



King's College India

ROHTAK

SAFEGUARDING POLICY

Responsibility

Individual : Headmaster / Designated Safeguarding Lead

Draft : Based on KSUK - 090317

SMT review : 15/09/17

SMT agreed : 15/09/17

Governing Body : Approval needed - xxxxxx

Next review date : 15/09/18

Other documents to use :

Child Protection Policy, Plan India -

https://www.planindia.org/sites/all/themes/plan_india/images/Child-Protection-Policy-Plan-India.pdf

Becoming a teacher in India

Employment visa for Indian teachers

Keeping Children Safe In Education (KCSIE) 2016

Working together to safeguard children 2015

The Juvenile Justice (Care & Protection of Children) Act 2000 and the Protection of Children From Sexual Offences, Act 2012.

Our policy applies to all staff, including volunteers and Governing Body Members (governors) working for and on behalf of the School and is available to parents via the website or on request.

CHILD PROTECTION AT KING'S COLLEGE INDIA

This policy follows local agreed inter-agency procedures in all cases of actual or suspected abuse that are reported to the Headmaster and Designated Safeguarding Lead. Recruitment procedures are to be found in the School's Appointments Policy.

In all cases of actual or suspected abuse our Designated Safeguarding Lead must be informed and the Child Protection Procedures followed. The Designated Safeguarding Lead will inform the Head of all cases of actual or suspected abuse. The only exception to this would be if the Head were implicated in the concerns, in which case the Chair of Governors would be informed without first notifying the Head.

The key school contacts (name, phone, email) are:

Designated Safeguarding Lead (DSL) - Francis McGrath

Deputy Designated Safeguarding Lead (DDSL) - Jyoti Sehrawat

Council Member (Governor) with responsibility for Safeguarding - Dr. Anjali Narwal

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Key external contacts (name, phone, email) are:

Child Helpline - 1098

Women's Helpline - 1091

Police Control Room - 100

cp.ggn@hry.nic.in

dcp.eastggn@hry.nic.in

District Child Protection Unit - District Child Protection Unit, Room number 407, 4th floor Mini Secreteriat, Panipat. icpsnp.wcd@gmail.com Phone: 0180-2641574

KCI is committed to safeguarding and promoting the welfare of all pupils at the school. Safeguarding, in addition to Child Protection, includes other issues such as pupil health and safety, bullying/cyberbullying, medical provision and substance misuse. Policies and guidelines on these areas should be read in conjunction with this document. All policies have regard to current Indian legislation guidance wherever possible, practical and appropriate.

All guidance for this school policy relates to Keeping Children Safe In Education (KCSIE) (September 2016) – alongside Working Together To Safeguard Children (WTSC) (March 2013), again wherever possible, practical and appropriate.

We recognise that children who suffer any form of abuse may find it difficult to develop a sense of self-worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school, their behaviour may be challenging or they may be withdrawn. In such cases, we will liaise with other agencies that support the pupil such as the DCPU. We will also ensure that, should a pupil in receipt of a child protection plan move schools, their information is securely transferred to the new school immediately and that the child's social worker is informed.

Introduction

KCI recognises that safeguarding incidents can happen anywhere and all staff should be alert to possible concerns being raised. Everyone who comes into contact with children and their families has a role to play in safeguarding children. **Any member of staff may raise concerns directly with the Rohtak DCPU.**

KCI fully recognises its responsibilities for child protection. Whilst we strive to minimise risk, we are fully aware that child protection risk cannot be eliminated.

Aims:

- To ensure that all staff (teaching, support and volunteers) and Governors understand what is meant by child abuse, whether it be physical injury, emotional or sexual abuse, or abuse through neglect, and are able to recognise its possible outward signs.
- To ensure that all possible steps are taken to help any pupil who discloses abuse or is believed to be suffering from abuse.
- To ensure all staff and volunteers use safer working practices in accordance with our code of conduct based on current Indian guidance and best practice.

Objectives:

- To support and help pupils who may have disclosed abuse or who are thought to possibly be subject to abuse.
- To help pupils to gain the necessary information and skills to resist abuse.
- To protect the confidentiality of the pupil, their family and any other people involved wherever possible, notwithstanding the statutory responsibility to share information with appropriate external agencies and to refer matters on to the designated safeguarding leads.
- To ensure that all staff, volunteers and governors have appropriate training to help them recognise suspected instances of child abuse.
- To ensure that all staff know what procedures to follow when they suspect a case of child abuse has been/is taking place.
- To ensure all staff are aware of the school's procedures for dealing with accusations of abuse made by pupils against members of staff.
- To ensure all staff, volunteers and governors are familiar with the school's Safeguarding Policy and Part 1 of KCSIE.
- To ensure that all staff and volunteers are familiar with policies relating to pastoral care and safer working practices.
- To act in accordance with locally agreed inter-agency procedures.
- To ensure that when pupils leave the school any child protection files are copied and sent to their new educational setting.

Responsible Officers:

- The Designated Safeguarding Lead (DSL) is **Francis McGrath** and the designated deputy safeguarding lead is **Jyoti Sehrawat**.
- In the absence of the DSL, safeguarding matters will be the responsibility of the deputy DSL. In the absence of both the DSL and her deputy, safeguarding issues will be the responsibility of the Head of Boarding.
- The nominated Governor for Child Protection/ Safeguarding is **Dr. Angali Narwal**

Implementation:

- The Governor responsible for Child Protection will receive inter-agency training and 3 yearly safeguarding updates as recommended by Working together to Safeguard Children (March 2013) and LSCB - Local Safeguarding Children Board guidelines – and the ICP Scheme from the District Child Protection Unit.
- This policy and its implementation will be evaluated and reviewed annually by the Governing Body. Any deficiencies or weaknesses in child protection arrangements will be remedied without delay.
- The policy is made available to parents and others on the school website and, on request, from the school.
- A safeguarding report is sent to the Governing Body and then to the Local Authority (Police) for review on an annual basis.
- All members of staff and volunteers must have registered with the local police carried out before they commence employment at the school. The administration of this is carried out by the HR department.
- The DSL and deputy DSL (and the Head of Boarding and the HR Department Head) will undertake child protection inter-agency training and single agency training with update training every two years.
- The school will ensure safer recruitment practices are always followed in accordance with Part 3 of KCSIE and the current Independent Schools Standards regulations. For details on this please refer to the school's Appointments and Recruitment Policy. For further information refer to the school standards as recommended by the CBSE bi-laws
- One person on every interview panel must have undertaken Safer Recruitment Training.
- The school will ensure that anyone employed as a teacher is not subject to a Prohibition Order issued by the Local Magistrate.
- The school will notify the authorities if there is an unexplained absence of more than two days of a pupil who is in receipt of a child protection plan.
- The school will develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters including attendance at case conferences.
- The school will keep written, dated and signed records of child protection concerns about children, even where there is no need to refer the matter immediately.

- The school will promptly report to the Local Authorities any person (whether employed, contracted, a volunteer or student) whose services are no longer used and the employment referral criteria are met.
- The school will ensure all child protection records are regularly reviewed, kept secure and separate from the main pupil file, in locked locations accessible only to specified staff.
- The school will follow procedures where an allegation is made against a member of staff, ensuring that there are robust procedures to deal with allegations not only against members of staff, but against anyone who has contact with students including volunteers, the Head and Governors; in the case of an allegation against the Head, the chair of Governors should be informed directly, without informing the Head first. **See separate policy (Procedure if a member of staff faces allegations of abuse)**
- The school will apply the ICP Scheme from the District Child Protection Unit if there is any concern about the actions or inactions of social care staff or staff from other agencies.

Training:

All staff, volunteers and governors are trained in child protection regularly, in line with advice The Juvenile Justice (Care & Protection of Children) Act 2000 and the Protection of Children From Sexual Offences, Act 2012.

All staff, including volunteers, must be provided with induction training which includes:

1. The school's safeguarding/child protection policy
2. The staff code of conduct
3. Contact details of the school's safeguarding leads and nominated governor
4. A copy of Part 1 of KCSIE

Staff are given training – once per year to ensure they understand and are aware of what constitutes child abuse.

- All staff at the school, including part-time and voluntary staff, receive child protection training and updates on child protection procedures every 3 years, using **LSCB material** and the Indian Child Protection Scheme from the District Child Protection Unit. (Local Office is in Panipat). Training and policies make it clear that **anyone** can make a referral to DCPU if there is a risk of immediate serious harm to a student.
- Records of child protection training undertaken by staff will be recorded by the HR Manager, who has also received external training in child protection and safer recruitment procedures.
- All members of staff are kept aware of changes to this policy.
- All staff should be alert to suspicious changes in a pupil's behaviour patterns or any physical injuries which might cause concern.

- The school offers a counselling service to students. This is a confidential service but the counsellor is subject to the same obligations about confidentiality and child protection as all other staff.

The Children Act (1989), the 2004 (updating) Children Act and Keeping Children Safe in Education 2016 confirm that the “welfare of the child is paramount”. This means that considerations of confidentiality which might apply to other situations should not be allowed to override the right of children to be protected from harm. However, every effort should be made to ensure that confidentiality is maintained for all concerned when an allegation has been made and is being investigated. (as inspired by DfE Guidance “Dealing with Allegations of Abuse against Teachers and other Staff – October 2012)

Role and Responsibilities of the Designated Safeguarding Lead (DSL)

(inspired by Chapter 2 Working Together – 2015 and Keeping Children Safe in Education April 2016 Annex B)

The role of the designated safeguarding lead (and, in her absence, of the deputy safeguarding lead) is to:

1. recognise how to identify signs of abuse and know which outside child protection agency to contact in the event of a child protection matter coming to his/her attention;
2. ensure that appropriate information is available at the time of referral and that the referral is confirmed in writing under confidential cover;
3. liaise with the DCPU and other agencies, as appropriate;
4. act as a source of advice and expertise and keep relevant people within the School informed about any action taken and any further action required
5. ensure that a proper record is kept of any referral and action taken, and that this is kept safely and in confidence, and
6. manage and deliver staff child protection training and review the operation of the Child Protection Policy annually (with the appropriate Nominated Governor) to ensure the procedures are working and that it complies with current best practice.

The Role of the Governing Body

The Governing body fully recognises its responsibilities with regard to Child Protection and the need to safeguard and promoting the welfare of children and will:

- Ensure that an annual report is made to the governing body on child protection matters as required by DCPU.

- Ensure that a copy of this report is forwarded to the DCPU.
- Ensure that all policies and procedures relating to Child Protection and safeguarding are reviewed and updated annually and any deficiencies remedied without delay.
- Ensure that Safeguarding is discussed at the termly Governors meeting.
- Ensure that all members of the Governing Body are fully trained in Child Protection and that this training is updated in accordance with LSCB, ICPS and DCPU guidance.

The Governor Responsible for Child Protection will also meet termly with the DSL in order to discuss and remain fully informed about all matters pertaining to this area.

PROCEDURES FOR DEALING WITH CASES OF ABUSE/SUSPECTED ABUSE

(a) Cases where abuse may have been inflicted by parents or carers

- (i) Suspicion or knowledge of abuse must be reported to the Designated safeguarding lead or their Deputy who will share such information with the Head and only relevant other staff on a 'need to know' basis.
- (ii) Any adult to whom abuse is reported by a pupil has a duty to listen to the pupil, to provide reassurance, and subsequently to record the pupil's statements. He / she must not press the pupil, ask probing questions or suggest answers. The situation should then be reported and discussed with the Designated Safeguarding Lead in person or by telephone and confirmed in writing within 24 hours. The DSL will consult with the Head and will inform Children's Social Care and/or the DCPU as soon as possible (within one working day). The online South West Child Protection Procedures must be referred to at all stages (www.swcpp.org.uk) **Also the ICPS and Article 21 under the Indian Constitution.**
- (iii) Expert medical diagnosis may be required quickly. The Designated Safeguarding Lead, their Deputy or the Head will arrange this following consultation with DCPU.

(b) Cases where abuse may have been inflicted by staff or volunteers

Allegations management procedures should be followed if it is alleged that a member of staff or volunteer has:

- (i) behaved in a way that has or may have harmed a child
- (ii) possibly committed a criminal offence against or related to a child
- (iii) behaved towards a child or children in a way that indicates s/he is unsuitable to work with children

(Inspired by DfE Keeping Children Safe in Education April 2016 Part 4) – **vital document that all staff are required to read and understand THEIR role in keeping children safe.**

If an allegation is made against a member of staff or volunteer it must be responded to; there is an obvious need to act immediately and with **utmost discretion**. The informant should be told that the matter will be referred in confidence to the appropriate people. This must be done, and the written record passed on the same day to the Designated Safeguarding Lead and the Head.

The circumstances should be kept **strictly confidential** until the Head has been able to

consult with the DCPU to judge whether or not an allegation or concern indicates possible abuse. It will always be the DCPU even if the student's family home is in another state/country because the geographic location of the school is Haryana.

If it is decided, by the DCPU, that an investigation is called for, it is the responsibility of the DCPU to arrange a meeting to discuss how the next steps are handled. The meeting is initiated by the DCPU referring to Haryana. The meeting would normally involve the Police, a representative from the DCPU, the Designated Safeguarding Lead, the Head and preferably a member of the Governing Body of the School. The arrangements agreed upon in the meeting will include informing the parents and seeking their consent for any immediate medical examination.

The meeting will decide when the member of staff against whom the allegation has been made, should be informed and no discussion should take place about the allegation without the permission of the DCPU. The staff member against whom the allegation is made would normally be informed as soon as possible after the initial meeting (or as a result of a discussion with the DCPU).

If, at the meeting, it is established that the allegation is not criminal but is still of concern it will be agreed what further action, if any, needs to be taken. At the conclusion of the investigation, if criminal proceedings don't ensue, there is a range of possible sanctions available to the school including, where the circumstances warrant it, dismissal. These decisions will be taken by the school in conjunction the school's legal advisers and Human Resources Department. Details of all investigation and outcomes should be carefully recorded and securely stored in staff personnel files.

The meeting will also recommend to the employer whether the member of staff can remain on the school site or not, pending further investigation. It is the employer's decision alone whether suspension/leave of absence is implemented. If the allegation is against a member of staff, and the Police/DCPU decide to take the case further, it is reasonable to ask the Police to give some indication of their timescales. The DCPU can also advise in terms of process.

There is understandable concern amongst many teachers that careers may be irreparably damaged by flimsy or malicious allegations by children. This is actually extremely rare, though some incidents do end up only as "unsubstantiated" one way or the other which is generally unsatisfactory. It is always better for a school to anticipate possible risks and to seek to prevent all reasonable risk of misunderstandings and false allegations. Proper policy and procedures are also likely to deter any individual seeking to use the school as a basis for inappropriate relationships with pupils; the school's Staff Code of Conduct will be helpful. This will help staff to know what behaviours are generally considered to be inconsistent with their professional status. Infringements should then be subject to disciplinary procedures as required. All staff should be aware of the DfE – Use of Reasonable Force – July 2013 guidance and the Protection of Children

Against Corporal Punishment in Schools and Institutions, 2012 NCPCR (National Commission For Protection Of Child Rights) and the school's own policy in this area. It is a legal requirement to notify the DCPO within one month if the services of a person are discontinued because he / she was considered unsuitable for work with children.

(c) Cases where abuse may have been inflicted by the Head

If an allegation or complaint is made against the Head, the person receiving the allegation should immediately inform the Chair of Governors, or in his / her absence the Nominated Child Protection Governor, **without first notifying the Head.**

(d) Cases where abuse may have been inflicted by a pupil

A pupil against whom an allegation of abuse has been made may be suspended from the School during the investigation and the School's Behaviour Policy will apply. The School will take advice from the DCPO on the investigation of such allegations and will take all appropriate action to ensure the safety and welfare of all pupils involved including the pupil or pupils accused of abuse. If it is necessary for a pupil to be interviewed by the police in relation to allegations of abuse, the school will be informed as soon as possible and the pupil must be supported during the interview by an appropriate adult. In the case of pupils whose parents are abroad, the pupil's Guardian will be requested to provide support to the pupil and to accommodate him/her if it is necessary to suspend him/her during the investigation.

Complaint or Allegation?

It is important to draw a distinction between complaints and allegations. Complaints are made about a **process**; allegations are made about **behaviour**. In a school setting concerns relating to behaviour of an adult towards a student are therefore categorised as allegations.

Any allegation under the discretion of the Head and the DSL, which involves the possibility of physical, emotional or sexual abuse will always be discussed with the DCPO and their advice taken. If the matter is a child protection concern, an investigation will be carried out by DCPO, as happens with any other referral. The Designated Safeguarding Lead, the Head and Governors must not carry out investigations themselves in these circumstances. They will be invited to a strategy meeting at a very early stage. Decisions about suspension and the use of disciplinary procedures are for the Head and Governors alone, but action may need to be coordinated where there is a wider investigation involving the DCPO, and where for example, bail conditions may apply.

ALLEGATIONS INVOLVING SEXUAL IMPROPRIETY

Whenever a member of staff is informed by a pupil of an event involving sexual impropriety of any kind, whether between pupils or staff and pupils, the following steps should be taken:

- (i) Listen sympathetically and afterwards briefly note the content of what was disclosed, sign and date it.
- (ii) Contact the Designated Safeguarding Lead immediately, who will discuss with the Head and the DCPO.
- (iii) Once they are notified and if it is agreed that the school alone should follow up the issue, the designated Safeguarding Lead will interview the complainant and report as quickly as possible to the Head, who will oversee the disciplinary aspects of the enquiry;
- (iv) If DCPO seeks further investigations, they will themselves open an enquiry. This would normally involve themselves and Designated safeguarding Lead and the Head. In these circumstances, the School's disciplinary enquiry will be suspended until cleared by DCPO.

This policy should be implemented regardless of whether the complainant is over or under 16 because of the potential for an abuse of trust. Parents should be informed as soon as possible that a referral to DCPO will be made by the Designated Safeguarding Lead, **unless to do so would put the pupil at greater risk of harm.** If there is any doubt, the Designated Safeguarding Lead will consult with the DCPO beforehand.

STAFF CODE OF CONDUCT

Cordial relations between teaching staff and pupils are at the heart of a happy and thriving school. At the same time, in the interests of all parties, professional boundaries must be observed on all occasions. There is guidance on how staff should conduct themselves in the Staff Code of Conduct.

We must all be aware of the possibility of accusations and try to avoid hazardous situations. A teacher should never speak to or touch a pupil in a manner that could be construed as having sexual overtones or that could be interpreted as a physical assault. Both the action and the intention may subsequently give rise to problems. One-to-one meetings between staff and a pupil (particularly those who may be more vulnerable) should be approached with caution. If in doubt it is advisable to have somebody else present, or let someone else know the meeting is taking place/ inform a manager, record the reason and circumstance of the meeting, leave the door open, sit behind a desk etc.

Good practice includes valuing and respecting children as individuals, and the adult modeling of appropriate conduct will always exclude bullying, shouting, racism or sexism.

For further advice see the school's code of conduct for staff, Guidance for Safer Working Practice for Adults who work with Children and Young People in Education Settings and the DCPO's own guidance.

PROCEDURE FOR REPORTING CONCERNS

Staff could have their suspicion or concern raised in a number of ways, the most likely of which are:

1. the conduct of a member of staff;
2. a child, parent or member of staff "disclosing" abuse;
3. bruising or evidence of physical hurt; which may or may not be accompanied by;
4. unusual behaviour by a child.

If a member of staff has such concerns they should be reported to the Designated Safeguarding Lead immediately (in person or by telephone) and confirmed in writing within 24 hours. **Delay could prejudice the welfare of a child.** If the concerns relate to the conduct of a member of staff these also should be reported directly to the Designated Safeguarding Lead and Head; there is an obvious need to act immediately and with **utmost discretion**.

The Designated Safeguarding Lead will report concerns as soon as possible and certainly within one working day to DCPO

(if the concerns are about a member of staff or volunteer); this may include discussing the circumstances on a confidential basis with the Police Safeguarding Children Unit (DCPO).

In cases where it is felt the child requires assistance from other agencies (DCPU) that support pupils such as Children's Social Care, Child and Adolescent Mental Health Service, Education Welfare Service and Educational Psychology Service, we will liaise with them as appropriate. We also have access to our school counsellor.

A distinction should be made between safeguarding children who have suffered or at risk of suffering serious harm and those who are in need of support from one or more of the agencies named above. The former should be reported to DCPO immediately; the latter should lead to inter-agency assessment using local procedures.

WHAT TO DO IF A CHILD DISCLOSES

The following information is intended to assist you if you become involved in a potential child protection situation when a child or young person makes a disclosure.

Note that this is a completely different procedure to interviewing pupils on disciplinary issues.

- Listen, allow the pupil to finish without directly questioning or stopping them. Let them tell you what they want to and no more. They may need to disclose to a specialist later and too much detail now may interfere with later investigation.
- When the pupil has finished, make sure they feel secure and explain what you are going to do next.
- Write down notes, including date and time of the interview and sign the notes. Record as much as you can remember, as soon as possible (preferably immediately) afterwards, using the pupil's own words.
- Stay calm and convey this through word and action; reassure the child or young person that you are taking what they have to say seriously.
- Report to the Designated Safeguarding Lead and give them the written record of the incident the same working day.

CONFIDENTIALITY

- The management of confidentiality is an essential factor in all issues relating to Child Protection.

- Staff should never give pupils or adults an absolute guarantee of confidentiality, but must ensure that the information is disclosed only to the people who need to know. Make sure that this is clear early on, not sprung on the pupil at the end.
- It should be explained to children and young people that secrets cannot and should not be kept if keeping them means that they, or others, will continue to be harmed.

WHAT TO DO AFTER DISCLOSURE

➤ **STAY CALM**

Try not to transmit your anger, shock, distress, or embarrassment to the child - either verbally or through body language.

➤ **ACT AS THOUGH YOU BELIEVE IN THE CHILD**

➤ **REASSURE THE CHILD**

Not your fault; glad they told you etc.

➤ **ALLOW CHILD TO TALK / FINISH STORY**

Don't question the child

REPORT THE INCIDENT IMMEDIATELY TO THE DESIGNATED SAFEGUARDING LEAD, or in their absence, the Deputy Safeguarding Lead or Head, passing on the notes you have made.

(Explain to the child that you will need to talk to someone in another agency whose job it is to help and protect children and that they will want to talk to the child **but offer to stay with the child and support them**)

RECOGNISING CHILD ABUSE

(a) Introduction

All members of the School staff should be alert to the possible signs of abuse of a pupil. Abuse is 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. Abuse may take several forms, which are not mutually exclusive:

Physical abuse

Physical abuse 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.

Common sites for non-accidental injury are:

- back, back of legs, buttocks (except occasionally along the bony protuberances of the spine)
- mouth, cheeks, behind the ear
- stomach, chest
- under the arm
- genital, rectal area
- neck

The following should also cause suspicion:

Bruising which is more than natural for the age and mobility of the child, particularly on the face or upper arm. Groups of bruises which form a pattern or sequence (sometimes a hand mark). Bruising of different ages.

Black eyes especially if there is no bruising to the forehead or nose and the lids are swollen and tender.

Injuries to the **mouth or face**, including the lips or tearing of the web of skin joining the upper lip and gum.

Female Genital Mutilation (FGM): professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a girl being at risk of FGM, or already having suffered FGM. There is a range of potential indicators that a child or young person may be at risk of FGM, which individually may not indicate risk but if there are two or more indicators present this could signal a risk to the child or young person. Further information on FGM can be found within Multi-Agency Practice Guidelines at www.lawyerscollective.org

Fractures and dislocations which may show in an obvious deformation of a bone or joint or swelling, or a reluctance to move a limb, accompanied by obvious discomfort or pain.

Fingertip bruises and grasp marks. Thumb and finger marks around a limb, on opposite cheeks or on chest and back indicate tight grasping, possibly from swinging, force feeding or shaking respectively.

If a child has been **severely shaken**, which is a common form of child abuse, he/she may have internal or brain injuries. Symptoms of this may include cold, clammy skin, drowsiness and vomiting.

Impression or outline bruising or weals and scratches resulting from beating with an instrument or hand

Bite marks. These may leave clear impressions of individual teeth or sometimes a more general crescent shaped mark changing into a bruise. If the bite is more than 3cm across it must have been caused by an adult or older child with permanent teeth.

Burns and scalds. To distinguish between accidental and non-accidental burns and scalds can be very difficult but, as a general rule, suspicions are raised by:

- clear outlines (eg glove and sock effect)
- uniform depth over a large area
- splash marks above the main scald area (caused by hot liquid being thrown)

Remember also:

- a responsible adult checks the water temperature before the young child gets in
- a child is unlikely to get completely into a bath that is too hot
- a child getting into hot water will struggle to get out and there will be splash marks
- small round burns may be caused by cigarettes (but friction burns may be accidental if along the bony protuberances of the spine). Cigarette burns also tend to have a characteristically dark thick base and may be at different stages of healing.

Scars – all children have scars, but concern is caused by:

- large numbers of scars, particularly of different ages, and if accompanied by recent bruising
- unusual shaped scars; old cigarette burns; burns that did not receive treatment; brands and tattoos.

Emotional abuse

Emotional abuse is harder to detect and may result from conveying to a child that they are worthless or unloved, inadequate, or valued insofar as they meet the needs of

another person. It may also result from teasing or humiliation, or from the denial of love and affection, interests or friendships. Emotional abuse is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development.

It may 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 the 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 bullying (including cyberbullying), 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.

Children who have been emotionally abused are likely to show some or all of these personality characteristics:

- lack of trust
- low self-esteem and self confidence
- feeling guilty and unworthy as a consequence of constant denigration
- unable to "give" in a relationship because of their need to receive affection and attention
- global or specific development delay
- attempts at self-harm
- gross attention seeking behaviour

Identifying emotional abuse is difficult. Evaluations by child psychiatrists, psychologists, or paediatricians are important.

Sexual abuse

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

It has become clear in recent years that child sexual abuse is more common than was previously assumed. Wider public discussion has prompted many adults to talk about sexually abusive experiences within their childhood. However, there is still an absence of reliable and objective information on its incidence and prevalence.

The Cleveland Report (1988) states: "Sexual abuse occurs in children of all ages including the very young, to boys as well as girls, in all classes of society and frequently within the privacy of the family."

Medical staff should be alert to bruises, bites, unusual marks or soreness in the genital area, repeated urinary infection or vaginal discharge and all staff should be alert to preoccupation with sexual matters.

A child's behaviour, and particularly changes in behaviour, may raise suspicion that sexual abuse is taking place. Each of these symptoms may, of course, have other causes. In themselves they are only indicators. Children may display precocious or non-age appropriate behaviour.

Listen to the child. Sometimes a child may purposefully inform an adult about abuse. Alternatively, an adult may realise from what the child has said that abuse is taking place, without any intent on the child's part to disclose.

Child sexual exploitation (CSE) involves exploitative situations, contexts and relationships where young people receive something (for example food, accommodation, drugs, alcohol, gifts, money or in some cases simply affection) as a result of engaging in sexual activities. Sexual exploitation can take many forms ranging from the seemingly 'consensual' relationship where sex is exchanged for affection or gifts, to serious organised crime by gangs and groups. What marks out exploitation is an imbalance of power in the relationship. The perpetrator always holds some kind of power over the victim, which increases as the exploitative relationship develops. Sexual exploitation involves varying degrees of coercion, intimidation or enticement, including unwanted pressure from peers to have sex, sexual bullying (including cyberbullying) and grooming. However, it also important to recognise that some young people who are being sexually exploited do not exhibit any external signs of this abuse.

Pupil Relationships

Boarding staff should be aware that children in residential settings can be particularly vulnerable and the school should be alert to pupil relationships and the potential for peer abuse. Should any member of staff observe anything of concern then they should alert the relevant Housemaster/mistress who will inform the DSL.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs. Neglect and failure to thrive need a medical diagnosis. Warning signs, in addition to the child's neglected appearance, may include:

- short stature and underweight for chronological age
- red/purple, cold hands and feet at any time of the year
- swollen limbs with pitted sores that are slow to heal
- poor skin condition, especially a severe or persistent nappy rash in an infant
- voracious appetite
- dry, sparse hair
- developmental delay
- unresponsiveness or frozen watchfulness
- indiscriminate relationships with adults, often seeking attention for affection from anyone, but passively accepting when it is withdrawn

Family characteristics which increase the risk of child abuse

As part of their safeguarding/child protection training, all staff are made aware that child abuse can happen in any family, regardless of socio-economic background. Identification of these families may help in preventative work. **These characteristics may add to the suspicion of abuse but do not prove it. They are simply indicative.**

Parents:

- young, without settled lifestyle, socially isolated, with poor interpersonal skills
- experienced aggression, abuse, disruption or rejection in own childhood
- under stress (financial, forced marriage, overcrowding, poor living conditions)
- personality is immature, highly emotional, aggressive or known to depend on drink or drugs
- limited intelligence
- history of mental ill health
- poor manager of money and other aspects of life
- feel rejected by child who may be more intelligent
- one carer is not the biological parent
- households where there is domestic violence

Child:

- unwanted pregnancy

- separated from mother immediately after birth (eg in neo natal unit)
- pre-term or low birth weight
- disabled or developmentally delayed
- management problem, eg feeding, sleeping, toileting
- excessive difficult behaviour

Parent's attitude to child:

- parent's behaviour is exceptional in their excessive, or lack of concern, interest, affection or control of the child
- have unrealistic expectations of their child's physical, mental or emotional capacity, related to age and stage of development
- rejection of the child (eg scapegoat for family problems).

There will be other circumstances, not amounting to abuse, which give cause for serious concern about the welfare of pupils, for example children who run away or go missing. Questions of the young person being in moral danger, being uncared for, engaging in antisocial or inappropriate behaviour and so on may be referred to the DSL, who will discuss the matter with the Headmaster, and through them, as necessary, to Children's Social Care. Such cases may also be referred to the Medical Centre, and through them to DCPU. In each case the School's DSL must be informed.

Contacts:

India

State District Contact Person

Haryana Rohtak NARENDER KUMAR Phone No. 1262-252920

Email Address dcpurtk.wcd@gmail.com

Address - ZILA VIKAS BHAWAN ROOM NO 2018 ROHTAK

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Somerset LSCB, PP2 BW3, County

Hall, Taunton TA1 4DY

Independent Chair

Sally Halls - LSCBChair@somerset.gov.uk

LSCB Administrator

Emma Dunn - EJDunn@somerset.gov.uk

+44 01823 358268

Safeguarding Adviser for Education

Liz Bidmead - LKBidmead@somerset.gov.uk

+44 01823 358269

LSCB Audit Officer

Nicky Allen – NJAllen@somerset.gov.uk

+44 01823 358268 / +44 07500975817

LSCB Multi-agency Trainers

Kate Greenwood– kgreenwood@somerset.gov.uk

01823 357119

Kaye Elston – KElston@somerset.gov.uk

07887870470

LSCB Multi-agency Training Administrator

Sam Witney – LSCBtraining@somerset.gov.uk

01823 355975

LADO enquiries - Somerset Direct - +44 0845 345 9122

This policy was reviewed and approved by the School Child Protection Committee at their meeting on 15 September 2017.

Signed:

Approved by the Headmaster on 15 September, 2017

Signed:

A handwritten signature in black ink, consisting of several overlapping loops and a horizontal line extending to the right.

This document will next be reviewed in September 2018.