

# Halfway Nursery Infant School



## Fabricated Illness Policy

Date Policy Written:	November 2023
Date Policy accepted:	
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Signed (Headteacher)	
Signed (Chair of Governors)	
Minute Number	

## **Statement of Intent**

Fabricated or induced illness by carers (FII) can cause significant harm to pupils. FII involves a child who is well presented by their carer as ill or with disabilities, or a child who is ill or with disabilities being presented with a more significant problem than they have in reality, and suffering as a consequence.

Halfway Nursery Infant School is aware that schools can play a key part in identifying concerns of FII, and with a raised awareness of the subject, can help if appropriate. Many signs of FII may not be noticeable in a school, but Halfway Nursery Infant School is aware of the signs in case a child or family member raises this issue.

Halfway Nursery Infant School knows that it is important for staff to feel confident when they express concerns, no matter how far-fetched they could, at first, seem.

## **Recognition**

School staff may be able to recognise signs of harm, such as a child has been repeatedly unwell, or if parents give details of their child's ill health which does not match observations of the child at school.

The following are common indicators of FII:

- Frequent/unexplained absences from school.
- Regular absences of health appointments and no reasons have been given.
- Refusing permission for school-based health checks.
- Repeated claims of symptoms which are vague, difficult to diagnose, and may not have been noticed by staff.
- Inconsistent illnesses, treatments or ailments.
- Complaints from the child regarding abuse by parents or the frequency of their doctor's visits. If siblings are in the same school, concerns could be raised between staff to ascertain if similar patterns emerge.
- The child's symptoms are only mentioned when the parent is present.
- The parent has an unusually high level of medical knowledge.
- Documents state that the parent has changed doctors/hospitals frequently for their child's treatment.
- Sudden dislike of a particular member of staff.

## **Referral**

If it has been decided that a child needs to be referred to Children's Services, the referrer, usually the designated safeguarding lead, needs to make it clear that they are concerned about FII.

If FII is suspected, a history of details for referral can be prepared to help the professionals pinpoint specific information.

When completing the history:

- Describe precisely what you observed, and clearly distinguish between facts and opinions.
- Record discussions with the child.
- Note the date, time, place and names of any people present.
- Record absences and, if possible, the reasons given by the parent.

Include this record in the referral made to Children's Services.

## **Sharing health information**

The main consideration when sharing information is the child's safety and wellbeing. Information needs to be shared between the relevant agencies, and the assessment and diagnosis will be made by the children's social care and health professionals.

## **Responsibilities**

No staff member should undertake their own enquiries if they have reason to suspect possible or actual harm to a child. Agreed action will be set out by the Local Safeguarding Children Board (LSCB).

The Education Act 2002, Section 175, states that schools have a duty to ensure that their functions conferred on them in a particular capacity are exercised with a view to safeguarding and promoting the welfare of children throughout their establishment.

Staff should not speak to the parents/carers about the suspected FII as this can increase the chances of harm to the child, and may also damage the evidence. The designated safeguarding lead should discuss with Social Care what the parents/carers will be told, by whom and when. Halfway Nursery Infant School's designated safeguarding lead is Steve Varnam.

The designated safeguarding lead will be invited to strategy discussions and child protection conferences.

**Any legal queries should be voiced with the Local Authority (LA).**

## **Strategy meetings**

Following a referral, Children's Services should undertake an assessment which includes a multi-agency strategy meeting. Education staff may be invited to these meetings if necessary. In the majority of cases, carers will not be aware of these meetings being held. In this case, carers should **not** be made aware when these meetings occur. The minutes from these meetings should, however, be shown to carers if the case goes to court.

## **Training, supervision and support**

Members of staff who come into contact with children or families who could be involved in FII should have a basic awareness of child protection principles and FII abuse.

The aim of this training should be to achieve better outcomes for the child, and they should understand how to contribute effectively to the FII process. It is important that if staff members need support and/or supervision, they know who they need to speak to.