



## Child Protection Policy

As a Rights Respecting School, our philosophy is underpinned by the values and principles of the United Nation's Convention on the Rights of the Child (UNCRC).

Articles from the UNCRC which are directly linked to the PSHE curriculum at St. Lawrence School:

|                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                        |
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| <b>Article 2</b><br>All children have these rights, no matter who they are. No child should be treated unfairly on any basis.                                                                                                                                            | <b>Article 3</b><br>All adults should do what is best for you. When adults make decisions, they should think about how their decisions will affect children.                                        | <b>Article 4</b><br>The government has a responsibility to make sure that your rights are protected. They must help your family to protect your rights and create an environment where you can grow and reach your potential. | <b>Article 9</b><br>You have the right to live with your parent(s) (unless this is considered bad for you). You have the right to live with a family who cares for you.                                             |
| <b>Article 16</b><br>You have the right to privacy.                                                                                                                                     | <b>Article 19</b><br>You have the right to be protected from being hurt and mistreated, in body or mind.                                                                                            | <b>Article 20</b><br>You have the right to special care and help if you cannot live with your parents.                                      | <b>Article 21</b><br>You have the right to care and protection if you are adopted or in foster care.                                                                                                                |
| <b>Article 24</b><br>You have the right to the best health care possible, safe water to drink, nutritious food, a clean and safe environment, and information to help you stay well.  | <b>Article 25</b><br>If you live in care or in other situations away from home, you have the right to have these living arrangements looked at regularly to see if they are the most appropriate.  | <b>Article 26</b><br>You have the right to help from the government if you are poor or in need.                                                                                                                               | <b>Article 27</b><br>You have the right to food, clothing, a safe place to live and to have your basic needs met. You should not be disadvantaged so that you can't do many of the things other children can do.  |
| <b>Article 33</b><br>You have the right to protection from harmful drugs and from the drug trade.                                                                                     | <b>Article 34</b><br>You have the right to be free from sexual abuse.                                                                                                                                                                                                                | <b>Article 35</b><br>No one is allowed to kidnap or sell you.                                                                                                                                                                 | <b>Article 36</b><br>You have the right to protection from any kind of exploitation (being taken advantage of).                                                                                                                                                                                        |
| <b>Article 37</b><br>No one is allowed to punish you in a cruel or harmful way.                                                                                                       | <b>Article 39</b><br>You have the right to help if you've been hurt, neglected or badly treated.                                                                                                  | <b>Article 40</b><br>You have the right to legal help and fair treatment in a justice system that respects your rights.                                                                                                       |                                                                                                                                                                                                                                                                                                        |

As Duty Bearers, it is our responsibility to teach children their rights. This is done predominantly through PSHE sessions. Children learn about their rights, through their rights and for their rights. Staff and young people have an understanding that rights are inherent, inalienable, indivisible, universal and unconditional, using language appropriate to children and young people's age and ability.

| Academic Year | DSL              | DDSL                  | Digital Safeguarding Lead |
|---------------|------------------|-----------------------|---------------------------|
| 2017-2018     | Ms Astrid Jansen | Mr Amory Charlesworth | Mrs Kim Banks             |
| 2018-2022     | Ms Astrid Jansen | Mrs Mo McDonald       | Mrs Kim Banks             |



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|                       |                  |                       |               |
|-----------------------|------------------|-----------------------|---------------|
| 2022-2023             | Ms Astrid Jansen | Mr Amory Charlesworth | Mrs Kim Banks |
| 2023 (April) -present | Ms Astrid Jansen | Mrs Lucia Nash        | Mrs Kim Banks |

At St Lawrence School we are fully aware and committed to the on-going protection and safety of our pupils, staff and wider community in accordance with Education Department guidance. Our school is committed to providing a secure environment for pupils, where children feel safe and are kept safe. All adults in our school recognise that safeguarding is everyone's responsibility irrespective of the role they undertake or whether their role has direct contact or responsibility for children or not.

This Policy exists alongside the school's Safeguarding Policy. As a school we closely follow the guidance and policy of the Education Department ([Child Protection Policy CYPES](#) and [Keeping Children Safe Policy CYPES](#)), including advice and recommendations from the Safeguarding Partnership Board.

A copy of the Jersey Education Department's Policy is kept in the staffroom policy file and in the Headteacher's office. Copies of both this summary and the full policy are available on the school website.

All staff working at St Lawrence have a duty to share information about children that cause concern to ensure the safety and well-being of all our pupils. The following summary offers guidance for staff and parents.

### Identifying Children at Risk of Serious Harm

Teachers and other adults in school are well placed to observe any physical, emotional or behavioural signs, which indicate that a child may be suffering significant harm.

The relationships between staff, pupils, parents and the public which foster respect, confidence and trust can lead to disclosures of abuse, and/or school staff being alerted to concerns.

- Harm means ill-treatment or impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another;
- Development means physical, intellectual, emotional, social or behavioural development;
- Health includes physical and mental health;
- Ill-treatment includes sexual abuse and other forms of ill-treatment which are not physical.
- Abuse and Neglect are forms of maltreatment. Somebody may abuse or neglect a child by inflicting harm or failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting, by those known to them, or, more rarely, by a stranger. They may be abused by an adult or adults, another child, children or young people.

There are four categories of abuse; physical abuse, emotional abuse, sexual abuse and neglect.

### Recognising abuse

To ensure that our pupils are protected from harm, we need to understand what types of behaviour constitute abuse and neglect.

### Four categories of abuse:



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**Physical Abuse:** Physical abuse is a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. (This used to be called Munchausen's Syndrome by Proxy, but is now more usually referred to as fabricated or induced illness).

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

**Sexual Abuse:** Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

**Neglect:** Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:

- provide adequate food, clothing and shelter (including exclusion from home or abandonment);
- protect a child from physical and emotional harm or danger;
- ensure adequate supervision (including the use of inadequate care-givers); or
- ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. (Definitions taken from Keeping Children Safe in Education 2016.)

### **Children who may be particularly vulnerable**

Some children may have an increased risk of abuse. It is important to understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures that fail to acknowledge



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children's diverse circumstances, rather than the individual child's personality, impairment or circumstances. Many factors can contribute to an increase in risk, including prejudice and discrimination, isolation, social exclusion, communication issues and a reluctance on the part of some adults to accept that abuse can occur.

To ensure that all of our pupils receive equal protection, we will give special consideration to children who are:

- disabled or have special educational needs
- young carers
- affected by parental substance misuse, domestic violence or parental mental health needs
- asylum seekers
- living away from home
- vulnerable to being bullied, or engaging in bullying
- living in temporary accommodation
- live transient lifestyles
- living in chaotic and unsupportive home situations
- vulnerable to discrimination and maltreatment on the grounds of race, ethnicity, religion, disability or sexuality
- at risk of sexual exploitation
- do not have English as a first language

This list provides examples of additionally vulnerable groups and is not exhaustive.

### Children Looked After

As soon as a child becomes looked after (if not before), the child's social worker must notify the education service where the child is placed.

If the child is known to have a Record of Need (if in Jersey) or an Education, Health and Care Plan (England) or to be under assessment, the social worker should ensure the relevant SEN team is informed. The Social Worker will inform the Designated Teacher at School (currently Astrid Jansen) to arrange the first PEP meeting. Regular liaison should then be maintained. We refer to the [CYPES - Education of Children Looked After](#) Policy for further information. Children Looked After (or previously looked after) will have a PEP meeting, with new plans written and targets set, once a term.

### Domestic Abuse

Domestic abuse is any type of controlling, bullying, threatening or violent behaviour between people in a relationship. But it isn't just physical violence – domestic abuse includes any emotional, physical, sexual, financial or coercive/psychological abuse. It can happen in any relationship, and even after the relationship has ended. Both men and women can be abused or be abusers.

Witnessing domestic abuse is really distressing and scary for a child, and causes serious harm. Children living in a home where domestic abuse is happening are at risk of other types of abuse too. Children can experience domestic abuse or violence in lots of different ways. They might:



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- see the abuse
- hear it from another room
- see a parent's injuries or distress afterwards
- be hurt by being nearby or trying to stop the abuse.

Domestic abuse can happen in any relationship, and it affects young people too. They may not realise that what's happening is abuse. Even if they do, they might not tell anyone about it because they're scared of what will happen, or ashamed about what people will think.

### Child Sexual Exploitation

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an **imbalance of power** in the relationship. The perpetrator always holds some kind of power over the victim which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying including cyberbullying and grooming. However, it is also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse. The school includes the risks of sexual exploitation in the PSHE and SRE curriculum. A common feature of sexual exploitation is that the child often doesn't recognise the coercive nature of the relationship and doesn't see themselves as a victim. The child may initially resent what they perceive as interference by staff, but staff must act on their concerns, as they would for any other type of abuse. All staff are made aware of the indicators of sexual exploitation and all concerns are reported immediately to the Designated Safeguarding Team.

#### Indicators of CSE:

- Unhealthy or inappropriate sexual behaviour.
- Being frightened of some people, places or situations.
- Being secretive.
- Sharp changes in mood or character.
- Having money or things they can't or won't explain.
- Physical signs of abuse, like bruises or bleeding in their genital or anal area.
- Alcohol or drug misuse.
- Sexually transmitted infections.
- Pregnancy

### Children at risk of female genital mutilation (FGM)

FGM is a cultural practice that involves a procedure to remove part or all of a young girl's female genital organs. UK law regards FGM as violence against women and girls and forbids the practice in the UK. This includes the transporting of a woman or girl to another country for the purpose of carrying out the procedure. The practice of FGM can be found mainly amongst communities from sub-Saharan Africa, but can also be performed in communities from the Middle East and Asia. The procedure can be carried out at any age from birth onwards, with the average age tending to be between 10 to 12 years. The practice can



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have negative health consequences for the girl both in the short and long term. The mutilation or 'cutting' can, and does continue into adulthood affecting their quality of life emotionally, psychologically, physically and sexually. Schools need to be aware of girls who are at risk of FGM or have been abused through FGM. 20 For those at risk, schools should be aware of family plans to take the girl out of Jersey for a prolonged period. If there is good reason to suspect that the child may be about to have the procedure, schools should contact the DSO or MASH Senior Practitioner without notifying parents.

For girls who have already had the procedure, schools should be aware of girls returning from a long period abroad and any noticeable changes in behaviour or health difficulties related to this. If school has any concerns they should contact the DSL or Senior Practitioner in MASH immediately, especially if the girl has younger female siblings.

### **Taking Action to ensure children are safe at school and at home:**

#### **Safeguarding information for all staff.**

It is not the responsibility of the school staff to investigate welfare concerns or determine the truth of any disclosure or allegation. **All staff, however, have a duty to recognise concerns and maintain an open mind.**

Initial Concerns are reported to the Designated Safeguard Lead Team (Astrid Jansen, Lucia Nash) via our safeguarding portal 'MyConcern'.

If Safeguarding Leads are absent, the concern has to be raised with Children and Families Hub as well as raising it on MyConcern: [Report a concern](#) (tel.: 519000).

If you are not sure whether or not to make an enquiry to CHILDREN AND FAMILIES HUB, you can contact the team on 519000 or 449213, if the call needs to be made out of hours, contact the duty social worker via Police Headquarters, 612612.

Staff must immediately report:

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



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There will be occasions when staff may suspect that a pupil may be at risk, but have no 'real' evidence. The pupil's behaviour may have changed, their artwork could be bizarre, they may write stories or poetry that reveal confusion or distress, or physical but inconclusive signs may have been noticed.

In these circumstances, staff will try to give the pupil the opportunity to talk. The signs they have noticed may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill or an accident has occurred. If still in doubt, staff are encouraged to make a note on MyConcern.

It is fine for staff to ask the pupil if they are OK or if they can help in any way.

Staff should use the MyConcern log to record these early concerns.

Concerns which do not meet the threshold for child protection intervention could be managed through different processes such as Family Support, Wellbeing support or Early Help.

If the pupil does begin to reveal that they are being harmed, staff should follow the advice below.

### **Responding to Disclosure/Concerns**

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

Accordingly all staff will handle disclosures with sensitivity. Such information cannot remain confidential and staff will immediately communicate what they have been told to the designated person only and make a contemporaneous record on MyConcern.

### **Principles for All Staff:**

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

- Listen to and take seriously any disclosure or information that a child may be at risk of harm.
- Clarify the information by repeating their words or using TED question (Tell, Explain, Describe) e.g. 'Can you tell me what happened?' rather than 'Did x hit you?'
- Make an accurate, written record of what the child has said on MyConcern.
- Use **full name** for the child and other named persons involved.
- Be objective and factual with a verbatim reporting of what the child has said / done;
- Do not make assumptions;
- Opinions are fine but record the information on which you base this opinion;
- State the source of the information; hearsay is fine if you record it as hearsay;
- State whether you shared the information with the parent.
- Try to keep questions to a minimum and of an 'open' nature by using TED question (Tell, Explain, Describe).
- Use TED questions (Tell me about...Explain what you mean by...Describe what I would have seen if I was there).



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- Try not to show signs of shock, horror or surprise.
- Not express feelings or judgements regarding any person alleged to have harmed the child.
- Explain sensitively to the person that they have a responsibility to refer the information to the designated safeguarding officer.
- Reassure and support the person as far as possible.
- Explain that only those who 'need to know' will be told.
- Explain what will happen next and that the person will be involved as appropriate Action by the Designated Safeguarding Lead (or the Deputy Designated Safeguarding Lead in their absence).

### Key points for staff to remember for taking action are:

- in an emergency or in the absence of all members of the safeguarding team, take the action necessary to help the child, if necessary raise the concern on Children and Families Hub as well as raising it on MyConcern: [Report a concern](#) (tel.: 519000) or call 999 or 612612.
- report your concern immediately to the Designated Safeguarding Lead or a member of the DSL Team by recording your concern and the conversation you had with the child on the MyConcern portal.
- do not start your own investigation
- share information on a need-to-know basis only – do not discuss the issue with colleagues, friends or family
- seek support for yourself if you are distressed.

### Following any information raising concern, the Designated Safeguarding Lead (or any member of the DSL Team) will:

- Consider the child's wishes and feelings, but not promise confidentiality
- Consider any urgent medical needs of the child
- Consult with a member of the Children and Families Hub Team or the Education Department Safeguarding Lead (see above) if they are uncertain if a referral is required
- Inform parents that a referral is being made to the Children and Families Hub Team. The only exception to this is when we believe that discussing the referral with parents would place the child at further risk. In the case where the parent is the alleged abuser; the PARENT SHOULD NOT be informed as this may increase risk of harm to the child and/or hinder a police investigation. If in doubt over whether to inform the parent, professionals should request advice from the Children and Families Hub.
- Make an immediate referral to the Children and Families Hub enquiry verbally and electronically to the Children and Families Hub Team if there has been a disclosure and/or allegation of abuse or there are clear grounds for concerns about the child's safety and well-being
- Review Action when a child has suffered or is likely to suffer harm and consider Early Help.
- If you decide not to make a referral at this stage, retain the information in written notes on MyConcern.
- Consider if it would be appropriate to undertake an Early Help Assessment and/or make a referral for other services.
- All information and actions taken, including the reasons for any decisions made, will be fully documented on MyConcern.



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### Making an Enquiry to the Children and Families Hub

For ease of reference please see below the email address to be used by all schools when sending enquiries to the Children and Families Hub

[Report a concern](#) (tel.: 519000)

After reporting the concern, The Children and Families Hub will RAG rate your concern (Red, Amber or Green) and instructions must be followed accordingly.

### Following The Children and Families Hub referral, if a referral to Social Care has been made, the designated safeguarding lead or other appropriate member of staff will:

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

### The designated safeguarding lead or other appropriate member of staff will:

- Contact the Education Department's Designated Safeguarding Lead if they consider that the social care response has not led to the child being adequately safeguarded and follow this up in writing.
- Contact the Education Department's Designated Safeguarding Officer if they consider that the child is not being adequately safeguarded by the child protection plan and follow this up in writing.
- We will provide a secure, caring, supportive and protective relationship for the child.
- We recognise that the child's welfare is paramount. Good child protection practice and a good outcome for the child relies on a positive, open and honest working partnership with parents.
- Whilst we may, on occasion, need to make referrals without consultation with parents, we will make every effort to maintain a positive working relationship with them whilst fulfilling our duties to protect any child.
- Children will be given a proper explanation (appropriate to age & understanding) of what action is being taken on their behalf and why.
- We will endeavour always to preserve the privacy, dignity and right to confidentiality of the child and parents.
- The Designated Safeguarding Lead will determine which members of staff "need to know" personal information and what they "need to know" for the purpose of supporting and protecting the child.

### Early Help

One of the outcomes of a Children and Families Hub referral may be for the family to be supported through the Early Help process. Early Help is everyone's business and practitioners working in universal and targeted services need to be aware of their role in delivering Early Help so that Children and Families receive the right help, at the right time, by the right people, for the right reasons, where they can access it best.



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School Practitioners need to assess need using the Early Help Assessment Form and ensure that assessed need is recorded. Assessments carried out with the family provide a better analysis and plans can be developed with families to help them achieve better outcomes. Practitioners need to use the process of assessment as a way of engaging with other practitioners who may already be working with the child and their family, or to bring on board new practitioners who would be able to provide support and advice to the family. This work should be coordinated via team around the family meeting, chaired by the lead profession.

Any member of staff, or indeed the public, can make a CHILDREN AND FAMILIES HUB enquiry.

Volunteers, students or temporary staff working in school should also follow this guidance, but if in doubt, should immediately speak to the DSL or Headteacher.

### Children who harm others:

Our school recognises that the harm caused to children by the harmful and bullying behaviour of other children can be significant. Children who harm others should be held responsible for their harmful behaviour and the school staff alerted to the fact that they are likely to pose a risk to other children in the school, home and community. Where this harm involves sexual abuse, serious physical or serious emotional abuse, the safeguarding procedures set out in this policy will be applied. This school recognises that children who harm others are likely to have considerable needs themselves and may have experienced or be experiencing significant harm themselves.

### Allegations regarding person(s) working in or on behalf of the school (including volunteers)

When an allegation is made against a member of staff, set procedures must be followed in accordance with the [Dealing with Allegations against Staff & Volunteers Policy](#). It is rare for a child to make an entirely false or malicious allegation, although misunderstandings and misinterpretations of events do happen.

A child may also make an allegation against an innocent party because they are too afraid to name the real perpetrator. Even so, we must accept that some professionals do pose a serious risk to pupils and we must act on every allegation.

Staff who are the subject of an allegation have the right to have their case dealt with fairly, quickly and consistently and to be kept informed of its progress.

Allegations concerning staff who no longer work at the school, or historical allegations will be reported to the police.

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

- behaved in a way that has harmed a child or may have harmed a child;
- possibly committed a criminal offence against or related to a child; or
- behaved towards a child or children in a way that indicates he or she would pose a risk of harm if they work regularly or closely with children.



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We will apply the same principles as in the rest of this document, as well as always follow the procedures outlined in the above-mentioned document. This includes allegations against staff in their personal lives. Whilst we acknowledge such allegations (as all others) may be false, malicious or misplaced, we also acknowledge they may be founded. It is, therefore, essential that all allegations are investigated properly, in line with agreed procedures and outcomes recorded.

Refer to [Managing Allegations policy SPB](#)

### Whistleblowing

This guidance is written for staff working with children and young people in education settings including maintained schools. Staff must acknowledge their individual responsibility to bring matters of concern to the attention of senior management and/or relevant agencies. Although this can be difficult this is particularly important where the welfare of children may be at risk. You may be the first to recognise that something is wrong but may not feel able to express your concerns out of a feeling that this would be disloyal to colleagues or you may fear harassment or victimisation. These feelings, however natural, must never result in a child or young person continuing to be unnecessarily at risk.

Remember it is often the most vulnerable children or young person who is targeted. These children need someone like you to safeguard their welfare. Don't think what if I'm wrong - think what if I'm right?

Each individual has a responsibility for raising concerns about unacceptable practice or behaviour

- To prevent the problem worsening or widening
- To protect or reduce risks to others
- To prevent becoming implicated yourself

What stops people from whistleblowing

- Fear of starting a chain of events which spirals out of control
- Disrupting the work or project
- Fear of getting it wrong
- Fear of repercussions or damaging careers
- Fear of not being believed

How to raise a concern:

- We refer to the [Government of Jersey Whistleblowing](#) policy.

### Staff Training

Newly qualified teachers receive child protection training as part of their induction year.

This Child Protection Policy and our procedures are reviewed yearly.

We have regular updated Child Protection training, with all staff trained to at least Level 1.

The Designated Safeguarding Leads are trained to Level 3.

DSL - Designated Safeguarding Lead: Astrid Jansen  
Children and Families Hub  
CP - Child Protection

**Child**



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Refer concerns to the Headteacher. If allegation is about Headteacher, refer to Deputy Headteacher.



## What to do if you are concerned about a child

### [Keeping Children Safe in Education document \(CYPES\)](#)

80. If staff have any concerns about a child, they should discuss this in the first instance with the DSL who will decide on what action to take.
81. The DSL will decide whether to make a Children & Families Hub referral following a discussion with the member of staff who has raised concerns.
82. If there is any doubt about whether concerns require a referral to the Children and Families Hub, the DSL should consult the Children and Families Hub or the DSO at CYPES Education for advice.
83. Information and online referral can be found here: Children and Families Hub
84. Parents should be informed prior to the referral being made, unless making them aware would place the child at risk of further harm and/or the abuse is alleged to be by a parent. If you are unsure if a parent should be informed you should seek advice from the Children and Families Hub.
85. If parents disagree that a referral is required, but you consider the child has suffered or is likely to suffer significant harm, the referral must still be made.
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86. If the child already has an allocated Social Worker (SW), school should speak to the SW and make them aware of the concerns raised and record the information and actions agreed.
87. Once the Children and Families Hub have made a decision, they will contact the referrer and provide feedback regarding the referral outcome.
88. Where the child has suffered or likely to suffer significant harm, professional partners from the MASH will convene a strategy meeting and invite representatives from relevant agencies, including education as a key agency for any school-age child.
89. The multi-agency strategy meeting consists of discussion and analysis of the available information and an action plan is agreed to manage any risk, and to identify any additional assessments that may be required. For example, a child requiring a medical examination. This process not only considers the child concerned, but any siblings or other children who may also be at risk from harm given disclosures and information available.
90. In emergency situations where the child remains at risk of harm if left with or returned to their family/carer, a Children's Social Worker is allocated who will arrange for the child to be moved to a place of safety; this can include relatives, foster care or on occasions Robin Ward at Jersey General Hospital.



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### Recognition and dealing with disclosures

91. All staff have a responsibility to identify those children who are suffering from harm or abuse
92. All disclosures made by a child must be listened to, taken seriously and managed with sensitivity
93. On no account should adults make suggestions to the child of alternative explanations of their disclosure or 'investigate' the disclosure
94. All disclosures should be recorded accurately with the time, date and any potential witnesses.
95. If a child makes a disclosure in nursey, school or college, staff need to know:

#### What to DO

- Listen to what is said without displaying shock or disbelief and accept what the child is saying
  - Allow the child to talk freely
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- You might wish to use 'TED' questions to encourage the child to 'Tell', 'Explain' and 'Describe' the concern
  - Reassure the child that they were right to tell someone and what has happened is not their fault
  - Explain what will happen next and who has to be told about the disclosure
  - Reassure the child that you have a responsibility to keep them safe; that it may not be possible to maintain confidentiality
  - You must complete a written record of what has been disclosed and any actions taken, recording the date, time and the names of any witnesses that may have been present when the disclosure was made
  - This record should be shared with the DSL immediately and recorded on MyConcern or for non-government schools a similar safeguarding recording system. This information should also be included as part of the Children & Families Hub referral.
  - A copy of the Children & Families Hub referral form should be uploaded onto MyConcern or similar safeguarding recording system.

#### What NOT to do

- Do not ask leading questions but allow the child to tell their story
- Do not criticise the alleged perpetrator
- Do not investigate

96. Parents should be informed prior to a referral to the Children and Families Hub, except where the parent is the alleged abuser; in which case the PARENT SHOULD NOT be



# St. Lawrence Primary School



## Child Protection Policy

informed as this may increase risk of harm to the child and/or hinder a police investigation. If in doubt over whether to inform the parent, professionals should request advice from the Children and Families Hub.

CHANGE HISTORY



# St. Lawrence Primary School



## Child Protection Policy

| Version | Date Issued | Issued by          | Reason for Change                                             | Presented To<br>(initials to agree policy has been read and understood) | Approved by:       | Date     |
|---------|-------------|--------------------|---------------------------------------------------------------|-------------------------------------------------------------------------|--------------------|----------|
| 0.1     | 5.10.17     | Amory Charlesworth | Draft                                                         |                                                                         |                    |          |
| 0.2     | 21.09.21    | Amory Charlesworth | Draft                                                         |                                                                         |                    |          |
| 0.3     | 10/11/21    | Amory Charlesworth | Include FGM p4 Change flowchart                               | Whole staff                                                             | Astrid Jansen      | 10/11/21 |
| 0.4     | 06/10/22    | Astrid Jansen      | Update DDSL                                                   | Whole staff                                                             | Amory Charlesworth | 6.10.22  |
| 0.5     | 03/04/2023  | Astrid Jansen      | Update CSE and DDSL                                           | Whole staff                                                             |                    |          |
| 0.6     | 28.09.23    | Astrid Jansen      | Add Managing allegation document to whistleblowing section    | All staff                                                               | Amory Charlesworth | 28.9.23  |
| 0.7     | 27.02.25    | Astrid Jansen      | Add 'Keeping Children Safe in Education' information and Link | Amory Charlesworth                                                      | Amory Charlesworth | 28.02.25 |