



Child Protection & Safeguarding Flow Chart
‘What to do if you are worried a child is being abused, at risk of harm or neglect’

Actions where there are concerns about a child’s welfare in and outside of school

- Be alert to signs of abuse, question unusual behaviour or changes to presentation.

Where a child discloses abuse, neglect, sexual violence, sexual harassment, online harm

- Listen to what they say, keep calm, reassure they are right to tell, and you will take action to help keep them safe.
- Inform them you need to share the information and what you are going to do next
- Do not promise confidentiality, you will need to share/ report the information to appropriate services.
- **DO NOT DELAY, take any immediate necessary action to protect the child and ensure the Designated Safeguarding Lead is informed or member of SLT in the DSL’s absence.**

Discuss concerns with the Snr Designated/Named Safeguarding Lead

- The Safeguarding Lead will consider further actions including consultation with Children’s Social Care/ MASH (if a new concern).
- Concerns and discussion, decisions and reasons for decision should be recorded in writing and a ‘confidential concerns’ or a ‘child protection’ file should be opened, stored in line with the school child protection policy. We use the CPOMS online system.
- At all stages the child’s circumstances should be kept under review and re-refer if concerned to ensure the child’s circumstances improve – **the child’s best interests must come first.**

Still have concerns - Refer to MASH (Multi-Agency Safeguarding Hub) Social Care
 Have child/families’ personal details to hand and be clear about concern/allegations. Complete referral form.

Safeguarding concern Resolved /no longer held
 Support has been agreed, record decisions and any follow up needed. actions.

MASH Tel: 0300 500 80 90
Consultation Line Tel: 0115 977 4247
 (Office Hours Monday to Friday)
 Where safe consider **Early Help Service**

If the child is at immediate risk dial 101 and ask for assistance
 Record all decisions and actions, working to agreed outcomes and within timescales. Escalate any emerging threats/concerns by adopting Nottinghamshire Safeguarding Children Partnership procedures.
www.nottinghamshire.gov.uk/nscp

Out of hours Emergency Duty Team
5.00pm –8.30am
Tel: 0300 4564546

NSPCC Whistle blowing
Tel: 0800 028 0285

Police Tel:101

Unmet needs identified
 Decide what actions are needed to support the child.

Consult with the child young person, family, and relevant agencies:
 Agree support, refer to NSCP guidance ‘Pathway to Provision’ version 9.1.

Contacts: For any allegations/concerns regarding an adult who works with (in either paid/voluntarily) employment with children contact the LA Designated Officer (LADO) for referrals Tel:- 0115 8041272. LADO Strategic Lead Tel: 0115 9773921
Cheryl Stollery – LA Safeguarding Children in Education Officer Tel:- 0115 8041047
This flow chart is a brief guide - Please refer to our School Child Protection Policy.

Appendix 2 – *to be used if CPOMS system cannot be accessed*



Case Record/Chronology

CONFIDENTIAL

Sheet Number:

Complete for all incidents of concern including where a 'logging the concern' sheet has not been completed. If one has been completed, then add a note to this chronology to cross reference (significant information may also be added).

Name:		
DOB:		Form:
Date	Information/Details of concerns or contact	Print Name and Signature

Appendix 3 - *to be used if CPOMS system cannot be accessed*



Logging a concern about a child's safety and welfare

Part 1 (for use by any staff)

Pupil's Name:	Date of Birth:	FORM:
Date and Time of Incident:	Date and Time (of writing):	
Name:		
Print	Signature	
Job Title:		
Note the reason(s) for recording the incident.		
Record the following factually: Who? What (if recording a verbal disclosure by a child use their words)? Where? When (date and time of incident)? Any witnesses?		
Professional opinion where relevant (how and why might this have happened?)		
Note actions, including names of anyone to whom your information was passed.		
Any other relevant information (distinguish between fact and opinion).		

**Check to make sure your report is clear to someone else reading it.
Please give this form to your Senior Designated Safeguarding Lead**

Part 2 (for use by the Senior Designated Safeguarding Lead (DSL))

<p>Time and date information received by DSL, and from whom.</p>		
<p>Any advice sought by DSL (date, time, name, role, organisation, and advice given).</p>		
<p>Action taken (referral to MASH/children's social care/monitoring advice given to appropriate staff/EHAF etc. with reasons.</p> <p>Note time, date, names, who information shared with and when etc.</p>		
<p>Parent's informed Y/N and reasons.</p>		
<p>Outcome</p> <p>Record names of individuals/agencies who have given information regarding outcome of any referral (if made).</p>		
<p>Where can additional information regarding child/incident be found (e.g. Pupil file, serious incident book)?</p>		
<p>Should a concern/confidential file be commenced if there is not already one? Why?</p>		
<p>Signed</p>		
<p>Printed Name</p>		

Appendix 4 - *to be used if CPOMS system cannot be accessed*



Body Map Guidance for Schools

Medical assistance should be sought where appropriate.

Body Maps should be used to document and illustrate visible signs of harm and physical injuries.

Always use a black pen (never a pencil) and do not use correction fluid or any other eraser.

Do not remove clothing for the purpose of the examination unless the injury site is freely available because of treatment.

***At no time should an individual teacher/member of staff or school be asked to or consider taking photographic evidence of any injuries or marks to a child's person, this type of behaviour could lead to the staff member being taken into managing allegations procedures, the body map below should be used in accordance with recording guidance. Any concerns should be reported and recorded without delay to the appropriate safeguarding services, e.g., MASH or the child's social worker if already an open case to social care.**

When you notice an injury to a child, try to record the following information in respect of each mark identified e.g. red areas, swelling, bruising, cuts, lacerations and wounds, scalds, and burns:

- Exact site of injury on the body, e.g., upper outer arm/left cheek.
- Size of injury - in appropriate centimetres or inches.
- Approximate shape of injury, e.g. round/square or straight line.
- Colour of injury - if more than one colour, say so.
- Is the skin broken?
- Is there any swelling at the site of the injury, or elsewhere?
- Is there a scab/any blistering/any bleeding?
- Is the injury clean or is there grit/fluff etc.?
- Is mobility restricted as a result of the injury?
- Does the site of the injury feel hot?
- Does the child feel hot?
- Does the child feel pain?
- Has the child's body shape changed/are they holding themselves differently?

Importantly the date and time of the recording must be stated as well as the name and designation of the person making the record. Add any further comments as required.

Ensure First Aid is provided where required and record

A copy of the body map should be kept on the child's child protection file.



BODYMAP

Completed at time of observation - *if CPOMS system cannot be accessed*

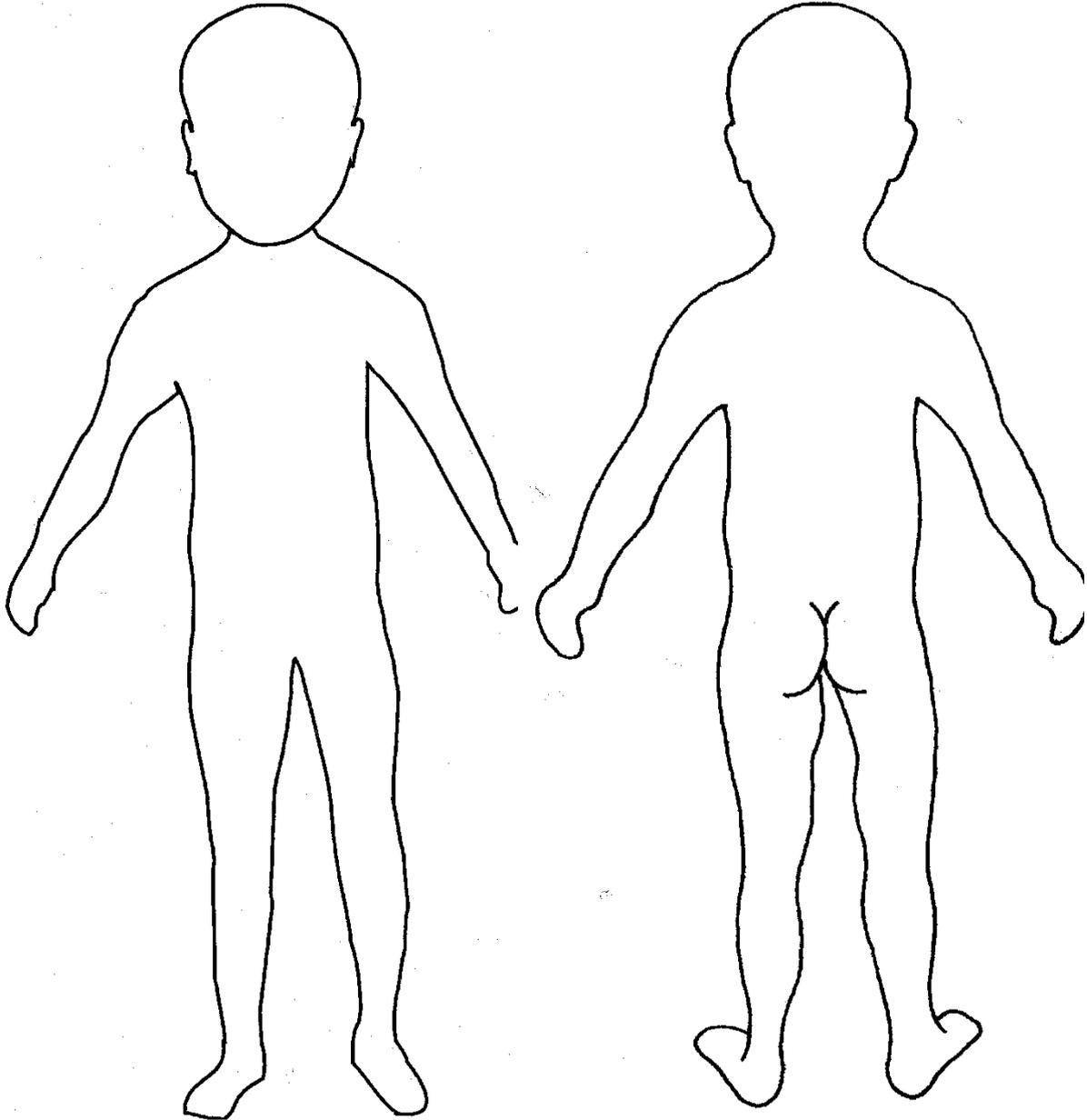
Names for
Child: _____

Date of
Birth: _____

Name of
Worker: _____

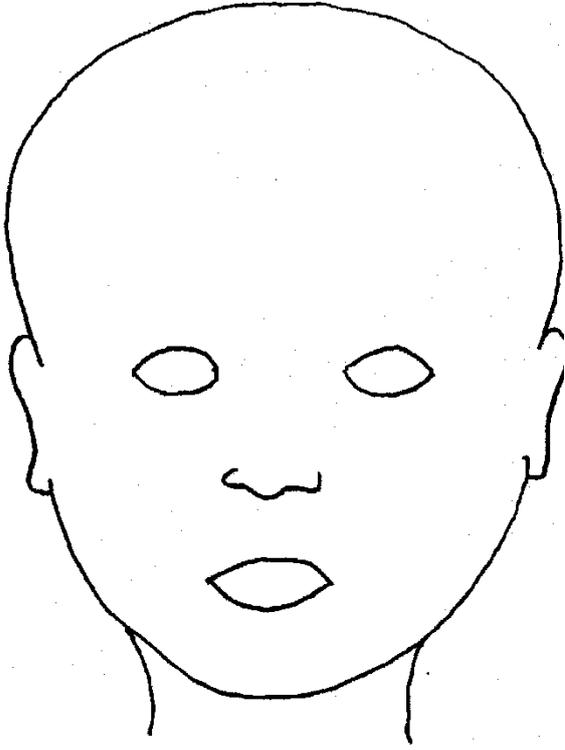
Agency: _____

Date and time of
observation: _____

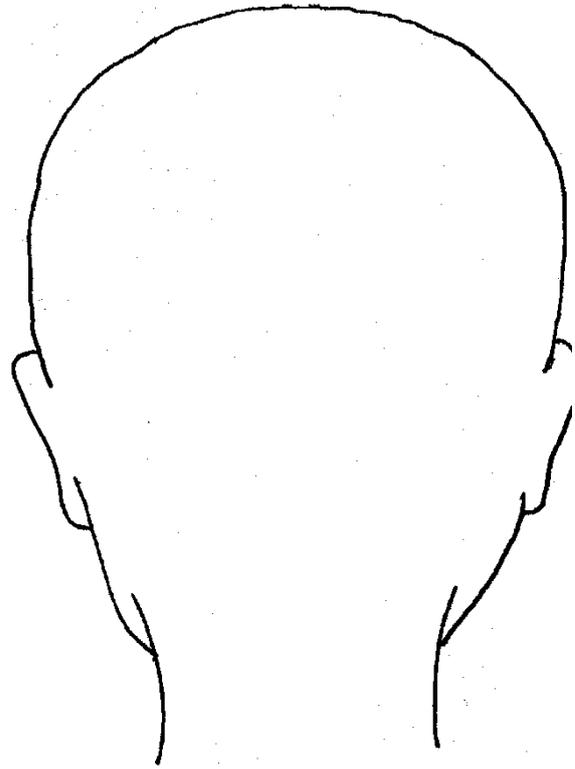


Name of
Child: _____

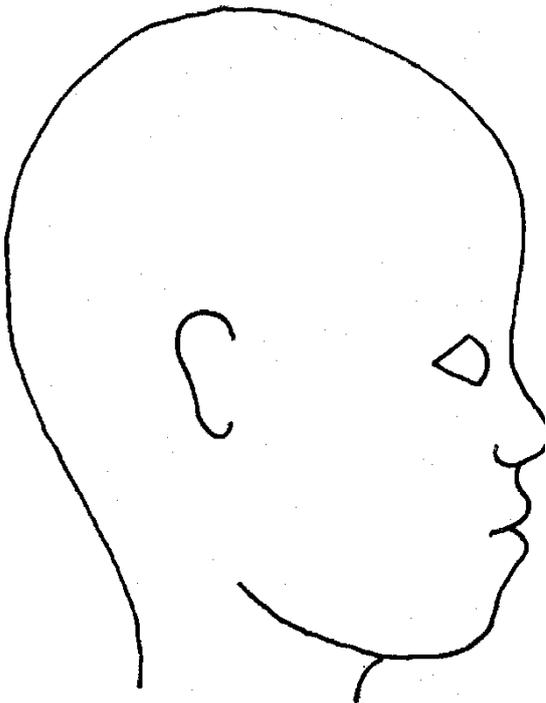
Date of
observation: _____



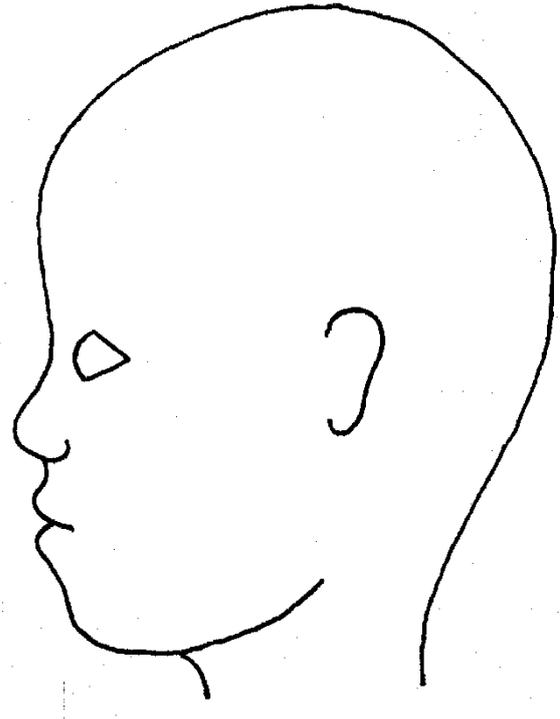
FRONT



BACK



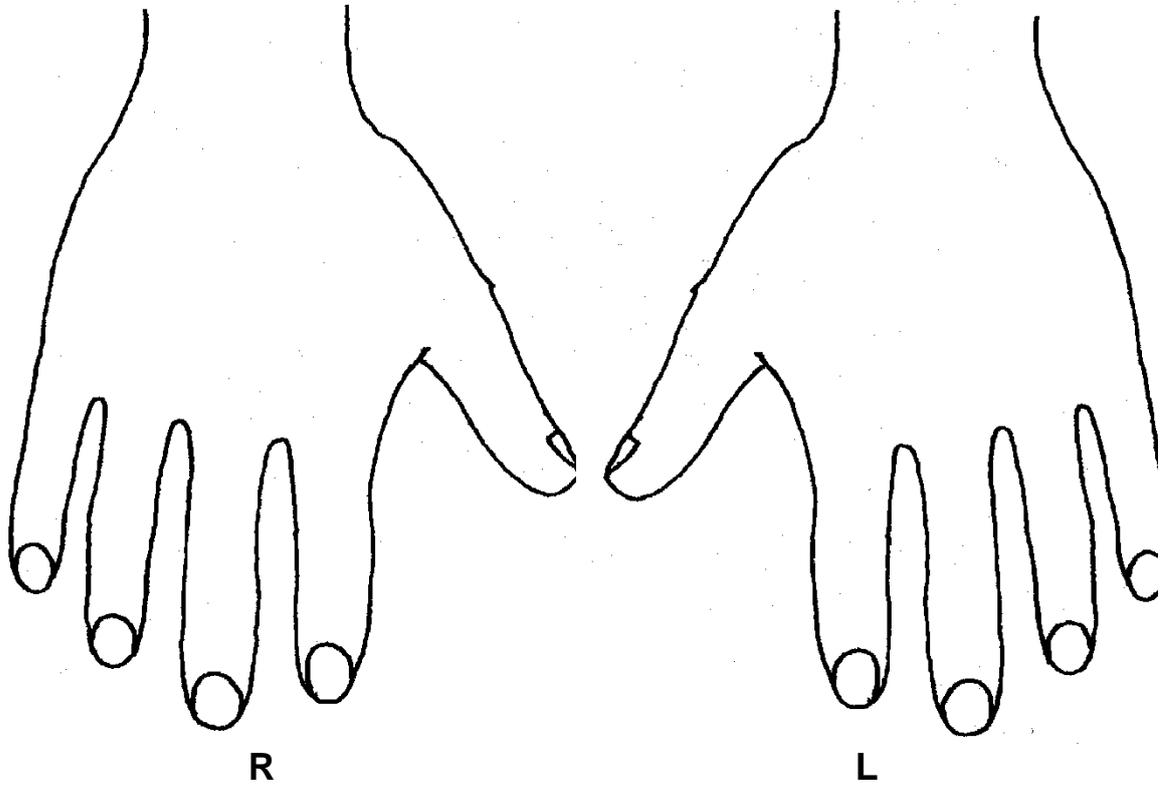
RIGHT



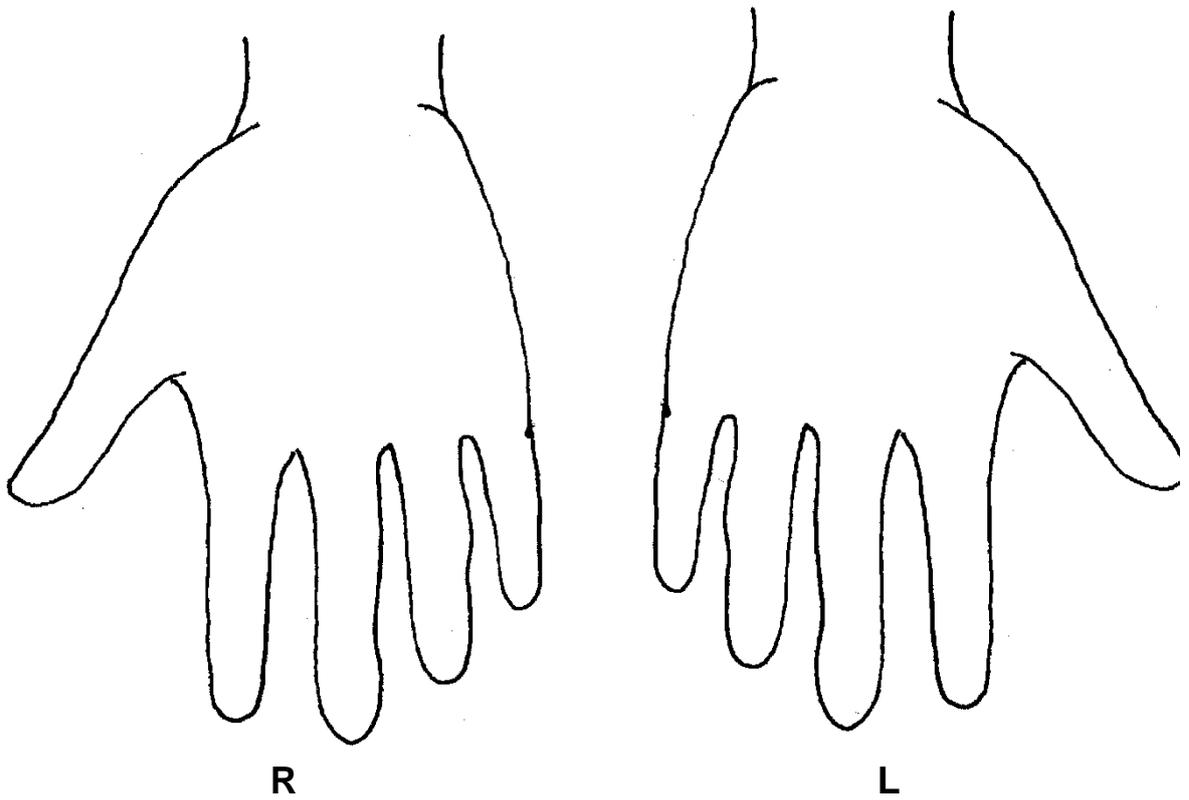
LEFT

Name of Child: _____

Date of
observation: _____



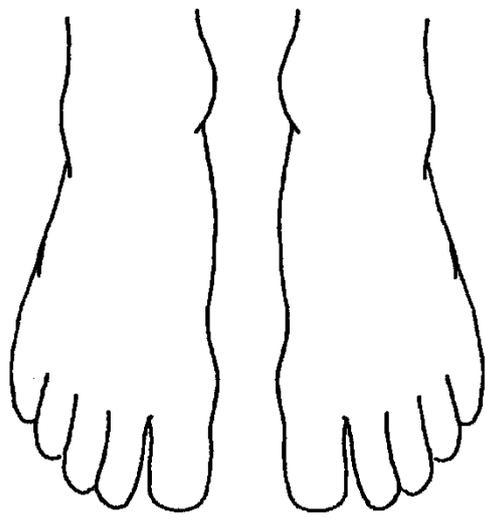
BACK



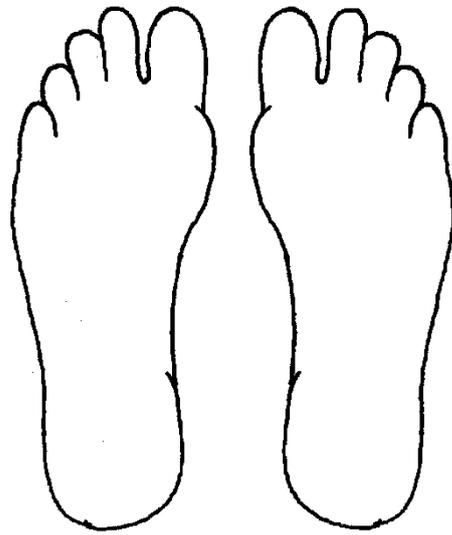
PALM

Name of
Child: _____

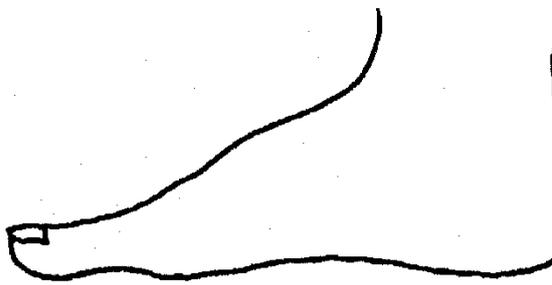
Date of
observation: _____



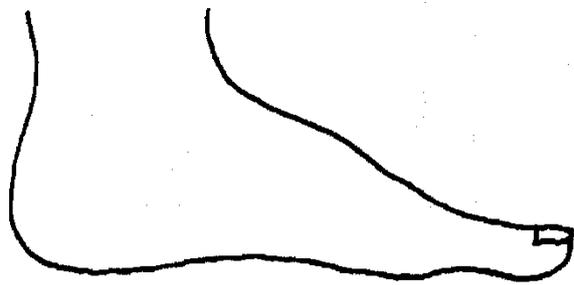
R TOP L



R BOTTOM L

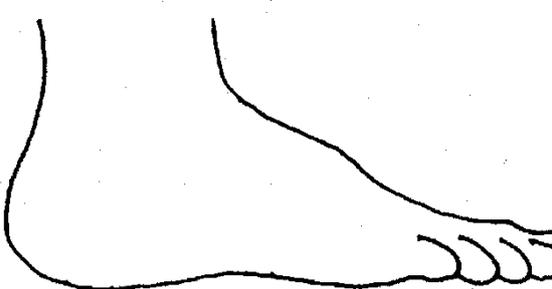


R



L

INNER



R



L

OUTER

Printed Name and
Signature of worker:

Date:

Time:

Role of Worker

Other information:

Appendix 5



Existing Injuries Form – Tool to support reflection *to be used if CPOMS system cannot be accessed*

The recording of injuries which children have sustained outside of a care or education setting, including the explanation given by the child, their parent or carer, plays a key role in identifying safeguarding concerns. Lessons from Child Safeguarding Practice Reviews tell us that the reflection which takes place alongside the recording is also key, particularly in identifying patterns to injuries.

This tool has been co-designed by practitioners who are dealing with these issues on a day-to-day basis. Whilst it is for each setting to determine how they discharge their safeguarding responsibilities, this tool is being made available to support you in the difficult work you do, with the aim of keeping our children safe.

Are there existing safeguarding concerns or Children's Social Care current or past involvement?	Yes / No Comments:
When was the last injury(ies)?	Date(s) and injury(ies)
Is this part of a pattern?	Yes / No Comments:
Is the explanation consistent with the injury?	Yes / No Comments:
- Is the explanation concerning or are there conflicting explanations?	Yes / No Comments:

- Interpretation of level of risk	Low Medium High
<p>Actions to be taken, either in response to the injury, or to reduce further risk.</p> <ul style="list-style-type: none"> - What, By who, By when 	
Referral to MASH Y/N	
Signed by....	Reviewed by (e.g., DSL)
Role....	Date....
Date	