

Ysgol Penrhyn

New Broughton C. P.



A POLICY STATEMENT ON
CHILD PROTECTION

The school recognises that, as staff are in regular and frequent contact with children, they are particularly well placed to observe signs of abuse or unexplained changes in behaviour or performance, which may be indicative of it. Therefore, the school aims to be diligent in its efforts to look after each child's welfare and well-being.

Child abuse is actual harm to a child aged below 18 years, whether caused by default, or a deliberate act. The harm may be to the standard of health, development or well being which can be reasonably expected for that child. (Definition of Child Abuse AWCPP Revised 2008)

If someone tells you that they or another child or young person is being abused:

- Show that you have heard what he/she is saying, and that you take his/her allegations seriously.
- Encourage the child to talk, but do not prompt or ask leading questions.
- Explain what actions you must take.
- Do not give an undertaking of absolute confidentiality as staff have a responsibility to disclose information to those who need to know.
- Write down what you have been told, using the exact words if possible.
- Make a note of the date, time, place and people who were present at the discussion.
- Report your concerns to your line manager or (if appropriate) the member of staff in your organization with designated responsibility for child protection.
- Ensure that your concerns are immediately reported to the duty social worker at the local office (MASH 01978 292039).
- Do not confront the alleged abuser.

If a child is likely to suffer harm it is essential that urgent action is taken under the child protection procedures. These procedures are outlined in The All Wales Child Protection Procedures and the local protocol is ratified by the LSCB (Booklet-All Wales Child Protection Procedures-Schools-Revised 2008).

When abuse is alleged or suspected the school will adopt the following procedure:

- There is a designated Child Protection Co-coordinator in school who will be **immediately** informed, or in the case of their absence the Deputy Headteacher.
- The person informed will refer information to MASH, Safeguarding and Support Services, (and inform the Educational Social Worker, and school nurse), on the **same day**
- The person informed will complete Child Protection Form/Common Referral Form and send or fax it to CAFAT – within **24 hours**, or at the earliest opportunity, following consultation with appropriate agencies.
- Take advice from CAFAT before communicating with parents.
- Attend case conferences as requested.

WHERE IT IS ALLEGED ABUSE HAS TAKEN PLACE INVOLVING A MEMBER OF STAFF:

The following procedures will be followed:

- The Head teacher or deputy in his absence should be notified immediately. (If the allegation involves the Head Teacher you may have a confidential interview with the named officer for child protection for schools i.e. ESW Team Manager).

- All suspected abuse must be reported to Safeguarding and Support.
- A senior Education Officer will be informed.
- The Chair of Governors will be consulted
- “Agencies must not undertake their own internal enquiries but must refer on as described above. Agencies must not make their own decisions about whether a concern that involves a particular member of their own staff is a disciplinary issue or a child protection issue. Such complex considerations should only take place with the involvement of Social Services and the Police”. All Wales Child Protection Procedures.

Definition of Child Abuse:

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 setting, by those known to them or, more rarely, by a stranger. A child or young person up to the age of 18 years can suffer abuse or neglect and require protection via an inter-agency child protection plan.

Role of the Child Protection Co-coordinator:

General Consideration:

Child Protection is a serious issue, particularly those who may be victims, potential victims or involved in support. Frequently situations do not appear ‘black or white’ and a tension often exists between agencies.

It would seem essential therefore, that the person nominated or appointed should have:

- a. A clear understanding of the importance of Child Protection and the role of the school.
- b. The ability to communicate effectively with other agencies and the ability to appreciate all relevant perspectives.
- c. The ability to relate well to pupils parents and colleagues in order to gain their confidence.
- d. Sufficient seniority or recognition within the school in order to act on behalf of the school and in some instances brings about change if required.
- e. A willingness to develop awareness of Child Protection, particularly through training and obtaining information available in existing and future circulars.

Specifically:

The role of the coordinator would include:

1. Ensuring that all members of staff are aware of the appropriate Child Protection Procedures and who the designated teacher is. This is particularly important for new staff.
2. Ensuring that the proper procedures are followed.
3. Liaison with other agencies over cases of alleged abuse and the promotion of cooperative working including attendance at Case Conferences.
4. Ensuring that the designated Senior LA Officer is aware of any breakdown in communication or problems with the implementation of local procedures.
5. Maintaining appropriate records regarding cases which cause concern and subsequent action taken.
6. Ensuring that ongoing monitoring exists for pupils having been the subject of child abuse concerns and/or, placed on the Child Protection Register and made the subject of a plan involving their school or facilities.

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. It may involve a parent or caregiver failing to provide adequate food, shelter and clothing, failing to protect a child from physical harm or danger, or the failure to ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. In addition, neglect may occur during pregnancy as a result of maternal substance misuse.

The school is always aware of the possibility of a child suffering neglect. When concerns are raised regarding neglect, the 'Neglect Practice Guidelines' and monitoring form will be implemented. (See below).

Training

All Staff receive Child Protection training provided by Mr. John Grant. The Headteacher is named as the School's Child Protection Co-ordinator in the School Prospectus and in the Staff Handbook. New and temporary staffs are informed of the School's Child Protection procedures by the Headteacher and formal training is provided during the next cycle of events led by Wrexham CBC.

Mrs. Sarah Hughes is the designated Governor for Child Protection.

Declaration

This policy was approved by the School's Governing Body on 10th October, 2016
It will be reviewed during the Autumn Term of 2017.

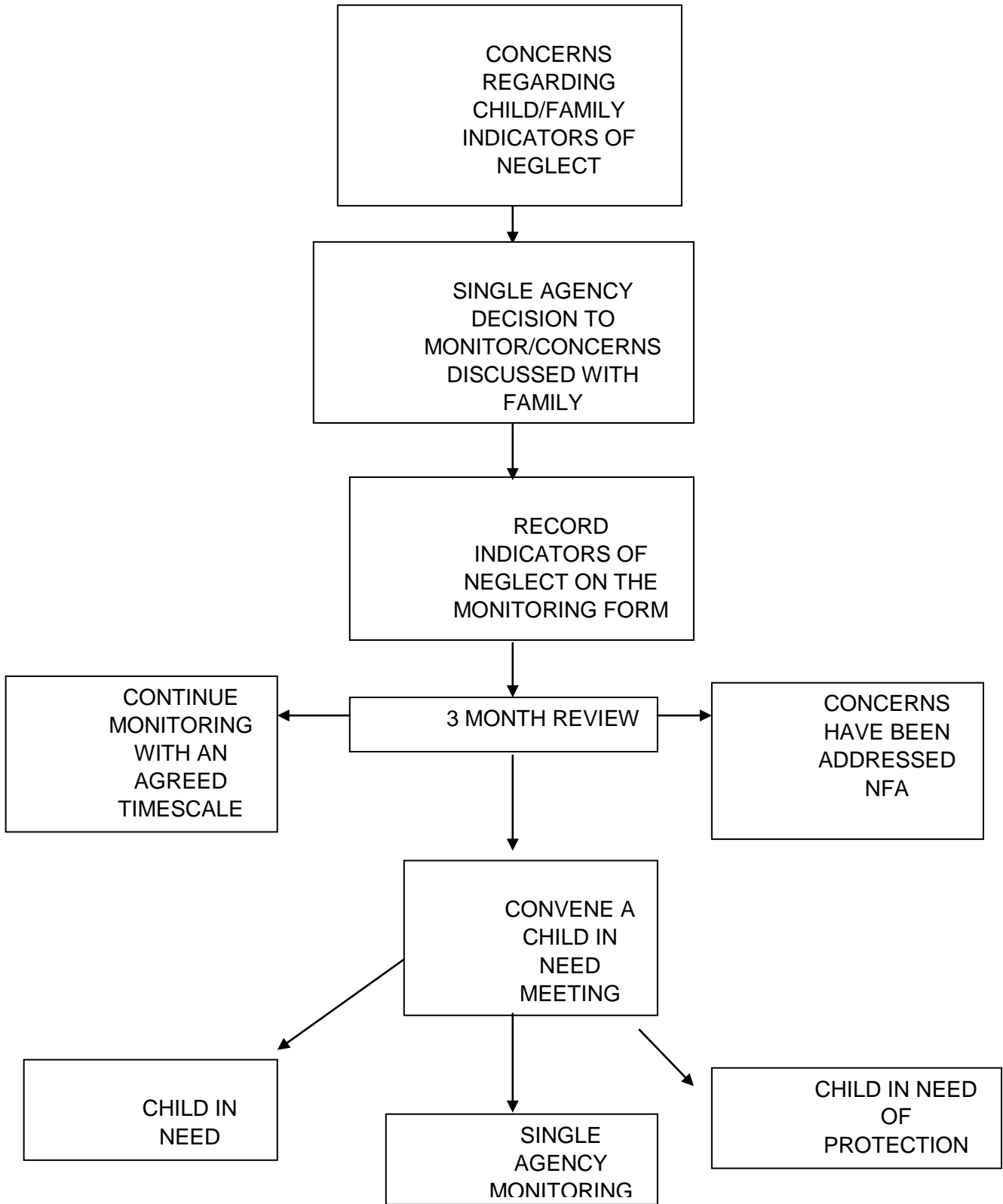
Signed _____
Chair of Governors

| | PHYSICAL SIGNS | BEHAVIOUR SIGNS |
|--------------------------------------|---|--|
| Physical neglect/ Emotional Abuse | Neglected appearance. Often left unattended/abandoned. Unattended health/medical needs. Failure to thrive/gain weight. Consistent hunger. Poor hygiene. | Delayed development. Lethargic, tired, falls asleep. Often absent or late to school. Self-destructive. Hopelessness. Desperate attention seeker. Steals food. |
| Physical Abuse | Unexplained or frequent trauma, such as <ul style="list-style-type: none"> ▪ Fractures, grazes, cuts ▪ Injuries of different ages ▪ Burns, cigarette or immersion ▪ Minor injuries, bruises especially to eyes or mouth Heavy punishment, eg severe bruises, multiple weals, hand-shaped marks. | Delay seeking medical advice. Hyper-critical/rigid parents. Chronic runaway. Afraid of going home. Unexplained or regular absences. Wary of physical contact. Complains of soreness. Behavioural extremes – withdrawn, wary or aggressive/disruptive. |
| Sexual Abuse | Sleep and eating disturbances. Medical problems, eg pain, itching, urinary infection, venereal disease. Pregnant. Sexual knowledge or curiosity or behaviour beyond child's years. Underclothes – torn, stained, bloody. Difficulty in walking or sitting – genital injuries | Reports abuse. Fear of particular individuals. Sudden change in personality or school performance or self-esteem. Aggression or unruly behaviour. Truancy. Depressed, withdrawn, sad, listless, self-injury, suicide attempts, overdoses, running away. Guilt, shame, anger. |

The above signs do not always indicate child abuse, but the possibility should be considered.

If in doubt, share your concern without delay.

NEGLECT PRACTICE GUIDELINES



SHOULD THERE BE CONCERNS OF A CHILD PROTECTION NATURE THROUGHOUT THIS PROCESS CHILD PROTECTION PROCEDURES SHOULD BE FOLLOWED.



Referral and Information Record – (Child and Family Services)

Section 1

| Full Names of Child / Children Being Referred (or Names Child is Known As) | Sex | DOB | School / Nursery |
|--|-----|------------|------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Unborn Child / Name of Mother | | EDD | |
| | | | |

Current Address:.....

.....Postcode:.....Tel No:.....

Section 2

| <i>Others in Household (if known)</i> | DOB | Sex | Relationship to Child |
|---------------------------------------|-----|-----|-----------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| Significant Others not in Household | DOB | Sex | Relationship to Child |
| Name: | | | |
| Address: | | | |
| Name: | | | |
| Address: | | | |

Name of Person(s) with Parental Responsibility

Section 3

Other Significant Information (where available)

| | | | |
|--|---|--|--|
| GP's Name | | | |
| GP's Address and Telephone Number | | | |
| Name of Health Visitor / School Nurse | | Tel No | |
| Name of Community Paediatrician | | | |
| Any Other Agency (please specify) | | | |
| Ethnic Origin | | | |
| Immigration Status – Asylum Seeking <input type="checkbox"/> | Refugee Status <input type="checkbox"/> | Exceptional leave to remain <input type="checkbox"/> | |
| Family's Language of Choice | | | |
| Is Interpreter / Signer Required | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Any Known Disabilities – Child or Parent | | | |

Section 4 – Reason for Referral

Child Protection Child in Need

.....
.....
.....
.....
.....
.....

Have Parents / Guardian been Informed? Yes No

If no, why

See para 3.3.2 of All Wales Child Protection Procedures

In responding to this referral are there known staff safety issues that need to be taken into account for example lone workers visiting the household?

Yes No Please specify.....

Section 5 – Child’s / Children’s Developmental Needs

The purpose of this section is to identify areas of strength and areas of developmental need, in order for resources to be allocated appropriately to ensure the optimum development of this child / children

Section 6 – Parents’ / Carers’ Capacity to Respond appropriately to the Child’s / Children’s Needs

Please record parents(s) / carer(s) strengths as well as any difficulties they are experiencing. The following may affect parenting capacity:- Physical illness, mental illness, learning disability, substance / alcohol misuse, domestic violence, childhood abuse, history of abusing children

Section 7 – Family Environmental Factors which Impact on the Child and Family

Please give details of history and current situation, if known

Section 8 – Any Additional Information – e.g. Previous Addresses , if known / Other Factual Information

Section 9 – Consent to Child in Need Referral

To Social Services

Data Protection Act 1998

9.1 Ihave parental responsibility for (name of child / children).....and I give my consent to making of a referral to Social Services in relation to (name of child/children).....
.....

9.2 I agree to **information being shared** with Social Services in relation to (name of child / children).....
..... as follows:-

- (a) All of the records held by that relate to my child / myself / other children in my family *
- (b) Specific details from records held by that relate to my child / myself / other children in my family *

(Please state clearly the information you consent to share with Social Services)

.....
.....

9.3 I also consent to Social Services Department **contacting** other agencies currently involved with my child and family for information to enable them to complete an assessment.

* Please delete as appropriate Parent's / carers signature(s).....
(with parental responsibility)

Date

| Section 10 – Referrer Details | |
|--------------------------------------|--|
| Name of Referrer | |
| Designation | |
| Address | |
| | |
| Telephone Number | |

Signed:.....Date:.....
Name of Referrer

| To be completed by Duty Officer | |
|--|-------|
| Return form sent to Referring Agency | Date: |
| Signed Name of Duty Officer | Date: |

ACTION TAKEN BY SOCIAL SERVICES

PLEASE RETURN TO REFERRER

To be Completed by Social Services Staff
Number _____

Agency Case

Thank you for your Referral About:

Which we
Received on:

| | | | |
|-------|--|--|--|
| Name: | | | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| Name: | | | |
| Name: | | | |

I have referred on to another service provider:

I have decided that no further action is required (reason):

Please notify the family of this outcome

I have decided to commence an initial * **Assessment / * Core Assessment** (* Please Delete)

The Social Worker will contact you for more information and / or clarification and / or to contribute to the assessment and / or the outcome of the assessment:

The Social
Worker is:

Contact
Number

Thank you for your co-operation

Name:

Signature:

Designation:

Date:



INCIDENT MONITORING FORM



Name: _____ DOB: _ / _ / _ Address: _____

| DATE | INCIDENTS OF CONCERN/ POSITIVE EVENTS | PARENT RESPONSE CHILD'S COMMENTS | ACTION TAKEN | NAME AND SIGNATURE |
|------|--|---|--------------|-----------------------|
| | | | | |

ONLY FACTUAL INFORMATION TO BE RECORDED