



## Safeguarding Policy

**This policy has been written with reference to the following legal framework and guidance documents:**

Keeping Children Safe in Education: (DfE: Sept 2016)

Working Together to Safeguard Children (March 2015)

What to do if you're Worried a Child is Being Abused (HM Govt. 2015)

Education (Independent School Standards) (England) Regulations (2014) and (January 2015)

Preventing and tackling bullying (DfE: 2014)

DfE and ACPO drug advice for schools

Domestic Violence and Abuse (Home Office) March 2016

Female genital mutilation: multi agency practice guidelines (HM Government 2014)

Preventing youth violence and gang involvement (Home Office: March 2015)

The Right to Choose: Multi-agency statutory guidance for dealing with forced marriage (HM Government: June 2014)

National action plan to tackle child abuse linked to faith or belief (DfE August 2012)

No Health Without Mental Health strategy (Department of Health)

Mental Health and Behaviour in Schools (DfE March 2016)

This is Abuse Discussion Guide (Home Office: 2013)

Safeguarding children in whom illness is fabricated or induced (DCSF March 2008)

Schedule 10 of the Equality Act (2010)

Special Educational Needs and Disability Code of Practice, 0-25 years (DfE Department for Health: January 2015)

Safeguarding Our Children - LSCB Procedures (2007)

Supporting children and young people who are bullied: advice for schools (DfE: 2014)

Guidance for Safer Working practices for Adults Who Work with Children and Young People (2007)

What to do if you suspect a child is being sexually exploited (DfE: 2012)

Counselling in Schools: a blueprint for the future (DfE: March 2015)

Mental Health and Behaviour in School (DfE: March 2015)

Safeguarding children who may have been trafficked: practice guidance DfE Home Office: 2011



Channel Duty Guidance Protecting vulnerable people from being drawn into terrorism  
(HM Government: 2015)

Prevent Duty Guidance: for England and Wales (HMG 2015)

The Prevent Duty: Departmental Advice for Schools and Childcare Providers (DfE 2015)

The Rehabilitation of offenders Act

The Children Act 1989

Human Rights Act 1998

Data Protection Act 1984

The Protection of Children Act 1999

The Children (NI) Order

The children (Scotland) Order

Protection of Children Act (1999)

Data Protection Act (1998)

The Children Act (Every Child Matters) (2004)

Safeguarding Vulnerable Groups Act (2006)

Childcare Act 2006

## **Introduction**

The policy incorporates the Department for Education guidance contained within 'Keeping Children Safe in Education', issued in March 2015, July 2015 and re-issued in September 2016, " Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children" (March 2015), London Child Protection Procedures and pays regard to the Prevent duty 2015. We have a separate written policy for the Prevent Duty and for Safer Recruitment.

## **Definitions**

Safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring children are growing up in circumstances consistent with the provision of safe and effective care.



The Children's Act 1989 requires all Local Authorities and Schools to:

- Take action to safeguard and promote the welfare of any child who is suffering or likely to suffer 'significant harm'
- Safeguard and promote the welfare of any child who is 'in need'

There are two parts to safeguarding:

- A duty to protect children from maltreatment
- A duty to prevent impairment of health and development

Promoting welfare means:

- Creating opportunities to enable children to have optimum life chances

### Significant Harm

The concept of Significant Harm introduced by the **Children Act 1989** is the threshold by which compulsory intervention by Social Services may take place:

- Harm means ill treatment or the impairment of health or development;
- Development means physical, intellectual, emotional, social or behavioural development;
- Health means physical or mental health; and ill treatment includes sexual abuse and forms of ill treatment which are not physical.

Child Protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer from significant harm.

Effective child protection is essential as part of wider work to safeguard and promote the welfare of children. However, all agencies and individuals should aim to proactively safeguard and promote the welfare of children so that the need for action to protect children from harm is reduced.



## **Our Vision**

At Alamiyah School we are concerned about the safety and wellbeing of all children. We will work with children, parents and the community to ensure the rights and safety of children and to give them the very best start in life to ensure that all children are safe secure and happy.

## **Our Commitment to Safeguarding Children**

At Alamiyah School,

- o We endeavor to be a place where pupils, staff, helpers, families and other visitors will be made welcome and comfortable and where we will treat each other with respect.
- o We believe that all children and young people have the right to protection from neglect and abuse and that their welfare is of paramount importance.
- o Learning and personal development takes place in a climate of trust and confidence and where everyone's unique contribution to our community is valued.
- o We maintain an environment, which promotes the safety, wellbeing and development of children.
- o We help children to establish and sustain satisfying and trusting relationships within their families and with peers, teachers and other adults.
- o We create an environment, which encourages children to develop a positive self-image, regardless of race, language, religion, culture or home background.
- o We enable children to have self-confidence and the ability to express their feelings.
- o We recognize that everyone has a responsibility for safeguarding and promoting the welfare of children and young people and for ensuring that they are protected from harm.



- o All staff and volunteers working in the school have a duty to ensure that children are safe and protected and we all have a duty to ensure that if there are any concerns relating to the welfare or safety of a child the Barking and Dagenham Child Protection procedures are followed.
- o We will always try to work in partnership with families but in any conflict between the needs of the child or young person and those of parents/carers or professionals, the needs of the young person must come first.
- o We are committed to safe recruitment and selection procedures to ensure that all staff and volunteers have been appropriately screened prior to appointment, and to the provision of appropriate child protection training through the staff induction programmed and within continuing professional development opportunities.
- o We have a separate written Safer Recruitment Policy and Whistleblowing Policy
- o We have a separate written Prevent Duty Policy and British Values Policy
- o We have a separate written E-Safety Policy and Anti Bullying Policy

**Scope of this policy:**

- o To provide clear direction to staff and others about expected codes of behaviour in dealing with Child Protection issues.
- o To make explicit the school's commitment to the development of good practice and sound procedures so that child protection concerns and referrals are handled sensitively, professionally and in ways that support the needs of the child.
- o To promote effective liaison with other agencies in order to work together for the protection of all members of the community.



## Designated Safeguarding Lead (DSL)

The Designated Safeguarding Lead is **Hanan Musa**. The Designated Officer who oversees this work is the Principal: **Saahera Motara**. The Deputy Designated Safeguarding Lead is **Nasima Bobat** and the Governor Safeguarding Lead is **Angela Misra**.

- All schools have to have a senior member of staff with responsibility for implementing the child protection policy. In our school the designated member of staff with child protection responsibility is Hanan Musa
- As the designated safeguarding lead for child protection, Hanan Musa will have regular child protection training and will make sure that all staff and volunteers know how to recognise and report any concerns or indications that a child is or has been neglected or abused.
- Hanan Musa will provide information to the board regarding the number, nature and outcomes of referrals made.
- Hanan Musa will make any necessary contact with the appropriate safeguarding team or the police and he will make sure that the school follows the LSCB and are committed to working in partnership with the Children's Services Duty and Assessment Team.
- Hanan Musa will follow procedures and contributes fully to the child protection process.

## Management and Governors

The designated safeguarding lead undertakes roles and responsibilities (single agency) training and Local Safeguarding Children Board (LSCB) interagency training at a minimum of every 2 years.

The Directors and Governors will attend roles and responsibility training every 2 years and other safeguarding training as appropriate. If they are not the designated safeguarding lead, they will also be included in the school based child protection training.

## All Staff

In accordance with the guidance KCSIE (Keeping children safe in Education) 2016 all staff including DSL's will do a refresher course and will also be updated annually on any additional



guidance issued on safeguarding to provide them with relevant skills and knowledge to safeguard children effectively.

- o We ensure that all staff read and sign to say that they have read at least Part One of this guidance.
- o We ensure that mechanisms are in place to assist staff to carry out their duties safely.
- o All staff members are made aware of systems within school which support safeguarding and these are explained to them as part of staff induction. This includes:
  1. The Safeguarding Policy and Procedures;
  2. The Behaviour Management Policy;
  3. Anti Bullying Policy
  4. E-Safety Policy
  5. The Staff Handbook (outlining staff code of conduct)
  6. The role of the designated safeguarding lead;
  7. The Arrival and Departure of children Policy;
  8. The Visitor Policy;
  9. The Missing child policy;
  10. The Uncollected child policy;
  11. The Health and Safety Policy;
  12. Admissions Policy;
  13. Attendance and Punctuality Policy;

Copies of all policies and a copy of Part One of this document (Keeping children safe in education) are provided to staff at induction.

All staff should be aware of the early help process, and understand their role in it which includes identifying emerging problems, liaising with the designated safeguarding lead, sharing information with other professionals to support early identification and assessment.

## **Induction**

All staff, including supply staff, on site contractors, support services, teaching practice students and volunteers working in the school will be given induction information regarding this policy.



## **Training**

All members of staff will receive child protection training as part of their induction by the designated safeguarding lead for child protection or an external expert in addition to annual refresher training. Staff will update their training every 2 years. Please see our training record for details on our most recent Safeguarding training session. Training is updated regularly for the Head who is also the DSL, and all staff every year.

Hanan Musa will be responsible for ensuring the Central Training Record is kept up to date specifically with regards to child protection training.

## **Volunteers and Teaching Practice Students**

All volunteers and short term or supply staff will be informed of their responsibility to safeguard children and will be provided with training and they will be given the name of the designated safeguarding lead.

## **Capital Programme**

We will ensure that during the progress of any building or other on site works, contractors will be issued with relevant child protection information. This will include our expectation of their conduct whilst on site.

## **Recruitment**

*Please see Safer Recruitment Policy*

The Governors will ensure, in keeping with the recommendations of the Bichard Inquiry and the DfE guidance on *Safeguarding Children*, that our recruitment and selection policy is robust in following up references, DBS checks and career gaps.



## Whistleblowing

*Please see the School's Whistleblowing Policy for more details*

Where a staff member feels unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, other whistleblowing channels may be open to them:

- o General guidance can be found in our Whistleblowing Policy and Staff Handbook
- o The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Mon to Fri and Email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk).

## Supporting Children

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school their behaviour may be challenging and defiant or they may be withdrawn. The school will endeavour to support the pupil through:

- the content of the curriculum;
- the school ethos which promotes a positive, supportive and secure environment and gives pupils a sense of being valued;
- the school behaviour policy which is aimed at supporting vulnerable pupils in the school. The school will ensure that the pupil knows that some behaviour is unacceptable but they are valued and not to be blamed for any abuse which has occurred;
- liaison with other agencies that support the pupil such as social services, Child and Adult Mental Health Service (CAHMS), education welfare service and educational psychology service;
- ensuring that, where a pupil on the child protection register leaves, their information is transferred to the new school immediately and that the child's social worker is informed.



## **Particularly Vulnerable Children**

We recognise that for a number of reasons, children with special needs are more vulnerable to abuse, and may be less able to tell people about abuse happening to them. For these reasons, it is essential that rigorous child protection procedures are in place, especially with regard to recruitment, checks on volunteers and paid workers, whistle blowing policies, and having clear guidelines setting out acceptable behaviour by those working with children with disabilities. Support for children for whom English is an additional language and children in care may also require extra consideration.

## **Looked After Children**

Looked After Children (LAC) is the term applied to children who are not living in the family home and whose welfare has become the responsibility of the local authority. Mostly the children are placed with foster carers but can be living with a member of the extended family or in a larger residential foster home. The children may be in this situation for a number of reasons such as a lone parent being seriously ill or hospitalised, or a temporary crisis for the family. Most are in local authority care due to suspected or proven abuse or continued lack of appropriate care.

Looked after children can be particularly vulnerable. We will work with the local authority and carers in formulating a Personal Education Plan (PEP) to lessen the impact on the child. These plans will be reviewed regularly. The DSL will be responsible for ensuring that the needs of looked after children are being met in the school by:

- Maintaining a register of all children in public care on the role of the school. Ensuring an induction meeting takes place when a LAC joins the school.
- Obtaining educational records from the child's last school.
- Ensuring that within 3 weeks of a child in public care entering the school or changing a care placement, a Personal Education Plan is completed with the Social Worker and carer.
- Sharing relevant personal information sensitively with other people that need to know.
- Ensuring that high expectations are set in school for children in public care.
- Ensuring that they or someone appropriate acts as an advocate for each child in public care.



- Ensuring good liaison with the child's Social Worker and other Children, Schools and Families Service staff.
- Ensuring that all teachers are aware of what may be particular issues for children in public care.
- Establishing good communication systems between relevant teachers and carers. Supporting carers and school staff to ensure that any special educational needs of children in public care are met.
- Encouraging children in public care to value education.
- Participating in training and support networks for Designated Teachers set up by the local authority.

## **Early Help**

Early help is a means of providing support as soon as a problem emerges. It can be provided at any point in a child's life, from the foundation years through to their teenage years. It involves working together effectively with local agencies to help improve outcomes for a child.

In most cases, parents can look after their children without the need of further help apart from family and friends. There are some parents who struggle and may require additional help from the school or other additional services. Providing early help is more effective in promoting the welfare of children than help that is put in place once a more acute problem emerges. Alamiyah School will work together with other agencies to provide a coordinated offer of early help, in accordance with multi agency working practices recommended in the guidance 'Working Together to Safeguard Children' 2016.

We will pool our knowledge within the school and with other agencies about which families or children need additional support in a range of ways so that we can work out how best to help them. We will work closely with targeted early help services and Children's Social Care if we feel families need more support and input, or children are at risk of harm, and we will continue to provide support if other services are also needed through a Multi Agency Panel and/or a CAF.

We will talk to the family about referral to a targeted early help service and explain that there may be a need to involve other professionals, including talking to a social worker about our concerns. We will seek the family's consent for the referral. If the family does not consent to an



early help service, we will make a judgement about whether the needs of the child will escalate or the child will become unsafe without help. If our judgement is that the needs or concerns will escalate, then we will contact the MASH team for a consultation with a qualified social worker in order to make a shared decision about whether the level of concerns calls for a referral to Children's Social Care.

## The Categories of Abuse

All school staff should be aware that abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap with one another.

Through their day-to-day contact with children and direct work with families, education staff have a crucial role to play in noticing indicators of possible abuse or neglect and referring those concerns to the appropriate investigative agencies (social services and police).

The Children Act 1989 introduced the concept of "Significant Harm" as the threshold that justifies compulsory intervention in family life in the interests of children.

There are no absolute criteria to rely on when judging what constitutes significant harm. Overall, it can be described as the detrimental outcome of various forms of child maltreatment to the child's wellbeing.

- **Harm** means ill treatment or the impairment of health or development.
- **Development** means physical, intellectual, emotional, social or behavioural development.
- **Ill-treatment** includes sexual abuse and forms of ill treatment, which are not physical.
- **Health** includes physical or mental health.

Where the question of whether harm suffered by a child is significant turns on the child's health and development, the child's health or development shall be compared with that which could reasonably be expected of a similar child.

There are four main categories of abuse – **physical injury, neglect, sexual abuse** and **emotional abuse**. The list of symptoms given is not exhaustive or comprehensive but consists of frequently observed symptoms. It is important to remember that most abuse involves more



than one main type, for example, sexual and emotional abuse may be recognised together. These symptoms, for example cuts and grazes, may also be accidental and not a sign of abuse. These different types of abuse require different approaches. A child suffering from physical abuse may be in immediate and serious danger. Action should, therefore, be taken immediately. With other forms of abuse there is a need to ensure that adequate information is gathered.

There is also a need to make sure that grounds for suspicion have been adequately investigated and recorded. The need to collate information must be balanced against the need for urgent action. If there are reasonable grounds for suspicion, then a decision to monitor the situation should only be taken after consultation. A situation that should cause particular concern is that of a child who fails to thrive without any obvious reason. In such a situation a medical investigation will be required to consider the causes.

## **Physical Injury**

### **Signs & Symptoms:**

- o Bruises and abrasions - especially about the face, head, genitals or other parts of the body where they would not be expected to occur given the age of the child. Some types of bruising are particularly characteristic of non-accidental injury especially when the child's explanation does not match the nature of injury or when it appears frequently.
- o Slap marks — these may be visible on cheeks or buttocks.
- o Twin bruises on either side of the mouth or cheeks - can be caused by pinching or grabbing, sometimes to make a child eat or to stop a child from speaking.
- o Bruising on both sides of the ear — this is often caused by grabbing a child that is attempting to run away. It is very painful to be held by the ear, as well as humiliating and this is a common injury.
- o Grip marks on arms or trunk - gripping bruises on arm or trunk can be associated with shaking a child. Shaking can cause one of the most serious injuries to a child; i.e. a brain haemorrhage as the brain hits the inside of the skull. X-rays and other tests are required to fully diagnose the effects of shaking. Grip marks can also be indicative of sexual abuse.



- o Black eyes – are mostly commonly caused by an object such as a fist coming into contact with the eye socket. NB. A heavy bang on the nose, however, can cause bruising to spread around the eye but a doctor will be able to tell if this has occurred.
- o Damage to the mouth – e.g. bruised/cut lips or torn skin where the upper lip joins the mouth.
- o Bite marks
- o Fractures
- o Poisoning or other misuse of drugs – e.g. overuse of sedatives.
- o Burns and/or scalds – a round, red burn on tender, non-protruding parts like the mouth, inside arms and on the genitals will almost certainly have been deliberately inflicted. Any burns that appear to be cigarette burns should be cause for concern. Some types of scalds known as ‘dipping scalds’ are always cause for concern. An experienced person will notice skin splashes caused when a child accidentally knocks over a hot cup of tea. In contrast a child who has been deliberately ‘dipped’ in a hot bath will not have splash marks.

## **Neglect**

### **Signs and Symptoms:**

- o Dirty
- o Lack of appropriate clothing
- o Smells of urine
- o Unkempt hair
- o No parental interest (a distinction needs to be made between situations where children are inadequately clad, dirty or smelly because they come from homes where neatness & cleanliness are unimportant and those where the lack of care is preventing the child’ from thriving.)
- o Underweight — a child may be frequently hungry or pre-occupied with food or in the habit of stealing food or with the intention of procuring food. There is particular cause for concern where a persistently underweight child gains weight when away from home, for example, when in hospital or on a school trip. Some children also lose weight or fail to gain weight during school holidays when school lunches are not available and this is a cause for concern.



- o Body sores
- o Not wanting to communicate
- o Behaviour problems
- o Attention seeking
- o Lack of respect
- o Often in trouble – police
- o Bullying
- o Use of bad language
- o Always out at all hours
- o Stealing
- o Lack of confidence – low self-esteem
- o Jealousy

## **Sexual Abuse**

### **Signs and Symptoms:**

- o A detailed sexual knowledge inappropriate to the age of the child.
- o Behaviour that is excessively affectionate or sexual towards other children or adults.
- o Attempts to inform by making a disclosure about the sexual abuse often begin by the initial sharing of limited information with an adult. It is also very characteristic of such children that they have an excessive preoccupation with secrecy and try to bind the adults to secrecy or confidentiality.
- o A fear of medical examinations.
- o A fear of being alone — this applies to friends/family/neighbours/baby-sitters, etc
- o A sudden loss of appetite, compulsive eating, anorexia nervosa or bulimia nervosa.
- o Excessive masturbation is especially worrying when it takes place in public.
- o Promiscuity
- o Sexual approaches or assaults - on other children or adults.
- o Urinary tract infections (UTI), sexually transmitted disease (STD) are all cause for immediate concern in young children, or in adolescents if his/her partner cannot be identified.



- o Bruising to the buttocks, lower abdomen, thighs and genital/rectal areas. Bruises may be confined to grip marks where a child has been held so that sexual abuse can take place.
- o Discomfort or pain particularly in the genital or anal areas.
- o Drawing of pornographic or sexually explicit images.
- o Withdrawn
- o Rejecting physical contact or demanding attention

## **Emotional Abuse**

### **Signs and Symptoms:**

- o Crying
- o Rocking
- o Withdrawn
- o Not wanting to socialise
- o Cringing
- o Picking up points through conversation with children
- o Bad behaviour
- o Aggression
- o Behaviour changes
- o Bribery by parent
- o Self-infliction
- o Lack of confidence
- o Attention seeking
- o Isolation from peers – unable to communicate
- o Clingy
- o Afraid of authoritative figures
- o Treating others as they have been treated

## **Child Sexual Exploitation (CSE)**

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 cyber-bullying and grooming. However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

### **Female Genital Mutilation (FGM)**

*Please refer to our policy on FGM.*

FGM is a form physical and emotional abuse and it is a criminal offence to perform the procedure or assist in carrying out FGM.

Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There are a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person.

Victims of FGM are likely to come from a community that is known to practise FGM.

Professionals should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them, so sensitivity should always be shown when approaching the subject. For information on warning signs that FGM may be about to take place, and what to do, see Appendix on FGM.

Staff should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care.

### **Female Genital Mutilation (FGM): Mandatory Reporting Duty**

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) will place a statutory duty upon teachers, along with social workers and healthcare professionals, to report to the police where they discover (either through disclosure



by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining students, but the same definition of what is meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory reporting duty applies. The Mandatory reporting duty commenced in October 2015. Once introduced, teachers must report to the police cases where they discover that an act of FGM appears to have been carried out. Unless the teacher has a good reason not to, they should still consider and discuss any such case with the school’s designated safeguarding leader and involve children’s social care as appropriate.

## **Preventing Radicalisation**

**From 1 July 2015 specified authorities, including all schools (and since 18 September 2015 all colleges)** as defined in the summary of this guidance, are subject to a duty under section 26 of the **Counter-Terrorism and Security Act 2015 (“the CTSA 2015”)**, in the exercise of their functions to have due regard to the need to prevent people from being drawn into terrorism”. This duty is known as the Prevent Duty

Protecting children from the risk of radicalisation should be seen as part of schools’ wider safeguarding duties, and is similar in nature to protecting children from other forms of harm and abuse. During the process of radicalisation, it is possible to intervene to prevent vulnerable people being radicalised. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Specific background factors may contribute to vulnerability which are often combined with specific influences such as family, friends or online, and with specific needs for which an extremist or terrorist group may appear to provide an answer. The Internet and the use of social media in particular has become a major factor in the radicalisation of young people. As with managing other safeguarding risks, staff should be alert to changes in children’s behaviour, which could indicate that they may be in need of help or protection. School staff should use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme. ***The School’s Prevent Officer is Hanan Musa***



## **Honour Based Violence**

So-called 'honour-based' violence (HBV) encompasses crimes, which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so-called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubts staff should speak to the designated safeguarding lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

## **Online Safety**

Please see E-Safety Policy

Use of technology has become a significant component of many safeguarding issues. Child sexual exploitation; radicalisation; sexual predation- technology often provides the platform that facilitates harm. An effective approach to online safety empowers a school or college to protect and educate the whole school or college community in their use of technology and establishes mechanisms to identify, intervene and escalate any incident where appropriate.

The breadth of issues classified within online safety is considerable, but can be categorised into three areas of risk:

- Content: being exposed to illegal, inappropriate or harmful material
- Contact: being subjected to harmful online interaction with other users
- Conduct: personal online behaviour that increases the likelihood of, or causes, harm

As part of the requirement for staff to undergo regularly updated safeguarding training (paragraph 64) and the requirement to ensure children are taught about safeguarding, including online (paragraph 68), online safety training for staff is integrated, aligned and considered as part of the overarching safeguarding approach.



## Specific Safeguarding Issues

Expert and professional organizations are best placed to provide up-to-date guidance and practical support on specific safeguarding issues. For example information for schools and colleges can be found on the TES website and NSPCC website. Schools and colleges can also access broad government guidance on the issues listed below via the GOV.UK website:

- o Child missing from education
- o Child missing from home or care
- o Child sexual exploitation (CSE)
- o Bullying including cyber bullying
- o Domestic violence
- o Drugs
- o Fabricated or induced illness
- o Faith abuse
- o Female genital mutilation (FGM)
- o Forced marriage
- o Gangs and youth violence
- o Gender-based violence/violence against women and girls (VAWG)
- o Mental health
- o Private fostering
- o Preventing radicalisation
- o Sexting
- o Teenage relationship abuse
- o Trafficking
- o Missing children and adults.
- o Hate
- o Honour based violence including breast ironing

It is essential that children are safeguarded from potentially harmful and inappropriate online material. As such governing bodies and proprietors should ensure appropriate filters and appropriate monitoring systems are in place. Peer on peer abuse can manifest itself in many ways. We see sexting as a safeguarding issue.



Children with special educational needs (SEN) and disabilities can face additional safeguarding challenges. Our child protection policy reflects the fact that additional barriers can exist when recognising abuse and neglect in this group of children.

### **Abuse linked to faith or beliefs**

There is no agreed definition of or consensus about the concept of 'child abuse linked to faith or belief'. Child abuse linked to faith or belief can be separated into four areas as follows;

1. Abuse that occurs as a result of a child being accused of witchcraft or of being a witch
2. Abuse that occurs as a result of a child being accused of being 'possessed by spirits' that is, 'spirit possession'
3. Ritualistic abuse
4. Satanic abuse

The forms the abuse can take include;

- **Physical abuse:** beating, burning, cutting, stabbing, semi-strangulating, tying up the child, or rubbing chilli peppers or other substances on the child's genitals or eyes
- **Emotional abuse:** in the form of isolation {e.g. not allowing a child to ear or share a room with family members or threatening to abandon them}. The child may also be persuaded that they are possessed
- **Neglect:** failure to ensure appropriate medical care, supervision, school attendance, good hygiene, nourishment, clothing or warmth
- **Sexual abuse;** within the family or community, children abused in this way may be particularly vulnerable to sexual exploitation

Child Abuse linked to faith and/or belief is not confined to one faith, nationality or ethnic community. Examples have been recorded worldwide among Europeans, Africans, Asians and elsewhere as well as in Christian, Muslim, Hindu and pagan faiths among others. Not all those who believe in witchcraft or spirit possession harm children. Data on numbers of known cases suggests that only a tiny minority of people with such beliefs go on to abuse children.

Common factors that put a child at risk of harm include;



- Belief in evil spirits: this is commonly accompanied by a belief that the child could 'infect' others with such 'evil'. The explanation for how a child becomes possessed varies widely, but includes through food that they have been given or through spirits that have flown around them;
- Scapegoating because of a difference: it may be that the child is being looked after by adults who are not their parents (i.e. privately fostered), and who do not have the same affection for the child as their own children;
- Rationalising misfortune by attributing it to spiritual forces and when a carer views a child as being 'different' because of disobedience, rebelliousness, over-independence, bedwetting, nightmares, illness or because they have a perceived or physical abnormality or a disability; Disabilities involved in documented cases included learning disabilities, mental ill health, epilepsy, autism, a stammer and deafness;
- Changes and / or complexity in family structure or dynamics: there is research evidence (see Stobart, Child Abuse linked to Accusations of Spirit Possession - see related links] that children become more vulnerable to accusations of spirit possession following a change in family structure (e.g. a parent or carer having a new partner or transient or several partners). The family structure also tended to be complex so that exact relationships to the child were not immediately apparent. This may mean the child is living with extended family or in a private fostering arrangement (see Children Living Away from Home Procedure, Private Fostering - see related link). In some cases, this may even take on a form of servitude;
- Change of family circumstances for the worse: a spiritual explanation is sought in order to rationalise misfortune and the child is identified as the source of the problem because they have become possessed by evil spirits. Research evidence is that the family's disillusionment very often had its roots in negative experiences of migration: in the vast majority of identified cases in the UK to date, the families were first or second generation migrants suffering from isolation from extended family, a sense of not belonging or feeling threatened or misunderstood. These families can also have significantly unfulfilled expectations of quality of life in the UK;
- Parental difficulties: a parent's mental ill health appears to be attributed to a child being possessed in a significant minority of cases. Illnesses typically involved include post-traumatic stress disorder, depression and schizophrenia.



## **The Law in relation to child abuse linked to faith and belief**

There are sufficient existing laws within the UK with which to prosecute those responsible for child abuse linked to faith and/or belief thereby negating any need for further more specific offences.

## **What to do if you suspect a child is at risk from abuse linked to faith and/or belief**

Concerns about a child's welfare can vary greatly in terms of their nature and seriousness. If you have concerns about a child, you should report your concerns to the DSL.

## **Action to be Taken**

Sometimes concerns that a child or young person is suffering or is likely to be suffering some form of abuse will build up slowly over time, and some will be as a response to a child presenting an injury or mark or talking about a worrying issue. All concerns should be recorded on a Cause for Concern Form and should be referred to the designated safeguarding lead, who will provide support and guidance and if appropriate will make a referral to the safeguarding team and if necessary the police.

## **Disclosures by a Child**

Sometimes children and young people who are suffering abuse choose a trusted adult to tell. If a child discloses abuse in school, the person hearing the disclosure should:

- o Listen, allowing the child to recall freely;
- o Reassure the child that they are believed;
- o Make notes as soon as possible on the cause for concern form' recording as accurately as possible the words used by the child;
- o But be clear with the child that the information will have to be passed on and that there are people who will be able to help; and
- o **DO NOT ASK THE CHILD QUESTIONS;** This is the role of specially trained social workers and police officers. Others posing questions to the child could contaminate potential evidence of a crime.
- o Stress that it was the right thing to tell.
- o Do not criticise the alleged perpetrator.



- o Explain what has to be done next and who has to be told.
- o Inform the DSL without delay.
- o **DO Record and Report all disclosures to the DSL**
- o Complete the cause for concern form and pass it to the DSL.
- o Dealing with a disclosure from a child and safeguarding issues can be stressful. Consider seeking support for yourself and discuss this with the DSL.

## **What Action to Take if You Have Concerns about a Child**

### **Members of staff, governors, volunteers, contractors or activity providers:**

1. Discuss your concerns with the DSL Hanan Musa, or in their absence, with the Deputy DSL Nasima Bobat, as soon as possible, before the child leaves for the day. It is important that the child is not sent home at the end of the day without taking the right protective action.
2. Complete the cause for concern form and pass it to the DSL.
3. If the DSL or their deputy is not available, you should contact the Children's Social Care Duty and Assessment Team yourself for a consultation about the action you need to take. Inform the DSL about your consultation and what actions you have taken.

### **Designated safeguarding lead**

#### **If you are concerned that the child is at risk of significant harm**

1. Contact the relevant Duty and Assessment Team immediately. See Appendix A
2. If you believe that the child is in immediate danger, or you suspect a crime has been committed, you must also contact the police immediately.
3. If the Duty and Assessment Team accepts the concern as a referral, send them a completed statement of referral (available on the Barking and Dagenham safeguarding for professionals section of the website.) within 24 hours.
4. The Duty and Assessment Team may decide, in discussion with you, that the child's needs fall below their thresholds and that support can be given through the Multi Agency Panel or via a CAF.



5. Record all your discussions and decision-making on the cause for concern conversations log and attach to the cause for concern form submitted by the teacher. Add it and a copy of the statement of referral to the child's child protection file. If the child does not have a stand-alone child protection file, you will need to create one including a front sheet. Update or start the chronology. Continue to update the child's file and chronology as the investigation and the resulting work carry on.

**You believe the child is not at risk of significant harm, but the child or their family may need support**

1. Discuss your concerns with senior colleagues in another agency, if necessary.
2. Contact the Duty and Assessment Team for a consultation, without necessarily identifying the child in question, in order to develop an understanding of the child's needs and circumstances.
3. If the Duty and Assessment Team accepts your contact as a referral for social care assessment, send them a completed statement of referral within 24 hours, as above.
4. If your consultation results in the decision that the child and family are in need of help but not through Children's Services, provide additional support in the school and/or refer the child or their family to other agencies providing early help services.
5. Record all your consultations and decision-making on the cause for concern conversations log and attach to the cause for concern form submitted by the teacher. Add it and a copy of the statement of referral to the child's child protection file. If the child does not have a stand-alone child protection file, you will need to create one including a front sheet. Update or start the chronology. Continue to update the child's file and chronology as the investigation and the resulting work carry on.



## **Discussing Concerns with the Family and the Child – Advice for the Designated Safeguarding Lead**

1. In general, we will discuss any concerns the school may have with the child's parents. They need to know that we are worried about their child. However, we will not discuss our concerns if we believe that this would place the child at greater risk or lead to loss of evidence for a police investigation.
2. If we make a decision not to discuss our concerns with the child's parents or carers this will be recorded in the child's child protection file with a full explanation for our decision.
3. It is important to consider the child's wishes and feelings, if age appropriate, as part of planning what action to take in relation to concerns about their welfare.
4. When talking to children, we will take account of their age, understanding and preferred language, which may not be English. It is also important to consider how a disabled child may need support in communicating.
5. How we talk to a child will also depend on the substance and seriousness of the concerns. We may need to seek advice from Children's Social Care or the police to ensure that neither the safety of the child nor any subsequent investigation is jeopardised.
6. If concerns have arisen as a result of information given by a child, it is important to reassure the child but not to promise confidentiality.
7. It is expected that we discuss our concerns with the parents and seek their agreement to making a referral to Children's Social Care, unless we consider that this would place the child at increased risk of significant harm.
8. We do not need the parents' consent to make a referral if we consider the child is in need of protection, although parents will ultimately be made aware of which organisation made the referral.
9. If parents refuse to give consent to a referral but we decide to continue, we will make this clear to Children's Social Care.
10. If we decide to refer the child without the parents' consent, we will record this with a full explanation of our decision.
11. When we make our referral, we will agree with Children's Social Care what the child and parents will be told, by whom and when.



## **If Children's Social Care Accepts a Referral for a Social-Care-Led Response**

1. A senior social work practitioner and their manager will evaluate the concerns to identify the sources and levels of risk and to agree what protective action may be necessary.
2. The evaluation of concerns and risks involve deciding whether:
  - a. the child needs immediate protection and urgent action is necessary; or
  - b. the child is suffering, or at risk of suffering, significant harm and enquiries need to be made under section 47 of the Children Act 1989; or
  - c. the child is in need and should be assessed under section 17 of the Children Act 1989.
3. We will cooperate with Children's Social Care and the police in any emergency action they take using their legal powers for immediate protection of the child. This may involve removing the child from their home.
4. We will participate in any multi-agency discussions (strategy discussions), if invited to do so, and share information about the child and their family to plan the response to concerns.
5. We will share information about the child and their family for section 47 enquiries and family assessments undertaken by Children's Social Care.
6. We will ensure that a relevant staff member participates in all initial and review child protection conferences, if we are invited to attend. The staff member will work together with other agencies to discuss the need for and agree to an outcome focused child protection plan and will ensure that the child's wishes and views are considered in their own right in planning.
7. If we are members of the core group to implement a child protection plan, we will ensure a relevant staff member participates in all core group meetings.
8. We will ensure that we complete all actions allocated to us as part of the outcome focused plan, whether a child protection plan or a family support plan, in a timely way.
9. We will continue to monitor children once their plans are ended to ensure that they are supported and kept safe.



## Information sharing

At Alamiyah we share information with parents and partner agencies to:

- Support early intervention to help children, young people and families who need additional services to achieve positive outcomes
- Ensure we fulfil our duty to safeguard children and promote their welfare

The Data Protection Act is not a barrier to sharing information, but is in place to ensure that personal information is shared appropriately. At Alamiyah we follow the guidance below to ensure we share information both professionally and lawfully.

At Alamiyah the decision to share information when there are child protection concerns will be made by the designated safeguarding lead

## 6 Key Points

1. Explain openly and honestly to parents/ carers at the outset what information will or could be shared, and why, and seek agreement, except where doing so puts the child or others at risk of significant harm
2. The child's safety and welfare must be the overriding consideration when making decisions on whether to share information about them
3. Ensure information is accurate, up-to-date, and necessary for the purpose for which you are sharing it, shared only with those who need it and shared securely.
4. Respect the wishes of children or families who do not consent to share confidential information unless in your judgement there is sufficient need to override that lack of consent.
5. Seek advice when in doubt
6. Always record the reasons for your decision whether it is to share or not to share information

(Ref: Making It Happen: Working together for children, young people and families, DfE, 2006)



## Record Keeping

The Data Protection Act states that personal information held by agencies must be obtained and processed fairly and lawfully and stored securely. It must be accurate, proportionate to the purpose, not held longer than necessary and may only be disclosed in appropriate circumstances.

Record keeping is an important aspect of our school life, staff keeps records on all areas of pupil welfare, development and attainment for a period of 5 years; and this is made clear to parents through The Alamiyah Parent Handbook.

Where concerns arise about the safety or wellbeing of a pupil, or there are indications that the child may be suffering or at risk of suffering significant harm, staff will record:

- The reason for the concern;
- What was said or witnessed and details of any other persons present;
- Dates and times of incidents and when the notes were made;
- Date, time and outcome of any discussion with the parent or carer; and
- Date, time and outcome of any discussion with the head teacher, social services staff or other relevant professionals consulted.
- use a body map to record any injuries or marks to the child's body

Staff will use the school's Cause for Concern Forms and will be careful to distinguish between fact, opinion and hearsay. Notes will be passed to the designated safeguarding lead who will keep all concern forms and child protection records in a locked cabinet.

Any information recorded will be kept in a separate named file, in a secure cabinet and not with the child's academic or personal files. These files will be the responsibility of the Senior Designated Person and information will only be shared within school on a need to know basis for the protection of the child. Any safeguarding information will be kept in the secure file and will be added to. Copies of referrals, invitations to child protection conferences, core groups and reports will be stored here. All our safeguarding files will have a chronology and contents on the front cover and will record significant events in the child's life.



These records form evidence and may be used in the child protection referral and any subsequent investigation or legal proceedings, they are exempt from the open file regulations and do not have to be made available to parents or carer's requesting access to the pupil's file.

Unless to do so would put a child at significant risk, parents and carers may see these forms. Good practice and partnership working dictates that if anything is significant enough to be recorded it should be discussed with parents and carers unless this increases risks for the child or damages the potential for the collection of evidence.

Any welfare and child protection records will be passed on to the next school if the designated safeguarding lead believes they still constitute a concern. The safeguarding team will hold any formal records of child protection groups or meetings and they will take responsibility for the appropriate storage of these records.

If a child leaves our school we will ensure that our Senior Designated Person makes contact with the senior designated person at the following school and the file will be forwarded with appropriate security.

## **Confidentiality**

All adults and children connected to Alamiyah are entitled to privacy. In general, confidential information about children, families or others within the school should be kept confidential and privacy respected.

Where there are concerns that a child is suffering or likely to suffer significant harm, information must be shared with the designated safeguarding lead in the first instance and may subsequently be shared with the safeguarding team and the police.

Where staff or other adults in school have concerns, either due to what they have seen or heard or in relation to a direct disclosure by a child, they cannot keep that information confidential and the child must not be given false guarantees that this is possible. It must be shared with the designated safeguarding lead in the interests of safeguarding that child.



Other staff may need to be alerted to concerns about a child or young person, possibly in order to monitor the concern or to gather further evidence prior to a referral being made, or to assist in providing appropriate support to a child or young person after a referral has been made.

Information should only be shared on a strictly need to know basis.

## **Images of children**

### **Images of pupils used as a record of school events and for use in school brochures**

We believe that images of children are an important record of school life. We have a procedure for the use of images of children, which is reinforced at school events. This procedure is reviewed annually and cross-checked with the guidance on safeguarding children. Parental permission is sought at the time of school admission.

## **Managing Allegations Against other Pupils**

The new 'Keeping children safe in education' statutory guidance says that 'governing bodies... should ensure that there are procedures in place to handle allegations against other children' (paragraph 40).

In most instances, the conduct of pupils towards each other will be covered by our Behaviour Policy. Some allegations may be of such a serious nature that they may raise safeguarding concerns. These allegations are most likely to include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is also likely that incidents dealt with under this policy will involve older students and their behaviour towards younger students or those who are vulnerable.

At Alamiyah we believe that all children have a right to attend school and learn in a safe environment. Children should be free from harm by adults in the school and other pupils.

We recognise that some pupils will sometimes negatively affect the learning and wellbeing of others and their behaviour will be dealt with under our Behaviour Policy.



## **Safeguarding Allegations Against other Pupils**

Due to the age groups of the children it is unlikely that this would happen although it is possible as we admit more older pupils that allegations may be made against pupils by others in the school, which are of a safeguarding nature. Safeguarding issues raised in this way may include physical abuse, emotional abuse, sexual abuse and sexual exploitation. It is likely that to be considered a safeguarding allegation against a pupil, some of the following features will be found. The allegation:

- Is against an older pupil referring to their behaviour towards a younger or more vulnerable pupil
- Is of a serious nature, possibly including a criminal offence
- Raises risk factors for other pupils in the school
- Indicates that other pupils may have been affected by this student
- Indicates that young people outside the school may be affected by this student

### ***Examples of safeguarding issues against a student could include:***

#### **Physical Abuse**

- Violence, particularly pre-planned
- Forcing others to use drugs or alcohol

#### **Emotional Abuse**

- Blackmail or extortion
- Threats and intimidation Sexual Abuse
- Indecent exposure, indecent touching or serious sexual assaults
- Forcing others to watch pornography or take part in sexting

#### **Sexual Exploitation**

- Encouraging other children to attend inappropriate parties
- Photographing or videoing other children performing indecent acts



In areas where gangs are prevalent, older pupils may attempt to recruit younger pupils using any or all of the above methods. Young people suffering from sexual exploitation themselves may be forced to recruit other young people under threat of violence.

### **Minimising the risk of safeguarding concerns towards pupils from other students**

On occasion, some pupils will present a safeguarding risk to other students. The school should be informed that the young person raises safeguarding concerns, for example, if they have experienced serious abuse themselves.

These pupils will need an individual risk management plan to ensure that other pupils are kept safe and they themselves are not laid open to malicious allegations. There is a need to balance the tension between privacy and safeguarding.

### **What to do in the event of a safeguarding allegation against another pupil**

When an allegation is made by a student against another pupil:

1. members of staff should consider whether the complaint raises a safeguarding concern. If there is a safeguarding concern the Designated safeguarding lead (DSL) should be informed.
2. A factual record should be made of the allegation, but no attempt at this stage should be made to investigate the circumstances.
3. The DSL should contact social services to discuss the case. It is possible that social services are already aware of safeguarding concerns around this young person.
4. The DSL will follow through the outcomes of the discussion and make a social services referral where appropriate.
5. The DSL will make a record of the concern, the discussion and any outcome and keep a copy in the files of both pupils'.
6. If the allegation indicates a potential criminal offence has taken place, the police should be contacted at the earliest opportunity and parents informed (of both the student being complained about and the alleged victim).
7. It may be appropriate to exclude the pupil being complained about for a period of time according to the school's behaviour policy and procedures.



8. Where neither social services nor the police accept the complaint, a thorough school investigation should take place into the matter using the school's usual disciplinary procedures.
9. In situations where the school considers a safeguarding risk is present, a risk assessment should be prepared along with a preventative, supervision plan.

The plan should be monitored and a date set for a follow up evaluation with everyone

### **Allegations Against Staff**

We believe that all members of the school community are entitled to receive care and protection from harm. We will not accept inappropriate behavior towards pupils or staff, and will ensure that any concerns or allegations of impropriety are dealt with quickly, fairly and sensitively.

Staff Allegations:

If a member of staff at the school has been alleged to have:

- 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 that he/she would pose a risk of harm to the children

Then the Staff Allegation Procedure must be implemented if the allegation is against a member of staff currently working or volunteering at the School regardless of whether the abuse took place at the School or not. If the staff member has left or is a historic case then the matter should be referred to the police.

### **Procedure for an Allegation made against a Staff Member**

In the event that an allegation of abuse is made against a member of staff or other adult in the Primary School the following procedures are followed (for the LA procedure see Appendix B):

Initial Action by person receiving or identifying an allegation or concern

1. Treat the matter seriously and keep an open mind



2. Make a written record of the information using the Cause for Concern Record Form, including the time, date and place of incident/s, persons present and what was said and sign and date this Immediately report the matter to the DSL or deputy in their absence or where the DSL is the subject of the allegation report to the Designated Officer /Principal.

### **Initial Action by the Designated Safeguarding Lead.**

If the DSL is the subject of the allegation, then the Designated Officer/Principal or the Governor Safeguarding Lead will take the following action:

1. Obtain written details of the concern or allegation but do not investigate or interview child, adult or witnesses
2. Contact the LADO within 24 hours by filling in a LADO Referral Form and emailing to [lado@lbbd.gov.uk](mailto:lado@lbbd.gov.uk) or call Children's Social Care after hours service if they cannot be reached.

This will be followed up by calling Teresa De Vito or Mike Cullern on 020 8227 3934 or 020 8227 3896 in accordance with Child Protection Procedures provided by Barking and Dagenham Social Services and follow through with the procedures outlined in their guidance.

3. Discuss with the LADO next steps using the London Child Protection Procedures Flow Charts Allegations/Concerns Against Staff
4. The Child Protection Advisor will then discuss how to proceed and whether to complete a Multi Agency Referral Form [MARF] [childrens@lbbd.gov.uk](mailto:childrens@lbbd.gov.uk).
5. Inform Joy Barter the Group Manager Early Years Foundation Stage.
6. Inform the Designated Officer/Principal
7. Use the Ofsted online notification system no later than 14 days after the allegation

### **Subsequent Action by the Designated Safeguarding Lead or Designated Officer**

**If a referral to social services is not needed then:**

1. The DSL/DO will decide whether an internal investigation is necessary
2. The member of staff will be suspended for the duration of the investigation except in exceptional circumstances



3. If the allegation is proven the member of staff may be dismissed if the incident constitutes gross misconduct and the board of directors decide that this puts the children, staff, parents and school at risk.

**If a referral has been made then:**

1. A disciplinary investigation will be conducted
2. Maintain contact with the LADO, keep clear and comprehensive records regarding the allegation, and action taken and outcome are retained on the staff member's personnel file
3. Contribute to the child protection process by attending professional strategy meetings if needed
4. The Designated Officer/Principal will consult LADO will decide whether a referral to the DBS should be made
5. The DBS Disclosure and Barring Service / ISA, Independent Safeguarding Authority will be informed [the ISA will add the staff name to the ISA register] of the dismissal of the staff member so the name may be included on the List for the Protection of Children and Vulnerable Adults.

**Outcome of Allegation:**

**Terminology**

**Substantiated:**

Sufficient evidence to prove allegation.

**Malicious:**

Sufficient evidence to disprove the allegation and there has been a deliberate act to deceive.

**False:**

There is sufficient evidence to disprove the allegation

**Unsubstantiated:**



There is insufficient evidence to either prove or disprove the allegation. The term does not imply guilty or innocent.

### **Working with External Agencies**

We recognize the authority of the LSCB and are committed to working in partnership with the Children's Services Duty and Assessment Team, LBBD Multi Agency Safeguarding Hub and the police.

We are happy to comply with the procedures prescribed by the Pan –child protection procedures and will be proactive in working together to safeguard children.

We will share through the designated safeguarding lead, appropriate information with investigating teams, and contribute to child protection conferences, core groups and care plans.

Any incident requiring advice from, or referral to, safeguarding teams and arising out of normal hours will be referred directly to the emergency/out of hour's team or failing that directly to the police child protection team.

### **This Policy should be read in conjunction with**

Safer Recruitment Policy - to ensure suitable staff are appointed;

FGM Policy – to ensure that staff know how to identify possible FGM cases and what to do

Prevent Policy – to ensure that staff can identify any families or children at risk of radicalisation

British Values Policy – to uphold views that protect children from extreme narratives

Anti-bullying Policy - to ensure physical and emotional security for all our pupils and staff

E-Safety Policy – To ensure that children are protected from the unsafe use of IT so that adults cannot access inappropriate material or take photos or contravene school rules when using social media. To ensure children know the dangers of the internet and what to do if they experience cyberbullying

Behaviour Policy - to ensure that appropriate code of conduct is in place & how to uphold it



Curriculum Policy: to provide pupils with an understanding of acceptable behaviour towards them and how to stay safe.

Staff Disciplinary Policy: to ensure that staff are aware of their roles and responsibilities, appropriate conduct, grounds for dismissal and to ensure that our duty of care for staff is upheld, treatment is fair and their rights are protected.

Whistleblowing Policy – to ensure that all staff know that any breach of duties or allegation must be reported even if they are in doubt.

Arrival and Departure Policy – to ensure staff know how to keep children safe during transitions from parent to staff and vice versa

Visitors Policy – to ensure that staff keep children, visitors and other staff safe and clear about protocols and procedures for being on site.

Confidentiality – to ensure that no breach of confidentiality occurs when dealing with safeguarding or sensitive issues

We will ensure that throughout our other policies we are positively safeguarding and promoting the welfare of children and contributing to the child protection process appropriately in all areas of our practice.

This policy was adopted at a meeting at Alamiyah School

Held on: .....

Signed on behalf of the Alamiyah School: .....

Date of Review: July 2018