



## **SAFEGUARDING CHILDREN POLICY**

Up to date information, procedures and advice on Safeguarding Children is available in the *'What to do if you're worried that a child is being abused'* document published by HM Government. This is available to school staff in the Safeguarding Children folder of the Staff Area on the School's network and is generally available by a web search such as 'Googling' *What to do if* and selecting either the summary document or the full document. Alternatively, seek advice from the school's Designated Senior People on the staff for Safeguarding Children / Child Protection. The Head of the Junior School is the Designated Senior Person for the Junior School including the Early Years Foundation Stage (EYFS) and Miss Davinia Ablett is the designated Senior Person in the Senior School.

### **GENERAL STATEMENT**

Sevenoaks Prep is committed to ensuring that it provides a safe environment for children to learn in, identifies children who are suffering, or likely to suffer, significant harm and takes appropriate action to see that such children are kept safe, both at home and at school. In pursuit of these aims, the governing body approves and annually reviews policies and procedures to raise awareness of issues relating to the welfare of children and the promotion of a safe environment in which they can learn, to aid the identification of children at risk of significant harm and provide procedures for reporting concerns, to establish procedures for reporting and dealing with allegations of abuse against staff and to ensure the safe recruitment of staff.

In developing the policies and procedures, the governing body consult with, and take account of guidance issued by the government and other relevant bodies and groups. Procedures are developed in cooperation with the Children's Safeguard Unit in West Kent and the Area Children's Officer (Child Protection).

If welfare concerns for children arise, the Area Children's Officer (Education Safeguarding Team) may be consulted to assist in decisions regarding action. The school will refer concerns that a young person might be at risk of significant harm to Children's Social Services in line with Kent Safeguarding Children Board procedures.

Within EYFS there is a registered setting, the Nursery and Kindergarten for which there are specific additional requirements. The school have a Designated Child Protection Coordinator for EYFS – the Head of the Junior School. The school will inform Ofsted and ISI (Independent Schools' Inspectorate) of any allegations of serious harm or abuse by any person living, working or looking after children at the premises whether or not the allegations take place on the premises or elsewhere, or any other abuse that is alleged to have taken place on

the premises, and of the actions taken in respect of these allegations. This information is to be passed as soon as is reasonably practical, but the latest is fourteen days.

The Designated Senior People and all staff and volunteers working with children will receive training adequate to familiarise them with child protection issues and responsibilities and the school procedure and policies, with refresher training at least every three years.

The DSP will inform the Headmaster or the Designated Governor of any child protection issues arising.

## **SECTION 1                   SETTING THE SCENE**

Abuse of children can initially be spotted by parents, teachers, peripatetic teachers, governors, volunteer helpers, lunchtime supervisors, Educational Psychologists, non teaching staff, etc. The purpose of this policy is to inform those who work closely with children and their families as to the most common signs of child abuse and to prescribe the procedures that must be followed to protect the child.

Child abuse manifests itself in a wide variety of ways, e.g. physical, emotional, sexual or severe neglect. Abuse of all kinds occurs right across the social spectrum. Child sexual abuse in particular has been shown to occur in families at all levels of socio-economic status and in families with high overt degrees of conformity to codes of sexual respectability. Although the signs of child abuse are well documented many of the symptoms taken in isolation can occur in situations where no child abuse is occurring, will occur or has ever occurred. Many of these signs may also be indications of other medical, social or psychological problems or simply normal child development. Staff therefore need to be careful and thoughtful in ascertaining whether abuse is suspected. The large number of signs and symptoms described in this policy need to be considered in the light of normal child development, e.g.

- temper tantrums are to be expected from a two year old but may be a sign of serious distress in a child of 10;
- an interest in sexual topics and members of the opposite sex is to be expected in a youngster of 15, but in a 7 year old, such behaviour may well be a cause for concern.

Considering that child protection procedures apply to all children below the age of 18, the Designated Senior Person and staff must decide if they have reasonable grounds for suspecting that child abuse is taking place. If they have reasonable grounds then they must act immediately. It is safer to act or to discuss with other agencies than to delay.

Many agencies and support services are able to help identify and assess pupils' needs and to provide support for those pupils. Co-operation between the school, the health services, social services and other agencies is vital for the most effective assessment, intervention and deployment of resources for children to be secured. Indeed, the Children Act 1989 and the Education Act 1993 place statutory duties on these agencies to co-operate. Such agencies and support services include a wide variety of specialist teachers and other professionals. Immediate contact and close liaison between agencies such as the social services, local constabulary and the Local Health Authority is essential in cases of child abuse. All agencies must understand that in child protection cases they are not only required to carry out their own agency functions, but are also making a vital contribution to advising and assisting the local authority to discharge its statutory child protection/child care duties.

Each establishment must have a 'Designated Senior Person' who is responsible for Child Protection (DSP). For clarity the term DSP will be used throughout the rest of this policy when deemed appropriate. It is the intention for the DSP to ensure that all staff (teaching and support staff) are familiar with the contents of this Policy, and that all staff sign a record to confirm that they have received and read the document. The signed record must be updated so as to include all new staff. This Safeguarding Policy and the integral process of notification forms an important part of the induction programme for all staff.

## **SECTION 2                    AIMS AND OBJECTIVES**

### **Aims:**

1. The School aims to provide pupils with relevant information, skills and attitudes to help them to resist abuse and prepare for the responsibilities of adult life including home and family. Together with these skills we hope that pupils will feel confident they can confide in staff on issues of neglect, abuse and deprivation.
2. To allow staff to be familiar and confident with the appropriate child protection procedures and issues. This policy is intended to give clear guidance to all staff, teaching & non-teaching on:
  - i. the signs that may indicate the possibility of abuse;
  - ii. the procedures to follow if a child discloses abuse or a member of staff suspects abuse.
3. To work with parents to build an understanding of the school's responsibility to ensure the welfare of all children and a recognition that this may occasionally require cases to be referred to other investigative agencies as a constructive and helpful measure.
4. To monitor children who have been identified as 'at risk'.
5. To contribute to an inter-agency approach to child protection by developing effective and supportive liaison with other agencies and schools - thereby contributing towards a more effective detection of the incidence of child abuse.
6. To review the school procedures and improve the way child protection issues are managed.

### **Objectives:**

These objectives relate directly to the six aims of this Safeguarding Policy at Sevenoaks Preparatory School and are intended to show how the aims are actually put into practice.

1.
  - i. Skills will be delivered via the curriculum and especially via PSHE and SRE
  - ii. We try to create an environment and ethos in which children feel secure, their viewpoints are valued, they are encouraged to talk and they are listened to. This is guided by our *Golden Rules* in the Pre Prep and the *Way of Life* in the Prep School.
  - iii. We provide suitable support and guidance via our pastoral framework.
  - iv. We include, in the PSHE/SRE programmes information on personal safety.
2.
  - i. We provide child protection training regularly to school staff and in particular to designated teachers to ensure that their skills and expertise are up to date. Training focuses on the recognition of the symptoms of child abuse, the procedures and case studies. All staff will undergo some initial training in child protection during the induction programme for new teachers.

- ii. A complete copy of this policy is made available to the staff in the policy files and on the school's network.
3.
  - i. The policy is available to all parents on the school's website.
  - ii. We inform parents/carers by publishing a statement on the school's website "The School is committed to promoting the health and welfare of all pupils and if staff see signs which suggest that one of the pupils may have been the victim of abuse, staff will (as is required by law) follow the procedures laid down by the Area Child Protection Committee. N.B. Such action in no way infers that any parent/carer or other individual is being accused of wrongdoing. A full version of the School's Child Safeguarding policy is available upon request."
4. We keep records in a secure location, clear records of pupils' progress, maintaining sound policies on confidentiality, providing information to other professionals, submitting reports to case conferences and attending case conferences.
5.
  - i. We employ the child protection procedures and systems in line with requirements of the Children's Safeguard Unit.
  - ii. We employ systems that enable the transition process to include child protection procedures.
6. A policy review is conducted annually.

### **SECTION 3 TYPES OF CHILD ABUSE AND THEIR SYMPTOMS**

Child abuse can be categorised into four distinct types, i.e.

- 1. Physical Abuse**
- 2. Sexual Abuse**
- 3. Emotional Abuse**
- 4. Neglect**
- 5. Grave Concern/at risk** – this is not a distinct category but is dealt with separately. A child can be at risk from any combination of the four categories.

These different types of abuse require different approaches. A child suffering from physical abuse may be in immediate and serious danger. Action should, therefore, be taken immediately. With other forms of abuse there is a need to ensure that adequate information is gathered. There is also a need to make sure that grounds for suspicion have been adequately investigated and recorded. The need to collate information must be balanced against the need for urgent action. If there are reasonable grounds for suspicion then a decision to monitor the situation should only be taken after consultation. A situation that should cause particular concern is that of a child who fails to thrive without any obvious reason. In such a situation a medical investigation will be required to consider the causes. Each of the five categories will now be explored in more detail.

#### **1. Physical Abuse:**

This involves physical injury to a child, including deliberate poisoning, where there is definite knowledge or a reasonable suspicion, that the injury was inflicted or knowingly not prevented. Typical signs of Physical Abuse are:

- **bruises and abrasions** - especially about the face, head, genitals or other parts of the body where they would not be expected to occur given the age of the child. Some types of bruising are particularly characteristic of non-accidental injury especially

when the child's explanation does not match the nature of injury or when it appears frequently.

- **slap marks** – these may be visible on cheeks or buttocks.
- **twin bruises on either side of the mouth or cheeks** - can be caused by pinching or grabbing, sometimes to make a child eat or to stop a child from speaking.
- **bruising on both sides of the ear** – this is often caused by grabbing a child that is attempting to run away. It is very painful to be held by the ear, as well as humiliating and this is a common injury.
- **grip marks on arms or trunk** - found in babies who are handled roughly or held down in a violent way. Gripping bruises on arm or trunk can be associated with shaking a child. Shaking can cause one of the most serious injuries to a child, i.e. a brain haemorrhage as the brain hits the inside of the skull. X-rays and other tests are required to fully diagnose the effects of shaking. Grip marks can also be indicative of sexual abuse.
- **black eyes** - are most commonly caused by an object such as a fist coming into contact with the eye socket. N.B. A heavy bang on the nose however, can cause bruising to spread around the eye but a doctor will be able to tell if this has occurred.
- **damage to the mouth** - e.g. bruised/cut lips or torn skin where the upper lip joins the mouth.
- **bite marks.**
- **fractures** - in children less than 2 years.
- **poisoning and other misuse of drugs** - e.g. overuse of sedatives.
- **burns and/or scalds** - a round red burn on tender, non-protruding parts like the mouth, inside arms and on the genitals will almost certainly have been deliberately inflicted. Any burns that appear to be cigarette burns should be cause for concern. Some types of scalds known as 'dipping scalds' are always cause for concern. An experienced person will notice skin splashes caused when a child accidentally knocks over a hot cup of tea. In contrast a child who has been deliberately 'dipped' in a hot bath will not have splash marks.

## 2. Sexual Abuse:

The involvement of dependent, developmentally immature children and adolescents in sexual activities they do not truly comprehend, to which they are unable to give informed consent or that violate the social taboos of family roles. Typical signs of Sexual Abuse are:

- a **detailed sexual knowledge** inappropriate to the age of the child.
- **behaviour that is excessively affectionate or sexual** towards other children or adults.
- **attempts to inform** by making a disclosure about the sexual abuse often begin by the initial sharing of limited information with an adult. It is also very characteristic of such children that they have an excessive pre-occupation with secrecy and try to bind the adults to secrecy or confidentiality.
- a **fear of medical examinations.**
- a **fear of being alone** – this applies to friends/family/neighbours/baby-sitters, etc.
- a **sudden loss of appetite, compulsive eating, anorexia nervosa or bulimia nervosa.**
- **excessive masturbation** is especially worrying when it takes place in public.
- **promiscuity.**
- **unusually explicit or detailed sex play** in young children.

- **sexual approaches or assaults** - on other children or adults.
- **pregnancy, urinary tract infections (UTI), sexually transmitted disease (STD)** are all cause for immediate concern in young children, or in adolescents if his/her partner cannot be identified.
- **bruising** to the breasts, buttocks, lower abdomen, thighs and genital/rectal areas. Bruises may be confined to grip marks where a child has been held so that sexual abuse can take place.
- **discomfort or pain** particularly in the genital or anal areas.
- the drawing of **pornographic or sexually explicit images**.

### 3. **Emotional Abuse:**

The severe adverse effect on the behaviour and emotional development of a child caused by persistent or severe emotional ill treatment or rejection. All abuse involves some emotional ill treatment - this category should be used where it is the main or sole form of abuse.

### 4. **Neglect:**

The persistent or severe neglect of a child (for example, by exposure to any kind of danger, including cold and starvation) which results in serious impairment of the child's health or development, including non-organic failure to thrive. Persistent stomach-aches, feeling unwell and apparent anorexia can be associated with Physical neglect. However, typical signs of Physical Neglect are:

- **Underweight** – a child may be frequently hungry or pre-occupied with food or in the habit of stealing food or with the intention of procuring food. There is particular cause for concern where a persistently underweight child gains weight when away from home, for example, when in hospital or on a school trip. Some children also lose weight or fail to gain weight during school holidays when school lunches are not available and this is a cause for concern.
- **Inadequately clad** - a distinction needs to be made between situations where children are inadequately clad, dirty or smelly because they come from homes where neatness and cleanliness are unimportant and those where the lack of care is preventing the child from thriving.

Physical Neglect is a difficult category because it involves the making of a judgement about the seriousness of the degree of neglect. Much parenting falls short of the ideal but it may be appropriate to invoke child protection procedures in the case of neglect where the child's development is being adversely affected.

### 5. **Grave Concern/at risk:**

This is not a separate category of child abuse as such but covers a number of situations where a child may be at risk. Children whose situations do not currently fit the other categories but where social and medical assessments indicate that they are at significant risk of abuse. Grave concern may be felt where a child shows symptoms of stress and distress (see below) and any of the following circumstances apply:

- there is a known child abuser in the family;
- another child in the family is known to have been abused;
- the parents are involved with pornographic material to an unusual degree;
- there is an adult in the family with a history of violent behaviour.

### **The Symptoms of Stress and Distress:**

When a child is suffering from any one or more of the previous four 'categories of abuse', or if that child is 'at risk', he/she will nearly always suffer from/display signs of stress and distress.

An abused child is likely to show signs of stress and distress as listed below:

- a lack of concentration and a fall-off in school performance;
- aggressive or hostile behaviour;
- moodiness, depression, irritability, listlessness, fearfulness, tiredness, temper tantrums, short concentration span, acting withdrawn or crying at minor occurrences;
- difficulties in relationships with peers;
- regression to more immature forms of behaviour, e.g. thumb sucking;
- self harming or suicidal behaviour;
- low self esteem;
- wariness, insecurity, running away or truancy - children who persistently run away from home may be escaping from sexual/physical abuse;
- disturbed sleep;
- general personality changes such as unacceptable behaviour or severe attention seeking behaviour;
- a sudden change in school performance.

### **Parental Signs of Child Abuse:**

Particular forms of parental behaviour that could raise or reinforce concerns are:

- implausible explanations of injuries;
- unwillingness to seek appropriate medical treatment for injuries;
- injured child kept away from school until injuries have healed without adequate reason;
- a high level of expressed hostility to the child;
- grossly unrealistic assumptions about child development;
- general dislike of child-like behaviour;
- inappropriate labelling of child's behaviour as bad or naughty;
- leaving children unsupervised when they are too young to be left unattended.

## **SECTION 4                    DESIGNATED STAFF WITH RESPONSIBILITY FOR CHILD PROTECTION**

### **1.        The Designated Senior Person:**

The DSP has a key duty to take lead responsibility for raising awareness within the staff of issues relating to the welfare of children and young people and the promotion of a safe environment for the children learning within the school. They have received training in child protection issues and inter-agency working, as required by the Children's Safeguard Unit and will receive refresher training every two years (expires April 2013). They should keep up to date with developments in child protection issues and should be fully conversant with the *What to do if you are worried a child is being abused document*.

They are also responsible for:

- Overseeing the referral of cases of suspected child abuse or allegations to the relevant investigating agencies
- Providing advice and support to other staff on issues relating to child protection

- Maintaining a proper record of any child protection referral, complaint or concern (even when that does not lead to a referral)
- Ensuring that parents of children within the school are aware of the school's child protection policy
- Liaising with the LEA, the Safeguard Unit and other appropriate agencies
- Ensuring that staff receive basic training in child protection issues and are aware of the school's child protection procedures

If the appropriate DSP is absent for any reason, the other will be the deputise.

If a child is moving to a new school then the Headteacher must pass any on-going concerns to the Designated Senior Person of the new school, and inform all those involved as appropriate.

## **2. School Staff (Teaching):**

Abuse of children in attendance at school is most likely to be first noticed by teaching staff. Teachers bring a number of particular advantages to the recognition of child abuse, i.e.

- they have regular and frequent opportunities to observe children, including opportunities to observe changes in their behaviour.
- they have an ongoing relationship with children, who may confide in them about difficulties that they are experiencing.
- they have knowledge of the wide range of behaviour likely to be seen in children of a particular age.
- they have opportunities to observe the response of a group of children to particular situations. They will, therefore, be sensitive to surprising or unusual responses.

These opportunities to see children in context give a particular value to the observations of teachers. A teacher may become concerned when a child tells the teacher about events that have happened to them or to a friend, brother, sister or when another adult claims to be aware of abuse. Teachers value their relationships with parents/guardians and in many situations will share their initial concerns about a child with the parents/guardians. However, in many cases the parents/guardians may be the abusers and so teachers should be prepared to share their concerns with other professionals at an early stage without necessarily informing parents of the action they propose to take. Teachers have a professional duty to:

- observe and be alert to signs of abuse;
- take immediate action in the child's best interest by reporting any suspicion or evidence of abuse or non-accidental injury;
- know the role of the DSP and the school's child protection procedures;
- enquire about the progress of individual cases in which they are/have been involved.

All teaching staff must understand the importance of reporting suspicious circumstances and be able to report signs of abuse to the DSP. Beyond the initial reporting of suspected child abuse, staff have a clearly restricted role as further judgements and action decisions are the responsibility of other agencies with statutory powers to help the child.

## **4. School Staff (Non-Teaching):**

As with teaching staff, non-teaching staff have a responsibility to observe and report any suspicion or evidence of abuse or non-accidental injury. All non-teaching staff must

understand the importance of reporting suspicious circumstances and be able to report signs of abuse to the DSP. Beyond the initial reporting of suspected child abuse, non-teaching staff have a clearly restricted role as further judgements and action decisions are the responsibility of other agencies with statutory powers to help the child.

## **5. Designated Governor**

The designated member of the governing body with responsibility for child protection issues is Sally-Anne Huang.

The Designated Governor is responsible for liaising with the Headmaster and DSP over matters regarding child protection, including:

- Ensuring the school has procedures and policies which are consistent with the West Kent Safeguarding Unit procedures.
- Ensuring the governing body considers the school policy on child protection each year.
- Ensuring that each year the governing body is informed of how the school and its staff have complied with the policy, including but not limited to a report on the training that the staff have undertaken.

The Designated Governor is responsible for overseeing the liaison between agencies such as the police, social services, etc in connection with any allegations against the DSP or Headmaster. This will not involve undertaking any form of investigation, but will ensure good communication between parties and provide information to assist enquiries.

## **SECTION 5 RECORDS**

Case conference records are confidential and the school must ensure the safekeeping of such records and of other documents for individual cases and the eventual secure destruction of such records. Information given at case conferences must not be disclosed without the prior permission of the person who originally supplied the information. The Education (Schools Records) Regulations 1989 exempt any information relating to actual, alleged or suspected child abuse from the requirements of disclosure. When a pupil transfers school all relevant concerns and/or records must be forwarded.

All staff are required to record, accurately, information that may be required in respect of child protection. If a child discloses, record the precise information as soon as possible, with date, event, action taken, and sign and date the record. It is very important for staff to distinguish between fact, observation, allegation and opinion.

All staff records must be passed to the Headmaster for storage and action. Records should not be kept in the child's normal record file but in a separate secure place. In cases of alleged child abuse which come to court, child protection records may be required by the court.

## **SECTION 6 REPORTING PROCEDURE**

A member of staff only requires reasonable cause for concern regarding potential child abuse in order to act. Arriving at the point where information and its interpretation give reasonable cause for concern depends upon the source of information. If the information comes from the child then the teacher should act immediately by taking them to find the DSP. N.B. One

sentence from the child indicating child abuse or non-accidental injury provides you with 'reasonable grounds' and is sufficient for you to act. This may also apply if clear information comes from a sibling or other adult, etc. However, considering that many of the signs of child abuse are also commonly associated with other medical, social or psychological problems or simply normal child development a teacher may naturally discuss some initial concerns about a child's mental or physical well-being with other staff, parents, etc. However, in many cases the parents/guardians may be the abusers and explanations or comments made by the parents may be sufficient to give the teacher reasonable grounds to suspect child abuse or non-accidental injury. Once there are reasonable grounds to suspect child abuse or non-accidental injury, teachers must not contact the parents any further. When there are reasonable grounds to suspect child abuse or non-accidental injury then the following procedure must be implemented immediately:

1. Make a written report to the DSP immediately. When a child has reported what amounts to suspected child abuse or non-accidental injury, then they should be taken to the DSP even before the written report is made.

**Staff must:**

- Listen and stay calm.
- Remember that the priority is to protect the child.
- Treat the matter seriously.
- Receive the child's story if appropriate, listen but do not judge.
- React to what the child tells you with belief and tell the child that they have done the right thing in telling you.
- Indicate to the child what action you will take and make it clear that you will have to inform others (no secrets). Only inform those with a need to know.
- Keep an accurate record of what you have become aware of and what you have done.
- Limit any questioning bearing in mind the '**must not**' points below.

**Staff must not:**

- Contact the parents again – this is the job of social services.
- Interrogate the child if that child has disclosed information or ask leading questions.
- Speak to anyone about whom allegations are made (including colleagues).
- Promise to keep secrets/confidentiality.
- Ask a child outright if they or others have suffered abuse.
- Attempt a detailed examination or remove a child's clothes to look further at an injury. Under no circumstances should photographs be taken of a child's injury. The child should only be examined by an appropriate doctor.

The teacher may now withdraw from the immediate process but should remain vigilant.

2. The DSP will now seek appropriate guidance from the West Kent Safeguard Unit.
3. If it is necessary for the child to be taken to hospital, then hand the child over to the direct care of medical staff informing them that non-accidental injury is suspected. A

member of staff must stay with the child (whether the child has been taken to hospital or not) until a social worker arrives.

4. A social worker will arrive either at the school or the hospital as is appropriate. The DSPr, in collaboration with staff involved in the case, must complete a report form, detailing signs observed, action taken and outcomes of contact with other agencies. If a parent arrives to collect the child before the social worker has arrived then the member of staff must remember that he/she has no right to prevent contact between the parents/guardians and the child or to prevent the removal of the child by the parents/guardians. However, if there are clear signs of physical risk or threat, the police should be immediately contacted and fully informed.
5. The social worker(s) will decide on what action to take and it is the social services who must contact the parents/guardians. The Headmaster should inform the member of staff who first reported the concern as to what action has been taken.

YOUR DESIGNATED TEACHERS ARE: Mr. Nicholas Pears, Headmaster of the Junior School Teacher and Miss Davinia Ablett in the Senior School [01732 762336]

YOUR AREA CHILDREN'S OFFICER IS: Ms Helen Windiate [01732 525035]

YOUR DESIGNATED DOCTOR IS: Dr. Neil Arnott [01732 459255]

YOUR DESIGNATED GOVERNOR IS: Mrs Sally-Anne Huang [01892 822006]

Once you have passed the child into the system withdraw from the process. It is not appropriate to talk to the child or to offer further support. However, when a pupil has trusted you enough to disclose, they may feel the desire to return to talk (remember that investigations can sometimes take months). In such a situation tell them that you cannot comment or advise as to do so may affect their security and safety both in the short and long term - however you can listen! Any 'discussion' could be misused in court by defence lawyers as evidence against the teacher and the child.

#### **Allegations against school staff:**

Teachers must protect themselves and staff should bear in mind that even perfectly innocent actions can sometimes be misconstrued. It is important not to touch pupils however casually, in ways or on parts of the body that might be considered indecent. When pupils make such an allegation against a member of staff, they should be immediately referred to the DSP who will contact the Area Children's Officer (Child Protection) within twenty-four hours to discuss and agree further action to be taken in respect of the child and the member of staff.

In the case of suspected or identified abuse of a child by the DSP or Headteacher, the designated governor Sally-Anne Huang should be immediately informed.

## **SECTION 7 ADVICE, ANSWERING QUESTIONS & CONFIDENTIALITY**

Staff often become initially aware of the possibility of abuse occurring when they are asked for advice/questioned by children in a confidential manner. Having considered the Children Act 1989, the Education Act 1993 and Sex Education in Schools, Circular 51 94, teacher's professional responsibilities, the current legal situation and a desire to protect staff, the Governing body have issued the following statement/directive. N.B. Failure of staff to adhere to this statement may constitute grounds for disciplinary action.

### **Offering Advice:**

The governors and staff believe that the school's function is to provide a general education about sexual, drug and other matters and not to offer individual advice, information or counselling on aspects of sexual behaviour, contraception or social behaviour. However staff may identify sources of professional information and advice when appropriate. If the offering of outside expert advice is not taken up, then a teacher may only give such advice after receiving written permission from the Headmaster and the parents/guardians - clearly this would not be done if the pupil did not wish it. Advice does not legally require consent but the following procedure protects the teacher and the pupil, and acknowledges that teachers may not be qualified to give the required advice.

If a pupil asks a teacher for advice on sexual matters, the teacher must not trespass on the parents' rights and responsibilities. Therefore, the teacher should encourage the pupil to seek advice from his or her parents and, if appropriate, from the relevant health service professional.

### **Teachers cannot:**

- give personal advice or counselling on sexual matters (including contraception and abortion) to a pupil (either individually or within a group) if a parent has withdrawn that pupil from sex education;
- give personal contraceptive advice to pupils under 16 (for whom sexual intercourse is illegal) without parental consent. (Legally a teacher can give a child under 16 contraceptive advice if the teacher believes that doing so is in the child's best interests. However, in certain circumstances the teacher could be liable to criminal charges and therefore the governors' instructions are not to give such advice and to refer the matter to the DSP/Headmaster).

### **Teachers can:**

- provide pupils with education and information about where and from whom they can receive confidential sexual advice and treatment, e.g. school nurse or their GP

### **Explicit Questions:**

It is unlikely to be appropriate to deal with a pupil's explicit questions by dealing with it in front of the whole class, e.g. questions on oral and anal sex. In practice this means that teachers have to say 'I'm sorry but the School Policy and legislation does not allow me to answer that question'. The teacher may deem it appropriate to discuss the child's concerns with the parents - a decision may then be taken on how best to deal with it. In all cases of explicit questions being asked by a child to a member of staff, abuse should only be suspected when the questions are totally inappropriate to the age of the child.

### **Confidentiality:**

Having considered all available advice and guidance, the governors and DSP state that in circumstances where a pupil is considered at some risk of any type of abuse (e.g. sexual or physical) or in breach of the law, the teacher must refer this immediately in writing to the DSP. The DSP will decide whether to inform the parents and/or appropriate authorities and may arrange for counselling as appropriate. Although there is no legal duty on a teacher, DSP or a Headmaster, to inform parents of matters which a child has confided to them:

- teachers must not promise confidentiality even though they cannot be made to break it once given;

## Safeguarding Children Policy: Updated September 2011

- pupils must be made aware that any incident may be conveyed to the DSP and possibly to parents;
- teachers must use their professional judgement and take into account the School's Safeguarding Policy to decide whether confidence can be maintained having heard the information;
- teachers must indicate clearly to pupils when the content of a conversation can no longer be kept confidential - the pupil can then decide whether to proceed or not. When the content of the conversation indicates the possibility of child abuse, the teacher must pass that information onto the DSP in accordance with the school policy on Safeguarding/Child Protection.

### **SECTION 8 EVALUATION OF CHILD PROTECTION PROCEDURES**

Effective monitoring/evaluation of child protection issues is dependent upon the maintenance of accurate and up to date records. All school personnel and governors will have a copy of this policy and will have the opportunity to consider and discuss its contents prior to the annual review and the approval of the governing body being formally sought.

### **SECTION 9 COMPLIANCE**

- The policy is annually updated in order that we comply with new legislation and good practice.

Compiled by: Philip Oldroyd Headmaster	Revision Number 5
Signature	
Approved by: Sally-Anne Huang Designated Governor	Updated 1/10/11
Signature	
Date for next revision	1/10/12