



Real Group Ltd. Child Protection and Safeguarding Policy

Child Protection and Safeguarding Policy and Procedures

Updated Feb 2021

Introduction and statement of belief

Real Group Ltd and all subsidiary enterprises, including but not limited to, Real Psychology, the Professional Tutoring Partnership, Dyslexia Action, Dyslexia Guild and Real Training) believe all children and young people have the right to be protected from harm and to feel safe in all areas of their lives.

- We recognise the responsibilities and duty placed upon all staff working for and on behalf of Real Group to undertake all work related activities with a view to safeguarding and promoting the welfare of every child, young person and vulnerable adults that we work with in schools or other organisations and settings.
- We recognise that abuse may occur within all cultures, religions and social groupings and that we need to be sensitive to the many differing factors that need to be taken into account in respect of these, whilst never allowing them to excuse behaviour that may be harmful, detrimental or illegal with regard to those groups covered by this policy.
- We recognise that a child or young person who is abused or witnesses abuse or violence may find it difficult to develop and maintain a sense of self-worth, they may feel helpless and humiliated and may feel self blame. This can have consequences for their resilience, mental health and future life outcomes.
- We know that it is important that children and young people feel secure, are listened to in a sensitive and genuine way and feel that any concerns they raise will be heard and acted upon responsibly and professionally.
- Whilst this document at times refers specifically to Real Group psychologists and tutors, it applies equally to all Real Group employees whose work brings them into close or frequent contact with children and young people, with the broader principles applying to all staff regardless of their role or position.

All staff have a statutory duty to keep children safe and promote their welfare.

This policy and other relevant documents are highlighted to all staff during their induction / probation period and are available on the relevant sharing sites e.g. PeopleHR, Moodle based induction for tutors and the Real Group shared web drive for access at any time by all staff employed by or undertaking work on behalf of Real Group. Staff are reminded regularly through supervision and business meetings to be aware of these materials and company procedures and to raise any concerns / substantive issues, that arise during the course of practitioner or related work, to Real Groups child protection leads.

Real Group psychologists and tutors working with children and vulnerable groups (through their knowledge of this policy and through any training), are duty bound to report Child Protection concerns they have become aware of to the designated member of staff in schools or any other setting where they are working, and to agree with them what action will be taken (where appropriate). They will also make Real Group's Designated Safeguarding Lead (DSL) or deputy DSL (when the DSL is unavailable) aware of any concerns. In addition, they will subsequently enquire about the outcome of any actions agreed with school DSLs in such circumstances. In certain situations it may be appropriate to report concerns directly to the Local Authority Safeguarding Partnership team.

As a result of staff working in multiple Local Authorities they must make themselves aware of the systems for each of the Local Safeguarding Children Partnerships they work in as well as the contact details for the local Multi-Agency Safeguarding Hub (MASH) or other Local Safeguarding Children Partnership (LSCP) contact details including emergency out of hours contact details.

In terms of any actions taken by RG employees, the prime concern at all times must be the welfare and safety of the child. Where there is a conflict between the needs of the child and the parent/carer, the interests of the child must be paramount. (Children Act '89)

Aims of Policy

- To raise awareness for all Real Group staff and those providing services, of the need to safeguard all children and of their responsibilities in identifying and reporting possible cases of abuse.
- To protect all children who receive Real Group services from harm.
- To emphasise the need for good communication processes in matters relating to child protection and safeguarding
- To outline a structured procedure within the company that will be followed by all staff in cases of suspected abuse
- To promote safe practice and challenge poor and unsafe practice
- To develop and promote effective working relationships with clients, partners and commissioning schools / organisations with regard to all aspects relating to the safeguarding and promotion of the welfare of children and vulnerable groups.
- to provide staff and volunteers, as well as children and young people and their families, with the overarching principles that guide our approach to child protection.

This policy applies to anyone working on behalf of Real Group, including senior managers and the board of directors, paid staff, freelance staff, volunteers, sessional workers, agency staff and any students.

Legal Framework and Supporting Documentation

This policy has been drawn up on the basis of legislation, policy and guidance that seeks to protect children. A summary of the key legislation is available from <https://learning.nspcc.org.uk/child-protection-system>

Real Group takes seriously its responsibility to protect and safeguard the children and follows the guidance of:

- “Keeping Children Safe in Education” September 2020
(<https://www.gov.uk/government/publications/keeping-children-safe-in-education--2>)
- “Keeping Children Safe in Education” September 2020; update - January 2021 (Post EU exit)
(https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/954314/Keeping_children_safe_in_education_2020_-_Update_-_January_2021.pdf)
- “Working Together to Safeguard Children” July 2018
(https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/779401/Working_Together_to_Safeguard-Children.pdf)
- “Guidance for Safer Working Practice for those working with children and young people in education settings” May 2019
(<https://www.saferrecruitmentconsortium.org/GSWP%20Sept%202019.pdf>)
and addendum in response to Covid-19 supplement produced in April 2020
(<https://www.saferrecruitmentconsortium.org/GSWP%20COVID%20addendum%20April%202020%20final-1.pdf>)
- “Information sharing Advice for practitioners providing safeguarding services to children, young people, parents and carers” July 2018
(https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf)
- “What to do if You are Worried a Child is Being Abused” 2015
(https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)
- Children and Families Act 2014.
(<https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>)
- Sexting in schools and colleges: Responding to incidents and safeguarding young people
(https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/759007/6_2939_SP_NCA_Sexting_In_Schools_FINAL_Update_Jan17.pdf)

Definitions

Safeguarding children means:

- Protecting children from maltreatment.
- Preventing impairment of children's mental and physical 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.

Child

A child is defined as anyone who has not yet reached their 18th birthday, including unborn children right up to teenagers.

Definitions of Abuse

The indicators and definitions of types of abuse and neglect are broadly defined below:

Abuse: a form of 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 by another child or children.

Physical abuse: a form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

Emotional abuse: the persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

Sexual abuse: involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include

non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children. The sexual abuse of children by other children is a specific safeguarding issue in education (see paragraph 29 of KCSIE).

Neglect: the persistent failure to meet a child’s basic physical and/or psychological needs, likely to result in the serious impairment of the child’s health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child’s basic emotional needs.

There also needs to be consideration of wider and specific forms of abuse, including but not limited to; Child Sexual Exploitation, Child Criminal Exploitation, Serious Youth Violence, Youth produced sexual imagery (known as sexting), Femal Genital Mutilation, Preventing Radicalisation/The Prevent Duty, child on child abuse (see Annex A in KCSIE).

Roles and Responsibilities of RG DSL and deputy DSL

Dr Mark Turner is the Designated Safeguarding Lead, with:

- **Dr Richard Lewis** as deputy DSL for Real Group, Real Psychology and all other organisations and individuals operating within and in association with Real Group.
- **Siobhan Mellor** is deputy DSL for Real Group and work undertaken through the Professional Tutoring Partnership as well as all other organisations and individuals operating within and in association with Real Group.

Their contact details are:

Dr Mark Turner

Dr Richard Lewis

Siobhan Mellor

The DSL responsibilities include:

- being alert and recognising any child safeguarding issues
- raising and sharing concerns they may have about a child
- recognising when it is appropriate to make a referral to social care and contacting them when necessary
- where necessary; contributing to any plans and decisions regarding a child
- understanding the importance of safer recruitment
- participating in regular training and ensuring that their knowledge is up to date

- ensuring other staff members are trained adequate in safeguarding procedures and follow correct practices
- challenging poor safeguarding practice in the workplace
- maintaining accurate and secure records.

The deputy DSL holds the same responsibilities and is an additional point of contact when the DSL has not been able to be the first point of contact, as well as undertaking the lead in deputised duties such as; policy updates, safer staffing recruitment, monitoring and sourcing of staff training.

Procedures

All staff working for Real Group are expected to recognise the signs and symptoms that indicate possible abuse and to be able to make referrals to the appropriate local DSL in the setting, within Real Group or to the local MASH / local Safeguarding Children Partnership where appropriate.

Disclosure

Note that where a child makes a disclosure to a psychologist or tutor during their work with them; then it would usually be most appropriate for the psychologist or tutor to make the referral in collaboration with the appropriate DSL. In such situations of disclosure the team member should remember to respond thoughtfully and sensitively, remembering to;

- **be calm and level headed:** don't let your emotions take over and allow the child to see that you may be feeling panicked, angered or shocked. appearing calm and relaxed will encourage the child to trust you.
- **reassure the child:** let them know they were right to tell you, tell them that they're not to blame and thank them for being brave.
- **listen well:** give the child the chance to speak, don't rush them and listen carefully to everything that they say. This is vital as you'll need to record their disclosure later on if not possible at the time.

You should **avoid:**

- making promises or keeping secrets: don't promise the child that you'll keep their disclosure to yourself or make promises you won't be able to keep. Say that you're going to get help from someone else as it's your responsibility to keep them safe
- making assumptions about what the child is experiencing or incline disbelief
- asking leading questions and 'put words into the child's mouth'
- describing the potential abuser using negative words; they may be someone the child loves
- posing too many questions in an interview approach; it is the responsibility of social care or the police to find out more information

See **Appendix I for Safeguarding Concern Form and body map** that you should fill out in such circumstances. Note you may be required to use the setting specific form if they are taking the first point of contact DSL role; in which circumstances you need to cross

reference to ensure details from the RG form are all present as all those details will be required by the RG DSL on one or both forms as necessary.

Referral

The majority of cases concerns that warrant a referral to local Children's Services are likely to emerge or be clarified through consultation or ongoing work with staff in schools and/or other establishments that a child attends. This would include particularly the setting designated member of staff for child protection. In such circumstances it would be more appropriate for the relevant member of staff in the school or other establishment to make the referral where they have evidence that may well relate to the suspected abuse. The RG Psychologist / tutor would be responsible for giving a clear view on the need for a referral and agreeing with the setting when and who would do this. The Real Group DSL or deputy DSL should be kept informed of all such situations.

It is the RG staff member's responsibility in situations where there might be a significant risk to check and ensure that information has been passed on within the setting and that a referral has been made as appropriate. This might be done for example by phoning the designated person / referrer to enquire how things have progressed or contacting the MASH/LSCP. In clear cases of significant current risk, this would need to be all carried out on the same day.

Where concerns have been raised as part of a multi-agency meeting, then it would be good practice to collectively decide who should carry out any agreed action such as a referral, and who will support the referrer.

Referrals to the relevant MASH or LSCP should be made within one working day of the concern being recognised. Urgent referrals should be made immediately, and wherever possible in consultation with the Real Group DSL or deputy DSL.

Any concerns and action taken in response to concerns must be recorded and stored securely in the child's case file and kept updated. A record of discussions with management, supervisors, DSLs and any other parties related to the case must be kept.

Advice

Where a RG psychologist, tutor or general staff member is uncertain of the issues or actions that should be taken in relation to a piece of casework then these concerns should be discussed with the line manager and/or DSL or deputy DSL as soon as possible. Be aware that it may not be appropriate to wait for a scheduled supervision session to discuss such concerns, depending on the issues.

There can be wider issues that impact on children's well being and mental health (note mental health problems can be an indicator a child is at risk of suffering abuse, neglect or exploitation). There are those which may be categorised more broadly under the category of safeguarding, there is Additional Advice and Support Links available from page 94 to 96 of the KCSIE 202 document. Note these factors may for example contribute to poor or non-attendance at school, and staff should be alert to these as part of ongoing casework, alongside consideration of causal factors that might include:

- having been the victim of bullying or other crime, leading to fear of school;
- other anxiety or complicating issues related to home circumstances;
- young carer responsibilities;
- drugs and substance misuse

Psychologists have a responsibility to raise such issues with a relevant member of staff within the school or other setting, and where appropriate with other agencies.

Local threshold guidance can be accessed for the area in which the child resides and can be a source of support for the DSL and staff member to make a decision as to the appropriate next steps.

Child Protection Conferences, Core Groups contribution to Early Help Assessment, Child's Plan or Child Protection Plans

RG staff including DSLs will attend Child Protection meetings where there are clear grounds for them doing so (e.g. a disclosure has been made to them during the course of an assessment), or when there is an agreement with the client or commissioner that this would be helpful and that suitable remuneration / expenses have also been agreed, where appropriate. In other circumstances written submissions of involvement may be sufficient. These considerations would also apply to subsequent Team around the Child or similar meetings. In all instances, RG Psychologists will be governed by British Psychological Society's (BPS) code of conduct and ethical principles with regard to child protection. In general these are likely to accord with company policy, but any issues that may arise where for some reason these are in conflict should be raised by any involved party to be negotiated / resolved through discussion with management.

Multi agency working, information sharing and working in partnership with parents and carers

There is considerable evidence that Child Protection and Safeguarding is most effective when agencies work cooperatively together and in partnership with families. Appropriate information sharing is a key element to successful partnership working. RG staff will share information with relevant colleagues when appropriate to ensure a child is kept safe from harm and to assist with child protection investigations. Information will be shared in other circumstances when necessary with consent from the child (dependent on age and understanding) and their parent or carer. KCSIE 2020 provides a reminder that data protection is not a reason not to share information for safeguarding purposes; 'safeguarding of children and individuals at risk' is a processing condition that allows you to share special category data. For further guidance see the 7 golden rules contained with the Information sharing; Advice for practitioners providing safeguarding services to children, young people, parents and carers. Note when acting only on the advice of the statutory agency, if there are indecent images that form part of the evidence; do not view or share such image.

Safer Recruitment

All recruitment for Real Group psychologists and tutors or other staff coming into direct contact with children will be subject to appropriate, for the role, safer recruitment

procedures including an Enhanced DBS with barred list check. Overseas applicants, those who have worked abroad will be checked following Home Office guidance [GOV.UK](https://www.gov.uk); and obtaining a letter of professional standing from the professional regulating authority where appropriate (Advice about which regulatory or professional body applicants should contact is available from the National Recognition Information Centre for the United Kingdom, UK NARIC).

Psychologists will be interviewed and a candidates understanding of safeguarding issues and procedures and their motivation for working with children and young people will be tested at interview, and any gaps in employment questioned.

References will always be taken up and qualifications checked and relevant gaps in employment will be explored. It is the responsibility of the Real Group staff member to ensure that personal DBS checks are carried out regularly and at intervals of no more than two years. To aid the DSL to be accountable for ensuring this takes place a central record will be kept and it is the responsibility of the DSL to ensure this list is monitored and is up to date. As psychologists are unable to practice without a valid and up to date DBS check, Real Group will fund such checks as a legitimate business expense.

Concerns and Allegations

All Real Group staff have a duty to raise legitimate concerns re the conduct of colleagues in the service, other sections or schools or other settings, especially in relation to poor or unsafe practice, and to expect that managers will deal with these issues sensitively and appropriately.

Any referrals received relating to a CP allegation (or potential allegation) about a member of staff, either in the service or another section of Real Group should be passed straight to Real Group DSL. Where concerns have been raised by school staff or other client organisation, in the first instance the RG Psychologist should seek to raise these with a member of the management in that school, usually the Headteacher. If for some reason that is not possible then the issue should be discussed with the RG DSL to consider appropriate further actions.

Individual Interviewing of young people

Psychologists and tutors / staff working in one to one situations with children and young people may be vulnerable to allegations made against them. RG staff should recognize this possibility and plan and conduct such meetings accordingly. Every attempt should be made to ensure the safety and security needs of both staff and pupils are met.

There are often limited choices available for quiet workspaces in schools. However wherever possible staff should:

- *avoid meetings with pupils in remote, secluded areas of school, and would be entitled to decline to work in circumstances that may put them at risk*
- *ensure there is visual access and/or an open door in one to one situations*
- *assess the need to have a member of school staff present or close by*

- *avoid use of 'engaged' or equivalent signs wherever possible. Such signs may create an opportunity for secrecy or the interpretation of secrecy*
- *always report any situation where a child becomes distressed or angry to a member of the school staff and to a senior colleague as soon as is practical*
- *consider the needs and circumstances of the child/children involved.*

Extra caution may be required where it is known that a child has suffered previous abuse or neglect. In the child's view, physical contact might be associated with such experiences and lead to staff being vulnerable to allegations of abuse. It is recognised that many such children are extremely needy and initiate inappropriate physical contact. Should this occur RG staff should deter the child sensitively by helping them to understand the importance of personal boundaries, and if necessary remove themselves from the situation as soon as is feasible and alert other members of staff or other responsible adults in the vicinity.

The general culture of 'no / minimal touch' should be adapted in all interactions with children and young people.

Training and supervision

Real Group will ensure that all staff are given the opportunity to attend or access face to face or on-line appropriate training in Child Protection and wider safeguarding issues, in order to ensure that they have the necessary skills and knowledge to deal appropriately with any issues that may arise on individual cases, and to be able to provide consultation advice where necessary to colleagues in education or other settings.

Psychologists will have regular supervision from a suitably qualified practitioner and also a clear line management relationship within Real Group. All cases of lower level concern or any case where there are possible child protection issues should be discussed in supervision as well as any issues of a more general nature that the psychologist has encountered in their work relating to child protection or safeguarding. Supervision records should be kept in line with general BPS good practice and in situations relating to specific individuals; a note of the discussion should be made in the child's file.

Whilst opportunities for safeguarding training / CPD from time to time will be highlighted by Real Group management, individual Psychologists will also have a responsibility to identify their own needs for additional training and ensure they attend courses relevant to their responsibility to keep their knowledge base in this area up to date. Any possible training needs in this area should be discussed in supervision or with line management.

Review

The procedures contained within this policy will be monitored through supervision / line management. The policy will be reviewed yearly.

Appendix I - Safeguarding Concern Form

This form should be completed when there is cause for concern and given to either the Designated Safeguarding Lead in the setting (and copied for the RG DSL) or to the RG DSL as soon as possible.

Your information	
Name	
Post	
Contact number(s)	
Email	

Personal information – child / young person					
Name				Date of birth	
Gender	Male ..	Female ..	Non-binary ..	Another description (please state) ..	
Ethnicity					
Setting:					
Is there any information about the child that would be useful to consider?					

Contact information – parent / carer		
Name(s)		
Address		
Contact number(s)		
Email		
Have they been notified / involved in a discussion?	No ..	Please explain why this decision has been taken
	Yes ..	Please give details of what was said / actions agreed

Do these concerns relate to a specific incident/disclosure?

if YES complete Section A:

if NO, omit section A and move straight to Section B

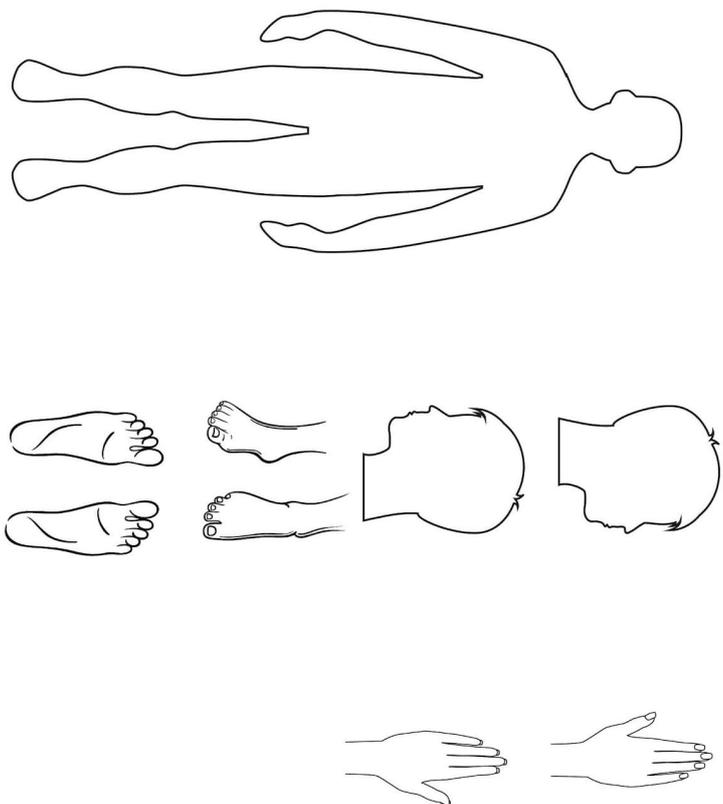
Section A	
Date and time of incident/disclosure	
Location and context of incident/disclosure	
Date this form was completed	
Other persons present	

Section B	
<p>Details of concern / disclosure / incident :</p> <p>(what was said, observed, reported)</p>	
<p>Action taken:</p> <p>(what did you do following the incident / disclosure / concern?)</p>	
<p>Any other relevant information:</p> <p>(historical information, professionals involved, risks, EAL?, parental / carer needs or difficulties)</p>	
<p>Signed:</p> <p>Date:</p>	

* Attach a separate sheet if more space is required (e.g. multiple witnesses).



Child Protection Body Map



Name Of Child

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Date Of Birth

.....

Name Of Worker

.....

Date Recorded

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Observations

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.....

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Appendix II - DSL response to Safeguarding concern received

DSL Response	
Action taken by DSL:	
Rationale for decision making / actions taken:	
Outcomes of action taken by DSL:	
follow up action by DSL:	
Feedback given to person reporting the concerns:	
Signed: Date:	

Checklist for DSL:

- Concern described in sufficient detail?
- Distinguished between fact, opinion and hearsay?
- Child's own words used? (Swear words, insults or intimate vocabulary should be written down verbatim)
- Jargon free?
- Free from discrimination/stereotyping or assumptions?
- Concern recorded and passed to DSL in a timely manner?
- Remember to check the LSCP website for local protocols, arrangements or specific forms necessary to fill in.

- Expect a response within a day to a written referral and if no acknowledgement, contact the team again.