

# WHITEFIELD PRIMARY SCHOOL

## Child Protection Policy & Guidance



Whitefield Primary School follow the Local  
Authority Child Protection exemplar policy

Reviewed: October 2014

Review date: October 2015

# Exemplar School Child Protection Policy and Guidance

The Designated Child Protection Coordinator is: Nadine Carroll

The Deputy Child Protection Coordinators are: Jill Wright and Natalie Menagh

The Nominated School Governor for Child Protection is: Hillary Williams

This policy will be reviewed annually by the full governing body (date: October 2014)

## Contents

Aims	p2
Definition of Safeguarding	p2
Definition of Child Protection	p2
The Safeguarding Framework	p2
Underpinning Values	p3
Key Legislation	p4
Key Principles	p8
Roles and Responsibilities	p4
Training	p6
Making and Managing Referrals	p7
Monitoring the effectiveness of the child protection policy and safeguarding practices	p8
Record keeping and the transferring of child protection records	p8
Managerial Supervision	p9
Informing parents and others of our safeguarding practices	p9
e-safety, data protection and the use of digital photographic equipment	p9
Appendices	p11

## **Aims**

- To ensure that all staff, governors and volunteers are aware of signs and symptoms of abuse and are able to respond to them appropriately following LSCB and LA child protection guidelines.
- To ensure the school's practice meets local and national recommendations and promotes the safeguarding of all children. The appendices provide key advice and guidance.

## **Definition of Safeguarding**

### **Safeguarding and promoting the welfare of children**

- 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; and
- taking action to enable all children to have the best life chances.

## **Definition of Child Protection**

'Child protection is part of safeguarding and promoting welfare. This refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer significant harm.

## **The Safeguarding Framework**

This child protection policy is part of the school's safeguarding framework which includes as examples the following policies/guidance:

- Child protection procedures
- Recruitment, Selection and Vetting
- Whistle-blowing
- Health and Safety
- Risk Assessment
- Educational visits
- Equal Opportunity
- Behaviour Policies
- Use of physical intervention and restraint

- Managing allegations against staff
- Anti-Bullying
- Confidentiality and Data Protection
- Medicine
- First Aid
- Infection Control
- Food and Hygiene
- Uncollected children
- Missing child
- School security
- Local issues: gangs
- The curriculum
- The physical environment
- Fire Drill Procedures
- Emergency Response Plan
- Intimate Care
- Internet Safety/Acceptable User Policy
- Use of photographic images guidelines
- Staff Code of Conduct
- Clubs, activities and extended school provision
- Persistent absentees and exclusions
- SEN
- Disability Equality Scheme and Access Plan
  
- Information sharing and data protection

### **Underpinning values**

- The child's needs and welfare are paramount. All children should be protected from abuse and neglect and have their welfare safeguarded.
- Early intervention together with partnership working with families and agencies are critical to safeguarding children and young people. All discussions with children and their families or carers should be plainly stated and jargon free.
- All children are individuals. Strategies to support them should be child-centred, taking account of a child's cultural, ethnic and religious background, their gender, their sexual orientation, their individual ability and any special educational needs or disabilities.
- Children, parents and other carers should be made aware of their responsibilities and their rights, together with advice about the power of professionals to intervene to safeguard their child. A statement to this effect together with the name of the Designated Child Protection Coordinator should be included in information available to parents and carers.
- Each child has a right to be consulted about actions taken by others on his/her behalf. The concerns of children and their families should be listened to and due consideration given to their understanding, wishes and feelings. However the need to protect a child at risk of significant harm is the overriding factor.
- Schools should follow the inter-agency procedures of the LSCB accessed via the online manual at [www.liverpoolscb.org](http://www.liverpoolscb.org)

## **Key Legislation**

Section 10 of the Children Act 2004 places a duty on the local authority to make arrangements with relevant agencies to cooperate to improve the well-being of children. *Working together to safeguard children* (2013) sets out an expectation on schools to identify where there are child welfare concerns and take action to address them, in partnership with other organisations:

'Protecting children from harm and promoting their welfare depends upon a shared responsibility and effective joint working between different agencies'

Section 175 of the 2002 Education Act 'requires local education authorities and the governing bodies of maintained schools and FE colleges to make arrangements to ensure that their functions are carried out with a view to safeguarding and promoting the welfare of children. In addition, those bodies must have regard to any guidance issued by the Secretary of State in considering arrangements they need to make for that purpose.'

Section 157 of the 2002 Education Act 'requires proprietors of independent schools (including academies and city technology colleges) to have arrangements to safeguard and promote the welfare of children who are pupils at the school.'

## **Roles and Responsibilities**

### **Governing Bodies**

'Governing bodies are accountable for ensuring their establishment has effective policies and procedures in place in accordance with this guidance, and monitoring the school's compliance with them. Neither the governing body, nor individual governors, have a role in dealing with individual cases or a right to know details of cases (except when exercising their disciplinary functions in respect of allegations against a member of staff).'

Safeguarding Children and Safer Recruitment in Education DFES 2006

(Currently under review).

### **Governors and Leadership teams should ensure:**

1. The child protection policy is reviewed annually and deficiencies in practice are remedied immediately. The effectiveness of all safeguarding policies is reviewed.
2. A named governor meets termly with the Designated Child Protection Coordinator and reports to the full governing body (Template: appendices p33-4)
3. The Designated Child Protection Coordinator is a member of the Leadership Team and that they have attended appropriate training which is updated at least every two years. (Liverpool School Improvement Services provide yearly briefings and training new to the role of Designated Child Protection Coordinator.)

4. The whole staff and the governing body should receive regular training at least every three years. Induction is in place for all new staff.
5. The outcomes for all vulnerable groups of students are monitored including:
  - incidents of bullying
  - attendance
  - exclusions
  - attainment and progress
  - participation in clubs and activities
6. Student and parent voice is reviewed in respect of safeguarding ensuring that any concerns lead to improvements in practice.
7. The Single Central Record is maintained and that site security and the arrangements for safer recruitment are regularly reviewed.
8. The school follows LA authority guidelines in respect of reporting and recording child welfare concerns including how records are kept and transferred.
9. The school has procedures for dealing with allegations of abuse against members of staff and volunteers. (Flowchart: appendices p37)
10. The school's safeguarding practices are quality assured. This should include an audit of safeguarding records and 'supervision' of the Designated Child Protection Coordinator and other members of the safeguarding team. (Guidance: appendices p12-13, 35-36)
11. Priorities and actions are drawn up following the Local Authority 175 audit.
12. Ensure the curriculum is mapped to ensure that there are clear activities and messages to help students stay safe.

**Designated Child Protection Coordinator should:**

1. Attend appropriate training including refresher training and briefings.
2. Arrange whole school training and induction for new staff. A powerpoint and resources are available from EDnet (Safeguarding: Training).
3. Support the development and monitoring a whole school policy and practice.
4. Maintain managerial oversight and supervision of other members of the child protection team.
5. Develop effective reporting and recording systems.
6. Monitor the outcomes for vulnerable students.

7. Work in partnership with other agencies by contributing to the assessment, provision and monitoring of young people. This will include preparing for and attending Child Protection and Child in Need Plan meetings.
8. Attend all initial case conferences.

**All Staff should:**

1. Be able to recognise signs and symptoms of abuse.
2. To respond appropriately by sharing their concerns, without delay, with the Designated Child Protection Coordinator.
3. To understand their responsibility to escalate their concerns if a child remains at risk or their needs are not met. Escalation processes are outlined in the appendices.
4. To report any allegations against staff to the Headteacher or in the case of the Headteacher concerns should be reported to the chair of governors.
5. Support the development and delivery of a curriculum that promotes safe messages to children and young people.
6. Follows the schools own code of conduct for staff working in an open and transparent way and according to national guidance (Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings, DFE 2009).

**Training**

The Designated Child Protection Coordinator attended training on:

(It is a statutory requirement to update training every two years. The Local Authority provides annual briefings and updates.)

Whole School Safeguarding Training was undertaken on: 29<sup>th</sup> October 2012

(It is a statutory requirement to update whole school training as a minimum every three years.)

Safeguarding Children and Safer Recruitment training has been attended by: Nadine Carroll

(Safer recruitment training is valid for five years. It is available from governor services and on-line from the Children's Workforce Development Council).

Additional training in relation to safeguarding and the safeguarding framework was undertaken by:

<b>Course</b>	<b>Name</b>	<b>Date</b>
<b>Safeguarding briefings</b>	<b>Nadine Carroll</b>	<b>20.09.13</b>
<b>Safeguarding briefings</b>	<b>Natalie Menagh</b>	<b>23.09.13</b>
<b>Safeguarding briefings</b>	<b>Jill Wright</b>	<b>23.09.13</b>

The school is committed to ensuring **all** staff receive safeguarding training as part of their induction.

Governors are committed to safeguarding training as part of their pattern of meetings.

Appropriate senior leaders and governors have attended safer recruitment training and are aware of their responsibilities in the following guidance:

Safeguarding Children and Safer Recruitment (DFES 2006)

### **Making and managing referrals**

It is important that training ensures all staff are aware of signs and symptoms of abuse and know how to record and report them. Signs and symptoms of abuse and guidance as how to behave during a disclosure are detailed in the appendices (p22-27).

All child welfare and child protections concerns must be reported without delay to the Designated Child Protection Coordinator (DCPC). The **Safeguarding Referrals: 'School Procedures Flowchart'** (Appendices' p28-29) and the LSCB guidance should **always be followed**. All referrals by the DCPC should be followed up in writing using the **multi-agency referral** form available on EDnet (Safeguarding: Worried about a child?)

The following appendices (p22-27) should be shared with all staff, governors and volunteers and be part of the school's induction processes:

- What is abuse?
- Categories of child abuse: Physical abuse, Sexual abuse, Emotional abuse and Neglect
- Possible signs of abuse
- The following concerns should always be considered as they are identified themes following investigations in to abuse
- What to do during a disclosure
- Things to say to a child during a disclosure
- Recording the Disclosure
- School Record Keeping Form
- Safeguarding Referrals: 'School Procedures Flowchart'

### **Monitoring the effectiveness of the child protection policy and all safeguarding practices**

The school must demonstrate to Ofsted, the Local Authority and governors that it quality assures its safeguarding practices and monitors the effectiveness of this policy. The appendices provide guidance and templates to assist the reporting to governors (Appendices, p12, 33-34).

### **Record keeping and the transferring of child protection records**

All child welfare records ('child protection' plan, 'child in need' plan, 'multi agency referral' or 'common assessment framework') should be kept separately, outside the child's ordinary educational records, and locked in a secure cabinet with limited access. The records should be passed individually and securely to the child's new school/referral unit or FE College and a copy retained until the child is 25 years old. The social worker should be informed as the child moves school.

Ofsted may well ask to view a child's secure records if they are subject to a 'child protection' plan, 'child in need' plan, 'multi agency referral' or 'common assessment framework' (CAF).

The LSCB as part of its functions may need to request a child's file as part of a multi-agency audit. The headteacher will be informed in writing if this becomes necessary making clear the child's name, DOB and reasons for the request.

The record keeping auditing tool (Appendices, p35-36) should be used to support the school to assess themselves against best practice. For example, school records should demonstrate evidence of partnership working with other agencies.

## **Managerial Supervision**

It is important that there is supervision of the Designated Child Protection Coordinator and the child protection team. This should involve reviewing the decisions made, actions taken and outcomes on a sample of cases. A statement describing the process of managerial supervision is included in the appendices (p13).

## **Informing parents and others of our safeguarding practices**

A copy of this policy will be available to any parents on request. It is downloadable from the school website. A statement in respect of safeguarding and child protection is displayed in reception and circulated to all potential new employees during the recruitment process. Visiting staff and visitors are given a copy of the school's code of conduct for adults and how to refer child welfare concerns.

## **E-safety, data protection and the use of digital photographic equipment**

The school's E-safety policy clearly outlines the way in which the school uses technology and the measures in place to ensure safe and responsible use. This includes a clear code of conduct which all stakeholders are asked to adhere to. Alongside this the school's data security policy and the policy related to the use of digital photographic equipment by staff, students and parents/carers identifies strategies to minimise risk. Schools should consider, in particular, Looked After Children (Children in Care) who might be put at risk by being included in publicity materials or school photographs.

## Appendices

### Guidance and templates:

Quality assuring safeguarding practices	p12
All records should evidence	p12
Information sharing	p13
Monitoring Attendance	p13
Managerial Supervision Statement	p13
Safeguarding in the Curriculum	p14
Pupil and Parent Voice	p15
Characteristics of a Safer School	p15
Guidance and key principles emerging from Serious Case Reviews	p16
Preparing for Ofsted	p18
Subsidiary Guidance Ofsted , 2012 (Extract)	p18
Safeguarding in Schools: Best Practice, Ofsted 2011 (Extract)	p21
What is abuse?	p22
Categories of child abuse	p22
Definitions of abuse	p22
Possible signs of abuse	p24
What to do during a disclosure	p26
Safeguarding Referrals: 'School Procedures Flowchart'	p26
Escalating concerns	p30
School Child Protection internal referral/recording form	p31
Summary Chronology for the outside of each child's file	p32
Termly safeguarding report to Governors	p34
School safeguarding records auditing tool	p35

Allegations against staff flowchart	p37
Key Contacts	p38
Key Websites	p39
LSCB Thresholds	p40
Key DfE, Local Authority and LSCB Guidance	p49

## **Quality assuring safeguarding practices**

The school must demonstrate to Ofsted, the Local Authority and governors that it quality assures its safeguarding practices and monitors the effectiveness of this policy. The school uses the following prompts to demonstrate to the governors and LA that it effectively scrutinises its safeguarding practices. The following actions are recorded in the governors minutes:

- There is child protection training in place for all staff, the Designated Child Protection Coordinator (DSCO) and governors. Yearly LA safeguarding briefings are attended by the Designated Child Protection Coordinator.
- The Local Authority 175 audit is signed by the head, DSCO, chair of governors and safeguarding governor with key strengths and actions identified to all governors.
- The Headteacher can demonstrate effective managerial oversight/supervision of the DSCO and safeguarding team.
- Unauthorised attendances and persistent absentees are analysed carefully.
- The safeguarding team including the EWO, embedded police officer and school nurse meets regularly to review decisions and actions in respect of a child.
- The audit record keeping form has identified good practice and areas for improvement in particular the LA record keeping templates have been adopted and records demonstrate effective challenge, information sharing and partnership working.
- The safeguarding governor meets termly with the DSCO to complete the reporting to governors template which highlights developments in practice.
- The school presents to governors its data analysis for students with safeguarding concerns and what implications there are for practice. (including attendance, bullying exclusions, attainment, progress, participation in clubs and activities)
- The analysis of the views of the views of parents/carers of vulnerable students and the students themselves is shared with governors specifically any implications for practice.

### **All record keeping should evidence:**

- a chronology summarising submissions to the child's file.
- attendance of colleagues at key meetings (case conferences, core groups).
- that the targets in Child Protection Plans are being addressed at school level.
- there is tracking of attendance, attainment and progress data together with the young person's engagement in clubs and activities.
- the sharing of information with other key agencies promoting partnership working.
- that young people, parents' and carers' views have been sought and appropriately addressed.

- and all key communications, discussions, decisions and actions related to the young person.

## **Information Sharing**

Professionals should take account of the advice in 'Information sharing: Guidance for Practitioners and Managers' (HMG 2008). It is not always necessary to seek consent from parents or carers to share information when a child is at risk. However it may be appropriate to inform them that a referral to Childrens Services is necessary providing it does not put the child at further risk or prejudice an investigation. Liverpool's Careline will always provide guidance. Whilst confidential information is usually only shared with professionals directly involved with the child on a 'need to know basis' both Ofsted and the Liverpool Childrens Safeguarding Board (LSCB) have a right to request or view confidential child protection files in order to carry out their functions.

## **Monitoring attendance**

It is important to monitor the welfare of those children with attendance concerns particularly those with chronic attendance or persistent absentees. Schools should also scrutinise the attendance of off-site provision. Similarly the attendance of children with known welfare and safeguarding concerns should be monitored on a weekly basis. The social worker should be informed immediately when there are unexplained absences or attendance concerns. It is important that the school's attendance team including the EWO, school nurse and embedded police officer are aware of any safeguarding concerns. It is critical that when a child is not attending school their welfare is confirmed and best practice would be for an appropriate professional to visit the home and speak to the child away from their parents/carers, particularly if there are any safeguarding concerns.

Local Authority guidance should always be followed when a child is deemed 'missing from education'. In addition if a parent withdraws their child from school and chooses to 'educate them at home' the school should always copy their safeguarding records to the Local Authority Principal Officer for Attendance (Ron Collinson: [ron.collinson@liverpool.gov.uk](mailto:ron.collinson@liverpool.gov.uk)).

## **Managerial Supervision Statement**

Supervision is a structured conversation between a colleague who has direct oversight of cases involving child welfare, safeguarding or child protection issues and their line manager. This meeting should take place monthly or at least every half term. If schools are uncertain about the phrase 'supervision' they might prefer to use the term: 'Safe and best practice conversation' or 'Safeguarding Consultation'.

Supervision aims to:

- Support the caseworker to understand and manage their own emotions and well being.
- Review the actions and decisions made for a child to ensure policy, guidance and best practice are being followed.

- Enable the caseworker to reflect and analyse barriers to progress so that appropriate actions can be developed and the child's needs met.
- Enable the caseworker to manage their workload, identify priorities and work with other agencies to manage risk.
- Enable the school to consider if any risks around the child have increased and whether the school needs to escalate their concerns with Childrens Services and other agencies

For schools, supervision and performance management are separate processes although issues raised during supervision may inform performance management.

Supervision is critical for anyone who undertakes the role of child protection coordinator. It should also be considered for any staff who support the designated child protection coordinator and act as the key worker for the child or attend case conferences on behalf of the school (e.g. Head of Year, Form Teacher, Class teacher or Learning Mentor).

Whilst the principle model of supervision is a dialogue between the caseworker and their line manager, schools should also consider adopting a team approach which enables colleagues to challenge their collective practices ensuring the child's needs are being met. Schools should include the School Nurse and Education Welfare Officer in these extended team meetings.

Supervision should compliment the day to day conversations colleagues have about safeguarding and the regular cycle of school meetings which may include safeguarding as an agenda item. Supervision should also compliment the school's other strategies that enable the school to quality assure its safeguarding practices including:

- Strengths and areas for development identified following the *LA 175 Audit*
- An internal audit of the school's child protection files using the *LA record keeping auditing tool*.
- Scrutiny by the safeguarding governor and full governing body adopting the *LA report to governors' template*.

### **Safeguarding in the curriculum**

Children not only have the right to be protected from all forms of abuse and exploitation but they have right to learn ways to keep safe and avoid dangers especially in respect of e-safety. The curriculum should be mapped to provide safe messages. Children should learn:

- children have a right to feel safe
- their bodies belong to them
- some feelings don't feel right
- it's ok to say 'no' if they are asked to do something which feels wrong
- some secrets shouldn't be kept
- they should always tell a trusted adult if something is worrying them

They should be helped to discuss:

- the nature of trust,
- relationships
- and emotions

in ways which help them to learn about:

- becoming assertive
- self esteem and safe awareness
- recognising potentially dangerous situations
- taking responsibility for themselves and others

### **Pupil and Parent Voice**

The school ensures it collects and analyses the views of vulnerable students and their parents/carers using the following questions as prompts:

- Is this a safe school? / Do you feel safe in school?
- Are you taught how to stay safe?
- Are there any situations/ places where you do not feel safe at school?
- What could we do to help make you feel safer at school?
- If you felt unhappy / unsafe/ worried at school, who could you tell and how would you do that?

### **In addition:**

- Parent's/carers are informed that there is a Child Protection Policy in place and the name of the Child Protection Coordinator.
- The school policy is available on the school website and available to all parents on request. A summary version is also available.
- Information is displayed in reception sharing the school's commitment to safeguarding.
- The school prospectus and information to parents sets out the school's responsibilities in respect of child protection and safeguarding.

### **Characteristics of a safer school that promotes a safe ethos and culture**

- The name of the child protection co-ordinator is known to all members of the school community.

- The school prospectus provides the name of the child protection co-ordinator and describes the school's commitment to safeguarding students.
- A copy of the school's safeguarding policy and a summary version is readily available to parents/carers.
- Visitors on arrival to the school are greeted with a display which highlights the school's commitment to safeguarding students.
- Visitors are also provided with a leaflet highlighting the school's code of conduct and how they should respond to child welfare concerns.
- All staff are aware of their responsibility to report immediately any safeguarding concerns.
- The school has a professional code of conduct, giving guidance to all staff and volunteers.
- The school has a whistle blowing policy and has procedures for staff escalating safeguarding concerns.
- The school ensures that all extended school activities adhere to its policies and practice including risk assessing activities.
- The school curriculum is mapped to demonstrate where safe messages are given to students.
- By establishing and maintaining an environment where children feel secure, are encouraged to talk, and are listened to.
- By ensuring children know that there are adults in the school whom they can approach if they are worried.

### **Guidance and key principles emerging from serious case reviews**

The following have been identified by Ofsted (2010) following a review of the lessons learnt from Serious Case Reviews :

- The voice of the child should always be heard
- Information sharing is key to protecting and safeguarding children
- Procedures should be followed
- Ensure actions take place avoiding assumptions that others are aware and dealing with it

- Value challenge, supervision and scrutiny
- Records should be up to date and accurate

'The failure of all professionals to see the situation from the child's perspective and experience; to listen to what they said, to observe how they were and to take serious account of their views in supporting their needs is probably the single most consistent failure in safeguarding work with children.'

Ofsted 2009

'There are five main messages with regard to the voice of the child (Ofsted 2011). In too many cases:

1. The child was not seen frequently enough by the professionals involved, or was not asked about their views and feelings
2. Agencies did not listen to adults who tried to speak on behalf of the child and who had important information to contribute
3. Parents and carers prevented professionals from seeing and listening to the child
4. Practitioners focused too much on the needs of the parents, especially on vulnerable parents, and overlooked the implications for the child
5. Agencies did not interpret their findings well enough to protect the child.'

**The following concerns should be shared with all agencies working with the child as they are identified themes following investigations in to abuse:**

- there is a history of concerns and other agency involvement (mental health, drug, alcohol, domestic violence)
- parent or carers are ambivalent towards the child
- medical appointments are missed
- unwilling to agree to an assessment of the child's needs
- there is poor engagement with services
- increasing hostility or aggression when challenged
- non compliance with issues raised
- the family do not enable other agencies to speak to the child alone
- the presence of unknown males in the household
- concerns raised about siblings at other schools

- the child is self harming or attempting suicide

## **Preparing for Ofsted**

Whilst there is no longer an individual judgement on safeguarding it 'remains a priority' for Ofsted who have produced subsidiary guidance for inspectors 2012 will support school's preparation for inspection.

Ofsted have revised their: Briefing for section 5 inspectors on Safeguarding Children (Ofsted 2009) producing update document in September 2012.

Ofsted also provide clear updated guidance on their website to address the myths in respect of safeguarding:

<http://www.ofsted.gov.uk/schools/for-schools/safeguarding-children>

## **Subsidiary guidance Ofsted 2012**

### **Supporting the inspection of maintained schools and academies from January 2012**

#### ***Evaluating Pupils' Safety***

*Inspectors will need to consider whether a culture of safety operates within the school. If pupils are found to be behaving unsafely in lessons or around the school, this should prompt more intense scrutiny of the school's approach to safeguarding. Check that the school takes reasonable steps to ensure that pupils are safe on the school site, for example by monitoring visitors or volunteers or those using the premises during school time.*

#### ***Links between behaviour and safety and other aspects of the school's work***

*Where there are concerns about behaviour and safety, inspectors should investigate the quality and implementation of a clear and concise behaviour policy, linked to learning. In schools where behaviour policies are not planned, managed or organised well, their impact is minimal. Successful behaviour management involves senior leaders seeing it as part of school improvement and closely linked to the quality of teaching.*

*Inspectors should consider the reasons for poor behaviour as this may indicate unmet learning needs through weak teaching, a lack of guidance and/or support, a poor ethos, low expectations or bullying. Poor behaviour may also indicate learning difficulties or underachievement (including literacy difficulties) that the school has not identified.*

## ***Ensuring pupils are safe***

*Safeguarding remains a priority. Safeguarding practice and guidance is underpinned by a duty for schools to cooperate with relevant agencies to safeguard and promote the welfare of children.*

*Inspectors should check the single central register to ensure that adults working with pupils are appropriately recruited and vetted. Other evidence will come from discussions with the headteacher, governors' representative and other staff as part of more general interviews to explore management responsibilities regarding child protection and the training and support for safeguarding.*

*There is no need to spend excessive amounts of time checking policies and detailed procedures and protocols unless a significant concern is identified.*

*Observe pupils around the school and discuss with them whether the school helps pupils to keep safe, including encouraging them to adopt safe and responsible practices and deal sensibly with risk.*

*On a very small number of occasions, inspectors may come across evidence or allegations of child abuse within a school. When such allegations have been made, the lead inspector should report the concerns using the following wording:*

*'Concerns raised by some pupils/a pupil/some parents/one parent during the inspection are being examined by the appropriate bodies.'*

*This text should be inserted as the last bullet point in the most relevant section heading of the report. In cases of alleged abuse this is likely to be under behaviour and safety.*

*Where provision for children in registered provision is inadequate, inspectors will need to consider whether this will lead to a school being issued with a notice to improve or placed in special measures.*

*Where there are collaborative arrangements for extending the curriculum such as in collaborative sixth forms, college work and other off-site learning, inspectors should investigate how well these work 'on the ground'. Discussion with pupils and teaching staff should help inspectors to establish whether:*

- timetables between institutions are effectively matched so opportunities for collaboration are provided and pupils do not miss lessons or other activities as a result of collaborative arrangements*
- transport and travel arrangements between collaborating institutions are reliable and enable students to be punctual*
- there is time for teachers and subject leaders in collaborating organisations to plan together*

- *there are systems to coordinate and report on attendance and punctuality information.*

*Inspectors should identify what the school itself intends to provide and what it offers in collaboration with other schools or colleges. The options for pupils made available by the school, and through collaboration, should be assessed for all pupils progressing from Year 11.*

*Inspectors should evaluate not just whether vocational courses have increased choice but also whether they properly reflect the needs and interests of pupils. The range of vocational courses offered should be based on the school's careful analysis of students' needs and the requirements of the local labour market, not solely on the availability of staff or facilities.*

*In considering the school's self-evaluation of the sixth form provision, inspectors may investigate how well subject departments monitor their effectiveness and how the outcomes of these monitoring activities are included in the overall evaluation of the sixth form.*

*The arrangements for safeguarding apply to the sixth form as well as to the whole school. Inspectors should consider whether any modifications for sixth forms, such as unsupervised signing in and out of school are appropriate.*

### **Safeguarding**

*When evaluating safeguarding, inspectors should bear in mind that exclusion, part-time timetables and poor attendance that is not followed up effectively can all place pupils in a vulnerable situation. Inspectors should also take into account the procedures to safeguard pupils at off-site alternative provision.*

## **Safeguarding in Schools: Best Practice (Ofsted, 2011)**

*The following extract from Ofsted highlights outstanding safeguarding practice:*

- *high-quality leadership and management that makes safeguarding a priority across all aspects of a school's work*
- *stringent vetting procedures in place for staff and other adults*
- *rigorous safeguarding policies and procedures in place, written in plain English, compliant with statutory requirements and updated regularly; in particular, clear and coherent child protection policies*
- *robust arrangements for site security, understood and applied by staff and pupils*
- *a curriculum that is flexible, relevant and engages pupils' interest; that is used to promote safeguarding, not least through teaching pupils how to stay safe, how to protect themselves from harm and how to take responsibility for their own and others' safety*
- *child protection arrangements that are accessible to everyone, so that pupils and families, as well as adults in the school, know who they can talk to if they are worried*
- *excellent communication systems with up-to-date information that can be accessed and shared by those who need it*
- *a high priority given to training in safeguarding, generally going beyond basic requirements, extending expertise widely and building internal capacity*
- *courteous and responsible behaviour by the pupils, enabling everyone to feel secure and well-protected*
- *well thought out and workable day-to-day arrangements to protect and promote pupils' health and safety*
- *rigorous monitoring of absence, with timely and appropriate follow-up, to ensure that pupils attend regularly*
- *risk assessment taken seriously and used to good effect in promoting safety.*

## Definitions from Working Together 2013

### **Children**

Anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.

### **Abuse**

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others (e.g. via the internet). They may be abused by an adult or adults, or another child or children.

### **Physical abuse**

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

### **Emotional abuse**

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

### **Sexual abuse**

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

perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

### **Neglect**

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

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

### **Young carers**

Are children and young persons under 18 who provide or intend to provide care assistance or support to another family member. They carry out on a regular basis, significant or substantial caring tasks and assume a level of responsibility, which would usually be associated with an adult. The person receiving care is often a parent but can be a sibling, grandparent or other relative who is disabled, has some chronic illness, mental health problem or other condition connected with a need for care support or supervision

## **Possible signs of abuse**

- asks you if you will keep a secret if they tell you something
- talks about a friend who has a problem
- unexplained or untreated injuries
- severely bruised or injured
- talks of being in pain or discomfort
- unwilling to change in front of other children for P.E.
- always covering arms and legs even in hot weather
- fear of medical help or parents being contacted
- left in unsafe situations or with untreated medical conditions
- apparently afraid of parents or carers and unwilling to go home
- fearful of particular adults
- continually running away
- sudden behavioural changes including becoming aggressive, irritable, lethargic or withdrawn
- self harming or feeling suicidal
- sudden changes in weight or eating disorders
- poor self esteem
- poor social relationships
- punctuality or attendance issues including unexplained attendances
- frequently unclean, hungry or inadequately dressed
- constantly 'put down', insulted, sworn at or humiliated
- displays sexual behaviour seemingly inappropriate for their age including abusing others
- artwork, play or writing displays sexual themes
- takes on a parental role within the home
- unexplained amounts of money
- terrifying dreams
- soiling or wetting themselves
- urinary infections
- soreness or bleeding in genital or anal areas or in the throat
- drug or alcohol misuse

## **Female Genital Mutilation:**

### **Risk Factors:**

- A child talking about a special ceremony
- A young person talking about being 'cut'
- A child belonging to a certain communities
- Planning an extended trip abroad
- Knowledge of previous siblings

### **Indicators it may have taken place:**

- Prolonged absence
- Change in behaviour on returning from an extended holiday

- Urinary infections
- Bladder or menstrual problems
- Describing pain in the groin
- Avoiding physical activity
- Appears uncomfortable including when sitting
- Finds it difficult to sit still
- Talking about something happening to them or someone hurting them and having to keep a secret

### **Further Information**

- FGM is illegal and punishable with up to 14 years in prison.
- Senior Muslim clerics internationally have pronounced FGM as not Islamic.
- The London Central Mosque has spoken out against FGM explaining that as it causes harm to another person it is against the teachings of Islam.
- The Home Office indicate that up to 24,000 girls in the UK under 15 are at risk of FGM.
- Communities most at risk include: Kenyan, Somali, Sudanese, Sierra Leone, Egyptian, Nigerian, and Eritrean as well as non African communities including Yemeni, Afghani, Kurdish, Indonesian and Pakistani.

### **Some of the reasons offered as to why FGM takes place:**

- Many parents are under pressure within their communities to practice FGM
- Preserves virginity/ chastity
- Perpetuates a custom/tradition (SUNNA), rite of passage for a woman, prepares her for marriage
- Upholds family honour
- Cosmetically desirable
- Mistakenly believed to make child birth safer and is cleaner/ more hygienic, fulfill religious requirements
- Enables the girl and family to feel part of the community

### **How to respond to concerns about FGM:**

- Contact Careline and Police immediately
- Do not contact the family or ask any member of the community to mediate.
- Seek advice and support from recognised agencies

Follow this same process for concerns about Forced Marriage.

Remember the '**One Chance Rule**'.

### **What to do during a disclosure:**

- Stay calm; listen to the child; take the allegation seriously; use the child's language and write down what the child tells you

### **Five things to say to a child during a disclosure:**

- "I believe you"
- "It's not your fault"
- "I'm glad you told me"
- "I am sorry this happened to you"
- "I am going to help you"

### **Never:**

- promise to keep a secret
- express shock or embarrassment
- question the truth of what is being said
- ask leading questions
- take photographs
- ask the child to write or sign a statement
- express anger towards another abuser

### **Record the Disclosure**

- Record your concerns on the school's form
- Always record in the child's words no matter how distressing e.g. 'The child told me...'
- Differentiate between fact, opinion, interpretation, observation and allegation.
- Be accurate e.g. 'He showed me a burn mark on his right forearm. He told me his mother did this with a cigarette'
- Opinions should be clearly stated e.g. 'I thought this might be because...In my opinion...'
- Note down any witnesses or anyone who might corroborate your record
- Record the date, time and add your signature to the record
- place the form in the hand of the child protection coordinator or senior member of staff without delay (let them know if the child needs medical attention or needs immediate protection)

# Summary Child Protection Flowchart

A member of staff has concerns about a young person's welfare. This may be because the child has disclosed abuse towards them or the member of staff is concerned by physical or behavioural changes in the child which may indicate abuse or neglect.



The member of staff should record their concerns in writing, describing exactly what the child has said and/or what they have observed. They should sign and date their concerns and discuss them immediately with the school's child protection coordinator or a senior member of staff.

Allegations or concerns about an adult working within the school should be shared with the headteacher or in the case of the headteacher they should be reported to the Chair of Governors.



The child protection coordinator will draw upon Liverpool Safeguarding Children's Board Thresholds Guidance and ring Careline to share the school's concerns. This may lead the school to make a written referral. The child protection coordinator will agree with Careline how the parent/carers will be informed, if that is appropriate.

**1. Concern:** Allegation received, Disclosure from a child, Suspicion based on injury or behaviour or a Build up of concerns. Act, **do not delay!**  
Does the child need emergency hospital treatment or **immediate protection?** Ring 999

**2. Record:** Differentiate between fact, opinion, interpretation, observation and/or allegation. Record any witnesses. Use the child's own words. Put the date, time and your name and signature on the record. Remember our role is to record and refer and not to investigate.

**3. Respond:** Share your concerns and written notes with the Child Protection Coordinator (CPC)/Designated Safeguarding Officer who will lead the next steps in this flowchart. The CPC should use the 'Thresholds Assessment Aid' to inform their decision to refer. If in doubt ring CARELINE and consult.

**4. Seek Advice and Consult with CARELINE and Refer by telephone:** Ring CARELINE on 0151 233 3700 who will decide whether to accept a Child Protection Referral or advise if the matter can be dealt with by a 'Child in Need' Referral or by opening a CAF (Common Assessment Framework Form – Contact Pauline Ashton CAF Coordinator on 0151 233 2784 or [pauline.ashton2@liverpool.gov.uk](mailto:pauline.ashton2@liverpool.gov.uk)). Agree with CARELINE if the child's parents/ carers need to be contacted and who will contact them. Remember contact with the parents/carers must NOT put the child at further risk of harm or jeopardise a police investigation.  
**If you do not agree agreement with CARELINE's decision not to accept a Child Protection Referral (S47) or Child In Need Assessment (S17) a. Ask to speak to a social worker b. Ask to speak to a teamleader. c. Contact Careline Service Manager:Mike Evans [mike.evans@liverpooledirectlimited.co.uk](mailto:mike.evans@liverpooledirectlimited.co.uk)tel: 225 2045/2333700 and follow up your concerns in writing matching your concerns to the 'Threshold Assessment Aid' document. You should always receive an explanation as to why a referral is not being accepted.**

**5. Follow up your telephone referral in writing:**  
Complete a multi agency referral form downloaded from [http://www.liverpool.gov.uk/Health\\_and\\_social\\_care/Social\\_services/Careline/index.asp](http://www.liverpool.gov.uk/Health_and_social_care/Social_services/Careline/index.asp) and FAX it to CARELINE 0151 225 2275. Always follow up the fax by telephone to ensure it has been received. Refer to the 'Threshold Assessment Aid' document. Contact the school's where siblings of the child attend. **Alert other schools and agencies known to the family as appropriate.**

**6. Follow up:** Ring [North office 0151 225 6029/6027](tel:01512256029) or [Edge Hill South office 0151 225 8296/8298](tel:01512258296) if you are unsure as to the outcome of a Social Services investigation following a child protection referral. (If in doubt ring Careline again.) Ensure key colleagues are aware of the situation e.g. Form Teacher, Head of Year and/or Learning Mentor, School Nurse, EWO. The named CPC should at least attend the initial case conference along with another key person who may attend subsequent meetings.

**7. Monitoring, record keeping and the sharing of key information:**

All child protection records should be held separately securely with limited access and not as part of the child's usual school records. Ensure the student has a Learning Mentor or other key worker. All record keeping should evidence:

- a chronology summarising submissions to the child's file
- attendance of colleagues at key meetings (case conferences, core groups)
- that the targets in Child Protection Plans are being addressed at school level
- there is tracking of attendance, attainment and progress data together with the young person's engagement in clubs and activities
- the sharing of information with other key agencies promoting partnership working
- that young people, parents' and carers' views have been sought and appropriately addressed
- and all key communications, discussions, decisions and actions related to the young person.

Ensure you include:

- observations of the child and their views.
- historical information (do not view incidents/concerns in isolation)
- the family context including previous known engagement with agencies
- any agencies currently working with the family
- any adults or family members who have access to the children

## Escalating concerns

The Designated Child Protection Coordinator and the Headteacher are aware of their responsibilities to escalate their concerns with Children Services when a child's needs are not being met or they remain at significant risk of harm. The LSCB Thresholds Guidance will provide clear criteria to match their concerns to.

All those representing the school at child protection plan and child in need plan meetings should ensure that they are aware that the safeguarding of the child is a shared responsibility and as such they should expect to challenge the effectiveness of the multi agency support to the child.

The Designated Child Protection Teacher or their deputy will be expected to attend the initial Child Protection Conference. If a child is made subject to a Child Protection Plan it may be more relevant for the class teacher or head of year to attend the subsequent core group meetings.

In situations where the Child Protection Coordinator **does not** believe a referral to Social Services is appropriate and this decision **is questioned** by a member of staff the followings escalation processes should always be followed:

1. The Child Protection Coordinator (CPC) and the member of staff should meet and the CPC should explain why they feel a referral to social services is not appropriate based upon LSCB thresholds.

If there is still no agreement:

2. The CPC, member of staff and headteacher should meet to review the child's needs against the LSCB thresholds.

If there is still no agreement:

3. Social services (Careline) are contacted and the information shared.

The process for escalating concerns with Careline is described on the Referral Flowchart. However where concerns need escalating where a child has a known social worker the process is to speak and put your concerns in writing to the a. Team Leader b. Service Manager c. Divisional Manager d. Assistant Director and finally the Director of Children's Services. It would be appropriate to contact the Senior School Improvement Officer (Phil Cooper) to discuss your concerns and need to escalate.

Name of Student: \_\_\_\_\_

Staff Name (printed): \_\_\_\_\_

Job Title: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

**Description of event:**

(include names and contact details of those spoken to, differentiate between facts and opinions, consider student's views and the parents'/carers' views. Remember the child's needs are paramount)

**Agreed actions and anticipated outcomes:**

(Record all discussions, key communications and decisions made)

Signed: \_\_\_\_\_ Dated: \_\_\_\_\_

This form is used to record safeguarding and welfare concerns and communications about the young person. It should be passed to Designated Safeguarding Officer and filed securely. The school's child protection and Local Children's Safeguarding Boards procedures should always be followed.



**Termly Safeguarding Report to Governors:**

Number of new Child Protection referrals made	
Number of new Child In Need referrals made	
Number of new CAFs raised	
Total number of students subject to child protection plans	
Total number of students subject to child needs plans	
Total number of students subject to CAFs	
Number and circumstances of allegations against staff reported to LADO	
Number of Children in Care (LAC)	
Number of bullying incidents including categories e.g. homophobic (reference gender, ethnicity and year group)	
Number of racist incidents	
Number of exclusions (reference gender, ethnicity and year group)	

**Issues arising from the above audit, Local Authority 175 audit and other safeguarding practices including the management oversight/supervision of the safeguarding team and the record keeping audit:**

**The analysis of data in respect of children with safeguarding concerns (including attendance, bullying exclusions, attainment, progress, participation in clubs and activities):**

### Review of Safeguarding Policies

<b>Policies</b>	<b>Date next review</b>
Anti-bullying inc cyber bullying	
Behaviour Management and exclusions	
Child Protection	
Managing allegations against staff	
Drugs and substance misuse	
Extended school provision inc clubs and activities	
First Aid and Medication policy	
Health and safety	
E safety/Acceptable Use Policy	
PSHE curriculum	
Physical Handling and restraint	
Intimate care	
Racial equality	
Safer recruitment and selection	
Educational visits and residential trips (risk assessments)	
Sex education	
School security and the physical environment	
Use of photographs and video	
Use of volunteers and adult helpers	
Whistle blowing	
Work Experience	
Persistent Absentees and attendance	
Information sharing and data protection	

Tick	Audit Criteria	Comments/Actions to be taken
	<ol style="list-style-type: none"> <li>1. Are records up to date? Do records have a chronology summarising all entries on to the file enabling the file to be quickly reviewed?</li> <li>2. Are documents/notes/statements added to the file signed and dated by the member of staff?</li> <li>3. Do notes on the file show clear differentiation between facts and opinions?</li> <li>4. Is there evidence that the student's and parent/carer's views have been considered as part of the assessment and provision of needs?</li> <li>5. Is there evidence of information sharing with other agencies including the recording of the reasons for sharing/not sharing? (The schools attended by other siblings should be contacted.)</li> <li>6. Is there evidence of effective identification and management of risk of harm?</li> <li>7. Do records provide evidence of timely and appropriate actions and decision making?</li> <li>8. Is there evidence of interagency partnership working (records of discussions, information sharing, contributions to assessments, monitoring of agreed actions, dissenting views)?</li> <li>9. Is there evidence of attendance at appropriate meeting together with the minutes of those meetings (strategy meetings, case conferences, core group meetings, risk assessments)?</li> <li>10. Are the contact details for all agencies involved clearly accessible?</li> </ol>	

<p>11. Is there appropriate reference to issues of equality e.g. race, culture, heritage?</p> <p>12. Is there evidence of the file being reviewed with actions followed up (including appropriate challenge) leading to improved outcomes for the young person?</p> <p>13. Is management supervision of the records evidenced on the file?</p>	
--	--

Signed \_\_\_\_\_ Position \_\_\_\_\_ Date \_\_\_\_\_

This form should be used to supervise/audit safeguarding records (e.g. child protection, child in need, CAF, referrals) that are kept securely and separately from other records. Copies of all records should be retained until the child is 25. The file should be passed securely and discussed with a new school, FE college or Local Authority Officers (Children Missing from Education, Children Educated at Home and young people in Alternative Provision).

## Allegations against staff flowchart

Ian Bowden, Team Leader, Safeguarding Unit is the LADO. However the function of the LADO, in terms of giving advice to agency representatives on how to proceed with allegations or concerns, decision making regarding the convening of multi agency strategy meetings and the chairing of strategy meetings, is delegated to the Safeguarding and Quality Assurance Officers who are all managed by Ian Bowden.

Schools wishing to seek advice should contact the Safeguarding Officer within the Safeguarding Unit on 0151 225 8101 (during office hours) (email: safeguarding and reviewunit@liverpool.gcsx.gov.uk). All referrals should be made, without delay, to Careline on 0151 233 3700 (24hrs). Careline would normally contact the Police on the school's behalf (Merseyside Police 0151 709 6010).

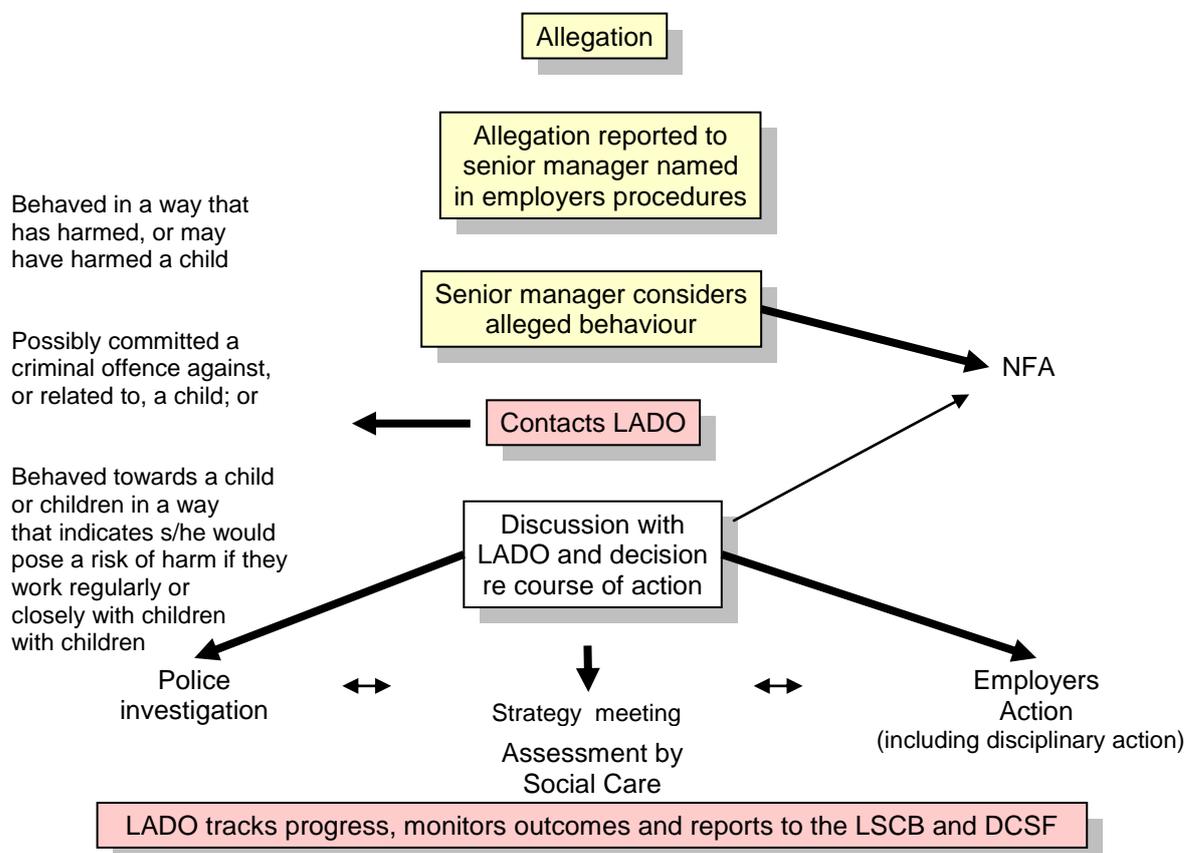
As the LADO, Ian Bowden will have oversight of all aspects of the LADO role. (He can be contacted on 0151 225 8101 and by email: ian.bowden @liverpool.gcsx.gov.uk)

The Safeguarding Unit is based at The Ray Hurst Centre, Pendine Close L6 3BH

Local Safeguarding Childrens Board's and the DFE's guidance:

<http://www.education.gov.uk/aboutdfe/statutory/g0076914/dealing-with-allegations-of-abuse/dealing-with-allegations-of-abuse-against-teachers-and-other-staff>

[http://liverpoolscb.proceduresonline.com/chapters/p\\_alleg\\_adults\\_ch.html](http://liverpoolscb.proceduresonline.com/chapters/p_alleg_adults_ch.html)



## Key Contacts:

**Careline** (referrals to social services): 0151 233 3700

### Local Authority Designated Officer (Allegation against staff)

**Ian Bowden** [safeguardingandreviewunit@liverpool.gcsx.gov.uk](mailto:safeguardingandreviewunit@liverpool.gcsx.gov.uk)  
[ian.bowden@liverpool.gcsx.gov.uk](mailto:ian.bowden@liverpool.gcsx.gov.uk) 0151 225 8101

**Senior School Improvement Officer, Safeguarding and Inclusion**  
(General safeguarding and child protection guidance and school training)

**Phil Cooper** [phil.cooper@liverpool.gov.uk](mailto:phil.cooper@liverpool.gov.uk)  
0151 233 4020 07921942091

**Local Children's Safeguarding Board** 0151 233 1151

### CAF Coordinator

**Pauline Ashton** [pauline.ashton2@liverpool.gov.uk](mailto:pauline.ashton2@liverpool.gov.uk)  
0151 233 5772

### Careline Service Manager

**Mike Evans** [mike.evans@liverpooldirectlimited.co.uk](mailto:mike.evans@liverpooldirectlimited.co.uk)  
0151 225 2045

### E-Safety Lead Officer

**Paul Bradshaw** [paul.bradshaw@liverpool.gov.uk](mailto:paul.bradshaw@liverpool.gov.uk)  
0151 233 3885

### Early intervention Team

**Rose Devine** [rose.devine@liverpool.gov.uk](mailto:rose.devine@liverpool.gov.uk)

0151 233 5233 07753832765 - Rose Devine Team Leader EIT

0151 233 4447 Social Workers/ Supporting Families

0151 233 5772 CAF Co-ordinator

0151 233 4381 Family Support & YOS

0151 233 2753 Connexions NEET

Address: Early Intervention Team, Belle Vale Childrens Centre, Hedgefield Road,  
L25 2RW

**Key Websites:**

<http://www.ofsted.gov.uk/schools/for-schools/safeguarding-children>

[www.direct.gov.uk/crb](http://www.direct.gov.uk/crb)

[www.ofsted.gov.uk](http://www.ofsted.gov.uk)

[www.liverpoolscb.org](http://www.liverpoolscb.org)

## Liverpool Safeguarding Children Board Threshold Guidance



### Liverpool Safeguarding Children Board Threshold Guidance

### Quick Reference Guide

The LSCB Threshold Guidance establishes a consistent approach for:

- four levels of need and corresponding service intervention; and
- beginning the CAF process.

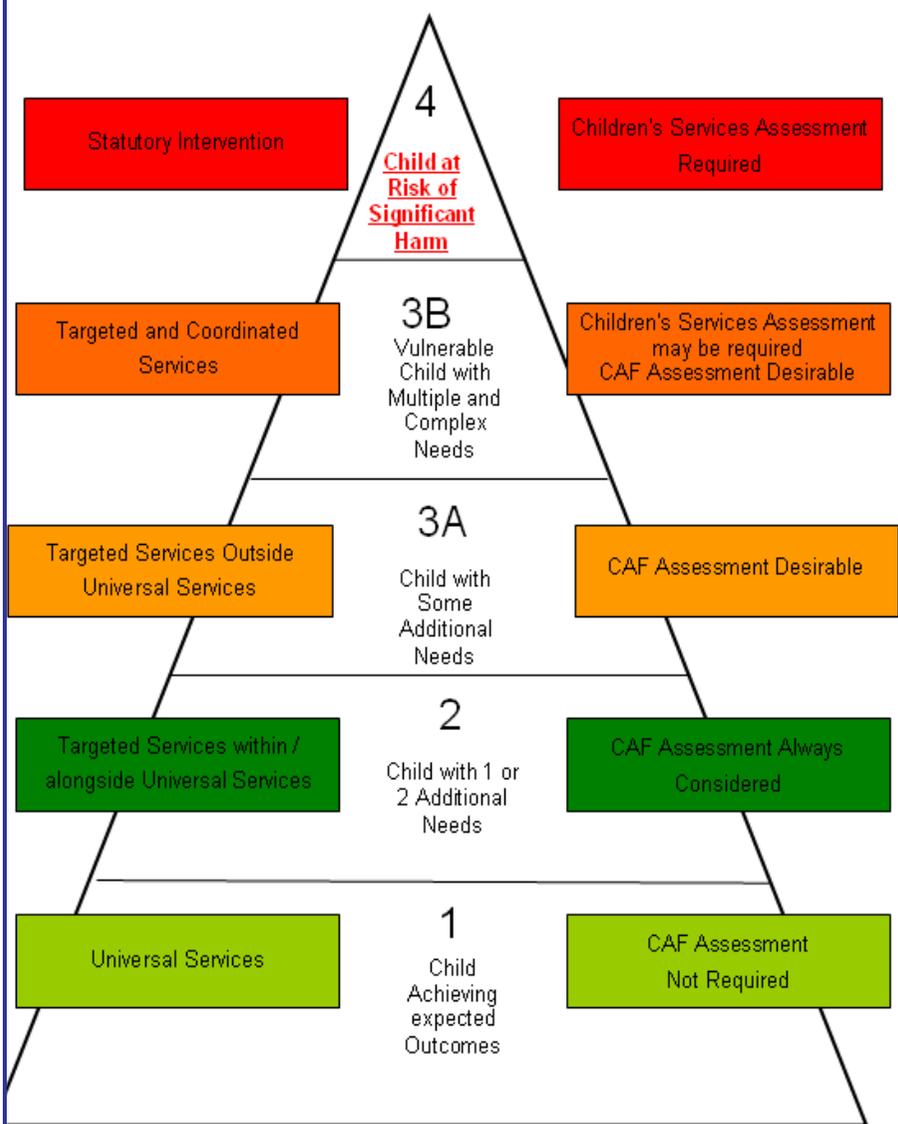
This approach aims to facilitate swift and easy access to appropriate services and help remove barriers to cross-authority integrated service delivery. It is acknowledged that children may move from one level of need to another and that agencies (including universal services) may offer support at more than one level.

\*The Liverpool Safeguarding Children Board Threshold Guidance does not guarantee service provision by particular agencies at each level.

#### **If a child has suffered or is likely to suffer significant harm**

When there is an immediate need to protect a child because they are being harmed or at risk of harm the practitioner **must** contact the local authority Children's Social Care and/or police directly and make a telephone referral. All practitioners must follow the referral process and follow up a verbal referral with a written referral. The LSCB Threshold guidance within this quick reference represent the four main level descriptors. Detailed risk factors are expanded upon in the LSCB Threshold Guidance Aid to Assessment which can be found at: [www.liverpoolscb.org](http://www.liverpoolscb.org)

Liverpool Safeguarding Children Board  
Threshold Guidance



Level 4: Refer directly to Children's Services Careline: 0151 233 3700 straightaway with any concerns that a child or young person has suffered or may be at immediate or acute risk of suffering immediate harm.

Your intervention should be designed to reduce the risk factors and increase the protective factors the child or young person is subject to.

## The Four Levels of Need

The LSCB Threshold Guidance builds from four levels of need.

### Level 4 Child at risk of significant harm

Four categories of harm; Physical, Emotional, Neglect and Sexual, require statutory intensive support. This in particular includes the threshold for child protection which will require children's social care intervention.

### Level 3 Child with some additional needs (3A) / complex needs (3B)

Children likely to require longer term intervention from statutory and or specialist services. Common Assessment Framework may still be appropriate at this level. Children with additional and / or complex needs may require a targeted integrated response which will usually include a specialist or statutory assessment/ service. This is also the threshold for a child in need which will require children's social care intervention. Please refer to the Children in Need Protocol. If it is agreed that a child may be a child in need under the Children Act 1989 then a referral to children's social care should be discussed with the child and parents. If they consent, then the child should be referred to the local authority children's social care.

### Level 2 Child with 1 or 2 additional needs

Child needs are not clear, not known or not being met. This is the threshold for common assessments. Please refer to the Children in Need Protocol.

### Level 1

No identified additional needs. Response services

**Notes:** Most children and young people's needs will be met through universal services i.e. schools, youth services, GP surgeries - as well as from support from within the family, friendship and community networks. A relatively small number of children and young people at risk of significant harm or significant impairment to health or development require specialist support (Level 4), usually led by Children's Social Care.

In between levels 1 and 4 are the vulnerable children/young people who have additional needs and are in need of targeted support. These children/young people's needs obviously do not rise to Level 4.

Those in Level 3 may meet the criteria for assessment by social care.

**It will be a matter of judgement and consultation whether in fact their needs do need to be referred or can be met lower down the hierarchy.**

Level 1

No additional needs, only requiring universal service support

Level 2 – Child with 1 or 2 additional needs

Features	Universal Example Indicators	Assessment Process
Children with no additional needs Children whose developmental needs are met by universal services	<b>Developmental Needs</b>	<p><b>No Common Assessment is required</b> Children should access universal services in a normal way</p> <p><b>Key universal services that may provide support at this level:</b> Education Children's Centres &amp; Early Years Health visiting service School Nursing GP Play Services Integrated Youth Support Services Police Housing Voluntary &amp; Community Sector</p>
	<p><b>Learning/Education</b></p> <ul style="list-style-type: none"> <li>Achieving key stages</li> <li>Good attendance</li> <li>No barriers to learning</li> <li>Planned progression beyond statutory school age</li> </ul> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>Good physical health with age appropriate developmental milestones including speech and language</li> </ul> <p><b>Social, Emotional, Behavioural, Identity</b></p> <ul style="list-style-type: none"> <li>Good mental health and psychological well being</li> <li>Good quality early attachments, confident in social situations</li> <li>Knowledgeable about the effects of crime and anti social behaviour</li> <li>Knowledgeable about sex and relationships and consistent use of contraception if sexually active</li> </ul> <p><b>Social relationships</b></p> <ul style="list-style-type: none"> <li>Stable families where parents are able to meet the child's needs</li> </ul> <p><b>Self-Care and Independence</b></p> <ul style="list-style-type: none"> <li>Age appropriate independent living skills</li> </ul>	
	<b>Family and Environmental Factors</b>	
	<p><b>Family History and Well-Being</b></p> <ul style="list-style-type: none"> <li>Supportive family relationships</li> </ul> <p><b>Housing, Employment and Finance</b></p> <ul style="list-style-type: none"> <li>Child fully supported financially</li> <li>Good quality stable housing</li> </ul> <p><b>Social and Community Resources</b></p> <ul style="list-style-type: none"> <li>Good social and friendship networks exist</li> <li>Safe and secure environment</li> <li>Access to consistent and positive activities</li> </ul>	
<b>Parents and Carers</b>	<p><b>Basic Care, Safety and Protection</b></p> <ul style="list-style-type: none"> <li>Parents able to provide care for child's needs</li> </ul> <p><b>Emotional Warmth and Stability</b></p> <ul style="list-style-type: none"> <li>Parents provide secure and caring parenting</li> </ul> <p><b>Guidance Boundaries and Stimulation</b></p> <ul style="list-style-type: none"> <li>Parents provide appropriate guidance and boundaries to help child develop appropriate values</li> </ul>	

Features	Low to Vulnerable - Example Indicators	Assessment Process
<p><b>Vulnerable</b> These children have low level additional needs that are likely to be short-term and that may be known but are not being met</p> <p>Child's needs are not clear, not known or not being met</p> <p>Child with additional needs – requiring multi-agency intervention</p> <p>Lead professional and Team around child</p>	<b>Developmental Needs</b>	<p><b>A Common Assessment</b> Is available for completion with the child to identify their strengths &amp; needs and to gain specialist support Programme aiming to build self-esteem and enhance social/life skills Prevention Programmes Positive activities</p> <p><b>Key agencies that may provide support at this level:</b> <b>Universal and targeted</b> Youth crime prevention services Targeted drug and alcohol information, advice and education including harm reduction advice to support informed choices Health, Education, Children's Centres &amp; Early Years Educational psychology Educational Welfare Specialist Play Services Integrated Youth Support Services Voluntary community services Family support services</p>
	<p><b>Learning / Education</b></p> <ul style="list-style-type: none"> <li>Occasional truanting or non attendance</li> <li>School action or school action plus</li> <li>Identifies language and communication difficulties</li> <li>Reduced access to books, toys or educational materials</li> <li>Few or no qualifications</li> <li>NEET</li> </ul> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>Slow in reaching developmental milestones</li> <li>Missing immunizations or checks</li> <li>Minor health problems which can be maintained in a mainstream school</li> </ul> <p><b>Social, Emotional, Behavioural, Identity</b></p> <ul style="list-style-type: none"> <li>Low level mental health or emotional issues requiring intervention</li> <li>Pro offending behaviour and attitudes</li> <li>Early onset of offending behaviour or activity (10-14)</li> <li>Coming to notice of police through low level offending</li> <li>Expressing wish to become pregnant at young age</li> <li>Early onset of sexual activity (13-14)</li> <li>Sexual active (15+) with inconsistent use of contraception</li> <li>Low level substance misuse (current or historical)</li> <li>Poor self esteem</li> </ul> <p><b>Self-Care and Independence</b></p> <ul style="list-style-type: none"> <li>Lack of age appropriate behaviour and independent living skills that increase vulnerability to social exclusion</li> </ul>	
	<b>Family and Environmental Factors</b>	
	<p><b>Family and Social Relationships and Family Well-Being</b></p> <ul style="list-style-type: none"> <li>Parents/carers have relationship difficulties which may affect the child</li> <li>Parents request advice to manage their child's behaviour</li> <li>Children affected by difficult family relationships or bullying</li> </ul> <p><b>Housing, Employment and Finance</b></p> <ul style="list-style-type: none"> <li>Overcrowding</li> <li>Families affected by low income or unemployment</li> </ul> <p><b>Social and Community Resources</b></p> <ul style="list-style-type: none"> <li>Insufficient facilities to meet needs e.g. transport or access issues</li> <li>Family require advice regarding social exclusion e.g. hate crimes</li> <li>Associating with anti social or criminally active peers</li> <li>Limited access to contraceptive and sexual health advice, information and services</li> </ul>	
<b>Parents and Carers</b>	<p><b>Basic Care, Safety and Protection</b></p> <ul style="list-style-type: none"> <li>Inconsistent care e.g. inappropriate child care arrangements or young inexperienced parent</li> </ul> <p><b>Emotional Warmth and Stability</b></p> <ul style="list-style-type: none"> <li>Inconsistent parenting, but development not significantly impaired</li> </ul> <p><b>Guidance Boundaries and Stimulation</b></p> <ul style="list-style-type: none"> <li>Lack of response to concerns raised regarding child</li> </ul>	

## Level 3 Child with some additional/complex needs

Additional or complex needs requiring integrated targeted support or use of the Common Assessment Framework.

## Level 4 Children at risk of significant harm

Additional needs requiring specialist or statutory integrated response OR child protection (section 47)

Features	Medium Risk Indicators	Assessment Process
<p>Children in this category may have had the child moved into specialist care as defined by the Children Act and may be in need.</p> <p>*Be referring to care, ask their involvement will be the intention?</p> <p>It will be a matter of judgement and consultation in fact needs do to be referred or can be lowered down the hierarchy.</p> <p>Children with high additional needs/complex needs to require term intervention from primary and/or specialist services</p> <p>Children need: The children are eligible for a care plan in need from their social carers and are at risk of moving to a high level of risk if they do not receive early intervention. This may include children who have been assessed as "high risk" in the recent past, or children who have been adopted and require additional support. If a social worker is allocated they will be the Lead Professional</p>	<p><b>Developmental Needs</b></p> <p><b>Learning / Education</b></p> <ul style="list-style-type: none"> <li>Short term exclusions or at risk of permanent exclusion, persistent truanting</li> <li>Statement of special educational needs</li> <li>No access to books, toys or educational materials</li> </ul> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>Disability requiring specialist support to be maintained in mainstream setting</li> <li>Physical and emotional development raising significant concerns</li> <li>Chronic/recurring health problems</li> <li>Missed appointments - routine and non-routine</li> </ul> <p><b>Social, Emotional, Behavioural, Identity</b></p> <ul style="list-style-type: none"> <li>Under 16 and has had (or caused) a previous pregnancy ending in still birth, abortion or miscarriage</li> <li>16+ and has had (or caused) 2 or more previous pregnancies or is a teenage parent</li> <li>Under 18 and pregnant</li> <li>Coming to notice of police on a regular basis but not progressed</li> <li>Received fixed penalty notice, reprimand, final warning or triage of diversionary intervention</li> <li>Evidence of regular/frequent drug use which may be combined with other risk factors</li> <li>Evidence of escalation of substance use</li> <li>Evidence of changing attitudes and more disregard to risk</li> <li>Mental health issues requiring specialist intervention in the community</li> <li>Significant low self esteem</li> <li>Victim of crime including discrimination</li> </ul> <p><b>Self-Care and Independence</b></p> <ul style="list-style-type: none"> <li>Lack of age appropriate behaviour and independent living skills, likely to impair development.</li> </ul>	<p>The common assessment can be used as supporting evidence to gain specialist / targeted support.</p> <p>The common assessment may also be completed to support child moving out of complex needs.</p> <p>Statutory or specialist services assessment (NB a common assessment must NOT replace a specialist assessment)</p> <p>Key agencies that may provide support at this level: LA children's social care.</p> <p>Other statutory service e.g. SEN services, Specialist health or disability services, Youth Offending Team, Targeted Drug and alcohol teams, CAMHS, Family Support Services, Voluntary and Community Services, Services at Universal Level.</p>
	<p><b>Family and Environmental Factors</b></p> <p><b>Family and Social Relationships and Family Well-Being</b></p> <ul style="list-style-type: none"> <li>History of domestic violence</li> <li>Risk of relationship breakdown with parent or carer and the child</li> <li>Young carers, Privately fostered, children of prisoners, periods of LAC</li> <li>Child appears to have undifferentiated attachments</li> </ul> <p><b>Housing, Employment and Finance</b></p> <ul style="list-style-type: none"> <li>Severe overcrowding, temporary accommodation, homeless, unemployment</li> </ul> <p><b>Social and Community Resources</b></p> <ul style="list-style-type: none"> <li>Family require support services as a result of social exclusion</li> <li>Parents socially excluded, no access to local facilities</li> </ul>	
	<p><b>Parents and Carers</b></p> <p><b>Basic Care, Safety and Protection</b></p> <ul style="list-style-type: none"> <li>Physical care or supervision of child is inadequate</li> <li>Parental learning disability, parental substance misuse or mental health impacting on parent's ability to meet the needs of the child</li> <li>Parental non compliance</li> </ul> <p><b>Emotional Warmth and Stability</b></p> <ul style="list-style-type: none"> <li>Inconsistent parenting impairing emotional or behavioural development</li> </ul> <p><b>Guidance</b></p> <p><b>Boundaries and Stimulation</b></p> <ul style="list-style-type: none"> <li>Parent provides inconsistent boundaries or responses</li> </ul>	

Features	High Risk Indicators	Assessment Process
<p><b>Complex additional unmet needs</b></p> <p>These children require specialist/statutory integrated support</p> <p><b>Child Protection</b></p> <p>Children experiencing significant harm that require statutory intervention such as child protection or legal intervention.</p> <p>These children may also need to be accommodated by the local authority either on a voluntary basis or by way of Court Order</p> <p>Agencies should make a <b>verbal</b> referral to children's social care accompanied by a <b>written</b> referral</p>	<p><b>Developmental Needs</b></p> <p><b>Learning / Education</b></p> <ul style="list-style-type: none"> <li>Chronic non-attendance, truanting</li> <li>Permanently excluded, frequent exclusions or no education. Provision</li> <li>No parental support for education</li> </ul> <p><b>Health</b></p> <ul style="list-style-type: none"> <li>High level disability which cannot be maintained in a mainstream setting</li> <li>Serious physical and emotional health problems</li> </ul> <p><b>Social, Emotional, Behavioural, Identity</b></p> <ul style="list-style-type: none"> <li>Challenging behaviour resulting in serious risk to the child and others</li> <li>Failure or rejection to address serious (re)offending behaviour. Likely to be in danger cohort of youth offending management</li> <li>Known to be part of gang or post code derived collective</li> <li>Complex mental health issues requiring specialist interventions</li> <li>In sexually exploitative relationship</li> <li>Teenage parent under 16</li> <li>Under 13 engaged in sexual activity</li> <li>Frequently go missing from home for long periods</li> <li>Distorted self image</li> <li>Young people experiencing current harm through their use of substances</li> <li>Young people with complicated substance problems requiring specific interventions and/or child protection</li> <li>Young People with complex needs whose issues are exacerbated</li> </ul> <p><b>Self Care and Independence</b></p> <ul style="list-style-type: none"> <li>Severe lack of age appropriate behaviour and independent living skills likely to result in significant harm e.g. bullying, isolation</li> </ul>	<p>Statutory or specialist services assessment (NB a common assessment must NOT replace a specialist assessment)</p> <p><b>Key agencies that may provide support at this level:</b> Specialist health or disability services, Youth Offending Team, CAMHS, Family Support Services, Voluntary &amp; Community Services, Services at universal level</p>
	<p><b>Family and Environmental Factors</b></p> <p><b>Family and Social Relationships and Family Well-Being</b></p> <ul style="list-style-type: none"> <li>Allegation of physical, emotional, sexual abuse or neglect</li> <li>High levels of domestic violence that put the child at risk</li> <li>Parents are unable to care for the child</li> <li>Children who need to be looked after outside of their own family</li> </ul> <p><b>Housing, Employment and Finance</b></p> <ul style="list-style-type: none"> <li>No fixed abode or homeless.</li> <li>Family unable to gain employment or extreme poverty</li> </ul> <p><b>Social and Community Resources</b></p> <ul style="list-style-type: none"> <li>Child or family need immediate support and protection due to harassment /discrimination and No access to community resources</li> <li>Involvement in serious youth crime or affected by gang activity.</li> </ul>	
	<p><b>Parents and Carers</b></p> <p><b>Basic Care, Safety and Protection</b></p> <ul style="list-style-type: none"> <li>Parent is unable to meet child's needs without support</li> </ul> <p><b>Emotional Warmth and Stability</b></p> <ul style="list-style-type: none"> <li>Parents unable to manage and risk of family breakdown</li> </ul> <p><b>Guidance Boundaries and Stimulation</b></p> <ul style="list-style-type: none"> <li>Parent does not offer good role model e.g. condones antisocial behaviour</li> </ul>	

## Key Guidance:

What to do if you're worried a child is being abused. (DFES 2006)

Safeguarding Children and Safer Recruitment (DFES 2006) Under Consultation

Information sharing: Guidance for Practitioners and Managers: (HMG 2008)

Guidance for Safer Working Practices for Adults who work with Children and Young People in Educational Settings. (DFE 2009)

Briefing for section 5 inspectors on Safeguarding Children. (Ofsted 2009) Revised 2013

Safeguarding Disabled Children: Practice guidance (DFES 2009)

Working Together to Safeguard Children – A guide to interagency working to safeguard and promote the welfare of children. (DCSF 2010) Revised 2013

Making Sense of Safeguarding: The Governor's Role in Safeguarding. (The Learn Together Partnership 2010)

Liverpool Children's Safeguarding Board (LSCB) Online Manual Updated May 2011  
[www.liverpoolscb.org](http://www.liverpoolscb.org)

### **Recent relevant additional guidance:**

Behaviour and Discipline in Schools: Guidance for Governing Bodies (DFE 2011)

Behaviour and Discipline in Schools: Guidance for Headteachers and School Staff (DFE 2011)

Ensuring Good Behaviour in Schools: Guidance for Governing Bodies, Head teachers, School Staff and Employers (DFE 2011)

Preventing and Tackling Bullying: Advice for school leaders, staff and governing bodies (DFE, 2011)

Screening, Searching and Confiscation: Guidance for School Leaders, Staff and Governing Bodies (DFE, 2011)

Dealing with allegations of abuse against teachers and other staff: Guidance for Local Authorities, Headteachers, School Staff, Governing bodies and Proprietors of Independent Schools (DFE 2011)

The Voice of the Child: Learning Lessons from Serious Case Reviews (Ofsted, 2011)

Thresholds Guidance (LSCB, 2010)

Multi Agency Practice Guidelines (HMG, 2011)

Forced Marriage Protocols (LSCB, 2011)

Safeguarding in Schools: Best Practice (Ofsted, 2011)