

Safeguarding, Child Protection and Early Help Policy

Oct 2023

HINDLEY NURSERY SCHOOL

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| **Policy agreed (date):** | 20th November 2023 |
| **Policy published** (including on website) **(date):** | 21st November 2023 |
| **Next review (date):** | October 2024 . |

## Key Contacts

Table of identified persons with specific lead responsibilities in relation to Safeguarding and other key agencies.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Key Safeguarding Personnel | | | | | |
| Role | Name | | Telephone | | Email |
| Head teacher | Rachel Lewis | | 01942 488228 | | r.lewis@hindleysurestart.co.uk |
| Designated Safeguarding Lead (DSL) | Rachel Lewis | | 01942 488228 | | r.lewis@hindleysurestart.co.uk |
| Deputy Designated Safeguarding Lead (DDSL) | Sam Pemberton | | 01942 488228 | | [s.pemberton@hindleysurestart.co.uk](mailto:s.pemberton@hindleysurestart.co.uk) |
| Nominated Governor | Vacancy | | N/A | | r.lewis@hindleysurestart.co.uk |
| Chair of Governors | Cath Ardern (Vice Chair covering) | | N/A | | Headteacher@admin.douglasvalley.wigan.sch.uk |
| Designated Teacher for Looked After Children | Rachel Lewis | | 01942 488228 | | r.lewis@hindleysurestart.co.uk |
| **The key safeguarding responsibilities within each of the roles above are set out in Keeping Children Safe in Education (2018)** | | | | | |
| **Agency Contact Details** | | | | | |
| Local Authority Designated Officer |  | 01942 486042 | | [lado@wigan.gov.uk](mailto:lado@wigan.gov.uk) | |
| Children’s Social Care referrals | Single Point of Access | 01942 828300 | | <https://www.wigan.gov.uk/Resident/Health-Social-Care/Children-and-young-people/ProfessionalReferralForm.aspx> | |
| Early Help Hub | StartWell | 01942 486262 | | [EHH@wigan.gov.uk](mailto:EHH@wigan.gov.uk) | |
| Wigan Safeguarding Children’s Board |  | 01942 486025 | | [wscb@wigan.gov.uk](mailto:wscb@wigan.gov.uk) | |
| Social Care | Duty | 01942 828300 | | N/A | |
| School Nursing / Health Visiting service | Duty Health visitor | 01942 483891 | | N/A | |
| SDF Huddle Manager | Stephen Gerrard | 07825061274 | |  | |
| Health Visiting Duty Team Hindley | Duty Team | 01942 483891 | |  | |
| If you believe a child or young person is **at immediate risk** of significant harm or injury, contact the **Police on 999** | | | | | |

Introduction

This policy has been developed in accordance with the principles established by

* The Children Act 1989 (as amended).
* The Children and Social Work Act 2017.
* The Safeguarding Vulnerable Groups Act 2006.

In addition to the revised documents;

* **Working Together to Safeguard Children 2018**
* **Keeping Children Safe in Education 2023**

Other key documents are noted, which have prompted changes to safeguarding requirements over time. This policy references these throughout where relevant:

* GDPR and the Data Protection Act 2018.
* Information Sharing: Advice for Practitioners 2018.
* Sexual Violence and Sexual Harassment between Children in Schools and Colleges (guidance document) 2018.
* Childcare (Early Years Provision Free of Charge) (Extended Entitlement) (Amendment) Regulations 2018.
* Childcare Act 2006 (as amended in 2018).
* Human Rights Legislation
* Equality Act 2010
* Public Sector Equality Duty

This policy should also be read in conjunction with Wigan’s Threshold of Need [[1]](#footnote-1)Document / Procedure and Wigan’s Resolution Policy[[2]](#footnote-2).

**Human Rights and Equality Legislation**

It is clear that being subjected to harassment, violence and or abuse may breach children’s rights, as set out in the Human Rights Act. At Hindley Nursery we also ensure that we are aware of our Public Sector Equality Duty and consider any children who may have protected characteristics and take necessary action to deal with any disadvantages that they might face. We have an awareness that pupils with protected characteristics may be more at risk of harm than others.

Safeguarding is defined as:

* ensuring that children grow up with the provision of safe and effective care
* taking action to enable all children to have the best life chances
* preventing impairment of children's health or development and
* protecting children from maltreatment.

The term ‘safeguarding children’ covers a range of measures including child protection procedures. It encompasses a preventative approach to keeping children safe that incorporates pupil health and safety; school behaviour and preventing bullying; supporting pupils with medical conditions; personal, health, social economic education; providing first aid and site security. Consequently this policy is consistent with all other policies adopted by the governors and should be read alongside the following policies relevant to the safety and welfare of our pupils:

|  |  |  |
| --- | --- | --- |
| * Behaviour policy | * Staff Code of Conduct (for safer working practice) | * Teaching and Learning policy |
| * Equality Statement | * Whistleblowing policy | * SEND policy |
|  | * Health and Safety | * Safer Recruitment Policy * IT Policies |
|  |  |  |

The aim of this policy is to ensure:

* All of our pupil’s / students are safe and protected from harm
* Safeguarding procedures are in place to help pupils and students to feel safe and learn to stay safe
* Adults in the education setting community are aware of the expected behaviours and the legal responsibilities in relation to safeguarding and child protection.
* All agencies are providing appropriate support to children and young people through adoption of the early help framework

This will be achieved by:

* Supporting the child’s / young person’s development in ways that will foster security, confidence and independence.
* Providing a high quality, safe and stimulating environment in which children and young people feel safe, secure, valued and respected, feel confident, and are able to enjoy, learn and grow in confidence. Have positive relationships with the adults caring for them and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
* Raising the awareness of all teaching and non-teaching staff of the need to safeguard children and young people, of their responsibilities in identifying and reporting possible cases of abuse (reference appendices 1 and 2) and preventing and intervening earlier to address support and social needs of young people through the early help framework
* Providing a systematic means of monitoring children / young people known or thought to be at risk of harm, and ensure we, Hindley Nursery School, contribute to assessments of need and support packages for those pupils/students.
* Emphasising the need for good levels of communication between all members of staff.
* Developing a structured procedure within the education setting which will be followed by all members of the education setting community in cases of suspected abuse. Also that staff have had access to specific training and awareness raising concerning:
* Staff Code of Conduct (for safer working practice)
* D/DSL training
* KCSiE Part 1
* Looked After Children (LAC)
* Online safety training for staff
* Preventing Radicalisation
* Staff training
* Whistleblowing

**Safeguarding Level 1 training (including online safety) was completed Oct 2022**

* Developing and promoting effective working relationships with other agencies, especially the Police, Health and Social Care.
* Ensuring that all staff working within our education setting who have substantial access to children and young people have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory DBS check [[3]](#footnote-3)(according to guidance) and a central record is kept for audit. Only fully application forms are accepted, CV’s are not accepted at our school. We will also inform shortlisted candidates that online searches may be done as part of pre-recruitment checks.
* Curriculum – teaching about safeguarding**:** Our pupils access a broad and balanced curriculum that promotes their spiritual, moral, cultural, mental and physical development, and prepares them for the opportunities, responsibilities and experiences of life. We provide opportunities for pupils to develop skills, concepts, attitudes and knowledge that promote their safety and well-being. The PSED and well being curriculum specifically includes the following objectives:
* Developing pupil self-esteem and communication skills
* Developing strategies for managing self-regulation and managing feelings and behaviour including online safety
* Developing a sense of the boundaries between appropriate and inappropriate behaviour in adults and within peer relationships (positive relationships and consent)
* Ensuring pupils and staff are safeguarded from potentially harmful and inappropriate online materials.

Scope

As outlined above, the term ‘safeguarding children’ covers a range of measures including child protection procedures. It encompasses a preventative approach through the early help framework to keeping children safe that incorporates pupil health and safety; school behaviour and preventing bullying; supporting pupils with medical conditions; personal, health, social economic education; providing first aid and site security.

All staff are aware of the categories of abuse, which are:

* Physical abuse
* Emotional Abuse
* Neglect
* Sexual abuse

The definitions of which can be found in the glossary, and signs and symptoms of the four categories of abuse can be found in *Appendix one and two*.

This policy assumes that any of the categories of abuse could be disclosed within the Borough of Wigan, and gives further information relating to individual types of abuse within this document in line with advice and guidance within Keeping Children Safe in Education 2021.

Expectations

All staff are:

* Familiar with this safeguarding policy and have an opportunity to contribute to its review.
* Alert to signs and indicators of possible abuse.
* Able to record and report concerns as set out in this policy.
* Able to deal with a disclosure of abuse from a pupil.
* Involved in the implementation of individual education programmes, integrated support plans, child in need plans and interagency child protection plans as required.

In addition, all staff have read and understood Part 1 of the latest version of Keeping Children Safe in Education (KCSiE 2021). All staff working directly with children have also read Annex A.

We recognise that all adults, including temporary staff[[4]](#footnote-4), volunteers and governors, have a full and active part to play in protecting our pupils / students from harm, and that the child’s / young person’s welfare is our paramount concern.

All staff believe that our education setting should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child or young person.

All staff will be able to reassure victims of abuse that they are being taken seriously and will be supported. Children at Hindley Nursery School will never be made to feel ashamed or embarrassed about any type of disclosure.

We recognise that a child / young person who is neglected, abused or witnesses violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of worth.

We recognise that the education setting may provide the only stability in the lives of children and young people who have been abused or are at risk of harm.

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

We recognise that the early help framework provides opportunities to intervene early and prevent safeguarding issues developing, as well providing a framework for appropriate support to be wrapped around the child / young person and their family.

**Responding to concerns / disclosures of abuse**

Staff adhere to the following Dos and Don’ts when concerned about abuse or when responding to a disclosure of abuse.

**Do:**

* **Create a safe environment by offering** the child a private and safe place if possible.
* **Stay calm** and reassure the child and stress that he/she is not to blame.
* **Tell** the child that you know how difficult it must have been to confide in you.
* **Listen carefully** and **tell** the child what you are going to do next.
* Use the **‘tell me’, ‘explain’, ‘describe’** and/or mirroring strategy.
* **Tell only the Designated or Deputy Safeguarding Lead.**
* **Record** in detail using the ‘Child Log’ without delay, using the child’s own words where possible.

**Don’t:**

* Take photographs of any injuries.
* Postpone or delay the opportunity for the pupil to talk.
* Take notes while the pupil is speaking or ask the pupil to write an account.
* Try to investigate the allegation yourself.
* Promise confidentiality, eg. Say you will keep ‘the secret’.
* Approach or inform the alleged abuser.

All staff record any concern about or disclosure by a pupil of abuse or neglect and report this to the D/DSL using the standard form. It is the responsibility of each adult in school to ensure that the D/DSL receives the record of concern without delay. In the absence of the D/DSL, staff will seek advice direct from Children’s Social Care.

In some circumstances, the D/DSL or member of staff seeks advice by ringing Children’s Social Care.

During term time, the DSL or a DDSL is always available during school hours for staff to discuss any safeguarding concerns.

The voice of the child is central to our safeguarding practice and pupils are encouraged to express and have their views given due weight in all matters affecting them.

We are committed to work in partnership with parents and carers. In most situations, we will discuss initial concerns with them. However, the D/DSL will not share information where there are concerns that if so doing would:

* place a child at increased risk of significant harm
* place an adult at increased risk of serious harm
* prejudice the prevention, detection or prosecution of a serious crime
* lead to unjustified delay in making enquiries about allegations of significant harm to a child, or serious harm to an adult.

When making a referral to social care the DSL will provide as much information possible as part of the referral process to help social care to consider the whole context of the child and their home to ensure a contextual approach to harm.

Child Protection records will include; a clear summary of the concern, details of how the concern was followed up and a note of any action taken or decisions reached.

When we become aware that a pupil is being privately fostered, we remind the carer/parent of their legal duty to notify Wigan Children’s Social Care. We follow this up by contacting Children’s Social Care directly.

Safe Setting, Safe Staff

Our health and safety policy, set out in a separate document, reflects the consideration we give to the protection of our children and young people both physically within the education setting environment and, for example, in relation to internet use, and when away from the education setting, undertaking off site trips and visits.

School security guidance has been compiled to support the senior management of educational settings in the discharge of their responsibilities by ensuring the development and implementation of suitable procedures. In particular, maintaining the security of the premises in response to potential threats to the staff and pupils / students of the setting. ***Appendix Four***

Hindley Nursery School will ensure that:

1. The Governing body takes seriously its responsibility under section 175 of the Education Act 2002 to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements within our school to identify, assess, and support those children who are suffering / at risk of suffering abuse and neglect.

As key strategic decision makers and vision setters for the school, the governors will make sure that our policies and procedures are in line with national and local safeguarding requirements. Governors will work with the senior leaders to make sure the key actions set out in Safe Setting Safe Staff are in place.

* There is a safeguarding, child protection and early help policy together with a staff code of conduct
* The education setting operates safer recruitment procedures by ensuring that there is at least one person on every recruitment panel that has completed Safer Recruitment training.[[5]](#footnote-5) **Staff who have completed training – RACHEL LEWIS, KAREN MILLIGAN & ELIZABETH BLAGBURN**
* The education setting has procedures for dealing with allegations of abuse against staff and volunteers and to make a referral to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have, had they not resigned.
* Disqualification by Association is no longer allowed within school settings, although Disqualification under the Childcare Act 2006, still applies to staff themselves.[[6]](#footnote-6)
* A senior leader has Designated Safeguarding Lead (DSL) responsibility
* On appointment, the DSL undertakes interagency training and also undertakes DSL “new to role” training and an “update” course every 2 years – **TRAINING COMPLETED Feb 2023**
* All other staff have access to safeguarding training as appropriate **MOST RECENT TRAINING – SAFEGUARDING LEVEL 31 OCT 22, EARLY HELP 31 OCTOBER 2022**
* Any weaknesses in Child Protection processes and procedures are remedied immediately
* A member of the governing body / trustees, usually the Chair, is nominated to liaise with the LA on safeguarding issues and in the event of an allegation of abuse made against the Headteacher / Head of School
* Safeguarding and Child Protection policies and procedures are reviewed annually and that the Safeguarding, Child Protection and Early Help (Thresholds of Needs) policy is available on the education settings website or by other means
* The Governing body consider how children may be taught about safeguarding. This may be part of a broad and balanced curriculum covering relevant issues through personal social and emotional development (PSED)
* Making sure the **filtering and monitoring standards** from the government are met so that staff and children are safeguarded from harmful online content. (See IT policies)
* The nominated governor (NG) for safeguarding liaises with the headteacher / principal and the D/DSL to complete an annual Section 175 safeguarding audit to return to the local authority.

1. Keeping Children Safe in Education is statutory guidance that education settings in England must have regard to it when carrying out their duties to safeguard and promote the welfare of children applying to.

* Governing bodies of maintained schools ( including maintained nursery schools) and colleges;
* Proprietors of independent schools (including academies, free schools and alternative provision academies) and non-maintained special schools. In the case of academies, free schools and alternative provision academies, the proprietor will be the academy trust; and
* Management committees of pupil referral units (PRUs)

1. The lead DSL is a member of the Senior Leadership team who has; along with the deputy designated safeguarding lead(s), undertaken the relevant training, and, upon appointment will undertake DSL new to role training followed by biannual updates. **(Feb 2023)**
2. The DSL’s who are involved in recruitment and at least one member of the governing body / trustees will also complete safer recruitment training to be renewed every 3 years
3. The name of the designated members of staff for child protection (DSL’s and DDSL’s) will be clearly visible in the school, with a statement explaining the education settings role in referring and monitoring cases of suspected abuse.
4. All members of staff are trained in, and receive, regular updates in e-safety and reporting concerns. They are also provided training to ensure that they are aware of how to report any **filtering and monitoring** breaches when using IT devices.
5. All new members of staff will be given a copy of our safeguarding statement and safeguarding, child protection and early help (thresholds of need) policy, with the DSL’s names clearly displayed, as part of their induction.
6. All other staff, volunteers and governors , have child protection awareness training, updated by the DSL as appropriate, to maintain their understanding of the signs and indicators of abuse.
7. Child protection and safeguarding concerns or allegations against adults working in the school are referred to the LADO [[7]](#footnote-7) for advice and that any member of staff found not suitable to work with children or young people will be notified to the Disclosure and Barring Service (DBS) for consideration for barring, following resignation, dismissal, or when we cease to use their service as a result of a substantiated allegation, in the case of a volunteer. Allegations or concerns regarding any adult at the school that does not meet the threshold for referral to the LADO will be dealt with immediately and reported to the DSL. Staff are encouraged to discuss concerns or to self-refer if they have found themselves in a situation which might be misinterpreted or that they are worried about. These low level concerns will be recorded to ensure that any patterns are recognised and appropriate action can be taken. Learning lessons from all cases is important, not just those which are concluded and found to be substantiated.
8. All parents/carers are made aware of the responsibilities of staff members with regard to safeguarding and child protection procedures through publication of the education settings Safeguarding, Child protection and Early Help policy, and reference to it in the school or setting’s Parent’s Handbook
9. The Policy is available publically on the school website or a paper copy can be requested. Parents / Carer’s are made aware of this policy and their entitlement to have a copy of it via the website.
10. All visitors complete a sign in / out form, wear a school ID badge and are provided with safeguarding information including the contact details of safeguarding personnel.
11. Visitors of a professional role are asked to provide evidence of their role and employment details (usually an identity badge) upon arrival at the education setting. Supporting letter in relation to DBS checks of visitors holding professional ID badges can be found in (**Appendix three)**
12. Community users organising activities for children are aware of the school’s child protection guidelines and procedures.
13. Our lettings policy, for community use of the premises, will seek to ensure the suitability of adults working with children on school sites at any time.
14. Our procedures will be annually (as a minimum) reviewed and updated.

Responsibilities

The designated safeguarding lead (DSL) should take lead responsibilityfor safeguarding and child protection and are responsible for:

1. Referring a child if there are any concerns about possible abuse, to the Local Authority, and acting as a focal point for staff to discuss these concerns. Referrals should be made by calling the Children’s duty team.
2. Keeping written records of concerns about a child even if there is no need to make an immediate referral.
3. Ensuring that all such records are kept confidentially, securely stored and are separate from pupil / students record, are transferred securely and held by the setting where the pupils / students attend until their 25th birthday. In the instance of an early help intervention, consideration will be given to the welfare of the child / young person and consult with the family for appropriate transfer of information.
4. Ensuring that an indication of the existence of the additional file outlined above is clearly marked on the pupils records.
5. Ensuring that all records are kept and retained in line with the “Record retention” policy, Children looked after records are retained for 99 years, and a record is kept and witnessed of the disposal of individual’s record.
6. Making sure when a pupil / student leaves, any information regarding safeguarding (current or historic) as well as the child protection file, where applicable, is transferred to the new education setting as soon as possible. This should be transferred separately from the main pupil file, ensuring secure transit, and confirmation of receipt should be obtained. Receiving schools and colleges should ensure key staff such as designated safeguarding leads and SENCOs or the named person with oversight for SEN in colleges, are aware as required.
7. Ensuring that they, or the staff member attending case conferences, core groups, early help meetings or other multi-agency planning meetings, contribute to assessments and provide a report which has been shared with the parents.
8. Ensuring that any pupil or student currently with a child protection plan who is absent in the educational setting without explanation for two days is referred to their key worker’s Social Care Team.
9. Organising child protection induction and update training every 3 years for all school staff.
10. Providing, with the head of school, an annual report for the governing body, detailing any changes to the policy and procedures; training undertaken by the DSL, and by all staff and governors; number and type of incidents/cases, and a number of children on the child protection register (anonymised)
11. Liaising with other agencies and professionals

Supporting Children and Young People

The education setting will consider the need for an Early Help assessment when it is identified that there are low level concerns or emerging needs. Detailed information on Early Help can be found in Chapter 1 of Working Together to Safeguard Children.

It is the responsibility of the education setting to initiate Early Help to identify what the family’s strengths and needs are. This will inform whether the setting can support the family or whether a referral to another agency is needed. This process provides a way of recording support and interventions that have been provided by the school to the child / young person and also supports a referral for additional support that may be needed from more targeted services where a single agency has been unable to meet that need. A team around the child meeting (TAC) can be arranged to ensure that a multi-agency action plan can be developed. It is important that the child and parents voice is captured as part of this assessment and that they take ownership of the plan. This plan should be regularly reviewed up to 4 to 6 weeks until outcomes are achieved.

If at any point during the EH process, the risk increases and the education setting becomes concerned that the child or young person is, or is likely to suffer significant harm, then a referral will be made to children’s social care.

In all cases the educational setting will consider the statutory guidance for schools and colleges, Keeping Children Safe in Education, published by the DfE September 2018, with particular reference to Part 1: Information for all schools and colleges.

Our education setting will support all children and young people by:

* Encouraging self-esteem and self-assertiveness through the curriculum, as well as our relationships, whilst not condoning aggression or bullying.
* Healthy relationships
* Promoting a caring, safe and positive environment within the school.
* Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
* Notifying Social Care as soon as there is a significant concern.
* Providing continuing support to a child or young person, about whom there have been concerns, who leaves the school by ensuring that appropriate information is copied under confidential cover to the pupils new setting and ensuring the school medical records are forwarded as a matter of priority.

If at any point the education setting becomes concerned that a child or young person is at serious risk of harm they should respond appropriately. If the school is concerned that a child is at **immediate** or **imminent** risk then they should contact Greater Manchester Police on either 111 or 999. If however the school is concerned that a child is, or is likely to suffer serious harm but it is not imminent they should call **Wigan Children’s Social Care Referral Team on 01942 828300.**

Children with Special Education Needs and Disabilities (SEND)

The education setting will use the same considerations for children and young people with SEND, as detailed above. However the setting must also take into consideration that additional barriers can exist when recognising abuse and neglect in this group of children and young people. These can include:

• Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child’s SEN or disability without further exploration (the setting must consider the child first and foremost, rather than the child’s SEND);

• A higher risk of vulnerability due to factors such as; a learning disability, lack of awareness, social isolation, which may contribute to risks such as online vulnerability;

• Being more prone to peer group isolation than other children;

• The potential for children with SEN and disabilities being disproportionally impacted by behaviours such as bullying, without outwardly showing any signs; and

• Communication barriers and difficulties in overcoming these barriers.

Children and young people with SEN and disabilities can face a number of challenges to disclosure, which must be recognised and taken into account, including; prejudice, negative responses and low expectations.

Information sharing

We recognise that all matters relating to child protection are confidential[[8]](#footnote-8) and information is handled in line with the education settings GDPR policy.

The Government has issued [Information Sharing for Safeguarding Practitioners](https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice) Guidance that included 7 ‘Golden Rules’ of Information Sharing in safeguarding :

The Government guidance (described by the NSPCC, 2018) is:

1. **Remember that the General Data Protection Regulation (GDPR) Data Protection Act 2018 and human rights law are not barriers** to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
2. **Be open and honest with the individual** (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. **Seek advice from other practitioners** if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.
4. **Share with informed consent where appropriate** and, where possible, respect the wishes of those who do not consent to share confidential information. You may still share information without consent if, in your judgement, there is good reason to do so, such as where safety may be at risk.
5. **Consider safety and well-being**: Base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.
6. **Necessary, proportionate, relevant, adequate, accurate, timely and secure**: Ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely.
7. **Keep a record of your decision and the reasons for it** – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose

All staff must be aware that they have a professional responsibility to share information in order to safeguard children and cannot assume that someone else will pass on the information.

Sharing of information will be necessary for the purpose for which it’s being shared, is shared only with those individuals who need to have it, is accurate and up-to-date, is shared in a timely fashion, and is shared securely

Key organisations who have a duty under section 11 of the Children Act 2004 to have arrangements in place to safeguard and promote the welfare of children are:

• The local authority;

• NHS England;

• Clinical commissioning groups;

• NHS Trusts, NHS Foundation Trusts;

• The local policing body;

• British Transport Police Authority;

• Prisons;

• National Probation Service and Community Rehabilitation Companies;4

• Youth offending teams; and

• Bodies within the education and /or voluntary sectors, and any individual to the extent that they are providing services in pursuance of section 74 of the Education and Skills Act 2008.

We will always undertake to share our intention to refer a child or young person to Social Care with their parent’s / carers unless to do so could put the child or young person at greater risk of harm, or impede a criminal investigation.

Supporting Staff

Hindley Nursery School will work with partners in the safeguarding partnership to ensure positive outcomes for children and young people.

We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting.

We will support such staff by providing an opportunity to talk through their anxieties with the DSL and to seek further support as appropriate.

Designated Safeguarding Leads should make use of support available by the Local Authority and the partnerships Safeguarding Team.

DSLs will have oversight of Early Help and Child Protection plans with appropriate structure in place to monitor progress and outcomes in partnership with Children’s Social Care and other stakeholders (check levels)

Training

All members of staff and volunteers have read, signed and understood the school’s Staff Code of conduct (for safer working practice).

We ensure training attended meets the minimum standards set out by WSCB in the document ‘WSCB recommended minimum standards for child protection training’.

**Induction**

The welfare of all our pupils is of paramount importance. All staff including volunteers are informed of our safeguarding procedures including online safety, at induction. Our induction also includes:

* Plan of support for individuals appropriate to the role for which they have been hired
* Confirmation of the conduct expected of staff within the school – our Staff Behaviour Policy
* Opportunities for a new member of staff to discuss any issues or concerns about their role or responsibilities
* Confirmation of the line management / mentor process whereby any general concerns or issues about the person’s ability or suitability will be addressed.

**Safeguarding training**

This training is for all staff and is updated every 3 years as a minimum to ensure staff understand their role in safeguarding. Any member of staff not present at this whole school session will receive this statutory training requirement on their return.

In addition, all staff members receive safeguarding and child protection updates (for example, via email, e-bulletins, staff meetings) as necessary and at least annually. All staff also receives training in online safety and this is updated as necessary.

**Advanced training**

The D/DSL has additional training which is updated every two years as a minimum. The D/DSL also attends multi-agency courses relevant to school needs. Their knowledge and skills are refreshed at least annually eg via e-bulletins or safeguarding networking events with other D/DSLs. **(COMPLETED MARCH 2021)**

**Safer Recruitment**

At least one person on any appointment panel has undertaken Safer Recruitment Training. This training is updated every five years as a minimum. **(COMPLETED MAY 2021)**

**Preventing Radicalisation**

All staff undertakes Prevent training. **(MAY 2022)**

**Staff support**

Due to the demanding, often distressing nature of child protection work, we support staff by providing an opportunity to talk through the challenges of this aspect of their role with a senior leader and to seek further support as appropriate.

**Governors**

Governors undertake the school’s Induction programme. They may choose to complete face to face training for governors provided by Wiltshire Council. In addition, governors may choose to attend whole school safeguarding and child protection training.

Allegations against staff

All Education setting and Early Years staff should take care not to place themselves in a vulnerable position with a child.

All staff should be expected to have awareness and knowledge of Guidance on Behaviour Issues, along with the school’s own Behaviour Policy and Staff Code of Conduct and this should be part of induction for all new staff or volunteers.

Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers, will be given at induction, alongside information on Safer Working Practices.

We understand that a pupil or student may make an allegation against a member of staff.

If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children / young people, the member of staff receiving the allegation or aware of the information, will immediately inform the Headteacher / Head of School

The Head teacher, on all such occasions, will discuss the content of the allegation with the Local Authority Designated Officer (LADO).[[9]](#footnote-9)

If the allegation made to a member of staff concerns the Headteacher, the person receiving the allegation will immediately inform the Chair of Governors who will consult LADO, without notifying the Headteacher first.

The school will follow Wigan’s procedures for managing allegations against staff. Under no circumstances will we send a child / young person home pending such an investigation, unless this advice is given exceptionally, as a result of a consultation with the LADO.

Suspension of the member of staff, excluding the Headteacher, against whom an allegation has been made, needs careful consideration, and the Headteacher will seek the advice of Human Resources / Legal in order to make that decision and informing the LADO at the earliest opportunity.

In the event of an allegation against the Headteacher, the decision to suspend will be made by the Chair of Governors with advice as outlined above.

We have a procedure for managing the suspension of a contract for a community user in the event of an allegation arising against them in context. If an allegation comes from an organisation or individual using the school premises against a member of staff then this would be reported to the LADO.

Disagreements, Escalation and Resolution

Effective working together depends on an open approach and honest relationships between colleagues and between agencies.

Staff must be confident and able to professionally disagree and challenge decision-making as an entirely legitimate activity; a part of our professional responsibility to promote the best safeguarding practice. Staff are encouraged to press for re-consideration if they believe a decision to act / not act in response to a concern raised about a child is wrong. In such cases the WSCB Case Resolution Protocol (formerly escalation policy) is used if necessary.[[10]](#footnote-10) If we are on the receiving end of a professional challenge, we see this as an opportunity to reflect on our decision making.

Whistleblowing

All staff can raise concerns about poor or unsafe practice and potential failures in the education settings safeguarding regime. Our whistleblowing procedures, which are reflected in staff training and our Code of Conduct, are in place for such concerns to be raised with the Headteacher.

If a staff member feels unable to raise an issue with the Headteacher feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them:

* The NSPCC whistleblowing helpline - Staff can call: 0800 028 0285 from 08:00 to 20:00, Monday to Friday, or email help@nspcc.org.uk.
* A member of the governing body: Cath Ardern, Vice Chair of Governors

We recognise that children and young people cannot be expected to raise concerns in an environment where staff fail to do so.

All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitudes or actions of colleagues. If it becomes necessary to consult outside the school, they should speak in the first instance, to the Area Education Officer / LADO following the whistleblowing policy.

Whistleblowing regarding the Headteacher should be made to the Chair of the Governing Body whose contact details are readily available to staff (as pertained to setting).

It’s acknowledged that Whistleblowers have the right to remain anonymous, however identifying yourself may assist with any further investigations.

Physical Intervention and use of reasonable force

We acknowledge that staff must only ever use physical intervention as a last resort, when a child or young person is endangering him / herself or others.

The term ‘reasonable force’ covers the broad range of actions used by staff that involve a degree of physical contact to control or restrain children / young people. “Reasonable” in these circumstances means using no more force than necessary and staff should refer to the section on “use of reasonable force” within the behaviour policy.

Such events should be recorded by completing a serious incident log and signed by a witness.

Staff who are likely to need to use physical intervention or reasonable force will be appropriately trained in an accredited positive handling technique.

We understand that physical intervention of a nature which causes injury or distress to a child or young person may be considered under child protection or disciplinary procedures.

We recognise that touch is appropriate in the context or working with children and young people, and all staff are aware of the safer working practice guidance[[11]](#footnote-11) to ensure they are clear about their professional boundary.

**Team Teach Training completed September 2018**

Prevention

We recognise that the education setting plays a significant part in the prevention of harm to our children and young people by providing them with good lines of communication with trusted adults.

If early help is appropriate, the designated safeguarding lead (or deputy) will contact the early help hub to ensure there is no current intervention and will generally lead on liaising with other agencies, setting up an inter-agency assessment as appropriate.

Early help means providing support as soon as a problem emerges, at any point in a child’s life. Providing early help is more effective in promoting the welfare of children than reacting later.

Any such cases should be kept under constant review and consideration given to a referral to children’s social care for assessment for statutory services, if the child’s situation does not appear to be improving or is getting worse.

The education settings community will;

* Work to establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.
* Ensure that all pupils and students know there is a trusted adult in the education setting whom they can approach if they are worried or in difficulty.
* Include safeguarding across the curriculum, including PSHE, opportunities to equip children with the skills they need to stay safe from harm and to know whom they should turn to for help. In particular this will include anti-bullying work, e-safety, road safety.
* Ensure all staff are aware of school guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.

Domestic Abuse

We recognise the significant impact domestic abuse can have on children and young people, therefore we operate in partnership with Operation Encompass, a system which facilitates the sharing of information relating to domestic incidents where children live or frequent. Any incidents of domestic violence reported to the police will be notified to the education setting to effectively support the child(ren) / young person. We recognise that domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse, all of which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

Sexual Violence and Sexual Harassment including Child on Child

When referring to sexual harassment we mean ‘unwanted conduct of a sexual nature’ that can occur online and offline, both in school and out of school. Sexual harassment can include:

* Sexual comments
* Sexual jokes or taunting
* Physical behaviour
* Upskirting (Upskirting Act, 2019)
* Consensual and non-consensual sharing of nude and semi-nude images and / or videos (UKCIS, 2020)

The education setting recognises that allegations of sexual violence and sexual harassment are likely to be complex and require difficult professional decisions to be made. This type of harm can also happen within a family situation and between siblings. In all cases it is important to explain to children that the law is in place to protect rather than criminalise them.

Decisions will be made on a case by case basis with the DSL taking a leading role, supported by other agencies such as Children’s Social Care and the Police as required[[12]](#footnote-12).

Child on Child abuse

All children have a right to attend school and learn in a safe environment. All child on child abuse is unacceptable and will be taken seriously. Staff recognise that while both boys and girls can abuse their peers, it is more likely that girls will be victims and boys perpetrators of such abuse. Child on child abuse is not tolerated, passed off as “banter” or seen as “part of growing up”. It is likely to include, but not limited to:

* bullying (including cyber bullying)
* physical harm
* sexual violence or harassment
* upskirting
* gender based violence / sexual assaults
* sexting
* Initiation / hazing type violence and rituals.
* Sharing of nude or semi-nude images

Consequently, child on child abuse is dealt with as a safeguarding concern, recorded as such and not managed through the systems set out in the school behaviour policy.

Victims, perpetrators and any other child affected by child on child abuse will be supported through the school’s pastoral system and the support will be regularly reviewed.

We minimise the risk of child on child abuse by providing:

A relevant curriculum, that helps children to develop their understanding of acceptable behaviours, healthy relationships and keeping themselves safe.

Established systems for children to raise concerns with staff, knowing they will be listened to, supported and valued, and that the issues they raise will be taken seriously.

Addressing inappropriate behaviour (even if it appears to be relatively innocuous) can be an important intervention that help prevent problematic, abusive and or violent behaviour in the future.

The DSL liaises with other professionals to develop robust risk assessments and appropriate specialist targeted work for children that are identified as posing a potential risk to other children.

Our school policy on anti-bullying (behaviour policy) acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms, e.g. Cyber, racist, homophobic and gender related bullying.

All staff are aware that children with SEND and / or differences / perceived differences are more susceptible to being bullied / victims of child abuse..

We keep a record of known bullying incidents, and will keep a record of racist incidents.

Preventing Radicalisation

Protecting children from the risk of radicalisation should be seen as part of schools’ wider safeguarding duties. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. As with managing other safeguarding risks, education settings should be alert to changing in children’s and young person’s behaviour that could indicate that they are in need of protection. Staff should use their professional judgement in identifying children and young people who might be at risk of radicalisation and act proportionately which may include making a referral to the Channel programme.

Our school safeguarding policy will therefore be written to comply with the schools duty under Section 26 of the Counter Terrorism and Security Act 2015 in accordance with the Department of Education advice for schools specific guidance for schools <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/439598/prevent-duty-departmental-advice-v6.pdf>

Our school safeguarding policy will be aligned with and reflect the processes described in the Wigan’s Prevent Policy and Procedure

**Prevent training completed May 2019**

Exploitation – CSE, Criminal, Human Trafficking, Modern Day Slavery, County Lines

Our education setting will ensure that the Designated Safeguarding Lead and other key staff are trained in spotting the possible signs of exploitation outlined in Appendix one and two (this is not an exhaustive or definitive list)

Staff at Hindley Nursery School are made aware of the vulnerability of children involved in criminal exploitation.

Female Genital Mutilation

The Female Genital Mutilation Act 2003 was amended by the Serious Crime Act 2015 where the law was extended to:

* A non UK national who is ‘habitually resident’ in the UK and commits such an offence abroad can now face a maximum penalty of 14 years imprisonment. It is also an offence to assist a non-UK resident to carry out FGM overseas on a girl who is habitually, rather than pertinently, resident in the UK. This follows a number of cases where victims were unable to get justice as FGM was committed by those not permanently residing in the UK.
* A new offence is created of failing to protect a girl from the risk of FGM. Anyone convicted can face imprisonment for up to seven years and / or and unlimited fine.
* Anonymity for the victims of FGM. Anyone identifying a victim can be subject to an unlimited fine.

The school recognises and adheres to its mandatory duty to report any suspected or known cases of FGM about a female under 18 years old to the police.

Our Designated Safeguarding Lead will maintain up to date knowledge of the Greater Manchester Safeguarding Partnership Protocol to Female Genital Mutilation.

Children Missing Education

**Responsibilities for Children Missing from Education (CME)**:

At our school we understand that when children are absent or missing from education this can be a warning sigh of a range of safeguarding concerns:

       Education settings must enter pupils on the admission register at the beginning of the first day on which the setting has agreed, or been notified, that the pupil will attend. If a pupil fails to attend on the agreed or notified date, the education setting should undertake reasonable enquiries to establish the child’s whereabouts and consider notifying the local authority at the earliest opportunity

       Education settings must monitor pupils’ attendance through their daily register. Settings should agree with their local authority the intervals at which they will inform local authorities of the details of pupils who fail to attend regularly, or have missed ten school days or more without permission. Education settings should monitor attendance closely and address poor or irregular attendance.

       Education settings must also arrange full-time education for excluded pupils from the sixth school day of a fixed period exclusion. This information can be found in the *Exclusion from maintained schools, academies and pupil referral units in England* statutory guidance.

       Maintained schools have a safeguarding duty in respect of their pupils, and as part of this should investigate any unexplained absences. Academies and independent schools have a similar safeguarding duty for their pupils. Further information about schools’ safeguarding responsibilities can be found in the Keeping Children Safe in Education.

**Making reasonable enquiries for Children Missing Education;**

       The term ‘reasonable enquiries’ grants education settings and local authorities a degree of flexibility in decision-making, particularly as the steps that need to be taken in a given case will vary. The term ‘reasonable’ also makes clear that there is a limit to what the school and local authority is expected to do.

       In line with the duty under section 10 of the Children Act 2004, the expectation is that the education setting and the local authority will have in place procedures designed to carry out reasonable enquiries. The type of procedures may include the appropriate person checking with relatives, neighbours, landlords – private or social housing providers – and other local stakeholders who are involved. They should also record that they have completed these procedures. If there is reason to believe a child is in immediate danger or at risk of harm, a referral should be made to children’s social care (and the police if appropriate).

**Staff report immediately to the D/DSL, if they know of any child who may be:**

       Missing – whereabouts unknown and unable to make contact (as a result of making reasonable enquiries)

       Missing education – (compulsory school age (5-16) with no school place and not electively home educated)

The Local Authority requires Education Settings to complete the **‘Children Missing Education’** referral form. **(Appendix Five)** This form should be completed once the setting has completed reasonable enquires, but failed to locate the child following 10 days of absence. The first part should be completed by school and submitted to the Early Help Hub [EHH@wigan.gcsx.gov.uk](mailto:EHH@wigan.gcsx.gov.uk) . The EHH will then complete further checks to ensure all lines of enquiry have been exhausted, before it is agreed the child is removed from roll.

Making these enquiries may not always lead to establishing the location of the child, but will provide a steer on what action should be taken next, for example, to contact the police, children’s social care and, in cases where there may be concerns for the safety of a child who has travelled abroad, the Foreign and Commonwealth Office.

Where a pupil has not returned to school for ten days after an authorised absence, or is absent from school without authorisation for twenty consecutive school days they can only be removed from the admission register under regulation 8(1), sub-paragraph (f)(iii) or (h)(iii) if the school and the local authority have failed to establish the pupil’s whereabouts after **jointly** making reasonable enquiries. Local authorities and education settings should agree roles and responsibilities locally in relation to making joint enquiries. This only applies if the setting does not have reasonable grounds to believe that the pupil is unable to attend because of sickness or unavoidable cause.

The designated teacher for LAC and care leavers to discuss any unauthorised / unexplained absence of a Looked After Children with the Virtual School Team, when required.

Children who do not attend school regularly can be at increased risk of abuse and neglect. Where there is unauthorised / unexplained absence, and after reasonable attempts have been made to contact the family, the DSL follows the WSCB procedure and refers to Children’s Services as appropriate.

Where there are no known welfare concerns about a pupil, follow procedures for recording school absence in line with *DfE* *School attendance; Guidance for maintained schools, academies, independent schools & local authorities -September 2018.* Should a pupil’s attendance become a cause for concern it is advisable to intervene early to prevent entrenched non-school attendance. School should make contact with the Early Help Hub (EHH) to initiate an Early Help, if appropriate. This will evidence and identify the barriers impacting on the pupils engagement with school.

Young Carers

A young carer is someone under 18 who helps look after someone in their family, or a friend, who is ill, disabled or misuses drugs or alcohol.

Our school recognises the impact that being a Young Carer can have on pupils, and the importance of identifying those young people so that appropriate support can be provided.

Wigan Safeguarding Children Board coordinates our local Young Carers Strategy.

Where a pupil / student at our school is identified as having additional support needs due to being a young carer, or where a multi-agency approach may be required, our school uses the Early Help Framework and routes into the StartWell Service.

Monitoring and Evaluation

Our child protection policy and procedures will be monitored and updated by:

* Governing Body visits to the education setting
* SLT drop ins and discussions with children and staff
* Scrutiny of exclusion and attendance data
* Scrutiny of GB minutes
* Logs of bullying / racist / behaviour incidents for SLT and GB to monitor
* Review of parental concerns and parent / carer questionnaires
* Review of the use of intervention strategies.

This policy should be read in alongside the following policies relevant to the safety and welfare of our pupils;

*Behaviour*

*Staff Code of conduct*

*Whistleblowing*

*Health and safety*

*Allegations against staff*

*Parental Concerns*

*Attendance*

*Curriculum*

*PSED*

*Teaching and Learning*

*Administration of medicines*

*Drug Education*

*Physical intervention*

*E - Safety, including staff use of mobile phones*

*Risk Assessment*

*Recruitment and Selection*

*Intimate Care*

# Glossary

|  |  |
| --- | --- |
| A Child | A person who has not yet reached their 18th birthday. |
| 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 who know them or, more rarely by others (e.g. via the internet). They may be abused by an adult or adults or another child or children. |
| Bullying & Cyberbullying | Behaviour that is:   * repeated * intended to hurt someone either physically or emotionally * often aimed at certain groups, for example because of race, religion, gender or sexual orientation |
| Child Protection | Activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm. |
| Child sexual exploitation (CSE) | Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology. |
| Children with Special Educational Needs and/or disabilities | SEN - a child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.  Disability - a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities. |
| County Lines | Criminal exploitation is also known as 'county lines' and is when gangs and organised crime networks exploit children to sell drugs. Often these children are made to travel across counties, and they use dedicated mobile phone ‘lines’ to supply drugs |
| Contextual Safeguarding | Contextual Safeguarding is an approach to understanding, and responding to, young people’s experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. |
| Criminal Exploitation | Involves young people under the age of 18 in exploitative situations, relationships or contexts, where they may be manipulated or coerced into committing crime on behalf of an individual or gang in return for gifts, these may include: friendship or peer acceptance, but also cigarettes, drugs, alcohol or even food and accommodation. |
| Domestic Abuse | any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:   * psychological * physical * sexual * financial * emotional |
| Early Help | Intervening early and as soon as possible to tackle problems emerging for children, young people and families with a population most at risk of developing problems. Effective intervention may occur at any point in a child or young person’s life. |
| 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 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. |
| Female Genital Mutilation (FGM) | Female genital mutilation (FGM) is a procedure where the female genitals are deliberately cut, injured or changed, but where there's no medical reason for this to be done. |
| Gangs & Youth Violence | Defining a gang is difficult. They tend to fall into three categories; peer groups, street gangs and organised crime groups. It can be common for groups of children and young people to gather together in public places to socialise, and although some peer group gatherings can lead to increased antisocial behaviour and low level youth offending, these activities should not be confused with the serious violence of a Street Gang.  A Street Gang can be described as a relatively durable, predominantly street-based group of children who see themselves (and are seen by others) as a discernible group for whom crime and violence is integral to the group's identity.  An organised criminal group is a group of individuals normally led by adults for whom involvement in crime is for personal gain (financial or otherwise). |
| Hate | Hostility or prejudice based on one of the following things:   * disability * race * religion * transgender identity * sexual orientation. |
| Honour-based violence | Honour based violence is a violent crime or incident which may have been committed to protect or defend the honour of the family or community. |
| 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:  • Protect a child from physical and emotional harm or danger.  • Ensure adequate supervision (including the use of inadequate care-givers).  • Ensure access to appropriate medical care or treatment.  • It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs. |
| Child on Child Abuse | Child on child abuse occurs when a young person is exploited, bullied and / or harmed by another child; everyone directly involved in child on child abuse is under the age of 18. |
| 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. |
| Private Fostering | A private fostering arrangement is one that is made privately (without the involvement of a local authority) for the care of a child under the age of 16 years (under 18, if disabled) by someone other than a parent or close relative, in their own home, with the intention that it should last for 28 days or more. (Close family relative is defined as a ‘grandparent, brother, sister, uncle or aunt’ and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins.) |
| Radicalisation & Extremism | Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.  Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas. |
| Relationship Abuse | Teen relationship abuse consists of the same patterns of coercive and controlling behaviour as domestic abuse. These patterns might include some or all of the following: sexual abuse, physical abuse, financial abuse, emotional abuse and psychological abuse. |
| Safeguarding and promoting the welfare of children | * 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. |
| Sexting | Sexting is when someone shares sexual, naked or semi-naked images or videos of themselves or others, or sends sexually explicit messages.  They can be sent using mobiles, tablets, smartphones, and laptops - any device that allows you to share media and messages. |
| Sexual Abuse | Involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing.  They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children |
| Trafficking | Trafficking in persons shall mean the recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control of another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or removal of organs. |

# *Appendix one*

## Recognising signs of child abuse

## *Signs of Abuse in Children*:

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

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

## *Risk Indicators*

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

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

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

In an abusive relationship the child may:

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

The parent or carer may:

* Persistently avoid child health promotion services and treatment of the child’s episodic illnesses
* Have unrealistic expectations of the child
* Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
* Be absent or misusing substances
* Persistently refuse to allow access on home visits
* Be involved in domestic abuse

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

## *Recognising Physical Abuse*

The following are often regarded as indicators of concern:

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

### Bruising

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

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

### Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

### Burns and Scalds

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

* Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
* Linear burns from hot metal rods or electrical fire elements
* Burns of uniform depth over a large area
* Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
* Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

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

### Fractures

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

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

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

### Scars

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

## *Recognising Emotional Abuse*

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

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

The following may be indicators of emotional abuse:

* Developmental delay
* Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
* Indiscriminate attachment or failure to attach
* Aggressive behaviour towards others
* 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

## *Recognising Signs of Sexual Abuse*

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

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

Some behavioural indicators associated with this form of abuse are:

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

Some physical indicators associated with this form of abuse are:

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

### *Sexual Abuse by Young People*

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

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

**Inappropriate Sexual Behaviour** can be inappropriate socially, 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.

## 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.

## *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 irresponsive 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

## *Child Sexual Exploitation*

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

Signs include:

* underage sexual activity
* inappropriate sexual or sexualised behaviour
* sexually risky behaviour, 'swapping' sex
* repeat sexually transmitted infections
* in girls, repeat pregnancy, abortions, miscarriage
* receiving unexplained gifts or gifts from unknown sources
* having multiple mobile phones and worrying about losing contact via mobile
* having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
* changes in the way they dress
* going to hotels or other unusual locations to meet friends
* seen at known places of concern
* moving around the country, appearing in new towns or cities, not knowing where they are
* getting in/out of different cars driven by unknown adults
* having older boyfriends or girlfriends
* contact with known perpetrators
* involved in abusive relationships, intimidated and fearful of certain people or situations
* hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
* associating with other young people involved in sexual exploitation
* recruiting other young people to exploitative situations
* truancy, exclusion, disengagement with school, opting out of education altogether
* unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
* mood swings, volatile behaviour, emotional distress
* self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
* drug or alcohol misuse
* getting involved in crime
* police involvement, police records
* involved in gangs, gang fights, gang membership
* injuries from physical assault, physical restraint, sexual assault.

*Criminal Exploitation / County Lines*

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of Criminal Exploitation / County Lines

* Returning home late, staying out all night or going missing
* Being found in areas away from home
* Increasing drug use, or being found to have large amounts of drugs on them
* Being secretive about who they are talking to and where they are going
* Unexplained absences from school, college, training or work
* Unexplained money, phone(s), clothes or jewellery
* Increasingly disruptive or aggressive behaviour
* Using sexual, drug-related or violent language you wouldn’t expect them to know
* Coming home with injuries or looking particularly dishevelled
* Having hotel cards or keys to unknown places.

***Appendix two***

## *Forced Marriage (FM)*

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

## *Female Genital Mutilation (FGM)*

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM.

**4 types of procedure:**

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation - entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

**Why is it carried out?**

Belief that:

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

Circumstances and occurrences that may point to FGM happening

* Child talking about getting ready for a special ceremony
* Family taking a long trip abroad
* Child’s family being from one of the ‘at risk’ communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
* Knowledge that the child’s sibling has undergone FGM
* Child talks about going abroad to be ‘cut’ or to prepare for marriage

Signs that may indicate a child has undergone FGM:

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

The ‘One Chance’ rule

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

*Appendix three*



To : All Schools and Academies

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Our reference: | HRESC |
|  | Your reference: |  |
|  | Please ask for: | HR Employment Service Centre |
|  | Extension: | 2333 |
|  | Direct line: | 01942 827333 |
|  | Date: | 8th May 2017 |

Dear Colleague

**DBS Checks for School Visitors**

I have been asked to confirm the situation regarding schools asking visitors to provide copies of their DBS certificate or DBS number. It is unlikely that visitors will carry their certificate with them and in many cases it will not be necessary for them to do so.

I can confirm that any visitor who is employed by Wigan Council will have had their post assessed for eligibility for a DBS Check, including an assessment of the work they do in schools. They would not have been employed without an acceptable clearance being received. Therefore, if your visitor is a current Wigan Council employee, you can be assured that they have received satisfactory clearance and you do not need to see it. You should of course check their Wigan Council badge to confirm their identity.

Further guidance on DBS checks for other visitors to school will follow.

I hope you find this advice useful. If you have any questions or wish to clarify any areas, please contact me. As lead counter signatory, I am available to provide advice on any DBS issue you may have.

Yours sincerely

Claire O’Sullivan

Lead Counter Signatory

*Appendix three*

Wigan Borough Head Teachers

**Human Resources**

Bevan House

Beecham Court

Smithy Brook Road

Wigan

WN3 6PR

Tel: 01942 482965

9th February 2017

Dear Head Teacher

**RE: DBS Checks**

Bridgewater Community Healthcare NHS Foundation Trust operates a Disclosure and Barring Service (DBS) Policy based on the requirements of the Police Act 1997 and the mandatory pre-employment checking procedure requirements of the Department of Health. The Policy ensures that enhanced DBS checks are mandatory for every staff member who has access to children or vulnerable adults as part of their normal duties or standard DBS checks for staff who have access to health care records. New staff are not allowed to start in post until their DBS and all other relevant pre-employment checks have been completed. Such checks must be satisfactory and in line with national NHS safe recruitment standards.

In line with the requirements of this Policy, all staff working with children or vulnerable adults are subject to enhanced DBS checks prior to being offered a contract of employment.

All Trust staff are required to display their identification badges on their person at all times to confirm to Schools and other providers that they are subject to this safeguarding process.

Where a DBS disclosure provides information about allegations and/or convictions relating to children or an allegation is made about an existing member of staff, the nominated Senior Officer will share that information with the Local Authority Designated Officer in accordance with the requirements of Safeguarding Vulnerable Groups Act 2006.

If you have any further queries, please do not hesitate to contact the Trust’s Human Resources Department via the contact details detailed at the top of this letter.

We are more than happy to work with you and members of your Team to confirm/validate our staff members’ identification when they present at your premises.

Yours sincerely

cid:image001.jpg@01CFB6E8.F585D390

**Paula Woods**

**Assistant Director Workforce**

*Appendix Four*

*School security guidance*



*Appendix Five*

**CHILDREN MISSING EDUCATION CHECKLIST**

**June 2018 v 2**

As outlined in the statutory guidance for Local Authorities Children missing education are children of compulsory school age who are not registered pupils at a school and are not receiving suitable education otherwise than at a school.

Where a pupil has not returned to school for ten days without authorisation the school and the local authority have a responsibility to jointly make reasonable enquiries to establish the whereabouts of the child. The appropriate completion of this checklist ensures that the Local Authority and school have fulfilled this responsibility.

It is schools responsibility to follow up all unexplained and unexpected absences in a timely manner and every effort should be made to establish the reason for a pupil’s absence. If you require advice and guidance please contact the Early Help Hub on

It is important that one checklist is completed for each child within the family, please do not include all children on one.

During the first 10 days of absence (reason unknown), school must complete section 1. If, having completed the checklist the child’s whereabouts remains unknown, please make a referral to the Early Help Hub [ehh@wigan.gcsx.gov.uk](mailto:ehh@wigan.gcsx.gov.uk) within 5 days or earlier if section 1 is completed.

**At any point if you feel a child is at risk of significant harm, FGM, human trafficking or sexual exploitation refer immediately to social care please contact 01942 828300**

|  |  |
| --- | --- |
| Child’s name: | DOB: |
| Child’s Address | |
| Previous Address (if known) | |
| School: | |
| Parent/carer’s name: | |
| Parent/carer’s address: | |
| Contact names and numbers (including all emergency contacts and relationship to child) | |
| Reason for CME checks: | |
| Other agencies involved: | |
| Known vulnerabilities/risk factors:  Consider following areas in relation to both adults in the home and the child (this is not an exhaustive list): SEND, Child protection concerns, Missing from Home episodes, CSE, offending, alcohol and substance misuse, poor mental or physical health | |
| Date | |

**All boxes must be completed, if not relevant please enter N/A**

**Section 1**

|  |  |  |  |
| --- | --- | --- | --- |
| **SCHOOL’S RESPONSIBILITY** | Date(s) Time | Outcome | Name and  Team |
| 1. School to attempt to contact parent within 1 working day   Truancy Call, First Day calling, Text, Email, all emergency contacts. Please detail all contact methods - whether a message was left, if the phone is working, is there an international dialling tone. |  |  |  |
| 2. School to check possible whereabouts with staff and pupils?  This should include checking with family friends, all staff members, the child’s friends, social media |  |  |  |
| 4. Visit to address(es) by school.  Leave card if no answer  Does the property look empty?  Is someone at home but not answering the door?  NB if school policy does not permit home visit a police welfare check to be requested |  |  |  |
| 5. Contact made with involved agencies within 5 working days (Social Care, EMAS team, School Nurse etc) |  |  |  |
| 6. Contact made with agencies to understand when they last had contact/saw the child (no consent needed)  - Social care  - school nurse (when did health have any contact with the child) |  |  |  |
| NB – Has the child actually been seen? State when & by whom  If not seen, what further action has been taken? (Refer to CME Policy Doc for advice) |  |  |  |

**All boxes must be completed, if not relevant please enter N/A**

Please note that if the child is located (other than out of borough) they are not a CME and policies in relation to school attendance should be followed

**Section 2**

|  |  |  |  |
| --- | --- | --- | --- |
| **Local Authority checks**  (contact numbers in appendix) | Date(s) Time | Outcome | Name and  Team |
| Allocated worker to make contact with the referrer for an update to confirm the child is still missing |  |  |  |
| Early Help module check to understand Early Help and social care activity.  If other agencies are identified on EHM contact them |  |  |  |
| Home visit (to confirm resident status). Speak to neighbours for any further information  Leave card if no answer  Does the property look empty?  Is someone at home but not answering the door? |  |  |  |
| Housing check  Wigan and Leigh Homes  Serco  Supported housing |  |  |  |
| Check agencies –  Probation  Police  GP  Targeted Services  Adults (Mosaic)  Health - complete proforma and send to named nurse for safeguarding (access to local and national GP database) |  |  |  |
| Benefits Check- including Child Benefit-  If suspected benefit fraud email [multi.agency.tco@hmrc.gsi.gov.uk](mailto:multi.agency.tco@hmrc.gsi.gov.uk) |  |  |  |
| Council Tax Check |  |  |  |
| Contact any other authority identified where a child may have gone to /send information/ request form securely(refer to CME contact list) and request that the new LA confirm contact with the child  Request written confirmation that the child is being tracked through the Local Authority’s CME process and/or admissions |  |  |  |
| Check with UKBA (use enquiry form)  if concerned that child has left the UK  If suspected human trafficking, contact [traffickingandslavery@gmp.police.uk](mailto:traffickingandslavery@gmp.police.uk)  Contact Prevent/Channel |  |  |  |
| Contact Pupil Inclusion for message to be sent via S2S lost pupils database |  |  |  |
| All data including contacts, referrals etc to be uploaded to student folder on AGMA |  |  |  |
| Quality Assurance Check (to be signed by Manager) |  | Manager’s signature and date:- |  |
| **Outcomes:**  Located - no longer CME(on roll in borough)  Located – not on roll CME  Moved out of borough – located confirmed CME  EHE  Not located  **Manager’s recommendations:**  cdd | | | |
| To be taken to the next CME panel and for a decision to be made, either to close or make dormant. |  |  |  |
| Outcome of CME panel decision |  |  |  |

1. <https://www.wigan.gov.uk/Docs/PDF/WSCB/Thresholds-of-Need-booklet.pdf> [↑](#footnote-ref-1)
2. Escalation policy recently update to Resolution Policy [↑](#footnote-ref-2)
3. Guidance regarding DBS checks was updated by the Protection of Freedoms Act 2012 <https://www.gov.uk/dbs-check-applicant-criminal-record> [↑](#footnote-ref-3)
4. Wherever the word “staff” is used, it covers ALL staff on site, including ancillary supply and self-employed staff, contractors, volunteers working with children etc, and governors [↑](#footnote-ref-4)
5. Safer recruitment training can be accessed through Wigan Safeguarding Children’s Board [↑](#footnote-ref-5)
6. Disqualification by Association now only applies in domestic settings, not schools. Disqualification under the Child Care Act still applies to  staff themselves who work in a child care capacity, whether paid, volunteer or are on work placements. Relevant staff are those working in child care, or in a management role because they are: working with reception age children at any time; or working with children older than reception until age eight, outside school hours. Keeping Children Safe in Education (DfE, 2018) paragraph 116 also refers to disqualification: “For staff who work in childcare provision or who are directly concerned with the management of such provision, the school needs to ensure that appropriate checks are carried out to ensure that individuals are not disqualified under the Childcare (Disqualification) Regulations 2009”. [↑](#footnote-ref-6)
7. LADO Local Authority Designated Officer for allegations against staff. LADO threshold document can be found here <https://www.wigan.gov.uk/Docs/PDF/WSCB/LADO-threshold.pdf> [↑](#footnote-ref-7)
8. <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf> [↑](#footnote-ref-8)
9. LADO process can be found on the WSCB website <http://www.wiganlscb.com/Professionals/LADO.aspx> [↑](#footnote-ref-9)
10. <http://www.wiganlscb.com/Docs/PDF/Professional/Resolution-Policy.pdf> [↑](#footnote-ref-10)
11. Available to view on the WSCB website [↑](#footnote-ref-11)
12. <https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/719902/Sexual_violence_and_sexual_harassment_between_children_in_schools_and_colleges.pdf> [↑](#footnote-ref-12)