

CHILD PROTECTION POLICY

Therapeutic Teaching

Unique solutions for unique people

Therapeutic Teaching is a complementary/alternative education provider currently operating as a single teacher, Catherine Stephenson.

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1. Introduction

Schools and their staff form part of the wider safeguarding system for children. Everyone who comes into contact with children and their families and carers has a role to play in safeguarding children. In order to fulfil this responsibility effectively, all professionals should make sure their approach is child-centred. This means that they should consider, at all times, what is in the **best interests** of the child.

(Keeping Children Safe in Education – DfE, 2018)

Therapeutic Teaching fully recognises its responsibilities for the safeguarding and protection of children in its care and it's requirement to respond immediately to any aspect of concern relating to a child's safeguarding whether it happens within the school community or outside. Safeguarding means ensuring that children grow up in the provision of safe and effective care that optimises children's life chances. This policy applies to all the children and young people, staff in Therapeutic Teaching and parents/carers involved with the organisation. It forms part of the safeguarding arrangements for Therapeutic Teaching and should be read in conjunction with the following:

- Keeping Children Safe in Education (DfE, 2018)
- The Relationships policy;
- the safeguarding response to children missing from education
- the role of the designated safeguarding lead (Annex B of KCSIE)

Safeguarding and promoting the welfare of children (*everyone under the age of 18*) is defined in Keeping Children Safe in Education as:

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

2. Statutory framework

Section 175 of the Education Act 2002 (*Section 157 for Independent schools*) places a statutory responsibility on the governing body to have policies and procedures in place that safeguard and promote the welfare of children who are pupils of the school. Therapeutic Teaching is an organisation which provides complementary and alternative education and is viewed as an independent organisation in respect of safeguarding.

The development of appropriate procedures and the monitoring of good practice in Essex are the responsibilities of the [Essex Safeguarding Children Board](#) (ESCB). In Essex, all professionals must work in accordance with the [SET Procedures \(ESCB, 2018\)](#). For children being supported by Therapeutic Teaching who live in Suffolk the procedures set by [Suffolk Children's Safeguarding Board](#) will apply.

Therapeutic Teaching also works in accordance with the following legislation and guidance:

[Keeping Children Safe in Education \(DfE, 2018\)](#)

[Working Together \(HMG, 2018\)](#)

Education Act (2002)

[Effective Support for Children and Families in Essex](#) (ESCB, 2017)

[Counter-Terrorism and Security Act \(HMG, 2015\)](#)

[Serious Crime Act 2015](#) (Home Office, 2015)

Children and Social Work Act (2017)

Sexual Offences Act (2003)

Education (Pupil Registration) Regulations 2006

[Information sharing advice for safeguarding practitioners \(HMG, 2018\)](#)

[Data Protection Act \(2018\)](#)

[What to do if you're worried a child is being abused](#) (HMG, 2015)

[Searching, screening and confiscation](#) (DfE, 2018)

Children Act (1989)

Children Act (2004)

[Preventing and Tackling Bullying \(DfE, 2017\)](#)

Female Genital Mutilation Act 2003 (S. 74 - Serious Crime Act 2015)

[Sexual violence and sexual harassment between children in schools and colleges](#) (DfE, 2018)

[Promoting positive emotional well-being and reducing the risk of suicide \(ESCB, 2018\)](#)

[Keeping pupils and staff safe – management of behaviour in schools, including use of physical contact and restrictive / non-restrictive physical intervention to address difficult and harmful behaviour \(ESCB, 2018\)](#)

2. Roles and responsibilities

All adults working with or on behalf of children have a responsibility to protect them and to provide a safe environment in which they can learn and achieve their full potential. However, there are key people within schools and the Local Authority who have specific responsibilities under child protection procedures. **Catherine Stephenson is trained to act as a Designated Safeguarding Lead** and currently there are no other employees in Therapeutic Teaching.

Catherine Stephenson is responsible for ensuring that the policies, procedures and training in Therapeutic Teaching are effective and comply with the law at all times. Catherine Stephenson ensures that all required policies relating to safeguarding are in place, that the child protection policy reflects statutory and local guidance and is reviewed at least annually.

Catherine Stephenson is responsible for informing the Local Authority of the safeguarding arrangements in Therapeutic Teaching as part of the LA's Quality Assurance procedures and on an annual basis or sooner if changes to the policy are required.

Catherine Stephenson (as Therapeutic Teaching) contributes to inter-agency working, in line with statutory and local guidance. She ensures that information is shared and stored appropriately and in accordance with statutory requirements. Catherine Stephenson undergoes safeguarding training as a Designated Safeguarding Lead on a two-yearly basis and e-learning on an annual basis to ensure that she has the relevant skills and knowledge to keep children safe.

Included in the complementary curriculum Catherine Stephenson ensures that the children are taught about safeguarding, including online safety particularly when using IT equipment outside of the family home such as the local library and when using IT equipment owned by Therapeutic Teaching under supervision. Catherine Stephenson ensures that that appropriate filters and monitoring systems for online usage are in place. The children will be taught how to keep themselves safe through teaching and learning opportunities

as part of the complementary curriculum in discussion with parents/carers and school staff (where the young person is enrolled in a school).

Recruitment

This policy applies to the sole employee Catherine Stephenson and at time of writing there are no plans to recruit any adults or to involve any other adults in the care of the children. Catherine Stephenson has an Enhanced DBS and updates annually. Certificate number and access data are shared with the parent, school and referring agency.

Should this situation change, this policy will be revised to reflect that Catherine Stephenson is responsible for ensuring that appropriate recruitment procedures are adhered to that help to deter, reject or identify people who might abuse children.

The Designated Safeguarding Lead

Catherine Stephenson as a Designated Safeguarding Lead takes sole responsibility for managing child protection referrals, safeguarding training and raising awareness of all child protection policies and procedures when the child/young person is under her care in a public location such as a public library or in the child's own home where it is safe for her to do so. In the event of a serious incident that poses any risk to the safety of the child, adults responsible or Catherine Stephenson then emergency procedures are followed. Catherine Stephenson will ensure that timely referrals to Essex Children and Families Hub **0345 603 7627** or the Suffolk Multi-Agency Safeguarding Hub (MASH) Professional Consultation Line on **03456 061 499** are made in accordance with current local procedures. She works with the local authorities and other agencies as required.

If a child protection concern is raised or evident in which Catherine Stephenson has knowledge of a concern for the safety of a child then she will act accordingly as a Designated Safeguarding Lead.

Therapeutic Teaching has a responsibility to provide a safe learning environment in which children can learn. Catherine Stephenson is aware of the local early help process and how the organisation plays a role within this process. She is aware of signs of abuse and neglect so she is able to identify children who may be in need of help or protection. Processes (as set out in this policy) are followed and Catherine Stephenson will make a referral to Social Care if there is a need to do so. If present in a school as a visitor she will follow the advice for visitors and refer immediately to the Designated Safeguarding Lead in the school. Any concerns about a child's welfare will be acted upon immediately and it will not be assumed that others have taken action.

4. Types of abuse / specific safeguarding issues

Keeping Children Safe in Education (DfE, 2018) defines abuse as the maltreatment of a child.

"Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults or another child or children"

The four main types of abuse referred to in Keeping Children Safe in Education are:

- Physical

- Emotional
- Sexual
- Neglect

Therapeutic Teaching (Catherine Stephenson) is aware of the signs of abuse and neglect and so are able to identify children who may be in need of help or protection. She is aware of environmental factors which may impact on a child's welfare and safety and understand safeguarding in the wider context (contextual safeguarding). She is aware of safeguarding issues that can put children at risk of harm and understand that behaviours linked to issues such as drug taking, alcohol abuse, deliberately missing education and sexting put children in danger.

Peer on peer abuse

Therapeutic Teaching (Catherine Stephenson) recognises that children who require complimentary/alternative education may have experienced or at risk of peer on peer abuse. Signs of this abuse may be displayed as challenging and defiant, or they may instead be withdrawn, or display abusive behaviours towards other children. Therapeutic Teaching (Catherine Stephenson) recognises that some children may abuse their peers and any incidents of peer on peer abuse will be managed in the same way as any other child protection concern and will follow the same procedures. Therapeutic Teaching (Catherine Stephenson) will seek advice and support from other agencies as appropriate.

Peer on peer abuse can manifest itself in many ways. This may include bullying (including cyber bullying), physical abuse, sexual violence / sexual harassment, 'sexting' or initiation / hazing type violence and rituals. Therapeutic Teaching (Catherine Stephenson) will take swift action should she become aware of or gain knowledge of this behaviour being actioned by a child or where a child is being targeted. She has been trained to use supportive interventions and can support understanding in the child in an age-appropriate way, to understand what abuse is and encouraged to tell a trusted adult if someone is behaving in a way that makes them feel uncomfortable. Therapeutic Teaching (Catherine Stephenson) understands the different gender issues that can be prevalent when dealing with peer on peer abuse.

Children with special educational needs and disabilities

Many children who become engaged with Therapeutic Teaching (Catherine Stephenson) may have special educational needs (SEN) and disabilities and can face additional safeguarding challenges. Barriers can exist when recognising abuse and neglect in this group of children. This can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability, without further exploration
- That they may be more prone to peer group isolation than others
- The potential to be disproportionately impacted by things like bullying, without outwardly showing signs
- Communication difficulties in overcoming these barriers.

Children missing from education

All children, regardless of their age, ability, aptitude and any special education needs they may have, are entitled to a full-time education. Therapeutic Teaching (Catherine Stephenson) recognises that a child

missing education is a potential indicator of abuse or neglect and will follow safeguarding procedures if the child is unable to access the educational provision, delivered by Therapeutic Teaching (Catherine Stephenson), to establish that the child is safe.

An attendance log is maintained and attendance reported to referring school or LA on a regular (minimum weekly) basis. Parents should always inform us of the reason for any absence. Where contact is not made on the day the referring school or LA will be informed immediately and where the organisation is the sole provider of education a referral may be made to another appropriate agency (Missing Education and Child Employment Service, Social Care or Police). Parents are required to remain present during tuition in the home, where the child is being taught in the library the parent is required to provide at least two emergency contact numbers, so we are able to communicate with an agreed contact if we need to.

Child Sexual Exploitation (CSE)

Child Sexual Exploitation (CSE) is a form of child abuse, which can happen to boys and girls from any background or community. In Essex, the definition of Child Sexual Exploitation (CSE) from the Department of Education (DfE, 2017) has been adopted:

"Child Sexual Exploitation is a form of child sexual abuse. It occurs when an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology".

It is understood that a significant number of children who are victims of CSE go missing from home, care and education at some point. Therapeutic Teaching (Catherine Stephenson) is alert to the signs and indicators of a child becoming at risk of, or subject to, CSE and will take appropriate action to respond to any concerns. Therapeutic Teaching (Catherine Stephenson) as a designated safeguarding lead will lead on these issues and work with other agencies as appropriate. This [one page process map](#) sets out arrangements for CSE in Essex.

Child criminal exploitation

Child criminal exploitation is a geographically widespread form of harm which is a typical feature of county lines criminal activity (county lines is when drug networks or gangs groom and exploit children to carry drugs and money from urban areas to suburban areas and seaside towns). Our school works with key partners locally to prevent and respond to child criminal exploitation.

Domestic abuse

Domestic abuse can take many forms, including psychological, physical, sexual, financial and emotional. Our school recognises that exposure to domestic abuse can have a serious, long-term emotional and psychological impact on children. We work with other key partners and will share relevant information where there are concerns that domestic abuse may be an issue for a child or family or be placing a child at risk of harm.

Female Genital Mutilation FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to female genital organs. It is illegal in the UK and a form of child abuse. As of October 2015, the Serious Crime Act 2015 (Home Office, 2015) introduced a duty on teachers (and other professionals) to notify the police of known cases of female genital mutilation where it appears to have been

carried out on a girl under the age of 18. Therapeutic Teaching will operate in accordance with the statutory requirements relating to this issue, and in line with local safeguarding procedures.

Forced marriage A forced marriage is one entered into without the full consent of one or both parties. It is where violence, threats or other forms of coercion is used and is a crime. We understand how to report concerns where this may be an issue.

Prevention of radicalisation

As of July 2015, the [Counter-Terrorism and Security Act \(HMG, 2015\)](#) placed a new duty on schools and other education providers. Under section 26 of the Act, schools are required, in the exercise of their functions, to have “due regard to the need to prevent people from being drawn into terrorism”. This duty is known as the Prevent duty. It requires schools to:

- teach a broad and balanced curriculum which promotes spiritual, moral, cultural, mental and physical development of pupils and prepares them for the opportunities, responsibilities and experiences of life and must promote community cohesion
- be safe spaces in which children / young people can understand and discuss sensitive topics, including terrorism and the extremist ideas that are part of terrorist ideology, and learn how to challenge these ideas
- be mindful of their existing duties to forbid political indoctrination and secure a balanced presentation of political issues

CHANNEL is a national programme which focuses on providing support at an early stage to people identified as vulnerable to being drawn into terrorism. Therapeutic Teaching (Catherine Stephenson) completes the Prevent e-learning annually and works in accordance with local procedures for PREVENT and with other agencies, sharing information and concerns as appropriate.

Private Fostering

A private fostering arrangement is one that is made without the involvement of a local authority for the care of a child under the age of 16 years (under 18, if disabled) by someone other than a parent or close relative with the intention that it should last for 28 days or more. A close family relative is defined as a ‘grandparent, brother, sister, uncle or aunt’ and includes half-siblings and step-parents; it does not include great-aunts or uncles, great grandparents or cousins. Parents and private foster carers have a legal duty to inform the relevant local authority at least six weeks before the arrangement is due to start; not to do so is a criminal offence. Whilst most privately fostered children are appropriately supported and looked after, they are a potentially vulnerable group who should be monitored by the local authority, particularly when the child has come from another country. In some cases privately fostered children are affected by abuse and neglect, or involved in trafficking, child sexual exploitation or modern-day slavery. **We have a mandatory duty to report to the local authority where they are aware or suspect that a child is subject to a private fostering arrangement.** We need to know who has parental responsibility. As a Designated Safeguarding Lead Catherine Stephenson will speak to the family of the child involved to check that they are aware of their duty to inform the LA.

5. Procedures

Therapeutic Teaching (Catherine Stephenson) works with key local partners to promote the welfare of children and protect them from harm. This includes providing a co-ordinated offer of early help when

additional needs of children are identified and contributing to inter-agency plans which provide additional support (through a 'child in need' or a 'child protection' plan).

Therapeutic Teaching (Catherine Stephenson) has a duty to identify and respond to suspected / actual abuse or disclosures of abuse and **will** report it immediately to the designated safeguarding lead if the child is on roll at a school and take action independently of the school in conjunction with the school DSL (or, in their absence, the deputy designated safeguarding lead).

Where a child is not on roll at a school Therapeutic Teaching (Catherine Stephenson) has a duty to identify and respond to suspected / actual abuse or disclosures of abuse with immediate action:

All action is taken in accordance with the following guidance;

- Essex Safeguarding Children Board guidelines - the SET (Southend, Essex and Thurrock) Child Protection Procedures (ESCB, 2018)/ Suffolk Safeguarding Children Board <http://www.suffolkscb.org.uk/working-with-children/education/>
<http://www.suffolkscb.org.uk/assets/Working-with-Children/How-to-Make-a-Referral/Safeguarding-Referral-Guidance.pdf>
- Essex Effective Support 0345 603 7627 / Suffolk MASH Professional Consultation Line: 0345 606 1499
- Keeping Children Safe in Education (DfE, 2018)
- Working Together to Safeguard Children (DfE, 2018)
- 'Effective Support for Children and Families in Essex' (ESCB, 2017)
- PREVENT Duty - Counter-Terrorism and Security Act (HMG, 2015)

Where there is risk of immediate harm, concerns will be referred by telephone to the Children and Families Hub and / or the Police. Less urgent concerns or requests for support will be referred to the Children and Families Hub via the [Essex Effective Support](#) portal . Wherever possible, Therapeutic Teaching (Catherine Stephenson) will share any safeguarding concerns, or an intention to refer a child with parents or carers. However, Therapeutic Teaching (Catherine Stephenson) will not do so where it is felt that to do so could place the child at greater risk of harm or impede a criminal investigation. On occasions, it may be necessary to consult with the Children and Families Hub and / or Essex Police for advice on when to share information with parents / carers.

If Therapeutic Teaching (Catherine Stephenson) continues to have concerns about a child and feels the situation is not being addressed or does not appear to be improving, Therapeutic Teaching (Catherine Stephenson) will press for re-consideration of the case with Children's Social Care / if the child lives in Suffolk we follow the Escalation Policy <http://www.suffolkscb.org.uk/assets/Working-with-Children/Policies-Guidance-and-Protocols/Escalation-Policy/2017-10-19-Escalation-Policy-v.3.pdf>

Safeguarding contact details for both Essex and Suffolk are carried on person and number stored on work mobile phone to ensure access to safeguarding support, should it be required.

6. Training

Catherine Stephenson as a Designated Safeguarding Lead undertakes the level of DSL child protection training for at least every two years. In addition, Introduction training is completed at least annually.

Records of any child protection training undertaken is kept on person for parents/carers, referring school and shared with LA staff.

7. Professional confidentiality

Confidentiality is an issue which needs to be discussed and fully understood by all those working with children, particularly in the context of child protection. Therapeutic Teaching (Catherine Stephenson) must never guarantee confidentiality to anyone about a safeguarding concern (including parents / carers or pupils), or promise to keep a secret. In accordance with statutory requirements, where there is a child protection concern, this must be reported to the Designated Safeguarding Lead where a child is on roll in a school **and** will be acted upon and may require further referral to and subsequent investigation by appropriate authorities.

8. Records and information sharing

Well-kept records are essential to good child protection practice. Therapeutic Teaching (Catherine Stephenson) is clear about the need to record any concern held about a child or children engaged with Therapeutic Teaching and when these records should be shared with other agencies.

Where there are concerns about the safety of a child, the sharing of information in a timely and effective manner between organisations can reduce the risk of harm. Whilst the Data Protection Act 2018 places duties on organisations and individuals to process personal information fairly and lawfully, it is not a barrier to sharing information where the failure to do so would result in a child or vulnerable adult being placed at risk of harm. Similarly, human rights concerns, such as respecting the right to a private and family life would not prevent sharing information where there are real safeguarding concerns. Fears about sharing information cannot be allowed to stand in the way of the need to safeguard and promote the welfare of children at risk of abuse or neglect. Generic data flows related to child protection are recorded in our Records of Processing Activity and regularly reviewed; and our online privacy notices accurately reflect our use of data for child protection purposes.

Therapeutic Teaching (Catherine Stephenson) on receiving a disclosure of abuse or noticing signs or indicators of abuse, will record it as soon as possible, noting what was said or seen (if appropriate, using a body map to record), giving the date, time and location. All records will be dated and signed and will include the action taken.

If the child engaged with Therapeutic Teaching (Catherine Stephenson) is on roll at a school this concern is discussed with the Designated Safeguarding Lead (or the school's deputising DSL), who with Therapeutic Teaching (Catherine Stephenson) will decide on appropriate action and record this accordingly.

2.2.1 Professionals in all agencies have a responsibility to refer a child to local authority children's social care when it is believed or suspected that the child:

- *Has suffered significant harm (see Part A, chapter 1, Responding to Concerns of Abuse and Neglect);*
- *Is likely to suffer significant harm (see Part A, chapter 1, Responding to Concerns of Abuse and Neglect);*
- *Has a disability, developmental and welfare needs which are likely only to be met through provision of social work led family support services (with agreement of the child's parent) under the Children Act 1989;*
- *Is a Child in Need whose development would be likely to be impaired without provision of services.*

The referrer should outline their concerns and will be asked to provide information to explain what they are concerned about and why, particularly in relation to the welfare and immediate safety of the child. See 2.4.4

for details of the information that might be requested. The referrer should not refrain from making a referral because they lack some of the information as the welfare of the child is the priority.

Information recorded and shared in referral:

- Full names (including aliases and spelling variations), date of birth and gender of all child/ren in the household; Family address and (where relevant) school/nursery attended;
- Identity of those with parental responsibility;
- Names and date of birth of all household members and frequent visitors;
- Where available, the child's NHS number and education UPN number.
- Ethnicity, first language and religion of children and parents;
- Any special needs of children or parents, including any disability, speech, language or hearing difficulties;
- Any significant/important recent or historical events/incidents in child or family's life;
- Cause for concern including details of any allegations, their sources, timing and location;
- Child's current location and emotional and physical condition;
- Whether the child needs immediate protection;
- Details of alleged perpetrator, if relevant;
- Referrer's relationship and knowledge of child and parents;
- Known involvement of other agencies/professionals (e.g. GP);
- Information regarding parental knowledge of, and agreement to, the referral;
- The child's views and wishes, if known;
- Any need for an interpreter, signer or other communication aid;
- Background information relevant to referral e.g. positive aspects of parents care, previous concerns, pertinent parental issues (such as mental health, domestic abuse, drug or alcohol abuse, threats and violence towards professionals);
- Check systems using the name, dates of birth and aliases of any person identified on the referral to establish if they are previously known to social care and if so obtain those records.

Any records related to child protection are kept in an individual child protection file (marked CONFIDENTIAL) for that child (which is separate to the pupil file). All child protection records are stored securely and confidentially and will be retained securely until they transfer to another school / educational setting.

Where a pupil transfers from Therapeutic Teaching to another school / educational setting (including colleges), their child protection records will be forwarded to the new educational setting. These will be marked CONFIDENTIAL (Official Sensitive) and for the attention of the receiving school's designated safeguarding lead, with a return address on the envelope so it can be returned to us if it goes astray. We will obtain evidence that the paperwork has been received by the new school and then destroy any copies held by Therapeutic Teaching. Where appropriate, the designated safeguarding lead may also make contact with the new educational setting in advance of the child's move there, to enable planning so appropriate support is in place when the child arrives.

Where a pupil engages with Therapeutic Teaching and remains on roll with a school, we will request information about any child protection concerns on a 'need to know' basis or similarly if the child is currently in between schools from the previous educational establishment (if none are received).

9. Interagency working

It is the responsibility of Catherine Stephenson as the Designated Safeguarding Lead to ensure that the organisation is represented at, and that a report is submitted to, any child protection conference called for

children engaged with the provider or previously known to them. Where possible and appropriate, any report will be shared in advance with the parent(s) / carer(s) – a recommended report format will be used. Catherine Stephenson in attendance will be prepared to contribute to the discussions at the conference. If a child is subject to a Child Protection or a Child in Need plan, the Designated Safeguarding Lead will ensure the child is monitored regarding their school attendance, emotional well-being, academic progress, welfare and presentation. If Therapeutic Teaching is part of the core group, Catherine Stephenson as the Designated Safeguarding Lead will attend and will provide appropriate information and contribution to the plan at these meetings. Any concerns about the Child Protection plan and / or the child's welfare will be discussed and recorded at the core group meeting, unless to do so would place the child at further risk of significant harm. In this case the Designated Safeguarding Lead will inform the child's social worker immediately and then record that they have done so and the actions agreed.

10. Allegations about members of the workforce

Therapeutic Teaching (Catherine Stephenson) shares a Relationship Policy with child and parents/carers to communicate and agree upon the expectations and boundaries of appropriate behaviour and conduct. The organisation works in accordance with statutory guidance in respect of allegations against an adult working with children (in a paid or voluntary capacity).

In Essex: Essex duty LADO (Local Authority Designated Officer) Telephone: **03330 139 797** and in Suffolk: Local Authority Designated Officers can be contacted for allegations against all staff and volunteers via Email on LADO@suffolk.gov.uk or LADO central telephone number **0300 123 2044**.

The organisation follows the SET procedures/ Suffolk guidance for reporting any concerns about a member of staff in the school (or any adult working with children). Any concerns about the conduct of a member of staff will be referred to the Headteacher (or the Deputy Headteacher in their absence) of the school the child attends. This role is distinct from the Designated Safeguarding Lead as the named person should have sufficient status and authority in the school to manage employment procedures. Staffing matters are confidential and the school operates within statutory guidance around Data Protection. Where the concern involves the headteacher, it would be reported direct to the Chair of Governors.

SET procedures (ESCB, 2018) require that, where an allegation against a member of staff is received, the Headteacher, senior named person or the Chair of Governors must inform the duty Local Authority Designated Officer (LADO) in the Children's Workforce Allegations Management Team on **03330 139 797** within one working day. However, wherever possible, contact with the LADO will be made immediately as they will then advise on how to proceed and whether the matter requires Police involvement. This will include advice on speaking to pupils and parents and HR. The school does not carry out any investigation before speaking to the LADO.

If a concern is raised about another professional involved with the child (outside of the school) then Therapeutic Teaching (Catherine Stephenson) will inform the duty Local Authority Designated Officer (LADO) in the Children's Workforce Allegations Management Team on **03330 139 797** within one working day.

11. Promoting positive mental health and resilience in Therapeutic Teaching

Therapeutic Teaching has the wellbeing and emotional and physical safety at the centre of its work with children and young people who have needs that impact on their engagement with school. The key aims of the work of Therapeutic Teaching is to develop the emotional wellbeing and resilience of all pupils engaged with the organisation, as well as provide support for parents and carers in understanding and responding to their child's need. Therapeutic Teaching understands that there are risk factors which increase someone's vulnerability and protective factors that can promote or strengthen resiliency. The more risk factors present

in an individual's life, the more protective factors or supportive interventions are required to counter balance and promote further growth of resilience. The [Relationship Policy](#) we have describes this in detail. It is vital that we work in partnership with parents to support the well-being of pupils involved with the organisation. Parents/carers should share any concerns about the well-being of their child with Therapeutic Teaching and the referring school/ LA, so appropriate support and interventions can be identified and implemented if within the role/remit of a complementary/alternative education provider.

12. Use of reasonable force

The term 'reasonable force' covers a broad range of actions used by school staff that involve a degree of physical contact to control or restrain children. The adult behaviours described in Therapeutic Teaching's [Relationship Policy](#) are employed to build a trusting relationship so that the child feels both psychological and physical safety in the presence of the teacher (Catherine Stephenson). The environment adds to this safety and every effort will be made to maximise the conditions for safety and wellbeing. Guidance detailed in [Keeping Pupils and Staff Safe](#) (ECC/ ESCB, 2018) is followed.

The document '[Positive environments in which children can flourish](#)' (Ofsted, 2018) sets out that staff should work 'positively and confidently' with children and find the least intrusive way possible to support, empower and them safe. It cites good practice as:

- *building relationships of trust and understanding*
- *understanding triggers and finding solutions*
- *if incidents do occur, defusing the situation and/or distracting the child wherever possible.*

Therapeutic Teaching (Catherine Stephenson) fully understands the 'Duty of Care' towards the children in her care. Therefore, if a child is likely to be at risk from harm in an emergency situation, action must be taken and this may include a physical intervention. Any action taken will be dependent on the level of risk and the assessment that is made at that moment in time. Where children show dangerous or harmful behaviour, identified with parents/carers and the referring school/LA through a risk assessment, then restrictive physical intervention may be considered as a strategy to manage harm.

There are circumstances when it is appropriate to use reasonable force to safeguard children and young people, such as guiding a child to safety or breaking up a fight. 'Reasonable' means using no more force than is needed to restore safety for the child. Therapeutic Teaching works in accordance with statutory and local guidance on the use of reasonable force (*see section 2*) and recognises that where intervention is required, it should always be considered in a safeguarding context.

13. Whistleblowing

Whistleblowing is 'making a disclosure in the public interest' and occurs when a worker (or member of the wider school community) raises a concern about danger or illegality that affects others, for example pupils in the school or members of the public. Therapeutic Teaching (Catherine Stephenson) is aware of the duty to raise concerns about the attitude or actions of staff or members of the public and would refer to the policy pertaining to the person's place of work or local police. If we feel unable to raise these concerns locally, then we would call the NSPCC whistleblowing helpline on: 0800 028 0285 (line is available from 8:00 AM to 8:00 PM, Monday to Friday) or email: help@nspcc.org.uk. Parents or others in the wider school community with concerns can contact the NSPCC general helpline on: 0808 800 5000 (24 hour helpline) or email: help@nspcc.org.uk.

Appendices:

Appendix A: Children and Families Hub flow chart

Appendix B: Essex Windscreen of Need and levels of intervention

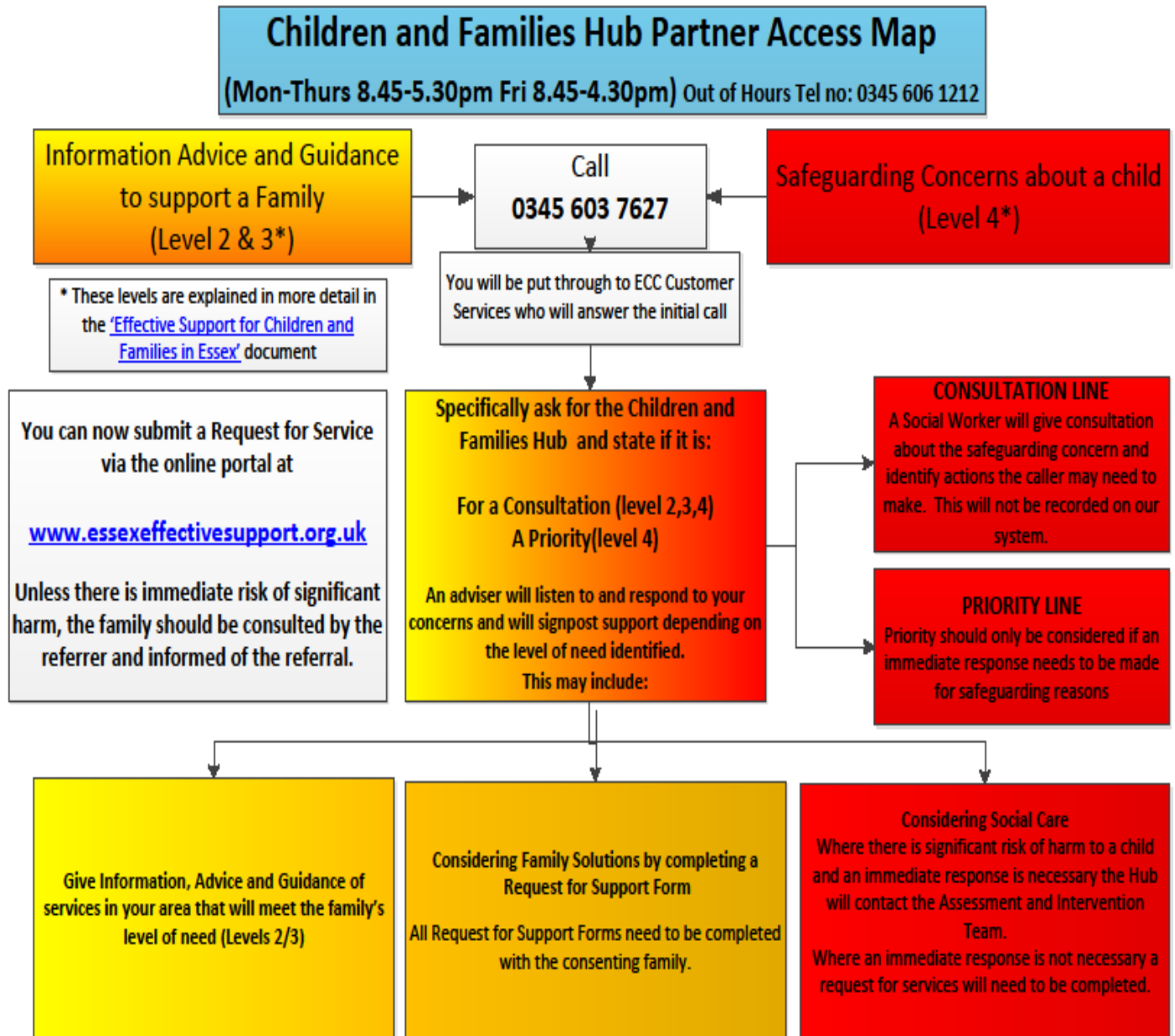
Appendix C: Designated Safeguarding Lead training certificate

Written: March 1st 2019

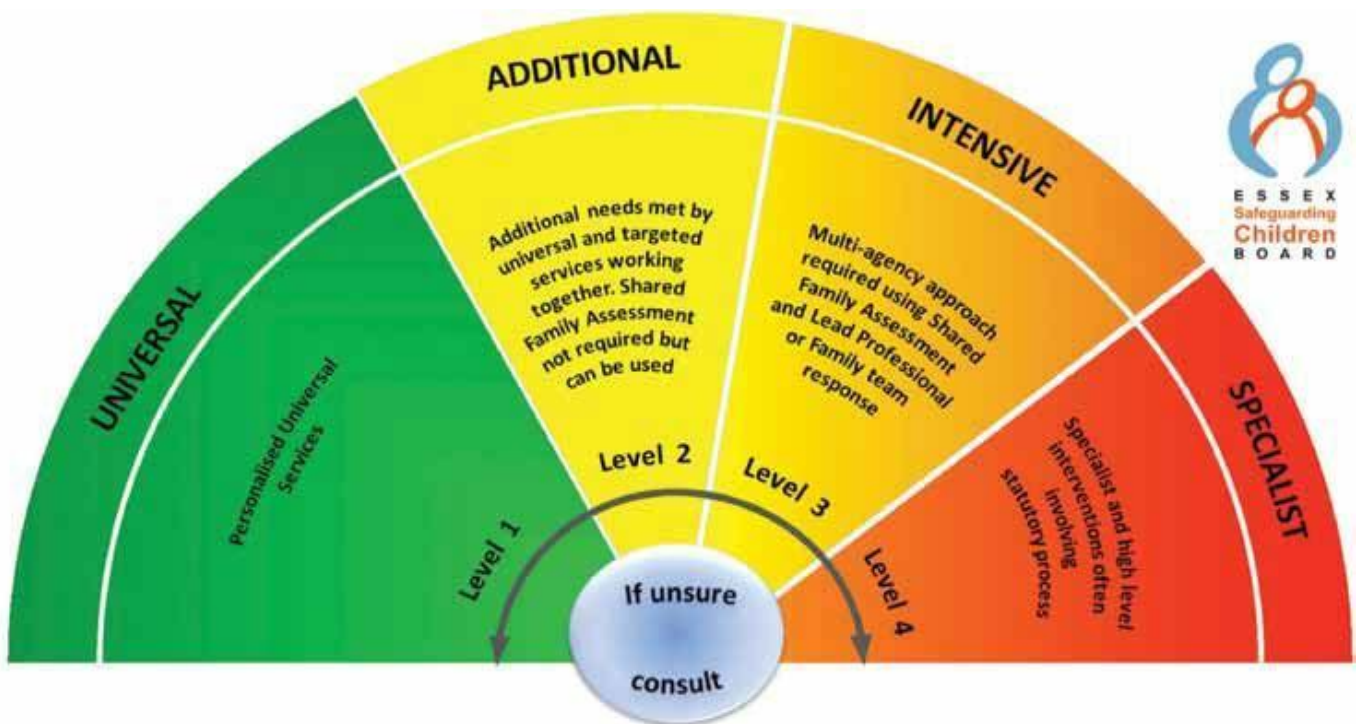
To be reviewed: February 2020

Catherine Stephenson (Therapeutic Teaching)

Appendix A: Children and Families Hub flow chart



Appendix B: Essex Windscreen of Need and levels of intervention



All partners working with children, young people and their families will offer support as soon as we are aware of any additional needs. We will always seek to work together to provide support to children, young people and their families at the lowest level possible in accordance with their needs

Children with **Additional** needs are best supported by those who already work with them, such as Family Hubs or schools, organising additional support with local partners as needed. When an agency is supporting these children, an Early Help Plan and a Lead Professional are helpful to share information and co-ordinate work alongside the child and family.

For children whose needs are **Intensive**, a coordinated multi-disciplinary approach is usually best, involving either an Early Help Plan or a Shared Family Assessment (SFA), with a Lead Professional to work closely with the child and family to ensure they receive all the support they require. Examples of intensive services are children’s mental health services and Family Solutions.

Specialist services are where the needs of the child are so great that statutory and/or specialist intervention is required to keep them safe or to ensure their continued development. Examples of specialist services are Children’s Social Care or Youth Offending Service. By working together effectively with children that have additional needs and by providing coordinated multi-disciplinary/agency support and services for those with intensive needs, we seek to prevent more children and young people requiring statutory interventions and reactive specialist service.

Appendix C: Designated Safeguarding Lead training certificate



Suffolk
County Council

Working together to safeguard children

This certificate is awarded to
Catherine Stephenson

Date(s) of attendance:
Thursday 28 February 2019

Learning Objectives
To understand our roles in the process of safeguarding children and young people and the importance of working together.

MULTI AGENCY



This document certifies that

Catherine Stephenson	Essex County Council
2018-05-16 09:26:17	
Reference Number: BHAQR1Y51526459986	
Completed the Prevent e-learning training course	
https://www.elearning.prevent.homeoffice.gov.uk	
This introductory training provides a foundation on which to develop further knowledge around the risks of radicalisation and the kinds of support available to those at risk.	