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Student No: 2317746 (Early Years Practitioner)

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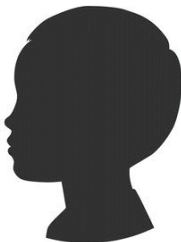
Scenario

You are a key worker in an early year setting. The behaviour of a 3-year-old child in your group has altered significantly over the last month. You are concerned regarding the child's well-being and you have raised this matter with your leader. With the support of your leader/manager, you have also discussed your concerns with the child's mother but she has not offered any explanation or disclosed whether there are any changes to family circumstances. By now, the child is wearing dirty clothes daily and the child's level of hygiene has deteriorated for some time. This morning, the child arrived at the setting with a male, who was not known to the setting. There was clear evidence of a strong smell of alcohol on the male. The child was withdrawn. As a team of staff, you are also aware that the child has a younger sister under a year old. Your leader/manager asks you to document everything and decides to make a referral.

More background information decided by group

Neither child has been seen by health visitors more than once to monitor progress. This is due to complications such as waiting lists (because of COVID), or mum says she was unable to attend the doctors for checks due to poor finances, she has not able to afford the bus fare. However, a health visitor did contact social services one year ago just after the birth of the second child, as she had concerns about the mother's mental health as mum was struggling to cope and always meet the needs of the older sister and had anxiety. The older sibling has been seen by a variety of medical professionals for tests. It has been a different professional each time and mum has commented that she must repeat information about her daughter, so there would appear to be issues with communication.

Background Description

	<u>Mother</u> ● Did not have any explanation after concerns discussed ● No changes to family circumstances ● Poor mental health history ● Pregnant at 15yrs old ● Transferring from CAMHS to Family Mental Health Service		<u>Man</u> ● Unknown ● Alcohol addict (not known for definite) ● Extended family member was dropping child off at school the morning after a family event for mum as a favour. ● Not in a relationship with mum
	<u>3-Year-old child</u> ● Altered mood ● Physical additional need, Cerebral Palsy ● Wearing dirty clothes, often not in uniform. ● Poor hygiene		<u>Under a year-old younger sister</u> ● Often dressed simply in a baby grow with a well-worn cotton blanket over legs. ● Always has a dummy in her mouth. ● Poor general hygiene ● Quiet but responsive to adults in school setting when visiting.

Roles of the Group

Social Worker: Kerri

Nursery Practitioner: Pandora

SENCO: Salmah

Kerri (Social Worker)

Good morning, everyone and thank you for attending this Initial Child Protection Conference, in respect of Mercy Adams.

In attendance are Pandora Oates, Early Years Practitioner, Salmah Begum, SENCO, and myself, Kerri McLachlan, Social Worker. Apologies have been received from Wing Yi Chu (CAMHS Worker), who is unfortunately unable to attend. A copy of her report has, however, been provided to Mercy's parents and all other attendees. Today, we will hear reports from all parties, decide if further action is needed and set a progress review date. As per Working Together (2023), the purpose of this conference has been discussed with Mercy's Mother, Clare, and copies of all reports have been provided to her. Due to Clare's anxiety, she has decided not to attend today. She has been made aware, by Social Services, of the availability of parent advocacy, as per

UNCRC (1989, Article 18). This will help her to engage positively with third parties and make informed choices about the services they provide (National Youth Advocacy Service, 2024). In line with the Strengthening Families Model (no date), Clare and Mercy's views have been obtained and will be considered today (UNCRC, 1989, Articles 3, 12 and 13). Under the Data Protection Act (2018), and UK GDPR, together with Information Sharing: Advice for Practitioners Providing Safeguarding Services (2024), it has been agreed that all reports may be shared, as they are for the purpose of safeguarding a child and ensuring their welfare.

If I could begin by delivering my social worker's report.

Social Worker's Report (Kerri)

My involvement with Clare began in 2023, just after the birth of Mercy's younger sibling. We were contacted by Clare's Health Visitor, who expressed concern over her mental health, following the birth. She visited only once, due to COVID restrictions, but reported that Clare was anxious and not always able to meet Mercy's needs, whilst caring for her new baby. Having enquired about the results of both children's health checks, it transpired that Clare had not kept some of these appointments, due to having insufficient funds to travel.

Clare was previously referred to CAMHS, after becoming pregnant aged fifteen and suffering anxiety and depression. She is now eighteen years old, and transferring to Family Mental Health Services, for further support.

On my first visit to the family home, in October last year, it was apparent, through observation, that both children loved their mother, and that their love was reciprocated. All parties were very affectionate towards each other, with no sign of fear or reproach. However, the home environment was cluttered, with large piles of belongings everywhere, and dirty laundry was scattered on most items of furniture, indicating that Clare may be struggling to keep on top of household chores. She also appeared to be hoarding possessions, unaware that it had become a problem.

On a second unannounced visit, the environment had deteriorated further, and the children's room was stacked floor to ceiling with belongings, making it completely inaccessible. It is recognised that mental health problems can often make regular cleaning and organisational tasks seem impossible, for some individuals. Clare had just changed the baby's nappy when I arrived and was seen dressing the baby in previously worn, grubby clothes, which she had retrieved from a pile of dirty laundry. When I asked what was happening in the children's room, she mumbled awkwardly,

‘the children are sleeping in my room’ but failed to give further explanation, avoiding eye contact with me, which can be a result of embarrassment, shame, or self-consciousness.

The environment is of concern due to Mercy’s Cerebral Palsy diagnosis (UNCRC, 1989, Articles 23 and 27). Her walking is unstable, and she experiences exaggerated reflex movements. In relation to the sleeping arrangements, this is not good for either the children or Clare, due to her room being very cramped, with no space for the children to move around or play. All parties may be getting disrupted sleep, due to the noises made by the other occupants.

To alleviate my concerns, I would like Clare to access help from a domestic clearance agency, to assist in clearing unwanted items in the home, freeing up space for everyone to move around safely. In addition, Clare may qualify for a Disabled Facilities Grant, which would help with paying for doorways to be widened or other home adaptations, enabling Mercy to move around more easily and safely. Both services are available through Birmingham City Council (no date). I note from the CAMHS report that Clare has also been referred for cognitive behaviour therapy, to help her deal with her hoarding behaviour. Also, a referral to an Occupational Therapist would be beneficial, who would provide Clare with strategies to manage daily chores and ensure she also practices self-care, to prevent her becoming overwhelmed. It would be good for Clare to attend a stay and play group, as the children have little opportunity to socialise outside the school environment. According to Early Years Alliance (no date), stay and play groups can encourage speech and language, sharing and turn-taking.

Reinstating the children’s health checks now needs to be a priority (UNCRC, 1989, Article 24). Mercy’s Cerebral Palsy must be monitored, to prevent speech and language difficulties, physiotherapy needs, and other connected complications further affecting her development. There is an urgent need to chase Family Mental Health Services, to ensure they pick up Clare’s care, where CAMHS left off. This will ensure a smooth continuation of care, with minimum disruption to Clare’s well-being. She will then be better equipped mentally, to look after the children and meet their needs. A Family Support Worker could work with Clare, assisting with benefit applications and any other schemes which may benefit her financially. Salmah, maybe this is something you could arrange through your school Family Support Worker?

That concludes my report, thank you for listening.

Pandora, may we hear from you next? I understand your concerns triggered this conference.

Nursery Practitioner's Report (Pandora)

Good morning, everyone, I am a nursery practitioner and Mercy's key adult. I first met Clare and Mercy at a home visit prior to Mercy starting school on the 30th of August. The family are therefore relatively new to the school, having only started this last half term. The purpose of the visit was twofold, to understand the needs of Mercy and allay any parental concerns as stated in the Children's Act (2004), section 17 and Working Together to Safeguard Children (2023). As school had been informed that Mercy has Cerebral Palsy, an occupational therapist would be coming into school to make adjustments to support Mercy accessing the school environment in line with articles 3,5, 28 and 29 of the UNCRC 1989 (Save the Children, no date).

My first impressions of the home were that there was little in the way of furniture, just one small sofa and a television but no carpet. The property was cluttered with counter tops covered with laundry and old newspapers; junk mail scattered near the front door. There was also little stimulation for either child, with a couple of dolls available to Mercy at the time of our visit. According to 'Child Poverty Action Group' (2024) children living in poverty is higher where someone has a disability or younger children. Both impact Clare's family and their wellbeing.

Mercy was quiet during the visit but did smile when playing peek a boo with a toy bunny taken to the visit. During the visit Clare changed the baby's nappy, this was carried out on the uncarpeted floor without a changing mat beneath the baby and the discarded nappy left to one side on the floor. All observations and concerns would be logged, following UK Government (2015) guidance for best practice if a practitioner has concerns of abuse. Clare mentioned that she had struggled to get Mercy to use her walker, as Mercy was 'quite stubborn' at times and the size of door openings were also an issue for Mercy's mobility and moving around independently. Mercy's walker was covered with clothes in the kitchen at the time of the visit.

Whilst filling in forms, Clare mentioned she had seen a social worker and had been under CAMHS. However, due to COVID had missed attending an adult assessment and had not heard anything since. Once back at school, the home visit details and concerns were recorded on CPOMS, according to Caldicott Principles, informing only the SENCO/DSL and following guidance from the EYFS framework and GDPR (The Caldicott Principles, 2020, Data Protection Act, 2018

Part 3 chapters 2 and 3 and EYFS, 2024 section 3 – safeguarding and welfare requirements), KCSIE (2024) Chapter 1 para 96,98. **Can I confirm that this is correct Salman Begum?**

Salma – Yes, that is correct.

Over the last month. Mercy's attendance at school has been sporadic, with exceptionally high absence, attending 9 days out of a possible 35-day term. When Mercy does attend, she does not always come in uniform. Clare says she struggles to get into her uniform because Mercy does not want to come to school. Clare has cited several reasons for the lack of attendance, including her own anxiety and struggling with Mercy's tantrums. Clare understands the importance of regular attendance for routine, making friends and developmental progress, as suggested by UK Government (2023) risks to education due to high absence and KCSIE (2024) Chapter 1 para 174, 178. But she says that on days when she is struggling, she cannot rely on family for support as relations are strained. After a conversation with Clare, the incident with the unknown adult male dropping Mercy off at school the other morning, does not raise any immediate concerns. However, the incident has been recorded on CPOMS and will be monitored (KCSIE, Chapter 1, 2024) as requested by Salmah Begum. **Can I confirm that this is also correct Salmah?**

Salma – That is correct also.

Clare has been open about her mental health and how it has affected daily family routines, her sleep and general low mood. Clare has also acknowledged that her anxiety and low mood might also be affecting the children's emotional wellbeing. It has been observed that Clare sometimes finds it difficult separating from Mercy at drop off times. Most mornings, Clare talks for a while with a member of staff and needs encouragement to leave Mercy. Most of the time this heightens Mercy's anxiety and she becomes upset and difficult to separate from Clare and on occasion Mercy's behavior has become more extreme, and she has hit Clare and held on to her mother's hair. According to NHS (2022) separation anxiety between parent and child can be a demonstration of the strong bonds between them and it is important to focus on helping Mercy understand and deal with these emotions. Salmah Belgum has shared with me and Clare several strategies to support these transitions, in addition I have found resources to support Clare from 'Every Mind Matters' which includes daily routines to ease anxiety, tips on sleep hygiene and step by step advice about how to boost low mood and anxiety NHS (no date) while she waits for

individual support from the mental health team and supported her in contacting St Paul's Community Trust (2023) which specialize in early years and well-being advice. By taking this holistic approach, it is hoped that Clare and her family will benefit from school readiness coping mechanisms and parental wellbeing as supported by Bronfenbrenner's ecological systems theory by putting the child at the center of our approach as partitioners and addressing the needs of the parent and extended family where possible, directly involved with the child's health and wellbeing (Mollborn, 2016), 'working together to safeguard children' (2023) and KCSIE (2024) Chapter 1 para 2. Additionally as cited in Lord Lamings report (2009) and Every Child Matters (2003) it is of up most importance that both universal and targeted services and resources are organised around the child and family to meet health, development and wellbeing needs and welfare.

Thank you, Pandora. Please could we now hear from Salmah, in your role as SENCO?

SENCO's Report (Salmah)

Hello, thank you for meeting with me today. Whilst working alongside Pandora Oates (Early Years practitioner), we have noticed that the child often comes to school in dirty and unhygienic clothes. This could affect their health, and it raises concerns about their home conditions. We have gathered that the mother is struggling with her mental health, so I arranged a meeting with mum advising her to attend a Triple P group, to support parents. According to Triple P (Triple P UK, 2018) parents can confidently regulate their children's behaviour, develop strong, healthy connections, and prevent problems before they arise. According to the parent advocacy group, they aim to strengthen the ability of parents who have experienced the child welfare system to help other families going through the system, ask for reform, bring attention to non-systemic solutions, and improve the lives of children (International Parent's Advocacy 2023). In my role as SENCO and DSL, I have decided it would be best to involve the social worker (Kerri), to do a home check. This will provide us with a clear understanding of the situation at home. Another concern we have noticed is that the child has symptoms that involve cerebral palsy This condition impacts movement and posture due to brain damage that typically happens before birth. However, due to the mother suffering from her own mental health issues, I think she might not be able to take her child to these appointments. We have considered that we should set up

regular meetings to monitor mom's progress and provide any necessary assistance. Additionally, our department can put plans and adjustments into action to help the child's cerebral palsy in the classroom. Our goal is to create a nurturing educational setting for the child. We have also discussed that will be making detailed records of our observations including dates and specific instances such as the dirty clothes. As Pandora mentioned in her report, the child only has attended school 9 days out of a 35-day term and when the child does come into school, the child is not always in uniform. This is because mom struggles to get Mercy in school uniform because the child does not want to come into school. We need to understand why the child does not want to come into school and need to ensure that there is nothing here that is causing them distress. To move forward for the child to come in regularly to school we have suggested that the mother should spend about 5 to 10 minutes in the classroom during drop off, to help the child transition and want to attend school more often, and for the child to bring a comfort item from home such as a blanket or toy, to provide a sense of security (The Equality Act 2010). We have also considered that to meet the child's needs we will create a sensory area in the classroom, with calming areas and sensory tools to help the child meet her needs, since she has cerebral palsy (The Special Educational Needs and Disability (SEND) Code of Practice (2015)).

Thank you all for your time take care.

Kerri (Social Worker)

Thank you, Salmah.

Considering all the evidence, it appears that Mercy and her sister are not in imminent danger, to the point where they need to be removed. Indeed, both Clare and Mercy have expressed their desire to stay together (UNCRC, 1989, Article 9). I believe that Mercy and her sister should be classed as children in need for the moment and that with immediate intervention from the agencies mentioned, we can turn around the situation for the family. However, if the current situation continues or worsens, it may become necessary to prepare a Child Protection Plan and pursue a

removal for the health and safety of the children. Does anyone have anything to add to the discussion? Pandora, do you have anything further to say? Salmah, would you like to add anything?

If we all agree, our meeting today is now concluded. We shall meet again in three months to review this case and decide if further action is required. The proposed date for the review meeting is October 7th. Is everyone free to attend on that date? (Wait for response) Thank you, that date is now set and will be confirmed in writing. Thank you once again for attending.

Now, we will begin our reflections on what we have learned from this module.

Reflections

Kerri – Before working on this assignment, my only experience of safeguarding was from the point of view of a Teaching Assistant. I record incidents on the CPOMS system and receive annual safeguarding training once every academic year. Beyond this point, the concerns pass to our Designated Safeguarding Leads and Family Support Workers, and we very rarely hear anything further about the outcome.

After researching this presentation, I have become more knowledgeable about the roles of other professionals, in improving the lives of children and young people. Whilst I can only comment on what I see in front of me in school, I now understand that other professionals have different insight into the children's needs, be they physical or mental and a broader outlook on their home lives, witnessing the way they behave, in an environment where they may or may not feel safe. It is easy for parents and carers to display an artificial persona, in the few minutes they spend dropping and collecting their child at school, but at home, they may behave differently, be that for better or worse.

Since working on this assignment, I understand more clearly how safeguarding and child protection issues can breach a child's rights, under the UNCRC (1989), and indeed, exactly how many of those rights could be involved. Previously, I would have been focused generally on the

need to act in the best interest of the child, but I can now make links to more specific areas of right. It has become more apparent to me how some safeguarding issues impact on children with special educational needs, in a different way to their peers, making them even more vulnerable

than usual. I am now clearer in emphasizing these extra challenges and dangers, when recording on CPOMS, to ensure the reader is aware of the potential harm that could be caused. To date, I have never had to attend a Child Protection Conference, but would now feel confident to do so, if needed.

Whilst I was aware of the need for good multi-agency working, prior to this assignment, I now appreciate more fully the need for timely and effective collaboration between third parties. In addition to the basic services they provide, every organization will have a catalogue of links and contacts needed to give parents and children the individual support they require. It is this niche information that can make the difference for a child or family in need.

Overall, this assignment has given me a more balanced, insightful understanding of what is involved in child protection procedures. Sadly, this is an area which has become more prevalent recently, due to the ever-increasing sub-categories of abuse being uncovered. It has been interesting to learn about more ways that I could possibly make these situations more bearable for a child, or better still prevent them altogether.

Pandora...

Pandora -

At the beginning of this module, I had some knowledge of legislation and policy surrounding safeguarding and child protection. As part of my role in a primary school, I have daily contact with children and their families and had to record on CPOMS and report to the DSL on matters concerning child protection. At the start of each academic year, I undertake training for safeguarding and child protection this includes reading: keeping children safe in education part 1, annex B and any amendments to this, prevent training and rereading the school's policies concerning safeguarding and child protection and procedures for reporting and recording safeguarding concerns.

Through this module's content via lectures, course materials, reading and personal study, and the group presentation, I have gained a broader and deeper understanding of safeguarding and child protection. I better understanding of the roles of a SENCO, DSL and social worker and the complexity behind these roles, in how they differ in their approach and what each can offer in the way of support to children and their families and how they can also complement each other in supporting families, through a variety of different tools in a more holist approach and to produce an offer which is bespoke to the family's needs.

Moving forward I will be mindful in how I communicate with families and listening to them in order to signpost them as soon as possible to the correct support, I have discovered several local groups and web-based specialized services during this course and after a conversation with my school's DSL, they have confirmed that this would be effective practice in addition to logging an incident on CPOMS where appropriate. I also have a better understanding of the importance of clear communication and following up actions when working with multiple agencies as well as inhouse designated safeguarding staff to support children and their families accessing the wide variety of resources available to them as soon as possible to avoid problems and difficulties turning into crises. I have also disseminated course materials including links to the CASPER the NSPCC newsletter and app and child protection conference videos as they may be useful additions to future safeguarding training days.

Salmah...

Salmah

Before this assignment, my understanding on safeguarding to me was, safeguarding means ensuring the safety and well-being of children, by taking proactive measures to protect them from harm, abuse, or neglect. It involves creating a safe environment and providing support to prevent any potential risks to their welfare. Throughout this module I have learnt what safeguarding means on a deeper level . The term "safeguarding" describes the policies and procedures implemented to safeguard people's health, welfare, and human rights, especially those of children. Making sure people are secure from harm, abuse, neglect, and exploitation is the main goal of safeguarding. When it comes to children and adolescents, protection includes protecting children against mistreatment and abuse: This covers sexual, emotional, and physical abuse, preventing harm to a child's growth or health, ensuring that children are raised in environments that support the delivery of effective and safe care and taking steps to provide the best possible results for all children and young people.

."Values" are the fundamental concepts and principles which dictate children's behaviour and relationships with teachers and other carers. These principles impact the setting, teaching, and relationships with others, all of which support children's overall growth. Important values include kindness, cooperation, honesty, responsibility, empathy, and inclusivity. According to Arthur, et al (2018), Programming and Planning in Early Childhood Settings. Engage Learning, these values are taught in children through everyday interactions, adult role modelling, play, storytelling, and structured activities, all of which contribute to their development into well-rounded, socially

responsible adults. The area known as ethics addresses issues of what is morally good and bad, fair, and unfair, and morally right and wrong. It involves organising, justifying, and supporting of what's appropriate and inappropriate conduct. Three principal areas are identified in ethics: 1. Meta-ethics: Examines the nature of ethical characteristics, claims, viewpoints, and conclusions. It investigates issues such as "What is goodness?" and "What is the way to know what is right and wrong?", 2. Ethics normative:, 3. Practical ethics: To guide behaviour and decision-making in a variety of areas of life, such as social policy, professional conduct, and interpersonal relationships, ethics is essential. It assists people and communities in figuring out what is worthwhile, what makes a decent life, and how to live together peacefully.

Moving forward, I now have a thorough understanding of how to effectively address and support a child experiencing abuse, neglect, or sexual abuse by recognizing the signs, following appropriate reporting procedures, providing a safe and supportive environment, and collaborating with relevant authorities and professionals to ensure the child's well-being and recovery.

Reference List

Birmingham City Council (no date), *Disabled Facilities Grant*, Available at: https://www.birmingham.gov.uk/info/20061/help_for_people_with_specific_needs_and_disabilities/726/help_with_the_cost_of_adapting_your_home (Accessed: 7th July 2024)

Child Poverty Action Group (2024) *Poverty: facts and figures*, Available at: <https://cpag.org.uk/child-poverty/poverty-facts-and-figures> (Accessed 4th July 2024)

Children and Families Act (2014), Available at: <https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted> (Accessed 7th July 2024)

Data Protection Act (2018) and UK General Data Protection Regulations, UK Public General Acts, 2018 c.12, Available at: <https://www.legislation.gov.uk/ukpga/2018/12/contents/enacted> (Accessed: 30th June 2024))

Department for Education (2024) *Early Years Foundation Stage (EYFS) Statutory Framework*
Available at:

https://assets.publishing.service.gov.uk/media/65aa5e42ed27ca001327b2c7/EYFS_statutory_framework_for_group_and_school_based_providers.pdf (Accessed: 4th July 2024)

Department for Education (2023), *Working Together to Safeguard Children*, Available at:

https://assets.publishing.service.gov.uk/media/65cb4349a7ded0000c79e4e1/Working_together_to_safeguard_children_2023_-_statutory_guidance.pdf (Accessed: 30th June 2024)

Department for Education (2024), *Information Sharing: Advice for Practitioners Providing Safeguarding Services to Children, Young People, Parents and Carers* (2024), Ref: DFE-00128-2018, Available at:

https://assets.publishing.service.gov.uk/media/66320b06c084007696fca731/Info_sharing_advice_content_May_2024.pdf (Accessed: 30th June 2024)

Early Childhood Australia. (n.d.). Core values in early childhood education. Retrieved from <https://www.earlychildhoodaustralia.org.au> (Accessed: 8th July 2024)

Early Years Alliance (no date), *What Does a Stay and Play Session Offer Me and my Child?*, Available: https://www.eyalliance.org.uk/sites/default/files/stay_and_play_parent_leaflet.pdf (Accessed: 30th June 2024)

Equality Act 2010, Available at: <https://www.legislation.gov.uk/ukpga/2010/15/contents> (Accessed: 7th July 2024)

International Parent Advocacy (2023), Available at : <https://toolkit.parentadvocacy.net/topic/the-child-welfare-parent-advocacy-movement/> (Accessed 7th July 2024)

Mollborn, S. (2016) 'Young Children's Developmental Ecologies and Kindergarten Readiness', *Demography*, 53(6), pp. 1853–1882. Available at: <https://doi.org/10.1007/s13524-016-0528-0>. (Accessed 7th July 2024)

National Youth Advocacy Service (2024), *Parent Advocacy*, Available at: <https://www.nyas.net/> (Accessed: 30th June 2024)

NHS (2022) *Separation Anxiety*, Available at: <https://www.nhs.uk/conditions/baby/babys-development/behaviour/separation-anxiety/#:~:text=In%20fact%2C%20separation%20anxiety%20is,and%20you%20will%20come%20back>. (Accessed: 7th July 2024)

NHS (No Date) *Find your little big thing that helps your mental health*: Better Health, every mind matters, Available at: <https://www.nhs.uk/every-mind-matters/> (Accessed: 7th July 2024)

NSPCC Learning. (n.d.), *What is safeguarding?* Available at: <https://learning.nspcc.org.uk/safeguarding-child-protection> (Accessed: 7th July 2024)

St. Paul's Trust (2023) *St. Paul's Children Centers*, Available at: <https://stpaulstrust.org.uk/st-pauls-childrens-centres/> (Accessed 4th July 2024)

Strengthening Families Model (no date), *Birmingham Safeguarding Children Partnership, Child Protection Conferences*, Available at: <https://lscpbirmingham.org.uk/learning-zone/learning-resources/child-protection-conferences#:~:text=Strengthening%20Families%20Model%20of%20Conferencing&text=Family%20members%20are%20asked%20to,about%20the%20best%20way%20forwards>. (Accessed: 30th June 2024)

Triple P UK (2018), Available at: <https://www.triplep.uk.net/uken/service-pages/privacy-policy/> (Accessed 7th July 2024)

United Nations Convention on the Rights of the Child (1989), (Articles 3,5, 9, 12, 13, 18, 23, 24,27, 28 and 29), Available at: <https://www.savethechildren.org.uk/what-we-do/childrens-rights/united-nations-convention-of-the-rights-of-the-child> (Accessed: 1st July 2024)

UK Government (2024) *Keeping Children Safe in Education, Statutory Guidance*, Chapter 1, para 2, 96,98,174,178 Available at: https://assets.publishing.service.gov.uk/media/6650a1967b792fff71a83e8/Keeping_children_safe_in_education_2024.pdf (Accessed 6th July 2024)

UK Government (2023) *Why is school attendance so important and what are the risks of missing a day?*, Available at: <https://educationhub.blog.gov.uk/2023/05/18/school-attendance-important-risks-missing-day/> (Accessed 4th July 2024)

UK Government (2020) *The Caldicott Principles*, guidance, Available at: <https://www.gov.uk/government/publications/the-caldicott-principles> (Accessed: 4th July 2024)

UK Government (2015) *What to do if you're worried a child is being abused: advice for practitioners*, Available at: https://assets.publishing.service.gov.uk/media/5a80597640f0b62302692fa1/What_to_do_if_you_r_e_worried_a_child_is_being_abused.pdf (Accessed 7th July 2024)

UK government (2015)*The Special Educational Needs and Disability (SEND) Code of Practice* Available at: <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25> (Accessed 1st July 2024)

UK Government (2009) *The Protection of Children in England: A Progress Report*, The Lord Laming. Section 3.1. Available at: https://assets.publishing.service.gov.uk/media/5a7eb005e5274a2e8ab478fb/The_Protection_of_Children_in_England.pdf (Accessed: 8th July 2024)

UK Government (2003) *Every Child Matters*, section 13. Available at: <https://assets.publishing.service.gov.uk/media/5a7c95a4e5274a0bb7cb806d/5860.pdf> (Accessed: 8th July 2024)

