



St Hilary's School

Safeguarding Children/Child Protection Policy

St Hilary's fully recognises the contribution it needs to make when protecting and supporting children at the school. All staff, including volunteers, believe that our school should provide a caring, positive, safe and stimulating environment, which promotes the social, physical and moral developments of the individual child. This policy is designed to provide a comprehensive coverage of the key issues involved: definition, explanation and identification, procedure and support.

CHILD PROTECTION LIAISON OFFICER: DEPUTY HEAD

The school has a designated, trained Child Protection Liaison Officer, the Deputy Head (Ms Newbould) to whom incidents are reported and she is responsible for ensuring that the processes are followed. She is responsible for Child Protection across the school from Nursery to age 11. The school also has a trained designated Governor, Mrs Penny Horsman, to be involved when intervention is required at that level. The CPLO undertakes training within a period of a minimum of every two years and the last Level 3 training for the Deputy Head was July 2011. In addition the previous Deputy Head (Mrs Morris) was trained in December 2009. All members of staff develop their understanding of the signs and indications of abuse and access training on a regular basis (a minimum of every three years).

This policy is to be updated annually by the designated Child Protection Liaison Officer and the Chair of Governors is responsible for an annual review of this policy. It is made available to parents. The CPLO liaises with the Head of Nursery to ensure regular contact with Local Statutory children's agencies relating to the EYFS.

All parents/carers are made aware of the responsibilities of staff members with regard to child protection procedures through publication of the school's Safeguarding/Child Protection Policy on our website and reference to it in our introductory school pack (Parent Handbook).

Safeguarding and Promoting Welfare

Safeguarding and promoting the welfare of children is defined for the purposes of this guidance as:

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



In accordance with 'Every Child Matters & Safer Recruitment' St Hilary's School has five goals equally applicable to all children from the Foundation Stage to 11 years old.

- That children are healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Experience social and economic wellbeing

The aims of the policy are:

- To support the child's development in ways that will foster security, confidence and resilience;
- To provide an environment in which children and young people feel safe, secure, valued and respected, feel confident and know how to approach adults if they are in difficulties;
- To raise the awareness of both teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse;
- To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the school, contribute to assessments of need and support plans for those children;
- To acknowledge the need for effective and appropriate communication between all members of staff in relation to safeguarding pupils;
- To develop a structured procedure within the school, which will be followed by all members of the school community in cases of suspected abuse;
- To develop effective working relationships with all other agencies including the Police and Family Services;
- To ensure that all adults within our school who have access to children have been checked as to their suitability. This includes other community users of our facilities.

Definition of Child Protection

The process of protecting individual children identified as either suffering, or at risk of suffering significant harm as a result of abuse or neglect.

Definition of Child Abuse

At St Hilary's, child abuse is taken to refer to any child who through the action, or inaction, of parents, other carers or other child/children, has suffered, or is likely to suffer neglect, or serious physical, sexual or emotional harm.



All children have the right to be treated as an individual, to have his/her needs met, and to be shown respect for all aspects of his/her identity, including gender, nationality, ethnic origin, religion, sexuality and culture. At St Hilary's we are sensitive to the fact that parenting and child rearing styles can vary according to class, age, race, ethnicity, culture and/or religion. We recognise that all parents have the right to raise their children according to their family traditions and we are aware of not passing judgement on or discriminating on the basis of difference. All members of staff have a responsibility to identify and report suspected abuse (including suspected, actual or reported abuse by other members of staff) and to ensure the safety and well-being of the pupils. Staff should be aware of the signs of the various types of child abuse and the procedures they should follow if they have concerns about a child. The designated member of staff with responsibility for child protection is the Deputy Head and all staff are made aware of this. The Governor Representative is Mrs Penny Horsman.

1. Definitions and Signs of Child Abuse (see Appendix One)

The four broad categories of abuse are physical, sexual, neglect and emotional. These categories do overlap and an abused child may frequently suffer more than one type of abuse.

Physical Abuse

This includes hitting, shaking, throwing, squeezing, burning or scalding, biting, administering poisonous substances, suffocation, drowning and excessive force. It may also be caused when a parent or carer invents symptoms of physical disorder in the child or deliberately causes ill health to a child and then seeks medical help. This unusual and potentially dangerous form of abuse is now described as fabricated or induced illness in a child.

Possible Signs in the child: unexplained injuries or burns, any injuries not consistent with the explanation given for them or several different explanations provided for an injury e.g. bruising, bite marks, burns, scars and even fractures. The child may also become aggressive, withdrawn, regressive, fear medical help, refuse to discuss injuries, show a reluctance to change for, or participate in, swimming or PE and exhibit self-destructive tendencies. The parent/carer may be disinterested or undisturbed.

Sexual Abuse

As well as sexual contact, sexual abuse may also include non-contact activities, such as involving children in looking at, or in the production of pornographic materials, watching sexual activities or encouraging children to behave in sexually inappropriate ways.

Possible Signs in the child: children are frequently too scared to say anything due to guilt and/or fear. There may be no physical signs and indications are likely to be emotional/behavioural. A child may show excessive preoccupation with sexual matters and detailed knowledge of adult sexual



behaviour, or may regularly engage in sexual play inappropriate to his/her age group. Physical symptoms may be present and behavioural/emotional difficulties may arise.

Neglect

Neglect involves persistent or severe lack of care for a child's basic emotional and physical or practical needs e.g. for food, shelter and medical care likely to result in the serious impairment of the child's health and development.

Possible Signs in the child: evidence of neglect is built up over a period of time and can cover different aspects of parenting. The child may be constantly tired, hungry, dirty, and small for age or absent from school and/or left alone at home.

Emotional Abuse

Emotional abuse is the persistent, emotional, ill-treatment or rejection of a child such as to cause severe and persistent effects on the child's emotional development. Some level of emotional abuse is involved in most other types of ill-treatment of children, although emotional abuse may occur alone.

Possible Signs in the child: emotional abuse may be difficult to recognise because the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse. The child may be withdrawn, aggressive, regressive, nervous, neurotic, anxious, over-tired or afraid.

Grave Concern

This concerns children whose situations do not currently fit the above categories, but for whom there is significant risk of abuse. The procedure remains the same.

2. Recognition of Child Protection Issues in specific circumstances

In certain circumstances e.g. parent mental illness, family alcohol or drug abuse, foreign exchange visits, domestic violence or religious and racial harassment, child abuse may commence.

3. How can individual staff prepare themselves for dealing with child abuse?

- Staff are encouraged to take the issue of abuse seriously.
- Staff should be reminded that teachers are in a special position to talk to the child, to help and to provide a safe haven.
- Staff should consider the possibility of abuse within the school.
- Staff should know that they will be helped to deal with their own feelings.
- Staff should be reminded not to try to handle issues on their own. They should report them to the Deputy Head.



- Staff are reminded that confidentiality cannot be promised to a pupil giving evidence
- Staff do not contact parents themselves.

4. Advice on how to react when a child wants to talk about abuse

If a child chooses to share a confidence it is important to reassure them that their concerns are taken seriously even if it is difficult to believe. Be supportive, calm and listen attentively, without probing. Accept what the child says and look the child in the eye. Do not ask specific questions but in the nature of sexual assault ask 'when did it happen?' this is because forensic evidence can be collected within 7 days. Never promise to keep it a secret. Tell the child sensitively that the information they disclose will have to be passed to people who can help and let the child know your next move.

Be Sure to Keep a Record

Make notes as soon as possible, writing down exactly what the child said and when she/he said it. Record dates and times of meetings and when they were recorded. Keep all hand-written notes, even if subsequently typed. All notes and typed text must be signed and dated, as well as countersigned and dated by the Child Protection Officer. All the CPLO's notes will be similarly treated.

School Procedures for Suspected Child Abuse

- a) Talk with and listen to the child. The child must not be pressed for information, led or cross-examined or given false assurances of absolute confidentiality. However, for the sake of the child, each case will be treated with discretion and only the relevant people informed of what has taken place. Where abuse is alleged, the initial response should be limited to listening carefully to what the child says so as to clarify the concerns and to offer re-assurance about how she/he will be kept safe. Brief the CPLO.
- b) If the Deputy Head CPLO feels there is substance in the suspicions, they will discuss the matter immediately with the Headmistress. The Headmistress uses her discretion with the help of the Deputy Head CPLO to decide whether to do one or more of the following:
 - In cases of uncertainty, ask the Class Teacher or another appropriate member of staff, to chat informally with the child to establish whether there are grounds for further investigation (in the rare instances where this has not already been done). The Deputy Head as Child Protection Officer may conduct this interview.
 - If the child is suffering from a serious injury, medical attention must be sought immediately from A & E, the Social Services Department (SSD) and the duty consultant paediatrician must be informed of any concerns.



- The prime concern at all stages would be the interest and safety of the child. Where necessary the appropriate action will be taken to ensure the safety of the child, as the law empowers anyone who has actual care of a child to do all that is reasonable in the circumstances to safeguard that child's welfare. For example, a teacher should take all reasonable steps to offer a child immediate protection from an aggressive parent.

If we have a concern about a child we will share these concerns with parents/carers. However, if sharing these concerns put the child at risk of significant or further harm we will seek advice from the duty manager at Surrey Contact Centre.

- Contact with a welfare organisation must be made within 24 hours of a disclosure or suspicion of abuse.

5. Supporting Children

We recognise that a child who is abused, who witnesses violence or who lives in a violent environment may feel helpless and humiliated, may blame him/herself, and find it difficult to develop and maintain a sense of self worth.

We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.

We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

Our school will support pupils by:

- Encouraging the development of self-esteem and self-assertiveness whilst not condoning aggression or bullying;
- Promoting a caring, safe and positive environment within the school;
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children;
- Notifying Family Services as soon as there is a significant concern;
- Ensuring that a named teacher is designated for Looked After Children (LAC) and that an up to date list of children is regularly reviewed and updated. The Education of Children in Public Care (ECPC) Team must be made aware of all LAC in the school;
- Providing continuing support to a pupil (about whom there have been concerns) who leaves the school by ensuring that such concerns and school medical records are forwarded under confidential cover to the pupil's new school.



Concerns may be discussed with:
In school hours 8.00-6.00pm
Surrey County Council Contact Centre
Children's Services: 0300 200 1006

Out of Hours Emergency No: 01483 517898

www.surreycafis.org.uk/safeguarding

Childline might also be consulted and in extreme cases, the police.

Where practicable and appropriate, concerns will be discussed with the child's parents and if required agreement sought for a referral to SSCB, unless this may put the child at further risk. Parents will be asked for explanations of a suspicious injury, behaviour or child's allegation. These conversations will be open and honest, and the parents will be provided with reasons for concerns and required to give explanations for these concerns. There is a Common Assessment Form for this purpose stored in both the Headmistress's office, the Deputy Head's office as Child Protection Officer, and in the School Secretary's office. Formal referrals from named professionals cannot be treated as anonymous, so the parent will ultimately become aware of the identity of the referrer. The meeting will always include both the Head and the Chair of Governors.

- The Bursar should be informed.
- Discuss concerns with Social Services Duty and Assessment Team or lodge a formal referral. If parents have not been informed or have withheld their permission, the SSCB should be informed that the school is proceeding without parental agreement. The parent should also be contacted where appropriate and advised that after considering their wishes a referral has still been made.

Referrals to the SSCB

If you are a member of the public, you will be asked for your name and address and details of the child and the concerns you have. These are to help Surrey Children's Service to make further enquiries and to contact you again if necessary. Information about your name and address will be treated as confidential. You will be informed if it is necessary to identify you if court proceedings are required to protect the child or to prosecute an abuser. There are a number of [court orders which can be used to protect a child](#).

If you are a professional worker with information or concerns about a child or young person, you should call us on 03456 009 009. In addition, you should also confirm your referral in writing as quickly as possible. If you are in doubt about making a referral to Surrey Children's Services, you should consult, within your agency, with the manager or practitioner with designated responsibility for child protection.



6. Allegations Against Staff

All staff at St Hilary's are CRB checked. Teachers and other members of school staff who have day-to-day contact with children in a variety of situations are vulnerable to accusations of abuse. Their relationships with pupils may in rare instances lead to allegations against them being made by pupils or parents/carers. Those allegations may be false, malicious or misplaced and may be either deliberate or innocent of such intent.

If a member of staff is informed of an allegation of abuse against another member of staff, they should report the matter immediately to the CPLO unless the CPLO is the person against whom the allegation is made. In such cases information should be passed to the Head or Chair of Governors in the Head's absence. In all cases the allegation should be passed on immediately to the appropriate Surrey Child Protection Adviser, whether or not there is sufficient substance in the allegation to warrant an investigation. The decision about whether or not to investigate further lays with child protection agencies. If the allegation concerns the Head the person receiving the allegation should immediately inform the Chair of Governors without notifying the Head. The Chair of Governors will consult with the Local Authority's Lead Officer for Child Protection. In case of serious harm the Police should be informed from the outset.

The school will inform Ofsted of any serious allegations of harm or abuse by any person living, working or looking after children at the premises (whether that allegation relates to harm or abuse committed on the premises or elsewhere), or any other abuse which is alleged to have taken place on the premises, and of the action taken in respect of these allegations. The school will inform Ofsted of the above as soon as is reasonably practicable but at the latest within 14 days.

In addition, if anyone who is employed, contracted, a volunteer or a member of staff working in the school is deemed unsuitable to work with children, and thus their services are no longer required, the school will report to the Independent Safeguarding Authority (ISA) and The Secretary of State via the DCSF, within one month of that person leaving the school. Any such report will include evidence about the circumstances as far as possible.

7. Pastoral Care at St Hilary's

St Hilary's provides a safe and trusting environment in which children may feel free to discuss any concerns or worries. Assemblies and PSCHE lessons are used to develop understanding as to what is and what is not appropriate behaviour and include topics such as not talking to strangers, being honest with staff, not bottling things up and bullying. The focus is on presentation of harm and the safety of children in the EYFS and the rest of the school. Visitors



wear badges to ensure close monitoring of people entering the building and avoidance of intruders.

8. Responsibility of the Child Protection Officer

The designated member of staff is responsible for:

- The welfare and safety of all children at St Hilary's School from the Foundation Stage to age 11
- Arranging training, every three years, for all staff
- Undertaking training in inter-agency child protection by refresher training at two yearly intervals to keep knowledge and skills up to date.
- Keeping all staff updated with current procedures, ensuring that new staff are familiar with protection responsibilities. (Staff includes secretarial staff, part-time staff, caretakers and kitchen staff etc)
- Adhering to SSCB and national guidance, Surrey Child Protection procedures and school procedures with regard to referring a child if there are concerns about possible abuse
- Providing advice and support to staff.
- Ensuring that all-relevant information about a child is disseminated to appropriate staff within the school bearing in mind confidentiality restrictions.
- Ensuring that complete records are sent to receiving schools of any concerns or past referrals.
- Maintaining accurate and secure child protection records in a locked cabinet
- Keeping written records of concerns about a child even if there is no need to make an immediate referral. This needs to be kept separate from pupil records.
- Ensuring that any pupil currently on the Child Protection Register who is absent without explanation for two days is referred to Family Services and Education Welfare Service in the Borough.
- Undertake an annual review of the school's policy and procedures relating to safeguarding children.
- Inform Ofsted of any allegations of serious harm or abuse by any person living, working or looking after children at the premises (whether that allegation relates to harm or abuse which is alleged to have taken place on the premises or elsewhere) or any other abuse deemed to have occurred on the premises, and of the action taken in respect of the allegations. The communication will happen as soon as reasonably practicable, but at the latest within 14 days.
- Any deficiencies or weaknesses in child protection arrangements are remedied without delay.



9. Recruitment and Selection

We have an explicitly written Recruitment and Selection Policy that reflects both national and local guidance. Please refer to this policy.

10. Guidance for Staff

Staff are reminded that they must ensure that their behaviour and actions do not place pupils or themselves at risk of harm or of allegations of harm to a pupil (for example in one to one tuition, sports coaching, conveying a pupil by car, engaging in inappropriate electronic communication with a pupil, and so on).

Support for Staff

We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm may find the situation stressful and upsetting.

We will support such staff by providing an opportunity to talk through their anxieties with the Designated Senior Person and to seek further support. This could be provided for all staff by, for example, the Headmistress or by the SSCB (Surrey Safeguarding Children's Board).

Helpful things to say:

- Tell me what has happened
- I believe you
- I'm glad you've told me that
- It's not your fault
- I'll help you
- Is there anyone else you'd like to talk to about this?

Avoid saying:

- Why didn't you tell anyone before?
- Did they do X to you?
- I can't believe it
- Are you sure this is true?
- Why? How? When? Who? Where?
- Things like: 'I'm shocked; don't tell anyone else'

At the conclusion of the talk:

- Reassure the child again that she/he was right to tell you and that you believe the story.
- Let the child know what you are going to do next and that you will let him/her know what happens
- It is not your job to decide whether or not abuse has occurred, but you will need to ensure that you pass the information on the Deputy Head, the Child Protection Officer.



Whistle Blowing (see Appendix Two)

We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so. All staff should be aware of their duty to raise concerns, where they exist, about the attitude or actions of colleagues.

Physical Intervention

As referred to in our Rewards and Sanctions including Discipline and Exclusion Policy staff must only ever use physical intervention as a last resort, and that at all times, it must be the minimal force necessary to prevent injury to another person.

Children will not be punished within the school by any form of hitting, slapping, shaking or other degrading treatments.

We understand that physical intervention of a nature, which causes injury or distress to a child, may be considered under child protection or disciplinary procedures.

Bullying

Our policy on bullying is set out in a separate policy and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures.

Racist Incidents

Racist incidents or a single serious incident may lead to consideration under child protection procedures.

Prevention

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

The school community will therefore:

- Establish and maintain an ethos where children feel secure and are encouraged to talk and are always listened to;
- Ensure that all children know there is an adult in the school whom they can approach if they are worried or in difficulty;
- Include in the curriculum opportunities for PSCHE, which equip children with the skills they need to keep safe from harm and to know whom they should turn to for help.

Health & Safety

Our Health & Safety policy set out in a separate document, reflects the consideration we give to the protection of our children both physically within the



school environment and, for example, in relation to internet use, and when away from the school when undertaking school trips and visits.

Volunteers, students and parent/carer helpers

All visitors to the school including volunteers, students and parent/carer helpers are met at the Front Door and asked to sign in. They are given a Visitor Badge and escorted to the area they require. No visitor is ever left unattended and we ensure that they cannot walk directly into any area occupied by children unsupervised. At the end of their visit they are required to sign out and return their badge, before being escorted out of the school. The Visitor Book and badges are kept in the Front Hall. A record of all visitors is kept including exact arrival and departure time and the date. For visitors, the purpose of the meeting, job title and/or company is included.

We ensure that checks are carried out on volunteers, parent/carer helpers (i.e. CRB, references, interview procedures etc) and we have supervision of unvetted staff waiting for CRB checks to take place.

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

- “Working together to Safeguard Children” 2006
- “Framework for the Assessment of Children in Need and their Families” 2000
- What to do if you are worried a Child is being Abused” 2007

The guidance reflects:

- “Safeguarding Children and Safer Recruitment in Education” DFES Sept. 2006
- Surrey Safeguarding Children Board SSCB Child Protection Procedures.

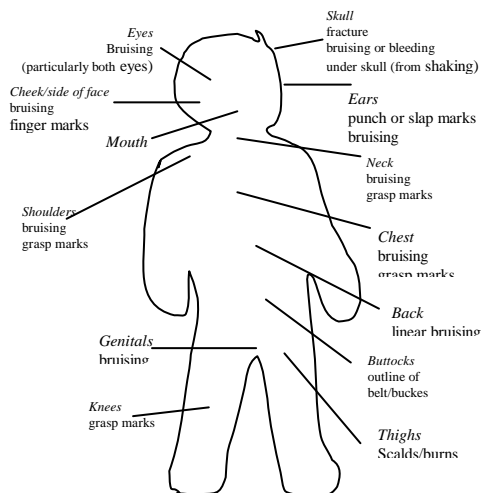
Reviewed June 2011



APPENDIX ONE: Recognising Abuse

Parental attitude is important in assessing all the points below – when a child is suffering severe and painful injury most would seek medical help

Common sites for non-accidental injury



Non-accidental injuries

Bruises are likely to be:

- frequent
- patterned e.g. finger and thumb marks
- old and new in same place (note colour)
- in unusual position (see chart)

consider:

- development level of the child and their activities
- may be more difficult to see on darker skins

Burns and scalds are likely to have:

- clear outline
- splash marks around burn area
- unusual position e.g. back of hand
- indicative shapes e.g. cigarette burns, bar of electric fire

Injuries suspicious if:

- bite marks
- finger nail marks
- large and deep scratches
- incisions e.g. from razor blade

Fractures likely to be:

- numerous – healed at different times

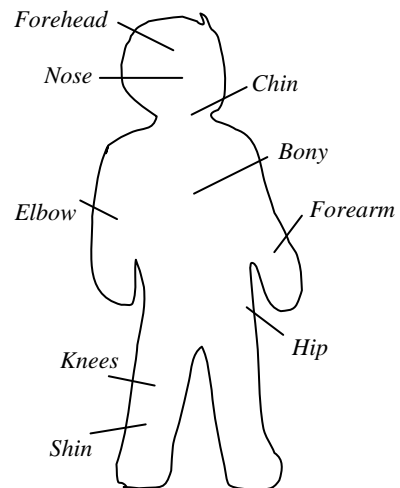
consider:

- age of child, always suspicious in babies under two years old
- delay in seeking treatment

Sexual abuse may result in:

- unexplained soreness, bleeding or injury in genital or anal area
- sexually transmitted diseases e.g. warts, gonorrhoea

Common sites for accidental injury



Accidental injuries

Bruises are likely to be:

- few but scattered
- no pattern
- same colour and age

consider:

- age and activity of child e.g. learning to walk
- may be confused with birthmarks or other skin conditions

Burns and scalds likely to be:

- treated
- easily explained
- may be confused with other conditions e.g. impetigo, nappy rash

Injuries likely to be:

- minor and superficial
- treated
- easily explained

Fractures likely to be:

- of arms and legs
- seldom on ribs except for road traffic accidents
- rare in very young children
- may rarely be due to "brittle bone syndrome"

Genital area:

- injury may be accidental (seek expert opinion)
- soreness may be nappy rash or irritation e.g. from bubble bath
- anal sores may be due to constipation or threadworm infestation



Possible Signs

Physical Abuse

Unexplained injuries or burns, particularly if they are recurrent
Improbable excuses given to explain injuries
Untreated injuries
Admission of punishment which seems excessive
Fear of parents being contacted
Arms and legs kept covered in hot weather
Fear of returning home
Fear of medical help
Self-destructive tendencies
Aggression towards others
Chronic running away

Emotional Abuse

Physical, mental and emotional development lags
Admission of punishment which appears excessive
Over-reaction to mistakes
Sudden speech disorders
Fear of new situations
Inappropriate emotional responses to painful situations
Neurotic behaviour (eg rocking; hair-twisting; thumb sucking)
Self-mutilation
Fear of parents being contacted
Extreme passivity or aggression
Drug/solvent abuse
Chronic running away
Compulsive stealing
Scavenging for food or clothes

Possible Signs of Neglect

Constant hunger
Poor personal hygiene
Constant tiredness
Poor state of clothing
Emaciation
Frequent lateness or non-attendance at school
Untreated medical problems
Destructive tendencies
Low self-esteem
Neurotic behaviour (eg rocking; hair twisting; thumb sucking)
No social relationships
Chronic running away
Compulsive stealing
Scavenging for food or clothes



Possible Signs of Sexual Abuse

Children under the age of five may:

become insecure or cling to parent in a fearful way
show extreme fear of a particular person
cry hysterically when their nappy is changed
become hysterical when clothing is removed, particularly underclothes
have some physical signs in the genital or anal areas: smell of semen etc
have soreness or bleeding in the throat, anal or genital areas
regress to a much younger behavioural pattern
behave in a way sexually inappropriate to their age, being obsessed with sexual matters as opposed to normal exploration
stare blankly; seem unhappy, confused, and sad
become withdrawn, stop eating, have chronic nightmares, begin wetting again when previously dry
play out sex acts in too knowledgeable way with dolls or other children
produce drawings of sex organs such as erect penises
stop enjoying activities with other children, such as stories or games
seem to be bothered or worried, but won't tell why as if keeping a secret
change from being happy and active to being withdrawn and fearful
repeat obscene words or phrases said by the abuser
say repeatedly that they are bad, dirty or wicked
become aggressive and hurtful
act in a sexually inappropriate way towards adults



Possible Signs of Sexual Abuse

Children from the ages of five to twelve may:

hint about secrets they cannot tell
say that a friend has the problem
ask if you will keep a secret if they tell you something
begin lying, stealing, blatantly cheating in the hope of being caught
have unexplained sources of money
have terrifying dreams
start wetting themselves
exhibit sudden inexplicable changes in behaviour, such as becoming aggressive or withdrawn
stop enjoying previously liked activities such as music, sports, art, scouts or guides, going to summer camp, gym club
be reluctant to undress for gym
become fearful of or refuse to see certain adults for no apparent reason; show dislike of a particular babysitter, relative or other adult
act in a sexual way inappropriate to their age
draw sexually explicit pictures depicting some acts of abuse
seem to be keeping secret something which is worrying them
have urinary infections, bleeding or soreness in the genital areas
have soreness or bleeding of the throat
have chronic ailments, such as stomach pains or headaches
take over the parent role at home, seem old beyond their years (is a victim of incest)
develop eating disorders, such as anorexia or bulimia
become severely depressed, even attempt suicide
have poor self image, self mutilate
continually run away
regress to younger behaviour, such a thumb sucking, surrounding themselves with previously discarded cuddly toys
show discomfort when walking
say that they are no good, dirty, and rotten
be wary, watchful
repeat obscene words or phrases which may have been said during the abuse
attempt to sexually abuse another child
talk or write about sexual matters
find hundreds of excuses not to go home or to a friend's house after school (places where abuse may be happening)
act in a sexually inappropriate way towards adults

Reviewed June 2011



APPENDIX TWO

The Public Interest Disclosures Act 1998 (Whistle Blowing)

Staff must acknowledge their individual responsibility to bring matters of concern to the attention of the SLT or relevant agencies. Although it can be difficult, this is 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 are natural, but they must never result in a child continuing to be unnecessarily at risk. Remember it is often the most vulnerable children who are targeted and they need someone like you to safeguard their welfare.

Reasons for whistle blowing

- 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 whistle blowing

- Starting a chain of events which spirals
- 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

- Voice concerns, suspicions as soon as you feel you can
- The earlier a concern is expressed the easier and sooner action can be taken
- Try to pinpoint exactly what practice is concerning you and why
- Approach your immediate manager, Headmistress or other Child Protection Officer.
- If your concern is about your immediate manager/Headmistress, contact the appointed Child Protection Governor (Mrs Penny Horsman)
- make sure you get a satisfactory response – do not let matters rest
- Ideally, put your concerns in writing, outlining the background and history, giving names, dates and places where you can
- A staff member is not expected to prove the truth of an allegation but they will need to show sufficient grounds for the concern.



What happens next?

- You should be given information on the nature and progress of any enquiries.
- Your employer has a responsibility to protect you from harassment or victimisation.
- No action will be taken against you if the concern proves to be unfounded and was raised in good faith.
- Malicious allegations may be considered as a disciplinary offence.

The Public Interest Disclosure Act 1998 allows individuals to disclose certain issues to particular external parties where there is good reason to believe that internal disclosure will not be taken seriously or will cause the individual making the disclosure to be penalised in some way. It is recognised that whistle blowing can be stressful.

Reviewed June 2011