



Safeguarding and Child Protection Policy

Pilgrim PRU

September 2018

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INTRODUCTION

The Pilgrim PRU fully recognises the responsibility it has under section 175 (*Section 157 for Independent Schools and Academies*) of the Education Act 2002 to have arrangements in place to safeguard and promote the welfare of children.

This responsibility is more fully explained in the statutory guidance for schools and colleges '[Keeping Children Safe in Education](#)' (September 2018). All staff must be made aware of their duties and responsibilities under part one of this document, which are set out below.

Staff should read the above document together with 'Annex A' of 'Keeping Children Safe in Education' (September 2018) and 'What to do if you're worried a child is being abused: Advice for practitioners' (March 2015).

The Pilgrim PRU works with vulnerable pupils in Tier 4 hospital settings. Safeguarding is of paramount importance and the teaching teams work very closely with the multi-disciplinary teams within the hospitals to safeguard all the children and young people in hospital. The Pilgrim PRU encompasses the Darwin Centre, which is an Adolescent psychiatric center, the Phoenix which is an eating disorders unit, the Croft, which is a children and family assessment unit and Addenbrooke's general hospital. Each hospital has a nurse in charge of safeguarding and there is also a CPFT (Cambridge and Peterborough foundation trust) safeguarding lead. As teaching staff work within the hospital all files on child protection are kept on the hospital secure electronic system. This ensures the confidentiality of very sensitive information. If teaching staff have a concern about a child they will inform the head of the Pilgrim PRU (Safeguarding DP) and immediately inform the nursing team. If immediate action is needed this will be taken up by the safeguarding leads in the hospital or the social worker. Teaching staff are kept informed about child protection plans and are made aware of which children and young people are Children in Need. Teaching staff attend daily hand over meetings, weekly multi-disciplinary team meetings and regular CPA reviews for each child in which any safeguarding or child protection issues are passed on to all staff concerned. On discharge from the hospital any necessary child protection information will be passed on securely to those involved in the child's care.

Through their day-to-day contact with pupils and direct work with families all staff in school have a responsibility to:

- Identify concerns early to prevent them from escalating
- Provide a safe environment in which children can learn
- Identify children who may benefit from early help
- Know what to do if a child tells them he/she is being abused or neglected
- Follow the referral process if they have a concern

(See Keeping Children Safe in Education, 2018, p6)

This policy sets out how the school's governing body discharges its statutory responsibilities relating to safeguarding and promoting the welfare of children who are pupils at the school. Our policy applies to all staff, paid and unpaid, working in the school including governors. Teaching assistants, mid-day supervisors, office staff as well as teachers can be the first point of disclosure for a child. Concerned parents/carers can also contact the school and its governors. Amanda Morris-Drake, Head teacher, 01223 885863 or email amorris-drake@pilgrim.cambs.sch.uk, the Chair of Governors, chair@pilgrim.cambs.sch.uk

It is consistent with the Local Safeguarding Children Board (LSCB) procedures.

There are four main elements to our policy:

PREVENTION through the teaching and pastoral support offered to pupils and the creation and maintenance of a whole school protective ethos

PROCEDURES for identifying and reporting cases, or suspected cases, of abuse. The definitions of the four categories of abuse are attached (see Appendix A)

SUPPORTING CHILDREN particularly those who may have been abused or witnessed violence towards others;

PREVENTING UNSUITABLE PEOPLE WORKING WITH CHILDREN

Processes are followed to ensure that those who are unsuitable to work with children are not employed.

1.0 PREVENTION

1.1 We recognise that high self-esteem, confidence, supportive friends and good lines of communication with a trusted adult help to protect children.

1.2 The school will therefore:

1.2.1 establish and maintain an environment where children feel safe in both the real and the virtual world and are encouraged to talk and are listened to

1.2.2 ensure children know that there are adults in the school whom they can approach if they are worried or in difficulty and their concerns will be taken seriously and acted upon as appropriate

1.2.3 include in the curriculum activities and opportunities which equip children with the skills they need to stay safer from abuse both in the real and the virtual world and information about who to turn to for help

1.2.4 Include in the curriculum material which will help children develop realistic attitudes to the responsibilities of adult life, particularly with regard to child care and parenting skills

(Note: Advice and resources on the teaching of personal safety skills at KS3 and KS4 is available from the PSHE Service or from the Education Child Protection Service.)

1.3 Prevention of Peer on Peer Abuse

We recognise that peer on peer abuse can manifest itself in many ways. This can include but is not limited to: bullying, cyberbullying, sexual violence, sexual harassment, being coerced to send sexual images (sexting), teenage relationship abuse and physical abuse.

1.3.1 **All** forms of peer on peer abuse are unacceptable and will be taken seriously.

The school will therefore:

1.3.2 Create a whole school protective ethos in which peer on peer abuse, including sexual violence and sexual harassment will not be tolerated.

1.3.3 Provide training for staff about recognising and responding to peer on peer abuse, including raising awareness of the gendered nature of peer abuse, with girls more likely to be victims and boys perpetrators.

- 1.3.4 Ensure that staff do not dismiss instances of peer on peer abuse, including sexual violence and sexual harassment as an inevitable part of growing up.
- 1.3.5 Include within the curriculum, information and materials that support children in keeping themselves safe from abuse, including abuse from their peers and online.
- 1.3.6 Provide high quality Relationship and Sex Education (RSE), including teaching about consent.
- 1.3.7 Ensure that staff members follow the procedures outlined in this policy when they become aware of peer on peer abuse.

2.0 PROCEDURES

- 2.1 We will follow the procedures set out in the Cambridgeshire and Peterborough Safeguarding Children Board 'Inter-Agency Procedures'. A copy of these procedures can be found on the LSCB website: <http://www.safeguardingpeterborough.org.uk/children-board/professionals/lscbprocedures/>.
- 2.2.1 **The Designated Safeguarding Lead for Child Protection is:**
Amanda Morris-Drake
- 2.2.2 **Designated nurses in each hospital have completed Designated Person training. Please see Appendix One, Safeguarding staff list for details.**
- 2.2.3 **The nominated governor for Safeguarding and Child Protection is:**
Helen Rose
- 2.3 Governing bodies, proprietors and management committees have appointed a senior member of staff, from the leadership team, to the role of Designated Safeguarding Lead (DSL). The DSL takes lead responsibility for safeguarding and child protection.
 - 2.3.1 The DSL do have the appropriate status and authority within the school to carry out the duties of the post. They are given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters through induction and regular staff supervision. (See Keeping Children Safe in Education, Annex B)
 - 2.3.2 The activities of the DSL can be delegated to appropriately-trained deputies (Designated Personnel DP).
 - 2.3.3 The lead responsibility for child protection remains with the DSL and cannot be delegated.
 - 2.3.4 The DSL and DPs should undergo the two day training provided by the Education Child Protection Service
 - 2.3.5 This training should be updated **every two years**. Amanda Morris-Drake DP Training undertaken December 2014 Refresher training undertaken October 2016
 - 2.3.6 In addition to the formal training set out above the DSL and DPs should refresh their knowledge and skills e.g. via bulletins, meetings or further reading at **least annually**.
 - 2.3.7 Governing bodies should also ensure that every member of staff, volunteers, and the governing body knows who the Designated Personnel are and the procedures for passing on concerns from the **point of induction**.

(At the Pilgrim PRU all concerns are passed to the DP Amanda Morris-Drake and the Safeguarding lead in the hospital records will be logged on the secure hospital system RIO.)
 - 2.3.8 Nominate a governor for safeguarding and child protection who has undertaken appropriate training.

- 2.3.9 Keeping Children Safe in Education states “During term time the designated safeguarding lead (Or a deputy) should always be available (during school or college hours) for staff to discuss any safeguarding concerns. Whilst generally speaking the designated safeguarding lead (or deputy) would be expected to be available in person, it is a matter for individual schools and colleges to define what “available” means”. The DSL is available at most times in absence staff will contact the designated nurse on duty.
- 2.3.10 Each Teacher in Charge has the responsibility to act on concerns in the absence of Amanda Morris-Drake and pass on concerns to the DP nurse in the hospital. Nadine Gooding Hebert is deputy Safeguarding lead and staff should direct concerns to her in the absence of Amanda Morris-Drake.
- 2.3.11 Governing bodies should ensure that DSLs and DPs take advice from a child protection specialist when managing complex cases. The Designated Personnel have access to professional consultations with staff working in the Multi-agency Safeguarding Hub (MASH). The Emergency Duty Team (out of hours) is also available. Contact numbers are found in Appendix B.
- 2.3.12 Ensure every member of staff and every governor knows:
- the name of the designated person/s and their role
 - how to identify the signs of abuse and neglect
 - how to pass on and record concerns about a pupil
 - that they have an individual responsibility to be alert to the signs and indicators of abuse and for referring child protection concerns to the DSL/DP
 - that they have a responsibility to provide a safe environment in which children can learn
 - where to find the [Inter – Agency Procedures on the LSCB website](#)
 - their role in the early help process;
 - the process for making referrals to children’s social care.
- 2.3.13 Ensure that all staff members undergo safeguarding and child protection training at induction. The training should be regularly updated.
In addition all staff members should receive regular safeguarding and child protection updates as required **but at least annually**
- 2.3.14 Ensure that all staff, paid and unpaid, recognise their duty and feel able to raise concerns about poor or unsafe practice in regard to children and that such concerns are addressed sensitively and effectively in a timely manner in accordance with agreed [whistle-blowing policies](#)
- 2.3.15 Ensure that parents are informed of the responsibility placed on the school and staff in relation to child protection by setting out these duties on the school website
- 2.3.16 Ensure that this policy is available publicly either via the school website www.thepilgrimpru.co.uk) or by other means.
- 2.3.17 Where pupils are educated off site or in alternative provision, the school and the provider will have clear procedures about managing safeguarding concerns between the two agencies. If a child is educated offsite the staff will follow the PRU safeguarding procedures and complete a risk assessment with the provider the young person is working with. Written confirmation that the alternative provider has carried out appropriate safeguarding checks on individuals working at the establishment will be sought by the school.

2.4 Liaison with Other Agencies

- 2.4.1 All staff within the Pilgrim PRU liaise closely with other agencies. Staff will receive an update on any child protection issues or safeguarding concerns at the daily handover from the nursing team. Weekly ward rounds take place with the multi-disciplinary team and monthly CPA reviews, in which all agencies that are involved the child’s care are invited and relevant information is passed on.

- 2.4.2 All staff co-operate as required, in line with 'Working Together to Safeguard Children,' (July 2018), with key agencies in their enquiries regarding child protection matters including attendance and providing written reports at child protection conferences and core groups.

2.5.1 Record Keeping

The school will:

- 2.5.2 Ensure electronic records are stored on an identified, purpose-built, secure platform within the hospital network. As the Pilgrim PRU works within four hospitals all child protection records are held securely on the hospital electronic records. At the Fulbourn site this is RIO, at Addenbrooke's Hospital it is the EPIC system.
- 2.5.3 Through liaison with the nursing teams safeguarding lead the DP will ensure all relevant child protection records are sent to the receiving school or establishment when a pupil moves schools in accordance with 'Keeping Children Safe in Education' (September 2018) and the 'Education Child Protection Record Keeping Guidance'. The DSL will consider whether it would be appropriate to share information with the new school/college in advance of a child leaving.
- 2.5.4 Ensure all actions and decisions will be led by what is considered to be in the best interests of the child.

2.6 Confidentiality and information sharing

- 2.6.1 The Data Protection Act 2018 does not prevent school staff from sharing information with relevant agencies, where that information may help to protect a child.

The school will:

- 2.6.2 Ensure staff and volunteers adhere to confidentiality protocols and that information is shared appropriately.
- 2.6.3 Ensure staff are aware that they have a professional responsibility to share information with other agencies in order to safeguard children, (as set out in 'Information sharing; Advice for practitioners providing safeguarding services to children, young people, parents and carers,' DfE, July 2018).
- 2.6.4 Ensure that if a member of staff receives a Subject Access Request (under the Data Protection Act 2018) from a pupil or parent they will refer the request to the DSL or Headteacher.
- 2.6.5 Ensure staff are clear with children that they cannot promise to keep secrets.

The designated safeguarding lead will

- 2.6.6 Ensure that safeguarding information will be shared with the relevant teaching teams on a need to know basis through daily handover meetings, weekly ward rounds and monthly CPA meetings.
- 2.6.7 Aim to gain consent to share information and be mindful of situations where to do so would place a child at increased risk of harm. Information may be shared without consent if a person believes that there is good reason to do so, and that the sharing of information will enhance the safeguarding of a child in a timely manner.
- 2.6.8 Record when decisions are made to share or withhold information, who information has been shared with and why. (See 'Working Together to Safeguard Children,' July 2018)

- 2.6.9 Seek advice about confidentiality from outside agencies if required. (See 'Information sharing; Advice for practitioners providing safeguarding services to children, young people, parents and carers,' DfE, July 2018).

2.7 **Communication with Parents/Carers**

As the Pilgrim PRU works closely with the multi-disciplinary teams in each hospital, communication with parents regarding safeguarding or child protection issues is carried out by the consultant, family therapist or social work teams. The teachers in charge of each center will be kept informed of any communication with parents at the weekly team meetings.

2.8 **Dealing with Sexual Violence and Sexual Harassment between children**

The school recognises that sexual violence and sexual harassment can occur between two children of any age and sex. Sexual violence may include rape, assault by penetration or sexual assault. Sexual harassment refers to 'unwanted conduct of a sexual nature', such as sexual comments, sexual taunting or physical behaviour such as deliberately brushing against someone. Online sexual harassment may include non-consensual sharing of sexual images and videos, sexualised online bullying, unwanted sexual comments and messages, and sexual exploitation, coercion and threats.

The school will:

- 2.8.1 Be clear that sexual violence and sexual harassment will not be tolerated.
- 2.8.2 Provide training for staff on how to manage a report of sexual violence or sexual harassment.
- 2.8.3 Liaise with the hospital nursing teams and make decisions on a case-by-case basis.
- 2.8.4 Reassure victims that they are being taken seriously, offer appropriate support and take the wishes of the victim into account when decision making.
- 2.8.5 Through liaison with the hospital nursing teams implement measures to keep the victim, alleged perpetrator and if necessary other children and staff members, safe. Record any risk assessments and keep them under review.
- 2.8.6 Through liaison with the hospital nursing teams give consideration to the welfare of both the victim(s) and perpetrator(s) in these situations.
- 2.8.7 Liaise closely with external agencies, including police and social care, when required.
- 2.8.8 Further guidance can be found in 'Keeping Children Safe in Education - Part Five' (September 2018), 'Sexual violence and sexual harassment between children in schools and colleges,' (DfE, May 2018) and 'Sexting in schools and colleges: Responding to incidents and safeguarding young people' published by the UK Council for Child Internet Safety (UKCCIS)

3.0 **SUPPORTING CHILDREN**

The school recognises that **any** child may be subject to abuse and neglect and as such will support all children by:

- 3.1 Creating an ethos that actively promotes a positive, supportive and safe environment and values the whole community
- 3.2 Providing a variety of opportunities to encourage self-esteem and self-motivation.
- 3.3 Liaising with the nursing team and other agencies that support the pupil.

3.4 Developing productive and supportive relationships with parents/carers.

3.5 **Students at the Pilgrim PRU are in a residential setting and therefore it is not necessary for the school to follow guidance on Children Missing from Education. If a student goes missing from the hospital NHS procedures are followed.**

3.6.1 **Children with Disabilities, Additional Needs or Special Educational Needs**

We recognise that, statistically, children with additional needs, special educational needs, emotional and behavioural difficulties and disabilities are most vulnerable to abuse. School staff at the Pilgrim PRU who deal with children with complex and multiple disabilities and/or emotional and behavioural problems should be particularly sensitive to indicators of abuse.

The school has pupils with emotional and behavioural difficulties and/or challenging behaviours. The school will support staff to decide appropriate strategies that will reduce anxiety for the individual child and raise self-esteem as part of an overall behaviour support plan agreed with parents/carers.

The nursing teams and teaching staff work together to teach children personal safety skills commensurate with their age, ability and needs. Children will be taught personal safety skills such as telling and who to tell, good and bad touches and how to manage risk.

The school has pupils who may have communication difficulties and we are aware that they are vulnerable to abuse because they are unable to express themselves to others. Instead such children will often exhibit changes in behaviours or signs and indicators of abuse recognised by staff with a good knowledge of the child.

Where necessary, the school will provide additional training to staff in the use of Makaton, PECS or other communication systems. Supervision by senior managers will be vigilant to create a protective ethos around the child.

We promote high standards of practice, including ensuring that disabled children know how to raise concerns, and have access to a range of adults with whom they can communicate.

Some pupils at THE Pilgrim PRU have an Education, Health and Care Plan and multi-agency planning and involvement to support integrated care.

3.6.2 **Children misusing Drugs or alcohol**

The discovery that a young person is misusing legal or illegal substances or reported evidence of their substance misuse is not necessarily sufficient in itself to initiate child protection proceedings but the school will liaise with the nursing teams and appropriate action will be taken in order to keep the young person and their peers safe. Illegal drugs or alcohol are not allowed on the hospital wards.

3.6.3 **Children at Risk of Criminal Exploitation**

Criminal exploitation of children is a form of harm that is a typical feature of county lines activity. Drug networks or gangs exploit children and young people to carry drugs and money from urban areas to suburban and rural areas. Exploitation can occur even if activity appears to be consensual.

Through liaison with the nursing teams and designated safeguarding leads the school will address indicators of child criminal exploitation with staff through training. Staff will follow the procedures outlined in this policy if concerns of criminal exploitation arise.

The Designated Personnel will complete the LSCB Child Exploitation Checklist and refer to the Multi-Agency Safeguarding Hub (MASH) if there is a concern that a young person may be at risk of criminal exploitation.

The school recognises that young people who go missing can be at increased risk of child criminal exploitation and/or trafficking and has procedures in place to ensure appropriate response to children and young people who go missing, particularly on repeat occasions – (see 3.6.4).

3.6.4 Children of Substance Misusing Parents/Carers

Misuse of drugs and/or alcohol is strongly associated with Significant Harm to children, especially when combined with other features such as domestic violence. Due to the nature of the hospital setting children and young people in the care of the Pilgrim PRU will be protected from adults who may cause them harm. The multi – disciplinary nursing team will work with the families to support parents and carers.

3.6.5 Children Living with Domestic Abuse

Domestic Abuse is defined as any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass but is not limited to the following types of abuse: psychological, physical, sexual, financial and emotional.

The school recognises that where there is Domestic Abuse in a family, the children/young people will always be affected; the longer the violence continues, the greater the risk of significant and enduring harm, which they may carry with them into their adult life and relationships. Domestic Abuse can also affect children in their personal relationships as well as in the context of home life.

Children and young people who attend one of the hospital schools may have experienced domestic abuse. Staff will work closely with the nursing teams to support these children and provide them with a safe environment.

3.6.6 Children at risk of ‘Honour- Based’ Violence including Female Genital Mutilation

So called ‘honour-based’ violence encompasses incidents which have been committed to protect or defend the honour of the family and/or community, including breast ironing, female genital mutilation (FGM) and forced marriage. The school takes these concerns seriously and staff are made aware of the possible signs and indicators that may alert them to the possibility of HBV through training. Staff are required to treat all forms of HBV as abuse and follow the procedures outlined in this policy.

FGM is a procedure involving the partial or total removal of the external female genitalia or other injury to the female genital organs. FGM is illegal in the UK. Any indication that a child is at risk of FGM, where FGM is suspected, or where the woman is over 18, will be dealt with under the child protection procedures outlined in this policy. Staff will report concerns to the DSL, who will make appropriate and timely referrals to social care. In these cases, parents will not be informed before seeking advice and the case will still be referred to social care even if it is against the pupil’s wishes.

In accordance with the Female Genital Mutilation Act, it is a statutory duty for teachers in England and Wales to report ‘known’ cases of FGM in under-18s which they identify in the course of their professional work to the police. Teachers should still consider and discuss any such case with the DSL and involve social care as appropriate, but the teacher will personally report to the police that an act of FGM appears to have been carried out.

3.6.7 Children at Risk of Child Sexual Exploitation (CSE)

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Sexual exploitation can take many different forms from the seemingly 'consensual' relationship to serious organised crime involving gangs and groups. Potential indicators of sexual exploitation will be addressed within staff training, including raising awareness with staff that some young people who are being sexually exploited do not show any external signs of abuse and may not recognise it as abuse. Staff will follow the procedures outlined in this policy if concerns of child sexual exploitation arise.

Through liaison with the nursing safeguarding leads the appropriate lead will complete the LSCB Child Exploitation Checklist and refer to the Multi-Agency Safeguarding Hub (MASH) if there is a concern that a young person may be at risk of CSE.

3.6.8 Children showing signs of Abuse and/or Neglect

Due to the nature of the hospital settings in which the Pilgrim PRU operates teaching staff work closely with the nursing teams to support those children and young people who show signs of abuse and neglect. Staff at The Pilgrim PRU understand that experiencing abuse or neglect may have an adverse impact on those children which may last into adulthood without appropriate intervention and support. School may be the only stable, secure and predictable element in the lives of children at risk. Children who have experienced abuse or neglect may display this through their own behaviour, which may be challenging and defiant or passive and withdrawn.

School will provide training for staff to ensure that they have the skills to identify and report cases, or suspected cases, of abuse in accordance with the procedures outlined in this policy. The definitions of the four categories of abuse are attached (see Appendix A).

3.6.9 Children at Risk of Radicalisation

School recognises that children are vulnerable to extremist ideology and radicalisation and that protecting children from this risk forms part of the school's safeguarding response.

The governing body will ensure that the DSL has undertaken Prevent awareness training and that all staff receive training about the Prevent duty.

Staff are required to be alert to changes in children's behavior which could indicate they need help or protection. Concerns that a child is at risk of radicalisation are referred to the DSL in the usual way. If appropriate the DSL will make a Channel referral.

See also 'The Prevent Duty, Departmental advice for schools and childcare providers', DfE (June 2015), and 'Revised Prevent Duty Guidance: for England and Wales,' HM Government, (July 2015).

3.6.10 Privately Fostered Children

Private fostering is when a child under the age of 16, (under 18 if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or relative in their own home for 28 days or more.

The school will follow the mandatory duty to inform the local authority of any 'Private Fostering' arrangements.

3.6.11 Children who have Family Members in Prison

The school is committed to supporting children and young people who have a parent or close relative in prison and will work with the multi –disciplinary hospital teams to find the best ways of supporting the child.

The school recognises that children with family members in prison are at risk of poor outcomes including: poverty, stigma, isolation, poor mental health and poor attendance.

4.0 PREVENTING UNSUITABLE PEOPLE FROM WORKING WITH CHILDREN

The school will operate safer recruitment practices including ensuring appropriate DBS and reference checks are undertaken according to Part three of 'Keeping Children Safe in Education' (2018). This section should be read in conjunction with the school's Safer Recruitment Policy.

- 4.1 The governing body will ensure that at least one of the persons who conducts an interview has completed safer recruitment training.
- 4.2 The school will operate safer recruitment practices including ensuring appropriate DBS and reference checks are undertaken according to Part three of the government guidance 'Keeping Children Safe in Education' (2016) and the Local Authority's Safer Employment Policy.
- 4.3 **The following members of staff have undertaken Safer Recruitment training Amanda Morris-Drake, Catherine Fraser Andrews and Nadine Gooding Hébert.**
- 4.4 Any allegation of abuse made against a member of staff will be reported straight away to the Head Teacher. In cases where the Head Teacher is the subject of an allegation, it will be reported to the Chair of Governors. (See Allegations flowchart Appendix C.) The school will follow the procedures set out in Part four of Keeping Children Safe in Education. Part four of 'Keeping Children Safe in Education' (2018).
- The school will consult with the Local Authority Named Senior Officer in the event of an allegation being made against a member of staff and adhere to the relevant procedures set out in 'Keeping Children Safe in Education', (2018) and CCC HR.
- 4.5 The Named Senior Officer will liaise with the Local Authority Designated Officer (LADO) ensuring that all allegations are reported to the LADO within one working day. Following consultation with the LADO, the Named Senior Officer will advise on all further action to be taken. Please note that the Head Teacher or Chair of Governors should **not** seek to interview the child/ren or members of staff involved until advice has been sought. Doing so may compromise any police interviews that may be necessary.
- 4.6 The school will ensure that any disciplinary proceedings against staff relating to child protection matters are concluded in full even when the member of staff is no longer employed at the school and that notification of any concerns is made to the relevant authorities and professional bodies and included in references where applicable.
- 4.7 Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly, and consistently and to be kept informed of its progress. Suspension is not mandatory, nor is it automatic but, in some cases, staff may be suspended where this is deemed to be the best way to ensure that children are protected.
- 4.8 Consideration must be given to the needs of the child and a recognition that a child may make an allegation against an innocent party because they are too afraid to name the real perpetrator. It is rare for a child to make an entirely false or malicious allegation, although misunderstandings and misinterpretations of events do happen.

- 4.9 The school will ensure that all staff paid and unpaid, are aware of the need for maintaining appropriate and professional boundaries in their relationships with pupils and parents/carers as advised within the Pilgrim PRU's Code of Conduct. As part of the Induction process, all staff will receive guidance about how to create appropriate professional boundaries (in both the real and virtual world) with all children, especially those with a disability or who are vulnerable.
- 4.10 All staff have signed to confirm that they have read a copy of the Pilgrim PRU's Code of Conduct, [Guidance for Safer Working Practice](#) for Adults who work with Children and Young People in Education Settings (October 2015).
- 4.11 The school will ensure that staff and volunteers are aware that sexual relationships with pupils aged under 18 are unlawful and could result in legal proceedings taken against them under the Sexual Offences Act 2003 (Abuse of Position of Trust).
- 4.12 The school will ensure that communication between pupils and adults, by whatever method, are transparent and take place within clear and explicit professional boundaries and are open to scrutiny.

5.0 OTHER RELATED POLICIES

- 5.1 This policy links to our:

Anti-bullying policy
Complaints procedure
Critical Incidents Policy
Equality & Community Cohesion policy
E-Safety policy
Grievance policy
Health and Safety policy
Mobile Phone policy
Physical Intervention policy
Prevent policy
Responding to Self-Harm policy
School Behaviour policy
Safer Recruitment policy
Special Educational Needs policy
Staff Code of Conduct/Safer Working Practice
Staff Discipline and Grievance procedures
Supporting Pupils with Medical Conditions policy
Whistleblowing policy

6.0 USE OF MOBILE PHONES POLICY

Policies for each unit

7.0 GOVERNING BODY CHILD PROTECTION RESPONSIBILITIES

- 7.1 The governing body fully recognises its responsibilities with regard to child protection and safeguarding and promoting the welfare of children. It aims to ensure that the policies, procedures and training in school are effective and comply with the law and government guidance at all times.

It will:

- Nominate a governor for safeguarding and child protection who will take leadership responsibility for the school's safeguarding arrangements and practice and champion child protection issues
- ensure an annual report is made to the full governing body, and copied to the Education Child Protection Service. Any weaknesses will be rectified without delay
- ensure that this Safeguarding and Child Protection policy is annually reviewed and updated and shared with staff. It will be made available on the school website.
- Ensure that children's exposure to potential risks while using the internet is limited by having in place age appropriate filtering and monitoring systems.
- Ensure children's wishes and feelings are taken into account where there are safeguarding concerns.

7.2 Where services or activities are provided separately by another body, either on or off school site, the governing body will seek assurance that the body concerned has appropriate policies and procedures in place for safeguarding children and child protection and there are arrangements to liaise with the school on these matters where appropriate.

Four categories of abuse

Physical Abuse - 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.

Neglect - 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 occur during pregnancy as a result of maternal substance misuse.

It may involve the neglect of or lack of responsiveness to a child's basic emotional needs.

It also includes parents or carers failing to:

- 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
- Ensure access to appropriate medical care or treatment

Emotional Abuse - Is the persistent emotional maltreatment so as to cause severe and adverse effects on a child's emotional development.

It may involve conveying to a child that they are:

- Worthless
- Unloved
- Inadequate
- Valued only insofar as they meet another persons needs

It may include:

- not giving the child opportunities to express their views
- deliberately silencing them
- 'making fun' of what they say or how they communicate

It may also feature age or developmentally inappropriate expectations being imposed on children including:

- interactions that are beyond the child's developmental capability
- overprotection and limitation of exploration and learning
- preventing participation in normal social interaction

It may involve:

- Seeing or hearing the ill-treatment of another
- Serious bullying (including cyberbullying) causing children frequently to feel frightened or in danger
- The exploitation or corruption of children

Some level of emotional abuse is involved in all types of maltreatment although it may occur alone

Sexual Abuse – involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening.

This may involve:

- physical contact including assault by penetration (e.g. rape or oral sex)
- non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing
- non-contact activities involving:
 - children in looking at, or in the production of, sexual images,
 - children in watching sexual activities
 - or encouraging children to behave in sexually inappropriate ways
 - 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.

Useful Contacts

Education Safeguarding Team - ECPSGeneral@cambridgeshire.gov.uk

Early Help Hub (EHH) Tel. 01480 376666

Multi-Agency Safeguarding hub – referrals and professional consultation Tel. 0345 045 1362

Emergency Duty Team (Out of hours) Tel: 01733 234724

Police Child Abuse Investigation Unit Tel: 101

Local Authority Designated Officer (LADO) Tel: 01223 727967
Amanda Harrison
Lyn Chesterton

Named Senior Officer for allegations
Education Adviser - Chris Meddle Tel: 01223 703564
Education Adviser – Diane Stygal Tel. 01223 507115

Cambridgeshire Local Safeguarding Children Board – Safeguarding Inter-Agency Procedures
<https://www.cambslscb.co.uk>

Relevant Documents

“Disqualification under the Childcare Act 2006: statutory guidance for local authorities, maintained schools, academies and free schools” (July 2018)

“Guidance for Safer Working Practice for those working with children and young people in education settings” (October 2015)

“Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers” (July 2018)

“Keeping children safe in education: Statutory guidance for schools and colleges” (Sep 2018)

“The Prevent Duty, Departmental advice for schools and childcare providers” (June 2015)

“Revised Prevent Duty Guidance: for England and Wales” (July 2015)

“Sexting in schools and colleges: Responding to incidents and safeguarding young people” published by the UK Council for Child Internet Safety (UKCCIS) – (September 2016)

“Sexual violence and sexual harassment between children in schools and colleges” (May 2018)

“What to do if you’re worried a child is being abused: Advice for practitioners” (March, 2015)

“Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children” (July 2018)

Managing an Allegation Against a Member of Staff in your Establishment

