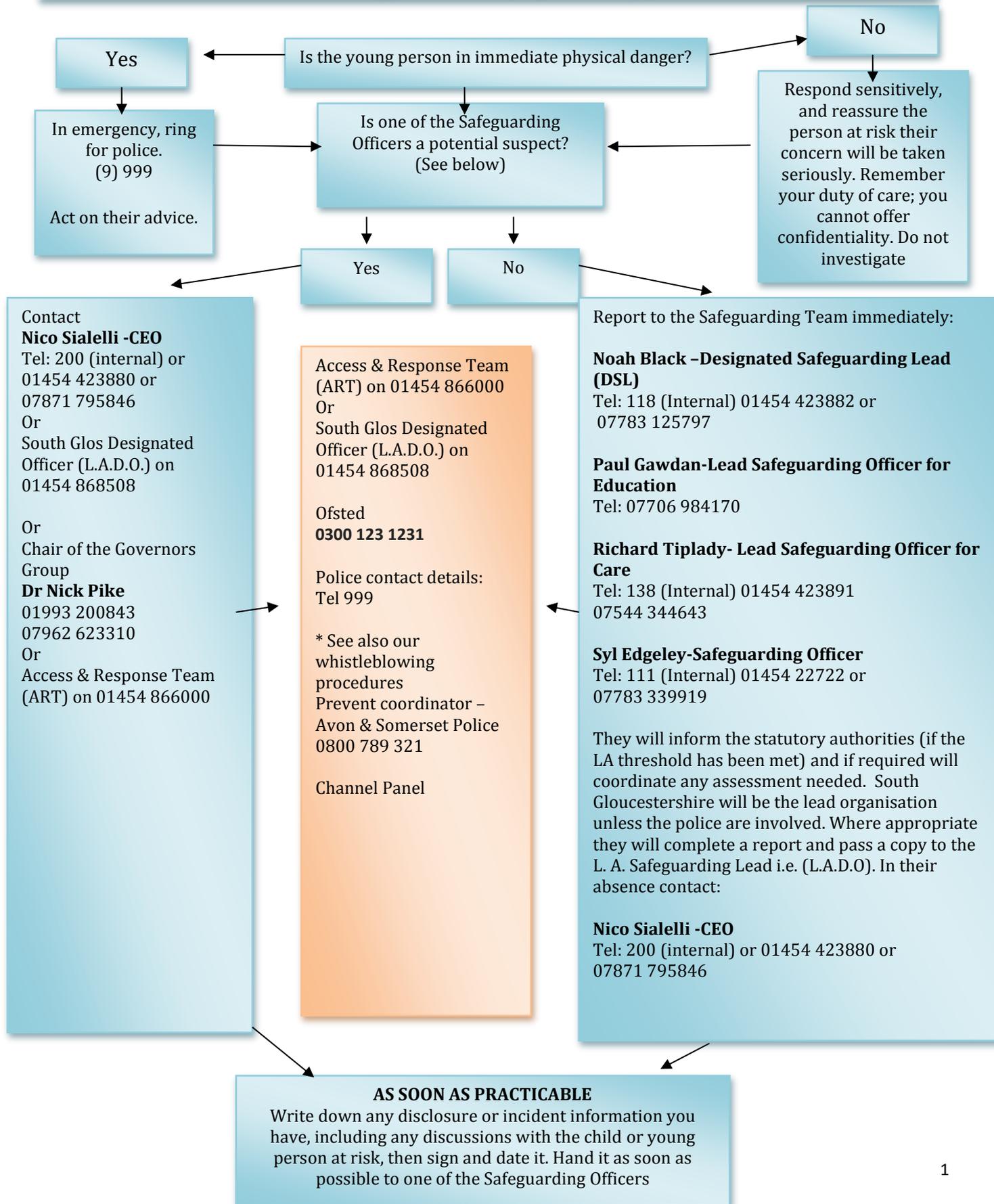


# SHEILING SCHOOL - CHILD PROTECTION POLICY

## REPORTING FLOW CHART

If you have concerns or information that a young person may be, has been, or is being abused, is accessing content related to illicit material, extremist views or putting themselves at risk of child sexual exploitation, it is imperative to speak directly to the most appropriate person according to this flow chart in order that a prompt decision can be made to ensure that no young person is at risk of harm or abuse. This applies 24 hours/day, seven days/week.



**IF THE PUPIL IS 18 YEARS OLD OR OVER  
PLEASE REFER TO THE ADULT PROTECTION POLICY**

## **1. PRINCIPLES**

The Sheiling School Thornbury recognises that the welfare of the child is paramount and takes seriously its responsibility to safeguard and promote the welfare of the children and young people in its care.

Child protection is one very important aspect of safeguarding. It refers to the activity which is undertaken to protect specific children who are suffering, or at risk of suffering, significant harm.

All children have the right to be safeguarded from harm or exploitation whatever their:

- Race, religion, first language or ethnicity
- Gender or sexuality
- Age
- Health or disability
- Political or immigration status

All staff in this school understand the importance of working in partnership with children, their parents and other agencies in order to promote children's welfare. The purpose of this policy is to

- Ensure protection for the children and young people at the Sheiling School
- Ensure staff and volunteers safeguard and promote the welfare of children
- Ensure staff understand that safeguarding is everyone's responsibility and that they each have statutory duties
- Promote a culture which makes this school a safe place to learn

This policy applies to all staff, volunteers, agency staff, Trustees and anyone working on behalf of the Sheiling School. We will endeavour to safeguard children and young people through our underpinning ethos by:

- Valuing them, respecting and listening to them
- Involving them in decisions which affect them
- Making sure all staff are aware of and committed to the child protection policy and procedure
- Sharing information about concerns with agencies who need to know, and involving children and their parents appropriately
- Recruiting staff and volunteers safely, ensuring all necessary checks are made.
- Adopting a code of conduct for all staff and volunteers – see below.
- Providing effective management through induction, support and regular training

- Offering a high quality, homely environment where all staff are informed of the signs and symptoms of abuse.
- Ensuring staff understand about ‘whistle blowing’ – See B11 “Whistle Blowing Policy”

The Governing Body will act in accordance with Section 157 of the Education Act 2002, the Children Act 1989 and the statutory guidance ‘Keeping children safe in education’ (DfE September 2016) to safeguard and promote the welfare of children. The Dr Nicholas Pike is the named Trustee to support the child protection systems in the school.

This child protection policy should be read in conjunction with the following documents:

- Keeping children safe in education (DfE September 2016)
- Working together to safeguard children (DfE 2015)
- What to do if you’re worried a child is being abused (DfE March 2015)
- South Gloucestershire safeguarding children board [procedures](#) (SGSCB)
- The Prevent duty: guidance for schools

The trustees will undertake an audit of child protection and safeguarding arrangements at least annually to monitor the effectiveness of the policy and procedures. The audit may be completed by the designated staff who will then provide relevant information and data to the trustees for consideration.

## 2. STATUTORY DUTIES

All staff have a statutory duty to:

- Report all child protection concerns – or concerns about a child’s welfare – in accordance with the school and SGSCB procedures
- Report directly to the police if they become aware that a girl has experienced Female Genital Mutilation (FGM)
- Recognise the signs and indicators of radicalisation and report any concern that a child or adult has been or is at risk of being radicalized through the appropriate channels
- Promote the fundamental British values of democracy, rule of law, liberty and respect & tolerance of different faiths and beliefs.

## 3. DEFINITIONS, SIGNS AND SYMPTOMS OF ABUSE

In addition to the information here, staff should ensure they are aware of and have read ‘[What to do if you’re worried a child is being abused](#)’ (DfE 2015) which has more examples of signs and indicators of abuse

### 3.1. Physical Abuse

#### Definition

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.

#### Signs & Indicators

### **a) Bruising**

Should always be considered in the context of the age and developmental level of the child. Most falls or accidents produce one bruise on a single surface, usually a bang protuberance. Bruising in accidents is usually on the front of the body as children generally fall forwards.

### **b) Bites**

These may leave clear impressions of teeth. Human bites are oval or crescent shaped. It can be difficult to distinguish the bite of an adult from that of a child over four years.

### **c) Burns and scalds**

Redness, rawness and blistering of skin can be caused by burns or scalds.

A child getting into water that is too hot of his/her own accord will struggle to get out again and there will be splash marks. Small round burns may be cigarette burns (but may be friction burns and accidental if along the bony protuberances of the spine).

### **d) Scars**

Children may have scars, but notice should be taken of:

- a. An exceptionally large number of scars of differing ages, especially if coupled with current bruising.
- b. Scars of unusual shape, e.g. round, from possible cigarette burns.
- c. Large scars from burns or lacerations that did not receive medical attention.

### **e) Fractures**

These should be suspected if there is pain, swelling or discolouration over a bone or joint, or if a child is reluctant to use a limb. The most common non-accidental fractures are to the long bones, i.e. arms and legs, and to the ribs.

- a. Skull fractures should always be suspected if there is bruising to the head of a young child, and paediatric advice should be sought. Unusual drowsiness, fits of vomiting may indicate intercranial injury.
- b. A skeletal survey examination looking for old or unrecognised fractures should always be considered and discussed with a senior doctor in the investigation of suspected abuse, particularly involving young children.

### **f) Injuries to the genital or rectal area**

Any reported injuries, discharge or discomfort of the genital or rectal area should be taken seriously and referred for medical examination. Non-medical staff should not, under any circumstances, undertake such an examination themselves.

### **g) Poisoning**

Poisoning of children may give rise to recurrent episodes of illness and sickness including vomiting, diarrhea, high temperature, skin rashes, paralysis, etc.

### **h) Internal injuries (abdomen, intracranial, chest)**

Violent shaking or physical abuse can cause haemorrhages or can rupture internal organs. There may be little evidence of external injury but the child may appear shocked, with pallor, sweating and a weak pulse.

**Expert advice must be sought in any case of suspected non-accidental injury. If a member of staff does have reason to suspect non-accidental injury, the pupil should be seen by the School's School and Home Nurse and follow the safeguarding reporting procedure.**

**The injury should be noted and recorded in full in the relevant reporting forms i.e. injury form, body map, etc.**

### **3.2. EMOTIONAL ABUSE**

#### **Definition**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), 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.

#### **Signs and Indicators**

- Excessively clingy or attention-seeking behaviour
- Increased challenging behaviour
- Any negative changes in behaviour
- Withdrawal
- Low esteem
- Apathy
- Constantly seeking to please
- Over familiarity
- Decreased concentration
- Decreased school performance and attendance
- Lack of appetite
- Weight loss/gain
- Increased sleep disturbance
- Onset of wetting or soiling
- Unusual behaviours
- Anxiety and fear

### **3.3. SEXUAL ABUSE**

## **Definition**

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.

## **Signs and Indicators**

Sexual abuse often presents in a disguised way. Although some children have obvious genital injuries, a sexually transmitted disease or are pregnant, relatively few show such clear signs. Recognition of sexual abuse generally follows either a direct statement from the child (or very occasionally from the abuser), or suspicion based on the child's circumstances, behaviour or physical symptoms or signs.

The following indicators should alert professionals to the possibility of sexual abuse. Suspicion increases when several features are present together.

### Physical Manifestations:

- a. Vaginal bleeding in pre-pubescent girls.
- b. Genital lacerations or bruising.
- c. Sexually transmitted diseases.
- d. Abnormal dilation of the vagina, urethra or anus
- e. Pregnancy, especially in younger girls

In a number of cases sexual abuse may come to light during the investigation of bruising or other physical injury.

### Emotional and behavioural manifestations:

- a. Frequent sexual references and 'over-sexualised' in talk, play or in drawings
- b. Sexually inappropriate behaviour towards adults or children
- c. Hinting at sexual activity or secrets through words or play
- d. Excessive awareness or knowledge of sexual matters inappropriate to age and development of child.

### Other indicators that may be associated with sexual abuse:

- a. Running away from home
- b. Suicide attempts and self-mutilation.

*As well as all the Signs and indicators listed under Emotional Abuse.*

Child sexual exploitation (CSE) is a form of child sexual abuse – please see our CSE policy statement for further information including possible signs and indicators.

### 3.4. NEGLECT

#### Definition

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 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.

#### Signs and Indicators

##### a) General Health

Poor growth in height and weight can be important signs of neglect, and all such children need medical assessment. Significant indicators are:

- Steals food or voracious when offered food or has an eating disorder due to food deprivation
- An unresponsive child with poor growth due to food deprivation or inadequate diet
- General vitamin/mineral deficiencies affecting milestones, bone growth, concentration and leading to minor to significant diseases like Rickets, etc.
- Lacks needed medical or dental care, immunizations, or glasses

##### b) Physical Appearance

Inadequate clothing and footwear (size and weather)

Poor general hygiene

Lack of intimate care which may lead to rashes and sores

##### c) Emotional signs

See Emotional Abuse.

#### General Points

- Some signs and symptoms of physical or sexual abuse may seem insignificant in themselves, but repeated injuries, even of a minor nature, may be symptomatic of more serious abuse.
- When considering an explanation for any injury which has occurred. Attention should be given to:
  - a. The feasibility of the explanation
  - b. Whether it is appropriate to the child's age and developmental level.

c. Whether it was dealt with suitably and promptly.

- NB Always pay attention to the pupil's account of the injury if appropriate and record this accurately. Do not use your own interpretation of what the child has said.
- All forms of abuse may cause the child to withdraw or show unexplained changes in behaviour and we have to bear in mind the possibility of one child abusing another. At the beginning and end of each half term each child should be checked, as appropriate to age and sensitivity, for any possible physical signs of abuse while washing or bathing. Such opportunities will also enable observation through the term.

**If you suspect abuse you should immediately follow the Reporting Flow Chart at the beginning of this policy.**

#### **4. PREVENTING RADICALISATION AND EXTREMISM**

At The Sheiling School, the Prevent Lead (Single Point of Contact or SPoC) is Paul Gawdan who is also the Lead Safeguarding Officer for Education. Any concerns that a child or young person may be at risk of being radicalised will be reported to the Prevent lead without delay, in the same way as any other safeguarding concern. Similarly, the Prevent lead will be informed immediately of any concern that a visiting adult is expressing or may hold extremist views.

Concerns or suspicions that a member of staff may hold extremist views or has been drawn into terrorism must be reported immediately to the Principal in line with our procedures for managing allegations against staff – see also the Code of Good Practice below.

In all cases where it is believed that a child, young person or adult has been or is at risk of being radicalised, the Prevent lead and/or Principal will contact the Prevent coordinator at Avon & Somerset Police Anti-terrorism team on 0800 789 321. If it is thought that a referral to Channel is appropriate, The Sheiling School will work closely with Channel multi-agency partners and the child or young person's family (or the adult for whom there are concerns) to facilitate this.

Background checks are undertaken for visiting speakers; for example, references from other schools that have used the same speaker, verification of their company website, checks of social media. These checks will be done wherever available and regardless of whether the speaker is visiting staff or students.

All staff and regular volunteers will be provided with induction and in-service training in basic awareness of Prevent / Channel and the signs / indicators of radicalisation. This may be face to face or online – see [http://course.ncalt.com/Channel\\_General\\_Awareness/01/index.html](http://course.ncalt.com/Channel_General_Awareness/01/index.html) or <https://www.foundationonline.org.uk/course/index.php?categoryid=14>

All staff are also required to read and understand 'Keeping children safe in education - part 1' which has more information about the duties of school staff to recognise the risks to learners and respond appropriately where there are concerns, including referral to the appropriate persons.

The CEO and Principal has attended more in depth training provided by consultant Abigail Clay. Governors / trustees will undertake online training in their strategic role and responsibilities under the Prevent duty .

Although learners at The Sheiling School are protected by filtering and monitoring software (see E-safety and AUP) whilst in our care, we recognise that they may become particularly vulnerable to grooming when they reach adulthood or are living away from our provision. We use a range of

opportunities in the curriculum, especially e-safety, PSHE, SRE, to promote children and young people's understanding of the fundamental British values, critical thinking skills and healthy relationships and to recognise and manage risky situations.

## 5. CODE OF GOOD PRACTICE FOR STAFF

The Sheiling School has adopted the national Guidance for Safe Working Practice (Safer Recruitment Consortium / DfE / NASS 2015) – see <http://www.saferrecruitmentconsortium.org/GSWP%20Oct%202015.pdf> All staff are provided with information at induction and refresher training on safe conduct and expected standards of behaviour.

### Key points given in training:

Ensure any physical contact between a staff member and a child or young person is a considered action, necessary and for the purposes of instruction or immediate care.

Avoid where possible being alone with a child or young person. Where circumstances make this unavoidable try to ensure that others are within earshot and preferably within vision.

Never make salacious, suggestive or demeaning remarks/gestures to/or in the presence of children and young people.

Share your concerns with a senior colleague if you suspect that a child or young person is becoming inappropriately attracted to you.

Seek advice and support in circumstances where your relationship with, or feelings towards, a child or young person are placing you at risk of unprofessional behaviour. You are urged to seek advice and support from a senior colleague or management.

From time to time personal circumstances arise which can adversely affect your professional relationships (e.g. bereavement, health or relationship breakdown). Should this be the case you are encouraged to seek advice and support from a senior colleague

Avoid any physical horseplay (e.g. wrestling or tickling) which any child, or young person, or staff, as visitors might misinterpret the situation, no matter how innocent or well-intentioned your actions might be.

Always respect a child's or young person's right to privacy.

**The use of restrictive physical intervention on a child must involve only the absolute minimum force necessary and is permissible only when you are certain that the child is at imminent risk of endangering themselves, yourself, others, or causing or about to serious damage to property. Where possible summon a colleague to witness the situation and give you appropriate help. (Follow guidance given in Promoting positive behaviour Policy)**

Always be fully informed of the School's policy and procedures for child protection.

## 6. REPORTING PROCEDURES

## **6.1. Early help / Procedure for expressing a concern.**

The earlier a concern is identified, the better the outcomes will be for the child. The Sheiling School is fully committed to ensuring that children receive a coordinated offer of early help when they or their family need support. We work closely with partner agencies in our locality and in the placing local authorities to involve other professionals before concerns can escalate.

If anyone has a concern about the welfare of a pupil, or of anything that may indirectly be detrimental to any individuals, this must be reported in line with the Sheiling School's procedures to enable us to intervene early. The staff member can express their concern to their line manager or Safeguarding Officer or can report this concern by completing a Concerns Form. All concerns should be passed on, no matter how small.

All concerns will be handled sensitively and kept securely in the Concerns file located in the Safeguarding Officer's office. A record will be kept of the nature of the concern, of the action(s) taken and the date the matter was resolved.

## **6.2. Procedure for Reporting Suspected Abuse**

All members of staff should be acquainted with the procedures for reporting suspected abuse. All members of staff should know who the School's Safeguarding Officer is and how to contact the South Glos Local Authority Designated Officer (L. A. D. O.) – See Flowchart.

Senior Staff should ask for support from the Safeguarding Officer if they feel they need extra information in this respect.

As part of the School's Child Protection training, with compulsory attendance for all members of staff, the following issues will be addressed:

- Signs/symptoms of abuse.
- Dynamics of Abuse.
- Definition of Abuse.
- Acceptable Measures of control and positive care practices.
- Procedure for reporting incidents of suspected abuse and the statutory framework for school staff
- Staff code of conduct / staff behaviour
- Whistleblowing

It will be the Safeguarding Officer's responsibility to organise and document attendance at such training sessions.

Where there are grounds for suspecting that any form of child abuse has occurred, either within the School grounds or during holidays or on outings (alleged/actual) then members of staff should immediately follow the Reporting Flow Chart.

In the event of allegations of abuse made against a member of staff or volunteer, the decision of whether to suspend will be discussed with the LADO. Suspension will not be an automatic response and all options to avoid suspensions will be considered prior to taking that step. These options include redeployment within the charity so the individual does not have direct contact with children. It is the responsibility of the Safeguarding Officer to document all further actions / decisions / consultations / investigations undertaken as a result of the alleged/actual incident.

While an investigation is taking place, it is the responsibility of the Safeguarding Officer to contribute to clear lines of communication, both within the School and to supportive agencies in the community. The suspended member(s) of staff will be allocated two people from the school with whom contact may be kept. All communication shall go through these two designated people. The decision as to when parents of pupils where abuse is suspected should be contacted should be made following consultation with Social Services. All of the child protection documentation should make it clear that all staff have the freedom to report directly to Social Services in the event that they feel that senior staff have not acted appropriately.

It is the responsibility of the CEO & Principal to inform the Trustees of any such investigations. Actions to be taken when any staff member is accused of serious professional misconduct are detailed in the Disciplinary Procedure.

### 6.3. Procedures for Responding to a Disclosure

Members of staff need to be aware how to respond and what to say when a child/young person discloses abuse.

Some possibilities are:

“I’m taking what you say very seriously” (better than “I believe you”)

“I’m glad you told me- you’re right to tell, it’s okay to tell”

“I’m sorry that it happened. It’s not your fault”

“I care and, if I have any worries about your safety I’ll get others to help you”

Let the pupil know what you are going to do in a way that is appropriate to their level of understanding and tell them what is likely to happen next. You may need to involve the Speech and Language Therapist.

Always finish on a positive note, praise the pupil for telling - try not to leave the pupil alone, offer if possible to talk again later.

No members of staff should interrogate or attempt to investigate. Rather encourage the child to say what they wish until enough information is gained to decide whether or not referral is appropriate. Even if this is not the case the conversation should be recorded. In order to gain the correct information from a pupil raising a concern, members of staff must ensure that any questions asked are open. Do not interrogate but employ open questions.

Only ask enough questions to gain very basic information - it will become someone else’s task to take this further.

Take allegations seriously and support - DO NOT interrogate!

Ask **WHEN**: e.g. “When did it happen?” NOT “Did it happen last night?”

Ask **WHERE**: e.g. “Where did it happen?” NOT “Did he/she come into your bedroom?”

Ask **WHO**: e.g. “Who did it?” NOT “Was it daddy/babysitter/John?”

Ask **WHAT**: e.g. “What happened?” NOT “Did such and such happen?”

Avoid HOW and WHY questions - these require a judgement by the young person and may also induce self-recrimination.

## 7. CONFIDENTIALITY

Because of the sensitivity around child protection issues, the school operates on the presumption that any information imparted in confidence will be treated in confidence. This is subject to three qualifications:

Any information imparted “in confidence” to a member of staff or to a person approached as an associate of the school, may be shared in confidence with a restricted number of professional

colleagues, if that person feels in need of support and guidance from them.

If serious concerns are raised about the safety or welfare of a pupil, the person approached is obliged, in terms of the School's Child Protection procedures, to pass that information on for consideration to the Lead Safeguarding Officers (LSO) or Safeguarding Officers (SO), who will decide whether it should be shared with parents and/or the appropriate authorities. In these circumstances, the person approached should not, except in an emergency, breach the confidence without letting the person who raises the concern know that he/she intends doing so.

The school will, of course, share information in the spirit of Working Together to Safeguard Children 2015, Keeping children safe in education 2016 and Information sharing; guidance for professionals.

## **8. PREVENTING ABUSE THROUGH THE CURRICULUM**

It is essential that children and young people are provided with the skills and knowledge, appropriate to their age and level of understanding, to keep themselves safe. At the Sheiling School, these skills are embedded throughout the formal and informal curriculum and include:

- E-safety
- Healthy relationships
- Recognising and dealing with peer pressure
- Safe and unsafe touch
- Skills to express their views and complain purposefully
- How to assess risk and make choices to keep themselves safe
- Independent living / self-care skills

Opportunities to teach these areas are provided through structured programmes of work including Sex and Relationships Education (SRE), Personal, Social and Health Education (PSHE) and citizenship, ICT and are also reflected in the pupils' day to day experiences through the mission and values of the Sheiling School. All staff will actively promote fundamental British values through the formal and informal curriculum.

## **9. TRAINING**

### **9.1. Induction**

All staff / volunteers will receive induction training during their first week – this will cover:

- The Sheiling School's child protection policy and procedures, including how to report concerns
- The staff code of conduct
- Whistleblowing
- 'Keeping children safe in education' (DfE 2016) part 1
- 'What to do if you're worried a child is being abused' DfE 2015

Staff / volunteers are required to confirm in writing that they have read and understood 'Keeping children safe in education part 1' – it is the individual's responsibility to seek advice from the Safeguarding officers if they are unsure of their role or responsibilities.

### **9.2. Staff training**

All staff will receive regular training, at least annually, on their role and responsibilities for

safeguarding and child protection. This will include any new or updated national or local guidance, learning from recent serious case reviews (SCRs) and may be delivered in a variety of ways such as e-learning, in-house facilitation and external speakers.

All staff will receive training on recognising and responding to the specific risks to children including FGM, child sexual exploitation, preventing radicalisation, forced marriage and domestic violence, children going missing from education and e-safety.

'Keeping children safe in education' part 1 provides more information about these and other specific risks that all staff / volunteers must be aware of.

### **9.3. Lead Safeguarding Officer (LSO) and other designated staff**

The LSO and Safeguarding Officer (SO) will attend appropriate training as required and at least every two years to update their skills, knowledge and understanding. This may be by training offered or recommended by our Local safeguarding children board (SGSCB) and/or events designed specifically for the SEN / disability sector.

In addition, we ensure that the Designated Safeguarding Lead and any other staff directly involved in child protection cases have access to regular supervision which is properly recorded to ensure that children at risk of harm or for whom there are welfare concerns achieve the best outcomes.

The LSO for Education and Care are members of the South Gloucestershire Safeguarding sub group and attends meetings on a termly basis. This is a valuable forum for information sharing, developing good practice and discussing arising issues.

### **9.4. Senior Leadership team & Trustees**

Senior leaders and trustees will attend regular training on their role and responsibilities for managing safeguarding and ensuring the effectiveness of the Sheiling School's arrangements. Relevant staff / trustees will also attend training in recognising and managing allegations of professional abuse.

### **9.5. Safer Recruitment**

We ensure that at least one member of every recruitment panel has attended appropriate Safer Recruitment training such as that provided by the Safer Recruitment Consortium (previously NCSL / CWDC)

### **9.6. Agency staff and other adults who have contact with the school's children and young people.**

Agency staff and other adults (self- employed staff, externally- employed 1:1 learning mentors) will be provided with information through a staff induction regarding our procedures, and who to contact if they have any concern about a child's welfare or the behaviour of an adult. Depending on the nature of their work, they will also be provided with the information necessary to keep children safe e.g. risk assessment of the activity, any medical needs of a child they will be working with directly, etc.

### **9.7. Visitors, Consultants and Contractors**

Visitors, consultants and contractors will be provided with information regarding our procedures, and who to contact if they have any concern about a child's welfare or the behaviour of an adult.

Such individuals will not be left unsupervised with the school's children and young people.

<b>Policy</b>	<b>Date</b>	<b>By</b>	
Created on	01-12-2012	Nico Sialelli Syl Edgeley	
Adopted by Council on	20-03-2013	All Trustees	
Frequency of review	Annually	Safeguarding Officer SMG Member(s)	
Reviewed on	22-03-2013	Nico Sialelli	
Reviewed on	14-04-2013	Nico Sialelli	
Reviewed on	23-04-2013	Syl Edgeley Nico Sialelli	
Reviewed on	20-06-2014	Nico Sialelli	
Reviewed on	07-03-2016	Carolyn Eyre (external consultant), Noah Black, Nico Sialelli	
Reviewed on	24-08-2016	Noah Black	
Reviewed on	30-09-2016	Nico Sialelli	
Updated on	14-11-2016	Syl Edgeley	
Updated on	25-01-2017	Noah Black	
Updated on	03-10-2017	Syl Edgeley	

## **Appendix**

### **Definitions: allegations of professional abuse**

#### **1.1 Outcomes of Allegation**

##### **(i) No further action after initial consideration**

Initial consideration means the discussion about whether the alleged incident constitutes an allegation within the scope of the Local Safeguarding Children Board (LSCB) procedures, ie the initial discussion with the LADO, Social Care or Police following which there may be no need for further action under the procedures. It does not mean following an initial assessment undertaken in accordance with the Framework for the Assessment of Children in Need and their Families.

##### **(ii) Substantiated:**

There is sufficient evidence to prove the allegation

##### **(iii) Unsubstantiated:**

There is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not infer either guilt or innocence.

##### **(iii) False:**

There is sufficient evidence to disprove the allegation. This is not the same as a malicious allegation

##### **(iv) Malicious:**

This means there is evidence to disprove the allegation and there has been a deliberate act to deceive.

##### **Unfounded**

The definition 'unfounded' is no longer used in DfE guidance; however it is still in use in some LSCB procedures. It may be used to describe a situation where the person making the allegation has misinterpreted the incident or was mistaken about what they saw. Alternatively they may not have been aware of all the circumstances.