

The Avenue Pre Preparatory
School and Nursery

**CHILD PROTECTION (AND
SAFEGUARDING) POLICY**

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STATEMENT OF INTENT

The safety and well-being of every pupil, both in the EYFS and Key Stage 1, at The Avenue Nursery and Pre-Preparatory School (the School) is our highest priority. Our aim is to know and treat everyone as an individual and to provide a secure and caring environment enabling every pupil to learn in safety. We expect respect, good manners and fair play to be shown by everyone so that every pupil can develop his/her full potential and feel positive about him/herself as an individual. All pupils should care for and support each other.

All staff on the school premises, including temporary, peripatetic and self-employed staff, volunteers, and the School's Proprietorial Body have a full and active part to play in protecting our pupils from harm and have a duty to protect pupils from abuse and bullying and to actively promote their well-being. The child's welfare is our paramount concern.

This policy has been drawn up in accordance with the London Borough of Haringey Safeguarding Partnership (HSP) (Formerly the HSCB), guidance and is based upon the HSP specimen Policy Document. The school fully operates within the policies and guidance set by the HSP which are based on the pan-London model. Please see contact details below.

References within this document to "The Proprietor" refer to Cantabile Ltd which trades under the name of the Avenue Nursery and Pre-Preparatory School. "The Board of Directors" and "Proprietorial Body" refers to the Board of Directors of Cantabile Ltd.

Introduction

This policy aims to provide all members of staff, children and their families with a clear and secure framework for ensuring that all children in the school are protected from harm and their wellbeing is actively promoted at all times, both while at school and when off school premises on either School Trips or during the course of regular offsite activities such as swimming at Poolside Manor. It applies to both EYFS and Key Stage 1.

Every member of staff must read this Policy in conjunction with other policies which make up the School's comprehensive range of 'protection and safeguarding' expectations, details of which are given in Appendix 1. In addition, all members of staff will receive a copy of Part 1 and Annexe A of *Keeping Children Safe in Education (September 2020)* and will be expected to fully implement the requirements in their day to day practice.

Decisions to support any child in need – including those who might be possibly influenced by radicalisation - will be made in consultation with parents/carers. However, their consent may not be required for referral if there is a belief that the child is at risk of actual or likely significant harm and by informing parents this will place a child at greater risk of harm.

This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002, and in line with Government publications:

- Working Together to Safeguard Children March 2018 (WTTSC)
- Keeping Children Safe in Education September 2020 (KCSIE)
- Statutory framework for the EYFS

This policy must also be considered in the context of other key school policies including:

- Staff Code of conduct;
- Safer recruitment;
- Peer on peer abuse

- E safety and IT acceptable use;
- Whistleblowing;
- Complaints;
- Counter-bullying;
- Children missing education;
- Prevention of radicalization;
- Government guidance on the management of pandemics and implications for the school in reducing transmission of diseases. **N.B A separate ‘policy’ and actions is available and be fully enacted with regard to current virus issues (COVID – 19)**

Other policies are also relevant – please see Appendix 1

In addition, the School regularly consults with Haringey Children’s Services, Local Authority Designated Officer (LADO). The school will also contribute to any audits conducted by HSP, including attendance at HSP training meetings.

N.B *Haringey uses the pan-London safeguarding procedures and the school operates within these procedures.

Definitions, signs and indicators of harm to children are clearly set out in Appendix 10 of this policy.

ROLES AND RESPONSIBILITIES

The Proprietorial Body

The Proprietorial Body will ensure the requirements of KCSIE, WTTSC and HSP procedures are consistently met and implemented in the school and that all staff, volunteers, visitors and contractors are aware, and follow these procedures. The proprietorial body will seek to safeguard and promote the welfare of children and to work together with other agencies to ensure adequate arrangements within the School to identify, assess and support those children who are in need of additional help and support, or require protection in the case of significant harm, either actual or likely.

Senior members of staff are appointed as the School’s designated safeguarding lead (DSL) and deputy designated safeguarding lead (DDSL). The DSL and DDSL are also the designated leads for any matters relating to the promotion of child welfare and child protection in the Early Years Foundation Stage and for liaising with local children’s statutory agencies, as appropriate, regarding EYFS needs. DSL and DDSL are trained at the required intervals in accordance with KCSiE 2020.

The Proprietorial Body also designates the Head to liaise with the Designated Officer of the local authority (LADO) in situations where there are concerns about the conduct or behaviour of staff or volunteers towards children and related child protection matters. The role of the LADO is set out in Appendix 9.

The school will always act on the advice and guidance provided by the LADO and/or Children’s Services and/or the police where a criminal offence is thought to have occurred.

In order to ensure children are adequately protected, the Proprietorial Body will undertake that:

- There is a Child Protection policy together with other related policies as indicated above.
- A Safer Recruitment policy is drawn up and fully implemented in line with current legislation and statutory requirements
- that enhanced DBS checks and Disqualification from Management (S128) are in place for all Members of the Proprietorial Body.

- The school operates safer recruitment procedures by ensuring that there is at least one person on every recruitment panel that has completed Safer Recruitment training
- The school has procedures for dealing with allegations of abuse against staff and volunteers
- The School will make referral to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned. In the case of teachers a referral will also be made to the Teaching Regulation Agency (TRA)
- A senior leader has Lead Designated Child Protection Officer (DSL) responsibility and a second senior member of staff is appointed deputy Designated Child Protection Officer (DSL).
- On appointment, the DSLs undertake inter-agency training and also undertake DSL ‘new to role’ and an ‘update’ course as required or at least every 2 years.
- The names of the DSL and DDSL are clearly advertised in the School, together with details of how members of staff can contact Haringey Children’s Services or Designated Officer (LADO) if needed.
- The Head is nominated to liaise with the LA on Child Protection issues and in the event of an allegation of abuse made against the Principal.
- All staff are required to read Part 1 and Annexe A of KCSIE September 2020, and the Staff Code of Conduct.
- The staff are required to complete the Staff Policy Acknowledgement Form to confirm that they have read the school’s Policies and related guidance which together form the Safeguarding Procedures.
- The name of the schools DSL and DDSL together with contact details for Haringey Designated Officer (LADO) is displayed on staff notice board.
- Allegations against anyone working at the school will always be referred to the Designated Officer (LADO) within one working day.
- The Child Protection Policy is reviewed on an annual basis by the DSL and the School’s Deputy DSL.
- Any weaknesses in Child Protection are remedied immediately

The school staff

Child Protection and Safeguarding are the responsibility of all members of staff.. Referrals would normally be made by the DSL and/or the DDSL however any member of staff can refer a child to Haringey Children’s Services or LADO if this is deemed necessary. Please see Appendix 10 for signs and categories of harm to children.

All members of staff have read and understand the Child Protection Policy and are aware of the indicators of child abuse and how to respond to concerns or disclosures of abuse by children.

Staff are also required to complete a “Staff Suitability Form” on an annual basis (as part of the annual review process) which, inter alia covers the “Disqualification by Association” Guidance 2014. There is an onus on all members of staff to notify the Head in the event of any changes in their circumstances whereby disqualification by association may become an issue.

Staff are duty bound to ensure the School provides a caring, positive safe and stimulating environment for all its children and in supporting all aspects of children and young people’s development and learning, and keeping children safe. In so doing, Staff are required to understand that emotional and social aspects of learning create a foundation for all academic learning. If a child has not been supported to understand, express and resolve their feelings, they may not have the ability to share with other children, resolve the small conflicts that arise in day-to-day classroom life, or concentrate on learning.

All staff will work to ensure that:

- Children and young people feel listened to, valued and respected
- Staff are aware of indicators of abuse and know how to share their concerns appropriately
- All paid and unpaid staff are subject to rigorous recruitment procedures

- All paid and unpaid staff are given appropriate support, supervision in accordance with the EYFS framework and training
- Children are provided with appropriate help and guidance to enable them to act in ways which will keep them safe from harm. The Staff play a crucial role in helping to identify welfare concerns, and indicators of possible abuse or neglect, at an early stage. The School is committed to referring those concerns via the Designated Child Protection Officers to the local authority children's services, contributing to the assessment of a child's needs and, where appropriate, to ongoing action to meet those needs.

It is the responsibility of all other members of staff to ensure that all safeguarding concerns, both minor and significant, are reported to the DSL without any undue delay and normally within 24 hours.

School staff are not empowered to investigate allegations of significant harm as this is the sole role of child protection agencies (Children's Services and/or the police)abuse. School staff should only collect facts and report to the DSAL as set out in this policy.

The DSL may have other information regarding a child, young person or their family of which other staff may not be aware. Minor concerns may take on greater significance within the wider context of knowledge of a child or family that the DSL may have.

THE DESIGNATED CHILD PROTECTION OFFICER *(A separate policy is available with further details of the DSL role and responsibilities)*

The Designated Child Protection officer (DSL) takes the lead responsibility for the promotion of child welfare and child protection, including providing support for other staff and information sharing with other agencies, developing policies and staff training. The DSL is a senior member of staff with the authority and seniority to carry out the functions of the role.

DSL Responsibilities

- With regard to pupil on pupil abuse – where there is reasonable cause to suspect that a child is suffering, or likely to suffer significant harm, any full abuse will be referred to local agencies. It will be an expectation that in the event of disclosures about pupil on pupil abuse that all children involved, whether perpetrator or victim are treated as being 'at risk'!
- Any child considered to be at risk of immediate or significant harm will be reported to the Children's Services immediately. A referral to the police will also be made if a criminal offence is suspected.
- Those who are 'in need' of additional support from one or more agencies will be recommended for inter-agency assessment using local processes. These include the Common Assessment Framework (CAF) and Team around the Child (TAC) approaches.
- In any case of suspected abuse, in the first instance discuss with the School's DSL and any relevant staff members and then refer to Children's Services. Where allegations involve a member of staff or other adults working at the school the Local Authority Designated Officer (LADO) will also be contacted..
- Report allegations made against members of staff immediately to the Head who will report to the LADO. In the case of an allegation being made against the Head, the report must go to the chair of the proprietorial body who will then be responsible for reporting to the LADO. The principle of upward reporting must prevail.
- Develop and update the Child Protection and other safeguarding policies in line with any changes to statutory guidance, ensuring that staff and children/families/parents are aware of them
- Provide support and advice to all members of staff within the setting regarding child protection concerns and their particular responsibilities
- Keep the staff informed about any issues that arise in the context of confidentiality agreements
- Ensure that cover is provided for the role when absent from the setting

- Keep written records of any Child Protection issues, separately from pupil records
- Ensure that the main pupil's file is marked to notify the existence of a child protection issue in the separate file
- Ensure that a pupil's child protection file is copied for the new educational establishment when a child moves educational settings, and that this file is transferred securely and separately from the main pupil file.
- Ensure that all staff receive appropriate Child Protection and Safeguarding Training, and maintain training records
- Ensure that any pupil currently with a child protection plan who is absent in the education setting without explanation for 2 days or more is referred to their key worker's Social Care team.
- Liaise with the London Borough of Haringey Children's Services, LADO and HSP and other agencies
- Providing an annual report for the Proprietorial Body detailing any changes to the Policy, training undertaken by the DSL and staff and the number of incidents/cases and the children on the child protection register (anonymised)

INDUCTION AND OTHER TRAINING

- All new members of staff and volunteers are provided with Child Protection awareness information on induction, including details of the School's Safeguarding Policies and the DSL and DDSL so that they know how to raise concerns and relevant reporting lines.
- New members of staff are also required to complete a "Staff Suitability Form" before they commence employment which, inter alia covers the "Disqualification by Association" Guidance 2014. They are also required to read Part 1 and Annex A of KCSIE – September 2020 and sign the form supplied confirming they have done so.
- All staff, including volunteers in Regulated Activities, are trained in Child Protection awareness in accordance with locally agreed procedures and the requirements of KCSIE September 2019.

EDUCATION OF CHILDREN

The Proprietorial Body considers how children may be taught about keeping safe. This will be part of a broad and balanced curriculum covering relevant issues through personal social health and economic education (PSHE). The school operates a clear behaviour, rewards and sanctions policy which is firmly based on encouraging mutual respect, tolerance and good behaviour within the school community.

TRANSPARENCY

Parents/guardians/carers have an important role in supporting the School. Copies of this policy, together with our other policies relating to issues of child protection are on our website, and we hope that parents and guardians will always feel able to take up any issues or worries that they may have with the school. We will never ignore an allegation of child abuse and will always take action with relevant agencies to ensure investigations of any concerns are thoroughly conducted. Open communications are essential. Our aim will be to work openly with parents and carers at all times, unless this conflicts with our duty to keep children safe, to promote their wellbeing or to protect them from significant harm.

BULLYING BY OTHER CHILDREN IN THE SCHOOL

Our school policy on counter-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms .eg. cyber, racist, homophobic and gender-related bullying. All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse. We keep a record of bullying incidents. The

school will apply the child protection/safeguarding policy to situations of child on child (peer) abuse and where there is reasonable reasons to believe that a child is suffering, or is likely to suffer significant harm as the result of bullying. In these situations, both the alleged victim and alleged perpetrator will be treated as being in need of help and support including referral, as necessary, to children's services of the local authority. The school recognises the serious implications of peer on peer abuse both for the alleged victim(s) as well as the alleged perpetrator(s). Staff are fully briefed on the context of peer on peer abuse and the steps to take in the event of this occurring. Please see linked policy. The school is also aware of emerging issues which may be regarded as being abusive as set out in Annex 1 of KCSiE 2020.

SAFE PRACTICE

SAFER RECRUITMENT

Safer Recruitment processes aim to:

- Deter potential abusers by setting high standards of practice and recruitment.
- Reject inappropriate candidates at the application and interview stages
- Prevent abuse to children by developing robust policies and agreeing on safe practice

Keeping children safe in Education September 2020 provides the framework for Safer Recruitment processes in education settings. Refer to the School's Safer Recruitment Policy for details of the School's procedures for recruiting staff. In summary, the processes followed are as follows

- Advertising the post(s)
- Completion and submission of Application Form, CV and reference details
- Clear job description
- Candidate information pack
- Invitation to 1st Interview, DBS requested and if none, DBS process commenced
- Shortlisting
- References taken up before interview
- Checking qualifications against the essential qualification requirements set out in job specifications
- 2nd Interview
- Offer of appointment
- Pre commencement induction

At least one member of the recruitment planning has attended Safer Recruitment training

INTIMATE CARE

Staff who administer first aid should ensure wherever possible that another adult or other pupils are present. The pupil's dignity must always be considered and where contact of a more intimate nature is required (e.g. assisting with toileting or the removal of wet/soiled clothing), another member of staff should be in the vicinity and must be made aware of the task being undertaken. Regular requirements of an intimate nature should be planned for.

INTERNET SAFETY AND USE OF DIGITAL EQUIPMENT AND DEVICES

The school has a separate policy for internet safety and the use of digital equipment within the school. Please refer to this policy, the Staff Code of Conduct and disciplinary processes. No personal camera equipment or mobile phones are permitted for use in the EYFS and nursery. School camera equipment can be used under authorised conditions and in accordance with the strict protocols laid down in the code of conduct for staff.

PHYSICAL EDUCATION AND OTHER SKILLS COACHING

Some staff are likely to come into physical contact with pupils from time to time in the course of their duties when participating in games, demonstrating an exercise or the use of equipment. Staff must be aware of the limits within which such contact should properly take place and of the possibility of misinterpretation. Where it is anticipated that a pupil might be prone to misinterpret any such contact, alternatives should be considered, perhaps involving another member of staff or a less vulnerable pupil in the demonstration.

VISITORS

No visitors, including tradespeople, will be allowed to enter school premises unaccompanied when children are present. Staff must be alert to strangers frequently waiting outside the School with no apparent purpose and take steps to report any concerns to the DSL.

COLLECTION OF THE CHILDREN

Children should not be collected by people other than their parents unless permission (either verbal or written) has been received in advance. If the person concerned is not known to the School staff, a password is agreed with the parents, which must be given before the child is allowed off school premises. See separate school policy.

UNCOLLECTED CHILDREN

If a child is not collected after a session the procedure set out in the Uncollected Children Policy is to be followed, namely:

- If a child is not collected within 15 minutes of the agreed collection time, the Principal will be alerted and arrangements will be made to contact number(s) for the person who has been specified as responsible for picking up the child that day. If there is no answer every effort will be made to call the parents and the emergency contacts for the child. During this time, the child will be safely looked after in the school by a member of staff.
- If it proves impossible to contact any persons named on the Registration and Consent Form, arrangements will be made by the Principal to safely care for the child within school premises pending contact with parents or named person. In the absence of the Principal a senior member of staff will be nominated to ensure these procedures are fully implemented.
- The Principal or senior member of school staff will continue to make telephone calls to the child's parents, carers and emergency contact named on the Registration and Consent Form. Children's services of the local authority will be informed if parents or carers are unable to be contacted after 3 hours. The school will then act on the advice provided. We undertake to look after the child safely throughout the time that he or she remains under our care.

SUPPORTING SCHOOL PROVISION

Many other aspects of school provision support the aims of this policy. Schools play an important role in making children and young people aware both of behaviour towards them that is not acceptable, and of how they can help keep themselves safe.

The non-statutory framework for personal, social health and citizenship education (PSHCE) provides opportunities for children and young people to learn about keeping safe. PSHCE curriculum materials provide resources that enable the school to tackle issues regarding healthy relationships, including bullying. Discussions about personal safety and keeping safe can reinforce the message that any kind of violence is unacceptable and let children know that it is acceptable to talk about their own problems to staff.

USE OF FORCE, RESTRAINT AND POSITIVE HANDLING

The law forbids a teacher or other members of staff from using any degree of physical contact that is deliberately intended to punish a pupil, or that is primarily intended to cause pain or injury or humiliation. Teachers at the school are allowed to use reasonable force to control or restrain pupils under certain circumstances. In some circumstances, teachers and authorised members of staff can restrain pupils in order to protect them and others. Such events will be recorded and signed by a witness.

Staff who are likely to need to use physical intervention will be appropriately trained in the *Positive Options* technique. We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.

We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.

Any concerns or allegations that a member of staff may have acted inappropriately should be brought to the Principal immediately, in confidence. The Principal, in turn, will contact the Local Authority Designated Officer (LADO).

STAFF CONDUCT

In order to protect children, young people and members of staff, we expect staff to follow our Staff Code of Conduct. This covers the use of appropriate boundaries, social contact outside the setting (including on social networking sites), the receiving and giving of gifts and favouritism, and the safe use of technology.

SUPPORTING STAFF

We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting. We will support such staff by providing an opportunity to talk through their anxieties with the DSLs and to seek further support as appropriate

ALLEGATIONS AGAINST STAFF

All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults. All Staff should be aware of the school's own Behaviour Management policy. Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at induction.

Allegations of abuse can be made by children and young people and they can be made by other concerned adults. All allegations against staff or volunteers should be immediately brought to the attention of the Principal. If an allegation is made against the Head this must be brought to the attention of the Principal. If an allegation is made against the Principal, this must be brought to the attention of a designated member of the Advisory Body to the School who will then be responsible for contacting the LADO.

In all cases, the Local Authority Designated Officer (LADO), who is one of the Child Protection Advisers, must be notified.

The Principal/Head should take the following actions:

- Ensure that the child reporting the allegation is safe and away from the member of staff against whom the allegation is made
- Make a referral to the Children's Service, if appropriate
- Contact the LADO in Haringey immediately or within one working day.
- Contact the parents/carers of the child, following advice from the LADO
- Suspend the member of staff or review his/her working arrangements, pending the investigation, following advice from the LADO
- Attend strategy meetings convened by the LADO and act upon the decisions made at these meetings

Suspension should be considered when:

- There is a cause to suspect a child is at risk of significant harm or
- The allegation warrants investigation by the police or
- The allegation is so serious that it might be grounds for dismissal

([London Child Protection Procedures](#) section 15.2.13)

Any disciplinary investigation should be carried out once the child protection investigation has been completed.

WHISTLEBLOWING

In line with the School's Whistle Blowing Policy all staff and volunteers should feel confident in reporting concerns about poor or unsafe practice or potential failures in the school's safeguarding regime. Staff should refer to the Whistle Blowing Policy for details on this process.

If a teacher or member of staff has concerns about the behaviour of another member of staff towards a pupil, he or she should report it at once to the DSL (or to the proprietor). Any concern will be thoroughly investigated under the school's whistle-blowing procedures. Where there are allegations of criminal activity, the statutory authorities will always be informed. Wherever possible, and subject to the rights of the pupil, the member of staff concerned will be informed of the outcome of the investigation. No one who reports a genuine concern in good faith needs to fear retribution. Under the *Public Interest Disclosure Act 1998* the member of staff may be entitled to raise a concern directly with an external body where the circumstances justify it.

Staff should also feel able to raise concerns relating to any perceived failures in the school's safeguarding processes through the school's Whistleblowing procedures.

Further details can be found in the school's Whistleblowing Policy.

If a member of staff feels unable to raise concerns, or feels that a genuine concern is not being addressed, the/she may also wish to follow other whistleblowing channels including the NSPCC Whistleblowing helpline (0800 028 0285).

DUTY TO REPORT TO OTHER BODIES

The School will report to the DBS within one month of leaving the Avenue Nursery and Pre-Preparatory School any person (whether employed, contracted, a volunteer or student) whose services are no longer used because he/she is considered unsuitable to work with children. The School recognises that failure to make a report constitutes an offence and as a consequence could lead to it being removed from the Register of Independent Schools.

Ceasing to use a person's services includes the definitions contained in paragraph 69 of Part 3 – Welfare, Health and Safety of Pupils, Regulatory Requirements September 2014.

The School will make a report to the Teaching Regulation Agency (TRA) in the event that a teacher has been dismissed (or would have been dismissed if he/she had not resigned) and a prohibition order may be appropriate. Instance of when such an order may be appropriate will include:

- unacceptable professional conduct
- conduct that may bring the profession into disrepute
- A conviction at any time for a relevant offence

Further guidance will be sought as necessary from the TRA website.

A referral to the DBS and the TRA as required. A dismissal requires a referral to the DBS and the TRA.

CHILD PROTECTION TRAINING

New members of staff (including volunteers) are provided with Induction training which always includes Child Protection and safeguarding. They are required to read and agree to the School's Child Protection policy and to complete and return the "Staff Acknowledgement form". The designated members of staff will undertake multi-agency training, in line with locally agreed procedures, at least every two years.

The School Office will keep records of all child protection training. A safeguarding and child protection agenda item will be regularly included in staff meetings.

IMPLEMENTATION & DISSEMINATION STRATEGIES

It is important for families to be aware of actions that the School may take if there are any concerns for a child or a young person's safety, and for them to understand that they might not be consulted before action is taken if it is suspected a child is suffering, or likely to suffer, significant harm. Knowing about child protection procedures ahead of time helps parents to engage better in the process. All new parents/carers joining the School will be encouraged to read the policy (and to return to the School Office the Parent/Carer acknowledgement form) before their child commences at the School.

PREVENTION

We recognise that the school plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults, supportive friends and an ethos of protection.

The school community will therefore:

- Work to establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to.

- include regular consultation with children e.g. through safety questionnaires, participation in anti-bullying week, asking children to report whether they have had happy/sad lunchtimes/playtimes. Refer to the PSHE Curriculum.
- Ensure that all children know there is an adult in the school whom they can approach if they are worried or in difficulty.
- Include safeguarding across the curriculum, including PSHE, opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help. In particular this will include anti-bullying work, e-safety, road safety training.
- Ensure all staff are aware of school guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks.

REVIEW OF THE CHILD PROTECTION POLICY

The Child Protection Policy will be regularly reviewed and at least annually. If any deficiencies or weaknesses in the School's Child Protection arrangements are identified either during an annual review or otherwise (e.g. as a result of staff training or through discussion with other practitioners), these will be corrected immediately.

The Proprietor will approve the annual review of this policy which will be carried out by the DSL. The Annual Review will include the Policy, Procedures and the efficiency with which they have been carried out. The responsibility for the annual review cannot be delegated.

Appendix 1: Related Policies

This policy forms part of the School's Safeguarding Policies and Procedures and is to be considered in conjunction with, inter alia, the following:

- Anti Bullying
- Attendance
- Behaviour Management
- Code of Conduct for Staff
- Child Protection
- Collection of Children
- Educational Trips
- Fire Precautions
- First Aid
- Golden Rules
- Health and Safety
- Intimate Care
- Missing Child
- Photography
- Peer on peer abuse
- Preventing radicalisation
- PSHE
- Risk Assessment for Regular Offsite Visits
- Risk Assessment for School Buildings and Grounds
- Safer Recruiting – Staff
- Safer Recruiting – Volunteers etc
- Uncollected Children
- Whistleblowing Policy
- Guidance on the management of pandemics (COVID – 19) in accordance with government guidance

Appendix 2: Recognising signs of child abuse

In the Children Acts 1989 and 2004, a **child** is anyone who has not yet reached their 18th birthday. Safeguarding and promoting the welfare of children is defined in Working Together to Safeguard Children 2018 as:

- protecting children from maltreatment;
- preventing impairment of children's health or development;
- ensuring that children are growing up in circumstances consistent with the provision of safe and effective care;
- undertaking that role so as to enable those children to have optimum life chances and to enter adulthood successfully.

Main Categories of Abuse:

- Physical Abuse
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse
- Neglect

Staff should be aware that there are other forms of harm that may affect children and these are listed in Annex A of KCSiE 2020. The list is not exhaustive but illustrative of the nature of child abuse, neglect and exploitation and their interaction with regard to a child's wellbeing and need for protection.

Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness
- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour
- Child Sexual Exploitation.

Significant harm is defined as "a child's health and/or development is being avoidably prevented or neglected or the child is being ill treated". Where significant harm, actual or likely, is thought to exist, action must be taken immediately to report the concerns to the DSL or DDSL in accordance with this policy.

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

Must be regarded as indicators of the possibility of significant harm

Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)

May require consultation with and / or referral to Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the **child** may:

- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development.

The **parent or carer** may:

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits
- Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents/carers are uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a "cry for help" and if ignored could lead to a more serious injury)
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

Bruising

Children can have accidental bruising, but the following must be considered as non accidental unless there is evidence or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area
- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation
- Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or no attachment
- Indiscriminate attachment or failure to attach
- Aggressive behaviour towards others
- Scapegoated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self esteem and lack of confidence
- Withdrawn or seen as a “loner” – difficulty relating to others

Recognising Signs of Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate to the child’s age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self mutilation and suicide attempts
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is not disclosed
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Sexual Abuse by Young People

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. it may also be that the behaviour is “acting out” which may derive from other sexual situations to which the child or young person has been exposed.

If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour. Where necessary, the school will liaise with Children’s Services to obtain advice, help and support in accordance with children in need and family support strategies.

Abusive sexual activity includes any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base. Special attention should be given to the use of technology including IT systems and cameras. (Please see IT Acceptable Use procedures).

Assessment

In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

Equality – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies

Consent – agreement including all the following:

- Understanding that is proposed based on age, maturity, development level, functioning and experience
- Knowledge of society’s standards for what is being proposed
- Awareness of potential consequences and alternatives
- Assumption that agreements or disagreements will be respected equally
- Voluntary decision
- Mental competence

Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide.

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
- A child seen to be listless, apathetic and unresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Child Sexual Exploitation

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- 'Upskirting' (misuse of phones and cameras to look up girl's skirts)
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Appendix 3: Other aspects

FORCED MARRIAGE (FM)

This is an entirely separate issue from arranged marriage. It is a human rights abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. Never attempt to intervene directly as a school or through a third party.

FEMALE GENITAL MUTILATION (FGM)

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM. The School will notify the Police immediately if any instance of FGM is suspected or discovered amongst its female pupils in accordance with statutory guidance. All staff are legally and duty bound to report any actual or suspected incidence of FGM.

What is FGM?

It involves procedures that intentionally alter or injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation - entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl – social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable

- Mistakenly believed to make childbirth easier

Is FGM legal?

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** in most countries including the UK.

Circumstance and occurrences that may point to FGM happening

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinary tract infection
- Disclosure

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action **without delay**.

Appendix 4: Guide for Staff - Child Protection Procedures

- **You have a concern about a child's wellbeing**, based on:
 - Something the child /parent has told you
 - Something you have noticed about the child's behaviour, health, or appearance
 - Something another professional said or did
- **Inform the DSL immediately**. Even if you think your concern is minor, the DSL may have more information that, together with what you know, represents a more serious worry about a child. It is never your decision alone how to respond to concerns – but it is always your responsibility to share concerns, no matter how small.
- If the DSL is not available, inform the Deputy DSL. If neither is available, speak to the Head or another senior member of staff. If this is not possible the person concerned should contact the LADO independently.
- If you have heard a disclosure of abuse or you are talking with a child about your concerns **do not** promise to keep what s/he tells you secret. ...for example, 'I am worried about your bruise and I need to tell Mrs Smith so that she can help us think about how to keep you safe'. It should be remembered that the school is not empowered to conduct an investigation as this remains the sole duty of Children's Services and/or the Police. The school's role is to ascertain the basic facts so that these can be passed to Children's Services who are empowered to investigate in accordance with Section 47 Children Act 1989.
- **The Child Protection Team will decide whether it is necessary to find out more** by asking the child or their parent to clarify the concerns. Care will be taken to use open questions: beginning with words like: 'how', 'why', 'where', 'when', 'who'?
- **The DSL will let the child/parent know what is planned next**
- **A written record will be made** as soon as possible after the event, noting:
 - Name of child
 - Date, time and place
 - Who else was present
 - What was said / What happened / What was noticed eg speech, behaviour, mood, drawings, games or appearance
 - If child or parent spoke, record their words rather than your interpretation
 - Analysis of what was observed & why it is a cause for concern
- The DSL may take advice from the First Response Service of the LB Haringey Children's Services
- The DSL makes the **referral to the First Response Service**. The referral will note all previous intervention by the school with the child, any relevant history relating to the child, their siblings or the family.
- The **DSL shares information with other relevant professionals**, recording reasons for sharing information and ensuring that they are aware of what action the other professionals will take as a result of information shared

- The **DSL informs parents that they have made a CP referral**, if the parent does not already know, and if there is no reason not to let them know. The First Response Service may suggest to delay informing the parent in cases of suspected sexual abuse, or where informing the parent might put the child at further risk, to prevent the child being harmed or intimidated (and retracting their disclosure) ...or in cases of suspected Fabricated or Induced Illness by proxy, the parent is not informed that this is being considered
- The **DSL remains in close communication with other professionals around the child / young person** and with the family, in order to share any updates about the child / young person

If a child protection investigation is pursued, the DSL and other key school staff will:

- Work closely and collaboratively with all professionals involved in the investigation, to keep the child / young person safe
- Attend a child protection conference when invited and provide updated information about the child
- Attend any subsequent child protection review conferences.
- Attend core group meetings and take an active role in the implementation of the protection plan.

Appendix 5: Key Contacts in Child Protection

Alcohol & Drug Support

- ★ In-Volve Haringey : 020 8493 8525
- ★ Narcotics Anonymous : 0300 999 1212
- ★ Alcoholics Anonymous : 0845 769 7555
- ★ Al Anon & Al A Teen: 020 7403 0888

Children's Social Care

- ★ Early Help Screening Team 020 9489 4470 / 5673 / 5649
- ★ First Response Service: 020 8489 4592 / 5652 / 5762 / 2110
- ★ Emergency Out of Hours Duty Team 020 8348 3148

LADO

shauna.mcallister@Haringey.gov.uk

LADO@Haringey.gov.uk

020 8489 2968/1186

★

5pm - 9am weekdays and weekends:

- ★ Child Protection Advisors: 020 8489 5426 / 1449 / 5462 / 1061

- ★ Child Protection Advisors- allegations against professionals Tel: 0208 489 1406
- ★ Local Authority Designated Officer (LADO): 020 8489 1406
- ★ Private Fostering: 0800 634 0480
- ★ Disabled Children's Team : 020 8489 3672 / 3675
- ★ Children in Care Services:
 - Looked After Children (Fostering): 020 8489 3754
 - Adoption Service: 0208 489 4610
 - Leaving care: 020 8489 5800
 - Education for Children in Care: 020 8489 3767

Department of Education

- ★ Non Emergency helpline for staff and governors: 020 7340 7264
- ★ Counter extremism@education.gsi.gov.uk

Domestic Violence Support

- ★ National Domestic Violence Helpline : 0808 2000 247 (24 hrs)
- ★ Haringey Police Community Safety Unit : 020 8345 1941
- ★ Haringey Victim Support : 020 8888 9878
- ★ Hearthstone - Haringey Domestic Violence Advice & Support Centre : 020 8888 5362

Monday to Friday 10am - 4pm

- ★ Emergencies: 999

Education Services

- ★ Education Dept: 020 8489 5046/2445
- ★ Admissions Team: 020 8489 3338
- ★ Education Welfare: 020 8489 3866
- ★ Behaviour Support: 020 8489 5021 / 5036
- ★ Special Educational Needs: 020 8489 1913
- ★ camillajacques@haringey.gov.uk

Haringey Safeguarding Children Partnership (HSP)

8th floor, River Park House,
225, High Road, London N22 8HQ

<https://haringeyscp.org.uk/>

020 8489 3145

First Response Service: 020 8489 4592 / 5652 / 5762

Mondays to Thursdays from 8.45am to 5pm Fridays from 8.45am to 4.45pm

Metropolitan Police

- ★ Child Abuse Investigation Team: 020 8345 2246
- ★ Control Room (Reporting Missing Children): 020 8345 1212
- ★ Emergencies: 999
- ★ Non emergency Police number: 101

NHS Haringey

- ★ Designated Nurse for Child Protection: 020 8442 5409
- ★ Designated Doctor for Child Protection: 020 7405 9200 ext 5137 or 07795 665 706
- ★ Named Nurse for Child Protection: 020 8489 3096 or 07970 269 539
- ★ Named Doctor for Child Protection: 020 8448 5540 or 07795 665 706

Youth Services

- ★ Tel: 020 8493 1000 / 1016

Young Carers Support

- ★ NCH Haringey Young Carers Project : 020 82117764

Referrals include the following information:

- ★ [Child's details](#)
- ★ [Referrer contact details](#)
- ★ [Reason for referral](#)
- ★ [Details of health workers](#)
- ★ [Details of education workers](#)
- ★ [Details of any voluntary workers](#)
- ★ [Details of any youth justice / police workers](#)

Ofsted 0300 123 1231

ISI 020 7600 0100

Safeguarding Acknowledgment Form

Staff Name in full			
Job Role			
<ul style="list-style-type: none"> ● I confirm that I have read the DfE Statutory Guidance, Keeping Children Safe in Education, Part 1 and Appendix A – further information, September 2019. ● I confirm that I have read all the schools policies (available in school office and on school website) and understand my role with regards to Child Protection at the Avenue Nursery and Pre Preparatory School. In particular, I have read and understand the following: <ul style="list-style-type: none"> ● School’s Child protection Policy ● Behaviour Management ● Health and Safety ● Counter Bullying 			
1. Who is the school’s DSL?			
2. Name 3 categories of child abuse			
3. What do you say if a child tells you something in confidence and asks you to keep it a secret?			
Signature		Date:	

For completion by the senior member of staff reviewing the above statement taking into consideration their understanding of the statement, policy and their role within the Avenue Nursery and Pre Preparatory School

I am satisfied that the above member of staff understands the KCSIE statement and CP policy

Signature		Date	
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Job title	
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Appendix 7: Parent / Carer information

Safeguarding

The safety and well-being of every pupil at The Avenue Nursery and Pre-Preparatory School is our highest priority and this is reflected in the School's Child Protection Policy. The staff will do everything they can to make sure that all the children in the school are free from harm, either in school or when they are away from school.

To help staff keep your child safe every member of staff has training in child protection at least annually in order to keep up to date with any important changes and the school has a Designated Child Protection Officer who will be the first point of contact for any concerns about children in the school and who will liaise with relevant external agencies regarding any identified risks to children.

In addition to the Child Protection Policy, the School has the following Policies which together constitute our Safeguarding Policies and Procedures:

Anti Bullying	Behaviour Management	Collection of Children	Disability	First Aid
Golden Rules	Health and Safety	Intimate Care	Missing Child	Photography
Risk Assessments	Staff Disciplinary	Uncollected Children	Safer Recruitment	

The School will inform the Local Authority if there are any significant reasons to be worried about your child's wellbeing. The School may become worried about a child if they notice behaviour and mood changes, physical marks, worrying play or social behaviour, or if a family member or a child says something that makes the School think that the child might be at risk of harm. The School will usually inform you that they are making a child protection referral, unless to do so would place a child at greater risk of harm.

The Child Protection Policy is available to read in the "About Us" area on the School website. Both parents are asked to complete and sign this form and return it to the School Office as soon as possible.

PARENTAL CONSENT for:

We the undersigned have read the Child Protection Policy and understand the actions that might be taken if there are any concerns about our child.

Signed (Mother)	<input type="text"/>	Date:	<input type="text"/>
Signed (Father)	<input type="text"/>	Date:	<input type="text"/>

Photography Taking and using images of children

The Avenue Nursery and Pre Preparatory School (the School) recognises the need to ensure the welfare and safety of all children. In accordance with our Child Protection policy we will not permit photographs, video or other images of children and young people to be taken without the consent of the parents/carers.

Photographs of the children engaged in their daily activities are regularly taken throughout the School. We use these for the Nursery and Reception children’s online learning journals and for displays in the School. We also use photographs to illustrate the School life on the website as we believe that the best ambassadors for the school are the children. We do not use the children’s names or surnames in the photograph captions, or include any personal information about the children concerned.

Other parents of children in the School may inadvertently take photographs of your child during School events such as the Nativity, Sports Day, School Picnic and School Plays. We ask all parents to confirm that such photographs taken at the School are not used inappropriately, for example, uploaded onto a social media site which is accessible to the general public

The School will take all steps to ensure these images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform the School immediately.

To comply with the Data Protection Act 2018, we need your permission before we can photograph or make any recordings of your child. Please answer the questions below, then sign and date the form where shown.

Parent / Guardian Safeguarding Acknowledgment

We the undersigned have read the Schools Photography Consent Policy (available to read in the “About Us” area on the School website) and give permission as indicated below and in accordance with the Data Protection Act 1998.

Please tick

Please answer the questions below in relation to:	Yes	No
1. May we photograph and or video and use your child’s image within the school?	<input type="checkbox"/>	<input type="checkbox"/>
2. May we use your child’s image on the School main website pages? Your child’s name will not be used.	<input type="checkbox"/>	<input type="checkbox"/>
3. May we use your child’s image within the News section within the Parent Portal on the school website? These will be relating to school trips and class activities? Your child’s name will not be used and this is only accessible to existing families.	<input type="checkbox"/>	<input type="checkbox"/>
4. May we record your child’s image and audio during school plays eg Nativity DVD which we may share or sell on to parents	<input type="checkbox"/>	<input type="checkbox"/>

Signed (Mother)

Date:

Signed (Father)

Date:

Appendix 9

The Role of the LADO (Local Authority Designated Officer)

The role of the LADO is set out in *Working Together to Safeguard Children (2018)* and is governed by the Authorities duties under section 11 of the Children Act 2004 and Pan London Inter-Agency Policy and Procedures. This guidance outlines procedures for managing allegations against people who work with children who are paid, unpaid, volunteers, casual, agency or anyone self employed.

The LADO must be contacted within one working day in respect of all cases in which it is alleged that a person who works with children has:

- behaved in a way that has harmed, or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- Hi behaved towards a child or children in a way that indicates they may pose a risk of harm to children.

There may be up to three strands in the consideration of an allegation:

- a police investigation of a possible criminal offence;
- enquiries and assessment by children's social care about whether a child is in need of protection or in need of services;
- consideration by an employer of disciplinary action in respect of the individual.

The LADO is responsible for:

- Providing advice, information and guidance to employers and voluntary organisations around allegations and concerns regarding paid and unpaid workers.
- Managing and overseeing individual cases from all partner agencies.
- Ensuring the child's voice is heard and that they are safeguarded.
- Ensuring there is a consistent, fair and thorough process for all adults working with children and young people against whom an allegation is made.
- Monitoring the progress of cases to ensure they are dealt with as quickly as possible.
- Recommending a referral and chairing the strategy meeting in cases where the allegation requires investigation by police and/or social care.

The LADO is involved from the initial phase of the allegation through to the conclusion of the case. The LADO is available to discuss any concerns and to assist the school in deciding whether there is a need to make a referral and/or take any immediate management action to protect a child.

Appendix 10 - Types and signs of abuse and neglect including possible indicators, which are identified in KCSIE (September 2018).

TYPES OF ABUSE AND NEGLECT INCLUDING SPECIFIC SAFEGUARDING ISSUES:

We are aware that abuse, neglect and safeguarding issue are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another and could include:

Abuse and Neglect; Neglect (Physical or Emotional); Physical Abuse; Emotional Abuse; Peer Abuse; Extremism/Radicalisation; Domestic Violence; Drug/Alcohol Abuse; Emotional Abuse; Abuse of Trust; Sexual Abuse; Children who Sexually Abuse; Witnessing Domestic Abuse or Violence; Child Sexual Exploitation (CSE); Child Exploitation and E-Safety; Pupil Sexual Exploitation; Pupil Exploitation and E-Safety; Female Genital Mutilation (FGM); Forced Marriages; Fabricated or Induced Illness; Faith Abuse; Safeguarding Disabled Children; Disability and Vulnerability; Honour-Based Violence Vulnerable Groups; Bullying including Cyber Bullying; Vulnerable Pupils; Children in Need; Child Missing Education (Children who run away or go missing); Child Missing from Home or Care; Missing Children and Adults Strategy; Young Carers; Cared for Children and Significant Harm; Gangs and Youth Violence; Gender-Based Violence/Violence Against Women and Girls (VAWG); Hate; Mental Health; Private Fostering; Preventing Radicalisation; Teenage Relationship Abuse; Sexting; 'Upskirting', Trafficking. Expert and professional organizations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example NSPCC offers information for schools and colleges on the TES website and also on its own website www.nspcc.org.uk/preventing-abuse/ and other government websites.

PHYSICAL ABUSE:

The nature of physical abuse: A form of abuse which 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. Most children collect cuts and bruises quite routinely as part of the rough and tumble of daily life. Clearly it is not necessary to be concerned about most of these minor injuries. But accidental injuries normally occur on the *bony prominences* e.g. shins. Injuries on the *soft* areas of the body are more likely to be inflicted intentionally. If a body map is to be used to record physical abuse, they should only be used to record observed injuries and no child should be asked to remove clothing by a member of staff of the school.

Indicators of physical abuse/factors that should increase concern include:

Multiple bruising or bruises and scratches/bilateral injuries (especially on the head and face including around the mouth); clusters of bruises – e.g. fingertip bruising (caused by being grasped); bruises around the neck and behind the ears – the most common abusive injuries are to the head;

- Marks indicating injury by an instrument – e.g. linear bruising (stick), parallel bruising (belt), marks of a buckle;
- Bite marks; deliberate burning may also be indicated by the pattern of an instrument or object - e.g. electric fire, cooker, cigarette; scalds with upward splash marks or *tide marks*; untreated injuries; injuries to genital areas;
- Recurrent injuries, burns or bald patches; having broken bones or unexplained bruising, burns or welts in different stages of healing; being unable to explain an injury, or providing explanations that are inconsistent, vague or unbelievable.

EMOTIONAL ABUSE:

Definition of emotional abuse: The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless 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. 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. This can also occur when a child is a young carer for a parent who is disabled, has mental health problems or misuses alcohol or drugs. It may involve seeing or hearing the ill treatment of another, for example where there is fighting or violence in the home. 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, although it may occur alone.

The nature of emotional abuse: Most harm is produced in *low warmth, high criticism* homes, not from single incidents. Emotional abuse is chronic and cumulative and has a long-term impact. Abuse and neglect have emotional effects although emotional abuse can occur by itself. Witnessing someone harming another person – as in domestic violence, can harm children. It is sometimes possible to spot emotionally abusive behaviour from parents and carers to their children, by the way that the adults are speaking to, or behaving towards children. An appropriate challenge or intervention could affect positive change and prevent more intensive work being carried out later on.

Indicators of Emotional Abuse: Developmental issues include delays in physical, mental and emotional development; poor school performance and speech disorders, particularly sudden disorders or changes.

Behavioural indicators of neglect include: Constant tiredness; frequent absence from school or lateness; missing medical appointments; becoming isolated among peers; being frequently unsupervised; stealing or scavenging, especially food and having destructive tendencies, poor relationships with peers; running away.

Behaviour: Acceptance of punishment which appears excessive; over-reaction to mistakes; continual self-deprecation (I'm stupid, ugly, worthless etc.); neurotic behaviour (such as rocking, hair-twisting, thumb sucking); self-mutilation; suicide attempts; drug/solvent abuse; running away; compulsive stealing, scavenging; acting out; poor trust in significant adults; regressive behaviour – e.g. wetting; eating disorders; destructive tendencies; neurotic behaviour; arriving early at school, leaving late

Social issues: withdrawal from physical contact or from social interaction; over-compliant behaviour or insecure, clinging behaviour; poor social relationships.

Emotional responses: extreme fear of new situations; inappropriate emotional responses to painful situations ("I deserve this"); fear of parents being contacted; self-disgust; unusually fearful with adults; lack of concentration, restlessness, aimlessness; extremes of passivity or aggression; excessive need for approval, attention and affection.

SEXUAL ABUSE:

The nature of sexual abuse: Sexual abuse is often perpetrated by people who are known and trusted by the child – e.g. relatives, family friends, neighbours, babysitters, and people working with the child in school, faith settings, clubs or activities. 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). Adult males do not solely perpetrate sexual abuse. Women can also commit acts of sexual abuse, as can other children.

Child Sexual Exploitation: *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.*

Some of the following signs may be indicators of sexual exploitation:

- Children who appear with unexplained gifts or new possessions; who associate with other young people involved in exploitation; have older boyfriends or girlfriends;
- Children who suffer from sexually transmitted infections or become pregnant; who suffer from changes in emotional well-being; children who misuse drugs and alcohol;
- Children who go missing for periods of time or regularly come home late; and regularly miss school or education or do not take part in education; staying away from certain people or avoiding being alone with someone; displaying sexual behaviour that is inappropriate for their age;
- Inappropriate masturbation or self-harm (including eating disorders) and an unwillingness to remove clothes when changing for PE etc.

Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including Cyber Bullying and grooming. It is also important to recognise that some young people who are being sexually exploited or abused do not exhibit any external signs of this abuse.

Characteristics of Child Sexual Exploitation and abuse: it is often planned and systematic – people do not sexually abuse children by accident, through sexual abuse can be opportunistic; grooming the child – people who abuse children take care to choose a vulnerable child and often spend time making them dependent; grooming the child’s environment – abusers try to ensure that potential adult protectors (parents and other carers especially) are not suspicious of their motives.

Indicators of sexual abuse: **Physical observations include** damage to genitalia, anus or mouth; sexually transmitted diseases; unexpected pregnancy, especially in very young girls; soreness in genital area, anus or mouth and other medical problems such as chronic itching; unexplained recurrent urinary tract infections and discharges or abdominal pain. The concerns listed are not exhaustive. Staff can and should also record and report other concerns about a child, such as general welfare concerns.

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. Far more children are registered to the category of neglect on Child Protection Plans than to the other categories. Neglect is a difficult form of abuse to recognise and is often seen as less serious than other categories. It is, however, very damaging: children who are neglected often develop more slowly than others and may find it hard to make friends and fit in with their peer group. Neglect is often noticed at a stage when it does not pose a risk to the child. The duty

to safeguard and promote the welfare of children would suggest that an appropriate intervention or conversation at this early stage could address the issue and prevent a child continuing to suffer until it reaches a point when they are at risk of harm or in significant need. Neglect is often linked to other forms of abuse, so any concerns school staff have should at least be discussed with the DSL.

Indicators of neglects: The following is a summary of some of the indicators that may suggest a child is being abused or is at risk of harm. It is important to recognise that indicators alone cannot confirm whether a child is being abused. Each child should be seen in the context of their family and wider community and a proper assessment carried out by appropriate persons. What is important to keep in mind is that if you feel unsure or concerned, do something about it. Don't keep it to yourself.

Physical indicators of neglect include: Constant hunger and stealing food; poor personal (including dental) hygiene – unkempt, dirty or smelly; being underweight; wearing dress unsuitable for weather; poor state of clothing; Illness or injury untreated and looking sad, false smiles.

Specific safeguarding issues: Our staff are of safeguarding issues - some of which are listed below. They are aware that behaviours linked to the likes of drug taking, alcohol abuse, truanting and sexting put children in danger. Our staff are aware safeguarding issues manifest themselves via peer on peer abuse. This is most likely to include, but not limited to: bullying (including Cyber Bullying), gender based violence/sexual assaults and sexting. Our staff are clear as to the school's policy and procedures with regards to peer on peer abuse.

FEMALE GENITAL MUTILATION (FGM): This 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.

Circumstances / symptoms that may point to FGM happening included:

- A child talking about getting ready for a special ceremony; a child's family taking a long trip abroad
- A child's family being one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan);
- Knowledge that a sibling has undergone FGM; a child talking about going abroad to be 'cut' or to prepare for marriage; Difficulty in walking, sitting or standing; spending lengthier time in the bathroom/toilet than usual;
- Unusual behaviour after a school absence/reluctance to undertake usual medical examinations and
- Asking for help, but not detailing the problem in full due to fear or embarrassment.

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 regulated health and social care professionals in England and Wales, 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. It will be rare for teachers to see visual evidence, and they should not be examining pupils, but the same definition of what is meant by "to discover that an act of FGM appears to have been carried out" is used for all professionals to whom this mandatory reporting duty applies.

Teachers **must** personally report to the Police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has a good reason not to, they should also still consider and discuss any such case with the school DSL and involve Children's Services as appropriate. The duty does not apply in relation to at risk or suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over. In these cases, teachers should follow local safeguarding procedures.

HONOUR-BASED VIOLENCE: So-called 'honour-based' violence (HBV) encompasses 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. All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt staff should speak to the designated safeguarding lead. 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.

Indicators of Honour-based violence: Guidance on the warning signs that FGM or forced marriage may be about to take place, or may have already taken place, can be found on pages 38-41 of the Multi agency statutory guidance on FGM (pages 59-61 focus on the role of schools and colleges) and pages 13-14 of the Multi-agency guidelines: Handling case of forced marriage.

Actions if HBV is suspected: If staff have a concern regarding a child that might be at risk of HBV they should activate local safeguarding procedures, using existing national and local protocols for multi agency liaison with Police and Children's Services.

In the social context of the school, it is normal to ask about a noticeable injury. The response to such an enquiry is generally light-hearted and detailed. So, most of all, concern should be increased when: the explanation given does not match the injury; the explanation uses words or phrases that do not match the vocabulary of the child (adults words); no explanation is forthcoming; the child (or the parent/carer) is secretive or evasive or the injury is accompanied by allegations of abuse or assault. **We become concerned if the child or young person** is reluctant to have parents/carers contacted; runs away or shows fear of going home; is aggressive towards themselves or others; flinches when approached or touched; is reluctant to undress to change clothing for sport; wears long sleeves during hot weather; is unnaturally compliant in the presence of parents/carers; has a fear of medical help or attention or admits to a punishment that appears excessive.

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. The Forced Marriage Unit has published Multi-agency guidelines, with pages 32-36 focusing on the role of schools and colleges. School and college staff can contact the Forced Marriage Unit if they need advice or information. Contact: 020 7008 0151 or email: fmu@fco.gov.uk.

DOMESTIC ABUSE:: The Home Office define domestic abuse as: *“Any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence and abuse between those aged 16 or over, who are or have been intimate partners or family members regardless of gender and sexuality”*.

Significant harm from domestic abuse can include: physical violence, emotional abuse, sexual abuse, and financial abuse. If a member of staff is concerned that domestic abuse is occurring within a family or relationship they should inform the DSL who will consider a referral to Surrey Children’s Services and/or the Police as necessary. In circumstances where there have been 3 known incidents of domestic abuse, a referral must be made to Surrey Children’s Services. In December 2015 a new criminal offence of coercive and controlling behaviour came into force in England and Wales. This means that repeated patterns of non-physical behaviour (emotional abuse and control) within relationships are now considered a criminal offence capable of prosecution. For the offence to apply, criteria must be met.

BULLYING and Peer on Peer abuse - Please also refer to our Anti-Bullying Policy, which sets out our procedures in order to prevent bullying and to deal with it if and when it occurs within the school. This may be defined as deliberate, repeated (systematic) aggressive verbal, psychological or physical conduct by an individual or group against another person or persons. Very often bullying is the act of oppressing or dominating by threat or force where the aggressor may persecute or tease physically or morally in order to frighten into action or inaction. Bullying can include:

- Physical: pushing, hitting, kicking, pinching etc.
- Verbal: name-calling, spreading rumours, constant teasing and sarcasm
- Emotional: tormenting, ridiculing, humiliating, ignoring
- Racial: taunts, graffiti and gestures; Religious / cultural
- Sexual, sexist or homophobic: unwanted physical contact or abusive comments
- Cyber-bullying: through social networking websites, mobile phones and text messages, photographs and email

Signs that may indicate bullying:

- Behavioural changes such as reduced concentration, becoming withdrawn, depressed, tearful, emotionally up and down, reluctance to go to school etc.; a marked drop off in performance at school
- Physical signs such as stomach aches, headaches, difficulties in sleeping, bingeing on food, cigarettes or alcohol and a shortage of money or frequent loss of possessions.

SELF-HARM AND SUICIDAL BEHAVIOUR: Self-harm can be deliberate with the aim of a child just causing themselves an injury, attempted suicide which does not result in end of life or a successful attempt to end life resulting in death. Majority of self-harmers keep it a secret that goes undiscovered, finding it is the only way to express their feelings. Children self-harm for many reasons including: being bullied both at school or online, mental health issues, eating disorders, domestic abuse, any type of child abuse, parental conflict and bereavement. The signs of the distress the child may be under can take many forms and can include:

- Cutting behaviours and self-poisoning, other forms of self-harm, such as burning, scalding, banging, hair pulling; not looking after their needs properly emotionally or physically;
- Direct injury such as scratching, cutting, burning, hitting yourself, swallowing or putting things inside;

- Staying in an abusive relationship; taking risks too easily; eating distress (anorexia and bulimia);
- Addiction for example, to alcohol or drugs and low self-esteem and expressions of hopelessness.

During a disclosure of self-harm staff should check whether the pupil has ingested anything or has anything on their person that could cause damage or harm. Any concerns from staff members should be referred to the DSL, as an early help assessment may need to be completed to involve services that can help, or in the case of significant harm a referral can be made to Children's Services.

RADICALISATION:

KCSIE define radicalisation as 'the process by which a person comes to support terrorism and forms of extremism. Extremism is vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.' There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The Internet and the use of social media in particular has become a major factor in the radicalisation of young people.

Reviewed October 2020

By Martin Ayres or Mary Fysh

Reviewed annually

