



# **West Sussex Alternative Provision College**

## **SAFEGUARDING POLICY**

**(Currently under Review)**

## **WSAPC SAFEGUARDING POLICY**

### **Guiding principles:**

"Children have the right to be protected from all forms of violence (physical and mental). They must be kept safe from harm and they must be given proper care by those looking after them." United Nations Convention on the rights of the Child, Article 19).

WSAPC strives to be a place where pupils, staff, families and other visitors are made welcome and comfortable and where we will treat each other with respect. We believe that all children have the right to protection from neglect and abuse and that their welfare is of paramount importance. WSAPC provision is where learning and personal development takes place in a climate of trust and where we value everyone's unique contribution to our community.

All staff and other adults working in WSAPC have a duty to ensure that pupils are safe and protected and we all have a duty to ensure that if there are any concerns relating to the welfare of a pupil the Local Safeguarding Children's Board procedures are followed.

WSAPC staff will always try to work in partnership with families but in any conflict between the needs of the young person and those of parents/carers or professionals, the needs of the young person must come first.

Staff in WSAPC are committed to safe recruitment and selection procedures (in line with WSCC guidelines) to ensure that all staff have been appropriately screened prior to appointment, and to the provision of appropriate child protection training through the staff induction programme and within continuing professional development opportunities.

### **Responsibilities**

#### **Deputy Headteachers will ensure that:**

As the Designated Member of Staff responsible for safeguarding he/she has received appropriate training and support for this role.

A nominated member of the Governing Body has responsibility for safeguarding.

There is a Deputy Designated Member of Staff in each centre (usually the Head of Centre) responsible for safeguarding issues in their centre who has received appropriate training and support for this role.

Each centre has systems in place to effectively respond to, record, refer on, follow-up and keep records confidentially and securely on child protection issues. These systems will be monitored by the Deputy Headteacher on a regular basis as part of his/her responsibilities and reported on annually as part of the requirements of the Local Safeguarding Children's Board to the Governing Body and Local Authority.

A single record of all WSAPC staff with DBS check numbers, address, main qualifications, DCSF number (for teachers) is kept in line with DCSF requirements

All policies are developed and evaluated with a view to safeguarding and promoting the welfare of all our pupils. In particular through:

- Following Local Authority policy for recruitment and selection and ensuring that procedures are robust in following up references, DBS checks and career gaps. The Deputy Headteachers will ensure that at least one member of the selection panel has undertaken appropriate training to ensure that interviews to appoint staff reflect the importance of safeguarding pupils
- Behaviour for Learning Policy in ensuring that appropriate rules and boundaries are in place and to be clear about the sanctions which apply
- Anti-bullying Policy ensures that absence is followed up routinely and quickly and vulnerable pupils are supported appropriately
- Curriculum Policy ensures that it promotes and provides safe use of electronic methods of communication and pupils gain an understanding of what is/isn't acceptable behaviour towards them and how to stay safe
- Inclusion Policy ensures that all pupils are able to fully participate in their learning.

**Heads of Centre will ensure that:**

Every member of staff knows the name of the Deputy Designated Member of Staff at their centre and their role in child protection issues

Parents/carers have an understanding of the responsibility placed on each centre/school and staff for child protection and safeguarding by setting out our obligations in information given to parents/carers

Every member of staff understands their responsibilities in being alert to the signs of abuse and referring any concerns to the Deputy Designated Member of Staff responsible for safeguarding

All staff, including supply staff, on site contractors, support services and volunteers working within the service will be given induction information regarding safeguarding

The admission procedure will make clear to all new pupil referrals that staff will not provide a confidential counselling service. Any information received from a pupil or family member can and in some circumstances will be shared with other professionals

Where there is an unexplained absence of a pupil on the child protection register a member of staff notifies Social and Caring Services

Concerns about pupils, even where there is no need to refer immediately, are recorded and kept securely

Staff contribute to child protection conferences, core groups and care plans

Staff understand and work as part of the multi-disciplinary teams that manage many of our pupils and that no member of WSAPC staff should ever assume sole personal responsibility for a pupil's personal situation or that of the family

Brings to the attention of all staff in a regular basis the **WSCC guidance on safer working practice for all staff and volunteers working in educational settings**

**Staff will ensure that:**

They are representing the Local Authority when carrying out their duties and should always endeavour to carry out their roles with professionalism

They manage the education (including homework if relevant) of their pupils while on site, or elsewhere as required

They understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the Deputy Designated Member of Staff using the agreed referral and recording system.

They never disclose 'sensitive' personal information to a pupil or parent/carer

They never disclose their own personal details (address, telephone number, etc.) to a pupil/parent/carer or invite/allow a pupil/parent/ carer to visit their home address

They never agree to 'keep a secret' with a pupil on a significant issue as this puts themselves in a position of personal risk and liability.

They use their discretion with reference to the relationship that exists with any given individual to ensure that a pupil does not feel that there has been a breach of trust or that they have been 'let down' in any way

They always pass on allegations made against a member of staff immediately to the Deputy Headteacher or if the concern is about the Deputy Headteacher they must report it to one of the Co-Head Teachers.

They never assume sole personal responsibility for a pupil's personal situation or that of the family

They comply with the **WSCC Guidance on safer working practice for all staff and volunteers working in educational settings.**

**The following appendices give advice and guidance on specific aspects of child protection:**

Appendix 1: What is child abuse?

Appendix 2: What are the signs of abuse?

Appendix 3: What to do in the event of a disclosure of information

Appendix 4: Talking to young people about abuse

Appendix 5: Useful contacts when making a child protection referral

Appendix 6: Searching a pupil's possessions

Appendix 7: Physical contact with pupils

Appendix 8: Positive handling

Appendix 9: Single working

## **Appendix 1**

### **What is child abuse?**

There are four categories of abuse which are defined below with examples

#### **NEGLECT:**

The persistent or severe neglect of a child which results in serious impairment of that child's health or development, including non-organic failure to thrive.

(Non-organic failure to thrive may result from neglect but always requires medical diagnosis). Neither personal convictions or religious beliefs justify withholding medical care for serious conditions

Examples include: exposure to danger; failure to attend to physical/developmental needs; failure to ensure treatment or medical checks; failure to ensure access to appropriate aids; failure to meet communication needs

#### **EMOTIONAL ABUSE:**

The persistent or severe emotional ill-treatment of a child, which has a severe adverse effect on the behaviour and emotional development of the child.

All abuse involves some emotional ill-treatment, so this category is only used where it is the main, or sole form of abuse

Examples include: deliberate humiliation; blackmailing; bullying; religious discrimination; rejection; threats; cultural abuse; racial abuse; extreme inconsistency

#### **PHYSICAL ABUSE:**

A physical injury to a child where there is a definite knowledge, or a reasonable suspicion, that the injury was inflicted or knowingly not prevented. Threats of physical harm may constitute abuse.

One issue for professionals working with deaf pupils is the use of touch to gain attention

Examples include: drowning; suffocation; pulling hair; poisoning; scalding; burning; bullying; punching; hitting; kicking; failure knowingly to prevent injury; Munchausen's Syndrome by proxy

#### **SEXUAL ABUSE:**

The involvement of dependent, developmentally immature children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent, that violate the social taboos of family life or which have been knowingly not prevented by the carer

The issue of intimate care for young people with disabilities is one that needs careful thought and clear, consistent, agreed and known policies and guidelines for practice within establishments where intimate care is necessary

Examples are: engaging a child in sexual activity; making a child watch sexual activity; making a child watch pornographic material; inappropriate touching of a child; making suggestive comments to a child

## **Appendix 2**

### **What are the signs of abuse?**

The medical signs of abuse include:

- being underweight without medical cause
- developmental delay
- delay in speech and communication
- frequent tiredness
- frequent illness
- complaints of stomach pains
- unexplained difficulty with walking or sitting
- recurrent urinary tract problems, vaginal infections or genital damage

(Some of these symptoms may be difficult to distinguish from the symptoms of some disabilities)

The emotional signs of abuse include:

- unhappiness or distress for no apparent reason
- a lack of boundaries about physical contact which makes others feel uncomfortable
- clinging or whining
- an inability to make relationships with other children
- being unresponsive ('frozen' or watchful)
- persistent bullying or continually being the victim of bullying
- displaying anxiety about previously normal activities such as fear of going to the toilet, of removing clothes, of being medically examined or of parents being contacted
- displaying a marked lack of trust in adults
- overreacting to mistakes
- developing sudden speech or communication disorders

The behavioural signs of abuse include:

- significant changes in behaviour.  
Changes in behaviour such as withdrawal, introversion, rocking, hair-twisting, thumb-sucking, fear of going home, sudden school problems, lateness, absenteeism and truancy, bullying or being victimized, tantrums, stealing, scavenging, lying, compulsive masturbation, wetting, soiling, eating disorders, sleep disturbances, drug or solvent abuse, suicide attempts and deliberate self-harm may be indicators of abuse
- Sexually precocious behaviour may be a sign of sexual abuse.  
This includes using explicit vocabulary, sexually explicit drawings or vocabulary (including signs) and abusive or inappropriate behaviour involving other children
- 'Allusive' behaviour may also indicate a cause for concern.  
The child might for instance focus on a special friend, teacher, care officer or teaching assistant to confide in and say things like "I'd like to come and live with you" or "I'd like to be fostered."
- Children who thrive markedly when not in their usual place of care may also be victims of abuse.

**NB Although these may be signs or indicators of abuse they should not be looked at in isolation, i.e. the wider context should be taken into account including what we know about the child and their family.**

## **Appendix 3**

### **What to do in the event of a disclosure of information**

When a member of staff obtains information from a pupil this will need to be dealt with depending on an assessment of the level of risk involved. To make this assessment staff will require evidence on which to base their decisions. You will need to decide whether the information indicates a risk to the pupil, you or a third party.

#### **For a pupil at risk**

You will also need to decide whether the risk is:

- high risk where the pupil is at immediate risk of significant harm
- medium risk where the pupil is not at immediate risk of significant harm but that harm may be caused in the future if no action is taken
- low risk where the pupil is not at immediate risk of significant harm.

The following examples are possible causes for high risk concern:

- evidence and/or disclosures of physical abuse
- evidence and/or disclosures of sexual abuse
- evidence and/or disclosures of severe emotional abuse
- evidence/disclosures of severe self-harm, attempted suicide
- emergency health problems

Note: disclosure of any sort of abuse should be treated as high risk even if the evidence suggests that it happened in the past and is not currently taking place

The following examples are possible causes for medium risk concern:

- disclosure of a third party high risk activity
- disclosure of dangerous personal activity (criminal or illegal) e.g. drugs, violence, crimes, unsafe sexual behaviour
- evidence of neglect
- evidence/disclosures of self-harm
- sudden change in appearance/presentation e.g. mood, body language/behaviour/depression/sleepy
- signs of anxiety e.g. reaction near male adult, reaction to lesson on abortion
- evidence of long term problem e.g. sight/hearing impairment
- evidence of stress, anxiety, depression that could lead to self-harm
- evidence of health problems that could require medical attention e.g. illness, severe headaches, fainting

The following examples are possible causes for low risk concern:

- friendship problems
- difficulty with work/education
- family difficulties
- health problem that does not require attention

#### **For a member of staff at risk**

There are circumstances where the possession of significant information but failure to act appropriately on it can lead to accusations of professional misconduct or negligence.

Equally a member of staff may find themselves the subject of an allegation of professional misconduct by a pupil or parent.

In circumstances such as these there is a risk of legal action being taken against individual members of staff as well as the Local Authority. The following are examples of such situations:

- a pupil discloses evidence of abuse and this is not passed on. The pupil then suffers serious harm
- an allegation of a verbal or physical nature is made against a member of staff by a pupil
- a member of staff is alleged to have given inappropriate advice to a pupil
- there has been an inappropriate exchange of money or other goods e.g. money given for bus fare is used to buy drugs and parents/carer complain
- consequences of a negligent decision made by staff in loco parentis, with or without permission of legal guardian
- issues regarding supervision of pupils while teachers are in loco parentis
- staff not aware of medical needs of pupil in the event of a medical problem

Members of staff can only protect themselves from the consequences of such situations if:

- situations/information is regularly shared with colleagues
- staff are aware of and follow WSAPC/Local Authority guidance
- written reports of all significant incidents or disclosures are made at the time (or very soon after), dated, signed and kept on record.

**If a member of staff suspects that they have been inadvertently put in a compromising position they must inform the Deputy Headteacher immediately.**

**It is essential that decisions of risk assessment are not taken by individual members of staff.**

You need to be aware at all times that other members of WSAPC staff team and multi-agencies may hold confidential information about pupils which has not necessarily been shared with all WSAPC staff. Therefore it is essential that any action taken is done in consultation with the multi-agency team where they are involved with a pupil. (This needs to include the Consultant in Child and Adolescent Psychiatry/Clinical Director of CAMHS and the Senior Social Worker in the case of Central Services).

In general you will decide to take one of the following actions concerning disclosure of information:

- you are sure that there is no risk and the information is irrelevant. You should check with a colleague or the Head of Centre
- you are sure that there is no risk but the information is relevant to the pupil's education. You should share the information with the Head of Centre and decide if a report is required.
- you are unsure if there is a risk. Discuss the situation with a colleague, Head of Centre and take action accordingly.
- you are concerned that there is a risk. You need to discuss the information with colleagues, Head of Centre.

**On all occasions at least 2 members of staff must assess the level of risk.**

If in private discussions with a pupil you feel that information of a high-risk nature is being disclosed you must follow the procedure below:

- stop the pupil from continuing
- clarify your position re confidentiality by explaining that you will have to share this information
- discuss your concerns with **at least one** other colleague preferably the Head of Centre.
- Assess the level of risk and if a cause for concern then inform the Head of Centre. If appropriate the Head of Centre will contact the Designated member for WSAPC.

If as a result of consultation there is a justifiable belief that the pupil concerned (or other young person) is at immediate or future risk of significant harm then the Head of Centre will contact the local Social Services Child Protection Team or Social and Caring Services duty desk to either lodge a concern or seek further advice.

All involved members of staff will be asked to submit a report within one working day, including times and locations and clearly indicating who was involved and what was said by whom.

Please note:

- **staff must not conduct their own enquiry.** As soon as it is clear that there are serious concerns the pupil must be asked to stop.
- no member of staff should contact an outside agency over an issue of serious concern without first discussing the situation with the Head of Centre on site who will take appropriate action or seek further advice
- in cases of serious concern the Social Services Child Protection Team/Social and Caring Services duty desk will be contacted first and this will be done by the Head of Centre
- for cases of immediate medical concern health services then parents will be contacted unless there are clear grounds for delaying e.g. if health issue is suspected of being caused by parent/carer
- If the Child Protection Team/Social and Caring Services have been contacted they will take responsibility for all further action.

**The overriding principle is that no single member of staff should assume responsibility for the whole process. Advice and support should be obtained from colleagues throughout.**

## **Appendix 4**

### **Talking to young people about abuse**

<b>Things NOT to do or say</b>	<b>Things you can do or say</b>
Do not shut or lock the door	Do tell a colleague where you are and who you are with and ask them to stay nearby
Do not ask questions about the alleged abuse	Listen carefully
Do not stop a young person who is freely recalling events	Always thank the young person for talking to you and assure them that it was right to tell someone about what happened
Never tell the young person that you can keep the information secret	Explain what you are going to do with the information
Do not express your own feelings to the young person who is talking to you	Make a note of the discussion recording as much information as possible as accurately as possible
Do not look shocked or disgusted by what the young person tells you. They will think that you are disgusted by them	Try to keep your body language relaxed and your expression encouraging
Do not immediately suggest that the young person should talk to someone else	Tell the young person that what happened to them was not their fault
Do not say that everything will be alright	Tell them that you believe them
Do not use language that the young person cannot understand	Follow the Child Protection Procedures of WSCC
Do not involve the young person in a succession of interviews	Give lots of reassurance that you are the right person to speak to
Do not ask for assurance about what has been said	Pass the information on to the appropriate person as quickly as possible

## **Appendix 5**

### **Useful Contacts when reporting child protection issues:**

Designated Member of Staff	Sheila Carroll	01444 232771 01243 642872 07432 761118
Deputy Designated Members of Staff	Head of Centres: Cathy Meyer Deborah Johnson-Cadwell Ben Thomas Ruth McDonald Nicky Channon Rowan McConnell Shaun Jarvis  Helen Ellis  Derrick Foster  John Bunce	Burgess Hill – 01444 232771 N Mundham – 01243 642872 Littlehampton – 01903 278210 Lancing – 01903 270460 Worthing – 01903 201225 Crawley – 01293 883209 Blended Learning- <a href="mailto:sjarvis1@wsgfl.org.uk">sjarvis1@wsgfl.org.uk</a> Inclusion – <a href="mailto:hellis12@wsgfl.org.uk">hellis12@wsgfl.org.uk</a> Beechfield – 01342 712309 Option 4 Chalkhill – 01444 441805
Nominated Member of the Governing Body	Siobhan Denning	<a href="mailto:sdenning@theforestschoo.net">sdenning@theforestschoo.net</a>
WSCC Children's Safeguarding Manager	Lindsay Tunbridge-Adams, Room 42, Durban House, Durban Road, Bognor Regis, PO22 9RE	0330 222 3339
Co-Head teachers	Sheila Carroll Doug Thomas	07432 761118 07506 548280

### **Contacting the Child Protection Team**

If you need to make a referral you should phone the Multi Agency Safeguarding Hub (MASH) on the following number:

**01403 229900** (9am-5pm weekdays)  
**0330 222 6664** (out of office hours)

Or email: [MASH@westsussex.gcsx.gov.uk](mailto:MASH@westsussex.gcsx.gov.uk)  
(Out of office hours mark the subject of your email 'Alert for EDT')

- You should state that you are making a child protection referral and will be asked for the name and address of the young person and their address
- You will then be put through to a duty Social Worker on a childcare helpdesk in the relevant Social and Caring Service office who will take the details if the case
- Make sure you ask how this will be followed up and ask for progress to be communicated to either yourself or an appropriate WSAPC contact.

## **Appendix 6:**

### **Searching a pupil's possessions**

On rare occasions it may be necessary to search a pupil's possessions. This will be affected in accordance with 2010 guidance. Searches will be carried out for knives, drugs, alcohol and any other item which might prejudice the good order and running of the school. Pupils' belongings are only to be searched where failure to do so might put at risk the welfare of the young person or others. The reasons for the search should be explained to the pupil concerned. 2 members of staff who are the same sex as the student involved will carry out searches. Student cooperation is required for the search and only outer clothing will be searched. Any searches for weapons should involve the police. Any search must be documented recording the date, time and the reason for the search, if anything was found, who was present (where possible this will include the pupil). The record should be signed by all present including the pupil if possible.

## **Appendix 7:**

### **Physical contact with pupils**

- The service does not operate a no touch policy. Safe areas are the upper arm and across the shoulders. The head, neck, lower torso and legs should not be touched.
- It is not appropriate for a male member of staff and only in exceptional circumstances to provide physical comfort to a pupil
- Members of staff with younger pupils should use their discretion when comforting pupils
- If verbal requests prove to be insufficient then it is acceptable to use body position and outstretched arms or a gentle hand in an arm or shoulder to guide a pupil to where you would like them to go e.g. move seats during a lesson or leave the room.
- In the event of more intrusive handling being required this will be carried out using statutory guidance. All staff will be team teach trained.
- Under normal circumstances there should be no need for a pupil to be held, pushed or pulled.

## **Appendix 8:**

### **Positive handling**

WSAPC staff use positive handling methods to support pupil's health and safety following the working method of 'Team Teach' training and should adhere to the following guidance:

- Physical handling may be necessary following severe and persistent disruption in the classroom. Each case will be judged on its own merits and positive handling will only be used as a last resort.
- There should only be physical intervention with a pupil to prevent injury to staff or pupils or to prevent serious damage to property
- It should only be used as a last resort if all other strategies for managing the situation have been tried and have failed
- Physical intervention should only take place if the member(s) of staff is/are confident of doing so without injury to themselves
- Minimum restraining force should be used at all times
- There should ideally be more than one adult present
- An entry should be made immediately in the incident book
- Parents should be informed of the situation.

## **Appendix 9**

### ***Single working***

For advice and guidance on working individually with pupils or lone working please refer to WSAPC Policy on Lone Working.