



Golden Rules when logging CPOMS entries (Reminders, Use of Language & good practice examples.

1. Introduction & Key Reminders

- It is vital that **concerns are recorded and reported accurately** by all staff, (including visitors, and staff not directly employed by the school, e.g. contractors and third-party staff) as soon as after the concern arises and before they leave the premises. **The School MUST also be proactive in responding to concerns raised as early as possible.**
- Promoting the welfare of and safeguarding children is the responsibility of **all** school staff. Staff working with children should maintain an attitude of **'it could happen here'** where safeguarding is concerned. When concerned about the welfare of a child, staff should always **act in the best interests** of the child.
- However small or apparently insignificant the concern may seem at the time; the importance of recording and reporting cannot be underestimated when considering welfare and child protection. **Not all welfare concerns result in a referral to children's social care.**
- Keeping Children Safe in Education (KCSIE) is clear that **it is important for children to receive the right help at the right time to address safeguarding risks, prevent issues escalating and to promote children's welfare.** Research and serious case reviews have repeatedly shown the dangers of failing to take effective action. Examples of poor practice include:
 - Failing to act on and refer the early signs of abuse and neglect.
 - Poor record keeping.
 - Failing to listen to the views of the child.
 - Failing to re-assess concerns when situations do not improve.
 - Not sharing information with the right people within and between agencies.
 - Sharing information too slowly; and
 - A lack of challenge to those who appear not to be taking action.
- **For visitors/agency staff that do not have access to CPOMS, a paper-based Note of Concern form is available in the Staff Room for concerns to be raised with the DSL.** Agency staff are informed of processes as part of their first day induction. All staff have been made aware of this process.
- **Dealing with a disclosure from a child:** If a child discloses that he or she has been abused in some way, the member of staff / volunteer should:

- Listen carefully to what the child is saying, without displaying any signs of shock or disbelief.
- Allow the child to talk freely without interrupting. Give them the tools to
- Reassure the child but do not make promises about keeping the information a secret.
- Reassure the child that this is not their fault.
- Only ask questions if you need to clarify, take care not to put words in the child's mouth by asking leading questions.
- Stress to the child that they have done the right thing by telling you and explain what you will do next. You must tell the child what you are going to do with the information they have shared (unless there is a reason not to). Think about the best interests of the child.
- Report what the child has told you as soon as possible so that details are fresh in your mind and action can be taken quickly.
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Consideration needs to be given to children with communication difficulties. It is important to communicate with them in a way that is appropriate to their age, understanding and preference.

2. Golden Rules when recording a concern-Use of Language

When recording a concern, the record must:

Accurate	<ul style="list-style-type: none"> • Be specific. • Use a body map if the concern relates to a part of the body, and describe the injury/bruise/mark etc. • Include the voice of the child, using their exact words or phrases. • Use neutral language.
Adequate	<ul style="list-style-type: none"> • Be written for a range of audiences, both internally and externally, e.g. Children's Services, Police.
Comprehensive	<ul style="list-style-type: none"> • Include context that led up to incident. • Include immediate actions taken and any action taken to speak to children involved in the concern. • Any further actions taken (such as a referral being made). • The reasons why a decision was made not to refer to a statutory agency (if relevant).
Factual	<ul style="list-style-type: none"> • Answer who, when, why, what • Justify any subjective statements with evidence- it is essential that fact is differentiated from opinion. Opinions can be expressed, but it is important that phrases such as 'in my opinion' or

	<p>'in my view' are used and justified with evidence.</p> <ul style="list-style-type: none"> • Direct observations must be recorded and clearly noted as 'I observed' or 'I witnessed'
Relevant	<ul style="list-style-type: none"> • Include all information relating to the concern, including the context. • Do not include information which is not relevant.
The name and role of the person/s.	<ul style="list-style-type: none"> • To whom the concern was made • The full names of all parties involved in the incident e.g., Jenny Smith, DSL, Bob Day, Class Teacher
Timely	<ul style="list-style-type: none"> • Recorded and passed on as soon as possible on before the end of the school day.

3. Golden Rules when analysing a concern

When **analysing** a concern, the DSL must consider.

What are the risks?	<p>Consider all pieces of information you have available ('contextual safeguarding'):</p> <ul style="list-style-type: none"> • Attendance and punctuality • Family members and relationships • Previous CP/Welfare concerns • Any behaviour/bullying concerns • Relationships between those involved in the concern. • Peer group and influences • Environmental factors • Other relevant factors inside or outside the school – consider online media. • Other children in the school if there has been child on child behaviour.
What is needed to establish the best course of action?	<ul style="list-style-type: none"> • Who in the school has more information that can add to your understanding? SENCO, Head of Year, Pastoral Team, First Aid etc • Does the concern need to be referred to an external agency (e.g., MASH, police)?
What will be recorded by the DSL?	<ul style="list-style-type: none"> • What action(s) were taken, by whom and why, what was the rationale? Include timeframes as relevant. • What measures have been put in place to ensure the child is safe? Who is going to do this and when will they feedback to the DSL?

	<ul style="list-style-type: none">• Will the record need to be reviewed to ensure the child remains safe? When will that review take place? Make sure you put in a date.• If the plan is to 'monitor', what will this look like, What are you monitoring, Who will do this and How often will it be reviewed? The review needs to be recorded, evidencing whether the plan is working or not and whether there are any changes to the plan.
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4. Good Practice Examples

Good Practice Example of Recording by Class Teacher

On 05/02/19, period 1 at 9:40am, Beth Johnson (Teddy's class teacher) saw three equally spaced apart 1" marks on the right forearm of Teddy Davis, (see body map) when Teddy rolled up their sleeves to paint a picture. The marks appeared to be cuts which had healed due to the presence of a scab on each. Class teacher asked Teddy about the marks and Teddy replied 'I fell over'. Class teacher sent Teddy to the medical room. Mr Robinson- first aider- felt that the cuts were superficial, healing and required no medical attention.

Class teacher raised the concern with Fay Bedford- DDSL -verbally. DDSL asked for the concern to be recorded and requested that a phone call is made to the family to discuss observations about the marks and record discussion points on CPOMS. Class teacher recorded the concern and discussion points. DSL will action from this point as necessary.

Good practice Example Entry

During lunchtime play today, Sarah approached me and was crying. I asked her what the matter was and she replied – 'I don't like my life anymore' I asked her why and she replied – 'My mum and her boyfriend argue all the time, they always have cans of stuff which they drink, I really don't want to go home today because they are having a party tonight and that man will be there- you know that one.... ' I told Sarah that I did not know what man she meant, but when I said this, she ran off to play with her friends. Verbally passed on information immediately to DSL and also recorded the information on CPOMS.

Good Practice Example of Analysis by DSL

Fay Bedford, DDSL, having reviewed the information and first aid records this is the first occasion that Ted Day has been identified as presenting physical marks.

Telephone call @11:10am. Fay Bedford (DDSL) rang Ted's mum, who stated that Ted had slipped over on Saturday 03/09/22 in the kitchen on some spilt water and caught his arm on the corner of a kitchen worktop. Ms Day said that she was unaware that Ted had injured himself.

Mum and dad live together with Ted only child. Ted's attendance and punctuality is good (98.7%, no late marks). Mrs Johnson (class teacher) has no concerns about Ted and contacts with the family have been positive and supportive. There are no previous reports of attendance for first aid. There are no concerns about Ted's behaviour in school.

Having analysed the information and spoken to the mother of Ted there are no additional actions required at this time. Should further concerns be reported this can be reviewed.