



# Ripley Court School



## 7a Safeguarding and Child Protection Policy

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**Approved by:**

.....Headmaster Ripley Court School

.....Signature.....Date

.....Chairman of the Governors Ripley Court School

.....Signature.....Date

This policy is applicable to all pupils, including those in the EYFS. It should be read in conjunction with our policies: 7b7e Staff code of Conduct and whistleblowing; 10a Anti-Bullying; 5a Student Acceptable Use of ICT, 9a Behaviour, Discipline and Exclusion; 17a Equal Opportunities; 15b Additional Needs; 18a Recruitment and Vetting inter alia.

### **A. General Policy Statement**

Ripley Court School has a statutory and moral duty to ensure that the school functions with a view to safeguarding and promoting the welfare of children receiving education at the school.

The governing body is committed to ensuring that the school:

- Provides a safe environment for children and young people to learn in
- Identifies children and young people who are suffering, or likely to suffer, significant harm, and
- Takes appropriate action to see that such children and young people are kept safe, both at home and at the school.
- Supports those children who are not at risk of suffering serious harm but who are in need of additional support from external agencies where appropriate. This may lead to inter-agency assessment, including use of the CAF (Common Assessment Framework) and TAC (Team around the Child) where appropriate.
- Covers broader safeguarding duties such as making reports to the DBS and making pre-appointment checks according to the requirements in KCSIE (2018).

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In pursuit of these aims, the governing body will approve and annually review policies and procedures with the aim of:

- Raising awareness of issues relating to the welfare of children and young people and the promotion of a safe environment for learning within the school.
- Aiding the identification of children and young people at risk of significant harm, and providing procedures for reporting concerns.
- Establishing procedures for reporting and dealing with allegations of abuse against members of staff.
- The safe recruitment of staff.
- Ensuring children are taught about safeguarding, including online safety, through the curriculum and PHSE programme.

In developing the policies and procedures, the governing body will consult with, and take account of, guidance issued by the government and other relevant bodies and groups. Current guidance is 'Keeping Children Safe in Education' (2018) and 'Working Together to Safeguard Children' (2015). The procedures have been developed in cooperation with the SSCB (Surrey Safeguarding Children Board) (0300 123 1630) and the LADO (Local Authority Designated Officer) - 0300 123 1650 option 3)

The School will always refer concerns that a child or young person might be at risk of significant harm to the MASH (Multi Agency Safeguarding Hub)

The School provides for Early Years Foundation Stage (EYFS) within Little Court, the Ripley Court Pre-prep. Within EYFS there is a registered setting, the Nursery, the DSL for EYFS is Henrietta Wotherspoon.

For the registered setting, the School will inform Ofsted and ISI of any allegations of serious harm or abuse by any person living, working, or looking after children at the premises whether or not the allegations take place on the premises or elsewhere, or any other abuse that is alleged to have taken place on the premises, and of the actions taken in respect of these allegations. This information is to be passed as soon as is reasonably practicable, but at the latest within 14 days.

The Head and all staff working with children will receive training adequate to familiarize them with child protection issues and responsibilities and the school procedures and policies, with regular refresher training. The Deputy Headmaster will be the senior member of the school management team with special responsibility for safeguarding issues (the designated senior member of staff with lead responsibility for safeguarding, DSL).

### **B. Designated Staff with Responsibility for Safeguarding and Child Protection**

The designated senior member of staff with lead responsibility for Safeguarding and Child Protection (DSL) is Gavin Ryan. Henrietta Wotherspoon is the deputy designated member of staff. Gavin is a senior member of the School management team. He has a key duty to take lead responsibility for raising awareness within the staff of issues relating to the welfare of children and young people, and the promotion of a safe environment for the children and young people learning within the School.

He has received training in child protection issues and inter-agency working, as required by KCSIE and will receive refresher training at least **every two years**. He will keep up to date with developments in child protection issues.

The designated safeguarding leads are responsible, together with the Headmaster, for:

- Supporting Children in Need with a multi-agency response where necessary.

- Overseeing the referral of cases of suspected abuse or allegations to the relevant investigating agencies.
- Providing advice and support to other staff on issues relating to child protection.
- Maintaining a proper record of any child protection referral, complaint or concern (Even where that concern does not lead to a referral).
- Ensuring that parents of children and young people within the School are aware of the School's safeguarding policy.
- Liaising with the LEA, the SSCB and other appropriate agencies for the sharing of information, reassessing of concerns and challenging inaction.
- Ensuring that staff receive regular training in child protection issues and are aware of the school's safeguarding procedures.
- Have received training in child protection issues and inter-agency working, and will receive refresher training at least every 2 years.
- Oversee the procedures for welcoming visitors on site – see APPENDIX FOUR

The DSL will report to the governing body of the School setting out how the school has discharged its duties.

He is responsible for reporting deficiencies in procedure or policy identified by the Safeguard Unit to the governing body at the earliest opportunity and will remedy these as soon as possible.

### **The Designated Governor**

The designated member of the governing body with responsibility for child protection issues is Dr. (Sara) Coe.

The designated governor is responsible for liaising with the Deputy Headmaster over matters regarding child protection, including:

- Ensuring that the School has procedures and policies which are consistent with the guidelines issued by the SSCB (Surrey Safeguarding Children Board).
- Ensuring that the governing body considers the School policy on safeguarding each year.
- Ensuring that each year the governing body is informed of how the School and its staff have complied with the policy, including but not limited to, a report on the training that staff have undertaken.
- Reviewing the policies and procedures for safeguarding at least annually and presenting this report for review by the governing body. Minutes of meetings should be sufficiently detailed to demonstrate the breadth, depth and discussion of the review.
- The designated governor is responsible for overseeing the liaison between agencies such as the police, social services etc. in connection with any allegations against the Head. This will not involve undertaking any form of investigation, but will ensure good communication between the parties and provide information to assist enquiries.

### **Key contacts:**

DSLs: Lead:	Mr Gavin Ryan 07766 652 734 <a href="mailto:deputyhead@ripleycourt.co.uk">deputyhead@ripleycourt.co.uk</a>
Deputy:	Miss Henrietta Wotherspoon 07735 031 121 <a href="mailto:wotherspoonh@ripleycourt.co.uk">wotherspoonh@ripleycourt.co.uk</a>
Headmaster	Mr Andrew Gough 07432 725 435 <a href="mailto:head@ripleycourt.co.uk">head@ripleycourt.co.uk</a>

Governor	Dr Sara Coe 07815 609 644 <a href="mailto:saracoe@nhs.net">saracoe@nhs.net</a>
Local Authority Designated Officer (LADO)	0300 123 1650 (option 3)
Multi-Agency Safeguarding Hub (MASH)	0300470 9100
NSPCC Whistleblowing advice line	0800 028 0285 <a href="mailto:help@nspcc.org.uk">help@nspcc.org.uk</a>

### **C. Dealing with Disclosure of Abuse and Procedure for Reporting Concerns**

The procedure will be determined primarily by the SSCB (Surrey Safeguarding Children Board) which establishes the locally agreed inter-agency procedures.

If a child or young person tells a member of staff about possible abuse:

1. Listen carefully and stay calm.
2. Do not interview the child, but question normally and without pressure, in order to be sure that you understand what the child is telling you.
3. Do not ask leading questions.
4. Do not put words into the child's mouth.
5. Reassure the child that by telling you, they have done the right thing.
6. Inform the child that you must pass the information on, but that only those that need to know about it will be told. Inform them of to whom you will report the matter.
7. Note the main points carefully.
8. Make a detailed note of the date, time, place, what the child said, did and your questions etc and then sign it.
9. Staff should not investigate concerns or allegations themselves, but should report them immediately to the DSL.
10. Note that a bullying incident may be a matter for child protection procedures where there is reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm. In such cases the DSL should be informed and any such abuse will be referred to local agencies. In the event of a disclosure about pupil on pupil abuse all pupils involved, whether victim or perpetrator, are treated as being 'at risk'.

### **Strategies for referring suspected child abuse:**

Be aware that abuse is a difficult subject for children to discuss and they may find it hard to talk about what is or has been happening to them for many reasons.

The following factors may contribute to a child's difficulty:

- They cannot find the words to say what is happening because of age, learning, language or hearing difficulties;
- They do not have adult permission to tell and actual, or implied, threats have been used;
- They have found that they cannot trust a parent or an adult whom they know very well;
- They assume they will not be believed;
- They believe silence will help to protect others in their family;
- They have been forced to take the blame for what is happening;
- They do not know what the alternatives are, or have direct access to agencies which can offer protection and help;
- They are not ready to talk about their experience – they do not feel safe enough.

Whenever circumstances allow, staff should report any suspicions which they have to the DSL immediately. There may, however, be situations in which a child chooses to tell a member of staff that he/she has been abused. Where the child feels able to talk about abuse to an adult, it is usually a sign of a strong and trusting relationship. The conversation should be held in a

quiet area where there are not likely to be any interruptions. Staff should be aware of the importance of adopting a supportive role and avoid subjecting the child to lengthy or multiple interviews as this could confuse the child and jeopardise the evidence. Any conversations and notes need to be passed on to the DSL on the same day.

**If a child chooses to talk to you and discloses that he/she has been abused-**

**TAKE THE CHILD SERIOUSLY AND TAKE THE FOLLOWING ACTION:-**

LISTEN - repeat the child's words

STOP - do not ask more questions

REASSURE - tell the child he/she is not to blame: 'It is not your fault.'

BELIEVE - tell the child you believe what he/she told you

AFFIRM - 'I am glad you told me. It was right to tell me. You have been brave to come and tell me'.

CONFIDENTIALITY - **NEVER** tell children you will keep secret what they have told you.

Tell the child you must talk to other people **who can help**.

FOLLOW-UP - make arrangements with the child to speak to them later. They have chosen you as an adult whom they can trust.

REPORT - immediately report what you have heard to the DSL. Report verbally and write, verbatim, what the child has said to you. Remember to date and sign what you have written. Give a copy to the DSL.

EXAMINATION – Where the child is in school, it may be possible to observe the child during the normal school routine in physical education, for example. If this occurs, a skin map can be used to identify where the injuries are located on the body.

**Under no circumstances** attempt an examination or remove a child's clothes to look further at an injury. Under no circumstances should photographs be taken of a child's injury. The child should only be examined by an appropriate doctor or medical professional.

The DSL may take further advice from the LADO, but anyone may make a referral direct to the LADO if they need to, or if they are dissatisfied with the response from the DSL.

**The crucial action is to report your suspicions, or what had been said to you, to the Designated Safeguarding Lead at the earliest possible opportunity.**

**Contextual Safeguarding**

Safeguarding incidents and/or behaviours can be associated with factors outside school and/or can occur between children outside Ripley. All staff, but especially the designated safeguarding lead (or deputy) should be considering the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare. Children's social care assessments should consider such factors so it is important that schools and colleges provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and the full context of any abuse.

**Children Missing Education (CME)**

The school will maintain vigilance over attendance and absence; staff are aware that a child going missing from education is a potential indicator of abuse and neglect, including sexual abuse and sexual exploitation. Staff inform the lead DSL of any pupil who is absent for five days consecutively.

The lead DSL will monitor unauthorised, unexplained or prolonged absences and take appropriate action. Where reasonably possible, we ask that parents provide details of two emergency contact numbers for each pupil.

### **Looked After Children & Previously Looked After Children**

The most common reason for children becoming looked after is as a result of abuse and/or neglect. Should we enrol a looked after child, the DSL will ensure that we have the information necessary in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. They should also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The DSL should have details of the child's social worker and the name of the virtual school head in the authority that looks after the child.

A previously looked after child potentially remains vulnerable and all staff should have the skills, knowledge and understanding to keep previously looked after children safe. When dealing with looked after children and previously looked after children, it is important that all agencies work together and prompt action is taken when necessary to safeguard these children, who are a particularly vulnerable group.

### **Concerns involving members of staff:**

- Any concerns that involve allegations against a member of staff should be referred immediately to the Headmaster who will contact the LADO to discuss and agree further action to be taken in respect of the child and the member of staff. This contact should occur immediately. This applies to any situation in which a child is at risk.
- Any concerns that involve allegations against the Headmaster should be referred immediately to the Chairman of Governors who will take advice from the LADO.
- Further information regarding the procedure for managing situations involving members of staff, including the DSL, can be found in the Procedures when a member of staff faces allegations of abuse (Policy 7b4) Copies of this document are available on the intranet. Part 4 of KCSIE provides the most recent guidance on this issue.
- All procedures need to be applied with common sense.
- Allegations found to be malicious will be removed from personnel records.
- Records are kept of all other allegations but any that are not substantiated, are unfounded or malicious should not be referred to in employer references.
- The school will make every effort to maintain confidentiality and guard against unwanted publicity until the point where an individual is charged with an offence or where an external agency publish information about an investigation or decision.
- The school will notify the DBS when an individual's services are no longer used and the DBS referral criteria are met. If the dismissal does not reach the threshold for DBS referral, separate consideration will be given to a referral to the NCTL (National College for Teaching and Leadership)
- **All staff must be aware that it is a disciplinary offence not to report concerns about the conduct of a colleague that could place a child at risk. When in doubt – consult.**
- **All staff must be aware that it is an offence to cease to use a person's services of any kind for any reasons of child protection without notifying the DBS/DfE. Compromise agreements have no legal authority in this connection.**

#### **D. Code of Practice:**

All school staff should take care not to place themselves in a vulnerable position with relation to child protection. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults.

Physical intervention should only be used when the child is endangering him/herself or others and such events should be recorded on a file note, with the names of any witnesses if present. Staff should be aware of the School's Behaviour, Discipline and Exclusion policy 9a, and any physical interventions must be in line with agreed policy and procedure in which appropriate training should be provided.

Staff should be aware of the school's Acceptable use of ICT policy 5a. In particular, staff should not take photos of children on mobile phones. All staff should be familiar with the policy on Staff Code of Conduct, available on the Intranet.

All school staff should work towards providing an environment and atmosphere for children and young people to enable them to feel safe to talk. However, staff should never promise a child to keep certain information confidential. It must be explained that staff have certain duties to help keep that child safe, which may involve informing others.

#### **Whistleblowing**

Children cannot be expected to raise concerns in an environment where staff fail to do so. All staff must be aware of their duty to raise safeguarding concerns and understand that the well-being of the children in their care is paramount. The number to call is 0800 028 0285. See policy 7b7e for fuller details on whistleblowing.

#### **EYFS**

Where staff work in, or are involved in the management of, the School's early years or provision of care of pupils under the age of eight, the School will take steps to check whether those staff are disqualified under the Childcare Act 2006, including by association with others. This forms part of the School's safer recruitment practices.

The School records all checks of staff employed to work in or manage relevant childcare on the Single Central Register, with relevant dates.

Policies 5 and 5a on School Rules including ICT, mobile phones and Electronic Devices covers use of mobile phones. In the case of EYFS it is important to note that no mobile phone should be used in any context in any EYFS setting. Parents are not permitted to use their mobile phones or camera in or around the EYFS setting without prior approval from the headmaster.

#### **Supervision and support:**

Any member of staff affected by issues arising from concerns for children's welfare or safety can seek support from the Lead DSL and in his absence the deputy DSL. All newly qualified teachers and classroom assistants have a mentor with whom they can discuss concerns including the area of child protection.

The DSL can put staff and parents in touch with outside agencies for professional support if they so wish. This may include Early Help. Early help means providing support as soon as a problem emerges at any point in a child's life, from the foundation years through to the teenage years.

In the first instance, staff who consider that a pupil may benefit from early help should discuss this with the School's DSL. The DSL will consider the appropriate action to take in accordance with the MASH. The DSL will support staff in liaising with external agencies and professionals in an inter-agency assessment, as appropriate. If early help is appropriate, the

matter will be kept under review and consideration given to a referral to children's social care if the pupil's situation does not appear to be improving.

All staff are issued with a credit card-sized list containing contact details and advice on dealing with allegations.

### **Training opportunities:**

The Lead DSL is responsible for ensuring staff, including himself, receive training in the area of child protection. Whole staff training in the area of child protection last took place in September 2018. Online training started in September 2017 and recurs every year. In addition to this staff receive safeguarding updates at weekly staff meetings and training during termly INSETs.

New staff will receive an induction in Safeguarding from the DSL before they begin teaching the children. This will include familiarisation with policies on Safeguarding, staff code of conduct and other Child Protection related policies. Copies of part 1 of 'KCSIE', along with Annex A, will be distributed and staff will sign to say that they have received, read and understood all of the policies with regard to safeguarding. Governors receive and read part 2 of KCSIE.

### **Monitoring and review:**

All school personnel and governors have a copy of this policy and will have the opportunity to consider and discuss its contents annually. The policy is reviewed annually at the summer meeting of the Board of Governors. There is a termly meeting, when circumstances dictate, between the DSL and the governor responsible for Safeguarding to discuss and review cases, policies, procedures and training.

### **Monitoring and Evaluation**

Our Safeguarding Policy and Procedures will be monitored and evaluated by:

- Governing Body visits to the school and meetings with the DSL
- SMT/Governing Body discussions with children and staff
- Scrutiny of Attendance data
- Scrutiny of range of risk assessments
- Logs of bullying/racist/behaviour incidents for SMT and Governing Body to monitor
- Review of parental concerns
- Review of contact with SSCB and/or other external agencies

### **E. Recruitment and Selection Procedures**

The School follows the government guidelines for Safer Recruitment and the Headmaster and Deputy Headmaster are Safer Recruitment trained. Two governors are also trained. Recruitment and selection procedures are regularly reviewed.

All staff recruited to the School are subject to the appropriate identity, qualification and health checks.

A single central register is maintained by the registrar to record all checks completed on staff, volunteers and governors.

Visitors to the school are required to sign in and out at reception, where they will be given an identity badge which also contains safeguarding information. See APPENDIX FOUR of this policy for more details of procedures.

### **F. Prevent: Extremism and Radicalisation**

The Prevent strategy aims to stop people becoming terrorists or supporting terrorism and is a part of the school's overall safeguarding approach. Prevent defines extremism 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. Also included are calls for the death of our armed forces”**

Ripley Court has a duty to prevent people from being drawn in to terrorism and has assessed the risk to its children in this regard as low. This will be supported and continued by activity in the following areas:

- Having robust and effective Safeguarding policies and procedures
- Ensure all teaching staff have completed the Channel Awareness Training
- Ensure staff have the knowledge and confidence to identify children at risk and to challenge extremist views and ideas
- Ensure senior staff understand how to make a referral to the Channel programme
- Prevent children, through a robust filtering system, from accessing terrorist and extremist material when using the internet in school.
- Build children's resilience to radicalisation through the promotion of fundamental British values in the delivery of the curriculum and ensure these are reflected in the general life and conduct of the school
- Ensure the PSHE programme supports this delivery and encourages pupils to build positive character traits such as resilience, determination, self-esteem and confidence
- Check, with due diligence, the suitability of visiting speakers to the school
- DfE extremism hotline number – 020 7340 7264

## **Appendix One**

### **Recognising signs of child abuse**

From KCSIE:

- 36. Abuse:** a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or by another child or children.
- 37. 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.
- 38. Emotional abuse:** the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.
- 39. 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. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education.
- 40. Neglect:** 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, for example, 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.
- 41. 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

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- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour.

### **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

Be aware that children with learning difficulties, special needs to disabilities (SEND children) may be particularly vulnerable to 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/ 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/scars of different sizes/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
- A scapegoat 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/Peer on Peer abuse**

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, in appropriate 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. It may include peer on peer abuse including banter and sexting. Ref policies 10a Anti-bullying policy, 5 School Rules including ICT, mobile phones and Electronic Devices and 5A, Student Acceptable Rules policy.

### **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. Further information and advice is available in the Surrey multi-agency protocol “Working with Sexually Active Young People” available at [www.surreycc.gov.uk/safeguarding](http://www.surreycc.gov.uk/safeguarding), by choosing Safeguarding Children – Protocols and Guidance for Multi-Agency Safeguarding Hub (MASH) 0300 470 9100 can also assist professionals in identifying sexual behaviour of concern in children and adolescents.

### **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 Two**

### **Female Genital Mutilation (FGM)**

It is essential that staff are aware of FGM practices and how to look for signs, symptoms and other indicators. It is a legal responsibility to report any cases in U18s to the police as soon as possible but within 48 hours.

### **What is FGM?**

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 inner/outer labia
- Type 4 all other procedures: pricking, piercing, incising, cauterising, scraping genitals

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; helps her be hygienic
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- 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.

#### **Circumstances and occurrences that may point to FGM happening are:**

- 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 holiday abroad, e.g. being withdrawn or 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 we take action **without delay** and call the Contact centre.

## **Appendix Three**

### **Radicalisation And Extremism**

#### **Possible Indicators of Radicalisation**

##### **Vulnerability**

- Identity Crisis - Distance from cultural/ religious heritage and uncomfortable with their place in the society around them
- Personal Crisis – Family tensions; sense of isolation; adolescence; low self-esteem; disassociating from existing friendships, becoming involved with a new and different group of friends; searching for answers to questions about identity, faith and belonging
- Personal Circumstances – Migration; local community tensions; events affecting country or region of origin; alienation from UK values; having a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy

##### **Access to extremism / extremist influences**

- Is there reason to believe that the child associates with those known to be involved in extremism?
- Does the child frequent, or is there evidence to suggest that they are accessing the internet for the purpose of extremist activity?
- Is the child known to have possessed or is actively seeking to possess and/ or distribute extremist literature/ other media material likely to incite racial/ religious hatred or acts of violence?

##### **Experiences, Behaviours and Influences**

- Has the child encountered peer, social, family or faith group rejection?
- Is there evidence of extremist ideological, political or religious influence on the child from within or outside UK?
- Has there been a significant shift in the child's behaviour or outward appearance that suggests a new social/political or religious influence?
- Has the child come into conflict with family over religious beliefs/lifestyle/ dress choices?
- Does the child vocally support terrorist attacks; either verbally or in their written work?
- Has the child witnessed or been the perpetrator/ victim of racial or religious hate crime or sectarianism?

##### **Travel**

- Is there a pattern of regular or extended travel within the UK, with other evidence to suggest this is for purposes of extremist training or activity?
- Has the child travelled for extended periods of time to known extremist locations?

##### **Social Factors**

- Does the child have experience of poverty, disadvantage, discrimination/social exclusion?
- Does the child display a lack of affinity/understanding for others, or social isolation from peer groups?
- Does the child demonstrate identity conflict/confusion normally associated with youth development?
- Does the child have any learning difficulties/ mental health support needs?
- Does the child demonstrate a simplistic or flawed understanding of religion or politics?
- Does the child have insecure, conflicted or absent family relationships?
- Is there evidence that a significant adult or other in the child's life has extremist view or sympathies?

##### **More critical risk factors could include:-**

- Being in contact with extremist recruiters
- Articulating support for extremist causes or leaders

- Accessing extremist websites, especially those with a social networking element
- Possessing extremist literature
- Using extremist narratives and a global ideology to explain personal disadvantage
- Justifying the use of violence to solve societal issues
- Joining extremist organisations
- Significant changes to appearance and/or behaviour

## **Appendix Four**

### **Information and procedures for visitors to the Ripley Court School site:**

Visitors refer to Educational Psychologists, visiting speakers, volunteers, guests, other professional people and anybody who does not normally work on site. The following procedure needs to be followed:

#### **As soon as a booking has been made:**

Provide HM secretary (SG) with:

- full name, Date of Birth and date of their visit, if they have recent safeguarding training and if they have a DBS certificate (and if they have subscribed to the online update)

#### **It is the responsibility of the person who has made the booking to:**

- ensure SG has all the necessary information - full name, DOB, date of visit, DBS certificate number and date and if they have subscribed to the online update service prior to arrival.
- Enquire as to the details of what safeguarding training the person has had. The Deputy Headmaster (GR) will then decide whether there is a need for a brief meeting with the visitor on the day of arrival.
- ensure that the visitor is aware that photo ID (passport or drivers licence are the only acceptable documents) is required on the day of their visit and that they must bring their DBS certificate with them.

The front office has a green book at Reception. Staff must inform the office of any visitors by email or by writing in the book so they know to expect the visitor. For volunteers, some of these points may not apply or may not be required. In this case a risk assessment may be written by the Deputy Headmaster.

#### **On day of arrival:**

The Front office will make a copy of the persons' photo ID (passport or driving licence are the only acceptable documents) and sign and date on copy that they have seen the original. They will then call the Headmaster's secretary (SG) who will check the DBS. The Front office will sign the person in as normal.

### **DSL's: Gavin Ryan and Henrietta Wotherspoon, Safeguarding Governor: Dr. Sara Coe**

SSCB (Surrey Safeguarding Children's Board-0300 123 1630) and LADO (0300 123 1650 option 3) Ofsted Children's Services; Piccadilly Gate, Store Street, Manchester M1 2WD; Tel. 03001231231

ISI; CAP House, 9-12 Long Lane, London EC1A 9HA; Tel 020 7600 100

CP Whole-School Training last occurred: September 2018

A Legal Requirement & an ISI Reporting Standard,  
An OFSTED Reporting Standard for Boarding Schools, an EYFS standard

#### References:

- ISI Handbook (October 2015) [www.isi.net](http://www.isi.net)
- "The Early Years Foundation Stage: Statutory Framework 2008" ([www.teachernet.gov.uk](http://www.teachernet.gov.uk))
- "Keeping Children Safe in Education" (September 2018)
- "Working Together to Safeguard Children" (March 2015)
- DFE – The Prevent Duty (June 2015)
- Home Office FGM publication (October 2015)

Updated 10/18 AJG/GR