

DEEPDALE COMMUNITY PRIMARY SCHOOL SAFEGUARDING PROCEDURES (2024 – 2025)



#### 1. <u>What Should Staff/Volunteers Do If They Have Concerns About A Child in School?</u>

Education professionals who are concerned about a child's welfare or who believe that a child is or may be at risk of abuse should pass any information to the Designated Safeguarding Lead **(DSL)** in school immediately.

(see Flowchart at Appendix 2):

#### <u>Safeguarding Team</u> The Designated Safeguarding Lead and Prevent Lead is: Nawal Mirza

The Deputy Designated Safeguarding Leads and Deputy Prevent Leads are: Yasmin Musa Frances Ball Samantha Brightcliffe Ryan Scott Kelly Johnston

The Pastoral Team are: Yasmin Musa Dawn Fearn Shailes Modashia Uzair Lehri

It is these senior colleagues who are responsible for taking action where the welfare or safety of children or young people is concerned. If staff are uncertain about whether their concerns are indeed 'child protection' then a discussion with their DSL/deputy DSL will assist in determining the most appropriate next course of action.

In addition to the discussion, staff need to record and notify the DSL of their concerns via CPOMS. If a child makes a disclosure, staff need to record this onto CPOMS. Please read Appendix (3): 'Talking and Listening to children'.

#### Staff should never:

- Do nothing/assume that another agency or professional will act or is acting.
- Attempt to resolve the matter themselves, the process in our school is that all concerns are reported to the DSL/backup DSL, if no one who is DSL trained is contactable, then the concerns are reported to the next most senior member of staff.

#### 2. Role of the Designated Senior Lead

The designated safeguarding lead or a deputy should always be available to discuss safeguarding concerns. If in exceptional circumstances, the designated safeguarding lead is not available, this should not delay appropriate action being taken.

Staff should consider speaking to a member of the senior leadership team and/or take advice from local authority children's social care. In these circumstances, any action taken should be shared with the designated safeguarding lead (or deputy) as soon as is practically possible.

#### Where can I access appropriate advice and/or support?

LCC School Safeguarding Officers Victoria Wallace, Mechelle Lewis and Sarah Holyhead, Natalie Barton	Safeguarding in Education Advice Line 01772 531196
LCC MASH Education Officers Matt Chipchase & Martine Blokland	Martine Blokland 01254 220914 <u>Martine.blokland@lancashire.gov.uk</u> Matt Chipchase 01254 220989 <u>matt.chipchase@lancashire.gov.uk</u>
LADO – Local Authority Designated Officer Tim Booth, Donna Green & Shane Penn	01772 536694 LADO.admin@lancashire.gov.uk
MASH – Multi-Agency Safeguarding Hub	0300 123 6720 0300 123 6722 between 5.00pm - 8.00am <u>cypreferrals@lancashire.gov.uk</u>
Police Prevent Team	01772 413398 01254 585260 prevent.team@blackburn.gov.uk

Phone:	01772 531196	
Email:	victoria.wallace@lancashire.gov.uk	
Mechelle Lewis - So	nools Safeguarding Officer	
Phone	01254 220584	
Email	mechelle.lewis@lancashire.gov.uk	
Linan	mechene.iewis@iancasinre.gov.uk	
	hools Safeguarding Officer	
Sarah Holyhead - S	hools Safeguarding Officer	
Sarah Holyhead - S Phone Email	hools Safeguarding Officer 01772 533799 sarah.holyhead@lancashire.gov.uk	
Sarah Holyhead - S Phone	hools Safeguarding Officer 01772 533799 sarah.holyhead@lancashire.gov.uk	

01772 530569

**Phone:** 

The DSL will record on CPOMS the time and date information is received, advice sought and by whom and action taken. The DSL will also record the names of individuals who have given information re: referral and dates and times received.

#### 3. Early help

- If early help is appropriate, the designated safeguarding lead will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate.
- Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead practitioner.
- Any such cases should be kept under constant review and consideration given to a referral to local authority children's social care for assessment for statutory services, if the child's situation does not appear to be improving or is getting worse.

#### 4. <u>Statutory children's social care assessments and services</u>

- Where a child is suffering, or is likely to suffer from harm, it is important that a referral to local authority children's social care (and if appropriate the police) is made immediately.
- Referrals should follow the local referral process. (See Appendix 5: Making a referral to Childrens Social Services)

#### 5. <u>Children in need</u>

A child in need is defined under the Children Act 1989 as:

- a child who is unlikely to achieve or maintain a reasonable level of health or development, or
- whose health and development is likely to be significantly or further impaired, without the provision of services; or
- a child who is disabled.

Local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989.

#### 6. Children suffering or likely to suffer significant harm

- Local authorities, with the help of other organisations as appropriate, have a duty to make enquiries under section 47 of the Children Act 1989 if they have reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm.
- Such enquiries enable them to decide whether they should take any action to safeguard and promote the child's welfare and must be initiated where there are concerns about maltreatment. This includes all forms of abuse, neglect and exploitation.

#### 7. What will the Local Authority do?

Within one working day of a referral being made, a local authority social worker should acknowledge receipt to the referrer and make a decision about the next steps and the type of response that is required.

This will include determining whether:

- the child requires immediate protection and urgent action is required;
- any services are required by the child and family and what type of services;
- the child is in need and should be assessed under Section 17 of the Children Act 1989.
- there is reasonable cause to suspect the child is suffering or likely to suffer significant harm, and whether enquiries must be made, and the child assessed under Section 47 of the Children Act 1989.
- further specialist assessments are required to help the local authority to decide what further action to take.

The referrer should follow up if this information is not forthcoming.

If social workers decide to carry out a statutory assessment, staff should do everything they can to support that assessment (supported by the designated safeguarding lead (or deputy) as required).

If, after a referral, the child's situation does not appear to be improving, the referrer should consider following local escalation procedures to ensure their concerns have been addressed and, most importantly, that the child's situation improves

#### 8. <u>Record keeping</u>

All concerns, discussions and decisions made, and the reasons for those decisions, should be recorded on CPOMS. This will also help if/when responding to any complaints about the way a case has been handled by the school or college. Information should be kept confidential and stored securely. It is good practice to keep concerns and referrals in a separate child protection file for each child.

Records should include:

- a clear and comprehensive summary of the concern;
- details of how the concern was followed up and resolved
- a note of any action taken, decisions reached and the outcome.

If in doubt about recording requirements, staff should discuss with the designated safeguarding lead (or deputy)

See Appendix 4 – How to Record Concerns

#### 9. <u>What school staff should do if they have a safeguarding concern about another staff</u> member who may pose a risk of harm to children

If staff have a safeguarding concern or an allegation of harming or posing a risk of harm to children is made about another member of staff (including supply staff, volunteers, and contractors), then:

- this should be referred to the Headteacher immediately
- where there are concerns/allegations about the Headteacher this should be referred to the Chair of Governors Helen Almond and
- in the event of a concern/allegation about the Headteacher, this should be reported directly to the Local Authority Designated Officer(s) (LADO): Tim Booth, Donna Green & Shane Penn: 01772 536694 <u>LADO.admin@lancashire.gov.uk</u>

## 10. What school staff should do if they have concerns about safeguarding practices within the school

All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the school's safeguarding regime and know that such concerns will be taken seriously by the Headteacher and Senior leadership team.

Where a staff member feels unable to raise an issue with their HT & SLT, or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them:

- Please see Whistleblowing Policy
- general advice on whistleblowing can be found at whistleblowing for employees: Whistleblowing for employees:
- NSPCC Whistleblowing Advice Line is available as an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally, or have concerns about the way a concern is being handled by their school or college.

Staff can call **0800 028 0285** – line is available from 8:00 AM to 8:00 PM, Monday to Friday and **09:00 to 18:00 at weekends.** and email: <u>help@nspcc.org.uk</u>.

#### Appendix 1

#### MAKING JUDGEMENTS ABOUT 'SIGNIFICANT HARM'

There are no absolute criteria upon which to rely when judging what constitutes significant harm; sometimes a single traumatic event may constitute significant harm. More often, however, significant harm is a compilation of significant events, both acute and long-standing, which interrupt, change or damage the child's physical and psychological development.

#### (a) Children Act Guidance and Definitions

Within the Children Act 1989, the following guidance is offered:

Significance is not defined within the Children Act although it is to be 'measured' in terms of:

- a child's health and development; and
- that which could reasonably be expected of a similar child.

'Harm' means ill treatment or the impairment of health or development;

'Development' means physical, intellectual, social, emotional or behavioural development;

'Health' means physical or mental health; and

**'Ill treatment'** includes sexual abuse and forms of treatment that are not physical, including for example, impairment suffered from seeing or hearing the ill treatment of another.

## (b) To begin with, in order to understand and establish significant harm, it is necessary to consider:

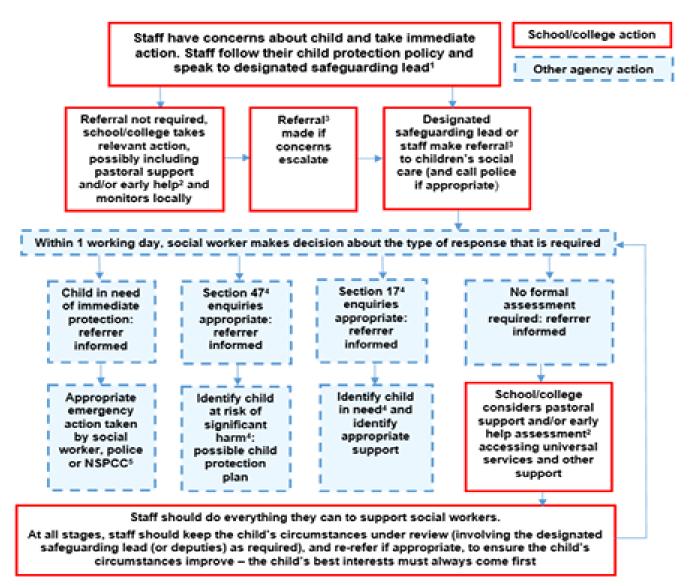
- The child's development within the context of their family and wider social environment;
- Any special needs and how they impact at all levels (child and family);
- The nature of any harm and its likely Impact upon the child's health and development;
- The adequacy of parental care.

## (c) More specifically, how does the following contextual information shape your professional judgement about this situation?

- Age of child (developmental stage/needs, vulnerability, abilities)?
- The 'act(s)' described or referred to what is being described? Possible criminal act/investigation required? (10 is the age of criminal responsibility e.g. if the concern relates to the actions of one child against another)
- Severity of ill-treatment?
- Degree and extent of physical harm?
- Duration and frequency?
- Extent and degree of premeditation?
- Degree of threat or coercion?
- Immediate risk?
- Nature of risk and evidence of risk when and how is the child at risk?
- Impact upon the child's health and development?
- What am I being asked to do and what am I required to do in response to this information?

## APPENDIX 2: TAKING ACTION ON CHILD WELFARE/PROTECTION CONCERNS IN SCHOOL (KCSIE 2024)

#### Actions where there are concerns about a child



<sup>1</sup> In cases which also involve a concern or an allegation of abuse against a staff member, see Part four of the full version of KCSIE.

<sup>2</sup> Early help means providing support as soon as a problem emerges at any point in a child's life. Where a child would benefit from co-ordinated early help, an early help inter-agency assessment should be arranged. <u>Working Together to Safeguard Children</u> provides detailed guidance on the early help process. <sup>3</sup> Referrals should follow the process set out in the local threshold document and local protocol for assessment. See <u>Working Together to Safeguard Children</u>.

<sup>4</sup> Under the Children Act 1989, local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17 of the Children Act 1989. Under section 47 of the Children Act 1989, where a local authority has reasonable cause to suspect that a child is suffering or likely to suffer significant harm, it has a duty to make enquiries to decide whether to take action to safeguard or promote the child's welfare. Full details are in <u>Working Together to Safeguard Children</u>.

5 This could include applying for an Emergency Protection Order (EPO).

#### APPENDIX 3: TALKING AND LISTENING TO CHILDREN

#### If a child wants to confide in you, you SHOULD

- Be accessible and receptive;
- Listen carefully and uncritically, at the child's pace;
- Take what is said seriously;
- Reassure children that they are right to tell;
- Tell the child that you must pass this information on;
- Make sure that the child is ok ;
- Make a careful record of what was said (see *Recording*).

#### You should NEVER

- Investigate or seek to prove or disprove possible abuse;
- Make promises about confidentiality or keeping 'secrets' to children;
- Assume that someone else will take the necessary action;
- Jump to conclusions, be dismissive or react with shock, anger, horror etc;
- Speculate or accuse anybody;
- Investigate, suggest or probe for information;
- Confront another person (adult or child) allegedly involved;
- Offer opinions about what is being said or the persons allegedly involved;
- Forget to record what you have been told;
- Fail to pass this information on to the correct person (the Designated Senior Lead).

### Children with communication difficulties, or who use alternative/augmentative communication systems

- While extra care may be needed to ensure that signs of abuse and neglect are interpreted correctly, any suspicions should be reported in exactly the same manner as for other children;
- opinion and interpretation will be crucial (be prepared to be asked about the basis for it and to possibly have its validity questioned if the matter goes to court).

#### **Recordings should**

- State who was present, time, date and place;
- Be recorded electronically on CPOMS;
- Be passed to the DSL or Head Teacher immediately (certainly within 24 hours);
- Use the child's words wherever possible;
- Be factual/state exactly what was said;
- Differentiate clearly between fact, opinion, interpretation, observation and/or allegation.

#### What information do you need to obtain?

- Schools have no investigative role in child protection (Police and Children's Social Care will
  investigate possible abuse very thoroughly and in great detail, they will gather evidence and
  test hypotheses leave this to them!);
- Never prompt or probe for information, your job is to listen, record and pass on;
- Ideally, you should be clear about what is being said in terms of **who**, **what**, **where and when**;
- The question which you should be able to answer at the end of the listening process is '<u>might</u> this be a child protection matter?';
- If the answer is yes, or if you're not sure, record and pass on immediately to the Designated Senior Lead /Head Teacher/line manager.

#### If you do need to ask questions, what is and isn't OK?

- **Never** asked closed questions i.e. ones which children can answer yes or no to e.g. Did he touch you?
- **Never** make suggestions about who, how or where someone is alleged to have touched, hit etc e.g. Top or bottom, front or back?
- If we must, use only '**minimal prompts**' such as 'go on ... tell me more about that ... tell me everything that you remember about that ... ... '
- Timescales are very important: 'When was the last time this happened?' is an important question.

#### What else should we think about in relation to disclosure?

- Is there a place in school which is particularly suitable for listening to children e.g. not too isolated, easily supervised, quiet etc;
- We need to think carefully about our own body language how we present will dictate how comfortable a child feels in telling us about something which may be extremely frightening, difficult and personal;
- Be prepared to answer the 'what happens next' question;
- We should never make face-value judgements or assumptions about individual children. For example, we 'know that [child.....] tells lies';
- Think about how you might react if a child DID approach you in school. We need to be prepared to offer a child in this position exactly what they need in terms of protection, reassurance, calmness and objectivity;
- Think about what support **you** could access if faced with this kind of situation in school.

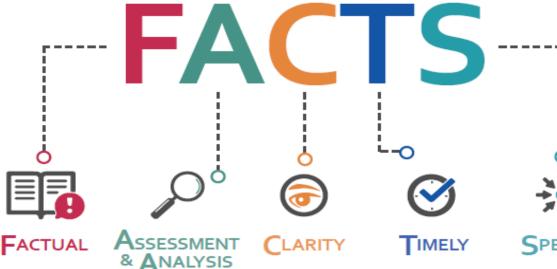
These Procedures are reviewed annually

# How to record concerns

School Safeguarding



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- Recordings should be based on factual information
- It is essential that the information you are recording is accurate including spelling of names, dates and times etc.
- It is important to keep in mind that the service user can request a copy of all their records, and can request inaccurate information to be corrected.
- It is important to distinguish between facts and professional opinion or analysis.

- What do the facts and views recorded tell you and what meaning do they have for the people (service users/family members) involved?
- Analysis of the information should reflect an open mind and be based on the evidence available.
- you have arrived at a decision.
- Use plain and clear language so that everybody will understand including the service user. Try to exclude any jargon or
- Record explicitly how



abbreviations. If using

abbreviations, write

Don't try to sound too

'professional'. Will the

extra to the sentence?

word add anything

out in full first.

#### URIOSITY

 Ensure that you have recorded how you executed Professional Curiosity.

- Record as soon as possible whilst it is still fresh in your memory as you may forget important details.
- Keep your recordings up to date.
- Remember Less is more...get to the point...and don't repeat yourself.



### SPECIFIC

- Think about the purpose of the recording - make sure it is relevant and concise. In relation to safeguarding, it is important to record details of any disclosures using the words used by the person themselves.
- Include analysis. Record any rationale underpinning decision-making.
- Record the views, wishes and opinions of the service user, their family and carers.
- Include any Equality and Diversity issues - e.g. need for an interpreter, mobility and access issues.



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10

### Making a Referral to Children's Social Care (Level 4 - of the Continuum of Need)



### Prior to referral:- call for advice

School Safeguarding Helpline – 01772 531196 E: mash.education@lancashire.gov.uk

Matt Chipchase | MASH Education Officer | 01254 220989 E: matt.chipchase@lancashire.gov.uk

Jenny Ashton I MASH Education Officer | 01772 531643 E: jennifer.ashton@lancashire.gov.uk

Victoria Wallace | School Safeguarding Officer | Advice Line – 01772 531196 E: school.safeguarding@lancashire.gov.uk

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#### Considerations:-

Is there an Early Help Assessment in place? If not, why not?

Have you obtained consent from the Family? Referrals to CSC at Level 4 / Section 17 must be discussed with parents.

Referred to the Continuum of Need?

Considered the voice of the child and their lived experience?

### Your Referral:-

Detail what support has already taken place and the impact of this

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Why are you referring now and what does the family want to happen?

Always keep the impact of the child at the centre of your referral

Be clear and concise.

Have you considered and documented the protective factors and strengths?

Find up to date versions of Threshold Document / CON & Request for Support Forms here https://www.lancashire.gov.uk/practitioners/supporting-children-and-families/safeguarding-children/requesting-support-from-childrens-services/



If this is an urgent referral at Level 4 / Section 47 and the child is at immediate risk or suffering significant harm. Phone MASH on 0300 123 6720 or 0300123 6722 for the out of hours duty team or the Police.

#### Can I refer to CSC without consent?

Is there chronic neglect and lack of engagement at other levels – refer to the Neglect Strategy and clearly identify all steps taken to engage in support, clearly list dates and action – phone, email, text, note through the door, home visits and police welfare checks, for example.



