

Child Protection Policy

The primary goal of this policy is to establish a safe environment in which all pupils can learn with confidence and thrive.

This policy is designed to enable teachers, current and new, voluntary staff and ancillary staff to identify child abuse and to follow a procedure in the event of suspected child abuse / a disclosure of child abuse.

This policy is designed to raise awareness of Child Protection (CP) issues in order that pupils of Crystal Gardens Primary School are suitably equipped with the skills to keep them safe and to support them, in the event of abuse, in line with an agreed child protection plan.

Responsibility

The Head Teacher will oversee CP arrangements and have overall responsibility for safeguarding children as the Designated Safeguarding Lead (DSL) in school.

The Head Teacher will ensure every member of staff, permanent and temporary, volunteers and regular visitors are aware of the contents of this policy.

The Head Teacher will ensure this policy is part of the school's induction programme and will ensure every member of staff undertakes relevant in-house 'Safeguarding Children' training from the DSL annually.

The Head Teacher will take the lead role in referring cases of suspected abuse.

WHAT IS CHILD ABUSE?

Child abuse is any action by another person – adult or child – that causes significant harm to a child. It can be physical, sexual or emotional, but can just as often be about a lack of love, care and attention. NSPCC 2016.

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.

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.

- 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.

Emotional abuse is 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 children 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 the child's developmental capability, as well as overprotection 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.

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. 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: 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. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.
- Somebody may abuse a child by inflicting harm or by failing to act to prevent harm.
- A child is a boy or girl under the age of 18.

Female Genital Mutilation (FGM) or Female Genital Cutting (FGC) is the partial or total removal of the external female genitalia for cultural, religious or other non-medical reasons. It is usually performed on girls between the ages of 4 – 10. It is also called female circumcision.

- The practice is mostly carried out by traditional circumcisers, who often play other central roles in communities, such as attending childbirths. However, more than 18% of all FGM is performed by health care providers, and the trend towards medicalisation is increasing.

- FGM is recognized internationally as a violation of the human rights of girls and women. It reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women. It is nearly always carried out on minors and is a violation of the rights of children. The practice also violates a person's rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death.

Long-term consequences can include:

- recurrent bladder and urinary tract infections;
- cysts;
- infertility;
- an increased risk of childbirth complications and new born deaths;
- the need for later surgeries. For example, the FGM procedure that seals or narrows a vaginal opening (type 3 above) needs to be cut open later to allow for sexual intercourse and childbirth. Sometimes it is stitched again several times, including after childbirth, hence the woman goes through repeated opening and closing procedures, further increasing and repeated both immediate and long-term risks.

Procedures are mostly carried out on young girls sometime between infancy and age 15, and occasionally on adult women. In Africa, more than three million girls have been estimated to be at risk for FGM annually.

Child sexual exploitation - Sexual exploitation of children and young people under 18 involves exploitative situations, contexts and relationships where young people (or a third person or persons) receive 'something' (e.g. food, accommodation, drugs, alcohol, cigarettes, affection, gifts, money) as a result of them performing, and/or another or others performing on them, sexual activities. Child sexual exploitation can occur through the use of technology without the child's immediate recognition; for example being persuaded to post sexual images on the Internet/mobile phones without immediate payment or gain. In all cases, those exploiting the child/young person have power over them by virtue of their age, gender, intellect, physical strength and/or economic or other resources. Violence, coercion and intimidation are common, involvement in exploitative relationships being characterised in the main by the child or young person's limited availability of choice resulting from their social/economic and/or emotional vulnerability.

Signs of child sexual exploitation include the child or young person:

- going missing for periods of time or regularly returning home late
- skipping school or being disruptive in class
- appearing with unexplained gifts or possessions that can't be accounted for
- experiencing health problems that may indicate a sexually transmitted infection
- having mood swings and changes in temperament
- using drugs and/or alcohol

- displaying inappropriate sexualised behaviour, such as over-familiarity with strangers, dressing in a sexualised manner or sending sexualised images by mobile phone ("sexting")
- they may also show signs of unexplained physical harm, such as bruising and cigarette burns

Child Criminal Exploitation (County Lines)

Child Criminal Exploitation (CCE) can include children being forced or manipulated into transporting drugs or money through county lines, working in cannabis factories, shoplifting or pickpocketing. They can also be forced or manipulated into committing vehicle crime or threatening/committing serious violence to others.

Children can become trapped by this type of exploitation as perpetrators can threaten victims (and their families) with violence or entrap or coerce them into debt. They maybe coerced into carrying weapons such as knives or begin to carry a knife for a sense of protection from harm from others. As children involved in criminal exploitation often commit crimes themselves, their vulnerability as victims is not always recognised by adults and professionals, (particularly older children) and they are not treated as victims despite the harm they have experienced. They may still have been criminally exploited even if the activity appears to be something they have agreed or consented to.

It is important to note that the experience of girls who are criminally exploited can be very different to that of boys. The indicators may not be the same, however professionals should be aware that girls are at risk of criminal exploitation too. It is also important to note that both boys and girls being criminally exploited may be at higher risk of sexual exploitation.

Sexting/ Sharing Nudes

Sexting is when someone shares sexual, naked or semi-naked images or videos of themselves or others or sends sexually explicit messages. They can be sent using mobiles, tablets, smartphones laptops – any device that allows you to share media and messages. Sexting may also be called: trading nudes; dirties; pic for pic.

Sexting can be seen as harmless, but creating or sharing explicit images of a child is illegal, even if the person doing it is a child. A young person is breaking the law if they: take an explicit photo or video of themselves or a friend; share an explicit image or video of a child even if it's shared between children of the same age; possess, download or store an explicit image or video of a child, even if the child gave their permission for it to be created.

Sexting between adults is legal. But it's against the law to send a nude or any kind of sexual image or video to someone under 18. Asking for or viewing sexual images of someone who's under 18 is a crime. It's also against the law to send a nude or video of someone who was under 18 at the time, but is an adult now.

Crimes recorded in this way are unlikely to appear on future records or checks, unless the young person has been involved in other similar activities which may indicate that they're a risk.

There are many reasons why a young person may want to send a naked or semi-naked picture, video or message to someone else; joining in because they think that 'everyone is doing it'; boosting their self-esteem; flirting with others and testing their sexual identity; exploring their sexual feelings; to get attention and connect with new people on social media; they may find it difficult to say no if somebody asks them for an explicit image, especially if the person asking is persistent.

Radicalisation

Radicalisation is the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups.

Children and young people can be drawn into violence or they can be exposed to the messages of extremist groups by a number of means. These can include through the influence of family members or friends and/or direct contact with extremist groups and organisations.

Increasingly the internet and social media are being used to share extremism ideologies and views. This may take the form of a "grooming" process where the vulnerabilities of a young person are exploited to form an exclusive friendship which draws the young person away from other influences that might challenge the radical ideology.

On-line content in particular social media, may pose a specific risk as it can be seen to normalise radical views and promote content which is shocking and extreme; children can be trusting and may not necessarily appreciate bias, which can lead to being drawn into such groups and to adopt their extremist views.

Exposure to extremist groups increases the risk of a young person being drawn into criminal activity and has the potential to cause significant harm.

The risk of radicalisation can develop over time and may relate to a number of factors in the child's life. Identifying the risks require practitioners to exercise their professional judgement and to seek further advice as necessary. The risk may be combined with other vulnerabilities or may be the only risk identified.

'Honour-based violence

'Honour-based' violence (HBV) encompasses incidents or crimes which have been committed to protect or defend the honour of the family and/or the community, including female genital mutilation (FGM), forced marriage, and practices such as breast ironing. Abuse committed in the context of preserving "honour" often involves a wider network of family or community pressure and can include multiple perpetrators. It is important to be aware of this dynamic and additional risk factors when deciding what form of safeguarding action to take. All forms of HBV are abuse (regardless of the motivation) and should be handled and escalated as such. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

Forced Marriage

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some communities use religion and culture as a way to coerce a person into marriage. Schools and colleges can play an important role in safeguarding children from forced marriage.

Peer on peer abuse

Children can abuse other children. This is referred to as peer on peer abuse and can take many forms. This can include (but is not limited to) bullying (including cyber bullying, prejudice-based and discriminatory bullying); sexual violence and sexual harassment; physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm; sexting and initiating/hazing type violence and rituals. Records need to be kept of all incidents of peer on peer abuse with details of the incident and what action was taken, refer to peer on peer abuse reporting form. All cases need to be reported to the designated safeguarding lead in school. Any incidence of sexual violence needs to be reported directly to the police who will decide whether to deal with it as a welfare issue or a criminal issue.

Faith Abuse

The term 'belief in spirit possession' is the belief that an evil force has entered a child and is controlling him or her. Sometimes the term 'witch' is used and is the belief that a child is able to use an evil force to harm others. There is also a range of other

language that is connected to such abuse. This includes black magic, kindoki, ndoki, the evil eye, djinns, voodoo, obeah, demons, and child sorcerers. In all these cases, genuine beliefs can be held by families, carers, religious leaders, congregations, and the children themselves that evil forces are at work. Families and children can be deeply worried by the evil that they believe is threatening them, and abuse often occurs when an attempt is made to 'exorcise', or 'deliver' the child. Exorcism is the attempt to expel evil spirits from a child.

The belief in 'possession' or 'witchcraft' is widespread. It is not confined to particular countries, cultures or religions, nor is it confined to new immigrant communities in this country.

Any concerns about a child which arise in this context must be taken seriously.

Mental Health and Wellbeing.

Negative experiences such as abuse and neglect can adversely impact a child's mental health. Mental health issues can also sometimes lead to safeguarding and child protection issues, for example if a child's mental health begins to put them or other people at risk of harm.

WHO IS AN ABUSER?

All staff must be aware that an abuser could be either a fellow student, member of staff, a visitor at the school, immediate/ non-immediate family member or a non-relative.

WHERE DOES ABUSE HAPPEN?

All staff must be aware that a child may be abused either at home, away from home or school, or within the school itself.

POLICY / PROCEDURE

Crystal Gardens Primary School will be committed to following the procedures set out by the Local Safeguarding Children Board (LSCB) and the DCSF.

- All staff must recognize that there is a strict chain of command and decision-making concerning child protection. Ultimately, the Head Teacher or the Deputy Head teacher in her absence must make final decisions.
- The DSMS/Head Teacher will undertake regular and appropriate training to support her role.
- If child abuse is suspected, concerns should be relayed immediately directly to the Head Teacher.
- Do not attempt to investigate the matter alone or probe the child in question.
- A suspicion may be a real case of abuse – always act promptly.

IN THE EVENT OF A DISCLOSURE OF ABUSE

- Staff must resist the temptation, which is very real, to ignore, to over dramatize, or to try to cope with a disclosure on their own.
- Take the allegation seriously, calmly, and without asking questions, which could be interpreted as doubting what you are being told.
- Accept what is being said, do not press for further information. Summarize the information back to the child to ensure accurate shared perception of what has been said.
- Offer reassurance that the right and good thing has been done by telling.
- Let the child know that you need to share information with someone really responsible so that the problem can be sorted out properly. Tell the child that the matter will be treated as confidential.
- Say clearly what you are going to do next. Ensure that the child knows what to do next. Tell the child you will let him/her know what happens.
- Record immediately exactly what you have heard, using the pupil's words as far as possible; note carefully names, dates, times and any details of incidents. All notes should be timed, dated and signed, with name printed alongside the signature.
- Relay this disclosure and written record to the Head Teacher immediately.
- Staff will be reminded that all matters relating to Child Protection are confidential and they will receive information on a need to know basis. Staff will be expected, as part of their professional responsibility, to share information with relevant agencies, as required.
- All staff are strictly required to report to the Head Teacher any concern/allegation about school practises or the behaviour of fellow colleagues which are likely to put pupils at risk of abuse or other serious harm. Such staff should be aware that the school will provide immunity from any kind of retribution or disciplinary action against those who have 'whistle-blown' in good faith.
- In line with the DCSF an allegation / suspicion of abuse will be referred by the DSMS/Head Teacher to the Bradford Safeguarding Children Board/Social Services within 24 hours of receiving the disclosure.
- In the event that the DSMS/ Head Teacher are subject to allegation or suspicion, the disclosure should be relayed to the Principal/Proprietor by the teacher/adult who receives the allegation or suspicion. In the event that the Principal is subject to allegation or suspicion the recipient of the allegation/suspicion should relay in writing or with written confirmation of a telephone referral, directly to the Bradford Safeguarding Children Board/Social Services (Senior Adviser for Safeguarding Children in Education) within 24 hours of the disclosure. The matter must not be investigated by the recipient of the disclosure.
- Due to Covid if school is closed and children are at home and a disclosure is made to a member of staff, the same procedures apply. All staff need to have a contact number for the DSL.

Allegations against the staff & volunteers

There may be rare instances of suspected abuse being reported where a member of the teaching or support staff or a volunteer is implicated as the abuser. Any suspicions should be reported at once to the Head teacher who will consult the Proprietors and CPO to discuss further action.

Corporal punishment is against the law and will not be used by anyone in this school.

Allegations against the Head teacher or Proprietor

If the allegation involves the Head teacher, suspicions will be reported by the CPO directly to the Proprietor.

In the event that the Proprietor is subject to allegation or suspicion the recipient of the allegation/suspicion should relay in writing or with written confirmation of a telephone referral, directly to the Bradford Safeguarding Children Board/Social Services (Senior Adviser for Safeguarding Children in Education) within 24 hours of the disclosure. The matter must not be investigated by the recipient of the disclosure.

Inter-agency communication

The School will liaise with the Bradford Safeguarding Children's Board, particularly in relation to the training of people who work with children.

The school will support the agency sharing of information when contacted by the Local Authority.

If you have concern that a child is being harmed as a result of abuse or neglect, you must not keep these concerns to yourself.

KEEPING CHILDREN SAFE IS EVERYONE'S RESPONSIBILITY.

In the Bradford district, these are the numbers that you can ring for advice and to make a referral. In Bradford Council, Jenni Whitehead holds the role of Designated Officer. Jenni can be contacted on 01274 385726 or during office hours (8.30am - 5pm Monday to Thursday, 4.30pm on Friday) call Children's Social Services Initial Contact Point - 01274 437600. At all other times, Social Services Emergency Duty Team - 01274 431010

For all general enquiries, please contact Children's Specialist Services on 01274 435600.

If you have reason to believe that a child is at IMMEDIATE RISK OF HARM, contact the police on 999

SIGNS AND SYMPTOMS OF CHILD ABUSE: INFORMATION FOR SCHOOLS

It is important to remember that very few signs and symptoms are in themselves conclusive evidence that a child has been or is being abused. Most of the signs given could have acceptable explanations, i.e. there are lots of reasons why children have nightmares or why they suddenly start wetting themselves at school. Most teachers already have a range of possible explanations for concerns they have about individual children; explanations gathered through the experience of working with children and their families. What we ask is that abuse be included in the range of possibilities when concerns are raised about individual children. Be alert to explanations, which do not seem to fit the circumstances and behaviour that is unusual for that particular child. Signs are more significant in clusters, i.e. a child may have repeated urinary tract infections, but may also produce sexualised drawings, use sexual language and be disruptive in the classroom.

It is equally important to remember that where one sign/ symptom is picked up at school in an individual child, a health visitor or other school may be concerned about a younger or older sibling. Education's procedures start at 'If in doubt, act, and we encourage teachers to share their information with Social Services by contacting the Child Protection Unit'.

The following list should not then be viewed as a checklist, but should help to act as a reminder that where we see these signs or symptoms in children, child abuse should be within our range of possible causes:

- Physical signs (not ranked).
- Unexplained injuries, particularly if they are recurrent, including bruises, scratches, burns, bite marks, black eyes, dislocations, fractures e.t.c
- Improbable explanations given for injuries.
- Refusal to discuss injuries.
- Untreated injuries.
- Admission of punishment, which appears excessive.
- Bald patches.
- Constant tiredness.
- Poor state of clothing.
- Sudden speech disorders.
- Self-mutilation.
- Drug, solvent abuse.
- Eating disorders.
- Repeated urinary tract infections.
- Failure to thrive.
- Soreness of the genitals.

SOME BEHAVIOURAL AND OTHER SIGNS (NOT RANKED)

- Hostile/aggressive/bullying behaviour.
- Inappropriate sexual play.
- Regression.
- Over-reaction to certain adults.
- Isolation.
- Obvious lies.
- Sexual drawings.
- Overly compliant.
- Stealing.
- Poor peer relationships.
- Secretiveness.
- Attention seeking.
- Extraordinary fear.
- Unexplained wealth.
- Unable to concentrate – falling behind in school work.
- Non school attendance.
- Sudden changes in behaviour.
- Phobic states and compulsive disorders.
- Lack of trust and low self-esteem.
- Classroom disruption.
- Suicidal behaviour.
- Open masturbation.
- Coming to school early and reluctance to go home.
- Obsessional washing.
- Disclosure of information about abuse.

As a final note, some children who are abused do not give out any recognisable signs and the risk for them, when they start talking about abuse, is that people will not be able to believe because they have no other indicators to backup what the child is saying. Children who talk about being abused must always be taken seriously and procedures must always be activated. Research repeatedly shows that children rarely lie about abuse.

Supporting Pupils Who Have Been Abused/Witness Abuse:

Crystal Gardens Primary School will endeavour to support the pupil through:

1. The content of the curriculum;
2. The school ethos, which promotes a positive, secure and supportive environment, giving pupils a real sense of belonging and being valued;
3. The school's behaviour policy;
4. Liaising with appropriate agencies involved in safeguarding children;
5. Notifying the BSCB/Social Services if there is a significant concern;
6. Providing continued support in the event that the pupil should leave Crystal Gardens Primary School and join a new school, by forwarding under confidential cover appropriate information to the DSL/HT of the new school

Supporting Staff Who Have Become Involved in a Child Protection Matter:

Crystal Gardens Primary School will endeavour to support the staff member through:

- Providing an opportunity to talk through anxieties with the DSMS;
- Seeking further support as appropriate.

Review: This policy will be reviewed annually and updated in accordance with current legislation by the Trusteeship Board.

Training

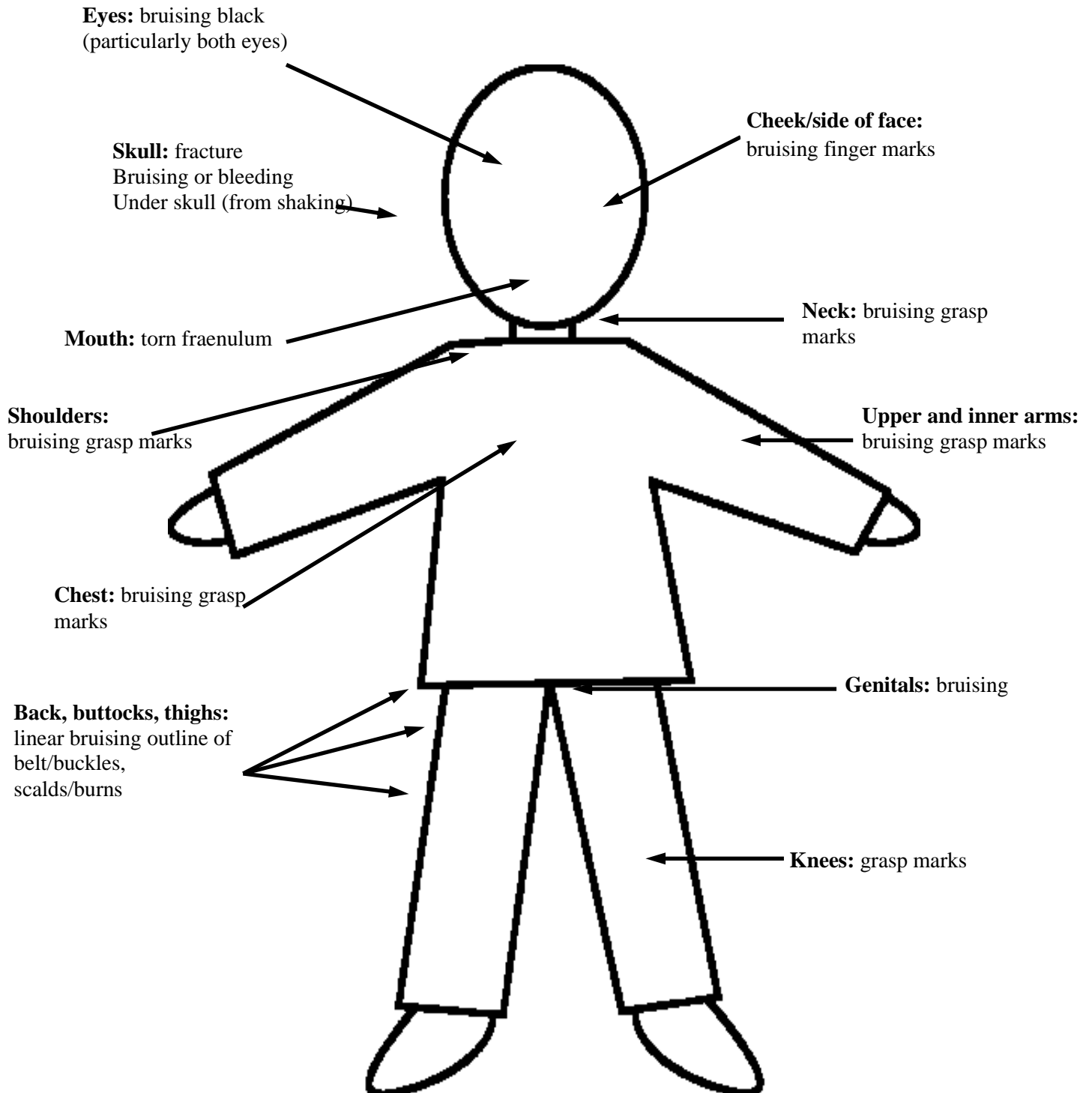
The school has a commitment to training its staff on how to protect children.

The School will ensure that:

- Child Protection policy and procedures will be given to all staff when undertaking employment with the school and all staff are expected to have read and understood the contents.
- New staff will receive verbal advice on child protection from a Senior Designated Person during the induction process
- In the staff meeting at the start of each year, staff will be reminded about the names of the Designated Persons to whom they should take allegations or suspicions.
- Staff will receive update training from the CPO at least once every year.

The Designated Persons for Child Protection will undergo Level 3 training updates every two years.

COMMON SITES FOR NON - ACCIDENTAL INJURY



Child Protection Procedures Flow Chart September 2022

On discovery or suspicion of child abuse
If in doubt – ACT



Inform your Named Person for Child Protection
DSL: Rashta Bibi
DDSL: Samina Ahmed,
Who should then take following steps



Where it is clear that a Child Protection Referral is needed contact Children’s Social Services Initial Contact Point without delay

- During office hours (8.30am – 5pm Monday to Thursday, 4.30pm on Friday) call Children’s Initial Contact Point on **01274 435600**
- At all other times, Social Services Emergency Duty Team on **01274 431010**
- If you have reason to believe that a child is at **IMMINENT SIGNIFICANT RISK OF HARM/IMMEDIATE DANGER**, contact the police on **999**
- For all general enquiries, please contact Children’s Specialist Services on **01274 435600**

You need to ensure that you speak to the appropriate organisations who can listen to and record your concern, and then take appropriate action.

The Multi-Agency Referral Form (MARF) must be completed for all requests for children’s centre support, early help support or social work assessment.



If you are asked to monitor the situation, make sure you are clear what you are expected to monitor, for how long and how and to whom you should feedback information to.



Remember: Always make and keep a written record of all events and action taken, date and sign each entry to this record. Keep records confidential and secure and separate from the child’s curriculum file.



Ensure completion (within 24 hours) and dispatch of the Multi-Agency Referral Form (MARF). This form can be accessed [here](#)

Retain a copy in school. Send the MARF from a secure email account to childrens.enquiries@bradford.gov.uk

Logging a Concern about a child's Safety and Welfare

Student's Name:		Year Group:	
Date:	Time:		
Name: (Print)	Signature:		
Position:			
Note the reason(s) for recording the incident.			
Details of concern/incident - record the who/what/where/when factually (continue on reverse of sheet if necessary):			
Any other relevant information (witnesses, immediate action taken)			
Action taken			
Reporting staff signature		Date	
DSL – Response/Outcome			
DSL signature		Date	

Check to make sure your report is clear now - and will also be clear to a stranger reading it next year.

PLEASE PASS THIS FORM TO YOUR DESIGNATED SAFEGUARDING LEAD
FRONT SHEET: CHILD PROTECTION / WELFARE CONCERNS RECORD

Date file started:

Name of Student:

Home Address:

Postcode:

Contact Number/s:

Family members i.e. parents / carers / siblings:			
Name	Relationship	Address	School details

Contact details of other professionals (e.g. key social worker, GP)		
Name	Agency	Address

Are any other child protection files held in school relating to this student or another student closely connected to him/her? **YES/NO**