

Safeguarding Review Report		Date review completed: 10.11.2022
Name of school: Glyne Gap School		
School Self-Assessment: <ul style="list-style-type: none"> The school's self-assessment of practice aligns with the findings of this review 		
SLES Evaluation: <ul style="list-style-type: none"> <u>Pupils are safeguarded well at this school.</u> Some areas for development have been identified and are outlined in the main body of this report. The leadership team should identify how these can be implemented. 		
School Data <ul style="list-style-type: none"> Overall attendance: 21/22 - 88% 22/23 to date - 90% Persistent absence: 21/22 - 27%. As discussed with HT, this data is highly unreliable due to the needs of the cohort (see notes below) Looked After Children: 13 Children on a Child Protection Plan: 2 Children on a Child in Need Plan: 3 Children on Early Help: 2 		
Reviewers <ul style="list-style-type: none"> Caitlin Yapp - Safeguarding Consultant Angie Wellman - Safeguarding Consultant 		School personnel seen within the review <ul style="list-style-type: none"> Kirsty Prawanna: Headteacher; DDSL Jayne Gosling: Assistant Headteacher; DSL DSL Debbie Clark: TLR Post Holder-Medical Barbara Clarke: Assistant Headteacher; DDSL Beverly Smart: School Business Manager Mike Sellens: Site Manager Ian Dove: School Business Management Assistant Jodie Hearne: Teaching Assistant Mary King: Class Teacher Elisabeth Lawrence: Safeguarding Governor
Documents seen <ul style="list-style-type: none"> Safeguarding and child protection policy Prevent policy and risk assessment Anti-bullying policy Supporting students with medical needs policy Behaviour policy Online safety policy Staff code of conduct Staff induction checklist (where aspects of the safeguarding induction are listed) DSLs training certificates Safer Recruitment training certificate Safeguarding governor certificate of training specific for this role Managing Allegations training certificate for the Headteacher and Chair of Governors Appropriate training certificates for staff involved with first aid or the administering of medicines Evidence that all staff have read part 1 and Annex B of KCSiE (an electronic register or sign sheet) Minutes of governor meetings where safeguarding is detailed. 		
Activities undertaken This review is based upon observations made during the day of the review, drawn from: Speaking with <ul style="list-style-type: none"> Staff and governors, with specific safeguarding responsibilities, in prearranged meetings. Other staff, in unplanned meetings, throughout the review day. A group of children in a prearranged meeting. 		

<ul style="list-style-type: none"> • Other children throughout the review day. <p>Reviewing</p> <ul style="list-style-type: none"> • Policies and procedures. • Safeguarding records. • Plans for individual children: medical, behaviour (including the use of physical interventions), risk reduction etc. <p>Observing</p> <ul style="list-style-type: none"> • Features of the school premises. • Routines at the start and end of the school day. • Provision at break and lunchtimes.
<p>School personnel present at feedback Kirsty Prawanna - Headteacher; DDSL Jayne Gosling - Assistant Headteacher; DSL</p>
<p>School comment The review day was a supportive process and affirming of good practice. It helped to highlight areas/opportunities for further development. My next steps are to create an action plan and present this to Governors next term. Jayne Gosling DSL</p>
<p>Governor comment</p>

Areas for immediate action

Agreed action	By Whom	By When	Impact (Measurable outcomes)
No immediate Actions have been identified			

Detailed Findings

This section of the report lists the positive areas of practice identified, along with any areas for development. Unless an area for development also features within the immediate action table above then this should be considered a target for achieving best practice and the timescale and priority for this should be determined by the school leadership team and the governing body.

<p>1) Leadership and Management The school has clearly defined roles, responsibilities and structures to ensure that safeguarding is effective. Practice is underpinned by informative and up-to-date policy. Robust governance holds the school to account.</p>
<p>Positive observations:</p> <ul style="list-style-type: none"> • The school presented an accurate and detailed evaluation of their safeguarding provision • The Designated Safeguarding Lead (who has returned to post in the last term) is passionate, proactive, and driven, ensuring that safeguarding systems and processes are embedded across the school and staff are confident in using these. • The lead DSL role was delegated to other members of the SLT during the lead DSL’s maternity leave, but an effective handover and clear systems ensured that the oversight of safeguarding was not compromised

- The school has access to supervision delivered by an experienced safeguarding practitioner who supports the DSL in their role and provides challenge and continued professional development.
- The school has produced a paper titled ‘Safeguarding Team Shared Working Protocol’ which highlights the role of the DSL alongside that of the DDSLs as well as the rest of the staff across the school. It also highlights key meetings which are scheduled throughout the year. This is a useful and helpful reference document for all staff but particularly those joining the school and would be helpful as an induction document.
- The SDP highlights safeguarding as intrinsic in school development under Leadership and Management - foci for year beginning 2022 include Online Safety, Behaviour and MHEW of staff, and RSE for identified pupils.
- There is a shared responsibility for contributing to the safeguarding audit with the lead DSL having oversight of the action plan.
- The Safeguarding Governor is a DSL in a neighbouring mainstream secondary setting and provides both support and challenge.
- The Safeguarding Governor commented on the commitment of the DSL to the role, and how her forensic approach to the analysis of concerns and actioning was commendable.
- The Safeguarding Governor emphasised how helpful the detailed safeguarding reports were but also indicated how, as part of the safeguarding committee, these reports were discussed at length in preparation to being presented at full governing body meetings thereby evidencing how the safeguarding committee were further scrutinising school practice.
- The school’s safeguarding reports to governors are comprehensive highlighting evidence of good practice as well as lessons learned when safeguarding concerns have been raised.
- Governor minutes evidence challenge and appropriate questioning to the senior leadership team.

Areas for further consideration:

- The school has already highlighted those areas which the school needs to prioritise specifically around online safety for those students in their post 16 provision.
- The school’s current model of support and provision for those pupils presenting with the most complex medical needs is unlikely to be sustainable as school leadership and management arrangements evolve. Therefore, there is a need for support to consider how this can be taken forward and whether this qualifies for input from health colleagues.

Policy Review (Positive observation and areas for development combined)

Safeguarding and Child Protection:

- Bespoke policy which captures the context of the school and its population.
- Double check appendix 3 - child on child- ensure all elements have been updated. Specifically, HSB references to reflect updated guidance from East Sussex.
- Appendix 5 - update with latest guidance e.g., 4 ‘Cs rather than 3 ‘Cs.
- Managing Allegations flow chart is absent from the school’s policy.
(Advise that the school refer the ESCC model policy)

Prevent strategy & Prevent Risk Assessment:

- This is referenced in the Safeguarding and Child Protection Policy.
- Risk assessment is completed using template from The Key; review date 31/09/2023.

Supporting pupils with medical needs policy:

- Refers to risk assessments for pupils with for tracheostomies and high intensity low impact needs.
- Policy is very comprehensive and a helpful guide to practice in schools which needs to be referred to by staff.
- 5 Rs are helpful giving an at a glance reference to staff when administrating medication in order to avoid errors.

Behaviour Policy: ‘Supporting Positive Behaviour and Good attitudes’ - includes reference to anti bullying

- Refers to school training in 2016 /2017 - and in discussions it was made apparent that training takes place on a regular basis. It may be more helpful to include a statement that refers to staff training being updated annually or reference as to when training and updates are completed
- Policy acknowledges how behaviour is monitored in relation to specific groups to ensure appropriate level of support is put in place.

Online Safety policy:

- This was not seen on the day of visit

Staff Code of Conduct:

- Staff behaviour policy forms part of school code of conduct.
- Lists Amanda Glover as the LADO; update to ensure that the name of the current LADO is shown.
- Resembles an earlier version ESCC staff code of conduct policy; The school is advised to review current model policy on Czone to ensure key information is included.
- With reference to whistleblowing and sharing concerns. Consider whether the addition of reference to ‘Low Level concerns’ would be appropriate here as per KCSiE guidance, and to link with current Safeguarding and Child Protection Policy.

2) Practical Implementation

The school provides a safe environment for all.

Positive observations:

- The school’s site is secure. There is a continuous perimeter fence. New electronic gates (with an air lock feature) have enhanced security.
- These gates are locked during the school day; entry is remotely controlled from reception.
- Most pupils arrive by vehicles including school minibuses and taxis.
- ‘Home James’ taxis provide transport for a significant number of Glyne Gap’s pupils. The movement of their vehicles on and off the school site at the beginning and end of the school day is managed effectively and carefully.
- Staff are proactive in meeting vehicles to ensure the safe arrival and dispersal of pupils.
- The start to the school day was calm and orderly.
- The site manager undertakes a thorough check of the site every day.
- The school’s reception area is immediately beyond its front door. This (and a holding area before the front door) provides a further level of security for pupils, staff, and visitors.
- Visitors are required to sign in upon entry to the school; ID checks are undertaken.
- Lanyards are provided to ensure all visitors can be identified when on site.
- Visitors are advised who the DSL is when they sign in, and a leaflet with safeguarding information is provided.
- The school has a lockdown procedure in place.
- Supervision levels are high throughout the school. This was evident at lunchtime, for example.
- The school supports older students with developing independence. A framework of risk assessment is used to ensure that appropriate control measures are in place to support pupils’ safety. Pupils’ use of mobile phones, for example, is risk assessed (they have restricted call settings) to allow them to travel independently on the bus to their site.
- The school’s external environment features surfacing that support children’s needs.
- Play equipment is monitored regularly.
- The school has a swimming pool to which access and egress are managed carefully. Risk assessments are in place for its use.
- The school has access to the nursery which is on the adjacent Pebsham site. The reviewer visited the nursery which has a secure entrance.
- Many doors are accessed via staff swipe cards. The external door by S1 is now a swipe card operated door, controlling entrance and exit.

- There is a detailed safeguarding noticeboard in the staffroom which provides accessible information. There is information regarding using CPOMs and a dedicated device for recording a concern in the staffroom.
- Robust arrangements are in place for first aid and the administration of medicines.
- There are adequate and appropriately trained staff to provide first aid treatment.
- The school has clear organisation in place to manage pupils' health needs.
- Medicines are securely stored in each classroom. Administration of medicines is thorough. Trigger sheets are available in each class. These clearly outline the medical interventions required for each pupil, each day.
- The school promotes the 5Rs for the administration of medicines: right pupil; right time; right medicine; right dose; right route. The trigger sheet ensures that all staff know what needs to be done. If something is missed, evidence is clear from the trigger sheet.
- First aid kits are held in every classroom. Orange med packs are stored in every classroom. These are tamper-proof and ID evident.
- Systems are in place to ensure that medicines coming into school are prescribed, for the child and in date. Systems are in place for the administering of medicines with countersigned sheets to ensure that doses are double checked. If/when meds errors do occur these are reported to the DSL as a concern.
- Outings for offsite visits contact books are held in every classroom. These include medical information.
- An up-to-date risk assessment of first aid provision has been completed.
- A detailed accident/incident form is completed for all accidents. Examples were shared with the reviewer. The form includes a body map and prompt questions to ensure that a good level of detail is recorded and shared as appropriate. This form links to behaviour recording (if there are incidents of biting, for example), and CPOMs.
- Parents are contacted appropriately following first aid incidents.
- All staff receive basic first aid training. A flow chart has been produced ensuring staff know procedures to follow regarding first aid.
- The school promotes post-incident reflection opportunities. Additionally, there is a monthly Working and Learning Safely Committee meeting in which first aid incidents and concerns are considered.
- The school has good links with the Community Children's Nurses Team (CCNT).
- External provision was discussed with the reviewer. There is a monthly paediatric clinic and termly dietician clinics.
- Class files contain pupils' individual healthcare plans. They also indicate if a child does not have an IHP. Examples of these were shared with the reviewer. Parent involvement was evident.
- 1 student at the faculty has an Epi Pen. Staff receive annual training to support this.
- Asthma inhalers are kept close to pupils to ensure accessibility.
- Documentation pertaining to first aid and medical needs is archived appropriately.
- The TLR post holder for medical/first aid provision liaises with the DSL regularly.
- The school's approach to PSHE is strong and committed.
- The curriculum overview was shared with the reviewer.
- A 2-tiered approach was discussed. Tier 1 focuses on essential skills for learning and life, and Tier 2 details the breadth of provision to support personal care and personal autonomy, for example. Provision to support pupils' independence, self-advocacy, and friendships is prioritised.
- Every member of staff teaches PSHE. PSHE underpins everything the school does.
- Zig Zag books record children's achievements during their time at Glyne Gap. Post 16 Record of Achievement files are kept for students.
- The school's approach to RSE emphasises the importance of friendships and relationships for children and young people. Pupils are supported in how to respond to others (preferred peers and non-preferred peers), how to tolerate others, keeping safe and dealing with threats. Private parts and private places are prioritised.

- Class Teachers and Senior Leaders meet on a termly basis to review pupils' learning and wellbeing. There is a focus on mental health and emotional wellbeing, feeling secure, and behaviour and attitudes including RSE and feeling safe.
- There is a school council and a faculty council. Members are provided with support to facilitate their attendance.
- IT and online safety are taught by all staff. Messages about staying safe are given out continually via a personal approach.
- *Smoothwall* is used for filtering. Alerts go to the DSL who can see what pupils and staff are accessing.
- The DSL and DDSL discussed with the reviewer whether Glyne Gap pupils would recognise online harm or fear what they might see; how pupil interpret online content is difficult to ascertain.
- The school is committed to supporting parents with understanding online risks to which their children might be vulnerable.

Areas for further consideration:

- Consider displaying the names (and photographs) of all the safeguarding team; promote the names of the DDSLs as well as the DSL at the entrance and throughout the site.
- Consider an external safeguarding information board. This could also include supportive information for parents (signposting to food banks, for example).
- The school uses a paper-based system for its first aid and medical recording and reporting. An electronic system could support the school's practice; the medical needs of pupils are extensive and complex, and an electronic system could enhance record keeping.
- Parent workshops are planned to support the school community with online safety and awareness
- The school has identified that there is a low level of online safety concerns with pupils' additional needs providing an unintentional risk reduction. The school acknowledges that there are a small number of students at the faculty who joined in September 2021 who require a different response to support online safety. This has been identified in the school's development plan.

3) Responding to concerns

The school identifies pupils with additional vulnerabilities or needs and plans for these accordingly. For all pupils, where safeguarding concerns arise, appropriate steps are taken to safeguard in a timely way and these are accurately recorded in secure records.

Pupil Voice:

- The reviewer met with five pupils from the secondary phase. Due to their specific needs, questions needed to be framed to enable the reviewer to get an impression of the pupils' views on school, how they could/would raise concerns if they were worried about anything, their understanding of their responses to seeing something they 'didn't like' online as well as their response to the behaviour of other pupils.
- The group unanimously agreed that they enjoyed coming to Glyne Gap and 'liked learning'. In terms of what they liked best, the pupils listed going for walks, visiting the trampoline room, swimming (although the pool was currently 'broken') and playing on the playground.
- One pupil talked about her visits to the 'flat' where she was able to learn life skills including washing her hair which was a 'super goal'.
- All pupils stated they had access to computers and iPads and when asked what you would do if you saw something that they thought was not nice, or didn't like, they all agreed they would tell a teacher or turn it off. One pupil said he would tell his mum.
- The reviewer asked whether some pupils' behaviour in the school could be considered silly or naughty, and one pupil said that others are sometimes 'rude'. Their response to how they would deal with this was to 'walk away' or tell a teacher.

- Pupils were proud to share their ‘super goals’ which focus on personal development including independence and behaviour. One pupil was very articulate in sharing that when he was feeling ‘fizzy’ he was able to ask an adult to have 3 minutes away from the group and then be invited back in or request an additional 3 minutes. When asked whether this was working for him, he stated that it was. The reviewer was impressed with not only his desire to ‘own’ this goal but also to be able to articulate the process so well.

Positive observations:

- The school is using CPOMS effectively to triangulate all information pertaining to individual pupils.
- The Designated Safeguarding Officer supports the DSL in extrapolating data from the system to produce reports for Governors as well as highlighting patterns and trends.
- Staff can see all categories under CPOMS but only record under two; ‘Concerns’ or ‘Information’.
- The information category records all discussions, conversations, reports which may have come to a member of staff and been made available to the DSL. All of this supports the pupil chronology.
- The DSL team will triage any concerns and assign specific categories.
- The school has defined categories for pupils under specific vulnerable groups.
- The school has a category of ‘lessons learned’ which captures any recent team discussions and analysis of specific concerns where they feel additional actions/steps could have been taken. This is a very useful CPD process for all those concerned, and these are shared with staff.
- Evidence was seen of good oversight of safeguarding concerns along with clear analysis and actions.
- Evidence was seen of referrals to external agencies; these are clearly referenced on the individual file of the child.
- A copy of a multi-agency report was detailed and clearly highlighted the concerns for the school and their perception of the risks for the pupil and the family.
- The DSL shared two case studies which highlighted the concern, school actions along with the chronology of support, discussions, interagency and parent input. The learning for the DSL and the school was clear.

Attendance

- There are currently 118 pupils on roll at Glyne Gap site FTE 115.5 (26 students are based at the post 16 site situated at Bexhill College and 9 children attend the nursery)
- A number of pupils attending Glyne Gap present with complex health needs accompanied in some cases with profound and multiple learning difficulties.
- Some pupils may have life limiting medical needs.
- The reviewer discussed with the Headteacher the challenges around measuring persistent absence for pupils attending the school and the reviewer agreed there had to be a note of caution around the reliability of any figure as it may present as much higher than average due to the combination of pupils’ needs and the impact of the pandemic.
- The school can evidence the measures they are putting in place to support attendance for all pupils and their focus on engagement with families to build up trust so that families are confident that the school can manage the holistic needs of their children.
- The school is not complacent in the monitoring of attendance for all pupils and has clear processes in place for the monitoring of attendance which is complemented by its insight and oversight of those pupils with additional vulnerabilities.
- All pupils at level 4 on the first day of absence are contacted unless the school are aware of a reason for their absence and there is no additional contextual information. The school will also inform the allocated Social Worker.
- By 9.30am the safeguarding team will have an attendance list.
- For all absences not already phoned through to the school, contact is made to the parent/carer and information recorded on sims.
- For some pupils where there is ongoing safeguarding oversight, this information is also recorded on CPOMS.

- Weekly safeguarding meetings include review of attendance and specific pupils with any actions recorded on the individual pupil file.
- Staff will carry out ‘door knocks’ for families where there are additional concerns.
- The school can evidence multi-disciplinary working with other agencies including Early Help, FISS/CAMHS and PBS.

Behaviour

- The school uses a range of systems to monitor, review and record behaviour.
- Pupils, where appropriate, are supported to develop strategies for self-regulation and being able to recognise when they may need additional support if their behaviour requires it.
- The school has a clear culture and ethos surrounding their approach to promoting positive behaviour and respect; this was corroborated in the meeting with pupils.
- Although an overarching policy/ethos is in place, the approach to developing positive behaviour with pupils is very bespoke.
- The school regularly reviews those pupils who present with the most challenging behaviour and ensure that there is a wraparound input into supporting behaviour plans, risk assessments alongside a pupil’s own ‘goals’ and ‘super goals’
- The school’s termly liaison meetings with class teachers enables discussion around a pupil’s behaviour and attitudes, behaviour per se, their attitude to learning, attendance and feeling safe. The format for this liaison meeting has evolved over time.
- The behaviour lead and DSL work closely with the AHT with responsibility for the curriculum to review links between behaviour, safeguarding, and teaching and learning.
- There is evidence of analysis and review of physical interventions including the identification of those that are supportive and those that are restrictive.
- Behaviour incidents are reviewed by senior staff to decide if they meet the threshold for child-on-child abuse

Areas for further consideration:

- The school will ensure that where cases have been closed, the rationale for doing so is made explicit on the pupil’s record and need to include reference to the success of interventions/actions the school has put in place
- Ensure that there is consistency in all record keeping e.g., that full names and the relationship to the pupil are included.
- Include the header in any copies of email correspondence which will highlight the date stamp and the email address of the sender.
- The DSL has a clear strategic role across the school but there may be a benefit in discussing how this could be made even more effective with the delegation of some of the more operational roles to other members of the safeguarding team. It is however appreciated that this will evolve.

4) Workforce and Volunteers

The workforce is well managed and trained with respect to safeguarding. Induction, annual training and ongoing updates provide adults with the knowledge and understanding needed to identify and effectively respond to pupils and families with additional vulnerabilities and possible concerns. All safer recruitment checks are completed and where concerns or allegations around conduct arise these are processed in line with local and statutory guidance.

Staff Voice

- The reviewer met with a member of the teaching staff (who has worked at the school for several years) and a member of the support staff who started working at Glyne Gap in May 2022.
- The staff spoke confidently about safeguarding and child protection.
- They articulated, clearly, who is responsible for keeping children safe at Glyne Gap.
- Communication about safeguarding is effective. Staff understand what is expected of them and know how to report/record concerns using CPOMs.

- When staff are alerted about actions (via CPOMs) they are clear about what they are required to do and the importance of responding promptly.
- Staff feel that the DSL of the day system works well.
- Staff have read Part 1 and Annex B of KCSiE 2022. They know where to access policies and could identify key documents that they are required to read. Staff felt that induction is strong at Glyne Gap.
- Staff demonstrated awareness of some specific areas of safeguarding. They showed contextual awareness of their pupils and their needs.
- Staff articulated that *record keeping has really developed at Glyne Gap. CPOMs is a reliable system, and we know what is expected of us.*
- The reviewer met with the DSL. The annual training plan around safeguarding was discussed. Reflective practice is encouraged.
- Examples of staff responses to questions and quizzes was shared with the reviewer. These are designed to support the CPD of all staff.
- The induction programme is clear and structured. This is led by the DSL.
- An external safeguarding consultant provides annual whole school training for all staff.
- The DSL attends the SLES DSL Network Meetings and values training opportunities.
- The DSL values external supervision sessions.

Managing Allegations

- The Headteacher has experience of managing allegations against staff and is able to evidence referrals/discussions with the LADO.
- The Headteacher keeps a secure folder on the school drive where information is stored.
- There are several self-referrals from staff regarding medication errors and the Headteacher was able to evidence how these were investigated and the actions the school took.

Positive observations:

- A recruitment checklist is in place to support the completion of all statutory pre-employment checks and the management of the Single Central Record (SCR).
- The School Business Management Assistant (SBMa) is responsible for completing checks and managing the SCR.
- The SCR is based upon the ESCC template.
- The SCR is monitored and checked by the Chair of Governors and the Link Governors 3 times every year.
- The reviewer 'dip checked' 2 personnel files (a paper file and an electronic file). Evidence of safeguarding references and required qualifications were seen.

Areas for further consideration:

- The leavers' tab should be removed from the SCR as soon as possible.
- Ensure that information regarding volunteers who no longer work in the school and contractors who have left is removed from the SCR.
- Ensure that Right to Work in the UK checks evidence a staff member's NI number in addition to their birth certificate.
- Ensure that the dates for the issue and checking of DBS information are in a logical order.
- Ensure that the SCR has no empty cells.
- The school updates its Childcare Disqualification checks annually; consider how these updates can be included on the SCR each year.
- Consider how to keep information regarding Chartwells staff up to date.