

Daubeney & Sebright Children's Centre Safeguarding Policy & Child Protection

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DESIGNATED MEMBERS OF STAFF FOR SAFEGUARDING

Children Centre	Designated Safeguarding Lead	School Designated Safeguarding Lead(s)	Nominated Safeguarding Governor	Chair of Governors
Sebright	Juliet Keating Maureen O'Callaghan Itidal said	Mr Robin Warren	Marisa Childs	Will Emms
Daubeney	Suzanne Carmichael Melina Yiangou	Mr Robin Warren	Marisa Childs	Will Emms

DESIGNATED MEMBER OF STAFF FOR ALLEGATIONS AGAINST STAFF

Children Centre	Designated Executive Head Teacher	Designated Head of Centre	Chair of Governors	Nominated Governor
Sebright	Mr Robin Warren	Suzanne Carmichael	Will Emms	Marisa Childs
Daubeney	Mr Robin Warren	Suzanne Carmichael	Will Emms	Marisa Childs

1. Introductions and Aims

Introduction

Section 175 of the Education Act 2002 places a duty upon Sebright and Daubeney Schools to safeguard and promote the welfare of children. 'Working Together to Safeguard Children' March 2015, 'Keeping Children Safe in Education' September 2016 and the London Child Protection Procedures 5th edition, provide a framework for enabling the school to fulfil its statutory duties effectively and efficiently in the best interests of children (Appendix 1).

This policy sets out how the school's governing body discharges its statutory responsibilities relating to safeguarding and promoting the welfare of children in the Children's Centres

All staff including teaching and non-teaching staff, temporary and supply staff, clerical and domestic staff, volunteers and staff working on site employed by other services and agencies and those working with children and families in the community have a statutory responsibility to safeguard and promote the welfare of children and must be aware of and fully conversant with this policy. All staff must be given the policy in writing and follow the school's procedures and guidance at all times.

Our policy is based on the following key elements:

- Ensuring we practice safe recruitment in checking the suitability of staff and volunteers to work with children;
- Raising awareness of child protection issues and equipping children with the skills needed to keep them safe;
- Developing and then implementing procedures for identifying and reporting cases, or suspected cases, of abuse including FGM;
- Supporting pupils who have been abused in accordance with his/her agreed child protection plan;
- Establishing a safe environment in which children can learn and develop.

2. Our approach to safeguarding children

Supporting Children and Working in Partnership with Parents

- We will provide a secure, caring, supportive and protective relationship for the child;
- Daubeney and Sebright Children's Centres recognise that the child's welfare is paramount. Good child protection practice and a good outcome for the child relies on a positive, open and honest working partnership with parents;
- Whilst we may, on occasion, need to make referrals to Children's Social Care without consultation with parents, we will make every effort to maintain a positive working relationship with them whilst fulfilling our duties to protect children;
- Children will be given a proper explanation (appropriate to age & understanding) of what action is being taken on their behalf and why;
- We will endeavour to preserve the privacy, dignity and right to confidentiality of the child and parents. The Designated Safeguarding Lead will determine which members of staff 'need to know' personal information for the purpose of supporting and protecting the child.

Partnership with Parents

The Children's Centres shares a purpose with parents and carers to keep children safe from harm and to have their welfare promoted. We are committed to working with parents positively, openly and honestly. We ensure that all parents and carers are treated with respect, dignity and courtesy. We respect parents' and carers' rights to privacy and confidentiality and will not share sensitive information unless we have permission or it is necessary to do so in order to protect a child.

The Centre will, in most circumstances, endeavour to discuss all concerns with parents and carers about their children. However, there may be exceptional circumstances when the school will discuss concerns with Social Care and/or the Police without parental knowledge (in accordance with the London Child Protection Procedures). The school will aim to maintain a positive relationship with all parents and carers. The school's Safeguarding and Child Protection Policy is available on request.

Partnerships with Others

Sebright and Daubeney Children's Centres recognise that it is essential to establish positive and effective working relationships with other agencies that are partners of the City and Hackney Safeguarding Children Board. There is a joint responsibility on all these agencies to share information to ensure the safeguarding of all children.

4. Definitions and types of abuse

Harm means ill-treatment or impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another;

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

Health includes physical and mental health; **Ill-treatment** includes sexual abuse and other forms of ill-treatment which are not physical.

Abuse and Neglect are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them, or, more rarely, by a stranger. They may be abused by an adult or adults, another child, children or young people. There are four categories of abuse; physical abuse, emotional abuse, sexual abuse and neglect.

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.

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 a child 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 a 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.

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.

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 and clothing, 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 caretakers);
- Ensure access to appropriate medical care or treatment;
- It may also include neglect of, or unresponsiveness to a child's basic emotional needs.

5. Practices and Procedures

All Children's Centre Staff must immediately Report

- Any suspicion that a child is injured, marked, or bruised in a way which is not readily attributable to the normal knocks or scrapes received in play;
- Any explanation given which appears inconsistent or suspicious;
- Any behaviours which give rise to suspicions that a child may have suffered harm;
- Any concerns that a child may be suffering from inadequate care, ill treatment, or emotional maltreatment;
- Any concerns that a child is presenting signs or symptoms of abuse or neglect;
- Any significant changes in a child's presentation, including non-attendance;
- Any hint or disclosure of abuse about or by a child / young person;
- Any concerns regarding person(s) who may pose a risk to children (e.g. living in a household with children present);
- Information which indicates that the child is living with someone who does not have parental responsibility for them for a period of more than 28 days (Private Fostering);

Responding to Disclosures

Disclosures or information that a child has been harmed may be received from pupils, parents or other members of the public. The centre recognises that those who disclose such information may do so with difficulty, having chosen carefully to whom they will speak.

Accordingly, all staff will handle disclosures with sensitivity. Such information cannot remain confidential and staff will immediately communicate what they have been told to the DSL and make a contemporaneous record using clear, straightforward language.

Staff will not investigate but will, wherever possible, listen, record and pass on information to the Designated Safeguarding Lead in order that s/he can make an informed decision of what to do next.

All staff will:

- Listen to and take seriously any disclosure or information that a child may be at risk of harm;
- Clarify the information without asking leading or probing questions;
- Make a written record of what the child has said using the Cause for Concern Form (Appendix 2);
- Try to keep questions to a minimum and of an 'open' nature e.g. 'Can you tell me what happened?' rather than 'Did x hit you?';
- Try not to show signs of shock, horror or surprise;
- Not express feelings or judgements regarding any person alleged to have harmed the child;
- Explain sensitively to the child or young person that they have a responsibility to refer the information to the Designated Safeguarding Lead;
- Reassure and support the child or young person as far as possible;
- Not promise secrecy;
- Explain that only those who 'need to know' will be told;
- Explain what will happen next and that the child will be involved as appropriate.

Confidentiality

The centre will operate with regard to Information sharing advice for safeguarding practitioners (Appendix 1, Link 4). However, where there is a concern that the child may be suffering or is at risk of suffering significant harm, the child's safety and welfare must be the overriding consideration. The centre will ensure:

- Information is shared with Children's Social Care and/or Police where the child/young person is or may be at risk of significant harm;
- Pupil's and/or parent's confidentiality is respected;

- That any information shared is necessary, proportionate, relevant, adequate, accurate, timely and secure.
- Any other factors which may impact on the safety and welfare of the child.

Action by the Designated Safeguarding Lead (or the Deputy Designated Safeguarding Lead in their absence)

Following any information raising concern, the Designated Safeguarding Lead will:

- Consider the child's wishes and feelings, but not promise confidentiality;
- Consider any urgent medical needs of the child;
- Consult with a member of Children's Social Care's First Access and Screening Team (Appendix 5) if they are uncertain whether or not a referral is required or review action when a child has suffered or is likely to suffer harm or Early help and threshold criteria for intervention.
- Make an immediate referral to Hackney Children's Social Care's First Access and Screening Team if there has been a disclosure and/or allegation of abuse or there are clear grounds for concerns about the child's safety and well-being (Appendix 6);

In consultation with Hackney Children's Social Care's First Access and Screening Team (FAST), decide:

- Wherever possible, to talk to parents, unless to do so may place a child at risk of significant harm, impede any police investigation and/or place the member of staff or others at risk;
- Whether to make a child protection referral to social care because a child is suffering or is likely to suffer significant harm and if this needs to be undertaken immediately (Appendix 6);
- Contact the designated officer for safeguarding in another agency if that agency is working with the family;

OR

- Not to make a referral at this stage, but retain the information in written notes on the child's centre file;
- If further monitoring is necessary, agree who and how this will be undertaken;
- If it would be appropriate to undertake an assessment (e.g. CAF) and/or make a referral for other services.

All information and actions taken, including the reasons for any decisions made, will be fully documented. All referrals to Social Care for children living Hackney needs to be completed using the Multi-agency Referral Form (Appendix 6).

Action following a Child Protection referral

The Designated Safeguarding Lead or other appropriate member of staff will:

- Maintain contact with the child's allocated Social Worker;
- Contribute to the Strategy Discussion and Strategy Meeting;
- Provide a report for, attend and contribute to any Initial and Review Child Protection Conference;
- Share the content of this report with the parent, prior to the meeting;
- Attend Core Group Meetings for any child subject to a Child Protection Plan or Child in Need Meeting for any child subject to a Child in Need Plan;
- Where a child on a Child Protection Plan moves from the centre or goes missing, immediately inform the child's Social Worker.

Dealing with Disagreements and Escalation of Concerns

Effective working together depends on an open approach and honest relationships between agencies. Problem resolution is an integral part of professional co-operation and joint working to

safeguard children. Occasionally situations arise when workers within one agency feel that the actions, inaction or decisions of another agency do not adequately safeguard a child. The CHSCB Escalation Policy defines the process for resolving such professional difference and should be read alongside the London Child Protection Procedures and relevant internal policies on escalating matters of concern.

Disagreements can arise in a number of areas, but are most likely to arise around:

- Levels of need
- Roles and responsibilities;
- The need for action;
- Progressing plans and communication.

Where professionals consider that the practice of other professionals is placing children at risk of harm, they must be assertive, act swiftly and ensure that they challenge the relevant professionals in line with this policy and be aware that:

- The safety of individual children and young people is the paramount consideration in any professional activity;
- Resolution should be sought within the shortest timescale possible to ensure the child is protected;
- As a guide, professionals should attempt to resolve differences through discussion within one working week or a timescale that protects the child from harm (whichever is shortest);
- Disagreements should be resolved at the lowest possible stage.

The Designated Safeguarding Lead or other appropriate member of staff will:

- Contact the line manager in Children's Social Care if they consider that the social care response to a referral has not led to the child being adequately safeguarded and follow this up in writing;
- Contact the line manager in Children's Social Care if they consider that the child is not being adequately safeguarded by the child protection plan and follow this up in writing;
- Use the CHSCB Escalation Policy if this does not resolve the concern.

6. Providing a Safe and Supportive Environment

Safer Recruitment and Selection

Daubeney and Sebright Centres pay full regard to the statutory guidance for centres and colleges. We ensure that all appropriate measures are applied in relation to everyone who works in the centre and who is therefore likely to be perceived and experienced by the children as a safe and trustworthy adult. This includes volunteers, supervised volunteers and staff employed by contractors. Safer recruitment practice includes scrutinising applicants, verifying identity and academic/vocational qualifications, obtaining professional references, checking previous employment history and ensuring that a candidate has the health and physical capacity for the job. It also includes undertaking interviews and checks with the Disclosure and Barring Service (DBS).

See Appendix 7: Flowchart of Disclosure and Barring Service criminal record checks and barred list checks.

In line with statutory changes, underpinned by regulations, the following will apply:

- DBS and barred list checks will be undertaken for all posts that are deemed regulated activity, and for all other posts an enhanced DBS check will be undertaken unless they are supervised roles that are deemed not to meet the definition of regulated activity;
- This centre is committed to keeping an up to date Single Central Record detailing a range of checks carried out on our staff;
- All new appointments to our centre workforce who have lived outside the UK will be subject to additional checks as appropriate;
- Our centre ensures that supply staff have undergone the necessary checks and will be made aware of this policy;
- Identity checks that must be carried out on all appointments to our centre workforce before the appointment is made, in partnership with the Local Authority (LA);
- Staff responsible for recruiting and appointing must be suitably qualified.

Safe Practice

Our centre will comply with the current 'Guidance for safer working practice for those working with children and young people in education settings' (Appendix 1, Link 5) and ensure that information in this guidance regarding conduct, is known to all staff, visitors and volunteers who come into the centre.

Safe working practice ensures that pupils are safe and that all staff:

- Are responsible for their own actions and behaviour and should avoid any conduct which would lead any reasonable person to question their motivation and intentions;
- Work in an open, honest and transparent way;
- Work with other colleagues where possible in situations that could be open to question;
- Discuss and/or take advice from centre management over any incident which may give rise for concern;
- Record any incidents or decisions made;
- Apply professional standards respectfully in relation to diversity issues;
- Be aware of information-sharing and confidentiality policies;
- Are aware that breaches of the law and other professional guidelines could result in criminal or disciplinary action being taken against them.

Centre Training and Staff Induction

The centre's Designated Safeguarding Lead and Governor with designated responsibility for safeguarding will undertake child protection training for Designated Safeguarding Leads and refresher training at two yearly intervals.

All other centre staff, including non-teaching staff, will undertake appropriate induction training and safeguarding/child protection training to enable them to carry out their responsibilities for

safeguarding effectively, which will be updated regularly. The centre will maintain a register of who has undertaken what training and when.

All staff (including temporary staff, volunteers, supervised volunteers and staff employed by contractors) are provided with the centre's safeguarding policy and informed of centre's safeguarding arrangements on induction. The centre will maintain a register of who has received this information and when.

If you are not sure whether or not to make a referral to Children's Social Care, you can contact the Children's Social Care's First Access and Screening Team to discuss your concerns on **020 8356 5500** during office hours and **020 8356 2710** out of hours.

7. Roles & Responsibility

Our Governing Body will ensure that:

- The centre has a safeguarding and child protection policy and procedures in place that are in accordance with statutory guidance and locally agreed inter-agency procedures, and the policy is made available to parents on request and via our website;
- The centre operates safer recruitment procedures and makes sure that all appropriate checks are carried out on staff and volunteers who work with children;
- The centre follows the 5th Edition of the London Child Protection Procedures and the statutory guidance Keeping Children Safe in Education 2016 for dealing with allegations of abuse against staff and volunteers;
- A senior member of the centre's leadership team is designated to take lead responsibility for safeguarding (and deputy);
- There is a named Governor lead for safeguarding;
- Staff undertake appropriate safeguarding/child protection training, at regular intervals;
- They remedy, without delay, any deficiencies or weaknesses regarding safeguarding arrangements;
- A Governor is nominated to be responsible for liaising with the LA and /or partner agencies in the event of allegations of abuse being made against the Headteacher;
- Where services or activities are provided on the centre premises by another body, the body concerned has appropriate policies and procedures in place in regard to safeguarding children and liaises with the centre on these matters where appropriate;
- Policies and procedures are reviewed annually and provide information to the Local Authority about them and about how the above duties have been discharged.

Our Head of Centre will ensure that:

- The policies and procedures adopted by the Governing Body or Proprietor are fully implemented, and followed by all staff;
- Sufficient resources and time are allocated to enable the Designated Safeguarding Lead and the deputy to carry out their roles effectively including the assessment of pupils and attendance of strategy discussions and other necessary meetings; for e.g. Child Protection Conferences and Core Group meetings;
- All staff and volunteers feel able to raise concerns about poor or unsafe practice in regard to children, and such concerns are addressed sensitively and effectively in a timely manner in accordance with the agreed Whistle Blowing Policy (Appendix 1, Link 6);
- All pupils are provided with opportunities throughout the curriculum to learn about safeguarding, including keeping themselves safe online;
- They have completed Safer Recruitment training;
- The procedure for managing allegations against staff is known to staff and displayed in staff rooms;
- Operate the procedure for managing allegations effectively and refer relevant concerns to the Designated Officer (DO) (Appendix 1, Link 7);
- That anyone who has harmed or may pose a risk to a child is referred to the DBS;
- A deputy senior manager is appointed to deal with allegations against staff in the absence of the Headteacher.

Our Designated Safeguarding Lead(s) will:

Referrals

- Refer cases of suspected abuse or allegations to Children's Social Care and maintain a record of all referrals;
- Act as a source of support, advice and expertise within our centre and have access to the online London Child Protection Procedures;
- Liaise with the Headteacher to inform him/her of any issues and ongoing investigations and ensure there is always cover for this role;

All staff and volunteers will:

Fully comply with the centre's policies and procedures, attend appropriate training and inform the Designated Safeguarding Lead of any concerns.

Where an allegation is made against any person working in, or on behalf of, the centre that he or she has:

- Behaved in a way that has harmed a child or may have harmed a child;
- Possibly committed a criminal offence against or related to a child; or
- Behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children (refer to statutory guidance for centres and colleges);

•
Whilst we acknowledge such allegations may be false, malicious or misplaced, we also acknowledge they may be founded. It is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and outcomes are recorded. All centre staff will maintain a culture of vigilance based on the notion that 'it could happen here'. Staff is expected to maintain highly professional behaviours and appropriate professional boundaries at all times in line with the Code of Conduct (Appendix 5, Link 2).

Staff will be encouraged to use the Whistle Blowing Policy (Appendix 1, Link 6) if they have concerns regarding the conduct or behaviour of a colleague and they feel that matter has not been addressed appropriately by the centre.

Initial Action by person receiving or identifying an allegation or concern

- Treat the matter seriously and keep an open mind;
- Make a written record of the information, including the time, date and place of incident/s, persons present and what was said and sign and date this;
- Immediately report the matter to the Centre Manager Head of Centre or designated person (unless the allegation is against the Head of Centre or designated person, in which case must be reported to the Head of Centre or Chair of Governors).

Initial Action by Centre Manager

- Obtain written details of the concern or allegation, but do not investigate or interview child, adult or witnesses;
- Contact the Designated Officer (DO) within 1 working day;
- Discuss with the DO next steps using the London Child Protection Procedures Flow Charts Allegations/Concerns Against Staff (Appendix 4,5,6);
- Inform the Chair of Governors of the allegation.

Subsequent Action by designated person of Centre Manager

- In consultation with the DO conduct a disciplinary investigation, if an allegation indicates the need for this;
- Contribute to the child protection process by attending professional strategy meetings;
- Maintain contact with the DO;
- Ensure clear and comprehensive records regarding the allegation, and action taken and outcome are retained on the staff member's personnel file;
- Consider along with Human Resources and the DO whether a referral to the DBS should be made.

8. Further Information on Safeguarding Issues

Photography and Images

The vast majority of people who take or view photographs or videos of children do so for entirely understandable and acceptable reasons. However, some people abuse children through taking or using images, so we must ensure that we have some safeguards in place.

To protect children, we will:

- Seek their consent for photographs to be taken or published (for e.g. on our website or in newspapers or publications);
- Seek parental consent;
- Use only the child/ren first name with an image;
- Ensure children are appropriately dressed;
- Only use centre equipment to make images of children (no personal devices are permitted for this purpose);

Child Sexual Exploitation

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship.

The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse. If, as a centre, we are concerned a child is being sexually exploited we will follow the procedures set out in this document and make reference to the guidance provided by CHSCB (Appendix 1, Link 13). This further Governmental guidance (Appendix 1, Link 14) can be useful when considering cases of CSE.

Children with special educational needs and disabilities

Children with special educational needs (SEN) and disabilities can face additional safeguarding challenges, children can be up to four times more likely to be abused due to additional vulnerabilities. As a centre we will ensure a culture of vigilance that reflects the fact that additional barriers can exist when recognising abuse and neglect in this group of children. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs; and
- Communication barriers and difficulties in overcoming these barriers.

Female Genital Mutilation

Female Genital Mutilation (FGM) comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM.

If, we as a centre, are concerned we will follow the procedures set out in this document and make reference to the guidance provided by CHSCB (Appendix 1, Link 16).

Where a teacher discovers that an act of FGM appears to have been carried out on a girl who is aged under 18, there is a statutory duty upon that individual to report it to the police.

FGM Mandatory Reporting Duty

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers, along with social workers and healthcare professionals, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions.

Preventing Radicalisation and Extremism

We as a centre will fulfil our responsibilities under the Prevent duty (Appendix 1, Link 17) it is essential that staff are able to identify children who may be vulnerable to radicalisation, and know what to do when they are identified. Protecting children from the risk of radicalisation should be seen as part of centres' wider safeguarding duties, and is similar in nature to protecting children from other harms (e.g. drugs, gangs, neglect, sexual exploitation), whether these come from within their family or are the product of outside influences

9. APPENDICES

Appendix 1

LINKS TO DOCUMENTS

1. Working Together to Safeguard Children
<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>
2. Keeping Children Safe in Education – September 2016
<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>
3. London Child Protection Procedures, 5th Edition – September 2016
<http://www.londoncp.co.uk/index.html>
4. Information sharing advice for safeguarding practitioners – March 2015
<https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>
5. Guidance for safer working practice for those working with children and young people in education settings
<http://www.rrrecruitment.com/wp-content/uploads/2016/04/Guidance-for-Safer-Working-Practice-October-2015.pdf>
6. Hackney Whistle Blowing Policy
<http://www1.learningtrust.co.uk/bulletin/HLTdocuments/Hackney%20Whistleblowing%20Policy%20July%202014.pdf>
7. Hackney LADO Guide
<http://www.chscb.org.uk/wp-content/uploads/2015/09/Guidance-hackney.pdf>
8. CHSCB Escalation Policy
http://www.chscb.org.uk/wp-content/uploads/2015/09/BZoUXw-CDM_n8361971_v2A_ESCALATION_POLICY_-_FINAL_VERSION_20141.pdf
9. Preventing and tackling bullying
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/444862/Preventing_and_tackling_bullying_advice.pdf
10. Children Missing from Care, Home and Education
http://www.londoncp.co.uk/chapters/ch_miss_care_home_sch.html
11. Multi-agency Planning (MAP) Meetings for children or young people who present a risk of demonstrating harmful sexual behaviour (HSB)
<http://www.chscb.org.uk/wp-content/uploads/2015/11/Hackney-MAP-HSB.pdf>
12. Children Harming Others
http://www.londoncp.co.uk/chapters/ch_harm_others.html
13. Child Sexual Exploitation
<http://www.chscb.org.uk/child-sexual-exploitation/>
14. Child sexual exploitation: definition and guide for practitioners
<https://www.gov.uk/government/publications/child-sexual-exploitation-definition-and-guide-for-practitioners>
15. We have the right to be safe: protecting disabled children from abuse
<https://www.nspcc.org.uk/services-and-resources/research-and-resources/2014/right-to-be-safe/>
16. Tackling and Preventing FGM: City and Hackney Strategy 2016 – 2019
<http://www.chscb.org.uk/wp-content/uploads/2016/02/FGM-strategy21.pdf>
17. Prevent duty guidance
<https://www.gov.uk/government/publications/prevent-duty-guidance>
18. Promoting fundamental British Values as part of SMSC in British Centres
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/380595/SMSC_Guidance_Maintained_Centres.pdf
19. Extremism <http://www.chscb.org.uk/extremism-2/>

Appendix 2

Cause for Concern Form:

Name of child:	Date of incident:
Class and year:	Time of incident:
Location of incident:	Date of record:
Name of person reporting:	Time of record:

Appendix 2 continued

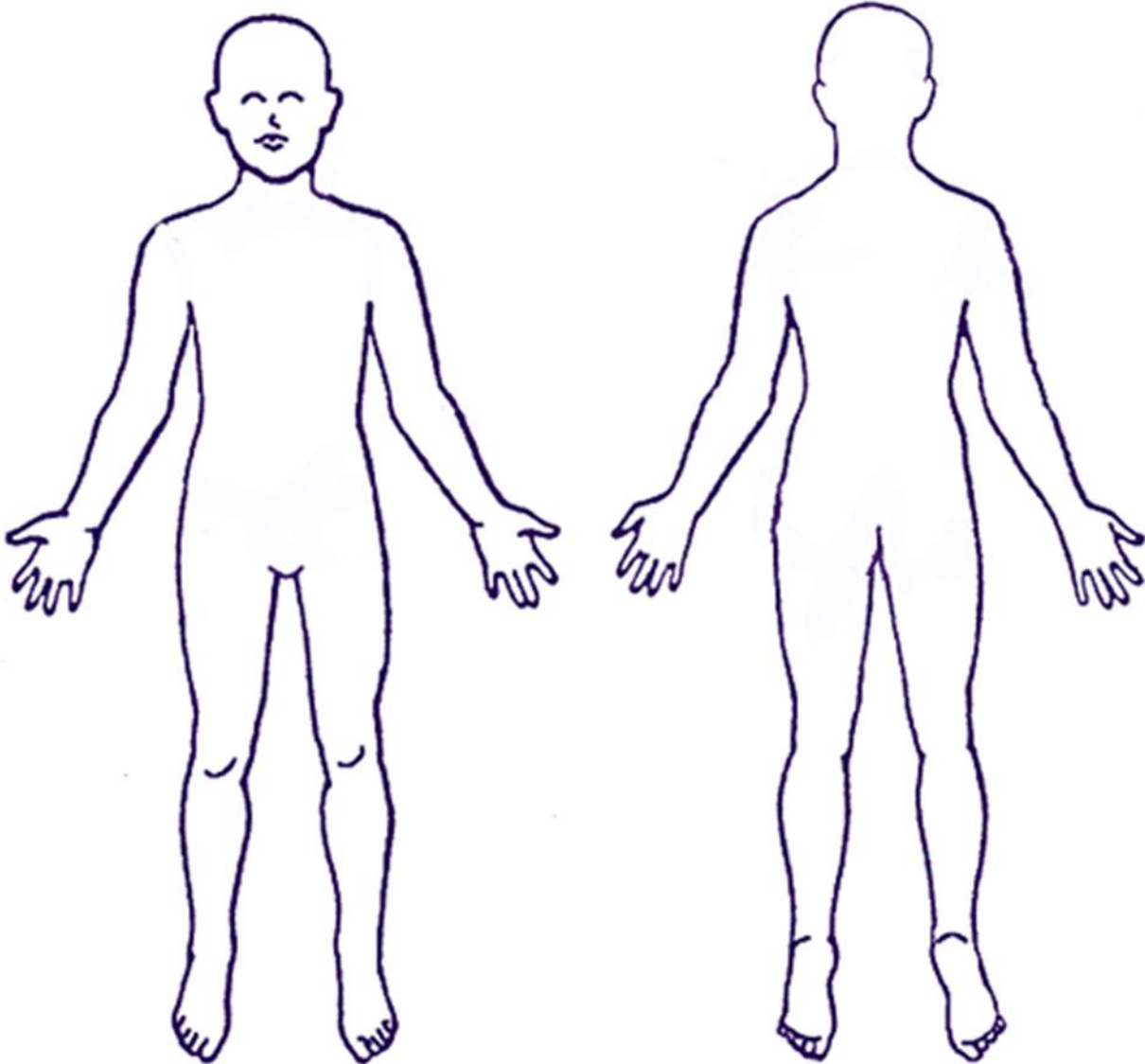
Concern/Incident: Describe your concern using clear, straightforward language. If applicable include: Who? What? Where? When?

Opinion: How does this fit with what you know about the child? Add any information you think might be relevant.

Action Taken: Include names of anyone to whom your information was passed.

Cause for Concern Form (Page 2) – Body Map

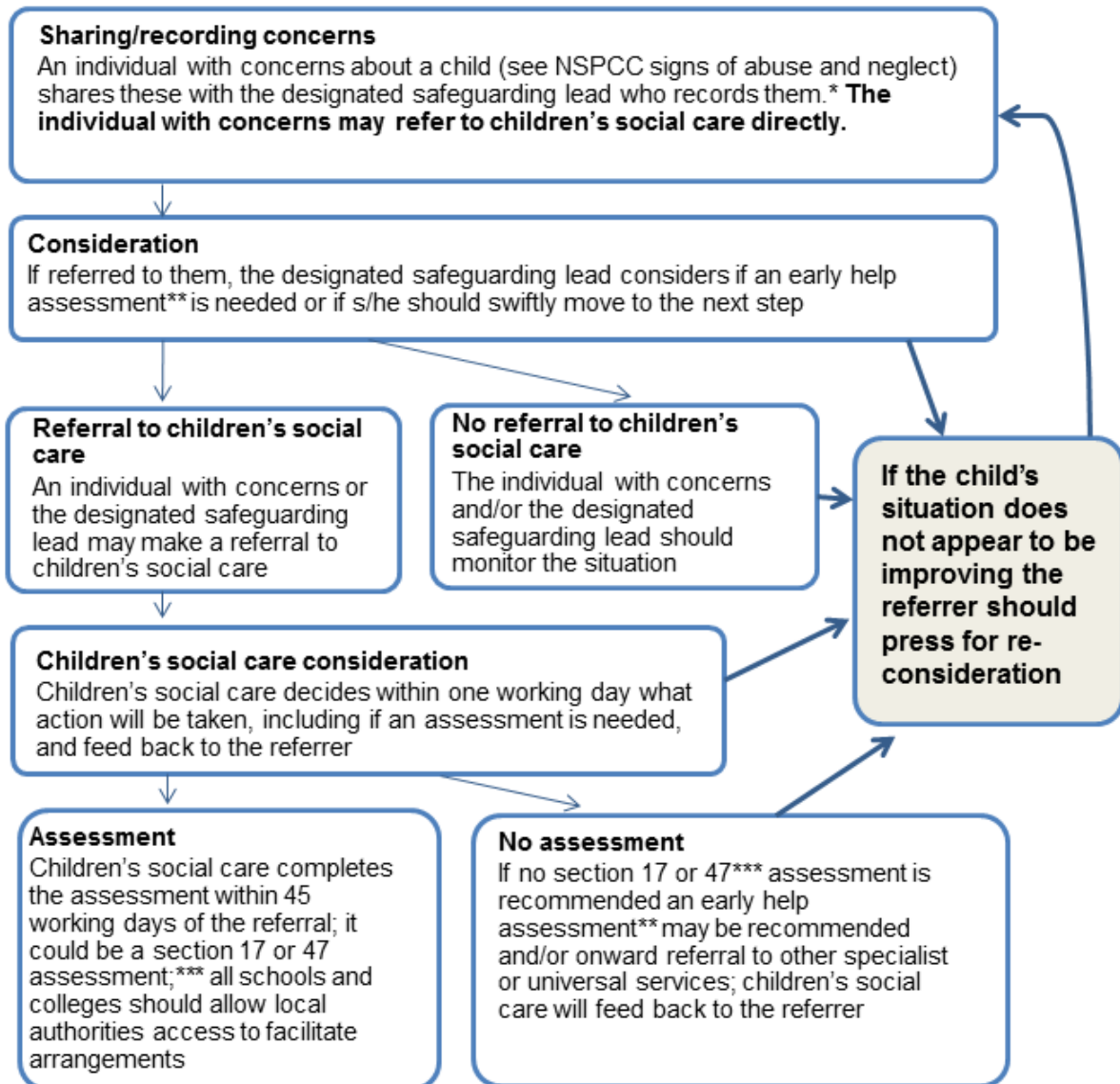
This body outline can be used to record marks and/or bruises and the date of occurrence or observation and should be kept in the Child Protection File of the child.



Action when a child has suffered or is likely to suffer harm

This diagram illustrates what action should be taken and who should take it when there are concerns about a child. If, at any point, there is a risk of immediate serious harm to a child a referral should be made to children's social care immediately.

Anybody can make a referral.



* In cases which also involve an allegation of abuse against a staff member, see part four of this guidance which explains action the school or college should take in respect of the staff member

** Where a child and family would benefit from coordinated support from more than one agency (eg, education, health, housing, police) there should be an inter-agency assessment. These assessments should identify what help the child and family require to prevent needs escalating to a point where intervention would be needed via a statutory assessment under the Children Act 1989. The early help assessment should be undertaken by a lead professional who could be a teacher, special educational needs coordinator, General Practitioner (GP), family support worker, and/or health visitor.

*** Where there are more complex needs, help may be provided under section 17 of the Children Act 1989 (children in need). Where there are child protection concerns local authority services must make enquiries and decide if any action must be taken under section 47 of the Children Act 1989.

Appendix 4

Key Contacts and Guidance

Useful Contact Details:

- Hackney CSC First Access and Screening Team (FAST)
 - E-mail: Fast@hackney.gov.uk
 - Telephone: 020 8356 5500
 - Telephone: Out of hours: 0208 356 2710
 - Website: hackney.gov.uk/child-protection
- Hackney FAST Out of Hours: 020 8356 2710
- Child Abuse Investigation Team (CAIT) @ Police: 020 8217 6537
- HLT Safeguarding in Education Team: 020 8820 7255
- Designated Officer (DO): 020 8356 4569
- City & Hackney Safeguarding Children Board: 020 8356 4183
- NSPCC- 24-hour Helpline: 080 8800 5000

Disclosure and Barring Service (DBS): www.gov.uk/dbs

Useful guidance documents:

LINKS

1. Hackney Well-being Framework and Resource Guide:

<https://www.learningtrust.co.uk/TPG/happyhealthyandreadytolearn/Documents/Children%20and%20Young%20Peoples%20Services%20Resource%20Guide.pdf>

2. London Borough of Hackney Code of Conduct:

<http://trustnet.learningtrust.co.uk/Safeguarding/Documents/Code%20of%20conduct%20for%20centres.pdf3>.

3. HLT Whistle Blowing Policy:

<http://www1.learningtrust.co.uk/bulletin/HLTdocuments/Hackney%20Whistleblowing%20Policy%20July%202014.pdf>

4. Allegations against staff or volunteers

City of London LADO – 0207 332 3621

Hackney LADO – 0208 356 4569

LADO@hackney.gov.uk

<https://chscp.org.uk/allegations-against-professionals/>

**Agency referral to Hackney Children’s Social Care
Referral form for use by all agencies.**

PLEASE NOTE THAT A WRITTEN REFERRAL FORM IS REQUIRED IN ALL CASES. WHERE A TELEPHONE REFERRAL HAS BEEN MADE BECAUSE OF THE URGENCY OF A SITUATION THIS MUST BE FOLLOWED UP WITHIN 48 HOURS BY A COMPLETED REFERRAL FORM UNLESS AGREED OTHERWISE.

Name and contact details of person making the referral			
Name:			
Name of agency/organisation:			
Address:			
Telephone Number:		Fax Number:	
Email Address:			
Date written referral is being made:			
Date telephone referral made (if applicable) and to whom:			
Relationship of person making the referral to the child/family:			

NAME(S) and DATE(S) OF BIRTH of the child(ren) being referred (please list here all children in the family):				
Child(ren)’s preferred language if not English speaking:				
Ethnic origin and Nationality if known:				
Details of wider social and professional network (e.g. significant family / friends, GP, health visitor, centres, professionals working with members of the household)				
Name	Role/ Relationship	Address	Telephone number	Email

Name of parent(s)/carer(s) with whom child(ren) live(s):

Parent(s)/Carer(s) preferred language if not English speaking:

Address:

Telephone number(s):

Any other relevant family details:

Why is a referral being made? What are the concerns? (Please be as specific as possible, giving dates, examples of incidents etc):

Is the referral for information only?

Is there evidence that any children in the family are being subject to significant harm?

If 'YES' please specify:

Actions taken by referring agency/involvement with the family:

Please outline your involvement with the child/family and any ongoing support that is being provided. Detail any past concerns or known involvement of statutory agencies. If a CAF or other assessment document has been completed please attach a copy to this referral.

What outcomes are anticipated by the referral?

Does the person with parental responsibility know that a referral to Children's Social Care has been made?

If 'No' please explain why:

If yes, does the person with parental responsibility consent for members of the family's network to be contacted to obtain further information?

Any other information that would be helpful in deciding the priority of the referral and/or understanding the actions Children's Social Care is being asked to take in respect of the child(ren) being referred?

Please e-mail this form to cscreferrals@hackney.gov.uk for the attention of the Referral Manager. If you need to send it to a secure email address please send to cscreferrals@hackney.gov.uk.cjism.net or to cscreferrals@hackney.gcsx.gov.uk

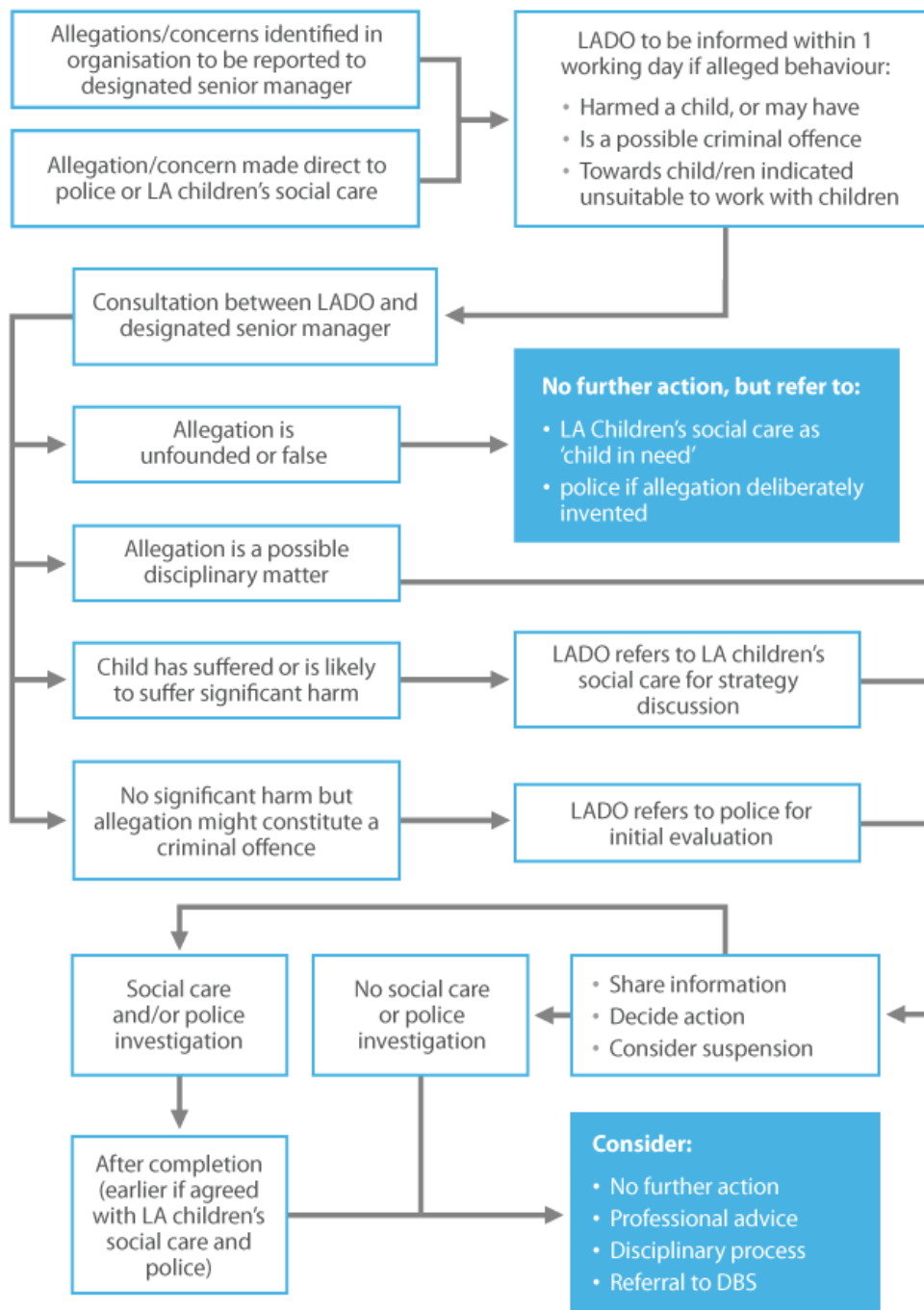
If you have difficulties sending this by email, please fax it to 020 8356 5516/7.

Should you need any assistance in completing this form or wish to follow up your referral please call the First Response Service on **020 8356 5500**.

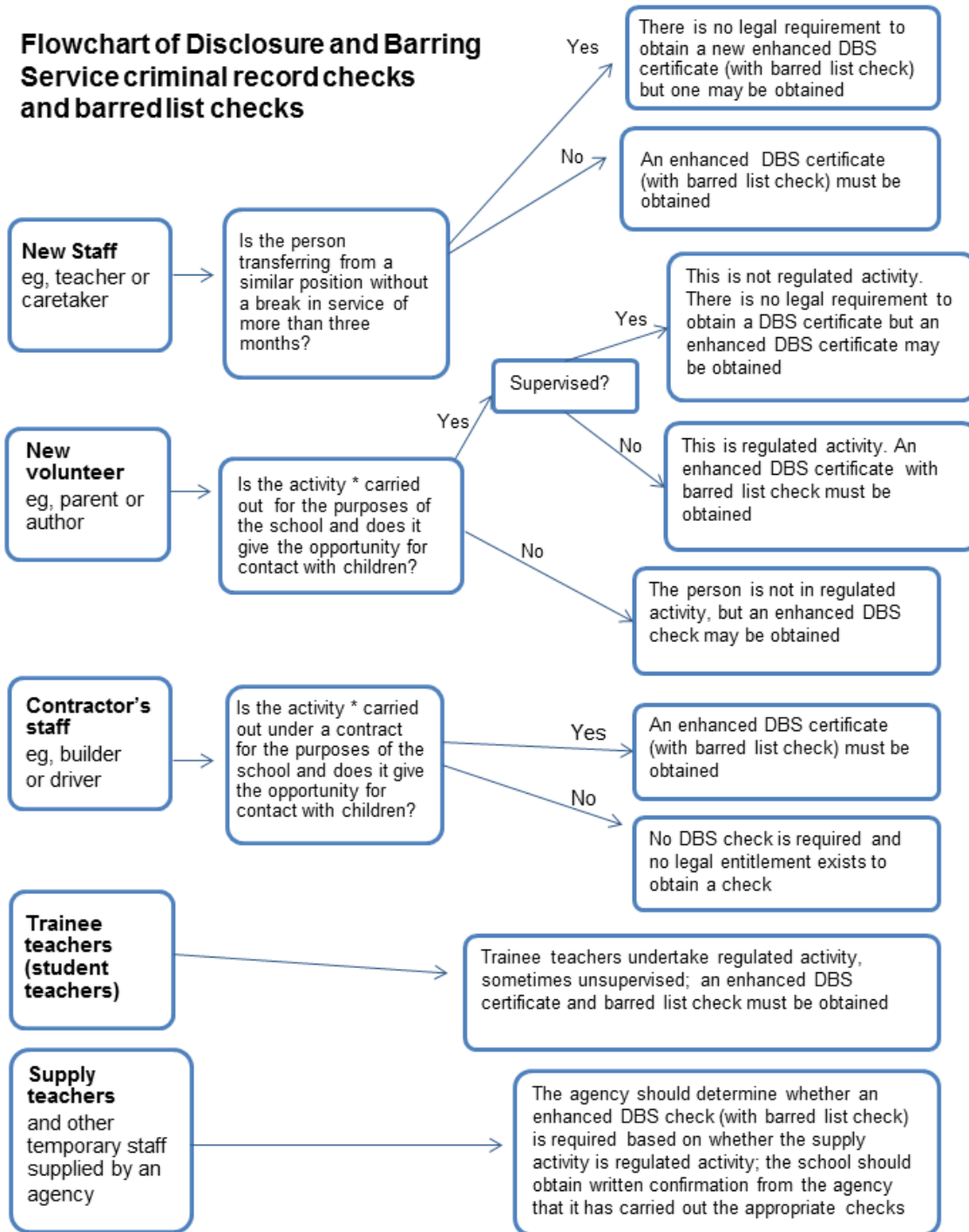
If your referral has not been acknowledged by Children's Social Care within three working days, please make contact to confirm it has been received.

Please ensure that you have sent a copy of this referral to the safeguarding children lead for your agency.

Allegations / Concerns Against Staff Child Protection Process



Flowchart of Disclosure and Barring Service criminal record checks and barred list checks



* Activities listed under the guidance's definition of regulated activity and which are carried out 'frequently'

Allegations / Concerns Against Staff Disciplinary / Suitability Process

