



'Valuing Learning, Learning to Value'

Safeguarding and Child Protection Policy and Procedure.

Status of the Policy

Statutory

Introduction

This policy has been developed in accordance with the principles established by the Children Acts 1989 and 2004; the Education Act 2002, and in line with government publications: 'Working Together to Safeguard Children' 2013, Revised Safeguarding Statutory Guidance 2 'Framework for the Assessment of Children in Need and their Families' 2000, 'What to do if You are Worried a Child is Being Abused' 2003. The guidance reflects, 'Keeping Children Safe in Education' 2016.

The Governing body takes seriously its responsibility under section 175 of the Education Act 2002 and regulations under section 157 to safeguard and promote the welfare of children; and to work together with other agencies to ensure adequate arrangements within our school to identify, assess, and support those children who are suffering harm.

This safeguarding policy applies to all governors, employees (including supply and peripatetic staff), volunteers and people using the school. The child's welfare is of paramount importance and all children have the right to be protected from abuse and neglect.

All staff are advised to maintain an attitude of 'it could happen here' where safeguarding is concerned.

Purpose

- Afford protection for our children
- Enable staff and volunteers to safeguard and promote the welfare of children
- Promote a culture which makes the school a safe place to learn

Aims

- To raise the awareness of ALL school staff of the importance of child protection and safeguarding pupils and of their responsibilities for identifying and reporting actual and suspected abuse, neglect or concerns about a child's welfare.
- To ensure pupils and parents are aware that the school takes the safeguarding agenda seriously and will follow the appropriate procedures.
- To promote effective liaison with other agencies in order to work together for the protection of all pupils.
- To support pupils' development in ways which will foster security, confidence and independence
- To integrate a safeguarding curriculum within the existing curriculum allowing for continuity and progress through all key stages

- To take account of and inform policies in related areas such as behaviour, bullying and E-Safety.

There are three main elements of the school's safeguarding policy:

- 1) **PREVENTION** (positive and safe school environment, careful and vigilant teaching, accessible pastoral care, support pupils, good adult role models)
- 2) **PROTECTION** (agreed procedures are followed, staff are trained and supported to respond appropriately and sensitively to safeguarding concerns)
- 3) **SUPPORT** (to pupils, who may have been at risk of significant harm and the way staff respond to their concerns and any work that may be required)

Schools do not work in isolation. All professionals work within the same child protection/safeguarding procedures.

Designated Staff

Children are reliant on adults for protection and have the right to achieve their full potential. The designated safeguarding lead (DSL) to deal with issues relating to safeguarding children at our school is **Mrs K. Burke (Head Teacher) supported by Tracy Wood (Deputy Head), Rachel Creber (Teacher and SENDCo) and Mary Foley (School Administrator)**. Their role is to take lead responsibility for;

- Safeguarding and child protection (Head leads on allegations against staff)
- Keep secure Child Protection, Child in Need and other plans, write records and reports
- Act as a first point of reference for all safeguarding children concerns
- Ensure that all relevant policies and procedures comply with regulations and are shared with all staff
- Liaise with other professional agencies as appropriate and necessary
- Cascade information regarding safeguarding children to all other members of staff in the School
- Ensure a culture of listening to children and taking account of their wishes and feelings
- Be available during school hours for staff in the school to discuss any safeguarding concerns
- Undertake a safeguarding evaluation/audit, report to the governing body and Safeguarding board

The designated Safeguarding Lead (DSL) is a senior member of staff. Training for the DSL is always undertaken every two years.

The designated teacher will then follow the Gloucestershire LA Child Protection Procedures. These can be found in the Safeguarding Children Handbook, as an annex to this policy, from the Headteacher and Designated Child Protection Officers or on line at www.gscb.org.uk/handbook

The DSLs who are involved in recruitment and at least one member of the governing body will also complete safer recruitment training to be renewed every 5 years.

The Governor responsible for Safeguarding/Child Protection is Mr Peter Taylor. (Chair of Governors) The Governing Body will ensure that all members of staff undertake appropriate child

protection training (every 3 years). All staff at the school must be able to recognise abuse and be aware of the procedures to follow in order to safeguard and protect children.

We will follow the procedures set out by the Gloucestershire Safeguarding Children Board and take account of guidance issued by the Department for Education and Skills to:

- Ensure we have a designated senior person for child protection who has received appropriate training and support for this role.
- Ensure we have a nominated governor responsible for child protection.
- Ensure every member of staff (including temporary and supply staff and volunteers) and governing body knows the name of the designated senior person responsible for child protection and their role.
- Ensure all staff and volunteers understand their responsibilities in being alert to the signs of abuse and responsibility for referring any concerns to the designated senior person responsible for child protection.
- Ensure that parents have an understanding of the responsibility placed on the school and staff for child protection by setting out its obligations in the school prospectus.
- Notify the relevant social worker if there is an unexplained absence of more than two days of a pupil who has a Child Protection Plan (previously known as being on the child protection register.)
- Notify the relevant agency if there is an unexplained absence of more than 5 days following a holiday period.
- Develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters including attendance at child protection conferences and core groups.
- Keep written records (red forms) of concerns about children, even where there is no need to refer the matter immediately. (These are kept locked in the head teacher's office.)
- Ensure all records are kept securely; separate from the main pupil file, and in locked locations. (These are cross referenced by way of RED dot on main file)
- Develop and then follow procedures where an allegation is made against a member of staff or volunteer.
- Ensure safe recruitment practices are always followed.

We recognise that children who are abused or witness violence may find it difficult to develop a sense of self worth. They may feel helplessness, humiliation and some sense of blame. The school may be the only stable, secure and predictable element in the lives of children at risk. When at school their behaviour may be challenging and defiant or they may be withdrawn. The school will endeavour to support the pupil through:

- The content of the curriculum.
- The school ethos which promotes a positive, supportive and secure environment and gives pupils a sense of being valued.
- The school behaviour policy which is aimed at supporting vulnerable pupils in the school. The school will ensure that the pupil knows that some behaviour is

unacceptable but they are valued and not to be blamed for any abuse which has occurred.

- Liaison with other agencies that support the pupil such as social services, Child and Adult Mental Health Service, education welfare service and educational psychology service.
- Ensuring that, where a pupil on the child protection register leaves, their information is transferred to the new school immediately and that the child's social worker is informed.

Supporting Children - Offer of Early Help

Providing early help is more effective in promoting the welfare of children than reacting later. It means providing support as soon as a problem emerges.

We recognise that a child who is abused or witnesses violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.

We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.

We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.

Our school will support all children by:

- Providing Safeguarding training at all levels.
- Offering preventative signposting, support with meetings and access to a community social worker.
- Working with the local Multi-Agency Safeguarding Hub (MASH).
- Holding Team around the Child Meetings.
- Leading and supporting families on a CAF / EHCP
- Listening to the Voice of the Child.
- Using Gloucestershire's Healthy Living and Learning on-line survey. Results are monitored and interventions are put in place.
- Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.
- Promoting a caring, safe and positive environment within the school.
- Liaising and working together with all other support services and those agencies involved in the safeguarding of children.
- Notifying Social Care as soon as there is a significant concern.
- Providing continued support to a child who leaves school about whom there have been concerns. Ensuring that appropriate information is copied under confidential cover to the child's new setting and also that the school medical records are forwarded as a matter of priority.

All staff are encouraged to report any concerns that they have and not see these as insignificant. On occasions, a referral is justified by a single incident such as an injury or disclosure of abuse. More often however, concerns accumulate over a period of time and are evidenced by building up a picture of harm over time; this is particularly true in cases of emotional abuse and neglect. In

these circumstances, it is crucial that staff record and pass on concerns in accordance with this policy to allow the DSL to build up a picture and access support for the child at the earliest opportunity. A reliance on memory without accurate and contemporaneous records of concern could lead to a failure to protect. It is not the responsibility of school to investigate welfare concerns or determine the truth of any disclosure or allegation. All staff, however, have a duty to recognise concerns and pass the information on in accordance with the procedures outlined in this policy.

Categories of concern about a child's welfare and procedures for referral;

Neglect: The persistent or severe neglect of a child which results in significant impairment of the child's health or development. e.g.

- Failure to provide adequate food, clothing or shelter (including abandonment or exclusion from home)
- Failure to protect from physical or emotional harm.
- Failure to meet child's basic emotional needs.
- Failure to ensure adequate supervision.
- Failure to ensure access to appropriate medical care.

Physical Abuse: Deliberate or intended injury to a child. e.g.

- Hitting shaking, throwing, burning, scalding, drowning, suffocating, or poisoning.
- Deliberate inducement of an illness.
- It is physical abuse if a child is assaulted and it leaves a mark, or causes mental cruelty.

Sexual Abuse: Actual or likely sexual exploitation. e.g.

- Use of force or enticement to take part in sexual activity penetrative, or non - penetrative.
- Involvement in non contact activities such as looking at or making abusive images.
- Encouraging children to watch sexual activities.
- Encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet)
- Any sexual activity with a child under the age of 16. (with or without agreement)
- Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse as can other children.

Emotional Abuse: Persistent or severe emotional ill treatment or rejection which adversely affects the child's emotional and behavioural development. e.g.

- Conveying to a child that they are worthless, unloved or inadequate.
- Overprotection, limiting exploration and learning, preventing normal social interaction or imposing inappropriate expectations.
- Causing a child to feel frightened or in danger by the witnessing of violence towards another person whether domestic or not.

Recognition of Possible Abuse;

It is extremely difficult to determine if abuse has occurred. Teachers should look carefully at the behaviour of their children and be alert for significant changes. Teachers should be aware that children may exhibit any of the following without abuse having occurred:

- Disclosure.
- Non accidental injury, bruising or marks.
- Explanation inconsistent with injury.
- Several different explanations for an injury.
- Reluctance to give information about an injury
- A sudden change in behaviour - aggression, extroversion, depression, withdrawn.
- Attention seeking
- Hyperactivity
- Poor attention
- Appear frightened of parents or family members
- Abnormal attachment between parent and child
- Indiscriminate attachment
- Hyper alertness.
- Reduced response.
- Frozen watchfulness.
- Nightmares.
- Anxiety/irritability.
- Abdominal pain/headaches.
- Poor self esteem.
- Poor peer relationships
- Act in an inappropriate way for age
- Over sexualised play/talk or drawings.
- Excessive or inappropriate masturbation
- Self harm/eating disorder
- Frequent visits to the toilet (urinary infection).
- Reluctance to change for P.E.
- Failure to thrive
- Poor hygiene
- Recurrent/untreated infections of skin or head lice
- Untreated health/dental issues
- Frequent absence from school or repeated lateness
- Delay in meeting normal developmental milestones

Disclosure

Responding to Disclosures - guidance for staff

If a child wishes to confide in you the following guidelines should be adhered to:

- **Be honest.**
 - Do not make promises that you cannot keep.
 - Explain that you are likely to have to tell other people in order to stop what is happening.

- **Create a safe environment.**
 - Stay calm.
 - Reassure the child and stress that he/she is not to blame.
 - Tell the child that you know how difficult it must have been to confide in you.
 - Listen to the child and tell them that you believe them and are taking what is being said seriously.
- **Record on the appropriate form exactly what the child has said to you and include;**
 - Child's name, address, date of birth
 - Date and time of any incident
 - What the child said and what you said
 - Your observations e.g. child's behaviour and emotional state
 - Any action you took as a result of your concerns - specific information about who you spoke to, names, phone numbers and resulting actions
 - Sign and date the record and provide a copy for Social Care and your records.
- **Be clear about what the child says and what you say.**
 - Do not interview the child and keep questions to a minimum.
 - Encourage the child to use his/her own words and do not try to lead them into giving particular answers.
- **Maintain confidentiality**
 - Only tell those people that it is necessary to inform.
- **Do not take sole responsibility**
 - Immediately consult your Designated Safeguarding Lead so that any appropriate action can be taken to protect the pupil if necessary.
 - The Designated Safeguarding Lead should refer these concerns to Social Care before the child goes home if still in school. A decision will be made by Social Care whether to convene a strategy meeting; undertake a social care or joint investigation or provide alternative services or advice.
 - Although referrals to Social Care would normally be made by the DSL, any other individual with concerns can make a referral.

Social Care will advise about if and when to share information with parents if there are concerns that this may be putting the child more at risk.

Partnership with parents:

Our school shares a purpose with parents to educate, keep children safe from harm and have their children's welfare promoted

We are committed to working with parents positively, openly and honestly. We ensure that all parents are treated with respect, dignity and courtesy. We respect parents' rights to privacy and confidentiality and will not share sensitive information until we have permission or it is necessary to do so to protect a child.

Yorkley School will share with parents any concerns we may have about their child unless to do so may place a child at risk of harm.

We encourage parents to disclose any concerns they may have with the school. We make parents aware of our Safeguarding and Child Protection Policies and parents are aware that these are on the school website.

Following up referrals

- The agency to which the referral was made e.g. Social Care, should inform the referrer of their action. Where this does not happen promptly the referrer should re contact the agency to which it made the referral to be assured that action is being taken or that alternative support is being recommended
- If after a referral the child's situation does not appear to be improving, the DSL should press for re-consideration
- It is essential that the school remains actively involved in support and plans even where another agency is taking the lead whether at early help, child in need or child protection level
- Where there is a difference of opinion with another agency and this cannot be resolved the LSCB Escalation policy should be used.

http://www.gscb.org.uk/media/1224/escalation_policy_may_2014-60436.pdf

Whistle-blowing

The school has a whistle-blowing policy, which is monitored regularly by the school governors. A copy of this policy is available in school. If members of staff ever have any concerns about people working, paid or unpaid, they have a professional duty to inform the management accordingly. This can be done in writing or verbally but staff should be prepared to discuss issues in the confidence that any such matter will be dealt with sensitively and with the necessary degree of confidentiality. Whistle-blowing re the Headteacher should be made to the Chair of the Governing Body.

Staff Behaviour (Code of Conduct)

- Treating all children with respect
- Setting a good example by conducting ourselves appropriately
- Involving children in decision-making which affects them
- Encouraging positive and safe behaviour among children
- Being a good listener
- Being alert to changes in a child's behaviour
- Recognising that challenging behaviour may be an indicator of abuse
- Reading and understanding all of the school's safeguarding and guidance documents on wider safeguarding issues, for example bullying, physical contact, e-safety and information sharing

- Asking the child's permission before doing anything for them which is of a physical nature, such as assisting with dressing, physical support during PE, music or administering first aid
- Maintaining appropriate standards of conversation and interaction with and between children and avoiding the use of sexualised or derogatory language
- Maintaining professional standards and boundaries at all times on and off the school site
- Being aware that the personal and family circumstance and lifestyles of some children lead to an increased risk of neglect and or abuse
- Staff, volunteers , governors/trustees not being involved in any activity which is illegal and may pose a risk to children e.g. access to child pornography, extremist or radicalisation activities
- Staff and volunteers are reminded to declare any offences or involvement with the police relevant to their employment
- Where safeguarding or criminal issues occur in an employee's private life the impact of this on their suitability to work with children will be assessed with the support of the LADO/HR as appropriate.

Domestic Abuse:

This school receives information from the police to alert the Designated Safeguarding Lead in the school when there has been an incident of domestic abuse in a household where a pupil lives. We are not informed of the detail of the incident, only that one has occurred. This allows us to monitor and support the pupil. If we have additional concerns we will discuss the need for further safeguarding actions with Social Care. This information would only be shared with other staff on a restricted need to know basis i.e. those who are immediately responsible for the pupil's welfare such as the class teacher. Where a Multi-agency risk assessment conference (MARAC) occurs the school may be asked for information and appropriate school related information may be shared with the school after the meeting.

Emergency Procedures

If the designated Person is not available, establish the facts and details as above and contact;

Social Care referrals 01452 426565

The Gloucestershire Central Referral Unit 01452 753458

Gloucestershire Police

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When you raise concerns you will be redirected to the appropriate social work team, determined by the area the child lives. You will be able to speak directly with a social work practitioner;

You will be asked: -

- the nature of your concern;
- The child name, address, date of birth.
- any information about previous welfare concerns, current and historical information that you or your agency holds (If applicable)

The social work practitioner will:-

discuss what action may be necessary in light of the information held by social care in conjunction with your information;

- agree whether a referral may be appropriate to address the issues raised;
- agree other possible ways forward to address the concerns;
- agree how parents will be informed of the contact made (parents will always need to be told that information has been shared with the CYPD unless there is a judgement that to do so would put the child, or anyone else, at risk of harm or would hamper any possible future police investigation)

If you are left worried that your concerns are not being addressed:

- use the new resolution of professional disagreements in work relating to the safety of children (escalation policy) available in the SW child protection procedures through the website - www.gscb.org.uk

We all have responsibility for the vulnerable children of Gloucestershire

It is important to remember that responsibility for the most vulnerable of children (including those who may be in need of protection) rests with each of us and cannot be relinquished by making a telephone call to another agency (including CYPD social care). When making a referral or seeking advice from social care about how to proceed, you should:

- ensure you have a good understanding of the information held by their agency (including historic information) and include that information in the contact or referral;
- include a summary of the concerns held by their agency;
- gain an agreement with children's social care about how and when they will receive an acknowledgement of their contact that includes confirmation of what action has been agreed (if any), by whom and by when;
- referrals must be followed up in writing by the referring practitioner within 48 hours;
- the notifying practitioner should formally follow up any enquiry where no response is forthcoming from children's social care by the agreed time scale;
- the notifying practitioner should use the 'resolution of professional disagreements in work relating to the safety of children (escalation policy)' procedure if they are not satisfied that the social care response has addressed their child welfare concerns.

Links with other policies

This policy should be read in conjunction with the following policies;

Anti-Bullying

Drugs

First Aid

Confidentiality

Allegations against staff

Special Educational Needs and Disability

Personal, Social, Health and Citizenship Education

Behaviour, Rewards and Sanctions

Attendance
Educational Visits
E-Safety
Children Missing From Home and Care (Guidance)
Health and Safety
Escalation Policy
Nurture
Whistle-blowing

This policy should also be read in conjunction with;
Gloucestershire's Local Safeguarding Children Board (GSCB) Child Protection Procedures which
are available at www.gscb.org.uk.

Policy review

Compiled by: **K.Burke and staff**

Agreed by Governors **January 2018**

Useful Links GSCB website

www.gscb.org.uk

Working Together to Safeguard Children 2013

<http://www.gscb.org.uk/CHttpHandler.ashx?id=55161&p=0>

Working Together to Safeguard Children 2010

<http://publications.dcsf.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-00305-2010>

Safeguarding Children in Schools 2004

<http://publications.dcsf.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-00305-2010>

Keeping Children Safe in Education 2016

<https://www.gov.uk/government/publications/keeping-children-safe-in-education>

Data Protection Act 1998

The Children's Act 1989

The Children's Act 2004

www.opsi.gov.uk/acts.htm

Department for Education for Safer Recruitment

<http://www.education.gov.uk/childrenandyoungpeople/>

Up to date on-line version of Gloucestershire Safeguarding Handbook.

<http://www.gscb.org.uk/handbook>

Guide to Safer Working Practice

<http://www.gscb.org.uk/article/113294/Gloucestershire-procedures-and-protocols>

Child Exploitation and Online Protection Centre (CEOP)

<http://www.ceop.police.uk/>

Disclosure and Barring Service

<https://www.gov.uk/government/organisations>

Appendix 1 - Further Information to be aware of:

Forced Marriage (FM)

This is an entirely separate issue from arranged marriage. It is a human rights abuse and falls within the Crown Prosecution Service definition of domestic violence. Young men and women can be at risk in affected ethnic groups. Whistle-blowing may come from younger siblings. Other indicators may be detected by changes in adolescent behaviours. Never attempt to intervene directly as a school or through a third party.

Honour Based Violence (HBV)

Honour based violence is a crime or incident, which has or may have been committed to protect or defend the honour of the family and /or community.

Violence Against Women and Girls

VAWG is an equality and human rights issue.

Violence against women is a violation of women's fundamental human rights:

- The right not to be treated in an inhuman and degrading way
- The right to respect for private and family life (including the right to physical and psychological integrity)
- The right to life

VAWG includes:

- domestic violence;
- forced marriage;
- honour-based violence;
- female genital mutilation;
- rape and sexual offences;
- prostitution;
- trafficking;
- child abuse; and
- pornography

Violence against women shall be understood to encompass, but not be limited to, the following:

(a) Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, nonspousal violence and violence related to exploitation;

(b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution

(c) Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

Female Genital Mutilation (FGM)

Female Genital Mutilation is illegal and is prohibited by the **Female Genital Mutilation Act 2003**. It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM.

What is FGM?

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy - partial/total removal of clitoris

Type 2 Excision - partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl - social acceptance for marriage
- Preserves a girl's virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Is FGM legal?

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** in most countries including the UK.

Circumstances and occurrences that may point to FGM happening

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child's family being from one of the 'at risk' communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child's sibling has undergone FGM
- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities

- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinary tract infection
- Disclosure

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action **without delay**.

Domestic Violence - Domestic Violence Disclosure Scheme - Clare's Law

This scheme will enable members of the public to have 'Right to ask' police if their current partner poses a risk to them in terms of their history of domestic abuse.

It also enables professionals to raise a 'Right to know' request through the police where we feel a person may be at risk of domestic abuse by an individual whose criminal history is unknown to the partner, but where we have some reasonable concern / knowledge about the individual's past.

A right to ask can also be made by a third person-e.g., a parent/relative/friend

who is concerned. In these cases if a disclosure is to be made, it will only be made to the person who needs to know i.e., the victim.

Yorkley School is made aware of any MARACs (Multi-Agency Risk Assessment Conference) through Health.

Parental Substance Misuse and the Impact on Children and Young People

The experience of children living with, and affected by, parental substance use has become widely known as "Hidden Harm", following the report by the UK Advisory Council on Misuse of Drugs in 2003. The phrase "Hidden Harm" encapsulates the 2 key features of that experience: the children are often not known to services; and they suffer harm in a number of ways through physical and emotional neglect, exposure to harm and poor parenting (Aberlour, 2006). Bottling It Up (2006) exposed similar concerns with children whose parents misuse alcohol and that insufficient attention was being paid to this group of children despite increased concern being raised by agencies.

The children of substance misusing parents are 'not at risk' or 'in need' solely by virtue of parental substance misuse. Unfortunately substance misuse by parents can be a contributing factor in the abuse or neglect of their child.

Private Fostering

It is a legal requirement for families looking after someone else's child for more than 28 days to notify Gloucestershire Children and Families Helpdesk on 01452 426565

Private fostering covers a diverse range of situations. Most educational settings will have children who are privately fostered, although the school/setting may not be aware that a child is

privately fostered. Asking who has parental responsibility would give an indicator as to whether or not a child is privately fostered.

Common private fostering situations include

- African, Asian and Afro Caribbean children with parents or families overseas
- Black and minority ethnic children with parents working or studying in the UK and living with a host family
- Asylum seeking and refugee children
- Trafficked children
- Local children living apart from their families, perhaps because the family has broken down.
- Adolescents estranged from their parents
- Children attending Language Schools
- Children attending independent schools who do not return home for holiday periods
- Children living with host families for a variety of reasons, possibly to learn English or to receive medical treatment in the UK.
- Back door adoptions

Mental Health

Primary Care professional and Mental Health

Primary health believes:

- in the fundamental uniqueness of each individual;
- that everyone has the right and ability to achieve wellbeing;
- in enabling and supporting pupils' maximum potential;
- that solutions are found at local level, created by communities and driven by champions.

Primary health works to:

- Listen to service users and their carers so that services can be designed to meet their needs
- Ensure all Primary Carers have the core skills to deal with poor wellbeing or mental health issues
- Provide suitable training for primary carers from experienced primary carers
- Work with researchers to understand what is effective, whether within NICE guidelines or not
- Lobby for better teaching of primary care mental health education measure success through outcomes that matter in people's lives

Gloucestershire NHS Trust for Mental Health

We liaise with Children and Young People Service (CYPS) to help our pupils and families who have mental health concerns.

<http://www.2gether.nhs.uk/professionals-working-with-children-and-young-people>

Fabricated, Induced Illness and Abuse of Medication

There are three main ways of the carer fabricating or inducing illness in a child. These are not mutually exclusive and include:

- **fabrication** of signs and symptoms. This may include fabrication of past medical history;
- **fabrication** of signs and symptoms and **falsification** of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents;

- **induction** of illness by a variety of means.

Gangs and Youth Violence - The Avenger Task Force

The Avenger Task Force is a new initiative led by police, set to revolutionise the approach to gangs in Gloucestershire.

The multi- agency project, involving representatives from Gloucestershire Constabulary, Gloucestershire City Council and Gloucestershire County Council's Youth Support Team, aims to reduce the number of youngsters involved in gangs by offering support to those who are or may be vulnerable.

Radicalisation

Radicalisation is a process by which an individual or group comes to adopt increasingly extreme political, social, or religious ideals and aspirations. Radicalisation can be both violent and nonviolent, although most academic literature focuses on radicalisation into violent extremism (RVE).

At Yorkley Primary School we are committed to working in partnership to support vulnerable children and their families and all staff have training on 'Prevent'. The protocol provides the theory and practice as to why putting children and their wellbeing at the centre of our thinking and operations are imperative in order to safeguard their welfare.