



play and
sensory stimulation
therapy

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Child Protection Policy

Working with schools, children and young people

1. INTRODUCTION

Safeguarding is defined as protecting children from maltreatment, preventing impairment of health and/or development, ensuring that children grow up in the provision of safe and effective care and optimising children's life chances.

Purpose of the Child Protection Policy

To inform Play and Sensory Stimulation Therapy staff and associates about the company's responsibilities for safeguarding children. To enable everyone to have a clear understanding of how these responsibilities should be carried out.

Basis of Procedures*

The company follows procedures based on the Hertfordshire Safeguarding Children Board; a guide to procedure and practice for all agencies in Hertfordshire working with children and their families.

Play and Sensory Stimulation Therapy Staff & Associates

Play and Sensory Stimulation Therapy staff and associates may observe outward signs of abuse, changes in behaviour and failure to develop where they are in regular contact with children. Play and Sensory Stimulation Therapy staff and associates need to ensure they are knowledgeable and aware of their role in the recognition of the signs and symptoms of possible abuse or neglect and of the appropriate procedures to follow.

Aims for Play and Sensory Stimulation Therapy

- Establish and maintain an environment in which children feel secure, are encouraged to talk, and are listened to when they have a worry or concern.
- Establish and maintain an environment where Play and Sensory Stimulation Therapy staff and Associates feel safe, are encouraged to talk and are listened to when they have concerns about the safety and well being of a child.
- Ensure children know that there are adults in the school whom they can approach if they are worried.
- Ensure that children who have been abused will be supported in line with a child protection plan, where deemed necessary.
- Support opportunities in the PSHE curriculum for children to develop the skills they need to recognise and stay safe from abuse.

** where Play and Sensory Stimulation Therapy is working elsewhere the relevant county document should be referred to*

2. STATUTORY FRAMEWORK

Hertfordshire Schools act in accordance with the following legislation and guidance:

The Children Act 1989

The Children Act 2004

Education Act (2002), section 175

Hertfordshire Safeguarding Children Board Child Protection Procedures(2007) * DfES guidance

Safeguarding Children and Safer Recruitment in Education (2006) HM Government 'Working Together to Safeguard Children' (2006)

HM Government 'Working Together to Safeguard Children' (2006) requires all schools to follow the procedures for protecting children from abuse which are established by the Hertfordshire Safeguarding Children Board. Schools are also expected to ensure that they have appropriate procedures in place for responding to situations in which they believe that a child has been abused or are at risk of abuse - these procedures should also cover circumstances in which a member of staff is accused of, or suspected of, abuse.

DfES guidance Safeguarding Children and Safer Recruitment in Education (2006) places the following responsibilities on all schools:-

- Schools should be aware of and follow the procedures established by the Hertfordshire* Safeguarding Children Board
- Staff should be alert to signs of abuse and know to whom they should report any concerns or suspicions
- Schools should have procedures (of which all staff are aware) for handling suspected cases of abuse of pupils, including procedures to be followed if a member of staff is accused of abuse, or suspected of abuse
- A Designated Senior Person should have responsibility for co- coordinating action within the school and liaising with other agencies
- Staff with designated responsibility for Child Protection should receive appropriate training

DfES guidance Safeguarding Children and Safer Recruitment in Education (2006) also states that "All parents need to understand that schools and FE colleges have a duty to safeguard and promote the welfare of children who are their pupils or students, that this responsibility necessitates a child protection policy and procedures, and that a school or FE college may need to share information and work in partnership with other agencies when there are concerns about a child's welfare."

3. THE DESIGNATED SENIOR PERSON

Play and Sensory Stimulation Therapy staff and associates will make themselves known to The Designated Senior Person (and their deputy) for Child Protection in each school in which they are

working, at the start of an assignment.

It is the role of the Designated Senior Person for Child Protection to:

- Ensure that he/she receives refresher training at two yearly intervals to keep his or her knowledge and skills up to date
- Ensure that all staff who work with children undertake appropriate training to equip them to carry out their responsibilities for child protection effectively and that this is kept up to date by refresher training at three yearly intervals
- Ensure that newly appointed staff receive a child protection induction
- Ensure that temporary staff and volunteers are made aware of the school's arrangements for child protection
- Ensure that the school operates within the legislative framework and recommended guidance
- Ensure that all staff and volunteers are aware of the Hertfordshire Safeguarding Children Board Child Protection Procedures
- Ensure that the Head Teacher is kept fully informed of any concerns
- Develop effective working relationships with other agencies and services
- Decide whether to take further action about specific concerns (e.g. refer to Children, Schools and Families)
- Liaise with CSF social care teams over suspected cases of child abuse
- Ensure that accurate records relating to individual children are kept separate from the academic file in a secure place and marked 'Strictly Confidential' and that these records are passed securely should the child transfer to a new provision
- Submit reports to ensure the school's attendance at Child Protection Conferences and contribute to decision making and delivery of actions planned to safeguard the child
- Ensure that the school effectively monitors children about whom there are concerns, including notifying CSF of the absence of a child who is the subject of a child protection plan
- Provide guidance to parents, children and staff about obtaining suitable support

All Play and Sensory Stimulation Therapy staff or associates engaged in work which brings them into

contact with children or vulnerable adults will possess an enhanced disclosure CRB for the relevant area before commencing work in that area.

Any room used for therapy or counselling will ideally have the facility for a passing adult to view the interior.

4. THE GOVERNING BODY

Play and Sensory Stimulation Therapy will ensure its staff and Associates are aware that the Governing Body has overall responsibility for ensuring that there are sufficient measures in place to safeguard the children in their establishment.

The Governing Body ensures:

- Child protection policy and procedures
- Safe recruitment procedures
- Appointment of a DSP who is a senior member of school leadership team
- Relevant child protection training for school staff/volunteers is attended
- Safe management of allegations
- Deficiencies or weaknesses in child protection arrangements are remedied without delay
- A member of the Governing Body (usually the Chair) is nominated to be responsible in the event of an allegation of abuse being made against the Head Teacher
- Safeguarding policies and procedures are reviewed annually and information provided to the local authority about them and about how the above duties have been discharged

5. SCHOOL PROCEDURES

Play and Sensory Stimulation Therapy will ensure its staff and Associates are aware that if they are concerned about a child he or she must inform the Designated Senior Person in that school.

The DSP must record information regarding the concerns on the same day. The recording must be a clear, precise, factual account of the observations

(pro-forma is available on the Hertfordshire Grid for Learning).

The DSP will decide whether the concerns should be referred to Children, Schools and Families. If it is decided to make a referral to Children, Schools

and Families this will be done with prior discussion with the parents, unless to do so would place the child at further risk of harm.

Particular attention will be paid to the attendance and development of any child about whom the school has concerns, or who has been identified as being the subject of a child protection plan (formerly referred to as the Child Protection Register) and a written record will be kept.

If a pupil who is/or has been the subject of a child protection plan changes school, the DSP will inform the social worker responsible for the case and transfer the appropriate records to the DSP at the receiving school, in a secure manner, and separate from the child's academic file.

6. WHEN TO BE CONCERNED

Play and Sensory Stimulation Therapy will ensure its staff and Associates are aware that the main categories of abuse are:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Neglect

Play and Sensory Stimulation Therapy staff and Associates should be concerned about a child if he/she presents with indicators of possible significant harm – see **Appendix 1 for details**.

Generally, in an abusive relationship the child may:

- Appear frightened of the parent/s or other household members e.g. siblings or others outside of the home
- Act in a way that is inappropriate to her/his age and development (full account needs to be taken of different patterns of development and different ethnic groups)
- Display insufficient sense of ‘boundaries’, lack stranger awareness
- Appear wary of adults and display ‘frozen watchfulness’ Play and Sensory Stimulation Therapy staff or Associates should access the support of professional clinical supervision as needed whilst maintaining client anonymity.

7. DEALING WITH A DISCLOSURE

If a child discloses that he or she has been abused in some way, the Play and Sensory Stimulation Therapy member of staff or Associate should:

- Listen to what is being said without displaying shock or disbelief
- Accept what is being said
- Allow the child to talk freely
- Reassure the child, but not make promises which it might not be possible to keep
- Not promise confidentiality – it might be necessary to refer to Children, Schools and Families
- Reassure him or her that what has happened is not his or her fault Stress that it was the right thing to tell
- Listen, rather than ask direct questions
- Not criticise the alleged perpetrator
- Explain what has to be done next and who has to be told
- Make a written record (see Record Keeping)
- Pass information to the Designated Senior Person without delay

Play and Sensory Stimulation Therapy staff or Associates should stop any further therapy once a

disclosure has been made, acting at all times within the Ethical Framework of the BACP or equivalent professional code of conduct.

Support

Dealing with a disclosure from a child, and a child protection case in general, is likely to be a stressful experience.

Play and Sensory Stimulation Therapy staff and associates have access to professional clinical supervision.

8. CONFIDENTIALITY

Child Protection raises issues of confidentiality that must be clearly understood by all Play and Sensory Stimulation Therapy staff and Associates. They are aware that:

9. RECORD KEEPING

All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children, Schools and Families and the Police).

- If a child confides in them and requests that the information is kept secret, it is important that they tell the child in a manner appropriate to the child's age/stage of development that they cannot promise complete confidentiality – instead they must explain that they may need to pass information to other professionals to help keep the child or other children safe.
- If they receive information about children and their families in the course of their work they should share that information only within appropriate professional contexts.
When a child has made a disclosure, the Play and Sensory Stimulation Therapy staff member or Associate should:
 - Make brief notes as soon as possible after the conversation
 - Not destroy the original notes in case they are needed by a court
 - Record the date, time, place and any noticeable non-verbal behaviour and the words used by the child
 - Draw a diagram to indicate the position of any bruising or other injury
 - Record statements and observations rather than interpretations or assumptions
 - A copy of relevant records needs to be given to the DSP promptly.

10. ALLEGATIONS INVOLVING SCHOOL STAFF/VOLUNTEERS

Play and Sensory Stimulation Therapy will ensure its staff and Associates are aware that whenever it is alleged that a member of staff/volunteer has:

- Behaved in a way that has, or may have harmed a child
- Possibly committed a criminal offence against/related to a child
- Behaved toward a child in a way which indicates s/he is unsuitable to work with children

The person receiving the allegation must take it seriously and immediately inform the Head Teacher.

If they have reason to suspect that another adult working or volunteering in the school may have abused a child at the school, or elsewhere, they must immediately inform the Head Teacher.

They should also make a written record of the allegation using the informant's words - including time, date and place where the alleged incident took place, what was said and anyone else present. This record should be signed and dated and immediately passed on to the Head Teacher.

If the concerns are about the Head Teacher, then the Chair of Governors should be contacted.

In the absence of the Chair of Governors, the Vice Chair should be contacted.

The Head Teacher will not investigate the allegation itself, or take written or detailed statements, but he/she will assess whether it is necessary to refer to Children Schools and Families in consultation with the Local Authority Designated Officer (07920 283106 or 07995 288271)

If it is decided that the allegation warrants further action through Child Protection Procedures the Head Teacher must immediately make a referral to CSF Client Services so that the allegation can be investigated in accordance with Section 10 of the Hertfordshire Safeguarding Children Board Child Protection Procedures.

If it is decided that it is not necessary to refer to Children Schools and Families, the Head Teacher and Local Authority Designated Officer will consider whether there needs to be an internal investigation.

The Head Teacher should, as soon as possible, **following briefing** from the Local Authority Designated Officer inform the subject of the allegation.

APPENDIX 1 - INDICATORS OF POSSIBLE SIGNIFICANT HARM

POSSIBLE SIGNS OF PHYSICAL ABUSE

- Unexplained injuries or burns, particularly if they are recurrent
- Injuries not typical of accidental injury
- Frequent injuries even with apparently reasonable explanations
- Improbable or conflicting explanations for injuries
- Refusal to discuss injuries
- Admission of punishment which appears excessive
- Fear of parents being contacted
- Bald patches
- Withdrawal from physical contact
- Arms and legs kept covered in hot weather
- Fear of returning home
- Fear of medical help / parents not seeking medical help
- Self-destructive tendencies
- Aggression towards others
- Chronic running away
- Frequently absent from school

POSSIBLE SIGNS OF EMOTIONAL ABUSE

- Probably the most difficult type of abuse to recognise. An emotionally abused child is often withdrawn, introverted and depressed.
- Admission of punishment which appears excessive
- Over-reaction to mistakes
- Sudden speech disorders
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- Self mutilation
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/solvent abuse
- Chronic running away
- Compulsive stealing
- Scavenging for food or clothes
- Continual self depreciation
- Air of detachment – ‘don’t care’ attitude
- Social isolation – does not join in and has few friends
- Desperate attention-seeking behaviour
- Eating problems, including over-eating or lack of appetite
- Depression, withdrawal

POSSIBLE SIGNS OF SEXUAL ABUSE

- Demonstrate sexual knowledge or behaviour inappropriate to age/stage of development, or that is unusually explicit
- Wetting or other regressive behaviours e.g. thumb sucking
- Inexplicable changes in behaviour, such as becoming aggressive or withdrawn
- Stop enjoying previously liked activities
- Be reluctant to undress for PE
- Become fearful of, or refuse to see, certain adults for no apparent reason; show dislike of a particular baby-sitter, relative or other adult
- Draw sexually explicit pictures

- Urinary infections, bleeding or soreness in the genital or anal areas
- Soreness or bleeding in the throat
- Chronic ailments, such as stomach pains or headaches
- Take over the parental role at home; seem old beyond their years
- Develop eating disorders, such as anorexia or bulimia
- Depression, suicidal thoughts
- Poor self-image, self-harm, self-hatred
- Physical discomfort
- Use drugs or drink to excess
- Unexplained pregnancy
- Memory loss
- Frequent running away
- Restricted social activities
- Find excuses not to go home or to a particular place
- Have recurring nightmares/be afraid of the dark
- Be unable to concentrate; seem to be in a world of their own
- Have a 'friend who has a problem' and then tell about the abuse of the friend
- Sudden changes in school work habits, become truant
- Withdrawal, isolation or excessive worrying
- Outbursts of anger or irritability
- Unexplained sums of money
- Act in a sexually inappropriate/harmful or seductive way towards others

POSSIBLE SIGNS OF NEGLECT

- Constant hunger
- Poor personal hygiene
- Inappropriate clothing, clothing in a poor state of repair
- Frequent lateness or non-attendance at school
- Untreated medical problems
- Low self-esteem
- Poor social relationships
- Compulsive stealing
- Constant tiredness
- Emaciation
- Destructive tendencies.
- Neurotic behaviour (e.g. rocking, hair twisting, thumb sucking)
- Chronic running away
- Scavenging for food or clothes

In addition to all the above signs a child may disclose an experience in which he/she may have been harmed, or there may be other cause to believe that a child may be suffering harm.