

# Safeguarding Training

"Washwood Heath Multi Academy Trust is committed to safeguarding and promoting the welfare of all its pupils/students"

Update January 2017

Miss Lynne Weir



All staff and visitors have an important role to play in safeguarding. You have all signed stating you have read, understood and will follow the WHMAT Safeguarding Policy, WHMAT Staff Code of Conduct as well as the DofE Keeping Children Safe in Education (Sept 2016).....

All staff and visitors will:

- Understand their role in relation to safeguarding;

- Be involved, where appropriate, in the implementation of individual education programmes, Early Help Assessments and support plans, child in need plans and interagency child protection plans;

- Be alert to signs and indicators of possible abuse;

- Record concerns and give the record to the Designated Safeguarding Lead (DSL) and deputy DSL, in each Academy;

- Deal with a disclosure of abuse from a child, in line with the guidance.

# WHA Safeguarding Team



Email all the team with any  
student concerns

Lynne Weir  
Steve Hobson  
Tressa Williamson  
Jamilla Akhtar  
Heather McLachlan

# Staff Concerns



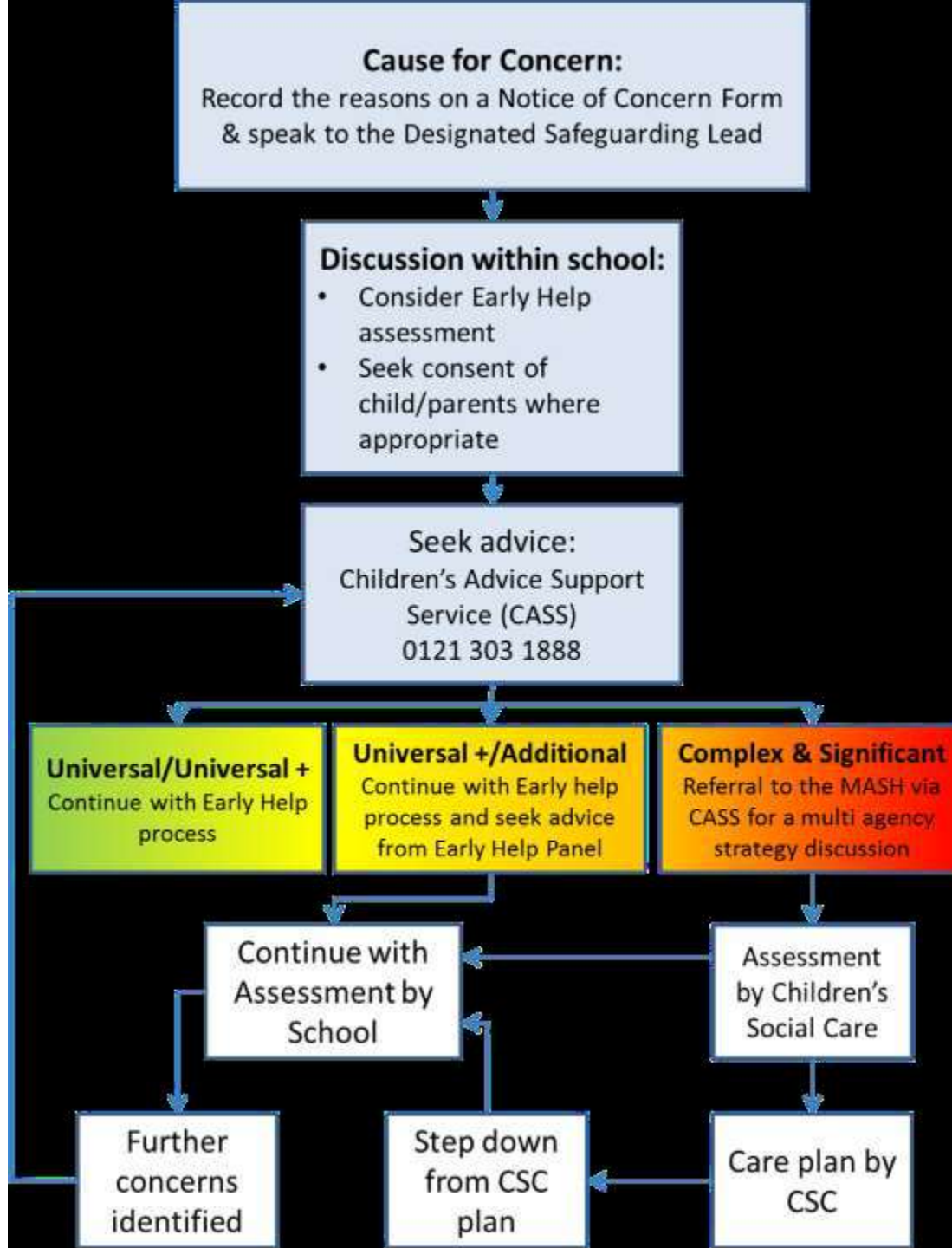
Email only  
Heather McLachlan  
with any concerns about staff

Concerns with the Head of Academy, please refer these to Cecil Knight, Chair of LGB and Bev Mabey, CEO of WHMAT

Where staff feel unable to raise an issue with their employer or feels that their genuine concerns are not being addressed, advice and guidance can be found on the

NSPCC whistleblowing helpline 0800 028 0285  
or [help@nspcc.org.uk](mailto:help@nspcc.org.uk)





# Early Help

Early Help – School – conversation (with student and/or with family), Doctor or School Nurse referral, Big Community. FCAF (family Common Assessment Framework). ‘Early Help Assessment’ form as well as ‘Signs of Safety and Well Being’



## **Key Questions and Considerations**

This document outlines the four key Signs of Safety and Wellbeing Assessment questions and also outlines things you should consider when you are writing:

- Safety and strength statements
- Danger and harm statements
- Safety and wellbeing goals

## **Safety and Wellbeing Scale**

Example strength and scaling questions that help you to talk about what you see on a scale of 10 to 0, where 10, is wellbeing is at its highest and 0, when wellbeing and safety is a concern.

## **Early Help Conversation Tool**

A tool for you to fill in, that helps you start an early help conversation.

Early Help Conversation Tool guidance

## **The Three columns**

A tool for you to use and fill in, as you start to plan, write and analyse:

- 1.what is working well;
- 2.what are we worried about;
- 3.what needs to happen

## **The Three houses**

A visual tool for working with children, helping children to think about what is in their:

- 1.House of Good Things
- 2.House of Worries
- 3.House of Dreams

## **EARS Process**

A tool to help turn questions into conversations, covering strengths, worries and goals



This only works though if the signs are pointed out to us..... The people who are most likely to see a change in mood / demeanour / behaviour is you the form tutor and teacher and mentors..... So what should we be looking out for???

## Neglect

- Constant hunger / stealing, scavenging and/or hoarding food / **Frequent tiredness or listlessness** / Frequently **dirty or unkempt** / **Often poorly or inappropriately clad for the weather** / Poor school attendance or often late for school / Poor concentration / Affection or attention seeking behaviour / Illnesses or injuries that are left untreated / Failure to achieve developmental milestones, for example growth, weight / Failure to develop intellectually or socially / Responsibility for activity that is not age appropriate such as cooking, ironing, caring for siblings / The child is regularly not collected or received from school / The child is left at home alone or with inappropriate

## Physical

- Multiple bruises in clusters, or of uniform shape / Bruises that carry an imprint, such as a hand or a belt / Bite marks / Round burn marks / Multiple burn marks and burns on unusual areas of the body such as the back, shoulders or buttocks / An injury that is not consistent with the account given / Changing or different accounts of how an injury occurred / Bald patches / Symptoms of drug or alcohol intoxication or poisoning / **Unaccountable covering of limbs, even in hot weather** / Fear of going home or parents being contacted / Fear of medical help / Fear of changing for PE / Inexplicable fear of adults or over-compliance / Violence or aggression towards others including bullying/ Isolation from peers.

## Sexual Abuse

- Sexually explicit play or behaviour or **age-inappropriate knowledge** / Anal or vaginal discharge, soreness or scratching / Reluctance to go home / Inability to concentrate, tiredness / Refusal to communicate / Thrush, persistent complaints of stomach disorders or pains / Eating disorders, for example anorexia nervosa and bulimia / Attention seeking behaviour, self-mutilation, substance abuse / Aggressive behaviour including sexual harassment or molestation / Unusual compliance / Regressive behaviour, enuresis, soiling / Frequent or open masturbation, touching others inappropriately / **Depression, withdrawal, isolation from peer group** / Reluctance to undress for PE or swimming / Bruises or scratches in the genital area.

## Sexual Exploitation

- Having a relationship of concern with a controlling adult or young person (this may involve physical and/or emotional abuse and/or gang activity) / Entering and/or leaving vehicles driven by unknown adults / **Possessing unexplained amounts of money, expensive clothes or other items** / Frequenting areas known for risky activities / Being groomed or abused via the Internet and mobile technology / Having unexplained contact with hotels, taxi companies or fast food outlets.

## Emotional Abuse

- The child consistently describes him/herself in very negative ways –as stupid, naughty, hopeless, ugly / **Over-reaction to mistakes** / Delayed physical, mental or emotional development / Sudden speech or sensory disorders / Inappropriate emotional responses, fantasies / Neurotic behaviour: rocking, banging head, regression, tics and twitches / Self-harming, drug or solvent abuse / **Fear of parents being contacted** / Running away / Compulsive stealing / Appetite disorders - anorexia nervosa, bulimia / Soiling, smearing faeces, enuresis.
- N.B.: Some situations where children stop communication suddenly (known as “traumatic mutism”) can indicate maltreatment.

## Responses from Parents

- Delay in seeking treatment that is obviously needed / Unawareness or denial of any injury, pain or loss of function (for example, a fractured limb) / Incompatible explanations offered, several different explanations or the child is said to have acted in a way that is inappropriate to her/his age and development / Reluctance to give information or failure to mention other known relevant injuries / Frequent presentation of minor injuries / A persistently negative attitude towards the child / Unrealistic expectations or constant complaints about the child / Alcohol misuse or other drug/substance misuse / Parents request removal of the child from home / Violence between adults in the household / Evidence of coercion and control.

# What if it is bigger than the school??

Appropriate action maybe though outside of the school - so we....

Use Right Services, Right Time framework to assess

Seek advice from the Children's Advice and Support Service (CASS) formerly known as MASH Front door so that a strategic overview can be maintained and any themes or common factors can be recognised.

Notify Children's Social Care via a referral to the Multi-Agency Safeguarding Hub (MASH).



# What happens then.....

**LAC – Looked After Child** – these are highlighted on your registers and you need to be aware of them like you would with PP/SEN/EAL. These can be fluid and sometimes change – so please monitor regularly

**CP – Child Protection** – you will not be aware of who these students are as the nature is confidential

**CIN – Child in Need** – you will not be aware of who these students are as the nature is confidential

# WHMAT Safeguarding Policy

## Section 14 Photographs

- WHMAT operates a zero tolerance policy of any member of staff employed within the WHMAT photographing any pupil/ student on their own personal devices. Any such photographs are to be taken on official WHMAT cameras or devices.



Passwords

Visitors

Trips



# Never



Never - promise a student you will keep a secret

Never - take photographs

Never - ask the student to remove clothing e.g. to see bruises

Never - get the child to write a statement

Never - go home without passing the concern onto the DSLs

Never - be alone with a child

Never - share personal information

Never – use your school laptop for anything other than for your work

Never - allow students to use or access your laptop

Never – ask to see images on a child's phone

# Do.....



Stay calm and do not communicate shock, anger or embarrassment

Reassure the child. Tell them you are pleased that they are speaking to you.

Assure them that you will try to help but let the child know that you will have to tell other people in order to do this. State who this will be and why.

Tell the child that it is not their fault.

Check that you have understood correctly what the child is trying to tell you.

Praise the child for telling you. Communicate that they have a right to be safe and protected.

Do not tell the child that what they have experienced is dirty, naughty or bad.

It is inappropriate to make any comments about the alleged offender.

Be aware that the child may retract what they have told you. It is essential to record all you have heard.

At the end of the conversation, tell the child again who you are going to tell and why that person or those people need to know.

As soon as you can afterwards, make a detailed record of the conversation using the child's own language. Include any questions you may have asked. Do not add any opinions or interpretations.

# Almost there.....

Never write your statement in the main body of an email - **always** send it as an attachment in an email marked **CP CONCERN** to **LWE/SHO/TWI/JAK/HMC**

If something goes wrong - tell someone

If your not sure – ask someone



What you need to know.....

DSL – Designated Safeguarding Lead

WHMAT Safeguarding Policy

WHMAT Staff Code of Conduct

KCSIE Sept 2016

Early Help

Right Services, Right Time

CASS – Child Advice and Support Service

MASH – Multi Agency Safeguarding Hub

LAC – Looked After Child

All staff - collect a leaflet and keep in a safe place

HoF's / HoD's - please collect a laminated poster and display in faculty staff areas.  
Speak to your new staff.....

Any member of staff with an office - please collect a laminated poster and display