

CHILD PROTECTION POLICY

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1. INTRODUCTION

Safeguarding is defined as protecting children from maltreatment, preventing impairment of children's health or development, ensuring that children are growing up in circumstances consistent with the provision of safe and effective care and taking action to enable all children to have the best outcomes. (Working Together to Safeguard Children, DfE, 2018, pg.6)

This Child Protection Policy forms part of a suite of documents and policies which relate to the safeguarding responsibilities of the CHEXS. This policy should be read in conjunction with:

- the behaviour policy;
- the staff behaviour policy (sometimes called a code of conduct);
- the role of the designated safeguarding lead (including the identity of the designated safeguarding lead and any deputies).

Purpose of a Child Protection Policy

To inform staff/volunteer, parents, volunteers and trustees about the charities' responsibilities for safeguarding children.
To enable everyone to have a clear understanding of how these responsibilities should be carried out.

Hertfordshire Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures

CHEXS follows the procedures established by the Hertfordshire Safeguarding Children Board; a guide to procedure and practice for all agencies in Hertfordshire working with children and their families.
www.hertssafeguarding.org.uk



CHEXS Staff/volunteer & Volunteers

All charity staff/volunteer and volunteers have a responsibility to provide a safe environment in which children can learn.

Charity staff/volunteer and volunteers are particularly well placed to observe outward signs of abuse, changes in behaviour and failure to develop because they have daily contact with children.

All charity staff/volunteer and volunteers will receive appropriate safeguarding children training (which is updated regularly – Hertfordshire Safeguarding Children Board advises every 3 years), so that they are knowledgeable and aware of their role in the early recognition of the indicators of abuse or neglect and of the appropriate procedures to follow. It is good practice for the Designated Senior Person to deliver an annual update.

Temporary staff/volunteer and volunteers will be made aware of the safeguarding policies and procedures by the Designated Senior Person.

Mission Statement

Establish and maintain an ethos and culture where children feel secure, are encouraged to talk, and are listened and responded to when they have a worry or concern.

Establish and maintain an ethos and culture where CHEXS staff/volunteer and volunteers feel safe, are encouraged to talk and are listened and responded to when they have concerns about the safety and well-being of a child.

Ensure children know that there are adults in CHEXS whom they can approach if they are worried.

Ensure that children, who have additional/unmet needs are supported appropriately. This could include referral to early help services or specialist services if they are a child in need or have been / are at risk of being abused and neglected.

Consider how children may be taught about safeguarding, including online, through teaching and learning opportunities, as part of providing a broad and balanced curriculum.

Staff/volunteer members and volunteers working with children are advised to maintain an attitude of 'it could happen here' and 'it could be happening to this child' where safeguarding is concerned. When concerned about the welfare of a child, staff/volunteer members should always act in the interests of the child.

**Implementation,
Monitoring and Review of
the Child Protection Policy**

The policy will be reviewed at least annually by the Trustees. It will be implemented through the CHEXS's induction and training programme, and as part of day to day practice. Compliance with the policy will be monitored by the Designated Senior Person and through staff/volunteer performance measures.

2. STATUTORY FRAMEWORK

In order to protect children from harm the Charity will act in accordance with the following legislation and guidance:

- The Children Act 1989
- The Children Act 2004
- Children and Social Work Act 2017
- Education Act 2002 (Section 175/157)
- *Outlines that Local Authorities and School Governing Bodies have a responsibility to “ensure that their functions relating to the conduct of school are exercised with a view to safeguarding and promoting the welfare of children who are its pupils”.*
- Hertfordshire Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures (Electronic)
- Keeping Children Safe in Education (DfE, September 2018)
- Keeping Children Safe in Education: Part One- information for all school and college staff (DfE, September 2018) – APPENDIX 1
- Working Together to Safeguard Children (DfE 2018)
- The Education (Pupil Information) (England) Regulations 2005
- Sexual Offences Act (2003)
- Section 26, The Counter Terrorism and Security Act 2015 (PREVENT duty)
- Female Genital Mutilation Act 2003 (Section 74 ,Serious Crime Act 2015)
- Anti-social Behaviour, Crime and Policing Act 2014 (makes it a criminal offence to force someone to marry. Includes taking someone overseas to force them to marry (whether or not the forced marriage takes place).

Working Together to Safeguard Children (DfE 2018) requires each school to follow the procedures for protecting children from abuse and neglect which are established by the Hertfordshire Safeguarding Children Board.

- (a) Keeping Children Safe in Education (DfE 2018) requires that each school should ensure that the school contributes to multi-agency working in line with statutory guidance Working together to safeguard children.
- (b) Furthermore it also states that governing bodies and proprietors of the schools should ensure that their safeguarding arrangements take into account the procedures and practice of the local authority as part of inter-agency safeguarding procedures set up by the LSCB

3. THE DESIGNATED SENIOR PERSON

N.B. Keeping Children Safe in Education, DfE 2018 refers to this role as Designated Safeguarding Lead – DSL

Charity Trustees should ensure that CHEXS designates an appropriate senior member of staff/volunteer to take lead responsibility for child protection. This person should have the status and authority within CHEXS to carry out the duties of the post including committing resources and, where appropriate, supporting and directing other staff/volunteer.

The designated safeguarding lead and/or a deputy will always be available (during working hours) for CHEXS staff to discuss any safeguarding concerns.

The Designated Senior Person for Child Protection in this charity is:

NAME: Julie Cottenden CHEXS Children & Young people Support Lead 07792842516

The Deputy Designated Safeguarding Lead for Child Protection in this Charity is:

Peter D Maiden CHEXS Director 07974262875:

DSP deputy should be appointed to act in the absence/unavailability of the DSP

The broad areas of responsibility for the designated safeguarding lead are:

Managing referrals

- Refer all cases of suspected abuse or neglect to the Local Authority Children's Services (Safeguarding and Specialist Services) , Police (cases where a crime may have been committed) and to the Channel programme where there is a radicalisation concern
- Liaise with the CEO to inform him of issues- especially ongoing enquiries under Section 47 of the Children Act 1989 and police investigations
- Act as a source of support, advice and expertise to staff/volunteer on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies
- Support staff/volunteer who make referrals
- Share information with appropriate staff/volunteer in relation to a child's looked after (CLA) legal status (whether they are looked after under voluntary arrangements with consent of parents or on an Interim Care Order or Care Order) and contact arrangements with birth parents or those with parental responsibility.
- Ensure they have details of the CLA's social worker and the name of the virtual school Head Teacher in the authority that looks after the child.

➤ **Training**

The Designated Senior Person should undergo formal training every two years. The DSP should also undertake Prevent awareness training. In addition to this training, their knowledge and skills should be refreshed (for example via e-bulletins, meeting other DSPs, or taking time to read and digest safeguarding developments) at least annually to:

1. Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments
2. Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so
3. Ensure each member of staff/volunteer has access to and understands the charity's safeguarding and child protection policy and procedures, especially new and part time staff/volunteer
4. Be alert to the specific needs of children in need, those with special educational needs and young carers
5. Understand and support the charity with regards to the requirements of the Prevent duty and are able to provide advice and support to staff/volunteer on protecting children from the risk of radicalisation
6. Be able to keep detailed, accurate, secure written records of concerns and referrals
7. Obtain access to resources and attend any relevant or refresher training courses
8. Encourage a culture of listening and responding to children and taking account of their wishes and feelings, among all staff/volunteer, in any measures the school or college may put in place to protect them

➤ **Raising Awareness**

- The designated safeguarding person should ensure the charity's policies are known, understood and used appropriately.
- Ensure the charity's safeguarding and child protection policy is reviewed annually and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this.
- Ensure the safeguarding and child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the charity in this.
- Link with the Local Safeguarding Children's Board (LSCB) to make sure staff/volunteer are aware of training opportunities and the latest local policies on safeguarding.
- Where children leave the charity, ensure the file for safeguarding and any child protection information is sent to any new school /college/agency setting as soon as possible but transferred separately from the main pupil file.

- The charity should obtain proof that the new school/education/agency setting has received the safeguarding file for any child transferring and then destroy any information held on the child in line with data protection guidelines (see CHEXS Record keeping Guidance)

4. THE BOARD OF TRUSTEES

The board of Trustees and proprietors must ensure that they comply with their duties under legislation. They must also have regard to this guidance to ensure that the policies, procedures and training in the charity are effective and comply with the law at all times.

The nominated trustees for child protection are:

Mrs Jo Gant – CHEXS Chair. 07581544150

Mr Tony Gorton CHEXS Vice chair 01992 629503

The responsibilities placed on governing bodies and proprietors include:

- their contribution to inter-agency working, which includes providing a coordinated offer of early help when additional needs of children are identified
- ensuring that an effective child protection policy is in place, together with a staff/volunteer behaviour policy
- ensuring staff/volunteer are provided with Part One of Keeping Children Safe in Education (DfE 2018) – Appendix 1 and are aware of specific safeguarding issues
- ensuring that staff/volunteer induction is in place with regards to child protection and safeguarding
- appointing an appropriate senior member of staff/volunteer to act as the Lead Designated Senior Person.
- ensuring that all of the Designated Senior Persons (including deputies) should undergo formal child protection training every two years (in line with LCSB guidance) and receive regular (annual) safeguarding refreshers (for example via e-bulletins, meeting other DSPs, or taking time to read and digest safeguarding developments)
- prioritising the welfare of children and young people and creating a culture where staff/volunteer are confident to challenge senior leaders over any safeguarding concerns
- should ensure that children are taught about safeguarding, including online safety.

- ensuring appropriate filters and appropriate monitoring systems are in place to safeguard children from potentially harmful and inappropriate online material. Additional information to support the Trustees is provided in Annex C of **Keeping Children Safe in Education (DFE 2018)**
- Having a senior board level lead to take leadership responsibility for the organisation's safeguarding arrangements

5. WHEN TO BE CONCERNED

If staff have any concerns about a child's welfare, they should act on them immediately. If staff have a concern, they should follow this policy and speak to the Designated Senior Person/DSL (or deputy). The designated safeguarding lead (and any deputies) are most likely to have a complete safeguarding picture and be the most appropriate person to advise on the response to safeguarding concerns.

Any staff member should be able to make a safeguarding referral to Children's Services if necessary.

All staff should be aware of the process for making referrals to Children's Services and for statutory assessments under the Children Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm - from abuse or neglect) that may follow a referral, along with the role they might be expected to play in such assessments.

Staff should not assume a colleague or another professional will take action and share information that might be critical in keeping children safe. They should be mindful that early information sharing is vital for effective identification, assessment and allocation of appropriate service provision.

Options will then include:

- managing any support for the child internally via CHEXS's own pastoral support processes;
- an early help assessment; or
- a referral for statutory services, for example as the child might be in need, is in need or suffering or likely to suffer significant harm from abuse or neglect.

Contextual Safeguarding

Safeguarding incidents and/or behaviours can be associated with factors outside the CHEXS activities and/or can occur between children outside the school. All staff, but especially the designated safeguarding lead (or deputy) should be considering the context within which such incidents and/or behaviours occur. This is known as contextual safeguarding, which simply means assessments of children should consider whether

wider environmental factors are present in a child's life that are a threat to their safety and/or welfare.

A child centred and coordinated approach to safeguarding

Safeguarding and promoting the welfare of children is **everyone's responsibility**. In order to fulfil this responsibility effectively, each professional should make sure their approach is **child centred**. This means that they should consider, at all times, what is in the best interests of the child.

CHEXS staff form part of the wider safeguarding system for children. This system is based on the principle of providing help for families to stay together where it is safe for the children to do so, and looking at alternatives where it is not, whilst acting in the **best interests** of the child at all times.

Children who may require early help (known as Families First in Hertfordshire)

Families First is Hertfordshire's programme of early help services for families. A directory of early help services is available at www.hertfordshire.gov.uk/familiesfirst and will help practitioners and families find information and support to prevent escalation of needs and crisis.

All staff/volunteer should be aware of the **early help process**, and understand their role in identifying emerging problems, sharing information with other professionals to support early identification and assessment of a child's needs. It is important for children to receive the right help at the right time to address risks and prevent issues escalating. This also includes staff/volunteer monitoring the situation and feeding back to the Designated Senior Person any ongoing/escalating concerns so that consideration can be given to a referral to Children's Services (Safeguarding and Specialist Services) if the child's situation doesn't appear to be improving.

Staff/volunteer and volunteers working within CHEXS should be alert to the potential need for early help for children also who are more vulnerable. If early help is appropriate, the designated safeguarding lead (or deputy) will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate.

Any child may benefit from early help, but all CHEXS staff should be particularly alert to the potential need for early help for a child who:

- is disabled and has specific additional needs;
- has special educational needs (whether or not they have a statutory education, health and care plan);
- is a young carer;
- is showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
- is frequently missing/goes missing from care or from home;
- is misusing drugs or alcohol themselves;

- Is at risk of modern slavery, trafficking or exploitation;
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse;
- has returned home to their family from care;
- is showing early signs of abuse and/or neglect;
- is at risk of being radicalised or exploited;
- is a privately fostered child.

CHEXS staff/volunteer members/volunteers should be aware of the main categories of maltreatment: **physical abuse, emotional abuse, sexual abuse and neglect**. They should also be aware of the indicators of maltreatment and **specific safeguarding issues** so that they are able to identify cases of children who may be in need of help or protection.

See Appendix 4 for information on indicators of abuse

Children with special educational needs and disabilities:

Additional barriers can exist when recognising abuse and neglect in this group of children.

This can include:

- ❖ Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's impairment without further exploration;
- ❖ Assumptions that children with SEN and disabilities can be disproportionately impacted by things like bullying- without outwardly showing any signs;
- ❖ Communication barriers and difficulties
- ❖ Reluctance to challenge carers , (professionals may over empathise with carers because of the perceived stress of caring for a disabled child)
- ❖ Disabled children often rely on a wide network of carers to meet their basic needs and therefore the potential risk of exposure to abusive behaviour can be increased.
- ❖ A disabled child's understanding of abuse.
- ❖ Lack of choice/participation
- ❖ Isolation

Peer on peer abuse

Education settings are an important part of the inter-agency framework not only in terms of identifying, evaluating and referring concerns to Children's Services and the Police, but also in the assessment and management of risk that the child or young person may pose to themselves and others in the education setting.

If one child or young person causes harm to another, this should not necessarily be dealt with as abuse. When considering whether behaviour is abusive, it is important to consider:

- Whether there is a large difference in power (for example age, size, ability, development) between the young people concerned; or
- whether the perpetrator has repeatedly tried to harm one or more other children; or
- Whether there are concerns about the intention of the alleged perpetrator.

All staff should be aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but may not be limited to:

- bullying (including cyberbullying);
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexual violence and sexual harassment;
- sexting (also known as youth produced sexual imagery); and
- initiation/hazing type violence and rituals.

All staff should be aware that abuse is abuse and peer on peer abuse will never be tolerated or passed off as “banter”, “just having a laugh” or “part of growing up”. Furthermore they should *recognise the gendered nature of peer on peer abuse (i.e. that it is more likely that girls will be victims and boys perpetrators), but that all peer on peer abuse is unacceptable and will be taken seriously.*

- **Where there is an allegation or concern that a child has abused others Section 4.4 of the Hertfordshire Safeguarding Children Board Procedures Manual (Electronic) , ‘Children Who Abuse Others’:**

http://hertsscb.proceduresonline.com/chapters/p_chil_abuse.html

Staff should also refer to Part 5 of Keeping Children Safe in Education (DfE 2018) – ‘Child on child sexual violence and sexual harassment’:

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

7. DEALING WITH A DISCLOSURE

If a child discloses that he or she has been abused in some way, the member of staff/volunteer / volunteer should:

- Listen to what is being said without displaying shock or disbelief
- Accept what is being said
- Allow the child to talk freely
- Reassure the child, but not make promises which it might not be possible to keep
- Never promise a child that they will not tell anyone - as this may ultimately not be in the best interests of the child
- Reassure him or her that what has happened is not his or her fault
- Stress that it was the right thing to tell
- Listen, only asking questions when necessary to clarify
- Not criticise the alleged perpetrator
- Explain what has to be done next and who has to be told
- Make a written record (see Record Keeping)
- Pass the information to the Designated Senior Person without delay

Support

Dealing with a disclosure from a child, and safeguarding issues can be stressful. The member of staff/volunteer/volunteer should, therefore, consider seeking support for him/herself and discuss this with the Designated Senior Person.

If a staff/volunteer member receives a disclosure about potential harm caused by another staff/volunteer member, they should see CHEXS Whistle Blowing Policy

CONFIDENTIALITY

7. RECORD KEEPING

All practitioners should be confident of the processing conditions under the Data Protection Act 2018 and the GDPR which allow them to store and share information for safeguarding purposes, including information which is sensitive and personal, and should be treated as 'special category personal data'.

When a child has made a disclosure, the member of staff/volunteer/volunteer should:

- Record as soon as possible after the conversation. Use the CHEXS record of concern sheet wherever possible
- Do not destroy the original notes in case they are needed by a court
- Record the date, time, place and any noticeable non-verbal behaviour and the words used by the child
- Draw a diagram to indicate the position of any injuries
- Record statements and observations rather than interpretations or assumptions
- Do not destroy the original records in case they are needed by a court

All records need to be given to the Designated Senior Person promptly. No copies should be retained by the member of staff/volunteer or volunteer.

The Designated Senior Person will ensure that all safeguarding records are managed in accordance with the Education (Pupil Information) (England) Regulations 2005.

If a pupil who is/or has been the subject of a child protection plan changes school, the Designated Senior Person will inform the social worker responsible for the case and transfer the appropriate records to the Designated Senior Person at the receiving school, in a secure manner, and separate from the child's academic file.

Confidentiality

Child Protection raises issues of confidentiality that must be clearly understood by all staff/volunteer/volunteers in Charities.

- All staff/volunteer in Charities have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children's Services and the Police).
- If a child confides in a member of staff/volunteer/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer/volunteer tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality – instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe. This will ultimately be in the best interests of the child
- Staff/volunteer/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts.

Charity Procedures

If any member of staff/volunteer/volunteer is concerned about a child he or she must inform the Designated Senior Person. The Designated Senior Person will decide whether the concerns should be referred to Children's Services: Safeguarding and Specialist Services. If it is decided to make a referral to Children's Services: Safeguarding and Specialist Services this will be discussed with the parents, unless to do so would place the child at further risk of harm.

While it is the DSPs role to make referrals, any staff/volunteer member can make a referral to Children's Services. If a child is in immediate danger or is at risk of harm (e.g. concern that a family might have plans to carry out FGM), a referral should be made to Children's Services and/or the Police immediately. Where referrals are not made by the DSP, the DSP should be informed as soon as possible.

If a **teacher** (persons employed or engaged to carry out teaching work at schools and other institutions in England) , in the course of their work in the profession, discovers that an act of Female Genital Mutilation (FGM) appears to have been carried out on a girl under the age of 18 the **teacher** must report this to the police. **This is a mandatory reporting duty.** See Appendix 1- Keeping Children Safe in Education (DfE 2018): Annex A for further details.

Hertfordshire Children's Services (including out of hours) 0300 123 4043.

If the allegations raised are against other children, the school should follow section 4.3 of the Hertfordshire Safeguarding Children Board Procedures Manual – Children Who Abuse Others .

The member of staff/volunteer must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations.

Particular attention will be paid to the attendance and development of any child about whom the charity has concerns, or who has been identified as being the subject of a child protection plan and a written record will be kept.

If a pupil who is/or has been the subject of a child protection plan changes school, the Designated Senior Person will inform the social worker responsible for the case and transfer the appropriate records to the Designated Senior Person at the receiving school, in a secure manner, and separate from the child's academic file.

The Designated Senior Person is responsible for making the senior leadership team aware of trends in behaviour that may affect pupil welfare. If necessary, training will be arranged.

10. COMMUNICATION WITH PARENTS

CHEXS will:

Ensure the child protection policy is available publicly either via the CHEXS website or by other means.

Parents should be informed prior to referral, unless it is considered to do so might place the child at increased risk of significant harm by:

- The behavioural response it prompts e.g. a child being subjected to abuse, maltreatment or threats / forced to remain silent if alleged abuser informed;
- Leading to an unreasonable delay;
- Leading to the risk of loss of evidential material;

(The charity may also consider not informing parent(s) where it would place a member of staff/volunteer at risk).

Ensure that parents have an understanding of the responsibilities placed on the charity and staff/volunteer for safeguarding children.

Where reasonably possible schools and colleges should hold more than one emergency contact number for their pupils and students.

11. ALLEGATIONS INVOLVING CHEXS STAFF/VOLUNTEER/VOLUNTEERS

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

- Behaved in a way that has, or may have harmed a child
- Possibly committed a criminal offence against/related to a child
- Behaved towards a child or children in a way which indicates s/he would pose a risk of harm if they work regularly or closely with children

This applies to any child the member of staff/volunteer/volunteer has contact within their personal, professional or community life.

What charity staff/volunteer should do if they have concerns about safeguarding practices within the charity

All staff/volunteer and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the school or education setting's safeguarding arrangements.

Appropriate whistleblowing procedures, which are suitably reflected in staff/volunteer training and staff/volunteer behaviour policies, should be in place for such concerns to be raised with the charity's senior leadership team.

If staff/volunteer members have concerns about another staff/volunteer member then this should be referred to the Head Teacher or Principal. Where there are concerns about the CEO this should be referred to the Chair of charity as appropriate. Staff/volunteer may consider discussing any concerns with charities designated safeguarding lead and make any referral via them.

NAME: Mrs Jo Gant
CONTACT NUMBER: 07581544150

In the absence of the Chair of Trustees, the Vice Chair should be contacted.
The Vice Chair is:

NAME: Mr Tony Gorton
CONTACT NUMBER: 07801576063

In the event of allegations of abuse being made against the CEO or where a staff/volunteer member feels unable to raise an issue with their employer or feels that their

genuine concerns are not being addressed, allegations should be reported directly to the Local Authority Designated Officer (LADO). Staff/volunteer may consider discussing any concerns with the Designated Senior Person if appropriate make any referral via them. (See Keeping Children Safe in Education: Part Four, DfE 2016, for further information).

The person to whom an allegation is first reported should take the matter seriously and keep an open mind. S/he should not investigate or ask leading questions if seeking clarification; it is important not to make assumptions. Confidentiality should not be promised and the person should be advised that the concern will be shared on a 'need to know' basis only.

Actions to be taken include making an immediate written record of the allegation using the informant's words – including time, date and place where the alleged incident took place, brief details of what happened, what was said and who was present. This record should be signed, dated and immediately passed on to the CEO.

The recipient of an allegation must **not** unilaterally determine its validity, and failure to report it in accordance with procedures is a potential disciplinary matter.

The CEO/Charity Chair will not investigate the allegation itself, or take written or detailed statements, but will assess whether it is necessary to refer the concern to the Local Authority Designated Officer:

Children's Services – 03001234043
SOOHS (Out of Hours Service-Children's Services) – 03001234043

If the allegation meets any of the three criteria set out at the start of this section, contact should always be made with the Local Authority Designated Officer without delay.

If it is decided that the allegation requires a child protection strategy meeting or joint evaluation meeting, this will take place in accordance with section 4.1 of the Hertfordshire Safeguarding Children Board Inter-agency Child Protection and Safeguarding Children Procedures.

If it is decided it does not require a child protection strategy meeting or joint evaluation meeting, the LADO will provide the employer with advice and support on how the allegations should be managed.

The Chair should, as soon as possible, **following briefing** from the Local Authority Designated Officer inform the subject of the allegation.

For further information see:

HSCB Inter-agency Child Protection and Safeguarding Children Procedures (Electronic)
Section 4.1 Managing Allegations Against Adults who work with Children and Young People

Where a staff/volunteer member feels unable to raise an issue with their employer/through the whistleblowing procedure or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:

- Children's Services 0300 123 4043
- NSPCC whistleblowing helpline is available for staff/volunteer who do not feel able to raise concerns regarding child protection failures internally. Staff/volunteer



can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: help@nspcc.org.uk

Safer working practice

To reduce the risk of allegations, all staff/volunteer should be aware of safer working practice and should be familiar with the guidance contained in the staff/volunteer handbook/ volunteer code of conduct / staff/volunteer behaviour policy and Safer Recruitment Consortium document

The document seeks to ensure that the responsibilities of Charity leaders towards children and staff/volunteer are discharged by raising awareness of illegal, unsafe, unprofessional and unwise behaviour. This includes guidelines for staff/volunteer on positive behaviour management in line with the ban on corporal punishment (School Standards and Framework Act 1998). Please see the charity’s behaviour management policy for more information.

Mobile Phone Use

CHEXS staff/volunteers will only use CHEXS mobile phones whilst in the company of children and young people, unless otherwise instructed, personal mobile telephones will be switched off or switched to silent mode at all times during normal working hours.

CHEXS staff/volunteers will observe any site specific restrictions imposed by other organisations regarding the use of mobile phones, including requests to keep mobile phones turned off.

The Charity monitors the use of its mobile and Charity telephones in compliance with the Monitoring Policy.

Policy Review

This policy will be reviewed in full by CHEXS Board of Trustees on an annual basis.

The policy was last reviewed and agreed by the Board of Trustees on 1st December 2017.

It is due for review 30st November 2018

Signature
Peter Maiden

CEO CHEXS

Date

Signature
Jo Gant

Chair of Trustees

Date

APPENDIX 1: KEEPING CHILDREN SAFE IN EDUCATION (DfE 2018)
Part One: Information for all school and college staff
Annex A: Further information

On publication of this Child Protection Policy (July 2018), the CPSLO Service have therefore decided to provide the hyperlink only to Keeping Children Safe in Education in this policy rather than the document in its entirety, due to the potential for updates to the content.

All staff should have access and have read Part 1 and Annex A (which provides further information specific forms of abuse and safeguarding issues). of this statutory guidance. They should also have the opportunity to seek clarity from designated staff for any content.

This is to assist staff to understand and discharge their role and responsibilities as set out in this guidance.

We highly recommend that staff are asked to sign to say they have read these sections (please see Appendix 2) and should subsequently be re-directed to these documents again should any changes occur.

Link to Keeping Children Safe in Education (DfE, 2018):

<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>

APPENDIX 2: DECLARATION FOR STAFF/VOLUNTEER

Child Protection Policy and Keeping Children Safe in Education (DfE 2016)

CHEXS

Academic Year 2018-2019

Please sign and return to Julie Cottenden.....(DSP) by
1st September 2018

I, _____ have read and am familiar with the
contents of the following documents and understand my role and responsibilities as set
out in these document(s):

- (1) The Charity's Child Protection Policy
- (2) Part 1 and Annex A of 'Keeping Children Safe in Education' DfE Guidance , 2018

I am aware that the DSPs are:

DSP - Julie Cottenden, CYPSL
Deputy DESP - Peter Maiden CEO

and I able to discuss any concerns that I may have with them.

I know that further guidance, together with copies of the policies mentioned above, are
available at The Hub Office

Name _____

Signed _____

Date _____

ABUSED: ADVICE FOR PRACTITIONERS (DfE 2015)

Flowchart

Be alert

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- Be aware of the signs of abuse and neglect
- Identify concerns early to prevent escalation.
- Know what systems the school have in place regarding support for safeguarding e.g. induction training , staff/volunteer behaviour policy / code of conduct and the role of the Designated Safeguarding Lead (DSP) .

Question behaviours

- Talk and listen to the views of children, be non -judgemental.
- Observe any change in behaviours and question any unexplained marks / injuries
- To raise concerns about poor or unsafe practice , refer to the HT or principal, if the concerns is about the HT or Principal, report to Chair of Governors. Utilise whistleblowing procedure.

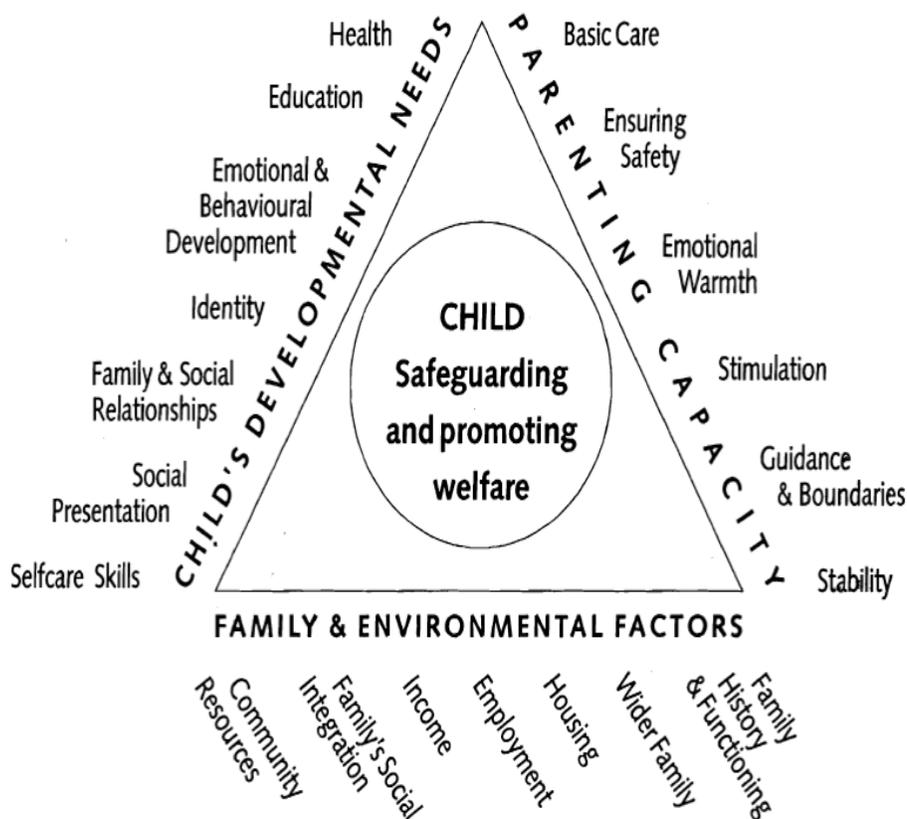
Ask for help

-
- Record and share information appropriately with regard to confidentiality
- If staff/volunteer members have concerns, raise these with CHEXS Designated Safeguarding Lead (DSP)
- Responsibility to take appropriate action, do not delay.

Refer

-
- DSP will make referrals to children servcies but in an emergency or a genuine concern that appropriate action has not been taken, staff/volunteer members can speak directly to Children's Services on 03001234043 .

APPENDIX 4: INDICATORS OF ABUSE AND NEGLECT



Working Together to Safeguard Children (DFE, 2015)

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.

Child

Bruises – shape, grouping, site, repeat or multiple	Withdrawal from physical contact
Bite-marks – site and size Burns and Scalds – shape, definition, size, depth, scars	Aggression towards others, emotional and behaviour problems
Improbable, conflicting explanations for injuries or unexplained injuries	Frequently absent from school
Untreated injuries	Admission of punishment which appears excessive
Injuries on parts of body where accidental injury is unlikely	Fractures
Repeated or multiple injurie	Fabricated or induced illness -
Parent	Family/environment
Parent with injuries	History of mental health, alcohol or drug misuse or domestic violence.
Evasive or aggressive towards child or others	Past history in the family of childhood abuse, self-harm, somatising disorder or false allegations of physical or sexual assault
Explanation inconsistent with injury	Marginalised or isolated by the community.
Fear of medical help / parents not seeking medical help	Physical or sexual assault or a culture of physical chastisement.
Over chastisement of child	

Emotional abuse	
<p>The persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as over protection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.</p>	
Child	
Self-harm	Over-reaction to mistakes / Inappropriate emotional responses
Chronic running away	Abnormal or indiscriminate attachment
Drug/solvent abuse	Low self-esteem
Compulsive stealing	Extremes of passivity or aggression
Makes a disclosure	Social isolation – withdrawn, a 'loner' Frozen watchfulness particularly pre school
Developmental delay	Depression
Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)	Desperate attention-seeking behaviour
Parent	
Observed to be aggressive towards child or others	Marginalised or isolated by the community.
Intensely involved with their children, never allowing anyone else to undertake their child's care.	History of mental health, alcohol or drug misuse or domestic violence.
Previous domestic violence	History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
History of abuse or mental health problems	Past history in the care of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
Mental health, drug or alcohol difficulties	Wider parenting difficulties

Cold and unresponsive to the child's emotional needs	Physical or sexual assault or a culture of physical chastisement.
Overly critical of the child	Lack of support from family or social network.

Neglect	
<p>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:</p> <ul style="list-style-type: none"> • provide adequate food, clothing and shelter (including exclusion from home or abandonment); • protect a child from physical and emotional harm or danger; • ensure adequate supervision (including the use of inadequate care-givers); or • ensure access to appropriate medical care or treatment. <p>It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.</p>	
Child	
Failure to thrive - underweight, small stature	Low self-esteem
Dirty and unkempt condition	Inadequate social skills and poor socialisation
Inadequately clothed	Frequent lateness or non-attendance at school
Dry sparse hair	Abnormal voracious appetite at school or nursery
Untreated medical problems	Self-harming behaviour
Red/purple mottled skin, particularly on the hands and feet, seen in the winter due to cold	Constant tiredness
Swollen limbs with sores that are slow to heal, usually associated with cold injury	Disturbed peer relationships
Parent	Family/environment
Failure to meet the child's basic essential needs including health needs	Marginalised or isolated by the community.
Leaving a child alone	History of mental health, alcohol or drug misuse or domestic violence.
Failure to provide adequate caretakers	History of unexplained death, illness or multiple surgery in parents and/or siblings of the family

Keeping an unhygienic dangerous or hazardous home environment	Past history in the family of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
Unkempt presentation	Lack of opportunities for child to play and learn
Unable to meet child's emotional needs	Dangerous or hazardous home environment including failure to use home safety equipment; risk from animals
Mental health, alcohol or drug difficulties	

Sexual abuse	
<p>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.</p>	
Child	
Self-harm - eating disorders, self-mutilation and suicide attempts	Poor self-image, self-harm, self-hatred
Running away from home	Inappropriate sexualised conduct
Reluctant to undress for PE	Withdrawal, isolation or excessive worrying
Pregnancy	Sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
Inexplicable changes in behaviour, such as becoming aggressive or withdrawn	Poor attention / concentration (world of their own)
Pain, bleeding, bruising or itching in genital and /or anal area	Sudden changes in school work habits, become truant
Sexually exploited or indiscriminate choice of sexual partners	
Parent	Family/environment
History of sexual abuse	Marginalised or isolated by the community.

Excessively interested in the child.	History of mental health, alcohol or drug misuse or domestic violence.
Parent displays inappropriate behaviour towards the child or other children	History of unexplained death, illness or multiple surgery in parents and/or siblings of the family
Conviction for sexual offences	Past history in the care of childhood abuse, self harm, somatising disorder or false allegations of physical or sexual assault
Comments made by the parent/carer about the child.	Grooming behaviour
Lack of sexual boundaries	Physical or sexual assault or a culture of physical chastisement.