

At Allanson Street, we belong, believe, aspire and achieve

Mission Statement

At Allanson Street Primary School, we give every child the life chances they deserve regardless of their starting point or the obstacles they may encounter.

Children leave us well equipped with the knowledge, skills and values needed to become happy, confident, productive citizens ready and willing to make a positive contribution to the world.

Respect

Kindness

Resilience

Aspiration

Integrity

Pride

Courage

Independence



# Safeguarding and Children Protection Policy

Issue Date: January 2025

Review Date: January 2026

## 1. INTRODUCTION

### **Developing a Whole School Policy on Safeguarding Children**

This document concerns the duties that Allanson Street Primary School has to safeguard and promote the welfare of children. It is informed by The Education Act (2002), which was implemented on 1 June 2004.

Section 175 is underpinned by the DfES Guidance "Safeguarding Children in Education" issued on 6 September 2004 for immediate effect.

Detailed information regarding safeguarding is available on the website <https://sthelenssafeguarding.org.uk/scp/scp/workforce/useful-documents>

"Everyone in the Education Service shares an objective to help keep children and young people safe by contributing to:

- Providing a safe environment for children and young people to learn in education settings; and
- Identifying children and young people who are suffering or likely to suffer significant harm, and taking appropriate action with the aim of making sure they are kept safe both at home and at school"

### **Taken from "Safeguarding Children In Education"**

This policy should also be read in conjunction with St Helens Local Authority Descriptions of Need document/procedure, and The St Helens Escalation Policy. 'What to do if you are worried a Child is Being Abused' 2006 (revised 2015). The guidance reflects, 'Keeping Children Safe in Education' including the update from September 2024. In addition to the St Helens Local Authority, 'Working with adults and children/young people vulnerable to extremism' and 'Child Exploitation'.

All appropriate policies can be found here: <https://sthelenssafeguarding.org.uk/scp/scp/workforce/useful-documents>

This policy draws upon good practice within the Local Safeguarding Children Board - LSCB which are commensurate with the guidance document "Working Together to Safeguard Children 2018" updated version. This guidance document states that all education settings must have in place systems designed to:

- Prevent unsuitable people working with, or coming into contact with, children and young people within the setting;
- Promote safe practice and challenge poor or unsafe practice;
- Identify instances in which there are grounds for concern about a child / young person's welfare and take appropriate action to keep children / young people safe. Including the discovery of female genital mutilation (FGM).
- Contribute to effective partnership working between all those involved with providing services for children.

Our policy applies to everyone in school and is explained to them during induction and re-visited regularly. (Whole Staff Training Update Spring Term 2025). This applies to all staff and volunteers working in the school and governors. Teaching Assistants, Mid-day Assistants, Office staff, as well as teachers can be the first point of disclosure for a child. Concerned parents, carers or members of the community may also contact school governors, the Head Teacher or Designated Safeguarding Lead if they are concerned about a child.

Please note that if you are ever concerned about the welfare of a child or family you must contact Social Care on **01744 676600** or the out of hours number on **0845 050 0148**

### **Types and definitions of abuse**

Abuse can take many different forms. Allanson Street staff receive training to understand the different forms of abuse and their signs and symptoms.

Definitions and examples of the different forms of abuse can be found in **Appendix 1**.

The four main categories of abuse are:

- Physical Abuse
- Emotional Abuse
- Sexual Abuse
- Neglect.

In relation to 'Keeping Children Safe in Education 2020' and the annual updates including Sep 2024, Allanson Street also recognise additional forms of abuse and high risk activity which children may be at risk of.

These include:

- Female Genital Mutilation or FGM
- Radicalisation and Extremism.
- Forced Marriage
- Child Sexual Exploitation / County Lines or CSE
- **Private Fostering**
- Child Missing in Education
- Peer on Peer abuse
- Sexting
- Up skirting
- Children at risk from, or involved with serious violent crime

### **Taken from "Safeguarding Children In Education"**

- Significant harm can be defined as the ill treatment or impairment of health and development of a child or young person.
- Development includes physical, intellectual, emotional, social or behavioural development.
- Health includes physical wellbeing (including female genital mutilation) and mental health.

- Ill-treatment includes sexual abuse and other forms of ill treatment that are not physical. This is viewed from the perspective of normal behaviour for a child / young person of similar age and understanding.

## **2. THE PURPOSE OF A CHILD PROTECTION AND SAFEGUARDING POLICY**

**2.1** Our whole school child protection and safeguarding policy is one that provides clear direction to staff and others about expected codes of behaviour in dealing with safeguarding issues. This policy also makes explicit the school's commitment to the development of good practice and sound internal school procedures. This ensures that safeguarding concerns and referrals may be handled sensitively, professionally and in ways which support the needs of the child.

**2.2** "The aim of this policy is to safeguard and promote our pupil's welfare, safety, health and guidance by fostering an honest, open, caring and supportive climate. The pupil's welfare is of paramount importance."

**2.3** There are three main elements to our Safeguarding Policy'.

(a) Prevention

Caring relationships with children, parents, carers and families will begin to be built on from EYFS and are built on mutual trust and respect. EYFS staff carry out home visits to develop partnerships with parents and get to know the child on his / her known territory (EYFS policy). Staff throughout the school meet and converse with parents on a regular basis to discuss concerns and parents are welcome at all other times to make an appointment if they need to speak to a member of staff. Attendance is vital. School works closely with the Education Welfare Officer and operates a first day contact system in the case of unexplained absence from school. The Education Welfare Officer or a member of the School Attendance Improvement Team visit the homes of children if there is a concern (see School Attendance Policy for all procedures used.)

(b) Protection

At Allanson Street Primary School, we ensure that children know that there are adults in the school who they can approach if they are worried or are in difficulty. There are identified key workers across school. Staff are trained at a basic level in safeguarding and are made aware of the need to be observant and to monitor the children in their care i.e. to notice changes in appearance and behaviour, patterns of absence etc. Staff are aware of the need to respond appropriately and sensitively to safeguarding concerns. The safeguarding flowchart and continuum of need is displayed in the staff room and Head Teacher's office and on the school notice board. All staff have access to a copy of the guidance material, Working Together to Safeguard Children 2018.

(c) Support

Children have the opportunity throughout the day to talk to adults in school – teacher, pastoral staff, midday supervisors, and classroom assistants. There are Worry Monsters / 'Things I'd like you to know' post boxes in each classroom – these are emptied daily by class teachers and pastoral staff – any issues are dealt with as soon as possible. Informal support is offered to

parents / carers through meet and greet daily and public messages and direct messaging on Class Dojo. Whenever possible, coffee mornings, parent's courses and information evenings also take place.

More formal support is offered by our Pastoral team. This can be initiated by parents / carers or school/ social services staff. Information relating to community services is displayed on the parents' board and safeguarding updates are displayed in a child friendly manner on the children's safeguarding board which is located on the Upper Junior corridor. Children have accessed training in supporting their peers through such schemes as the Diana Award, activity leaders and peer mentoring.

Adults who have been involved in any part of a safeguarding issue will be offered support and, if appropriate, support from outside agencies will be sought.

### **3. SCHOOL COMMITMENT**

'We recognise that high self-esteem, confidence, supportive friends and clear lines of communication with a trusted adult help all children and especially those at risk of or suffering from abuse.'

Our school will therefore:

- (a) Establish and maintain an ethos where children feel secure and are encouraged to talk.
- (b) Ensure that children know that there are trusted adults in the school who they can approach if they are worried or are in difficulty.
- (c) Include in the curriculum, activities and opportunities for PSHEE / Citizenship which equip children with the skills they need to stay safe from abuse, different forms of harassment and bullying and which will help children develop realistic attitudes to the responsibilities of adult life, particularly with regard to childcare and parenting skills. The school will provide opportunities for pupils to develop their voice and will listen to their concerns for example through organized circle time, PSHE/ RSE lessons, through planned assembly time, school council meetings and peer listening activities.
- (d) Ensure that wherever possible every effort will be made to establish effective working relationships with parents and colleagues from other agencies.

### **3. FRAMEWORK**

'Schools do not operate in isolation. The welfare of children is a corporate responsibility of the entire local authority, working in partnership with other public agencies, the voluntary sector and service users and carers. All local authority services have an impact on the lives of children and families, and local authorities have a particular responsibility towards children and families most at risk of social exclusion.' (*Working Together to Safeguard Children, 2018*).

Safeguarding is the responsibility of all adults especially those working with children. The development of appropriate procedures and the monitoring of good practice are the responsibilities of the Local Safeguarding Children Board.

The LSCB is made up of representatives from a number of agencies including health, children's social care, probation and the police. The LSCB website contains:

- Definitions of abuse and indicators
- Procedures for Safeguarding and multi agency working including relevant contacts
- Advice on good practice and policy making
- Pro- formas for referral and record keeping.

## **5. ROLES AND RESPONSIBILITIES**

All adults working with, or on behalf of children have a responsibility to safeguard and promote the welfare of children. There are, however, key people within schools and the LA who have specific responsibilities under Safeguarding procedures.

The Head Teacher, Deputy Headteacher and the Designated Safeguarding Lead, are all Designated Safeguarding Leads (DSL). Their roles and responsibilities are :

1. To be fully conversant with the Local Authority and School Safeguarding Procedure
2. To provide all staff with advice in regard to safeguarding
3. To ensure that appropriate action is taken in school and that the correct procedures are followed in all cases of suspected / actual abuse
4. To maintain a record of pupils in school who are on child protection plans and keep this updated as notification is received. To liaise with the Education Welfare Officer, school nurse, other professionals as appropriate to ensure that these children are monitored.
5. To maintain records within the school about those children whose safety and welfare are causing concern.  
To attend / participate in child protection conferences, core group meetings, family action meetings as appropriate or to ensure that another member of staff (who has a good knowledge of the circumstances) attends. In the rare occasion of no such person being able to attend, then to provide a report to conference from school and contact Heather Addison, Safeguarding Children in Education Coordinator, to attend on our behalf.
6. To inform the Social Worker or Safeguarding Children unit when a child on the CPR leaves the school and to inform the new school of the child's status on the register, transferring files, CPOMS incidents and having a telephone conversation wherever possible. Details of the information sharing need to be kept by us on the child's CPOMS record.
7. To organise and monitor training / information as appropriate for all staff.
8. To be trained personally at a single and multi agency level and to undertake refresher training as necessary.
9. To attend LA cluster meetings/trainings on a termly basis.
10. To hold safeguarding induction sessions for new staff and volunteers working across school. PowerPoint saved on the school server for reference.
11. To refresh volunteers and all staff on initiatives and developments as the need arises.
12. To ensure that the curriculum offers opportunities for raising pupils' awareness and for developing strategies for their protection.
13. To ensure that staff are aware of how to avoid placing themselves at risk when dealing with pupils.

### **Looked After Children**

The Safeguarding Lead also has the responsibility for Looked After Children (LAC) and fulfils this role in line with both this safeguarding policy and the legal requirements of LAC status. The ePEP system is used to assess and record attainment and intervention of our LAC children on a termly basis and reported to the Local Authority Virtual School.

### **The role of the Senior Leadership Team**

It is recognised that, as safeguarding is a shared responsibility at multi agency level, so it is within school. The DSLs will share decisions with the Senior Leadership Team. If the DSLs are not available then a member of the SLT should be consulted about any concern. In the unlikely event of the SLT being unavailable or if a course of action is unclear then the MASH Team/ Children's Services Front Door Team should be contacted on 01744 676600 [safeguardingunit@sthelens.gov.uk](mailto:safeguardingunit@sthelens.gov.uk)

### **The Role of the Governing Body**

The Governing Body are aware of their role in overseeing the school's arrangement for safeguarding. They are aware of the expectations for them to remedy any deficiencies in safeguarding systems without delay. They will review all safeguarding structures annually.

The Governing Body must ensure that school has policies and procedures in place that take account of any statutory guidance issued by the secretary of state including any LA guidance and LSCB procedures.

The Governing Body must organise their strategic and monitoring functions for the school. They must ensure they have the knowledge and information to perform the functions and understand their responsibilities.

The Governing Body will nominate a named Governor to support the safeguarding systems at Allanson Street Primary School.

### **The Role of the Named Governor**

The named Governor will:

- Support the school in promoting safeguarding
- Support the school in safeguarding children
- Support the staff in ensuring child safety
- Foster links between the Governing Body and the school
- Support the Governing Body in carrying out its statutory duties

The above will be met through:

- Discussions with staff and governors about how the school delivers effective safeguarding provision through curricular and extra curricular activities, school policies and procedures. Such developments are included in the termly head teacher's report.

- Attending safeguarding training led by the school and external agencies (training in safeguarding is held every two years by the school)
- Liaising with the named member of staff in school on a regular basis and providing feedback from such meetings for all Governors.
- Receiving, and feeding back on, monitoring reports from the Designated Safeguarding Lead, detailing the number and type of incidents recorded in school
- Ensuring the Safeguarding Policy is reviewed and monitored annually
- Ensuring that staff and Governors receive relevant training
- Ensuring sufficient time and resources are allocated to allow the DSLs to fulfil their responsibilities
- Reporting back to the Governing Body as and when appropriate
- Awareness of the importance of confidentiality

Governors will not investigate concerns and allegations, ask for information about individual children or cases, act independently or create unnecessary work for staff.

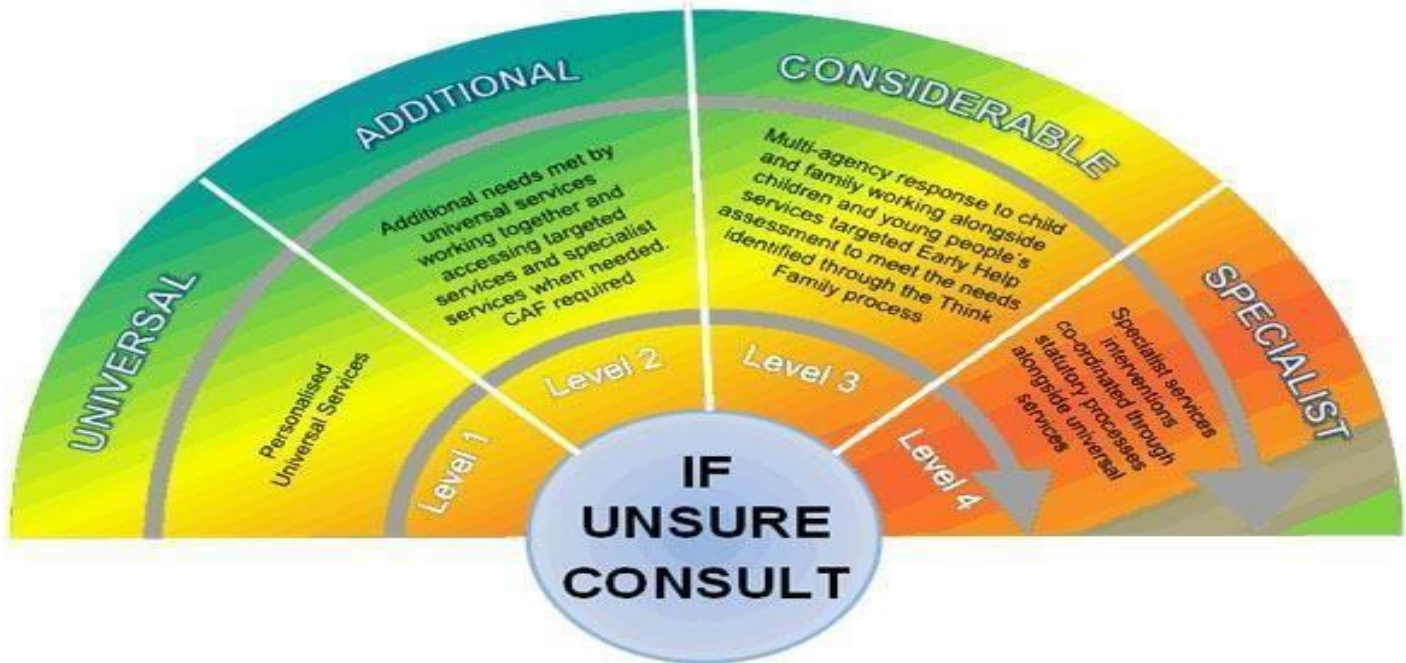
Level of Need	Intervention	Agencies who may be involved
Level 1 Children and young people who are achieving each of the 5 outcomes.	Whole school initiatives Informal contact with children, parents and carers to resolve low level issues.	The child and their family School staff
Level 2 Children and young people who may need extra support in order to achieve the 5 outcomes.	School Support Meetings Informal meetings with parents and carers to resolve low level issues. These may require a referral to an additional agency and will be reviewed.	The child and their family School staff  Possible involvement of an external agency.
Level 3 Children and young people who have complex needs and who may require co-ordinated support in order to achieve the 5 outcomes.	Common Assessment Form (CAF) A document completed by the family with support from the lead professional. The CAF document brings together all agencies involved with a family to ensure that everyone is working together and information is shared. The CAF would then be taken to a Service Allocation Meeting (SAM) to ensure that the appropriate support is being given. Parents and Carers or the child where appropriate, must consent to this document.  Family Support Meetings A Family Support Plan is put into place for families with complex needs. This may be required as earlier forms of intervention have not been effective. Family Support Plans, similarly to a CAF, look to bring agencies and families together in order to put in place the best package of support. Parents and Carers or the child where appropriate, must consent to this document.	The child and their family School staff  Multiple external agencies including Health, Family Support Workers, CAMHS, housing, GP, dentist. This also extends to more targeted services such as counselling services, NSPCC or agencies associated with a particular condition. In some cases Social Care will be invited to Family Support Meetings.
Level 4 Children and young people who will not achieve the five outcomes without intensive support.	Child in Need These are meetings for families who require intensive support in order for the child to achieve their 5 outcomes. These meetings are led by Social Care and all agencies involved will be invited along with parents and carers. These meetings are statutory and therefore do not require parental consent.  Child Protection These are meetings for families whose children are at risk of significant harm. These meetings are led by an intendant chair and all agencies involved will be invited along with social care, parents and carers. These meetings will be reviewed every 6 weeks	The child (where appropriate) and their family  School staff  Multiple external agencies including Health, Family Support Workers, CAMHS, housing, GP, dentist. This also extends to more targeted services such as counselling services, NSPCC or agencies associated with a particular condition.

	<p>during core group meetings and every 6 months for review child protection conferences. These meetings are statutory and therefore do not require parental consent.</p>	<p>Social Care would always attend Child in Need and Child Protection conferences.</p>
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**6. PROCEDURES**

**Early Help**

Allanson Street recognises that early intervention can have a positive impact for our families and can prevent children from significant harm. Therefore, Allanson Street promotes an Early Help Offer which is a graduated structure aimed at providing support at the appropriate and earliest level. This is in accordance with St. Helens Borough Council's Family Support Model.



### **Safeguarding Concern**

If it is believed that a child is suffering from, or is at risk of, significant harm, we will follow the procedures set out in the LSCB procedure. The safeguarding procedure is illustrated in a flow chart- see **appendix 3**. These, and the continuum of children’s needs, are also displayed in the staff room, the Head Teacher’s office and the notice board.

School recognises that it is good practice to inform parents of its decision to refer to social services as the referral is made, as relationships of mutual trust are part of the school ethos.

However, parents may not be contacted if:

- i Informing the parents may put the child at risk of serious harm, or,
- ii Informing the parents may jeopardise any CYPS/ Police enquiry or attempt to protect the child.

The reason for the decision will be clearly recorded.

### **7. INFORMATION SHARING**

Our school recognises that information sharing is key to the government’s goal of delivering better, more efficient services that are coordinated around the needs of the individual. We are aware that it is essential to enable early intervention and preventative work, for safeguarding and promoting welfare and for wider public protection.

There are seven golden rules for information sharing observed at Allanson Street Primary School:

1. It should be remembered the Data Protection act is not a barrier to sharing information but provide a framework to ensure that personal information about living persons is shared

appropriately.

2. We must be open and honest with the person, and or family where appropriate, from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.
3. We will seek advice if we are in any doubt, without disclosing the identity of the person where possible.
4. We will seek consent before sharing information where appropriate and, where possible, respect the wishes of those who do not consent to share confidential information. We will share information without consent if, in our judgement, a lack of consent can be overridden in the public interest. We will base our judgements on the facts of the case and will record our rationale for such decisions clearly.
5. We will base our information sharing decisions on considerations of the safety and well being of the person and others who may be affected by their actions.
6. We will ensure that the information that is shared is necessary for the purpose for which it is being shared, and only shared with those people who need to have it, is accurate and up to date, is shared in a timely fashion and is shared securely.
7. We will keep records of all our decisions and the reasons for it, whether it is to share information or not. If we decide to share information, a record of what was shared, with whom and for what purpose will also be recorded.

See **Appendix 2** Key questions for information sharing.

## **8. TRAINING AND SUPPORT**

- 8.1** Our school will ensure that the Head Teacher, the Senior Designated Person and the governing body attend training relevant to their role.

This will include training in procedures to follow, signs to note and appropriate record keeping.

Allanson Street Primary School recognises that it is extremely important that all staff, whether paid or unpaid, have access to appropriate training in order that they are able to react appropriately if an incident should occur.

Ongoing training will be available at least every two years for all staff, but every three years for designated staff. The demands and difficulties associated with working in this very sensitive area is not ignored, and staff receive training and appropriate support to help them to safeguard and promote the welfare of the children and young people with whom they work.

All staff are trained to recognise and respond to situations where a child may be considered to be at risk. The Head Teacher and Safeguarding Lead are the nominated staff who are on the Senior Leadership Team and who are responsible for the implementation of appropriate procedures. They are part of the network co-ordinated by CYPS Child Protection Services. These staff members have

appropriate time and resources made available to them to enable them to fulfil their duties in this very sensitive area.

Staff will be informed of any changes to current safeguarding issues through staff meetings. Any new governors to the school will automatically be asked to complete training in safeguarding as part of their induction to the role.

The Local Safeguarding Childrens Board provides an Annual Training Programme and Calendar. <https://sthelenssafeguarding.org.uk/scp/scp/workforce/useful-documents>

**8.2** Allanson Street Primary School recognises the need to keep parents informed of Safeguarding Policies and Procedures. The school Safeguarding Policy is shared with all parents and is available on the school website.

## **9. PROFESSIONAL CONFIDENTIALITY**

**9.1** Confidentiality is an issue which needs to be discussed and fully understood by all those working with children, particularly in the context of safeguarding. The only purpose of breaching confidentiality is to benefit the child. If this needs to happen to safeguard a child, they will always be told that their information is being shared.

Confidentiality is respected through:

1. The storage of child protection records in a lockable filing cabinet and on CPOMS
2. Ensuring information exchanged between professionals in school/ other agencies is kept between those directly involved with the child / family
3. Ensuring that if a child transfers school, confidential records will be passed on. In the event of the new school not being known, child protection case conference records will be returned to the Children's Safeguarding Unit in St Helens

It must be remembered however that the child's welfare is paramount and takes precedence over all other considerations. If a child is deemed to be at risk of significant harm, then referrals to CYPS must be made. In the case of disclosure of abuse, staff are advised never to promise a child that they will keep it a secret as this may well inhibit action being taken which would be in the child's best interest.

Professionals can only work together to safeguard children if there is an exchange of relevant information between them. This has been recognised in principle by the courts. Any disclosure of personal information to others, must always however, have regard to both common and statute law.

Normally, personal information should only be disclosed to third parties with the consent of the subject of that information (Data Protection Act 1998, European Convention on Human Rights, article 8). Wherever possible, consent should be obtained before sharing personal information with third parties. In some circumstances, obtaining consent may not be possible or in the best interest of the child. The safety and welfare of that child necessitates that the information necessary to safeguard a child or children. Disclosure should be justifiable in each case, according to the particular facts of the case, and legal advice should be sought if in doubt.

## **10. RECORDS AND MONITORING**

Well-kept records are essential to good child protection practice. Our school is clear about the need to record any concerns held about a child or children within our school, the status of such records and when these records should be passed over to other agencies.

All staff complete safety welfare concerns via CPOMS.

MASH Team referral forms are stored on the server. **Appendix 5**

The safeguarding records cabinet is locked and only the Designated Teacher and Headteacher are aware of the location of the key.

Children about whom there are concerns are recorded via CPOMS and a register of Early Help, Child Protection and LAC are updated as and when changes occur.

Any staff working with or alongside a child may share concerns via CPOMS with the DSL or any other relevant staff member in school.

When there is a sufficient concern, evidenced by records kept on CPOMS , a referral may be made.

If a child transfers or leaves school, the school should seek to engage with an identified member of staff, with whom concerns may be shared. Child Protection information must be sent to the new school whilst the child is still under 18. Where a child is removed from roll to be educated at home, the file should be copied to the Local Education Authority.

A notification form should be forwarded to the Safeguarding Children Unit.

## **11. SINGLE CENTRAL RECORD**

Holding a single central record is a statutory requirement. This record includes all staff, supply staff and regular visiting staff such as peripatetic teachers.

The record is in tabular form and includes

Names and addresses and dates of birth

Evidence of an identity check

Evidence that all teachers have been checked against list 99

Evidence that all staff employed since March 2002, who have regular contact with children, have an enhanced DBS check

Evidence that staff appointed since May 2006 have an enhanced DBS check

Evidence of a prohibition from teaching check

Evidence that supply teachers who work at the school regularly have been checked against list 99 and have a recent enhanced DBS check

Evidence that Governors have DBS checks

The dates checks were carried out

Evidence that all teachers have qualified teacher status

Evidence of a check to establish the person's right to work in the United Kingdom.

Evidence of further checks on people who have lived or worked outside the UK this would include recording checks for those European Economic Area (EEA) teacher sanctions and restrictions described in paragraph

Evidence of professional qualifications, where required

Volunteers in school are recruited in line with the Volunteer Policy.

## **12 ATTENDANCE AT CHILD PROTECTION MEETINGS**

Case conferences are important meetings when professionals meet to share information formally. Professionals engaged with the family are invited as are the family. The chair of conference extends an invitation to conference to the school. The DSL would attend this meeting and would provide a written report detailing their:

- Involvement with the child and family
- Knowledge of the child's development needs
- Assessment of the capability of the parents to meet the needs of their child within their family and environmental context.

All reports should distinguish between fact, observation, allegation and opinion. When information is provided from another source it should be made clear.

Where meetings are being held to make decisions about more than one child in a family there should be a report prepared on each child.

A standardised report has to be submitted to the safeguarding unit and also has to be shared with the family 3 days prior to conference - **See appendix 4**

## **13. SUPPORTING PUPILS AT RISK**

Our school recognises that children who are abused or who witness violence may find it difficult to develop a sense of self worth and to view the world in a positive way. School may be the only stable, secure and predictable element in the lives of children at risk. While at school, their behaviour may still be challenging and defiant and there may even be moves to consider fixed term or permanent exclusion.

It is also recognised that some children who have experienced abuse may in turn abuse others. This requires a considered, sensitive approach in order that the child can receive appropriate help and support.

The school will endeavour to support pupils through.

- Behaviour Management Policy
- Anti-Bullying and Anti Harassment
- Care and Control Policy
- Special Education Needs
- Health and Safety
- Sex and Relationships Education
- Referral to Pastoral Manager or Pupil Mentor
- Referral to other agencies. (i.e., CAMHS, BIT, Young Carers)

### **Vulnerability**

NSPCC 'We have the right to be safe: Protecting disabled children from abuse' - Report saved on the school server.

We recognise that, statistically, children with behavioural difficulties and disabilities can be most vulnerable to abuse.

Disabled children are at significantly greater risk of physical, sexual and emotional abuse and neglect than non-disabled children (Sullivan, Vernon and Scanlan 1987; Cross et al. 1993; Sullivan and Knutson 2000; Kvam 2004; Spencer et al. 2005); Jones et al.2012.

The following are things to be mindful of:

- Children with a disability might lack a good understanding of social relationships, personal boundaries, protective behaviours, sexual awareness, and what abuse is.
- Children with a physical disability might be more vulnerable to neglect or to rough and intrusive personal care. They may also be physically unable to resist or avoid abuse.
- If communication is difficult, children with a disability find it hard to let someone know that abuse is occurring.
- Children with behavioural issues are more likely to be dealt with in a forceful or restrictive way, and indicators of abuse might be wrongly attributed to the behavioural issue.
- Children with a disability might be more dependent on others to have their needs met and care may be provided by someone other than a parent or primary carer.
- Greater structure and protection of children with a disability can teach them to be more compliant with adult demands.
- Children might accept abusive treatment if they have low understanding, self-esteem or a low perception of their abilities.
- Children with a disability and their families can at times be more socially isolated.

School staff who work, in any capacity, with children with profound and multiple disabilities, sensory impairment and/or emotional and behaviour problems will need to be particularly sensitive to signs of abuse. It must also be stressed that in a home environment where there is domestic violence, drug or alcohol abuse, mental health issues, children may also be vulnerable and in need of support or protection.

The Safeguarding Policy should be read in conjunction with other related policies in school as well as reference documents –

<b>Policy</b>	<b>Location on server</b>
Accident and Illness	Policies/Children and Families/Safeguarding
Medical Needs	Policies/Children and Families/Safeguarding
Missing Child	Policies/Children and Families/Safeguarding
Uncollected Child	Policies/Children and Families/Safeguarding
Prevent	Policies/Children and Families/Prevent Duty
Attendance	Policies/Children and Families/Behavior and Attendance
Anti-bullying	Policies/Children and Families/Behaviour and Attendance
Behaviour	Policies/Children and Families/Behaviour and Attendance
Care & Control	Policies/Children and Families/Behaviour and Attendance
Exclusions	Policies/Children and Families/Behaviour and Attendance
Code of Conduct	Policies/Human Resources
Bullying and Harassment	Policies/Human Resources
Confidential Reporting (Whistleblowing)	Policies/Human Resources
Recruitment, Selection & Appointment	Policies/Human Resources
Volunteer	Policies/Human Resources
Acceptable User	Policies/School Management and Premises/E safety
CCTV	Policies/School Management and Premises/Health & Safety
Data Protection	Policies/School Management and Premises/Data Protection
Drug	Policies/School Management and Premises/Health & Safety
E Safety	Policies/School Management and Premises/E Safety
First Aid	Policies/School Management and Premises/Health & Safety
Acceptable Usage of Data	Policies/School Management and Premises/Data Protection
Health & Safety	Policies/School Management and Premises/Health & Safety
PSHE	Policies/Curriculum
SRE	Policies/Curriculum

<b>Reference Document</b>	<b>Location on Server</b>
Allegations Against Staff (LSCB)	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Keeping Children Safe in Education (DFE) 2024	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Safer Working Practices (School)	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
What to do if you are worried a child is being abused (HM Government))	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Working Together to Safeguard Children	Policies/Children and Families/Safeguarding/Reference

(DFE) 2018	Documents/Safeguarding
Disqualification Under the Childcare Act (DFE)	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Information Sharing (HM Government)	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
FGM Flowchart (DFE)	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
FGM Commissioning Services (DFE)	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Supporting Pupils at School with Medical Conditions (DFE)	Policies/Children and Families/Safeguarding/Reference Documents/Accident and Illness
Use of Salbutamol Inhalers (Department for Health)	Policies/Children and Families/Safeguarding/Reference Documents/Accident and Illness
Guidance on First Aid for Schools (DFE)	Policies/Children and Families/Safeguarding/Reference Documents/Accident and Illness
Prevent Duty Schools (DFE)	Policies/Children and Families/Prevent Duty/Reference Documents
School Attendance (DFE)	Policies/Children and Families/Behaviour and Attendance/Reference Documents
Use of Reasonable Force (DFE)	Policies/Children and Families/Behaviour and Attendance/Reference Documents
NSPCC Model safeguarding policy	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
NSPCC Briefing/Updates – Keeping Children Safe in Education 2018	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
NSPCC Managing Harmful Sexual Behaviour	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Guidance Coronavirus (COVID-19): safeguarding in schools, colleges and other providers	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Guidance for full opening: schools Updated 1 October 2020	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
NSPCC We have the right to be safe': Protecting disabled children from abuse	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding
Safeguarding training for induction of Staff	Policies/Children and Families/Safeguarding/Reference Documents/Safeguarding

It is also important that Safeguarding is referenced across the curriculum to ensure risk assessment and safeguarding is embedded throughout all teaching and activities.

All of the above policies and reference documents are available to view on Teacher Share. Staff are notified of any reviews and subsequent changes to policy. All policies are available to view by parents.

Students on placement in school are required to read and sign to confirm that they too understand such procedures.

Volunteers, extra curricular club leaders are required to sign a school partnership agreement, which refers to Safeguarding procedures.

**14. PROCEDURES TO FOLLOW IF A MEMBER OF STAFF IS CONCERNED ABOUT THE WELFARE OR SAFETY OF A CHILD**

This is in the form of a simple flow chart or step-by-step instruction and is written for anyone who works in the school who may have contact with children. (See appendix 3.)

It is displayed in the staff room, general office and Head Teachers room.

This details who the concern should be reported to, who should be contacted if this person is not available.

**15. PROCEDURES TO FOLLOW WHEN THE DESIGNATED SAFEGUARDING PERSON IS NOTIFIED OF THE CONCERN ABOUT THE WELFARE OR SAFETY OF A CHILD**

This flowchart outlines the procedures to be followed by the DSL when Safeguarding concerns are brought to their attention. *This is displayed in, the Head teacher's office and staff room.*

**16. PROCEDURES TO FOLLOW IF AN ALLEGATION IS MADE AGAINST A MEMBER OF STAFF**

Such allegations should be reported to the DSL or in her absence the Deputy DSL – Head Teacher, who will follow recommendations by the LSCB – Procedure for Managing Allegations Against Staff. If the allegation is against the Head Teacher or DSL then the member of staff should inform the DSL or Deputy Head Teacher.

Each member of staff has a copy of the Procedure for Managing Allegations Against People Who Work With Children and Young People and some suggestions to help professionals understand the types of allegations that may be dealt with under these procedures (See Local Safeguarding Children's Board website).

**16.1 Role of the LADO**

The LADO works within the Children's Safeguarding Unit and should be alerted to 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 children, or related to a child
- behaved towards a child or children in a way that indicates s/he is unsuitable to work with children.

The LADO role applies to paid, unpaid, volunteer, casual, agency and self-employed workers. They capture concerns, allegations or offences emanating from outside of work. The LADO is involved from the initial phase of the allegation through to the conclusion of the case.

They will provide advice, guidance and help to determine whether the allegation sits within the scope of the procedures.

The LADO helps co-ordinate information sharing with the right people and will also monitor and track any investigation, with the aim to resolve it as quickly as possible.

**17. PROCEDURE TO FOLLOW IF THERE IS A CONCERN THAT PROFESSIONALS ARE NOT WORKING WELL TOGETHER**

(See the Local Safeguarding Childrens Board website, for the complete Escalation Procedure Document -) <https://sthelenssafeguarding.org.uk/scp/scp/workforce/useful-documents>

If there is a concern that agencies are not working well together and as a result the child is not making good enough progress and is at risk, then the following procedures should be followed.

In most cases the lead professional should be the first contact-if that is not resolved then contact their manager

In cases involving social care, initial discussion should be with the social worker and followed in writing with a copy being sent to the respective team manager and the LSCB Business Manager. If this does not resolve the problem then the team manager should be contacted by telephone and in writing.

If the issue remains unresolved the operational manager should be contacted. If the issue remains a concern the services manager should be contacted. Once a case has been escalated the respective social worker and/or manager should provide a written reply within seven working days to the professional who has initiated the procedure. A copy of all correspondence and outcomes should be sent to the Safeguarding Service Manager.

**18. MONITORING AND EVALUATION OF SAFEGUARDING AT ALLANSON STREET PRIMARY SCHOOL**

All vulnerable children are identified on a matrix of vulnerability which numerically indexes according to needs. Those requiring specific academic support/intervention are identified on an intervention map. Both the intervention map and matrix of vulnerability are reviewed termly and the impact of interventions/support monitored. Impact of safeguarding procedures, curriculum and pastoral support is measured through the use of surveys, which are completed, by children, stakeholders and parents on an annual basis. Strengths and areas for future action are identified. Results are shared with staff, children, parents and governors.

The school site is fitted with a number of CCTV cameras. The purpose of the surveillance camera system at Allanson Street Primary School and the Thompson Centre is to ensure the safety of pupils, staff, parents and other service users and for the prevention of crime. If any safeguarding concerns arise, the recorded images may be accessed by the named system users in line with the agreed CCTV policy.

This Safeguarding Policy and associated procedures takes account of the General Data Protection Requirements (GDPR). All personal data is handled in line with the policy for Acceptable Usage of Data by Staff and Volunteers.

## UPDATES FROM KEEPING CHILDREN SAFE IN EDUCATION

### Changes made in the 2023 guidance

The 2023 guidance introduces changes to Keeping children safe in education from 1 September 2023 as set out below.

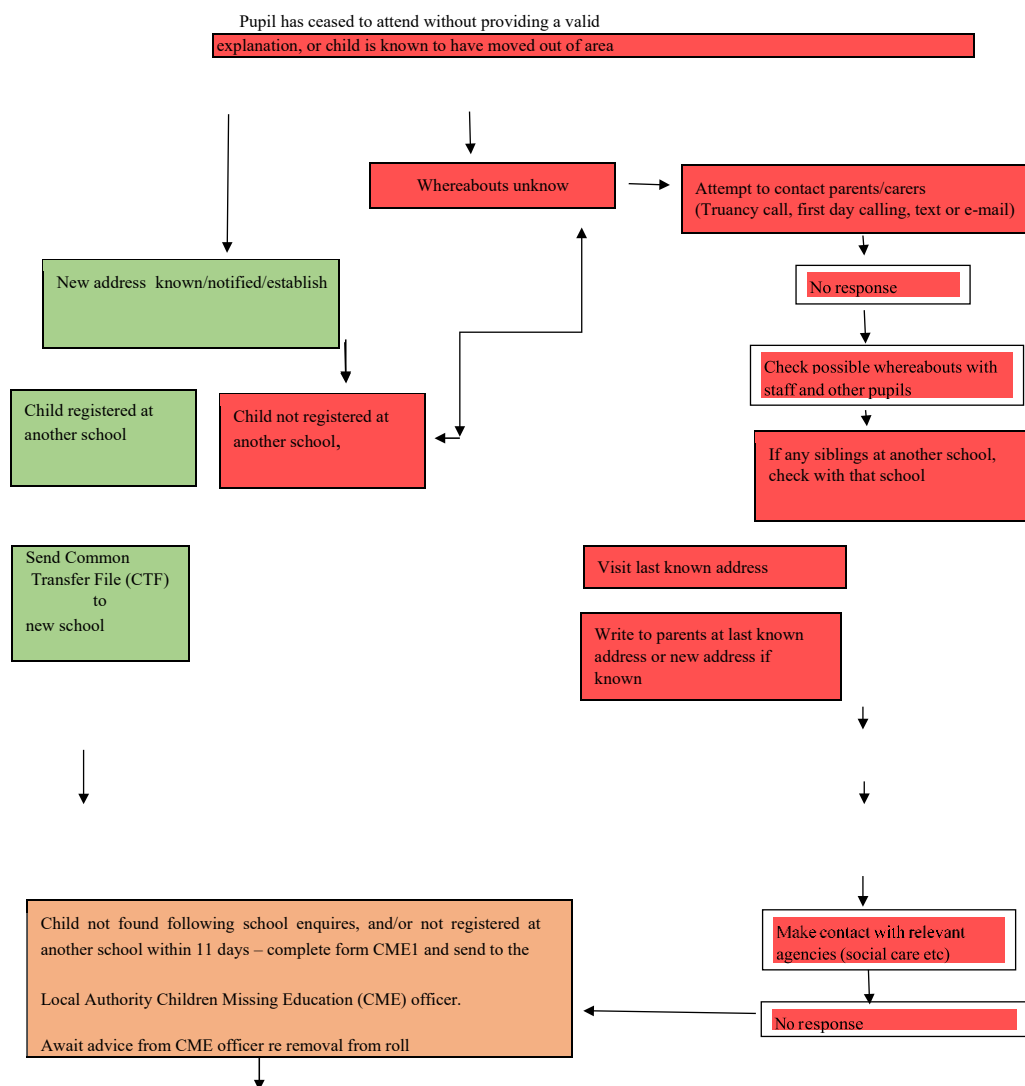
#### Filtering and monitoring

- Robust filtering and monitoring systems are in place to limit children's exposure to the 4 key categories of risk from the school's IT systems. Smoothwall is used for monitoring and records are kept confidentially on CPOMS.

#### Children absent from education

Children Missing Education – Responsibilities of school flowchart

(Taken from St Helens Local Authority, EWS Children Missing Education (CME) Policy and Procedures).



## Safer Recruitment

### Interview panels

At least one person conducting any interview for a post at the school will have undertaken safer recruitment training. This will cover, as a minimum, the contents of the Department for Education's statutory guidance, Keeping Children Safe in Education, and will be in line with local safeguarding procedures.

Shortlisted candidates will be informed that an online search may be conducted as part of due diligence checks in our recruitment process.

### Safer recruitment and DBS checks – policy and procedures

To make sure we recruit suitable people, we will ensure that those involved in the recruitment and employment of staff to work with children have received appropriate safer recruitment training.

We have put the following steps in place during our recruitment and selection process to ensure we are committed to safeguarding and promoting the welfare of children.

### Advertising

When advertising roles, we will make clear:

- Our school's commitment to safeguarding and promoting the welfare of children.
- That safeguarding checks will be undertaken.
- The safeguarding requirements and responsibilities of the role, such as the extent to which the role will involve contact with the children.
- Whether or not the role is exempt from the Rehabilitation of Offenders Act 1974 and the amendments to the Exceptions Order 1975, 2013, and 2020. If the role is exempt, certain spent convictions and cautions are 'protected', so they do not need to be disclosed, and if they are disclosed, we cannot take them into account.

Our application forms will:

- Include a statement saying that it is an offence to apply for the role if an applicant is barred from engaging in regulated activity relevant to children (where the role involves this type of regulated activity)
- Include a copy of, or link to, our child protection and safeguarding policy and our policy on employment of ex-offenders.

### Shortlisting

Our shortlisting process will involve at least two people and will:

- Consider any inconsistencies and look for gaps in employment and reasons given for them.
- Explore all potential concerns.
- We will also consider carrying out an online search on shortlisted candidates to help identify any incidents or issues that are publicly available online.

### Seeking references and checking employment history

When seeking references, we will:

- Not accept open references.
- Liaise directly with referees and verify any information contained within references with the referees.
- Ensure any references are from the candidate's current employer and completed by a senior person.
- Where the referee is school based, we will ask for the reference to be confirmed by the headteacher as an accurate in respect to disciplinary investigations.
- Obtain verification of the candidate's most recent relevant period of employment if they are not currently employed.
- Secure a reference from the relevant employer from the last time the candidate worked with children if they are not currently working with children.
- Compare the information on the application form with that in the reference and take up any

inconsistencies with the candidate.

- Resolve any issues before the appointment is confirmed.

#### Interview and selection

When interviewing candidates, we will;

- Prove any gaps in employment, or where the candidate has changed employment or location frequently, and ask candidates to explain this.
- Explore any potential areas of concern to determine the candidate's suitability to work with children
- Record all information considered and decisions made.
- Pre-appointment vetting checks
- We will record all information on the checks carried out in the school's single central record (SCR). Copies of these checks, where appropriate, will be held in individuals' personnel files. We follow requirements and best practice in retaining copies of these checks, as set out below.

#### New staff

- The offers of appointment will be conditional until satisfactory completion of the necessary pre-employment check. The Local Authority Human Resource department is responsible for carrying out the following checks.
- Verifying identity.
- Obtaining (via the applicant) an enhanced Disclosure and Barring Service (DBS) certificate, including barred list information for those who will be engaging in regulated activity (see definition below). We will not keep a copy of this for longer than 6 months, but when the copy is destroyed, we may still keep a record of the fact that a vetting check took place, the result of the check and recruitment decision made.
- Obtaining a separate barred list check if they will start work in regulated activity before the DBS certificate is available.
- Verifying their mental and physical fitness to carry out their work responsibilities.
- Verifying their right to work in the UK. We will keep a copy of this verification for the duration of the member of staff's employment and for 2 years afterwards.
- Verifying their professional qualifications, as appropriate.
- Ensuring they are not subject to a prohibition order if they are employed to be a teacher.
- Carrying out further additional checks, as appropriate, on candidates who have lived or worked outside of the UK.

### **The 2024 guidance introduces changes to Keeping children safe in education from 1 September 2024 as set out below.**

Part one: Safeguarding information for all staff

Location: Paragraph 3

Update 1: The definition of safeguarding and promoting the welfare of children has been expanded to reflect the definition included in Working together to safeguard children 2023 (WTSC).

Detail: A new point has been added covering the importance of providing "help and support to meet the needs of children as soon as problems emerge." In addition, the point on protecting children from maltreatment now clarifies that this applies "within or outside the home, including online."

Location: Paragraph 18

Update 2: Contexts in which early help may be required have been expanded to reflect the revised guidance from Working together to safeguard children (WTSG).

Detail: Factors now include “frequently missing/goes missing from education” and “has experienced multiple suspensions, is at risk of being permanently excluded from schools, colleges and in Alternative Provision or a Pupil Referral Unit.”

Location: Paragraph 19

Update 3: The ‘Abuse and neglect’ heading has been amended to include ‘exploitation’.

Detail: The added focus on exploitation where abuse and neglect are mentioned occurs throughout the document.

Location: Paragraph 24

Update 4: The ‘Indicators of abuse and neglect’ section now includes mention of when children impacted by domestic abuse “see, hear or experience its effects”.

Detail: Though alluded to in KCSIE 2023, this update clarifies how children may be exposed to domestic abuse or its aftermath, and the need to support young people who bear witness to forms of domestic abuse.

Location: Paragraph 29

Update 5: In the ‘Safeguarding issues’ section, “deliberately missing education” has been replaced with “unexplainable and/or persistent absences from education”.

Detail: This change reflects the revised definition included in Working together to improve school attendance.

Location: Paragraph 171

Update 7: New text added under the ‘Alternative Provision’ heading: “Where a school places a pupil with an alternative provision provider, it continues to be responsible for the safeguarding of that pupil and should be satisfied that the placement meets the pupil’s needs.”

Detail: This clarification emphasises the need for school oversight of Alternative Provision, where previously responsibility for safeguarding in these contexts was largely placed on “governing bodies and proprietors of these settings.”

Location: Paragraph 205-209

Update 8: The heading has been altered and three new paragraphs have been added detailing how to support children who are questioning their gender. A disclaimer at the beginning of this section explains that this text remains under review, pending further guidance and consultation outcomes.

Detail: In the title, “bi” has been replaced with “bisexual” and “trans” has been replaced with “gender questioning”. The new paragraphs reference the Cass review, which explains how to comply with gender questioning children guidance terminology. On this topic, schools are advised to “take a cautious approach and consider the broad range of their individual needs.”

Part five: Child-on-child sexual violence and sexual harassment

Location: Paragraph 497

Update 9: The definition of early help has been updated to reflect the guidance in WTSG.

Detail: “Early help means providing support as soon as a problem emerges, at any point in a child’s life” has been replaced with “Early help is support for children of all ages that improves a family’s resilience and outcomes or reduces the chance of a problem getting worse.”

Annex B: Role of the designated safeguarding lead

Location: Page 176

Update 10: A bullet point in the ‘Holding and sharing information’ section has been expanded to include guidance around the rationale for making decisions.

Detail: The new guidance explains that written records of concerns, discussions and actions need to cover the rationale behind any decision-making, and “should include instances where referrals were or were not made to another agency such as LA children’s social care or the Prevent program etc.”

**Whole-School Policy on Safeguarding Children**

**A. Named staff/personnel with designated responsibility for Safeguarding**

**Headteacher and Deputy DSL: Mrs Lynsey Dingsdale**

**DSL: Mrs Claire Range**

**Nominated Governor: Mrs Janet Yates**

**B. Review dates for this Policy**

Review Date	Changes made	By whom
<b>May 2013</b>	<b>Full adoption of the St Helens model policy recommended to Governors.</b>	<b>P Farnell – Head Teacher Deputy DSL</b>
<b>March 2015</b>		<b>Achievement and Standards Committee</b>
<b>March 2016</b>		<b>Achievement and Standards Committee</b>
<b>June 2017</b>	<p><b>Full review of Safeguarding Children policy by DSL and Lead Safeguarding Governor Including:</b></p> <ul style="list-style-type: none"> <li>• <b>Legislation updated</b></li> <li>• <b>Policies checked and list of related policies updated</b></li> <li>• <b>School paperwork included in the appendix</b></li> </ul> <p><b>Policy updated to reflect new Working Together Sep 2015 as well as changes to training expectations</b></p>	<p><b>Claire Range DSL and Lead Safeguarding Governor Janet Yates</b> <b>(to go to Achievement and Standards committee 27.6.17 for approval)</b></p>
<b>June 2018</b>		<b>DSL Claire Range and Deputy DSL Patricia Farnell Achievement and Standards Committee</b>

<p><b>June 2019</b></p>	<p><b>Policy updated to reflect new recording system – CPOMS.</b></p> <p><b>Updates also to terminology of first response team – Now known as The Front Door Team at St Helens Social Care</b></p>	<p><b>DSL Claire Range and Deputy DSL Patricia Farnell</b></p> <p><b>Business Manager Jayne Hurst– Single Central Record Review Achievement and Standards Committee</b></p>
<p><b>October 2020</b></p>	<p><b>Policy updated to include COVID-19 addendum</b></p> <p><b>Guidance for full opening: schools Updated 1 October 2020</b></p> <p><b>Keeping Children Safe in Education (DFE) 2020</b></p> <p><b>NSPCC We have the right to be safe’ Protecting disabled children from abuse</b></p> <p><b>Categories of abuse outlined and a detailed appendix attached</b></p> <p><b>Early Help Agenda</b></p>	<p><b>DSL – Claire Range</b></p>
<p><b>May 2023</b></p>	<p><b>Policy updated to include Peer on Peer abuse including sexting.</b></p>	<p><b>DSL – Claire Range</b></p>
<p><b>May 2024</b></p>	<p><b>Policy updated to include updates from KCSIE Ep 2023</b></p>	<p><b>DSL – Claire Range</b></p>
<p><b>Jan 2025</b></p>	<p><b>Policy updated to include updates from KCSIE Sep 2024</b></p> <p><b>Updates to MASH referrals Sep 2024</b></p>	<p><b>DSL – Claire Range</b></p>

## Appendix 1

### Categories and Definitions of Abuse

#### **Physical Abuse**

Physical abuse is deliberately hurting a child causing injuries such as bruises, broken bones, burns or cuts.

Types of physical abuse include:

- Hitting or smacking
- Shaking
- Throwing
- Poisoning
- Burning and scalding
- Drowning
- Suffocating
- Fabricating or Inducing Symptoms of illness in a child
- Any other way of causing physical harm.

#### **Emotional Abuse**

Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on their emotional development. This may involve:

- Conveying they are worthless, unloved, inadequate or only valued insofar as they meet the needs of another person.
- Not giving a child opportunity to express their views, 'making fun' of what they say or how they communicate.
- Inappropriate expectations for their age or development – including overprotection.
- Seeing or hearing the ill treatment of other such as domestic violence or abuse.
- Serious bullying and causing the child to feel frightened or in danger.
- Exploitation or corruption of children.
- All types of ill-treatment of a child. Even if a child is subject to another abuse from another category, they will still experience a level of emotional abuse.

#### **Neglect**

Neglect is the persistent failure to meet a child's basic physical, developmental and/or psychological needs, likely to result in the serious impairment of a child's health or development. This can also occur during pregnancy as a result of parental substance misuse. This includes when a parent or carer fails to provide:

- Adequate food clothing or shelter (including exclusion from home and abandonment).
- Protection from physical and emotional harm and danger.

- Ensure adequate supervision.
- Access to appropriate medical care or treatment.
- Meeting the child's basic emotional needs.

### **Sexual Abuse**

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

- Physical contact including penetrative and non-penetrative acts.
- Involving children looking at or in the production of sexual images.
- Watching sexual activities
- Encouraging children to behave in sexually inappropriate ways
- Grooming a child in preparation for abuse.

### **Female Genital Mutilation or FGM**

Female Genital Mutilation (sometimes referred to as female circumcision) refers to procedures that intentionally alter or cause injury to the female genital organs for non-medical reasons. It occurs mainly in Africa and to a lesser extent, in the Middle East and Asia; however, children living in the United Kingdom are still at risk of this form of abuse. Although it is believed by many to be a religious issue, it is in fact a cultural practice. There are no health benefits to Female Genital Mutilation. Communities particularly affected by FGM in the UK include girls from: Somalia, Kenya, Ethiopia, Sierra Leone, Sudan, Egypt, Nigeria, Eritrea, Yemen, Indonesia and Afghanistan. In the UK, FGM tends to occur in areas with larger populations of communities who practice FGM, such as first-generation immigrants, refugees and asylum seekers.

### **Key Points:**

- It is NOT a religious practice.
- Occurs mostly to girls aged 5-8 years old; but up to around 15.
- It has been a criminal offence in the United Kingdom since 1985.
- Offence since 2003 to take girls abroad o Criminal penalties include up to 14 years in prison.

Reasons for this cultural practice include:

- Cultural identity – an initiation into womanhood.
- Gender identity – moving from a girl to a woman – enhancing femininity
- Sexual control – reduce the woman's desire for sex

- Hygiene/cleanliness – un mutilated women are regarded as unclean.

**Risk Factors include:**

- Low level integration into UK society
- Mother or sister who has undergone FGM
- Girls who are withdrawn from PSHE
- A visiting female elder from the country of origin
  - o Being taken on a long holiday to the family's country of origin
- Talk about a 'special' event or procedure to 'become a woman' High Risk Time

This procedure often takes place in the summer, as the recovery period for FGM can be 6 to 9 weeks. Schools should be alert to the possibility of FGM as a reason why a girl in a high risk group is absent from school or where the family request an 'authorised absence' for just before or just after the summer school holidays.

Although it is difficult to identify girls before FGM takes place, where girls from these high-risk groups return from long periods of absence with symptoms of FGM, advice should be sought from the police or social services. It is a mandatory reporting duty under section 5B of the Female Genital Mutilation Act 2003 (as inserted section 74 of the Serious Crime Act 2015) there is a statutory duty upon school staff to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM has been carried out on a girl under 18.

**Post FGM symptoms include:**

- Difficulty walking, sitting or standing
- Spend longer than normal in the bathroom or toilet
- Unusual behaviour after a lengthy absence
- Reluctant to undergo normal medical examinations
- Asking for help, but may not be explicit about the problem due to embarrassment or fear.

**Longer term problems include:**

- Difficulties urinating or incontinence
- Frequent or chronic vaginal, pelvic or urinary infections
- Menstrual problems
- Kidney damage and possible failure
- Cysts and abscesses to pain when having sex

- Infertility
- Complications during pregnancy and childbirth
- Emotional and mental health problems

### **Forced Marriage**

There is a clear difference between ‘forced marriage’ and ‘arranged marriage’. Arranged marriages have worked well in society for many years. An arranged marriage is when families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses.

A forced marriage is when one or both parties do not consent to the marriage, and people are forced into marriage against their will. Forced marriage is an abuse of human rights. Both physical and emotional abuse may be used to coerce people into the marriage.

In law both parties to a marriage must validly consent to the marriage, the minimum age a person is able to consent to a marriage is 16. A Force Marriage Protection Order can be obtained from a Family Court in order to protect victim, both adults and children from a potential forced marriage or people who are already in a forced marriage.

Potential warning signs or indicators that a child is at risk of Forced Marriage

- Absence and persistent absence
- Request for extended leave of absence and failure to return from visits to country of origin
- Fear about forthcoming school holidays
- Surveillance by siblings or cousins at school ▪ Decline in behaviour, engagement, performance.
- Poor exam results
- Being withdrawn from school by those with parental responsibility
- Removal from a day centre of a person with a physical or learning disability
- Not allowed to attend extra-curricular activities
- Sudden announcement of engagement to a stranger
- Prevented from going on to further/higher education

Allanson Street acknowledges that persistent absence from school or requests for leave of absence can be an indicator of a potential safeguarding risk. The issues surrounding Forced Marriage link directly to the school attendance policy; any absences from school will be followed up in accordance with this policy. This is to ensure that we make every effort to know a child’s whereabouts and make sure they are safe to the best of our ability.

What to do if you have a concern regarding Forced Marriage?

Forced Marriage is an offence and if this is happening to a child under the age of 18 it is considered to be child abuse. If you suspect that a child or young person is being forced to marry then you must share your

concerns with the Designated Senior Lead (DSL) who will make appropriate contact with Children's Social Care or the Police.

The Forced Marriage unit can be contacted for advice and help in making the referral.

Telephone **020 70080151**

### **Radicalisation and Extremism**

Radicalisation refers to the process by which a person comes to support terrorism and/or extremism leading to terrorism.

Extremism is defined by the Government in the Prevent Strategy (2010) as:

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.

Extremism is defined by the Crown Prosecution Service as:

The demonstration of unacceptable behaviour by using any means or medium to express views which:

- Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
- Seek to provoke others to terrorist acts;
- Encourage other serious criminal activity or seek to provoke others to serious criminal acts; or • Foster hatred which might lead to inter-community violence in the UK

### **Indicators of vulnerability include:**

- Identity crisis – the pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society
- Personal crisis – the pupil may be experiencing family tensions, a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship groups and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging.
- Personal Circumstances – migration; local community tensions; and events affecting a pupil's country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy.
- Unmet Aspirations – the pupil may have perceptions of injustice; a feeling of failure; rejection of civic life
- Experiences of criminality – which may include involvement with criminal groups, imprisonment and poor resettlement/reintegration
- Special Educational Needs – the pupil may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motives of others

(This is not an exhaustive list, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism).

Allanson Street work reflects the government **PREVENT** strategy (July 2015) in their approach to radicalisation and extremism. Staff are required to read elements of the prevent strategy relating to school and education. Any concerns regarding radicalisation or extremism in children and young people should be passed onto the school's single point of contact or SPOC.

The SPOC will then refer on to the local PREVENT officer, Children's Social Care and/or the

Police. The PREVENT single point of contact (SPOC) in school is the Designated Senior Lead and

Deputy Lead **Claire Range and Lynsey Dingsdale**

The PREVENT officer for St. Helens is **John Danher. Tel 0151 777 8383.**

### **Child Sexual Exploitation**

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

#### **Warning Signs and Symptoms of Child Sexual Exploitation**

- Can be difficult to identify and can be mistaken for 'normal' teenage behaviour
- Be involved in abusive relationships
- Hang out with groups of older people, anti-social groups or with other vulnerable peers
- Associates with other young people involved in sexual exploitation
- Get involved in gangs, gang fights, gang memberships
- Have older boyfriends or girlfriends
- Spend time at places of concern such as hotels or known brothels
- Not know where they are because they have been moved around the country
- Go missing from home, care or education
- Have expensive items such as mobile phones that they can't or won't explain.
- Be very secretive about what they are doing online
- Have access to drugs or alcohol.

How do we manage suspected cases of Child Sexual Exploitation?

Allanson Street will respond to suspected cases of Child Sexual Exploitation in relation to St. Helens safeguarding procedures.

St. Helens Safeguarding Children's Board has its own subgroup dedicated to CSE known as Multi Agency Child Sexual Exploitation group(MACSE)

If a child or young person is at risk or suspected of being sexually exploited, concerns should be passed on to the Designated Senior Lead **Mrs C Range or Mrs L Dingsdale** immediately. The child or young person will then be referred onto the Police and contact may also be made with Children's Social Care.

Referral forms can be found on St. Helens Safeguarding Children's Board website within the Merseyside Multi Agency Protocol Child Sexual Exploitation or a copy can be requested from the Designated Senior Lead within School.

### **Allegations of abuse made against other pupils**

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as "banter", "just having a laugh" or "part of growing up" as this can lead to a culture of unacceptable behaviours and an unsafe environment for pupils. We also recognise the gendered nature of child-on-child abuse. However, all child-on-child abuse is unacceptable and will be taken seriously.

Most cases of pupils hurting other pupils will be dealt with under our school's behaviour policy, but this child protection and safeguarding policy will apply to any allegations that raise safeguarding concerns.

This might include where the alleged behaviour:

- Is serious, and potentially a criminal offence.
- Could put pupils in the school at risk.
- Is violent.
- Involves pupils being forced to use drugs or alcohol.
- Involves sexual exploitation, sexual abuse, sexual violence, or sexual harassment, such as
  - indecent exposure, sexual assault, upskirting or sexually inappropriate pictures or videos (including sharing of nudes and semi-nudes).

Procedures for dealing with allegations made against other pupils

- If a pupil makes an allegation of abuse against another pupil:
- You must record the allegation and tell the DSL, but do not investigate it.
- The DSL will contact the local authority children's social care team and follow its advice, as well as the police if the allegation involves a potential criminal offence.
- The DSL will put a risk assessment and support plan into place for all children involved (including the victim(s), the child(ren) against whom the allegation has been made and any others affected) with a named person they can talk to if needed. This will include considering school transport as a potentially vulnerable place for a victim or alleged perpetrator(s).
- Staff keep the child's circumstances under review and re-refer if appropriate, to ensure the circumstances improve
- The child's best interest must always come first at all stages
- The DSL will contact the children and adolescent mental health services (CAMHS), if appropriate.
- If the incident is a criminal offence and there are delays in the criminal process, the DSL will work

closely with the police (and other agencies as required) while protecting children and/or taking any disciplinary measures against the alleged perpetrator. We will ask the police if we have any questions about the investigation.

- Creating a supportive environment in school and minimizing the risk of peer-on-peer abuse
- We recognise the importance of taking proactive action to minimise the risk of peer-on-peer abuse, and of creating a supportive environment where victims feel confident in reporting incidents.

To achieve this, we will:

- Challenge any form of derogatory or sexualised language or inappropriate behaviour, between peers, including requesting or sending sexual images.
- Being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female pupils, and initiation or hazing type violence with respect to boys.
- Ensuring our curriculum helps to educate pupils about appropriate behaviour and consent.
- Ensuring pupils are able to easily and confidently report abuse to a trusted adult.
- Ensure staff reassure victims that they are being taken seriously.
- Be alert to reports of sexual violence and/or harassment that may point to environmental or systemic problems that could be addressed by updating policies, processes and the curriculum, or could reflect wider issues in the local area that should be shared with safeguarding partners.
- Support children who have witnessed sexual violence, especially rape or assault by penetration. We will do all we can to make sure the victim, alleged perpetrator(s) and any witnesses are not bullied or harassed.
- Consider intra familial harms and any necessary support for siblings following a report of sexual violence and/or harassment.

Ensuring staff are trained to understand:

- How to recognise the indicators and signs of peer-on-peer abuse and know how to identify it and respond to reports.
- That even if there are no reports of child-on-child abuse in school, it does not mean it is not happening – staff should maintain an attitude of “it could happen here”
- That if they have any concerns about a child’s welfare, they should act on them immediately rather than wait to be told, and that victims may not always make a direct report. For example:
  - Children can show signs or act in ways they hope adults will notice and react to.
  - A friend may make a report.
  - A member of staff may overhear a conversation.
  - A child’s behavior might indicate that something is wrong.
- That certain children may face, additional barriers to telling someone because of their vulnerability, disability, gender, ethnicity and/or sexual orientation.
- That a pupil harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy.
- The important role they have to play in preventing child-on-child abuse and responding where they believe a child may be at risk from it.

- That social media is likely to play a role in the fall-out from any incident or alleged incident, including for potential contact between the victim, alleged perpetrator(s) and friends from either side.
- That they should speak to the DSL if they have any concerns.
- The Headteacher, with support from the DSL will take the lead role in any disciplining of the alleged perpetrator(s). We will provide support at the same time as taking any disciplinary action.
- Disciplinary action can be taken while other investigations are going on, e.g., by the police. The fact that another body is investigating or has investigated an incident doesn't (in itself) prevent our school from coming to its own conclusion about what happened and imposing a penalty accordingly. We will consider these matters on a case-by-case basis, taking into account whether:
- Taking action would prejudice an investigation and/or subsequent prosecution – we will liaise with the police and/or LA children's social care to determine this.
- There are circumstances that make it unreasonable or irrational for us to reach our own view about what happened while an independent investigation is ongoing.

### **Sharing of nudes and semi-nudes ('Sexting')**

Your responsibilities when responding to an incident

- If you are made aware of an incident involving the consensual or non-consensual sharing of nude or semi-nude images/videos (also known as 'sexting' or 'youth produced imagery') you must report it to the DSL immediately

You must not:

- View, copy, print, share, store or save the imagery yourself, or ask a pupil to share or download it (if you have already viewed the imagery by accident, you must report this to the DSL).
- Delete the imagery or ask the pupil to delete it.
- Ask the pupil(s) who are involved in the incident to disclose information regarding the imagery (this is the DSL's responsibility).
- Share information about the incident with other members of staff, the pupil(s) it involves or their, or other, parents and/or carers.
- Say or do anything to blame or shame any young people involved.
- You should explain that you need to report the incident and reassure the pupil(s) that they will receive support and help from the DSL and or the pastoral lead.

### **Private Fostering**

Private Fostering is where a child under the age of 16 (or 18 if they have a disability) goes to live with someone who is not a close relative for 28 days or more. It is a private agreement between a parent and another adult.

A close relative includes a parent, step-parent, grandparent, brother, sister, uncle or aunt (whether blood related or through marriage). Private foster carers may be from the extended family such as a cousin or great aunt, a friend of the family, the parent of a friend of the child or someone previously unknown to the child's family.

Examples of private fostering could include:

- Children or young people who are sent to this country for education or health care by their parents from overseas.
- Teenagers living with a friend's family because they do not get on with their own family.
- Children living with a friend's family because their parents study or work involves unsociable hours, which makes it difficult to use ordinary day care or after school care.
- Children staying with another family because there has been bereavement, serious illness or their parents have divorced or separated.
- A child from overseas staying with a host family while attending school or overseas students at boarding school who do not stay with a host family during the holidays.

Education and other professionals have a duty to notify the Local Authority and Children's social care when they believe there is a private fostering arrangement and they are not satisfied that the Local Authority has been or will be notified by the parent or carer.

Private Foster carers also have a responsibility to notify the Local Authority.

If a member of staff or any individual believes that a child is being privately fostered, they should contact Children's Social Care or inform the Designate Senior Lead who will make the referral.

### **Whistleblowing**

**If you're a professional with concerns over how child protection issues are being handled in our school or another organisation, you can talk to us anonymously too:**

**NSPCC Whistleblowing helpline: 0800 028 0285**

The Whistleblowing Advice Line offers free advice and support to professionals with concerns about how child protection issues are being handled in their own or another organisation.

### **Peer on Peer Abuse More information.**

In cases where peer on peer abuse is identified we will follow our child protection procedures, recognising that both the victim and perpetrator will require support.

We recognise that peer on peer abuse can manifest itself in many ways such as:

- Child Sexual Exploitation
- Sexting or youth produced digital imagery
- Bullying
- Radicalisation
- Abuse in intimate relationships
- Children who display sexually harmful behaviour
- Gang association and serious violence
- Technology can be used by for bullying and other abusive behaviour
- Child on child sexual violence and sexual harassment.
- Up skirting



There are a number of factors that make children more vulnerable to peer on peer abuse: experience of abuse within their family; living with domestic violence young people in care; children who go missing; children with additional needs (SEN and/or disabilities).

Research tells us girls are more frequently identified as being abused by their peers, girls are more likely to experience unwanted sexual touching in schools. Boys are less likely to report intimate relationship abuse. Boys report high levels of victimisation in areas where they are affected by gangs. There is an increasing evidence base emerging on the sexual exploitation of boys (both by adults and peers). We recognise that both boys and girls experience peer on peer abuse but they do so in gendered ways.

### **Sexting**

The school recognises that 'sexting' is a growing concern amongst professionals and parents as it can expose children to risks, particularly if the imagery is shared further. It can lead to embarrassment, bullying and increased vulnerability to sexual exploitation. Producing and sharing images of under-18's is also illegal.

There is no clear definition of what is 'sexting' and indeed many professionals, young people and parents have different interpretations ranging from sending flirty messages to sending nude or semi-nude photographs via mobiles or over the internet.

This guidance is based on the UKCCIS Sexting in Schools and Colleges guidance 2018. The full guidance is located at UKCCIS 2018 Guidance. This guidance covers:

- A person under the age of 18 creates and shares sexual imagery of themselves with a peer under the age of 18
- A person under the age of 18 shares sexual imagery created by another person under the age of 18 with a peer under the age of 18 or an adult
- A person under the age of 18 is in possession of sexual imagery created by another person under the

age of 18 It does not cover:

- The sharing of sexual imagery of people under 18 by adults as this constitutes child sexual abuse and schools should always inform the police and CSC.
- Young people under the age of 18 sharing adult pornography or exchanging sexual texts which don't contain imagery.

The term youth produced sexual imagery has been adopted to provide some clarity and to distinguish it from imagery where there are adults involved in some manner.

The purpose of this guidance is to make expectations clear to pupils and their parents and carers as well as to be clear to staff about the school's policy and procedure in responding to incidents.

This policy forms part of our school's safeguarding arrangements and our response to concerns about 'sexting' will be guided by the principle of proportionality and our primary concern at all times is the welfare and protection of the children and young people involved.

The school recognises that it is an offence under the Sexual Offences Act 2003 to possess, distribute, show and make indecent images of children (a child being under 18 year) but it does not define what is indecent.

However, the police accept that the law which criminalised indecent images of children was created before the technological advances of today and it originally sought to protect children from adults. It was not intended to criminalise children. Despite this, children who share sexual imagery of themselves or peers are breaking the law and therefore we will seek to manage this type of case appropriately.

All professionals including the National Police Chiefs Council agree that incidents involving youth produced imagery should primarily be treated as a safeguarding issue. It is agreed that we should not unnecessarily criminalise children as the consequence of this can be significant in terms of their life chances in adulthood. Where children do share images, it is often as a result of natural curiosity and exploring relationships and in the context of the digital world we live in. The school is therefore empowered to deal with the majority of these incidents without involving the police.

### **Up skirting**

The school recognises that up skirting is a growing concern amongst professionals and parents and it can expose children to risks. Definition of Up skirting: Up skirting is typically when a photograph is taken under a persons clothing without them knowing, for sexual gratification or to cause the victim humiliation, distress or harm.

Victims will be re-assured and taken seriously and supported and kept safe. The referral process will take place as set out in paragraph 36 in Part one of the KCSE. If staff are in any doubt they would speak to the DSL or Deputy DSL

The school may become aware of the issue in a variety of ways i.e. from the child direct, a friend of parent or a member of staff. We recognise that the child is likely to be very embarrassed and worried about what might happen. We also recognise the pressure that is on a child can be under to take part in sharing such imagery but we will reassure them they are not on their own and will help and support them. We will also help them to understand what has happened and the context for the concerns. We will also discuss issues of consent and trust within healthy relationships. All incidents will be followed in line with our safeguarding and child protection policy. Where an incident comes to our attention:

- The incident will be reported to the Designated Safeguarding Lead (DSL) as soon as possible.
- An initial meeting with the appropriate school staff will be held to:
- Establish if there is immediate risk & what further information is needed, whether or not the imagery has been shared
- Consider facts about the children involved which could influence a risk assessment.
- A meeting with the young person will be held (if appropriate)
- Parents will generally be informed at an early stage

An immediate referral to children's social care and/or the police should be made if at the initial stage:

- The incident involves an adult
- The child has been coerced, blackmailed or groomed or if there are concerns about capacity to consent
- If the sexual acts are unusual for the developmental age or violent
- Children under 13 years are involved
- The child is at immediate risk e.g. suicidal or self-harming

Where the above do not apply then the school will generally deal with this matter without involving the police or children's social care although this will be subject to review.

This decision is made where we are confident that we have sufficient information to assess and manage any risks within our pastoral support and disciplinary framework. The decision will be made by the DSL and others as appropriate and will be recording.

#### **Serious Violent Crime / County Lines**

Staff have been made aware of indicators which may signal that children are at risk from or involved with serious violent crime. This may be:

- Increased absence from school
- A change in friendships or relationships with older individuals or groups
- A significant decline in performance
  
- Signs of self-harm
- Significant change in wellbeing
- Signs of assault, or unexplained injuries
- Unexplained gifts or new possessions could also indicate that individuals are involved with criminal networks or gangs.

Further advice for schools is provided in the **Home Office's Preventing Youth Violence and Gang Involvement March 2015 Criminal Exploitation of Children and Vulnerable Adult's County Lines Guidance Sept 2018.**

**Key Questions for Information Sharing**

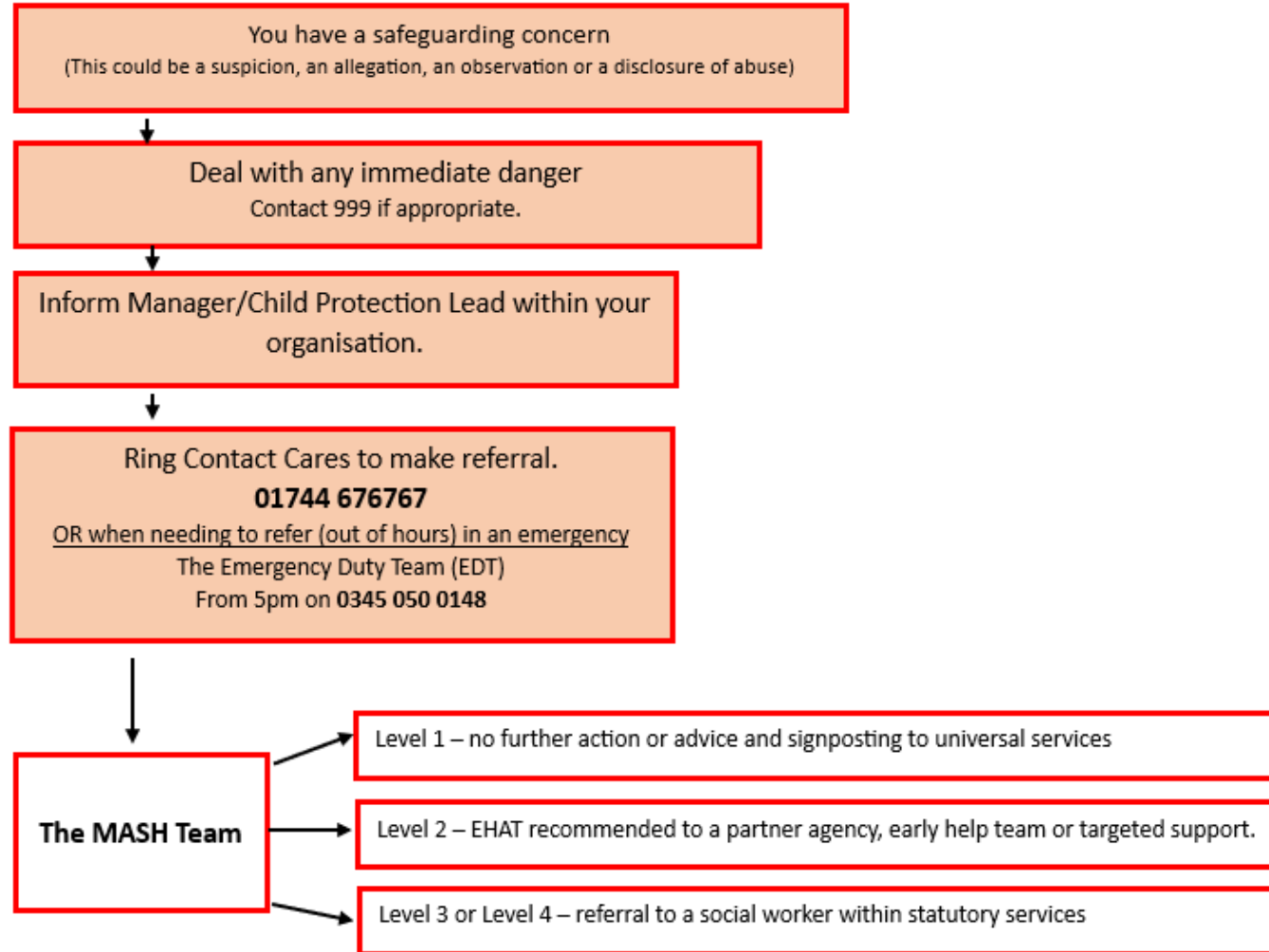
If you are asked, or wish, to share information, you must use your professional judgment to decide whether to share or not and what information it is appropriate to share, unless there is a statutory duty or a Court Order to share.

To inform your decision these seven key questions should aid you in ensuring appropriate information sharing takes place.

1. Is there a clear and legitimate purpose for you or your agency to share the information?
2. Does the information enable a living person to be identified?
3. Is the information confidential?
4. If the information is confidential, do you have consent to share?
5. If consent is refused, or there are good reasons not to seek consent to share confidential information, is there a sufficient public interest to share the information?
6. If the decision is to share, are you sharing information appropriately and securely?
7. Have you properly recorded your information sharing decision?

### Appendix 3

#### **St Helens process for reporting concerns about children (Under 18)**





**Multi-Agency Report for Initial Child Protection Case Conference**

<b><u>Agency's Name</u></b>		<b><u>Professional's Role/Job Title</u></b>	
<b><u>Professional's/Author's Name</u></b>		<b><u>Professional's Email address</u></b>	
<b><u>Professional's Address</u></b>		<b><u>Professional's Contact Number</u></b>	
<b><u>Date of Conference</u></b>		<b><u>Will you be attending? Y/N</u></b>  <b><u>If not, who will be attending on your behalf</u></b>	

<b><u>Date report shared with parent(s):</u></b>	
<b><u>Date report shared with the young person(s):</u></b>	
<b><u>If not shared; please state, why not:</u></b>	

<b><u>Children(s) Details</u></b>								
<b><u>Forename</u></b>	<b><u>Surname</u></b>	<b><u>AGE</u></b>	<b><u>DOB</u></b>	<b><u>Address</u></b>	<b><u>Disability/Special Need</u></b>	<b><u>NHS No</u></b>	<b><u>School or Nursery</u></b>	<b><u>Childs first language.</u></b>


<b>GP Details:</b>	
--------------------	--

<b>HOUSEHOLD MEMBERS</b>		
<u>Name</u>	<u>Date of birth</u>	<u>Relationship to the child/ren</u>

**SUPPORT NETWORK (identified so far)**

**Family, friends, neighbours**

<b><u>Name</u></b>	<b><u>DOB</u></b>	<b><u>Address</u></b>	<b><u>Relationship to the child/ren</u></b>	<b><u>Previously known to Children's Services (Y/N)</u></b>

**Have you contributed to the Danger Statement(s) & Safety Goal(s)**

**Yes / No (please circle answer)**

**SUMMARY OF PAST HARM**

**What is the harmful behaviour that has occurred?**

**WHAT ARE WE WORRIED ABOUT?**

**Current Harm**

**Current Risks or Concerns and how does this IMPACT upon the child(ren).**

**WHAT'S WORKING WELL?**

**(What is working well now & what has worked well in the past)**

**Existing Strengths and Safety/ Protective Factors**

**COMPLICATING FACTORS**

**(What makes the family's life and parenting experience harder?)**

**VIEWS OF THE CHILD/REN – DIRECT WORK WITH THE CHILDREN**

**(What has the child told you about their daily lived experience?)**

**OBSERVATIONS OF THE CHILD/REN**

**VIEWS OF THE PARENTS/NETWORK/SIGNIFICANT OTHERS**

**WHAT NEEDS TO HAPPEN & NEXT STEPS**

**(How can we reduce the worries and risk of harm?)**

**Describe precisely what outcomes you need to see to be satisfied there is sufficient safety.**

**How can your service contribute?**

**Based on your awareness of the family, what needs to happen to help the family achieve their Safety Goal.**

**VIEWS**

**(Please give your view re CP Safety Planning & Timescale for Change – Trajectory)**

**Views around whether  
threshold has been met for a  
child protection plan?**

**What category of abuse do you feel the child(ren) are at risk of?**

**Please note you will be asked 'Scaling Questions' at the end of the Child Protection Conference:**

**Scale on what you know so far: -**

**On a scale of zero to ten: "How safe is this child?"**

**10 = this child is safe from harm & case no longer requires targeted interventions**

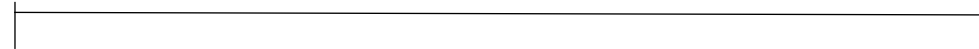
**0 = this child is not safe and is at immediate or imminent risk of harm**

**UNSAFE**

**SAFE**

**0**

**10**



**Why have you scored that number on the scale? Rationale**

**What would you want to see happening for your score to move up just one point?**

**Report completed by**

<b><u>Authors Name</u></b>		<b><u>Designation</u></b>	
<b><u>Signature</u></b>		<b><u>Date</u></b>	





## **Appendix 5** **Reporting a Concern**

<https://www.sthelens.gov.uk/concern>

Are you a professional who has concerns for a child or young person?

If you are a professional or a volunteer who comes into contact with children as part of your work, you have a statutory duty to safeguard children and report any allegations or concerns about their welfare or safety.

If you are aware that a child you are worried about has a social worker then you should share your concerns with the allocated social worker or duty social worker by contacting St Helens Children's social care on 01744 671281.

Similarly, if you have identified a child or young person who could benefit from a service or needs help and support, you have a responsibility to pass this information on to the relevant agency.

### Support for professionals

The first thing you should do if you have concerns for a child is review the St Helens descriptions of need document, and then you can consider if a referral to Children's social care is required, and if so, at what level of need. If you are unsure and need further advice:

- Speak to a colleague, your own line manager or Safeguarding lead
- Review St Helens Safeguarding Children Partnership Website  
<https://sthelenssafeguarding.org.uk/scp>
- Consider St Helens Family hubs <https://sthelensfamilyhub.sthelens.gov.uk/>
- For advice about Early Help, contact the Partnership Co-ordinators at [partnershipcoordinator@sthelens.gov.uk](mailto:partnershipcoordinator@sthelens.gov.uk)
- For staff working in an educational setting, contact the Safeguarding Children in Education Officer
- For staff working in education contact TESSA (Triage for all Education Support and Specialist Advice) on 01744 673151
- For staff working in probation or Safe2speak contact the MASH representative for your agency
- For advice about Child Protection matters contact the Contact Centre on 01744 676767 option 2 during office hours or EDT outside working hours on 0345 050 0148.
- For non-urgent advice when all the above has been considered/ completed email [MASH@sthelens.gov.uk](mailto:MASH@sthelens.gov.uk) .

There are a number of services within St Helens that can be referred to in order to support families (without the need to refer to Children's social care) so please consider these prior to referring to MASH:

Family Hubs provide access to a range of services and support for families within St Helens including information and access to a number of different agencies.

<https://sthelensfamilyhub.sthelens.gov.uk/>

BABs - Building Bonds and Breaking relationship cycles. Working with parents who have insecure attachments and poor mental health based on their own ACE's- 0151 351 8801

CGL - For adults who need support in relation to drugs and/or alcohol

<https://www.changegrowlive.org/integrated-recovery-service-st-helens/referrals>

YPDAAT for Young People who need support in relation to Drugs and/or Alcohol

<https://yaz.sthelens.gov.uk/main-sections/drugs-alcohol/>

Home start - Family Support/School Readiness/Young Persons Mentoring & Sleep Management. Volunteer's complete home visits to support families. Volunteers can provide emotional and practical support having life and lived experiences. Alternatively, volunteers provide play sessions in the home that encourage child's development, supporting them to become school ready for life's next chapter. [info@homestartsthelens.org.uk](mailto:info@homestartsthelens.org.uk)

TAZ - For young people who need relationship and sexual health support call 01744 627697

Safe2speak- domestic abuse support service call 01925 220541 or email

[safe2speak@torus.co.uk](mailto:safe2speak@torus.co.uk)

Young carers for children who are supporting another person in their family

[info@sthelensyoungcarers.org](mailto:info@sthelensyoungcarers.org)

Expectations when completing St Helens Children and Young Peoples Service Request Form Below sets out the expectations of agencies and an example of how a referral to St Helens Childrens Social Care should be completed. If you follow the below guidance it will reduce the time needed to assess concerns and ensure timely support for families at the most appropriate level.

Pointers

Why are you worried? Is the child/ren at risk of or experiencing 'Significant Harm'? (this could include physical, emotional or sexual harm or concerns the child is being neglected)

What have you seen? (where, when, who)

What have you heard? (where, when, who)

What is the impact on the child now?

What do you think the future impact on the child/ren is likely to be if CSC don't become involved?

What is the child's lived experience? i.e. what is life like for them? What do they think about their lives? Have you asked them?

Identify what you have tried already to reduce risk and meet the child/ren's needs...and reasons you think the risk remains. Or, if you are making a referral without engaging with the child/ren and family at an earlier intervention level please explain why, for example where there is an immediate risk of harm or perhaps your role doesn't bring you into direct contact with children and families. Even if the information is from a third party please refer your concerns.

Remember to separate Facts and Opinions. You can have a professional opinion but make sure this is stated clearly. For example; the young person said "I wanted to have sex with them" however in my view they were coerced and are being sexually exploited because...then list evidence that leads you to this opinion - use of substances/alcohol, significant age differences etc.

Do you have consent to make this referral? Unless it increases the risks to the child (immediate safeguarding concern) or is a risk to your own personal safety - then having the consent of parents (or the young person if they are old enough) is required for CSC to accept the referral. However, don't let the issue of consent get in the way if you are worried - you can always call for advice. Having consent is best practice and you should always endeavour to inform parents you are making a referral, but if this has not been possible please explain this within your referral.

Have you included the basic information about the parents/ key adults and their contact details? Do you know who has parental responsibility? Are there parents not living with the child? Do you know about them?

Use the tools available to support your referral

ERASE tool for Harmful sexualised behaviour- training can be booked via <https://sthelenssafeguarding.org.uk/events>

Graded care profile 2 for neglect concerns -training can be booked via <https://sthelenssafeguarding.org.uk/events>

MERIT assessment to evidence and risk assess in respect domestic abuse -for support in respect of this contact the Safe2speak team on 01925 220541 or email [safe2speak@torus.co.uk](mailto:safe2speak@torus.co.uk)

Pitfalls

Using 'Unknown' as an answer - why don't you know? Can you find out and then submit the form?

Formalising, sanitising or omitting language used. When quoting someone use their actual words, this includes swearing or slang. You may want to include clarification of what they

meant. Remember, this could become part of an evidence submission to court - don't leave room for ambiguity or dispute.

Not enough details of the impact on the child and what their lived experience is, for example a good referral would not refer to a family having "a chaotic lifestyle" but would instead separate fact from opinion and evidence the lived experiences for that child; poor school attendance (e.g. 3 days absent in the last fortnight), child cared for by multiple adults (who they are/how many are you aware of?), lack of routine and boundaries (e.g. 4 year old playing out in the street at 3am) and poor home conditions (e.g. damp, refuse piling up, flies, animal waste on carpets, no toothbrushes for the children) etc.

Avoid judgemental or stereotypical views and language. State your concerns but be respectful - would you be happy for the person you are writing about reading your comments over your shoulder?

Delays in submitting the referral. If you are worried about a child/ren then making the referral should be a priority. We know you are busy with many demands on your time, but timely referrals help to minimise risk and mean we can act faster to assess and protect children.

On the other hand, if the concerns are not immediate and you have limited information you should consider if you need to gather more information prior to making the referral and avoid premature/ poor-quality information sharing. This will ensure you are referring at the right time and providing quality information that evidences the need for social care intervention in a child's life.

Be mindful that a social worker may need to speak to you about your referral, especially if you have not provided all the information needed. MASH have a statutory timescale of 1 working day to make a decision about what should happen following a referral and therefore please try and prioritise speaking to the MASH social worker following your referral or identify a colleague who can do this on your behalf.

A top tip in a making referral is to remember that you are not telling a story you are sharing concerns about a child. Keep the child at the centre of your referral: What is a day in their life for them? What are you worried about and why? What needs to happen for things to get better? If you have been worried for a while be clear about why your referral is being submitted today. Summarise the history and your concerns in your own words and not by copying information from other records such as CPOMs.

Review & quality assure the form before submitting & consider asking your manager or safeguarding lead to review it before sending. Have you provided a good summary of your concerns - remembering the person reading the referral does not have your knowledge and understanding of the family. Have you provided evidence of impact to support the level of need you are suggesting. Have you provided as much information as possible about the family members and support networks?

Here is an example of a good quality service request form

Link to a completed form here [Good example online SRF neglect- Potter family \(PDF, 29 KB\)](#)(opens new window)

#### Frequently asked Questions

What level of need do I need to select?

In order to complete the form you must have an understanding of the St Helens descriptions of need document and therefore please review the descriptions of need document before completing the service request via the link on the form.

<https://www.sthelenssafeguarding.org.uk/p/procedures/st-helens-descriptions-of-need>

If you are still unsure after doing this and need advice about a specific child or family you can:

- Speak to a colleague, your own line manager or Safeguarding lead
- Consider St Helens Safeguarding Children Partnership Website [St. Helens Safeguarding Children Partnership - Home \(sthelenssafeguarding.org.uk\)](http://www.sthelenssafeguarding.org.uk)
- Consider St Helens Family hubs <https://sthelensfamilyhub.sthelens.gov.uk/>
- For advice about Early Help, contact the Partnership Co-ordinators at [partnershipcoordinator@sthelens.gov.uk](mailto:partnershipcoordinator@sthelens.gov.uk)
- For staff working in an educational setting, contact the Safeguarding Children in Education Officer
- For staff working in education contact TESSA (Triage for all Education Support and Specialist Advice) on 01744 673151
- For staff working in probation or Safe2speak contact the MASH representative for your agency
- For advice about Child Protection matters contact the Contact Centre on 01744 676767 option 2 during office hours or EDT outside working hours on 0345 050 0148.
- For non-urgent advice (when all the above has been considered/ completed) email [MASH@sthelens.gov.uk](mailto:MASH@sthelens.gov.uk) .

Can I save the form and come back to it later?

There is no option to save the form so once started we suggest you finish to avoid losing any work. Therefore it is key you have access to all essential information prior to starting the form.

How long will it take to complete?

There is no time limit to complete the form set but individuals may have a browser that shuts down after a certain amount of time based on your own system set up. Completion time will depend on things like how complex the concerns are and how big the family and support network is. In order to complete the form as quickly as possible it is key that you have all the families key information in front of you including names, dates of birth, addresses, ethnicity and religion.

Why wont the form move on?

You must answer all questions with a star as they are mandatory. If you cannot answer a question, then please consider if you need to obtain more information from the family or records held by your agency and come back to the form once you have the information you need.

You must try and answer your questions in the order set out on the form but if you need to go back please only use the continue, next and back options on the form to avoid losing your work.

If you have changed your answers, you may need to refresh the form and start again as there may be a previous answer selected stuck in the background.

Why cant I progress a referral to early help (level 2)?

For a level 2 referral you must have full informed consent from parents/carers to make the referral. If you do not have this, you cannot submit a referral for early help and support. Therefore, you will need to speak to the parents or carers and return to the form later. If you are unable to do this please consider other professionals who you could ask to offer support to the family or seek advice from your own manager or partnership coordinators by emailing [partnershipcoordinator@sthelens.gov.uk](mailto:partnershipcoordinator@sthelens.gov.uk).

If you do not have parents' consent to open an EHAT but feel the family are in need of level 2 support, you should consider a referral to level 2 panel. You must obtain signed consent from parents to refer to level 2 panel.

Why can't I progress a referral at level 3?

For a level 3 referral you need to advise parents/carers of your concerns and the fact that a referral is being made, whether they agree with your concerns, and the need for you to make the referral or not.

Best practice would be for you to speak to parents/carers face to face about the concerns as doing this allows opportunity for other support avenues to be identified, prior to statutory intervention, and often makes difficult conversations easier for all parties involved. It may be that you need to send a letter to the parents inviting them in for a meeting to discuss the concerns in a more planned and structured way. If your concerns are not immediate this

would be an appropriate way of engaging the family, prior to referring to Children's social care and without leaving any children at risk of immediate harm.

Alternatively, you may choose to speak to the parent/carer over the phone or complete a home visit. A home visit is often a very good way of getting more information about a child's living situation and helps to identify more clearly what the support needs are. It can also be a way to build relationships and understand families' situations.

If you have made all reasonable attempts to speak to parents/carers but remain unable to do this, then please answer yes to the question about discussions being held with parents on page 1 and ensure that you have informed the parents/carers in writing that you have made a referral to Children's social care (if this is safe and appropriate). That way the parent is aware but has not consented to the referral and you can detail the attempts made to speak to them further and gain consent on page 2.

I work in a hospital and I need to make a referral without discussions with the parent as they have left before I was able to speak to them?

As part of the hospital triage process, the parent/patient should have been advised that information will be shared with relevant agencies should there be safeguarding concerns identified. However it is best practice to make attempts to contact the parent/carer by phone to discuss the concerns even after they have left the hospital and thus advise them why a referral to children's social care is being made.

If attempts have been made to have these discussions by phone unsuccessfully it is a matter of professional judgement (with the support of your safeguarding lead and using the St Helens descriptions of need document) to decide if the concerns warrant Children's social care involvement based on the identified risk to a child. It may be that discussions can be held with another parent/carer to reassure that the child/ren are safe.

Professionals should also consider reaching out to any other partner agencies who may be working with the parent/carer (e.g. health visitor, school nurse, CGL and Safe2speak) in order to gather further information and establish if a referral to Children's social care is required.

I work in probation and only have involvement with dad. I have spoken to him about my worries but not mum and the children live with mum- can I still make a referral?

On page 1 you would say yes to the question about speaking to parents and on page 2 you would stipulate that the person you have spoken to is dad and explain why not mum. In the box considering parents' responses it is key that you highlight that dad is aware that the concerns in respect of him will be shared with mum. You should provide mum's contact details if you are able to obtain these from dad or your own records.

However if dad doesn't want mum to be spoken to we need to be able to evidence the need to share this information without his agreement, in order to safeguard the children and therefore you need to be clear why this needs to happen e.g. dad has confirmed that he is

spending time with his child unsupervised and you are worried that he poses a risk to the child- be clear why you have this worry. If he will not or cannot provide mum's details this should be recorded on the form.

Alternatively, if dad reports that the child's mum is aware of the concerns in respect of him and as a result, he is spending time with his child under the supervision of another family member it would be appropriate for you to seek dad's consent to contact mum and confirm with mum what the arrangements for dad's time with the child are. Following the conversation with mum you may be reassured that the child is safe and therefore you may not need to make a referral to Children's social care, or you may just wish to confirm the outcome of previous Children's social care involvement and safety plans agreed via a probation safeguarding enquiry form when applicable (dependant on the region you work within).

If you are unsure if a referral is required, then seek advice from the MASH probation representative before submitting your referral or email [MASH@sthelens.gov.uk](mailto:MASH@sthelens.gov.uk), requesting advice.

I submitted a service request as level 3 but it was screened by Early help, why?  
Every service request form submitted is reviewed by a MASH manager to determine what needs to happen and the level of screening that needs to be completed. This decision is based on the information provided in the service request form and also on the family history known to us. All screening is completed by a qualified social worker but if screening is at level 2 this is completed by a social worker within the early help service. L2 screening is completed when there are indications that parents are requesting and/or willing to engage in support and there is a potential need for multi-agency coordinated support, as opposed to concerns of risk and harm to children. Similarly, if you submit a level 2 service request but a MASH manager considers there are concerns of risk or harm to a child, the screening would be escalated to level 3 or 4.

I have more evidence to support my referral such as pictures of poor home conditions, a voice of the child tool or a child in need plan- can I include this?

Yes at the end of the form there is an option to add supporting documents. Please ensure that everything you wish to attach to your referral is saved in one file on your desktop so you can then attach more than one document if needed.

If you are requesting a Child in need transfer to St Helens please ensure you attach the most recent child and family assessment, current Child in Need plan and case summary.

Do you not need the date of birth of the child/parent as the question is not mandatory?

It is imperative that you provide us with dates of birth of all family members so that we can be sure we are considering the correct child and family and that we are obtaining all relevant information from MASH partners and possibly other Local Authorities. However we are aware that professionals working with large families may not have access to the dates of birth's for all children or both parents and therefore the question is not mandatory so that

you can at least provide the names of all the family members even if you do not know all their dates of birth and other key details.

Please provide all the details that you have for all the children, parents, and carers that you are aware of, even if the question is not mandatory- the more you tell us the better.

I know there are professionals working with the family, but I do not know their contact details.

Can you source the agency contact details via google, a colleague or just provide the name of the worker/ school if you do not have their specific number? If you do not know of any other professionals involved record "do not know" in the contact details box.

Do I get a copy of the form for my records once it is submitted?

You should review the form is accurate and all details have been included before submitting. Once submitted you will receive an email confirmation and a PDF copy of the form will be attached.

How do I know the outcome of my referral?

It is possible your referral will be progressed for a Children's social care assessment without you receiving a phone call from MASH but in this instance, you will be contacted by the social worker allocated to the children.

It is also possible that a MASH Social worker will need to contact you so please try and be available to take this call or provide an alternative professional in your agency. Speaking to referrers could be crucial to ensuring a timely and appropriate response for the child/children.

You will have a formal letter or email from MASH within 3 days of the referral been received confirming the overall outcome. Outcomes following MASH screening include progressing to a statutory assessment within duty/assessment teams, EHAT recommended, EHAT in place or no further action which will usually involve advice and signposting or targeted support.

If level 2 screening has been completed the outcome will be confirmed in writing within 5 working days.

What can I do if I am not in agreement with the outcome of the MASH screening?

You could contact the MASH team to discuss the outcome and request a copy of the signs of safety analysis. If following this you are still not in agreement with the MASH decision you should follow the Local Authority's resolution procedure- St. Helens Safeguarding Children Partnership - Multi Agency Resolution ([sthelenssafeguarding.org.uk](http://sthelenssafeguarding.org.uk))

I am a professional and I need to make a referral to Children's social care You can make a referral using the Service Request Form.