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Tower House School



SAFEGUARDING POLICY

This policy applied to EYFS, the Junior School & Senior School of Tower House School

What is safeguarding?

Safeguarding and promoting the welfare of children is defined for the purposes of this policy as:

Protecting children from maltreatment

Preventing impairment of children's health or development

Ensuring that children grow up in circumstances consistent with the provision of safe and effective care

Taking action to enable all children to have the best outcomes

Also

A moral and legal responsibility for children and young people under the age of 18, under the Children Act 1989 and 2004

Recognition that abuse may occur

Recognition that, when concerns are raised, non-action **is not** an option

Understanding that all children are entitled to be protected from harm or abuse (UN Convention Rights of the Child Article 19).

A framework and procedure setting out the action that must be taken where there are any concerns relating to the protection of children from harm or abuse.

Children includes everyone under the age of 18

The role of Tower House School

Everyone who comes into contact with children and their families has a role to play in safeguarding children. School staff are particularly important as they are in a position to identify concerns early and provide help for children, to prevent concerns from escalating.

(Source: Keeping Children Safe in Education: 2015)

What is Child Abuse?

Abuse is a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. They may be abused by an adult or adults or another child or children. Part one of KCSIE defines the following types of abuse.

PHYSICAL ABUSE

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating, or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Female Genital Mutilation (FGM) can also be a problem for girls. KCSIE (2015) highlights the need for professionals in all agencies, and individuals and groups in relevant communities, to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. FGM is illegal in the UK and is a form of child abuse with long-lasting harmful consequences.

There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Victims of FGM are likely to come from a community that is known to practise FGM. Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject.

Warning signs that FGM may be about to take place, or may have already taken place, can be found on pages 16-17 of the Multi-Agency Practice Guidelines, and Chapter 9 of those Guidelines focuses on the role of schools and colleges. Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

If a teacher discovers that an act of FGM appears to have been carried out on a girl who is aged under 18, there is a statutory duty upon that individual to report it to the police. Unless the teacher has a good reason not to, they should still consider and discuss any such case with the school's designated safeguarding lead and involve children's social care as appropriate.

Indicators in the child

Bruising

It is often possible to differentiate between accidental and inflicted bruises. The following must be considered as non accidental unless there is evidence or an adequate explanation provided:

- Bruising in or around the mouth
- 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, for example the back, mouth, cheek, ear, stomach, chest, under the arm, neck, genital and rectal areas
- 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
- Linear bruising at any site, particularly on the buttocks, back or face
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks to the upper arms, forearms or leg
- Petechiae haemorrhages (pinpoint blood spots under the skin.) Commonly associated with slapping, smothering/suffocation, strangling and squeezing

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint. It is unlikely that a child will have had a fracture without the carers being aware of the child's distress. If the child is not using a limb, has pain on movement and/or swelling of the limb, there may be a fracture.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent

- 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
Rib fractures are only caused in major trauma such as in a road traffic accident, a severe shaking injury or a direct injury such as a kick.
Skull fractures are uncommon in ordinary falls, i.e. from three feet or less. The injury is usually witnessed, the child will cry and if there is a fracture, there is likely to be swelling on the skull developing over 2 to 3 hours. All fractures of the skull should be taken seriously.

Mouth Injuries

Tears to the frenulum (tissue attaching upper lip to gum) often indicates force feeding of a baby or a child with a disability. There is often finger bruising to the cheeks and around the mouth. Rarely, there may also be grazing on the palate.

Poisoning

Ingestion of tablets or domestic poisoning in children under 5 is usually due to the carelessness of a parent or carer, but it may be self-harm even in young children.

Fabricated or Induced Illness

Professionals may be concerned at the possibility of a child suffering significant harm as a result of having illness fabricated or induced by their carer. Possible concerns are:

- Discrepancies between reported and observed medical conditions, such as the incidence of fits
- Attendance at various hospitals, in different geographical areas
- Development of feeding / eating disorders, as a result of unpleasant feeding interactions
- The child developing abnormal attitudes to their own health
- Non organic failure to thrive - a child does not put on weight and grow and there is no underlying medical cause
- Speech, language or motor developmental delays
- Dislike of close physical contact
- Attachment disorders
- Low self esteem
- Poor quality or no relationships with peers because social interactions are restricted
- Poor attendance at school and under achievement

Bite Marks

Bite marks can leave clear impressions of the teeth when seen shortly after the injury has been inflicted. The shape then becomes a more defused ring bruise or oval or crescent shaped. Those over 3cm in diameter are more likely to have been caused by an adult or older child.

A medical/dental opinion, preferably within the first 24 hours, 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. Scalds are the most common intentional burn injury recorded.

Any burn with a clear outline may be suspicious e.g. circular burns from cigarettes, 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.

Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation. Scalds to the buttocks of a child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath. The following points are also worth remembering:

- A responsible adult checks the temperature of the bath before the child gets in.
- A child is unlikely to sit down voluntarily in a hot bath and cannot accidentally scald its bottom without also scalding his or her feet.
- A child getting into too hot water of his or her own accord will struggle to get out and there will be splash marks

Scars

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

Emotional/behavioural presentation

- Refusal to discuss injuries
- Admission of punishment which appears excessive
- Fear of parents being contacted and fear of returning home
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather Fear of medical help
- Aggression towards others. Frequently absent from school
- An explanation which is inconsistent with an injury Several different explanations provided for an injury

Indicators in the parent/Carer

- May have injuries themselves that suggest domestic violence
- Not seeking medical help/unexplained delay in seeking treatment Reluctant to give information or mention previous injuries
- Absent without good reason when their child is presented for treatment Disinterested or undisturbed by accident or injury
- Aggressive towards child or others Unauthorised attempts to administer medication
- Tries to draw the child into their own illness.
- Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
- Parent/carer may be over involved in participating in medical tests, taking temperatures and measuring bodily fluids
- Observed to be intensely involved with their children, never taking a much needed break nor allowing anyone else to undertake their child's care.
- May appear unusually concerned about the results of investigations which may indicate physical illness in the child
- Wider parenting difficulties may (or may not) be associated with this form of abuse. Parent/carer has convictions for violent crimes.

Indicators in the family/environment

- Marginalised or isolated by the community
- History of mental health, alcohol or drug misuse or domestic violence
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

EMOTIONAL ABUSE

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children 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 the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.

It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.

Indicators in the child

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Aggressive behaviour towards others Child scapegoated 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 Over-reaction to mistakes
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking) Self harm
- Fear of parents being contacted Extremes of passivity or aggression
- Drug/solvent abuse Chronic running away Compulsive stealing
- Low self-esteem
- Air of detachment – 'don't care' attitude
- Social isolation – does not join in and has few friends
- Depression, withdrawal
- Behavioural problems e.g. aggression, attention seeking, hyperactivity, poor attention Low self esteem, lack of confidence, fearful, distressed, anxious
- Poor peer relationships including withdrawn or isolated behavior

Indicators in the parent

- Domestic abuse, adult mental health problems and parental substance misuse may be features in families where children are exposed to abuse.
- Abnormal attachment to child e.g. overly anxious or disinterest in the child Scapegoats one child in the family
- Imposes inappropriate expectations on the child e.g. prevents the child's developmental exploration or learning, or normal social interaction through overprotection.
- Wider parenting difficulties may (or may not) be associated with this form of abuse

Indicators of in the family/environment

- Lack of support from family or social network. Marginalised or isolated by the community.
- History of mental health, alcohol or drug misuse or domestic violence.
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.

NEGLECT

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
 - protect a child from physical and emotional harm or danger;
 - ensure adequate supervision (including the use of inadequate care-givers); or
 - ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Indicators in the child

- Physical presentation
- Failure to thrive or, in older children, short stature, underweight
- Frequent hunger
- Dirty, unkempt condition
- Inadequately clothed, clothing in a poor state of repair
- Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold
- Swollen limbs with sores that are slow to heal, usually associated with cold injury
- Dry, sparse hair
- Recurrent / untreated infections or skin conditions e.g. severe nappy rash, eczema or

persistent head lice / scabies/ diarrhoea

- Unmanaged / untreated health / medical conditions including poor dental health/ frequent accidents or injuries

Development

- General delay, especially speech and language delay
- Inadequate social skills and poor socialization

Emotional/behavioural presentation

- Attachment disorders
- Absence of normal social responsiveness
- Indiscriminate behaviour in relationships with adults
- Emotionally need
- Compulsive stealing
- Constant tiredness
- Frequently absent or late at school
- Poor self esteem
- Destructive tendencies
- Thrives away from home environment
- Aggressive and impulsive behaviour
- Disturbed peer relationships
- Self harming behaviour

Indicators in the parent

- Dirty, unkempt presentation Inadequately clothed
- Inadequate social skills and poor socialisation Abnormal attachment to the child .e.g. anxious Low self esteem and lack of confidence
- Failure to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene
Failure to meet the child's health and medical needs e.g. poor dental health; failure to attend or keep appointments with health visitor, GP or hospital; lack of GP registration; failure to seek or comply with appropriate medical treatment; failure to address parental substance misuse during pregnancy
- Child left with adults who are intoxicated or violent Child abandoned or left alone for excessive periods
- Wider parenting difficulties, may (or may not) be associated with this form of abuse

Indicators in the family/environment

- History of neglect in the family
- Family marginalised or isolated by the community.
- Family has history of mental health, alcohol or drug misuse or domestic violence. History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Family has a past history of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.
- Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
- Poor state of home environment e.g. unhygienic facilities, lack of appropriate sleeping arrangements, inadequate ventilation (including passive smoking) and lack of adequate heating
- Lack of opportunities for child to play and learn

SEXUAL ABUSE

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.

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something as a result of engaging in sexual activities. The perpetrator always holds some kind of power over the victim.

The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.

They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet).

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

Indicators in the child

- Physical presentation
- Urinary infections, bleeding or soreness in the genital or anal areas Recurrent pain on passing urine or faeces
- Blood on underclothes Sexually transmitted infections Vaginal soreness or bleeding
- Pregnancy in a younger girl where the identity of the father is not disclosed and/or there is secrecy or vagueness about the identity of the father
- 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

Emotional/behavioural presentation

- Demonstrates sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
- Inexplicable changes in behaviour, such as becoming aggressive or withdrawn Self-harm – eating disorders, self-mutilation and suicide attempts
- Poor self-image, self-harm, self-hatred Reluctant to undress for PE
- Running away from home
- Poor attention / concentration (world of their own)
- Sudden changes in school work habits, become truant Withdrawal, isolation or excessive worrying
- Inappropriate sexualised conduct
- Sexually exploited or indiscriminate choice of sexual partners Wetting or other regressive behaviours e.g. thumb sucking Draws sexually explicit pictures
- Depression

Indicators in the parents

- Comments made by the parent/carer about the child. Lack of sexual boundaries
- Wider parenting difficulties or vulnerabilities, may (or may not) be associated with this form of abuse
- Grooming behaviour Parent is a sex offender

Indicators in the family/environment

- Marginalised or isolated by the community.
- History of mental health, alcohol or drug misuse or domestic violence.
- History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
- Past history of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault or a culture of physical chastisement.
- Family member is a sex offender

In addition to all the above signs a child may disclose an experience in which he/she may have been harmed, or there may be any other cause to believe that a child may be suffering harm.

Abuse often comes to peoples' notice through:-

Disclosure by the child

Information provided by a third party

Observation, unexplained injury, changes in behaviour.

INTRODUCTION

Tower House School recognises that, under the Children Act of 2004, it has a statutory duty and responsibility for making arrangements to ensure all its functions are discharged having regard to safeguarding and promoting the welfare of children. This is reflected in the statutory guidance found in 'Working Together to Safeguard Children (2015)' and 'Keeping Children Safe in Education' (July 2015)

Through their day-to-day contact with pupils and direct work with families and carers, all staff at the school have a crucial role to play in noticing indicators of possible abuse or neglect and referring them to the appropriate agency. In most cases this would be the London Borough of Richmond Children's Social Care (See below for contact, Email addresses and telephone numbers). The school acknowledges that through raising awareness and understanding of the main manifestations of abuse, and making sure that all staff are aware of and confident in the procedures to follow if they suspect abuse, this will further safeguard the pupils and the adults working with them.

This policy sets out how the school's governing body discharges its statutory responsibilities relating to safeguarding and promoting the welfare of children who are pupils at this school including within the EYFS.

There are four main elements to our policy:

PREVENTION through the teaching and pastoral support offered to pupils and the creation and maintenance of a whole school protective ethos

PROCEDURES for identifying and reporting cases, or suspected cases, of abuse.

SUPPORT TO PUPILS who may have been abused.

SAFER RECRUITMENT PROCEDURES (Keeping Children Safe in Education [2015]) TO PREVENT UNSUITABLE PEOPLE FROM WORKING WITH CHILDREN

Our policy applies to all staff working in the school including academic staff, assistants, support staff and governors.

Safeguarding incidents could happen at any time and at any location. All staff must be alert to the possibility of concerns being raised within the school, on day excursions or residential trips. This requires staff to be open-minded and sensitive to the possibility of children disclosing information (See Responding to Disclosure of Abuse below).

PREVENTION

We recognise that high levels of self-esteem, confidence, supportive friends and open and clear lines of communication with a trusted adult help to protect children.

All adults who work with pupils at Tower House School are subject to checks by the Disclosure and Barring Service.

Volunteers working at the school will be subject to an Enhanced with Barred check.

Governors of the school will be subject to an Enhanced check.

All adults working at Tower House has been issued 'Keeping Children Safe in Education Statutory Guidance of Schools and Colleges'. All staff have read, understand and follow this document. (Records of compliance are retained by the DSL.)

PROCEDURES

The Role of the Designated Safeguarding Lead (DSL) [Including EYFS]

Tower House School via the role of DSL will:

Establish and maintain an ethos where the boys feel secure and are encouraged to talk, and are listened to with respect and sensitivity;

Ensure boys know that there are adults in the school whom they can approach if they are worried or in difficulty;

Include in the curriculum activities and opportunities for PSHE which equip the boys with the skills they need to stay safe from abuse and information about who to turn for help;

Include in the curriculum material which will help the boys develop realistic attitudes to the responsibilities of adult life, particularly with regard to child care and parenting skills.

Ensure it has a Designated Safeguarding Lead (DSL) who has undertaken as a minimum, a child protection training course (Level 3) with inter agency working every two years. (This has been agreed after consultation with Richmond LSCB). As required in *Keeping Children Safe in Education* (2014) the DSL at Tower House is a member of the Senior Management Team.

**The DSL/Prevent Lead at Tower House School is Justin Ryan.
In his absence, the Deputy Safeguarding Officer/ Prevent Lead is Gregory Evans.
These officers are responsible for EYFS**

Ensure that the DSL will coordinate and lead all matters concerning Safeguarding and Child Protection;

Ensure that all staff receive suitable training in Safeguarding which is updated at least every 2 years;

Recognise the importance of the role of the Designated Safeguarding Lead and ensure he has the time and training to undertake his duties;

Ensure that the DSL will make contact with the London Borough of Richmond LSCB.

Staff Training

- The DSL and Deputy are trained to Level 3 (Richmond LSCB). In addition, the DSL attends regular seminars and training events run by Richmond LSCB, Independent Schools Safeguarding Groups and Prep Schools Cluster Meetings.
- The Chair of Governors / Headmaster / Deputy Headmaster / DSL are trained in Safer Recruitment.
- All adults working at the school are trained to a minimum of Level 1.
- Tower House aims to have all staff who come into contact with children trained to be trained at level 2 as expeditiously as possible.
- All new members of staff (teaching, administration, catering and facilities) are given a Safeguarding Induction course by the DSL / Deputy DSL on commencement of work or prior to that date. [This includes those working in EYFS] The Governor with responsibility for Safeguarding provides training to all staff every two years.
- The DSL is WRAP Awareness Trained.
- All teaching staff have completed Channel Awareness online training.

The Role of Governors and School Staff

The governing body fully recognises its responsibilities with regard to child protection and to safeguarding and promoting the welfare of children.

- This body will:
 - Designate a governor for child protection who will oversee the school's child protection policy and practice and champion child protection issues.
- Ensure that the Governors undertake an annual review of the school's Child Protection Policy and Procedures and of the efficiency with which the related duties have been discharged.

The DSL will submit to the governing body an Annual Safeguarding Report. This report will allow the governing body to ensure the school's compliance, highlight any issues and plan for improvements. This report will include any Safeguarding issues within EYFS.

Ensure that every member of staff [including EYFS] and every Governor knows the name of the DSL and his role. The Governor responsible for Safeguarding is **Mr Alex Wilson**.

The Governor responsible for safeguarding, working with the DSL, will compile a Safeguarding report for submission to the governing body. The minutes of governing body's review will accurately reflect the breadth and depth of the review.

Inform every member of staff [including EYFS] that they have an individual responsibility for referring child protection concerns using the proper channels.

Provide training for all staff [including EYFS] from the point of their induction, and update this every three years at a minimum, so that they know:-

- their personal responsibility,
- the need to be vigilant in identifying cases of abuse
- how to support and to respond to a child who tells of abuse

Ensure that all staff and volunteers recognise their duty and feel able to raise concerns about poor or unsafe practice in regard to children and that such concerns are addressed sensitively and effectively in a timely manner.

Ensure that the behaviour and actions of staff do not place pupils or themselves at risk of harm or of allegations of harm to a pupil (see "Code of Conduct and Acceptable Behaviour Code.")

The governing body must consider how children may be taught about safeguarding issues (including online) through the wider curriculum and PSHE.

The governing body should ensure that all staff [Including EYFS] have the skills, knowledge and understanding to keep children safe who are in the care of the local authority.

Liaison with Other Agencies

Tower House School will:

Work to develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters. This includes the production of CAF reports, attendance and written reports at initial Child Protection Conferences, core groups and child protection review conferences;

Notify the local Social Services team if:-

- it should have to exclude a pupil on the child protection register (whether fixed term or permanently)
 - there is an unexplained absence of a pupil on the child protection register of more than two days duration from school (or one day following a weekend);
 - or as agreed as part of any child protection or core group plan.
 - Richmond LADO will be informed in all cases where allegations have been made of inappropriate behaviour by any person who works with children at Tower House School.
- These provisions cover EYFS.

Record Keeping

Tower House School will:

Ensure that all staff who work with children share concerns with the DSL in writing. Staff will keep clear detailed, dated and contemporaneous written records of concerns (see separate Record of Concern form) about children (noting the day, date, details of conversations [if appropriate] event and action taken). These procedures will be followed even where it transpires that there is no need to refer the matter to Social Services immediately;

Ensure all records are kept secure and in locked locations;

Ensure all relevant child protection records are sent to the receiving school or establishment when a pupil moves schools or onwards from the Tower House EYFS.

The DSL has responsibility to ensure these protocols are upheld. These protocols apply to EYFS.

Confidentiality and information sharing

Staff will ensure confidentiality protocols are adhered to and information is shared appropriately (see below). If in any doubt about confidentiality, staff will seek advice from the DSL, the Deputy DSL or other Senior Manager.

The DSL will disclose any information about a pupil to other members of staff on a need to know basis only.

All staff must be aware that they have a professional responsibility to share information with other agencies via the Designated Senior Lead in order to safeguard children.

NB: Any 'individual with concerns may refer to children's social care directly'.

(Keeping Children Safe in Education 2015).

Any member of staff who has a concern regarding 'protecting children from maltreatment; preventing impairment of children's health or development; ensuring that children grow up in circumstances consistent with the provision of safe and effective care; and taking action to enable all children to have the best outcomes.' must take action. (To reiterate:- **Inaction is not an option.**) Any member of staff should complete a Record of Concern form as fully as possible, and hand it to the Designated Safeguarding Lead (or Deputy). If the DSL believes the child requires additional support from one or more agencies, a Common Assessment Framework (CAF) Pre-Asst. checklist is completed. If the DSL (or Deputy) believes the child has suffered from or is likely to suffer significant harm then Children's Social Care must be informed immediately. This includes EYFS.

Responding to Allegations or Disclosures

Listening to a child disclose abuse is a challenging and difficult process but one that is vital if the best outcomes for the child are to be reached. The adult who listens to the disclosure

must do so sensitively, patiently and in a non-judgemental manner. They must allow the child to tell their story in their own time and in their own words.

- ✓ Never promise to keep a secret / maintain confidentiality.
- ✓ Remain calm and 'neutral'. Be aware of your non-verbal & verbal communication.
- ✓ Listen, give the child your full attention, time and privacy. (Remembering to conduct the meeting in a room with the door open and maintaining 'sightlines' to other staff.)
- ✓ Only ask open-ended questions for clarification purposes. Encourage the child to talk spontaneously. [This will not put any future investigation at risk.]
- ✓ Reassure the child that they have done nothing wrong; they are not to blame.
- ✓ Explain what you will do next.
- ✓ Make a written record ASAP using the child's exact words whenever possible. [This will form a vital piece of evidence in any subsequent investigation.] Make clear differences between fact, opinion & hearsay.
- ✓ Note how the child presents themselves – behaviour and any physical symptoms of potential abuse you see.
- ✓ Report the matter to the DSL / Children's Social Care Team. [Written records should travel with the report to the DSL or Children's Social care Team.]
- ✓ Tell the child what steps will be taken and who will be informed.
- ✓ Consider the child's immediate safety.

Allegations of Abuse Against Teachers & Other Staff

An allegation is any information which indicates that a member of staff or volunteer may have:

- Behaved in a way that has or may have harmed a child.
- Possibly committed a criminal offence against or related to a child.
- Behaved towards a child [or children] in such a way that indicates he or she would pose a risk of harm if they worked closely with a child.

This applies to *any child* [Including EYFS] the member of staff / volunteer has contact with in their personal, professional or community life.

When an allegation is received by a member of staff, they must:

- Take the matter seriously.
- Do not investigate.
- Do not promise confidentiality to the informant.
- Make a written record of the allegation using (as far as possible) the informant's own words and as contemporaneously as possible. [Include time, date & place of the alleged incident.] Sign and date the record.
- Inform immediately the DSL. If the concerns relate to the Headteacher then the Designated Governor for Child Protection should be contacted.
- The DSL will immediately contact Richmond LADO.
- The DSL will inform the Headmaster.
- No decisions should be taken without reference to Richmond LADO.
- Written records must be created, as contemporaneously as possible, of all discussions with relevant individuals.

Disclosure of Abuse from One or More Pupils Against Another

In the event of one pupil making a disclosure about another pupil or pupils when there is reasonable cause to suspect that a child is suffering or is likely to suffer significant harm, the general principles of listening and reporting to the DSL remains the same. Many factors could lead to one child abusing another and often they themselves are being abused. It is vital therefore that each disclosure be treated purely on the facts and no one prescribed solution can be seen as a best fit. The reporting arrangements, including contact with Richmond Borough within 24 hours of a disclosure of abuse, are the same as for any case of abuse and the procedures set out in this policy will be followed. In the event of disclosures about pupil on pupil abuse there is an expectation that all children involved, whether perpetrator or victim, are treated as being "at risk".

Communication with Parents

Tower House School will:-

Retain the right to seek advice as necessary, in the first instance, from Local Authorities or Children's Social Care Services with regards to clarification as to whether or not there is a suspicion of abuse or whether a child is considered at to be at risk. This advice will not be deemed as a referral, but in effect a request for further support and advice.

We recognise that it is particularly important that Children's Social Care department and Local Safeguarding Children Boards establish effective channels of communication with Independent schools such as ourselves, so children requiring support receive prompt attention and any allegations of abuse can be properly investigated.

However, it is always our aim to involve parents in referrals before they are made. If a suspicion of abuse is identified arising from the Common Assessment Framework Pre-Assessment checklist, and a child is considered at risk, an immediate referral will be made to the local authority team and this process will be in collaboration with the involvement of parents. However, if the child's welfare is deemed to be at further risk by sharing the concern with parent(s), they will not be informed at this stage.

Ensure that parents have an understanding of the responsibility placed on the school and staff for child protection by setting out its obligations via this policy on the school website.

At the end of any referral discussion the referrer and Local Authority Children's Social Care department should be clear about proposed action, timescales and who will be taking it, or that no further action will be taken.

Recording and Reporting Suspicions of Abuse and Disclosures

Staff make a Record of Concern:

- The child's name; address, date of birth;
- The day, date and time of the observation or the disclosure;
- An objective record of the observation or disclosure;
- The exact words spoken by the child;
- The name of the person to whom the concern was reported, with date and time;
- The names of any other person present at the time.

These records are signed and dated and kept in a separate confidential file by the DSL. The member of staff will discuss the incident with the Designated Senior Person and a decision will be made about who should be notified. If a child's safety is at risk the local authority team will be contacted immediately (at least within 24 hours). We will take advice from them regarding information then given to parents.

NB: Any 'individual with concerns may refer to children's social care directly'.
(Keeping Children Safe in Education 2015).

In a case where a child is not in immediate danger we try to discuss the matter with parents before making any referrals. However it is the welfare of the child which is paramount and this is at the forefront of all our actions. We are aware that many children have suffered because of lack of communication between agencies, and that current guidance encourages the full sharing of information. We shall therefore use our professional judgment in sharing information with the agencies that 'need to know', being open and honest with parents and children as to why we feel we need to share the information.

Full records of conversations will be maintained when any referrals or discussions are held with any other agencies or with parents prior to a referral. These records will include dates and times of the conversation, who we speak to, and the advice we were given.

Mobile Phones

Any pupil who brings a mobile phone to school must hand it in to the school office upon arrival at school. It may be collected from the member of staff on duty at the end of the day.

All staff members must:

- ✓ Keep mobile phones out of sight when in contact with children.
- ✓ Set mobile phones to 'silent' or switch off when in direct contact with children.
- ✓ Not answer mobile calls / SMS messages when in direct contact with children.
- ✓ Ensure mobile phones are 'locked' to prevent malicious use if lost / stolen.
- ✓ Abide by the school's policy on photography and not use such devices to take pictures, make recordings etc.

Mobile phones are prohibited from use in EYFS.

Child Sexual Exploitation and Female Genital Mutilation (FGM)

Children under 16 cannot, by law, consent to sexual intercourse. Anyone engaging in sexual activity with a child is committing an offence. It is illegal for those under 18 to be paid for sexual services in money or in kind. All children involved in sexual exploitation should be treated as victims of abuse. In essence, the definition of sexual exploitation is characterised by children receiving goods, favours or money in return for sexual activities. In all such exploitation the balance of power remains with the abuser(s) through age, intellect or resources. Concern that a child may be involved in sexual exploitation or at risk of being drawn into it should always initiate action to ensure the child's safety and welfare.

Since 1985 it has been a serious criminal offence (Prohibition of Female Circumcision Act) to perform (or to assist in the performance) of FGM. This was further tightened. (The Female Genital Mutilation Act 2003.)

Any concern regarding FGM or the preparation of a girl for FGM by a member of the Tower House or wider community must be reported to Children's Social Care and the Police immediately. This follows the 'One Chance' protocols relating to FGM, forced marriage and honour based violence.

Signs of Female Genital Mutilation This is most likely to be identified through disclosures, but other indicators can be found here:

<https://www.gov.uk/government/publications/female-genital-mutilation-guidelines>

Radicalisation

The Counter-Terrorism and Security Act (2015), places a duty on specified authorities, including schools to have due regard to the need to prevent people from being drawn into terrorism ("the Prevent duty"). School staff should be aware of and able to recognise engagement, intent and capability factors which indicate that a person may be vulnerable to being drawn into terrorism.

Indicators for vulnerability to radicalisation are:

- Family tensions
- Sense of isolation
- Low self-esteem./feeling of failure.
- Migration / distance from cultural heritage
- Events affecting the pupil's country or region of origin
- A sense of grievance triggered by personal experience

Early indicators of radicalisation or extremism may include:

- Becoming involved with a new group of friends
- Searching for answers to questions about identity, faith and belonging
- Expressions of support for terrorism, justifying the use of violence to solve real or perceived grievances
- Possessing or accessing extremist materials
- Changes in behaviour and language

(It is important to note that children and young people experiencing these situations or displaying these behaviours are not necessarily showing signs of being radicalised. There could be many other reasons for the behaviour including those detailed in this policy.)

The school has carried out a Prevent Risk Assessment for its pupils. Concerns about a pupil thought to be at risk of radicalisation or of being drawn into terrorism must be referred in accordance with the school's safeguarding procedures: staff must report concerns immediately to the DSL or the Deputy DSL in the first instance; advice will be sought from CSC and a referral will be made where this is deemed necessary. Additionally, staff can also contact the local police force or dial 101. The police can talk to you in confidence about your concerns and help you gain access to support and advice.

The Department for Education also has a dedicated telephone helpline (020 7 340 7264) to enable staff and governors to raise concerns relating to extremism directly. Concerns can also be raised by email to counter.extremism@education.gsi.gov.uk. Note that the helpline is not intended for use in emergency situations, such as a child being at immediate risk of harm or a security incident, in which case the normal emergency procedures should be followed. The Counter-Terrorism and Security Act 2015 places a duty on local authorities to ensure Channel panels are in place. The panel must include the local authority and chief officer of the local police. Panels will assess the extent to which identified individuals are vulnerable to being drawn into terrorism, following a referral from the police and where considered appropriate and necessary consent is obtained, arrange for support to be provided to those individuals. The Act requires partners of Channel panels to co-operate with the panel in the carrying out of its functions and with the police in undertaking the initial assessment as to whether a referral is appropriate. Schools and colleges which are required to have regard to Keeping Children Safe in Education are listed in the Act as partners of the panel. The school will have regard to the Prevent guidance with regards to visiting speakers and will ensure that, whether invited by staff or by the pupils themselves, they are both suitable and appropriately supervised for the duration of their visit.

Additional support / advice can be obtained from:

PC Rick Warrington, Metropolitan Police SO15 – Local Operations: 07767007716

E: Richard.warrington@met.pnn.police.uk

All THS teaching staff will undertake on-line Channel training to ensure they are aware of real life scenarios of radicalisation.

Prevent Duty – Online Safeguarding

THS's online platform is provided by CensorNet. CensorNet is BECTA accredited.

Member of the Internet watch Foundation. This product is not only a web filter but we also cover Cloud Applications, ie Facebook.

THS Administrators have visibility of the actions they perform in that environment via your network. THS Administrators can set criteria to flag alerts etc. All of the above apply to Anti-Radicalisation procedures and awareness.

THS ICT Administrator monitors online activities of pupils using THS applications and hardware. Interventions are made if appropriate.

Suitability Checks on Staff at Organisations other than Tower House

When pupils visit third party organisations, evidence of appropriate DBS checks and Safeguarding procedures are obtained and assessed by THS staff. When pupils visit residential settings appropriate Safeguarding training and DBS clearances are also sought.

Child Missing from Education

All children, regardless of their circumstances, are entitled to a full time education which is suitable to their age, ability, aptitude and any special educational needs they may have. Local authorities have a duty to establish, as far as it is possible to do so, the identity of children of compulsory school age who are missing education in their area. A child going missing from education is a potential indicator of abuse or neglect. School staff should follow the school's procedures for dealing with children that go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of their going missing in future. The school has in place appropriate safeguarding policies, procedures and responses for children who go missing from education, particularly on repeat occasions. It is essential that all staff are alert to signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns such as travelling to conflict zones, FGM and forced marriage. The law requires all schools to have an admission register and an attendance register. All pupils must be placed on both registers.

The school will inform their local authority of any pupil who is going to be deleted from the admission register where they:

- have been taken out of school by their parents and are being educated outside the school system e.g. home education;
- have ceased to attend school and no longer live within reasonable distance of the school ;
- have been certified by a suitable medical professional as unlikely to be in a fit state of health to attend school before ceasing to be of compulsory school age, and neither he/she nor his/her parent has indicated the intention to continue to attend the school after ceasing to be of compulsory school age;
- are in custody for a period of more than four months due to a final court order and the Head does not reasonably believe they will be returning to the school at the end of that period; or,
- have been permanently excluded.

The local authority must be notified when a school is to delete a pupil from its register under the above circumstances. This should be done as soon as the grounds for deletion are met, but no later than deleting the pupil's name from the register. It is essential that schools comply with this duty, so that local authorities can, as part of their duty to identify children of compulsory school age who are missing education, follow up with any child who might be in danger of not receiving an education and who might be at risk of abuse or neglect. All schools must inform the local authority of any pupil who fails to attend school regularly, or has been absent without the school's permission for a continuous period of 10 school days or more, at such intervals as are agreed between the school and the local authority (or in default of such agreement, at intervals determined by the Secretary of State).

Supporting The Pupil At Risk

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self worth and to view the world as benevolent and meaningful. They may feel helplessness, humiliation and some sense of self-blame. This school may be the only stable, secure and predictable element in the lives of children at risk.

Nevertheless, when at school their behaviour may be challenging and defiant or they may be withdrawn and difficult to engage.

We recognise that some children actually adopt abusive behaviours and that these children must be referred on for appropriate support and intervention.

The school will endeavour to support the pupil through:

- The content of the curriculum to encourage self-esteem and self- motivation.
- The school ethos which (i) promotes a positive, supportive and secure environment (ii) gives pupils a sense of being valued
- The school's behaviour policy, which is aimed at supporting vulnerable pupils in the school.
- Ensuring all staff will agree on a consistent approach, which focuses on the behaviour of the offence committed by the child but does not damage the pupil's sense of self worth.
- Ensuring that the pupil knows that some behaviour is unacceptable but he is valued and not to be blamed for any abuse which has occurred;
- Recognition that children living in a home environment where there is domestic violence, drug or alcohol abuse are vulnerable and in need of support and protection;
- Vigilantly monitoring children's welfare, keeping records and notifying Social Services **as soon as there is a recurrence of a concern.**
- When a pupil on the child protection register leaves, information will be transferred to the new school immediately.

Looked After Children

Tower House School recognises the increased vulnerability of Looked After Children. ('Looked After Children' is generally used to mean those looked after by the state, according to relevant national legislation. This includes those who are subject to a care order or temporarily classed as looked after on a planned basis for short breaks or respite care.)

As such the school will record those children who are looked after and be especially vigilant for signs and symptoms of abuse.

Drug Use and Child Protection

The discovery that a young person is using illegal drugs or reported evidence of their drug use is not necessarily sufficient in itself to initiate child protection proceedings but the school will consider such action in the following situations:

- When there is evidence or reasonable cause.
- To believe the young person's drug misuse may cause him or her to be vulnerable to other abuse such as sexual abuse.
- To believe the pupil's drug related behaviour is a result of abusing or endangering pressure or incentives from others, particularly adults.
- Where the misuse is suspected of being prompted by serious parent/ carer drug misuse.

Children of Drug Using Parents

Further enquiries and or further action will be taken when the school receives reliable information about drug and alcohol abuse by a boy's parents/carers in the following circumstances;

- The parental misuse is regarded as problematic (i.e. multiple drug use including injection);

- A chaotic and unpredictable home environment exists which can be attributed to drug or alcohol misuse;
- Boys are not being provided with acceptable or consistent levels of social and health care;
- Boys are exposed to criminal behaviour.

SAFER RECRUITMENT

- The school has a Safe Recruitment Policy which ensures operation of safe recruitment procedures and complies with 'Keeping Children Safe in Education' (2015) and Independent School Standards Regulations. We obtain assurance from any other organisation working within the school that appropriate child protection checks have been obtained and hold copies of their Safer recruitment policies where appropriate.
- Applicants for posts within the school are subject to Right to Work in the UK check. Those applying for teaching positions are also (from April 2012) subject to a Prohibition Order check.
- Applicants for posts within the school are clearly informed that the positions are exempt from the Rehabilitation of Offenders Act 1974. Candidates are informed of the need to carry out Enhanced checks together with Barred List checks by the Disclosure and Barring Service and take-up references, identity and qualification checks before posts can be confirmed. Where applications are rejected because of information that has been disclosed, applicants have the right to know and to challenge incorrect information.
- We abide by ISI requirements in respect of references and police checks for staff and volunteers, to ensure that no disqualified person or unfit person works at the school or has access to the children
- We abide by the requirements of the Education (Provision of Information by Independent School) (England) Regulations 2003 in respect of any person who leaves our employment, in that we will report to the DBS and the National College for Teaching and Leadership, within one month of leaving, details of any member of staff whose services are no longer used because he or she is considered unsuitable to work with children. Compromise agreements do not apply in this connection and we recognise that failure to do so would constitute an offence.
- We have procedures for recording the details of visitors to the school.
- We take security steps to ensure that we have control over who comes into the school so that no unauthorised person has unsupervised access to the children.
- The School will bar adults from employment on the grounds of Association with a Known Offender.
- The school will ensure that staff and volunteers are aware that sexual relationships with pupils aged under 18 are unlawful and could result in legal proceedings taken against them under the Sexual Offences Act 2003 (Abuse of position of trust).
- These protocols cover the recruitment of staff into EYFS.

REASONS FOR THE TERMINATION OF EMPLOYMENT

- The cessation of employment includes dismissal, non-renewal of a fixed term contract, no longer engaging a supply teacher, termination of a placement of a student teacher or trainee, no longer using volunteers, resignation and voluntary withdrawal from supply teaching or other employment. Reports must include as much detail as possible. Failure to do so is an offence. 'Compromise Agreements' cannot apply in this context or when an individual refuses to cooperate with an investigation. The school has a duty to comply with requests for information which it holds from the DBS.
- Employment should be terminated when, through investigation by the appropriate agencies, it has been shown that "unacceptable professional conduct", "conduct that may bring the profession into disrepute" or a "conviction, at any time, for a relevant offence". (Further clarification is available from the NCTL website)

OTHER RELATED POLICIES AND DOCUMENTS

Restraint

Our policy on restraint by staff is set out in a separate document. We acknowledge that staff must only ever use physical intervention as a last resort, and that at all times it must be the minimum force necessary to prevent injury themselves, another person or property

Staff facing an allegation of abuse.

Our policy on staff facing an allegation of abuse is set out in a separate document.

Bullying

Our policy on bullying is set out in a separate document. We acknowledge that to allow or condone bullying may lead to consideration under child protection procedures.

Health and Safety

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

Children with Special Educational Needs

We recognise that statistically children with behavioural difficulties and disabilities are most vulnerable to abuse. School staff who deal with children's special educational needs or emotional and behavioural problems are particularly sensitive to signs of abuse.

The Use of the Internet

Our policy on Use of the Internet is set out in a separate document and is reviewed annually by the Governing Body. We recognise that teachers are encouraging the use of the Internet to promote learning throughout the curriculum. The guidance focuses on the personal safety and well being of pupils in the school and sets out a number of points to clarify the potential hazards and steps that staff can take to minimise risks.

Policy for Education Visits and Residential Trips.

Our policy for Educational Visits and Residential Trips is set out in a separate document. We recognise that all Child Protection procedures should continue to be observed on all educational and residential trips. Risk Assessments are a vital part of the Health and Safety procedures undertaken prior to these trips.

BEFORE AND AFTER SCHOOL ACTIVITIES

When the school provides extended school facilities (before or after school) activities directly under the supervision or management of school staff, the school's arrangements for Safeguarding as written in this policy shall apply.

PERSONNEL AND EMERGENCY CONTACT DETAILS

Designated Safeguarding Lead:

Justin Ryan

T: 07885100009

E: ryan@thsboys.org.uk

Deputy Safeguarding Lead:

Gregory Evans

T: 07739803453

E: head@thsboys.org.uk

Health and Safety Officer:	Jackie Griffiths. E: Griffiths@thsboys.org.uk
SENCO:	Anna Patel E: patel@thsboys.org.uk
Designated Governor for Child Protection:	Alex Wilson T: 07539 301063 E: AGW@StPaulsSchool.org.uk
Chair of Governors:	Jamie Forsyth T: 07885405789 E: jamieforsyth@btinternet.com
Safeguarding Children Advisor:	Sarah Brown High Street London AB1 2CD T: 020 8654 321 Ext 987 E: sarah.brown@londoncpc.gov.uk
London Borough of Richmond Local Authority Designated Officer (LADO)	Vivien Rimmer Telephone: 02085474609 or Victorian Clotey Telephone: 02085475518 Email: lado@achievingforchildren.org.uk
Contact for Social Services:-	Single Point of Access Team (SPA) Services for Children and Families 42 York Street Twickenham TW1 3BW T: 0208 891 7969 E: spa@achievingforchildren.org.uk
Common Assessment (CAF) Co-ordinator	Daniela Acosta-Pagliari LB Richmond-Upon-Thames T: 020 8891 7973 E: caf@achievingforchildren.org.uk
Common Assessment (CAF) Officer	Sarah Hubbard LB Richmond-Upon-Thames 1 st Floor Regal House T: 020 8831 6145 E: sarah.hubbard@achievingforchildren.org.uk
Richmond Children's Social Care Emergency Out of Hours Children's Services	020 8770 5000
Police Child Abuse Referral Team	0208 785 8575

