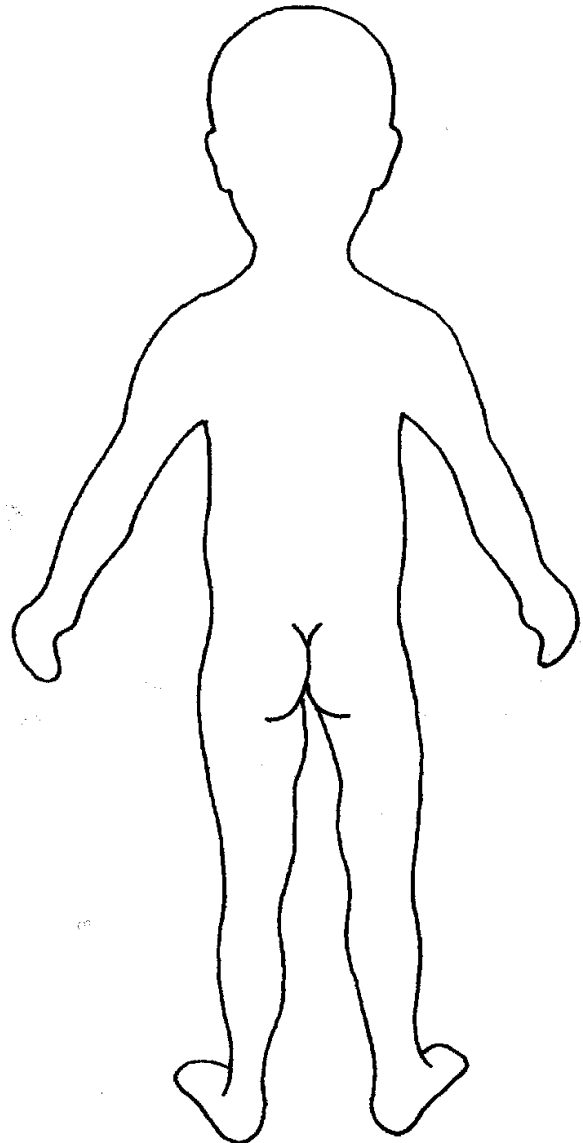
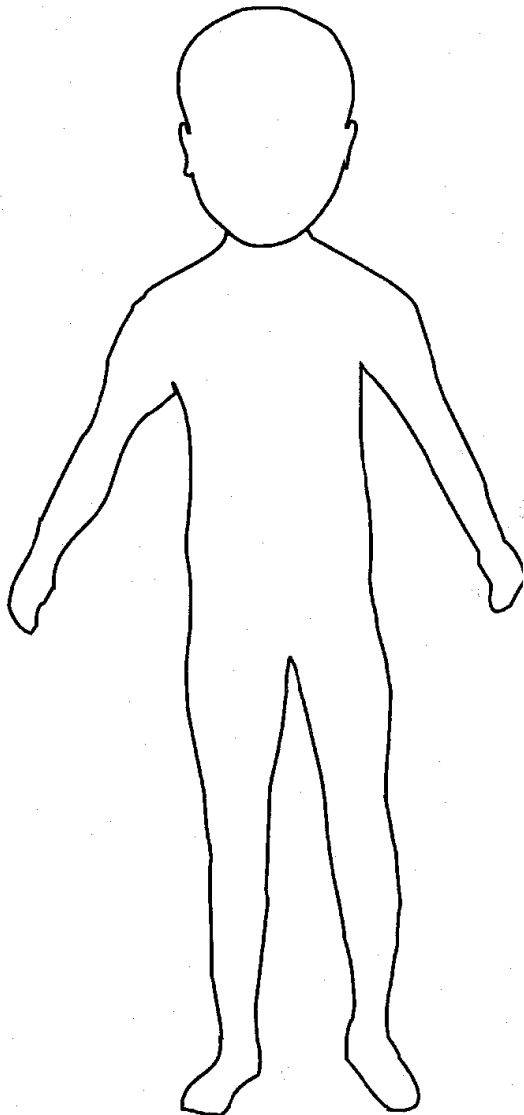
FOR USE BY DSO/Deputy DSO ONLY

(This must be completed at time of observation)

Names for Child: _____ Date of Birth: _____

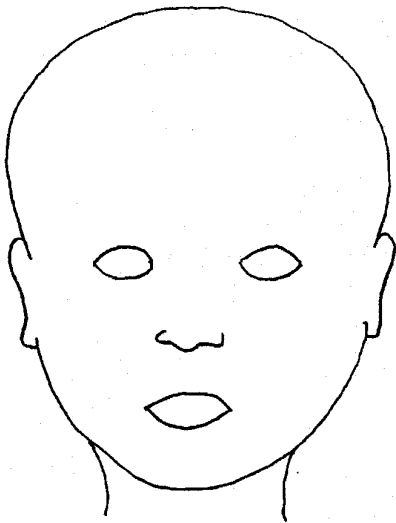
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Date and time of observation: _____

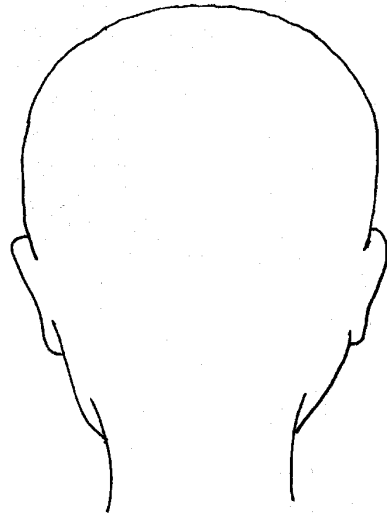


FOR USE BY DSO/Deputy DSO ONLY

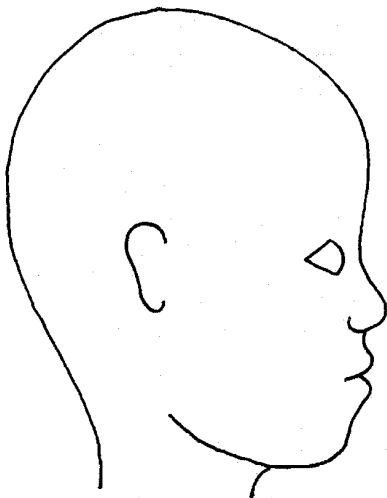
Name of Child: _____ Date of observation: _____



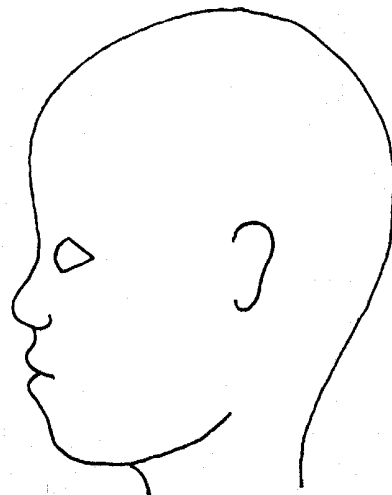
FRONT



BACK



RIGHT

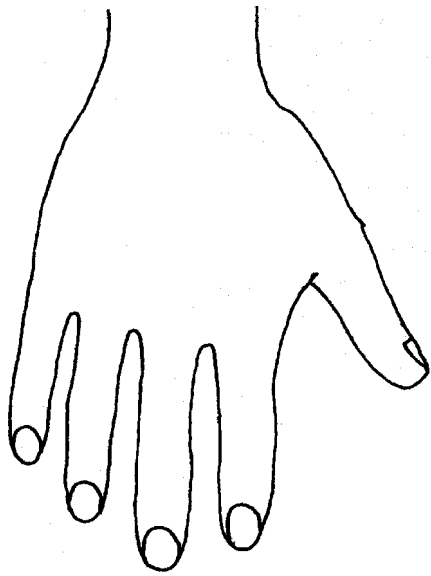


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FOR USE BY DSO/DEPUTY DSO ONLY

FOR USE BY DSO/DEPUTY DSO ONLY

Name of Child: _____ Date of observation: _____



R



L

BACK



R

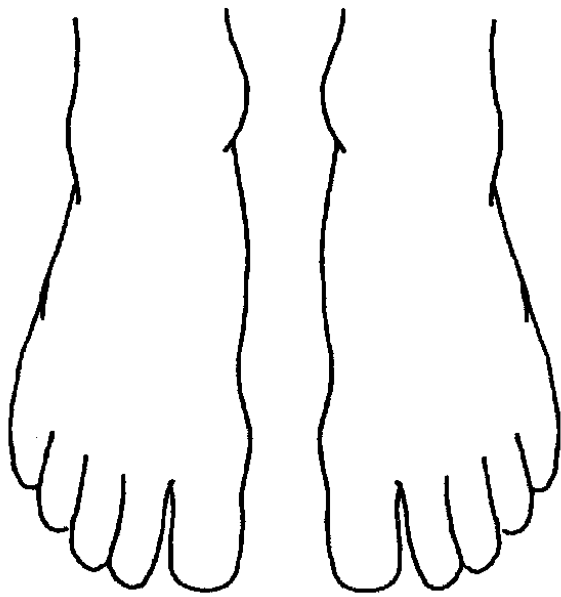


L

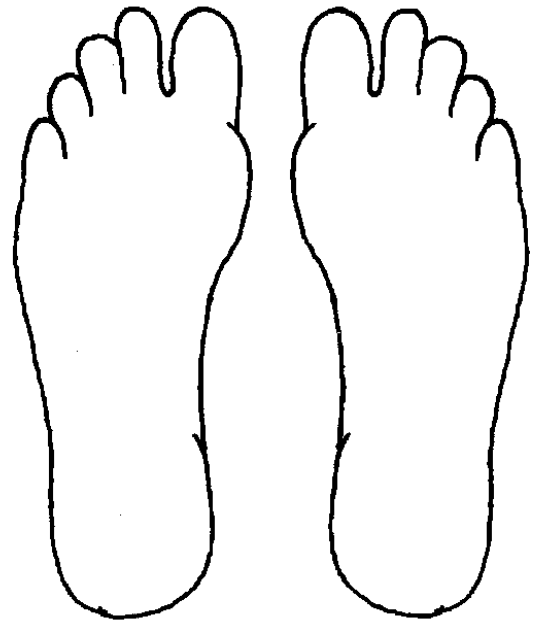
PALM

FOR USE BY DSO/DEPUTY DSO ONLY

Name of Child: _____ Date of observation: _____



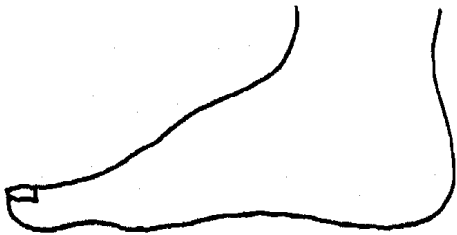
R TOP L



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FOR USE BY DSO/DEPUTY DSO ONLY

Name of Child: _____ Date of observation: _____



R



L

INNER



R



L

OUTER

Name of worker:

Signature: Print name:

Date: Time:

Role of worker:

Other information:

APPENDIX 11

Safeguarding Children Data Base (blank template)

Name of Child	D-O-B Form	Home Address	Parents/carers contact details	Name of Social worker and contact details	Other Agencies	Type of Plan CP CAF CIN SEN	Dates of: Conferences, Reviews and Meetings

Safeguarding Children Data Base (example template)

Name of Child	D-O-B Group/Ward	Home Address	Parents/carers contact details	Name of Social worker and contact details	Other Agencies	Type of Plan	Dates of: Conferences, Reviews and Meetings
Andrew Smith	17-4-1999 HT	8 Fair View Jimton Nottingham. NG Tel:-	Sue, Dave Green Tel:- mobile	Andrew Jones Sir John R Way Tel: 0115 843564	Lucy Grey EP Tel:- 01623 433433 John Newton ISS Tel:- 01623 433433	Child Protection	ICPC 28-6-2010 RCPC 15- 12 2010 Core group Mtngs 14-7-2010 2.30pm at HHE Learning Centre. 9-9-2010 15-10-2010
Amy Plant	14-10-1999 FM	9 Loveday Road, Bullbro Nottingham NG Tel:-	Mrs Shirley Plant Mr Peter Plant Tel:- P Plant Mob:-		Jane Forbes EWO Tel:-01623 4334332 Julie Walters S Nurse Tel:- 0115 954335	Child Protection Child In Need	ICPC 12-11-2009 RCPC 23-3-2010 C.I.N 12-5-2010 21-7-010
Billy Brooks	23-7-1995 E34	22 Sandy Lane Clumton Nottingham NG Tel:- Respite Care 75 Green Lane Edwinstowe Notts	Mr Bob Brooks Mrs Jill Brooks Bob Mob:- Jill Mob:- Robin, Daisy Hood	Andrew Cool Meadow House Mansfield Tel:- 01623 433498 T Manager:- Steve Parks	Julie Brown EP Tel:- Hayley Barr ISS Tel:- Joe Brown Health Tel:- Gay Taylor Physio Tel:-	Child in Need Statement of SEN	CIN 22-7-2010 SEN Review 19-9- 2010.

APPENDIX 12

Home and Hospital Education Learning Centre:

Date: December 2016

Completed by: Head Teacher

Aim: To Enable HHE Centre to carry out their functions with a view to safeguarding and promoting the welfare of children. The following safeguarding areas have been highlighted for improvement:

Safeguarding Area	Safeguarding Requirement	Response	Action Taken	By Whom and Timeline
Annual Training Update	General Safeguarding	Head Teacher booking training	Staff Training Scheduled	Head Teacher for January INSET 2017 Completed 04.01.17
Additional DSOs	Additional DSOs required for Jan 17 to replace retiring teacher	Staff and training identified	Training booked	Teacher identified by Deputy Head Teacher (TW) – training December 2016
Management committee training required	General safeguarding	Training to be made available. Management Committee members must take up offer	Training on-line is available. Chair to reinforce.	7 governors attended safeguarding training (inc. Chair and Vice Chair) 04.01.17
References for Staff employed by Local Authority before de-delegation	Recording and SCR	Request is made to Local Authority for full recruitment details. If unavailable, further advice will be sought	Request made to LA	TW Business Manager – December 2106 - Information chased 11.01.17
Regular up-dates	To up-date staff on safeguarding issues/changes in a timely fashion	Safeguarding updates to be discussed and minuted at team meetings.	CHS – Already minuted TW / Home – minutes to include this from now on.	Deputy Head Teachers - Immediately
Site of Identification documentation is	Recording and SCR	Staff to be requested to bring in current	Staff request to be made by Admin	Request by Head Teacher through admin.

recorded but copies are required for staff files		identification as an update		Deadline End of Autumn Term 2016
Review of linked policies	General Safeguarding	All Policies linked to Safeguarding to be reviewed	Policies identified and to be reviewed.	SLT - Deadline End of Autumn Term 2016. To management committee at first meeting 2017