

INSPIRING FUTURES

Macmillan
Academy

**CHILD PROTECTION
AND SAFEGUARDING**

POLICY DETAILS

Policy Title:	Child Protection and Safeguarding Policy
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- 2.5.3 To ensure all teaching and non-teaching staff are aware of the importance of safeguarding children and of their own responsibilities in identifying and reporting possible cases of abuse.
- 2.5.4 To provide a systematic means of monitoring students known, or thought to be at risk of harm, and ensure the academy contribute to assessments of need and support packages for those students. Senior Leadership oversight occurs at least termly.
- 2.5.5 To emphasise the need for good levels of communication between all members of staff. Regular reviews of 'At Risk' students or borderline cases are held with Head of Year.
- 2.5.6 To develop a structured procedure within the academy which will be followed by all members of the academy in cases of suspected abuse. Safeguarding Lead/Deputy Safeguarding Leads are visible and accessible to all academy members.
- 2.5.7 To develop and promote effective working relationships with other agencies, especially the Police and Social Care. Macmillan Academy welcome visitors into the academy to help ensure welfare of all students.
- 2.5.8 To ensure that all staff working within our academy who have substantial access to children have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory Disclosure and Barring Service (DBS) check (according to statutory guidance) and a central record is kept for audit. (Referenced with KCSIE Part 3)

3. EQUALITY STATEMENT

- 3.1 Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face. Wherever possible children are offered specialist support to ensure "their voice" is captured. Wherever the word "staff" is used, it covers ALL staff on site, including ancillary, supply and self-employed staff, contractors, volunteers working with children and governors. We give special consideration to children who:
 - 3.1.1 Have special educational needs or disabilities.
 - 3.1.2 Are young carers.
 - 3.1.3 May experience discrimination due to their race, religion, sexual identification or gender.
 - 3.1.4 Have English as an additional language.
 - 3.1.5 Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence.
 - 3.1.6 Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation.
 - 3.1.7 Are asylum seekers.
 - 3.1.8 Children who experience mental health difficulties (reference policy) and promoting children and young peoples' mental health and wellbeing, 2015.

4. LEGISLATION AND STATUTORY GUIDANCE

4.1 This policy is based on the Department for Education's statutory guidance, [Keeping Children Safe in Education \(2021\)](#) and [Working Together to Safeguard Children \(2018\)](#), [Sexual violence and sexual harassment between children in schools and colleges \(2021\)](#) and the [Governance Handbook \(2020\)](#). We comply with this guidance and the procedures set out by our local safeguarding children board.

4.2 This policy is also based on the following legislation:

- 4.2.1 [The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children.
- 4.2.2 Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18.
- 4.2.3 [Statutory guidance on FGM \(2019\)](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM.
- 4.2.4 [The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children
- 4.2.5 Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children.
- 4.2.6 Statutory [Guidance on the Prevent duty \(2015\)](#), which explains schools' duties under the Counterterrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism.

This policy also complies with our funding agreement and articles of association and refers to the locally agreed inter-agency procedures set by [Tees Local Safeguarding Children Boards' Procedures \(www.middlesbrough.gov.uk\)](#).

5. SAFE SCHOOL, SAFE STAFF

We will ensure that:

- 5.1 All members of the governing body understand and fulfil their responsibilities, namely to ensure that:
 - 5.1.1 There is a child protection policy together with a code of conduct policy (reference Staff Code of Conduct).
 - 5.1.2 The academy operates safer recruitment procedures by ensuring that there is at least one person on every recruitment panel that has completed Safer Recruitment training (KCSIE 2021: Part three).
 - 5.1.3 The academy has procedures for dealing with allegations of abuse against staff and volunteers, and to make a referral to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned. (KCSIE: Part four, 2021).
 - 5.1.4 A senior Safeguarding Lead maintains responsibility.
 - 5.1.5 All other staff have safeguarding training updated at least yearly.
 - 5.1.6 Any weaknesses in child protection processes are remedied immediately.

- 5.1.7 A member of the governing body is nominated to liaise with the local authority on child protection issues and in the event of an allegation of abuse made against the Head of School.
- 5.1.8 Child protection policies and procedures are reviewed annually and that the child protection policy is available on the academy website and by contacting the academy.
- 5.1.9 The governing body considers how children may be taught about safeguarding. This may be part of a broad and balanced curriculum covering relevant issues through personal social health and economic education (PSHE) and/or sex and relationship education (SRE).
- 5.1.10 That enhanced DBS checks are in place for the Chair of Governors.
- 5.2 All members of staff and volunteers are provided with child protection awareness information at induction so that they know who to discuss a concern with.
- 5.3 All members of staff are trained in and receive regular updates in e-safety and reporting concerns.
- 5.4 All other staff and governors have child protection awareness training, updated by safeguarding colleagues as appropriate, to maintain their understanding of the signs and indicators of abuse.
- 5.5 All members of staff, volunteers, and governors know how to respond to a student who discloses abuse.
- 5.6 We will ensure that child protection concerns or allegations against adults working in the school are referred to the LADO for advice, and that any member of staff found not suitable to work with children will be notified to the DBS for consideration for barring, following resignation, dismissal, or when we cease to use their service as a result of a substantiated allegation, in the case of a volunteer.
- 5.7 Our procedures will be regularly reviewed and up-dated.
- 5.8 The name of the designated members of staff for child protection will be clearly advertised in the academy, with a statement explaining the academy's role in referring and monitoring cases of suspected abuse.
- 5.9 All new members of staff will be given access to a copy of our child protection policy, with the Senior Safeguarding Staff names clearly displayed, as part of their induction into the academy.
- 5.10 The policy is available publicly on the academy website. Parents/carers are made aware of this policy and their entitlement to have a copy of it via the academy website.

6. RESPONSIBILITIES

- 6.1 The Safeguarding Lead is responsible for ensuring that the following is maintained:
 - 6.1.1 Referring a child if there are concerns about possible abuse, to the local authority, and acting as a focal point for staff to discuss concerns. Referrals will be followed up in writing using the (Addendum 2) Safer Referral Form after an initial telephone call to children's services. This form will be completed immediately following contact with the local authority. Following referral, the academy will ensure feedback is received from the local

authority within 24 hours of a referral being completed (Addendum 3). All potential outcomes are available for review (please see Addendum 3).

- 6.1.2 Keeping written records of concerns about a student even if there is no need to make an immediate referral and that when threshold for safer referral is not met, other pathways are considered, e.g. My Family Plan/ Early Help Support (Addendum 4).
- 6.1.3 Ensuring that all such records are kept confidentially and securely and are separate from student records, until the person's 25th birthday, and a copy is forwarded to the student's next school or college.
- 6.1.4 Ensuring that an indication of the existence of the additional file (CPOMS), is accessible by relevant individuals.
- 6.1.5 Liaising with other agencies and professionals.
- 6.1.6 Ensuring that the appropriate person attends case conferences, core groups, or other multiagency planning meetings, contributes to assessments, and provides a report which has been shared with the parents.
- 6.1.7 Ensuring that any student currently with a child protection plan who is absent in the educational setting without explanation is referred to their key worker's Social Care Team.
- 6.1.8 Organising child protection induction, and update relevant training at least every 3 years, for all school staff.
- 6.1.9 Providing, with the Head of School, an annual report for the governing body, detailing any changes to the policy and procedures; training undertaken, number and type of incidents/cases, and number of students subject to child protection plans (anonymised).

7. SUPPORTING CHILDREN

- 7.1 We recognise that a student who is abused or is a witnesses to violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.
- 7.2 We recognise that the academy may provide the only stability in the lives of students who have been abused or who are at risk of harm.
- 7.3 We accept that research shows that the behaviour of a student in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

7.4 We will support all students by:

7.4.1 Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.

7.4.2 Promoting a caring, safe and positive environment within the academy.

7.4.3 Liaising and working together with all other support services and those agencies involved in the safeguarding of children.

7.4.4 Notifying social care as soon as there is a significant concern (Addendum 2).

7.4.5 Providing continuing support to a student about whom there have been concerns should he/she leave the academy assuming that appropriate information is copied under confidential cover to the student's new setting and the academy medical records are forwarded as a matter of priority.

7.5 Early Help - We support children and their families by offering Early Help Support. The assistance is offered if a family requests this provision or professionals feel this is as a positive source of help when children and their families are in need. The family must consent to the referral, school staff play an active role in ensuring provision and assistance is delivered.

7.5.1 Addendum 4 – Early Help Referral Form

Please note that families at Macmillan Academy are encouraged to liaise directly with members of Middlesbrough Multi-Agency Children's Hub (MACH) to discuss worries. (Telephone: 01642 726004 – 8.30am-4.00pm, Monday-Friday).

8. DEFINITIONS

8.1 Safeguarding and promoting the welfare of children means:

8.1.1 Protecting children from maltreatment (recognising that this can stem from both action and inaction on the part of the child's carer).

8.1.2 Preventing impairment of children's physical and mental health/development.

8.1.3 Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.

8.1.4 Taking action when appropriate to enable all children to have the best outcomes.

8.2 Child protection refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

8.3 Abuse is a form of maltreatment of a child and may involve inflicting harm or failing to act to prevent harm. This also includes peer on peer abuse.

8.4 Neglect is a form of abuse and 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.

8.5 Children includes everyone under the age of 18 years.

9. CONFIDENTIALITY

- 9.1 We recognise that all matters relating to child protection are confidential.
- 9.2 The Head of School or safeguarding leads will disclose any information about a student to other members of staff on a 'need to know' basis only. Disclosure will be made to ensure ongoing close monitoring and support for the child.
- 9.3 All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children.
- 9.4 All staff must be aware that they cannot promise a student confidentiality. Children are offered additional support when appropriate to assist with distress.
- 9.5 The academy will always undertake to share our intention to refer a student to:
 - 9.5.1 Social care with their parents/carers unless to do so could put the student at
 - 9.5.2 Greater risk of harm, or impede a criminal investigation. If in doubt, we will
 - 9.5.3 Consult with the LACPO for Education or MACH on this point.

10. PROCEDURES TO FOLLOW IN THE CASE OF SUSPICIOUS ALLEGATIONS AND STAFF MAKING REFERRALS (including children at risk of being drawn into terrorism) Anyone (not only education staff) can make a referral.

If the allegation involves a member of staff (in any context, including volunteers, procedures below should be followed:

Addendum 2 - Tees Multi Agency Safer Referral Form

- 10.1 Senior Management must be informed immediately, or in their absence the Chair of Governors, and keep a detailed written and dated record of the event. Staff should be reassured that they have immunity from 'whistleblowing' in good faith, (please refer to **Whistleblowing Policy**). Senior Lead must not undertake their own investigation prior to consultation with the LADO or the Police (in most serious cases), which must be, within 24 hours, one working day, of the allegation being received or suspicion reported. This will be without telling the subject of the allegation or suspicion. This process should avoid all unnecessary delays. In borderline cases or if the Senior Lead/Chair of Governors have any doubts about their decision to report, discussions with the LADO can be held informally and without naming the school or individual. (Safer Recruitment Policy, Staff Conduct/Tech Policy).
- 10.2 If the allegation is about the SDSL, it must be reported to Head of School. If the allegation is about Head of School, they must be reported to the Chair of Governors, this contact must be made without the Head of School being informed. If the allegation involves the Chair of Governors the referral should be directly to the LADO.
- 10.3 Immediate contact should be made with the LADO to discuss the allegation, consider the nature, content and context of the allegation and agree a course of action including any involvement of the police. Discussions should be recorded in writing, and communication with both the individual and parents of the child/children agreed. The School must consider carefully whether the

circumstances of the case warrant suspension of the member of staff or whether alternative arrangements should be put in place. The School will give due weight to the views of the LADO and this policy when making a decision about this.

10.4 The following definitions should be used when determining the outcome of allegation investigations:

10.4.1 Substantiated: there is sufficient evidence to prove the allegation;

10.4.2 Malicious: there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive;

10.4.3 False: there is sufficient evidence to disprove the allegation;

10.4.4 Unsubstantiated: there is insufficient evidence to either prove or disprove the allegation. The term, therefore, does not imply guilt or innocence;

10.4.5 Unfounded: to reflect cases where there is no evidence or proper basis which supports the allegation being made.

10.5 Since 1st October 2012, there are restrictions on the reporting or publishing of allegations against teachers. The School will make every effort to maintain confidentiality and guard against unwanted publicity. This restriction will apply to the point where the accused person is charged with an offence, or the DfE/TRA publishes information about the investigation or decision of a disciplinary case.

10.6 Staff need to be supported to challenge decisions by other agencies; therefore, Staff will be supported to follow through their concerns in respect of safeguarding children. Staff will be empowered to discuss matters with their managers and positively challenge other agencies to improve safeguarding arrangements for children and young people. When appropriate the Macmillan Senior Leadership Team will liaise with managers from outside agencies.

10.7 If a member of staff has concerns about Safeguarding Practices in School:

10.7.1 They should use procedures outlined in the Whistleblowing Policy.

10.7.2 They may also seek advice from <https://www.gov.uk/whistleblowing>

10.7.3 The NSPCC dedicated helpline is another useful resource (Tel 0800 028 0285 8am-8pm Mon-Fri or email help@nspcc.org.uk)

CHILD ON CHILD ABUSE (KCSIE: Part five, 2021)

10.8 If the allegation of abuse is against another pupil(s) (Peer on Peer Abuse including Child on Child Violence and Sexual Harassment):

Peer on peer abuse can result in significant harm and will always be taken seriously. It must not be contextualised, minimised or dismissed as 'normal growing up behaviour'. As such any report of child on child abuse must be acted upon using the school/local safeguarding policy / procedures and behaviour management guidelines.

Peer-on-peer abuse includes, but is not limited to:

10.8.1 Physical and sexual abuse

10.8.2 Sexual harassment and violence

10.8.3 Emotional harm

10.8.4 On and offline bullying

10.8.5 Teenage relationship abuse

It can even include grooming children for sexual and criminal exploitation.

Other forms include:

- 10.8.6 Upskirting (taking a picture under a persons clothing without their knowledge with a view to obtaining sexual gratification or causing the victim humiliation, distress or alarm).
- 10.8.7 Sexting (youth produced sexual imagery) (Tech Policy)

On Child on Child sexual violence and harassment we will:

- 10.8.8 Make clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up.
- 10.8.9 Not tolerate or dismiss sexual violence and sexual harassment as 'banter', 'part of growing up', 'just having a laugh' or 'boys being boys'.
- 10.8.10 Challenge behaviour (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia and flicking bras and lifting up skirts.
- 10.8.11 Not dismiss or tolerate such behaviours so as to avoid the risk of normalising them.
- 10.8.12 Understand that all of the above can be driven by wider societal factors beyond the school, such as everyday sexist stereotypes and everyday sexist language. This is why a whole school approach (especially preventative education) is important.
- 10.8.13 Ensure that the schools initial response to a report from a child is important. It is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe. A victim will never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor will a victim ever be made to feel ashamed for making a report.
- 10.8.14 We will act on any reports or disclosures in line with this policy and refer to the Designated Safeguarding Lead or their Deputies.

(KCSIE: Part five, 2021)

We will act on any reports or disclosures in line with this policy and refer to the Designated Safeguarding Lead or their Deputies.

10.9 The Threshold for referrals:

- 10.9.1 Guidance places responsibility of making decisions about referrals on MACH and safeguarding staff within the academy. Borderline cases should be referred in line and with informal advice from the LSCB (LADO and Children's Hub) Guidance notes in KCSIE outline the importance of children receiving the right help at the right time to address risks and prevent issues escalating. It also refers to the importance of acting on early information and referring early signs of abuse, neglect and radicalisation, keeping clear records, listening to views of the child, reassessing concerns when situations do not improve, sharing information quickly and challenging inaction. Any member of staff can and should, make a referral for reconsideration if they feel the child's situation does not appear to be improving.
- 10.9.2 A failure to report externally by a school must be investigated by the local authority and, if justified, appropriate action taken (such action to be determined according to the legal framework).
- 10.9.3 A failure to report internally by staff must be investigated by the school and, if justified, appropriate action taken (this could range from disciplinary proceedings, a referral to the Teaching Regulation Agency or a referral to the Disclosure and Barring Service).

11. PROCEDURES TO FOLLOW IN THE CASE OF A DISCLOSURE:

LISTENING TO CHILDREN

- 11.1 Children who disclose to a teacher (or other member of staff) that they are victims of abuse must be listened to and heard, whatever form their attempts to communicate their worries take.
 - 11.2 When recording an allegation or description of an incident, close adherence to the following points is crucial at all stages of an investigation, whoever undertakes this. At no point in the recording should a pupil be promised secrecy or confidentiality, either by implication or statement. The child should be reassured that the matter will be disclosed only to people who need to know about it. The support needs of a child who express concerns about significant harm should be considered and met, utilising resources within and/or beyond the school as necessary. This is in accordance with the local procedures agreed with Middlesbrough Council and the Middlesbrough Children's Hub. Account should be taken of the age and understanding of the child and whether the child or other children may be at risk of significant harm.
 - 11.3 Make timed and dated notes at the time of disclosure, these should then be discussed with Safeguarding Lead and uploaded to CPOMS
 - 11.3.1 It should be factual.
 - 11.3.2 It should not include personal comment or opinion;
 - 11.3.3 It should include a verbatim account of anything said by the child
 - 11.3.4 It should include any relevant background information (including dates, times, places, who was present etc.)
 - 11.3.5 It should not include any leading questions.
 - 11.3.6 It should reflect that the child is being listened to, not interviewed. This includes not suggesting that there are alternative explanations for their concerns or worries.
 - 11.3.7 The child should not be interrupted when recalling significant events.
 - 11.3.8 Care should be taken that assumptions are not made about what the child is saying, and in not seeking to make interpretations. Clarifying questions should be asked at the end of the disclosure to ensure that the information is as accurate as possible.
- In addition:
- 11.3.9 Do not discuss the matter with parents/carers or the person accused of the abuse.
 - 11.3.10 Do not discuss the matter with other staff members other than DSL.
 - 11.3.11 The written record should be signed and dated by the person who received them and uploaded to CPOMS.
 - 11.3.12 All subsequent actions should be recorded to CPOMS
- 11.4 In the case of pupils identified as being at risk of radicalisation, Macmillan Academy will consider the level of risk to identify the most appropriate referral. This could include Channel or Children's Social Care, e.g. Middlesbrough Children's Hub
- 11.5 Although decisions to seek support for a child in need, or about whom there are concerns relating to radicalisation, would normally be taken in consultation with parent(s) and pupil, their consent is not required for a referral when there are reasonable grounds to believe a child is at risk of significant harm.

11.6 In the case of FGM, from October 2015, it is mandatory for teachers to report to the police cases where they discover that an act of FGM appears to have been carried out or believe this is about to be carried out. Unless the teacher has good reason not to, they should still consider and discuss such a case with the DSL and involve children's social care as appropriate. Further information can be found in Female Genital Mutilation Guidance for Schools (June 2019).

12. PREVENT STRATEGY

12.1 In addition to the procedures already covered in this policy in relation to protecting children from radicalisation and being drawn into terrorism, there are additional safeguards and procedures in place to safeguard children.

12.1.1 All visiting speakers, whether invited by staff or pupils, are suitably and appropriately supervised throughout their visit.

12.1.2 The School also has suitable levels of filtering and network monitoring to ensure that pupils are safe from terrorist and extremist materials.

Regular checks are made on pupils' personal devices to ensure they do not use VPN's and this is reinforced in assemblies, PSHE, parental meetings and School correspondence.

13. PHYSICAL INTERVENTION

13.1 We acknowledge that staff must only ever use physical intervention as a last resort, when a student is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person.

13.2 Such events should be recorded and signed by a witness and passed to SLT.

14. ANTI-BULLYING

14.1 The academy policy on anti-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms of bullying eg. cyber, racist, homophobic and gender related bullying. A record is kept of all known bullying incidents. All staff are aware that students with Special Educational Needs & Disabilities (SEND) and/or differences/perceived differences are more susceptible to being bullied or victims of child abuse.

15. RACIST INCIDENTS

Academy policy on racist incidents is set out separately, and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents.

16. HEALTH & SAFETY

16.1 The academy Health & Safety policy, set out in a separate document, reflects the consideration we give to the protection of our students both physically within the school environment and when away from the academy undertaking academy trips and visits. (Link)

17. MONITORING AND EVALUATION

17.1 The academy child protection and safeguarding policy and procedures will be monitored and evaluated by:

- 17.1.1 Governing Body visits to the school
- 17.1.2 SLT 'MBWA' and discussions with students and staff
- 17.1.3 Student Voice (survey)
- 17.1.4 Scrutiny of attendance data
- 17.1.5 Scrutiny of range of risk assessments
- 17.1.6 Scrutiny of Executive/SLT/Governing Body minutes
- 17.1.7 Logs of bullying/racist/behaviour incidents for SLT and governing body to monitor
- 17.1.8 Review of parental concerns and parent questionnaires.

18. COVID

18.1 The principles for reporting concerns about students remain the same for staff working in school or remotely:

- 18.1.1 Report any concern you have immediately to the on-duty team member, do not delay.
- 18.1.2 Log all concerns on CPOMS, but do not rely on this as a method of communication.
- 18.1.3 Stay vigilant and don't be worried to ask or pass on a concern no matter how minor it may seem.

ADDENDUM 1

Summary of changes: Keeping Children Safe in Education 2021

There are substantial changes to [Keeping Children Safe in Education](#) (KCSIE) this year, which will apply from 1 September 2021. Below is a table of the substantive changes, we will not repeat them in full. Instead, a brief summary is set out below:

- **Who is this guidance for?** There are changes to who should read / receive a copy of particular Parts of KCSIE.
- **Part 1:** Safeguarding information for all staff. In particular, there are changes as to what staff should be aware of and look out for, including peer on peer abuse; child criminal or sexual exploitation; the risk of online abuse; the sharing of nudes; and mental health concerns.
- **Part 2:** The management of safeguarding. There are substantial changes to Part 2. This includes changes to emphasise the need for a whole school approach to safeguarding; strengthened systems that should be in place; added information that schools should include in their child protection policy; clarity about powers to hold and use information; emphasis on online safety, including the importance of training for staff and what children should be taught; new paragraphs regarding safeguarding requirements when letting / hiring the school land; and new paragraphs regarding elective home education.
- **Part 3:** Safer recruitment. The DfE states that the whole of Part 3 has been substantively restructured to align it with the recruitment process, but that the legal duties have not changed. It provides various clarifications, including when certain checks should be carried out.
- **Part 4:** Allegations made against / concerns raised in relation to teachers, including supply teachers, other staff and contractors. This Part has been separated into two sections: the first for allegations that may meet the threshold, and the second for allegations / concerns that do not (i.e. low-level concerns). Further information is provided in relation to handling either type of allegation.
- **Part 5:** Child on child sexual violence and harassment. There is updated information in this Part, including in relation to responding to and managing a report, and supporting a victim or someone who has made allegations. This Part should be read alongside the separate updated DfE 'Sexual violence and sexual harassment' advice.
- **Annexes:** New information and guidance has been added. This includes (at Annex A) a new condensed version of Part 1 of KCSIE – it can be provided (instead of Part 1) to those staff who do not directly work with children, if the governing body or proprietor think it will provide a better basis for those staff to promote the welfare and safeguard children.

ADDENDUM 2

TEES MULTI AGENCY SAFER REFERRAL FORM SITUATION, ASSESSMENT, FAMILY, EXPECTED RESPONSE, RECORDING

Children’s Social Care operates a multi-agency approach to supporting children, young people and their families. Across the Tees Valley, County Durham and North Yorkshire Multi Agency Safeguarding Teams are in place working together to safeguard children. These teams include the Police, health services and other relevant agencies who share information and support the social care decision making process. All information shared is proportionate and appropriate to the level of need of the child. For the avoidance of doubt, information can and will be shared in these multi agency teams to get the right support to meet a child’s needs at the right time. Children’s Social Care operates within the context of Working Together to Safeguard Children and is GDPR and Data Protection ACT 2018 compliant.

When do you need to use this form?

This form should be used to request support for a child who has suffered or is at risk of suffering significant harm; where you believe they are unlikely to achieve or maintain a reasonable level of health or development without the provision of a social work service. This is Level 4 of need.

What do you need to do?

- Discuss your concerns with the child and family if appropriate and where you can, gain their consent.
- Where you are able, reflect on the right support at the right time with your agency’s safeguarding lead to determine that a request for a social work service is the most appropriate response for the child.

What is the level of need? (To ascertain the level of need based upon the information you have, consult your threshold document at: <https://www.teescpp.org.uk/safeguarding-procedures/2-early-help/>)

Level of Need	Level description / response	Referral Pathway
1	A child whose needs are being met, or whose needs can be met by universal services	Universal Services
2	A child with additional needs that can be met by a single agency providing additional support or by signposting to an additional agency – complete an early help assessment (EHA) (https://www.teescpp.org.uk/safeguarding-procedures/2-early-help/)	Early Help
3	A child who would benefit from a coordinated response from multiple agencies – complete an Early Help Assessment (EHA)	Early Help
4	A child who has suffered or is at risk of suffering significant harm or has complex needs; that requires a specialist or statutory intervention	Children’s Social Care

Request for Children's Social Care

Date of Request:		Time:	
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DETAILS OF CHILD(REN)

Child's name:		DOB:		Expected Date of Delivery (Unborn):	
		NHS no/UPN (if available)			
		Age:		Language:	
Gender M/F :		Ethnicity:		Interpreter required:	
		Religion:		Communication Needs:	

Address:	
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Postcode:		Tel No of Parent/ Carer: (MUST COMPLETE)		Disability:	Y/N

Name of Parent(s) / Carer(s):		Address of Parent(s) / Carer(s):		Relationship and DOB:	

Family Composition/Significant Others (Who else lives with the child or plays a significant role in their life?)

Name:	DOB:	Relationship:	Address (and contact number):

CONSENT

Professionals should seek to discuss concerns with the family and where possible seek the family's agreement in making a referral unless this may place the child at increased risk of significant harm.

Who has parental responsibility for this child?

Have parents / carer(s) been informed of this referral? Yes <input type="checkbox"/> No <input type="checkbox"/>	Has the child / young person given consent for this referral? <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Have parents / carer (s) given consent for this referral? Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/>

If the answer to any of the above is **NO** please provide an explanation :

WHAT IS WORKING WELL? (What support is currently in place)

- What existing support is in place/offered for this child and family? What is the impact on the child?
- What is your agency doing? What services will your agency continue to provide? ▪ What are the strengths / protective factors?

WHAT ARE YOU WORRIED ABOUT? (Reason for the referral: consult your threshold document)

- Is there actual harm – what is causing the harm? What is the impact?
- What are the future dangers for the child(ren) / family should this concern not be addressed?
- What are the complicating factors (E.g: parental substance misuse/ mental health issues) that make the concern more difficult to deal with?

WHAT NEEDS TO HAPPEN NEXT? (What change do you want to see happen?)

- What are the views of the children and family? What do they think will help them?
- What needs to change?
- What intervention do you think will make a difference for this child and family?
- What outcome do you hope this referral will achieve?
- Are there any issues for worker safety that need to be considered when planning a response?

Details of other agencies involved with the child

Agency		Agency	
Midwife		Other Health Professional	
Health Visitor		Child care or Education Setting	
School Nurse		Youth Justice / Offending	
GP		Other Agency	

REFERRAL FROM:

NAME	
JOB TITLE	
AGENCY	
ADDRESS	
TEL	
EMAIL	

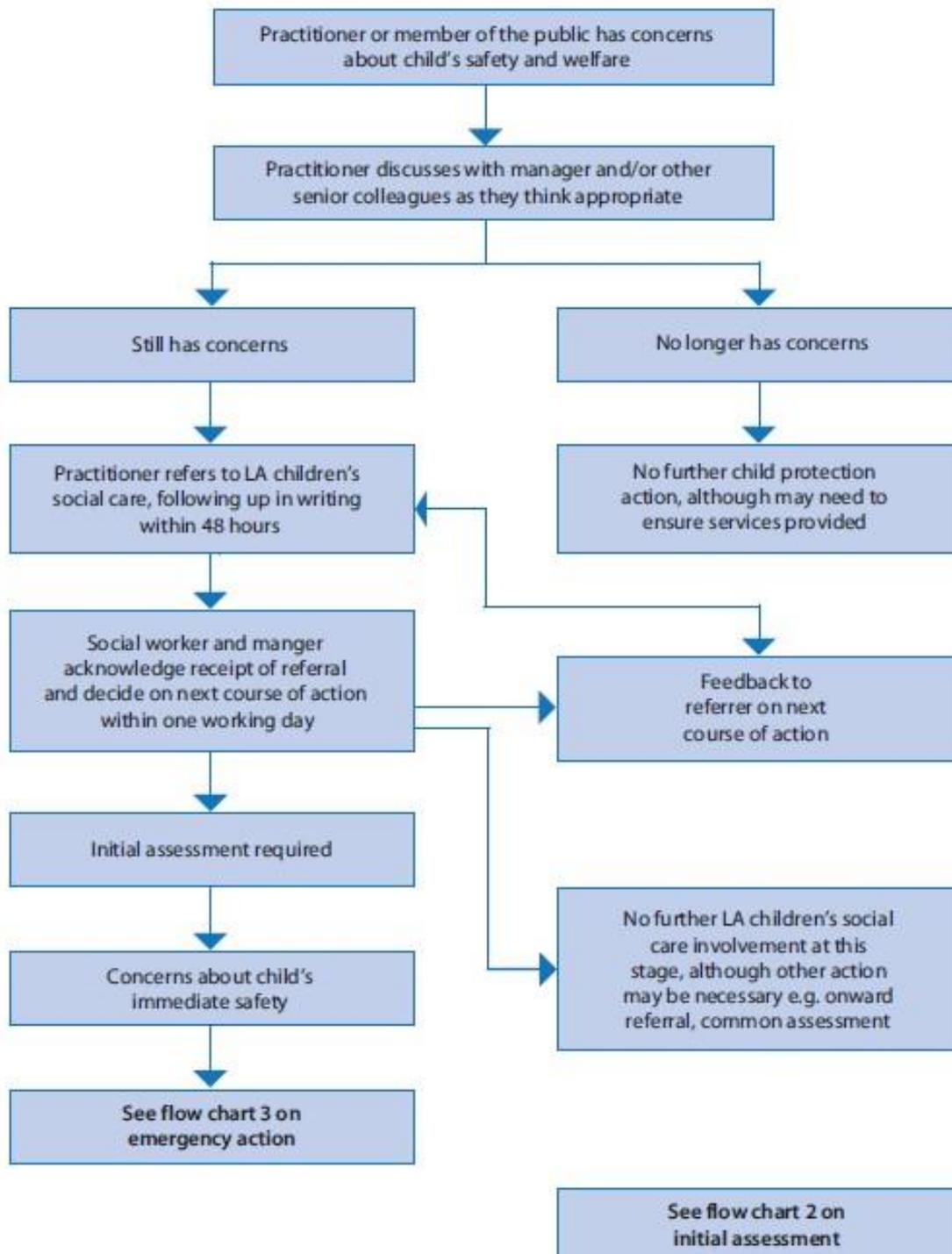
PLEASE SEND THE COMPLETED REQUEST TO:

Children's Services	Office hour	Out of hours	Email
Hartlepool	01429 284284 01642 130080	01642 524552	childrenshub@hartlepool.gov.uk
Middlesbrough	01642 726004	01642 524552	MiddlesbroughMACH@middlesbrough.gov.uk
Redcar & Cleveland	01642 130700	01642 524552	RedcarMACH@redcar-cleveland.gov.uk
Stockton-on-Tees	01642 130080 01429284284	01642 524552	childrenshub@hartlepool.gov.uk
North Yorkshire	01609780780	01609780780	children&families@northyorks.gov.uk
Durham	03000 267979	03000 267979	Firstcontact@durham.gov.uk
Darlington	01325 406252	01642 524552	PLEASE NOTE: This email address is for out of hours only and should only be used if contact cannot be made by telephone: childrenfrontdoor@darlington.gov.uk

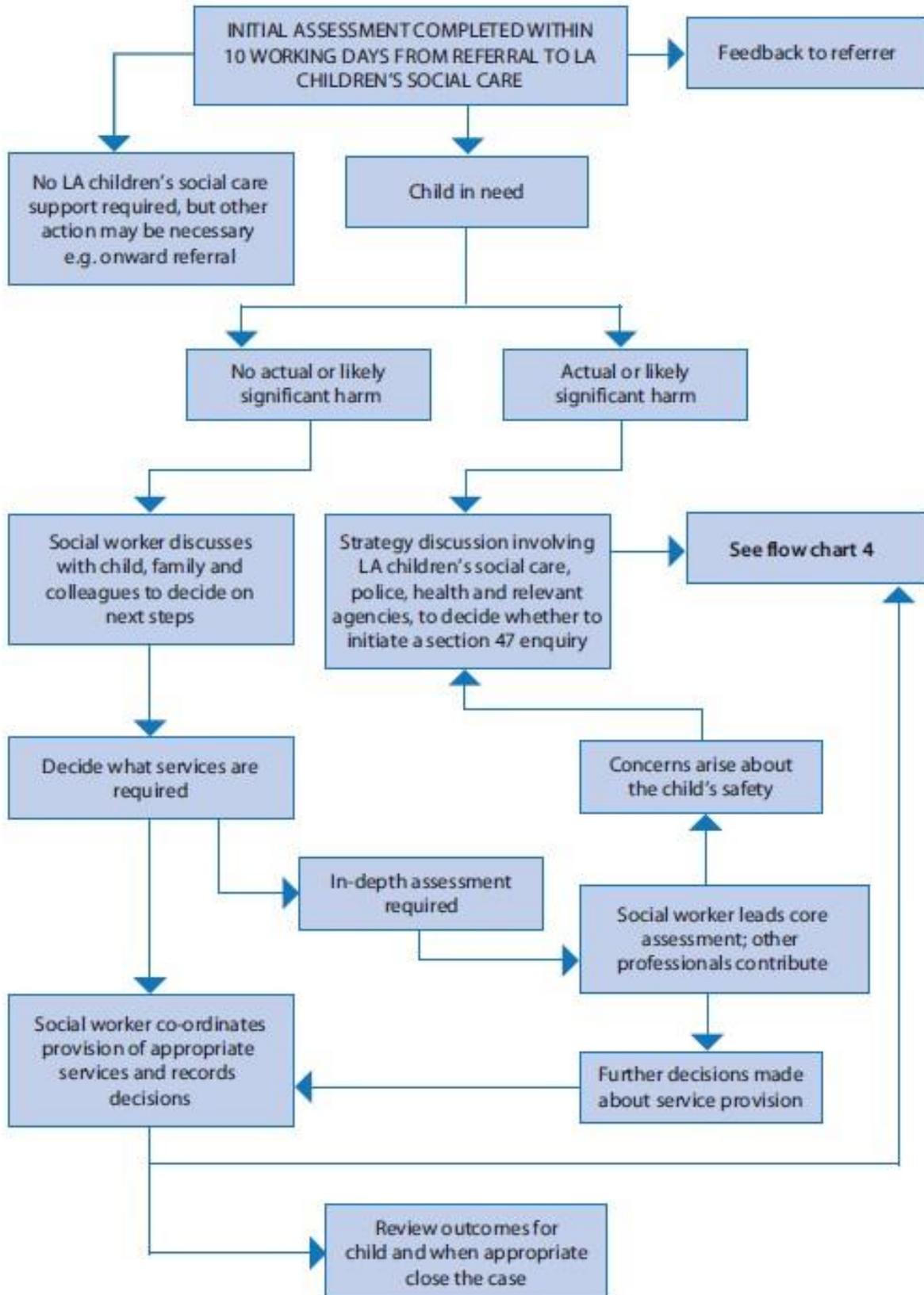
ADDENDUM 3

186 Working Together to Safeguard Children

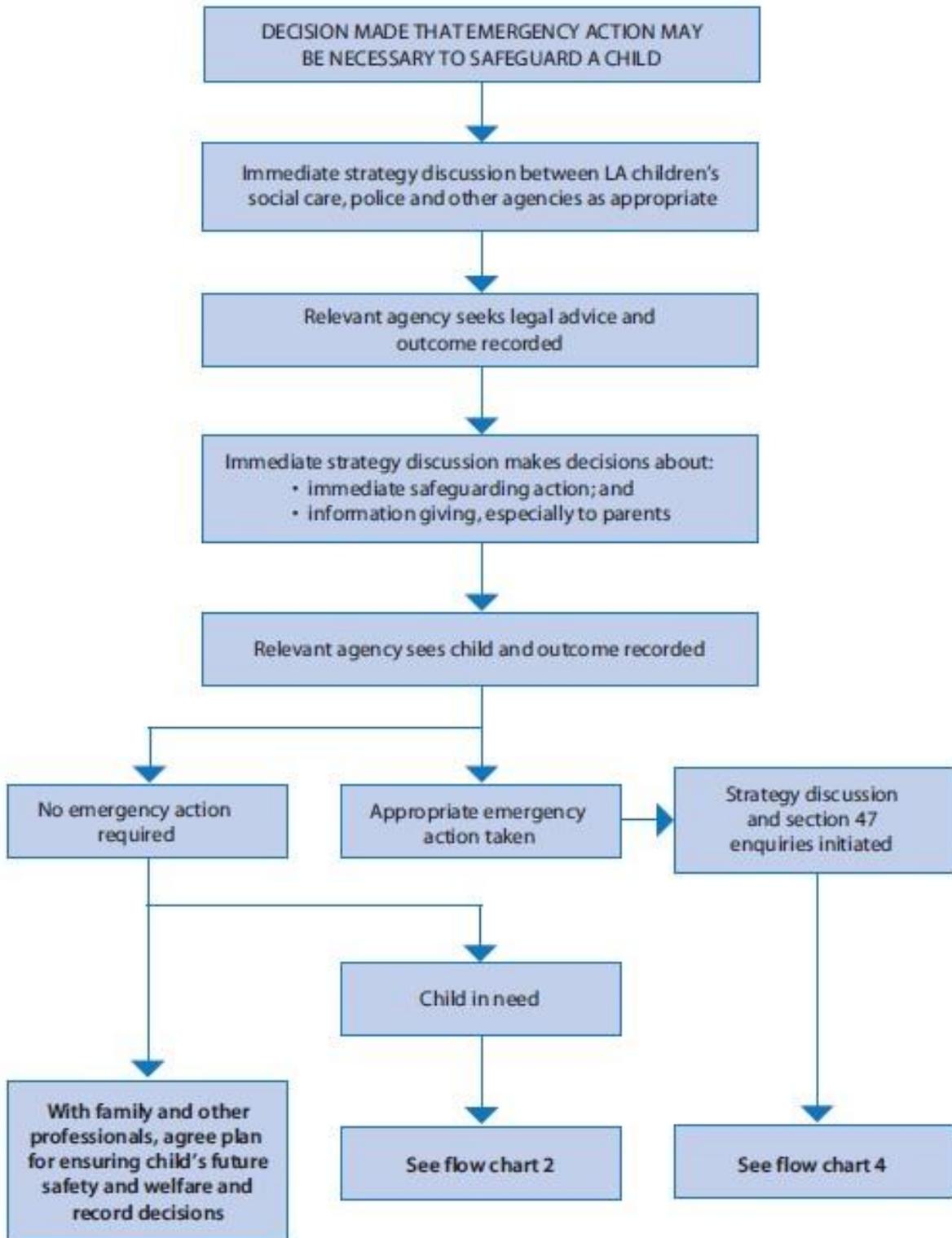
Flow chart 1: Referral



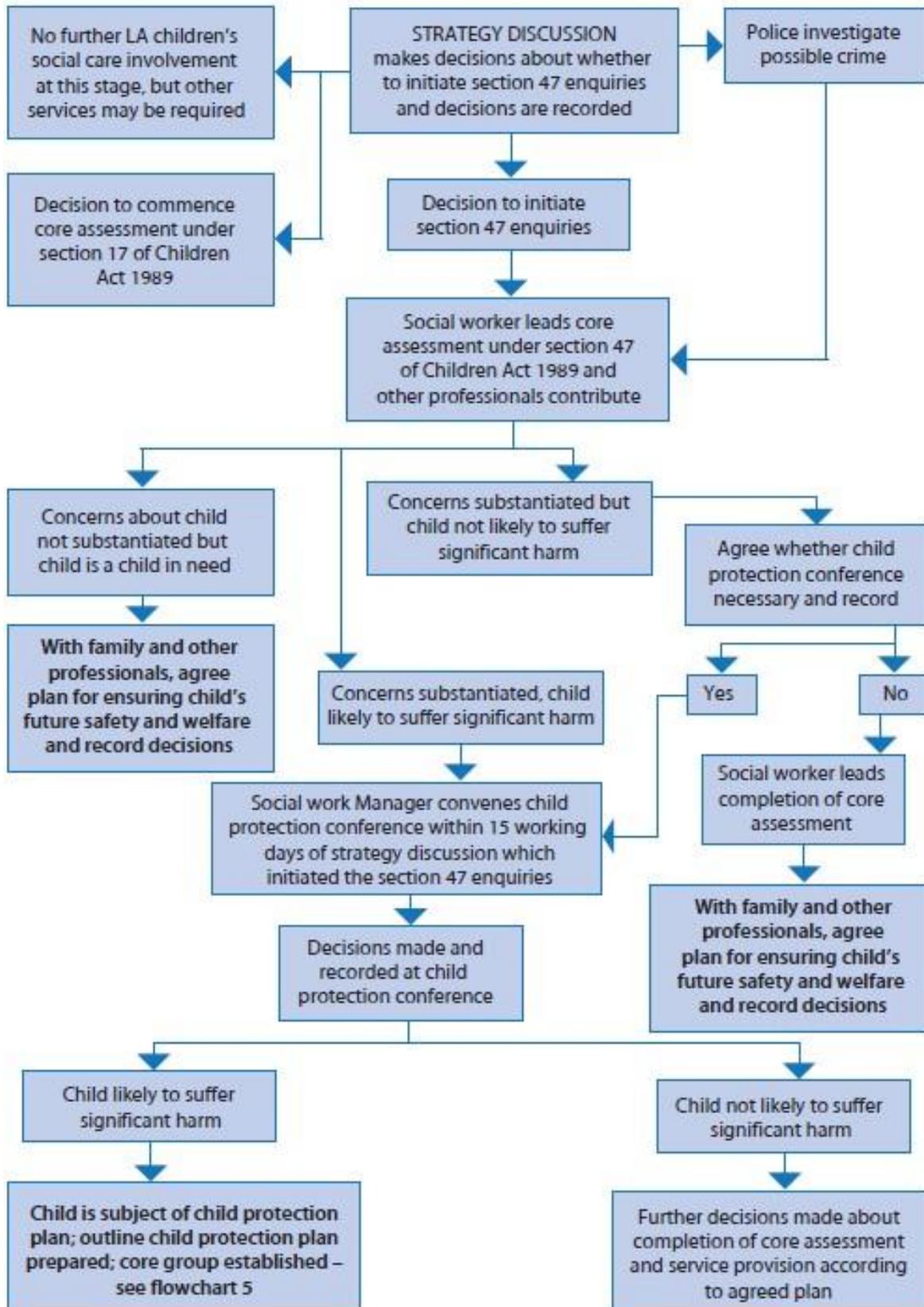
Flow chart 2: What happens following initial assessment?



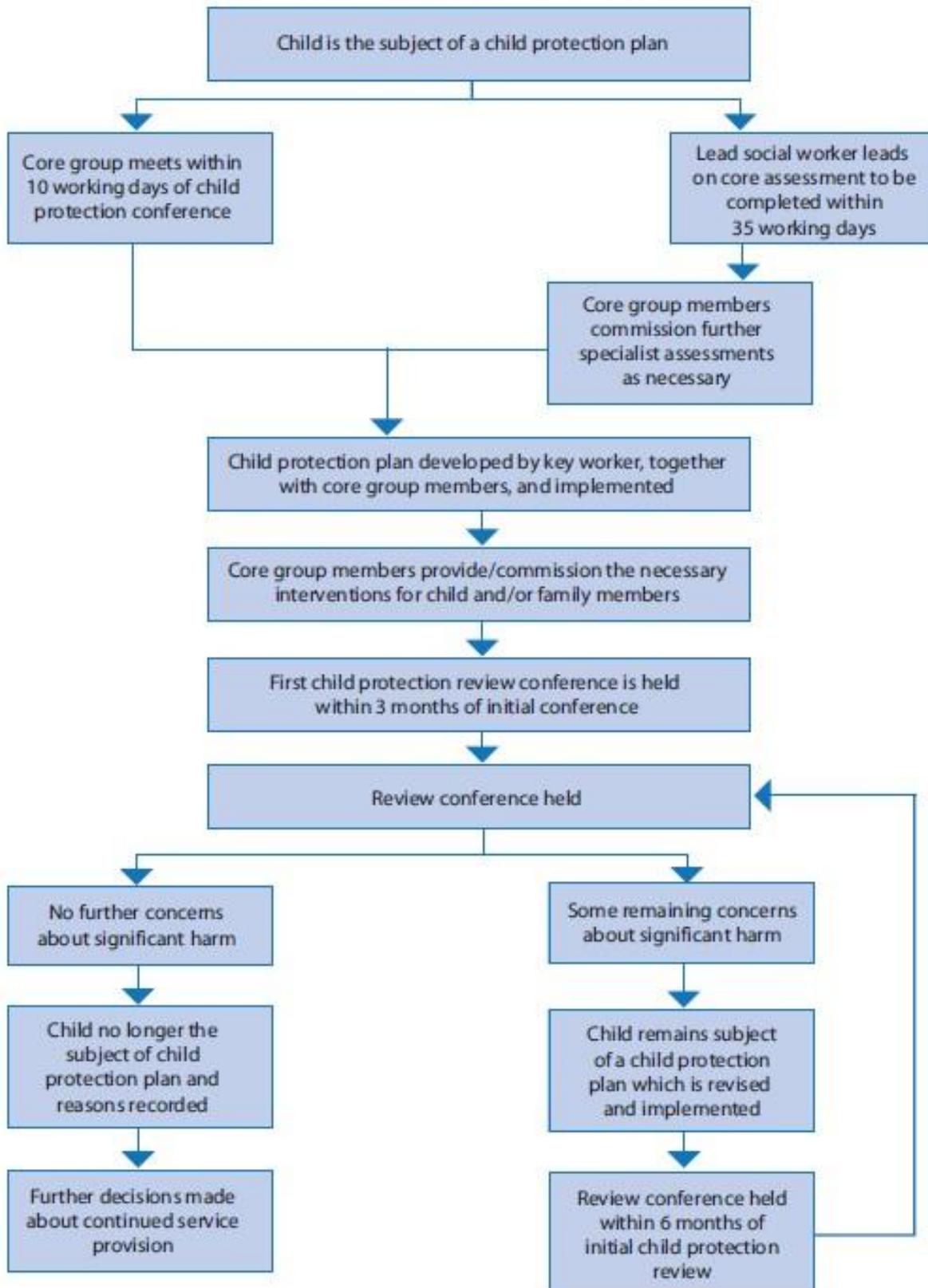
Flow chart 3: Urgent action to safeguard children



Flow chart 4: What happens after the strategy discussion?



Flow chart 5: What happens after the child protection conference, including the review process?



ADDENDUM 4

Request for whole family support in Early Help

To be returned to middlesbroughMACH@middlesbrough.gov.uk

Please complete as much of this form as possible to help us fully understand the children's circumstances. Requests may be returned to the referrer asking for more information if key parts of the form are left blank. Please note that requests will only be accepted if the family have agreed to engage with support.

Date of request		Request received from	Choose an item.
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ABOUT YOU:

Name		Role	Choose an item.
Address		Agency (if professional)	
Telephone number		Mobile	
Email			
Have the family agreed to engage with Early Help support?	Choose an item.		
We may want to contact you to discuss further, what is the preferred method of communication?	Choose an item.		

ABOUT THE FAMILY:

Family member name	Relationship	DOB/EDD	Gender
			Choose an item.
Current address		Landline	
		Mobile	
Postcode		Email	
Does the child have a disability or additional needs?	Choose an item. If yes, please state		
Is the child a young carer?	Choose an item. If yes, to whom		
Are there any additional support needs for any family member? i.e. literacy, translator, access etc	Choose an item. If yes, please state		
Is the child aware you have made this request?	Choose an item.	Date	
Is there a current Early Help Assessment for this family	Choose an item.	If yes please state date completed	

ARE THERE ANY PROFESSIONALS/AGENCIES WORKING WITH ANY FAMILY MEMBERS? (e.g. GP, Health Visitor, School, Nursery, Mental Health Service)

Professional's name	Agency	Involvement

What are the main issues for which you are requesting support? (Type X in the appropriate boxes)

Alcohol misuse – adult		Family bereavement		Parenting support	
Alcohol misuse – child		Family relationships		Potential private fostering	
Anti-social behaviour		Financial issues		Risk taking behaviours	
Attendance issues		Housing issues		Self-esteem and confidence	
Child behaviour/routines and boundaries		Mental health – adult		Self-harm/Self-injury	
Child with SEN or disabilities		Mental health – child		Sexual identity/relationships – child	
Development delay		Missing from education		Social isolation	
Domestic abuse		Missing from home		Step down from Social Care	
Drug misuse – adult		Neglect/Suspected neglect		Unemployed/Workless-ness	
Drug misuse – child		Parental conflict		Young carer	
Education/Employment/Training		Parental illness			

Other, please state:

Brief description of current situation that has led to this request for support

What is working well? Please describe:

Existing wellbeing

What actions have been taken by the parents, or others, in the past to make sure that the child has been kept safe and well? Who did this? How did they do this?

Existing strengths

What have people been doing to try and sort out the concerns? Who has been helping?

Please capture the parent/carer and young person's views and take into consideration any extended family support including neighbours and friends who may be helping too.

What are you worried about? Please describe:

Wellbeing concerns

What are the behaviours that you are worried about? When did it start? How often does it happen? What is the worst behaviour and how has it impacted on the child? **Complicating factors**

Who or what is making the problem harder to deal with e.g. poor parental mental health? What has happened?

Please capture the parent/carer and young person's views.

Please also detail any known risks to staff working with the family

Critical worry statement

Please try to write a statement outlining who is worried, what has happened to make them worried and what could happen if things don't change i.e. what are the future dangers for the child(ren) / family should this concern not be addressed? Please capture the parent/carer and young person's views.

What needs to happen next?

Please describe what change you want to see happen including changes in behaviour or actions you think are needed to address the worries and improve the wellbeing of the young person and family. What are the views of the children and family? What do they think will help them?

Wellbeing goal

Please try to write a statement outlining what you would like the day in the life of the young person and family to look like for us not to be worried. Please capture the parent/carer and young person's views.

AGREEMENT TO ENGAGE AND YOUR PERSONAL DATA

In agreeing to a referral for Early Help whole family support, you are aware that your information will be shared with and gathered from key partners such as health, police, education and other agencies in order to better understand the level of service required to meet the needs of your family circumstances. This includes a wide range of services which we have a public duty or legal obligation to provide. **By agreeing to this referral you also understand that someone will contact you to offer you further advice or support.**

In addition, some of your personal information will be stored securely by the appropriate local authority where staff will be able to access your data electronically. They will do this via a secure login to a shared database, for the purpose of supporting you and your family. Some data is shared nationally as part of the Troubled Families Programme but it is anonymised to reduce the risk of individuals being identified and is only used for carrying out research for the National Impact Study by the Ministry of Housing, Communities and Local Government.

Do you have safeguarding concerns about this child? If yes do not complete this form, you must contact Middlesbrough MACH on [01642 726004](tel:01642726004) or email a SAFER referral to: middlesbroughMACH@middlesbrough.gov.uk

Annex Additions KCSIE: Part one

Additional helplines – CAMHS Crisis, Bridgeway, Hart Gables (Local Directory/Headstart).



Stockton Road
Middlesbrough
TS5 4AG



01642 800800



enquiries@endeavour-academies.org.uk
www.endeavour-academies.org.uk