
Child Protection and Safeguarding Policy

Policy updated by Director of Operations September 2025. Reviewed at least annually by Trust Board.

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| **SAFEGUARDING AND PROMOTING THE WELFARE OF CHILDREN IS EVERYONE’S RESPONSIBILITY** |
| **Everyone** has a role to play in identifying concerns, sharing information and taking prompt action.If you have concerns about risk to a child, **you should report it immediately**. Section 5 of this policy sets out the process for reporting and recording concerns. Where a child is in **immediate danger or at risk of harm**, a referral to **children’s social care** (and if appropriate the police) must be made immediately. |

**School staff with safeguarding responsibilities**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **School** | **The Alton School**  | **Belleville Primary School** | **Belleville Wix Academy** | **Churchfields Primary School** | **Thomas’s Academy**  |
| **Designated Safeguarding Lead (DSL)**  | Linsay Thomson Emma Morris | Tom Newman  | **Melanie Hatcher** | Sally White | Suzanne Kelly |
| **Other Designated Members of Staff (DMS) for Safeguarding** | Richard BrennanHelen Gibbs  | Fiona AllanJohn BuddenRachel CarruthersSteph Grosvenor Mary Lyne LatourSarah Peach Joanne Sultan | **Ben Armstrong****Seana Henry****Daisy Mirfakhraie****Miranda Townsend****Ellie Wilkes** | Sarah AthertonNicola BurnettKatie ManziColin MatthewsJenny PollardLiz Williams  | Clare JamesShen DjemalOlufunmilayo Dairo |
| **Online safety**  | Richard Brennan | Steph Grosvenor | Ned Drumm | Liz Williams | Claire Campbell |
| **Mental health** | Frankie Ambrose | Rachel Carruthers | **Melanie Hatcher** | Emma Irving  | Clare James |
| **Prevent**  | Linsay Thomson | Tom Newman | **Melanie Hatcher** | Sally White | Suzanne Kelly |
| **Looked After Children**  | Emma Morris | Tom Newman | **Melanie Hatcher** | Sally White  | Clare James |

**Governance**

|  |  |
| --- | --- |
| **Lead trustee for safeguarding:**  | Karen Parkinson |

**Local authority contacts**

|  |  |  |
| --- | --- | --- |
| **Wandsworth** | **Bromley** | **Hammersmith & Fulham** |
| **Multi Agency Safeguarding Hub:**mash@wandsworth.gov.uk   0208 8716622 Out of hours: 020 8871 6000**Local Authority Designated Officer:** Anita Gibbons 0208 8717440 LADO@richmondandwandsworth.gov.uk **Virtual School for looked after children:** Nova Levine 0208 8717348 nlevine@wandsworth.gov.uk **Prevent:** Shamila Majid prevent@richmondandwandsworth.gov.uk | **Multi Agency Safeguarding Hub:**mash@bromley.gov.uk 0208 461 7373/ 7379/ 7026 Out of hours: 0300 3038671**Local Authority Designated Officer:** Gemma Taylor 0208 4617669/ 3134325 lado@bromley.gov.uk **Virtual School for looked after children:** Helen Priest 0208 3134474 virtual.school@bromley.gov.uk **Prevent:** Rob Vale 0208 284 8776 prevent@bromley.gcsx.gov.uk  | **Multi Agency Safeguarding Hub:**familyservices@lbhf.gov.uk 020 8753 6600Out of hours: 020 8748 8588**Local Authority Designated Officer:**LADO@lbhf.gov.uk **Virtual School for looked after children:** Amelia Steele amelia.steele@lbhf.gov.uk**Prevent:** 020 8753 5727prevent@lbhf.gov.uk  |

**Quick links to referral forms**

|  |  |  |
| --- | --- | --- |
| **Wandsworth** | **Bromley** | **Hammersmith & Fulham** |
| **Wandsworth** [**MASH referral form**](https://www.wandsworth.gov.uk/make_a_referral_to_the_multi_agency_safeguarding_hub)**Wandsworth** [**LADO referral form**](http://www.wandsworth.gov.uk/downloads/file/12805/lado_referral_form) | **Bromley** [**MASH referral form**](https://childrensportalehm.bromley.gov.uk/web/portal/pages/mash#h1)**Bromley** [**LADO referral form**](https://www.bromleysafeguarding.org/articles.php?id=604) | **Hammersmith & Fulham** [**MASH referral**](https://childrensocialcare.lbhf.gov.uk/s4s/FormDetails/FillForm?formId=456) **Hammersmith & Fulham** **LADO referral** |

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**1. Introduction**

**SAFEGUARDING AND PROMOTING THE WELFARE OF CHILDREN IS EVERYONE’S RESPONSIBILITY**

Everyone who comes into contact with children and their families has a role to play. In order to fulfil this responsibility effectively, all professionals should make sure their approach is child-centred. This means that they should consider, at all times, what is in the best interests of the child and the child’s wishes and feelings.

No single professional can have a full picture of a child’s needs and circumstances. If children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information and taking prompt action.

The Q1E Trust fully recognises our responsibilities and duties to have arrangements to safeguard and promote the welfare of all pupils in the schools within the Trust. We recognise that all staff (regardless of employment status), including volunteers, have a full and active part to play in protecting pupils from harm.

All staff, governors and trustees are required to:

* Read this policy carefully and to be aware of their role in these processes.
* Read relevant parts of the current version of Keeping Children Safe in Education (see **Appendix H**)

The Trust will ensure that:

* All schools have a designated Safeguarding lead (DSL)
* All school staff are provided with appropriate training in Child Protection and Safeguarding issues and systems, including the Early Help process.
* All Trustees and Governors are provided with appropriate training in Child Protection and Safeguarding issues and systems.

The school will ensure that:

* New staff are informed of safeguarding requirements and this policy during their induction.
* Staff are provided with, have read and have understood Part One and Annex B of the current Keeping Children Safe in Education, or relevant sections depending on role.
* Staff are provided with appropriate training in Child Protection and Safeguarding issues and systems, including the Early Help process.
* Staff are informed who the Designated Safeguarding Lead (DSL) and Designated Members of Staff (DMS) are in their school.
* Staff are assisted to discharge their roles and responsibilities in relation to this policy.
* The DSL and DMS are released to attend the necessary enhanced training courses.
* Filtering and Monitoring systems are robust and meet current standards.

This policy is written in line with **Keeping Children Safe in Education** (DfE) **(Appendix A)** which is the statutory guidance for schools with regards to safeguarding and child protection.

Our procedures will also refer to locally agreed inter-agency procedures put in place by the Local Safeguarding Children Partnership, recent child safeguarding practice reviews and Ofsted reviews. Links to other useful guidance can be found in Appendix A.

**Throughout this policy, child/children refers to anyone under the age of 18.**

Other policies to be considered alongside this policy include:

* Other Q1E safeguarding policies: Code of Conduct; Keeping Staff Safe; Allegations Against Staff; Online Safety; Recruitment.
* Other connected Q1E policies: Special Educational Needs and Disabilities (SEND); Health and Safety; Whistleblowing; Emergency; Data Protection; Medical Needs; Relationships and Sex Education (RSE).
* School policies for: Behaviour; Anti-Bullying; Intimate Care; Trips; Absence; Emergencies.

Additional Q1E Guidance has been produced on:SupportingMental Health; Sexual Abuse; Child on Child Abuse; Child Sexual Exploitation and Criminalisation ( including Serious Youth Violence, including knife crime; Children with unexplainable and/or persistent absences from education; Radicalisation and Extremism (Including PREVENT and County Lines); Female Genital Mutilation (FGM) and Honour Based Abuse; Children involved in the judicial system; Homelessness; LGB/GQ children; Domestic Abuse; Children in Care; Keeping Staff Safe, Safety Intervention.

**2. Aims of this policy**

* To raise the awareness of all staff of the need to safeguard all children and of their responsibilities in identifying and reporting possible cases of abuse, neglect and exploitation.
* To emphasise the need for good communication and the development of building positive trusted relationships between all members of staff in matters relating to child protection.
* To create a culture of professional curiosity where staff feel able to raise concerns in a real/virtual world which may affect the safety of children
* To set out a structured procedure which will be followed by all members of the school community in cases of suspected abuse.
* To provide a systematic means of monitoring children in need and children known or thought to be at risk of suffering significant harm.
* To work openly and in partnership with parents/carers in relation to child protection concerns.
* To support all pupils’ development in ways that will foster security, confidence and independence.
* To promote safe practice and challenge poor and unsafe practice.
* To develop and promote effective working relationships with other agencies involved with safeguarding and promoting the welfare of children.
* To integrate opportunities into the curriculum for children to develop the skills they need to recognise and stay safe from abuse, allowing for continuity and progression through the key stages and to enable children to tell communicate concerns while recognising that some children may not be ready to or know how to tell someone they are being abused.
* To take account of, promote awareness of, inform procedure and signpost guidance in related areas, including the linked policies and guidance documents noted above.
* To comply with core responsibilities expected of the school as a relevant agency to the multi-agency safeguarding arrangements in the school’s relevant Local Authority (LA) as set out in the LA’s Safeguarding Children Partnership published arrangements.

**3. Key Principles**

* We believe that all children have a right to be protected from harm and /or abuse whilst in and out of school care, in person or via the internet.
* We recognise that abuse, neglect and exploitation are complex issues and rarely stand-alone events and cannot be covered by one definition or one label alone. In most cases, multiple issues will overlap.
* We recognise that schools require a culture of vigilance, professional curiosity, respectful challenge and effective recording and monitoring systems. Safeguarding incidents could happen anywhere and staff should be alert to possible concerns being raised in school.
* We are aware of the indicators of abuse, neglect and exploitation (see below and appendix C), understanding that children can be at risk of harm inside and outside of the school, inside and outside of home, and online.
* We recognise that abuse, neglect and exploitation occurs in all cultures, religions and social classes and that staff need to be sensitive to the many differing factors which need to be taken into account depending on the child’s cultural and social background. However, we also recognise that the **needs of the child are paramount** and any concerns will be referred on appropriately, whatever the family background of the child concerned. We recognise that both mental and physical health are relevant to safeguarding and the welfare of children.
* We recognise that because of the day to day contact with children, school staff are extremely well placed to observe outward signs of abuse, neglect and exploitation.
* We recognise that a child 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.
* We recognise that school may provide the only stability in the lives of children who have been abused or are at risk of harm.
* We recognise that where a school places a pupil with an alternative provision (AP) provider, it continues to be responsible for the safeguarding of that pupil and should be satisfied that the placement meets the pupil’s needs. Schools must maintain oversight of pupils in AP, including regular reviews of attendance and safeguarding arrangements.
* We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived as normal to that which is overtly aggressive, disturbed or withdrawn. We know that it is important that children feel secure, are encouraged to talk and are sensitively listened to, and that children know that there are adults in school whom they can approach if they are worried or unhappy.
* We acknowledge that there may be occasions where it may be appropriate to consider whether specific or additional arrangements need to be put in place where an issue is particularly sensitive due to gender issues or cultural or faith issues. If possible, in cases of sexual abuse in particular, we will try to ensure that a pupil can be spoken to by a same sex member of staff who has received enhanced training if this is felt to be appropriate.
* We adhere to the principles of working in partnership with those who hold parental responsibility for each child. Staff will raise Child Protection or Safeguarding concerns with Parents/Carers at the earliest appropriate opportunity and work in partnership with them and other agencies to improve outcomes.
* We recognise that technology is a significant component in many safeguarding and wellbeing issues. Children are at risk of abuse and other risks online as well as face to face. In many cases abuse and other risks will take place concurrently both online and offline. Children can also abuse other children online. See separate Online Safety Policy.
* 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**.
* We recognise that all abuse, including all child on child abuse, is unacceptable
* The ethos of our Trust supports open practice, good communication and a safe culture in which children can thrive and learn.
* All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the school’s safeguarding regime and know that such concerns will be taken seriously by the relevant school leadership team, local governors and Trustees.

**4. Definitions**

The following definitions are based on the latest version of Keeping Children Safe in Education.

Please also refer to the potential signs of abuse set out in **Appendix C** to this policy (though it is important to recognise that some children who are being abused do not exhibit any external signs of this abuse).

* **Safeguarding and promoting the welfare of children** is defined for the purposes of this guidance as:
	+ Providing help and support to meet the needs of children as soon as problems emerge
	+ protecting children from maltreatment, whether that is within or outside the home, including online
	+ 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; and
	+ taking action to enable all children to have the best outcomes.
* **Children** includes everyone under the age of 18.
* **Abuse** is 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. Harm can include all ill treatment that is not physical as well as the impact of witnessing ill treatment of others, This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear or experience its effects. 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. They may be abused by an adult or adults or by another child or children.

Abuse is broadly divided into four categories: Physical Abuse, Sexual Abuse, Emotional Abuse and Neglect. The definitions are given below. Guidance for recognising the indicators of possible abuse are attached as Appendix C to this policy.

* **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.
* **Sexual abuse:** involves forcing or enticing a child or a 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 (e.g. rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching inside or outside of clothing. They may 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 children is a specific safeguarding issue in education and all staff should be aware of it and of their school or college’s policy and procedures for dealing with it (see separate policy).
* **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 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.
* **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 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.

**5. Procedures**

We ensure our procedures are in line with government policy and we make every effort to align with the locally agreed inter-agency procedures put in place by the Local Safeguarding Children Partnership.

**5.1 What to do if you are concerned about a child**

All staff have a responsibility to safeguard and promote the welfare of all pupils at all times. If you have a concern about a pupil, you are required to act appropriately to ensure action can be taken to protect them. The concern may arise as a result of a disclosure from a pupil, a parent or a third party or due to their behaviour.

**If a pupil discloses abuse:**

* Listen carefully to what the pupil is telling you without interrupting
* Do not promise confidentiality
* Remain non-judgemental and keep an open mind
* Do not ask leading questions, or more questions than you have to – just establish what the pupil is telling you
* Be honest with the pupil and explain what you will happen next
* Record the information fully
* Pass on to the designated member of staff (DMS)

Victims should be taken seriously, kept safe, and never be made to feel like they are creating a problem for reporting abuse, sexual violence or sexual harassment.

**Record any information clearly:** In the case of any concerns always record the information clearly and be clear how the concern has arisen. All verbal conversations should be written up as soon as possible. Written records must be kept securely, noting all concerns, discussions and decisions, and the reason for those decisions and any outcomes of actions or referrals or social care involvement.

**Report promptly:** In all cases you must report any concerns to the DSL or DMS promptly. This includes any concerns of a child believed to be or suspected of being “at risk” of FGM or extremism or radicalisation. NB/ It is important to note that children may not find it easy to tell staff about their abuse verbally. Professional curiosity is important in the absence of a verbal disclosure and if staff have any concerns about a child’s welfare, they should act on them immediately rather than wait to be told.

**Act quickly:** It is important to identify any concerns about children **at as early a stage as possible** so that their needs can be identified and monitored and appropriate support put in place. We will ensure the immediate safety of any child felt to be at serious risk by taking appropriate action and by involving other relevant agencies as necessary.

**Ask for advice:** Please remember the DSLs and DMSs are available to offer help, advice and guidance to staff and pupils where necessary. If you have a concern or problem and are unclear how to proceed, ask for advice.

**Support:** In all cases ensure ongoing support is offered to the pupil as appropriate.

**Refer directly if you need to:**

* All staff know that they may raise concerns directly with the local authority Children’s Social Care services, Child Line, the NSPCC, PREVENT- **anybody** with a concern about a child’s welfare **should make a referral.**
* **If you think a child is at immediate risk of significant harm, phone the Police. Guidance of when to call the police can be found in** ‘When to call the police’ produced by the National Police Chiefs Council (NPCC) (Appendix A). (NB. This NPCC advice does not cover safeguarding incidents. Where a child is suffering, or is likely to suffer from harm, it is important that a referral to children’s social care (and if appropriate the police) is made immediately. Referrals should follow the local referral process.)
* See the table on the front page for your school’s specific names and contact details; see Appendix A of this document for other useful numbers.

**5.2 Co-operating with other agencies and information sharing**

* Information sharing is vital in identifying and tackling all forms of abuse and neglect, and in

promoting children’s welfare, including their educational outcomes. Schools have clear powers to share, hold and use information for these purposes.

* School staff will be proactive in sharing information as early as possible to help identify, assess, and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to the local authority children’s social care.
* The DSL and DMS should liaise with the local authority and work with other agencies in line with *Working Together to Safeguard Children 2018*.
* If a DSL/DMS requires advice, they will contact the Education Safeguarding Advisor or children’s social care, or (after hours) a duty social worker.
* When considering referrals to support agencies, our school will act in accordance with Local Safeguarding Children Partnership thresholds for Intervention guidance, which is consistent with the London-wide Continuum of Need thresholds.
* We will refer any child believed to have suffered or to be likely to suffer significant harm to the relevant children’s social care team without delay, and will follow up any such referral in writing within 48 hours, unless the children’s social care team formally advise not to do so.
* All staff are made aware that there is **a specific legal duty on teachers to report directly to the police, if they believe FGM has been carried out**. (See FGM guidance for more details)
* We will contribute to multi-agency assessments of children’s needs where appropriate and work in a fully integrated way with other relevant services as appropriate.
* Information will be shared in accordance with the General Data Protection Regulation (GDPR). NB: The Data Protection Act 2018 and GDPR do not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard and promote the welfare and protect the safety of children.
* We will develop effective links with relevant agencies and co-operate as required with their enquiries regarding child protection matters, including attendance at child protection case conferences wherever possible and providing reports as a matter of course (model format attached in Appendix E).
* If a child’s situation does not appear to be improving, or a school is not satisfied with the input from Children’s Services, the school will take responsibility for finding out what is happening and keep pressing for action to be taken.
* Multi-Agency Public Protection Arrangements: Many of the agencies subject to the section 11 duty are members of the Multi-Agency Public Protection Arrangements (MAPPA), including the police, prison and probation services. MAPPA should work together with duty to co-operate with agencies to manage the risks posed by violent and sexual offenders living in the community in order to protect the public and should work closely with the safeguarding partners over services to commission locally.
* The three safeguarding partners (local authorities, chief officers of police, and clinical commissioning groups) have published arrangements to work together as Local Safeguarding Children Partnerships with relevant agencies (as they consider appropriate) to safeguard and protect the welfare of children in the area, including schools and other educational providers. Details of the Local Safeguarding Children Partnership are included on the school website and Appendix A.

See also the **Data protection in Schools Toolkit** (link in appendix A)

**5.3 Children Subject to Child Protection Plans:**

* A specific request for any Child Protection Information will be made in writing for every child transferring into our school from another school. Schools will make every effort to ensure the previous school provides the required information.
* The child’s social worker will be notified of any pupil subject to a Child Protection Plan who is absent from school without explanation for more than one day.
* Any new concern or relevant information about a child subject to a Child Protection Plan will be passed to the child’s allocated social worker without delay.
* If a child subject to a Child Protection Plan leaves a school, records will be transferred to the child’s new school without delay and the child’s social worker informed of the change. Any retention of records will be undertaken in line with data protection legislation. The DSL will ensure the school knows who its cohort of children who currently need a social worker are, understanding their academic progress and attainment and maintaining a culture of high aspirations for this cohort.
* The school will promote educational outcomes by sharing information with teachers and school leadership staff about the welfare, safeguarding and child protection issues that children, including children with a social worker, are experiencing or have experienced

**5.4 Children who need a social worker**

* Children may need a social worker due to safeguarding or welfare needs. Children may need this help due to abuse, neglect and complex family circumstances. A child’s experiences of adversity and trauma can leave them vulnerable to further harm, as well as educationally disadvantaged in facing barriers to attendance, learning, behaviour and mental health.
* Local authorities should share the fact a child has a social worker, and the designated safeguarding lead should hold and use this information so that decisions can be made in the best interests of the child’s safety, welfare and educational outcomes. This should be considered as a matter of routine. There are clear powers to share this information under existing duties on both local authorities and schools to safeguard and promote the welfare of children.
* Where children need a social worker, this should inform decisions about safeguarding (for example, responding to unauthorised absence or missing education where there are known safeguarding risks) and about promoting welfare (for example, considering the provision of pastoral and/or academic support, alongside action by statutory services).
* Please refer to additional guidance regarding Children in Care/Looked After Children.

#### 5.5 Safety Intervention and Reasonable Force

* There are circumstances when it is appropriate for staff to use reasonable force to safeguard children. A ‘no contact’ policy can leave staff unable to fully support and protect their pupils and students. In line with DfE guidance, we adopt a sensible policy which allows and supports our staff to make appropriate physical contact.

Please refer to the Safety Intervention Guidance for details.

**5.6 Searching, screening and confiscation**

* With consent, staff can search for any item within a child’s clothing or equipment.
* Without consent, the headteacher (or a member of staff authorised by the headteacher) can carry out a search for knives, weapons, alcohol, illegal drugs, stolen items, tobacco, fireworks or pornographic images, and any item that the member of staff reasonably suspects has been or is likely to be used to commit an offence, injury or damage to property. The member of staff carrying out the search should be the same sex as the pupil, and there must be a witness (also a staff member).
* A member of staff (authorised by the head) can carry out a search of a pupil of the opposite sex and/or without a witness present, if he/she reasonably believes there is a risk that serious harm will be caused to someone if the search is not conducted immediately.
* For items that are not covered under the above points, if the child does not give consent for a search, this will be dealt with as a refusal to follow an instruction in line with the behaviour policy and parents/carers may again be asked to search a child for an item.
* Staff are encouraged not to view images on children’s computers, iPads and phones.
* Images will not be copied or printed.
* It may be necessary to look at an image or check a device to ascertain whether there is a safeguarding issue and facts regarding an allegation or when an image is directly presented to a member of staff. Where an image is required to be viewed staff will record when they looked, where and why.
* Any sexual pictures of children under 13 will always be referred to the police and children’s services. Children under 13 cannot legally consent to anything.
* Images cannot be deleted under the relevant data protection legislation by a member of staff. However, staff can ask the young person to delete images from any social media and sign and date that this has been done. If a child won’t delete an image on request, this will result in an increased risk assessment of that child’s safeguarding needs
* Without the child’s consent, or where a child refuses to delete an image, the child’s parent/carer may be called and requested to delete the images or take the device.
* If images are required for evidence the device may be confiscated (switched off and put in a sealed envelope) to be passed to the police. This can occur without the child’s or parent/carer’s consent if the content is considered harmful)
* Staff can also confiscate or remove any object/item considered harmful or detrimental to the school or children and adults in the school.
* Staff will not take images of a child’s injury (e.g. following a disclosure of abuse) even if requested by children’s social care, or make audio recordings of a child’s disclosure.

**5.7 Communicating with Children, Parents and Carers**

* All children are made aware who they can speak to if they are worried about anything through assemblies, posters around school and in the classrooms, and class discussions. This includes parents and class teachers and any other trusted adult as well as designated staff for safeguarding or behaviour. We will explain the roles of parents and class teachers and any other trusted adult as well as the DSL and DMSs for safeguarding or behaviour.
* All staff will ensure children feel heard and understood by:
	+ - ensuring a culture of listening to children and taking account of their wishes and feelings,
		- understanding the difficulties that children may have in approaching staff about their circumstances,
		- recognising that some children may not be ready to or know how to tell someone they are being abused, and
		- considering how to build trusted relationships which facilitate communication.
* In matters relating to child protection, good communication and positive trusted relationships between staff and parents is essential.
* All parents /carers are informed that our school has a Child Protection and Safeguarding policy and that we are required to follow Local Safeguarding Children Partnership and other statutory documents and government guidelines in respect of reporting suspected abuse to the Children’s Social Services.
* Parents/carers are made aware of the responsibilities of staff members with regard to Child Protection procedures (e.g. information on the website or in letters to parents).
* Pupils and parents are made aware of how the school’s safeguarding system works and with whom they can discuss any concerns.
* Our Child Protection and Safeguarding Policy, our Online Safety Policy and the name of our Designated Safeguarding Lead (DSL) and Designated Members of Staff (DMS) will be displayed on our website.
* Information about key aspects of safety will be discussed as part of personal, social and health education (PSHE), Relationships and Sex Education (RSE) and Health Education, or in assemblies where appropriate or necessary.
* Information will also be made available about any local and national telephone help lines, e.g. in this policy or on the website (see Appendix A).
* In individual cases, parents are notified of the school’s concerns at the earliest appropriate opportunity.
* In cases of a referral, where possible you should discuss the concerns and inform the parent that a referral will be made, ideally with their agreement. In cases where the parent does not agree the parent should still be informed that it will be shared unless to do so would place the child at increased risk of significant harm.
* Data protection legislation does not prevent the sharing of information for the purposes of keeping children safe. Fears about sharing information must not be allowed to stand in the way of the need to safeguard, promote the welfare and protect the safety of children.

**6. Early Intervention and Help**

**Definition:** Early help is support for children of all ages that improves a family’s resilience and outcomes or reduces the chance of a problem getting worse. It is not an individual service, but a system of support delivered by local authorities and their partners working together and taking collective responsibility to provide the right provision in their area. Some early help is provided through “universal services”, such as education and health services. They are universal services because they are available to all families, regardless of their needs. Other early help services are coordinated by a local authority and/or their partners to address specific concerns within a family and can be described as targeted early help. Examples of these include parenting support, mental health support, youth services, youth offending teams and housing and employment services. Early help may be appropriate for children and families who have several needs, or whose circumstances might make them more vulnerable. It is a voluntary approach, requiring the family’s consent to receive support and services offered. These may be provided before and/or after statutory intervention. (Working Together to Safeguarding Children – link in Appendix A)

* All staff should be aware of their local Early Help process and understand their role in it.
* Early Help means providing support as soon as a problem emerges at any point in a child’s life, from the foundation years through to the teenage years. When a child or family may be experiencing difficulties, support is most effective if it is provided as early as possible.
* Early Help involves identifying emerging problems; liaising with the Designated Safeguarding Lead or other relevant colleagues; sharing information with other professionals to support early identification and acting as lead professional in undertaking an Early Help Assessment (EHA)
* We will ensure Early Help Assessments are carried out in accordance with the guidance set out in Working Together to Safeguard Children 2018.
* If appropriate support is not available within a school’s own resources, an Early Help Assessment will be completed to identify the child’s needs and enable additional support to be sought from other agencies.
* If Early Help is appropriate, the Designated Safeguarding Lead (or deputy) will generally lead on liaising with other agencies and setting up an inter-agency assessment as appropriate. Staff may be required to support other agencies and professionals in an early help assessment, in some cases acting as the lead professional.
* Any such cases should be kept under constant review and consideration given to a referral to children’s social care for assessment for statutory services, if the child’s situation does not appear to be improving or is getting worse.
* Practitioners should, in particular, be alert to the potential need for early help for a child who:
* is disabled or has certain health conditions and has specific additional needs;
* has special educational needs (whether or not they have a statutory Education Health and Care Plan);
* has a mental health need
* is a young carer;
* Is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines;
* Is involved in or at risk or serious violence;
* is frequently missing/goes missing from education, home or care;
* has experienced multiple suspensions, is at risk of being permanently excluded from schools, colleges and in Alternative Provision or a Pupil Referral Unit;
* is at risk of modern slavery, trafficking or exploitation;
* is at risk of being radicalised or exploited;
* has a parent or carer in custody, or is affected by parental offending;
* is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse;
* is misusing drugs or alcohol themselves;
* has returned home to their family from care;
* is at risk of so-called ‘honour’-based abuse such as Female Genital Mutilation or Forced Marriage;
* is a privately fostered child.

**7. Staff training and awareness**

**7.1 DSL, DMS and Staff Training**

* **All staff** will receive appropriate safeguarding and child protection training which is regularly updated, at least annually. In addition, all staff should receive safeguarding and child protection updates (for example, via email or staff meetings), as required, to provide them with relevant skills and knowledge to safeguard children effectively.
* Each school has a member of staff who has received appropriate training and support for the role of Designated Safeguarding Lead (DSL) in accordance with statutory requirements.
* We have additional trained members of staff, who will act in the absence of the Designated Safeguarding Lead, and have also received the appropriate training for the role of Designated Member of Staff (DMS).
* Training for the DSL and DMS should be updated at least every two years.
* Every member of staff, volunteer and governor knows the name of the DSL and DMSs and their roles and what the back-up arrangement are if the DSL is unavailable.
* We will ensure that all staff develop their understanding of signs and indicators of abuse including indicators which may signal that children are at risk from, or involved in, serious violent crime, and understand their responsibilities in passing concerns to the DSL or DMSs through information provided by KCSIE, The DfE and Home Office guidance and through training at induction and regular training at least annually by the lead for safeguarding for the Trust and the school’s DSL. All staff will also be given Safeguarding briefings regularly throughout the year and updates at least annually or as they arise.
* We recognise that there is a variety of expertise within the staff team and will provide opportunities for staff to contribute to and shape Safeguarding arrangements and policy.

**7.2 Staff Understanding of Statutory Guidance and Policies:**

* All staff are familiar with the Child Protection and Safeguarding and supporting policies. These documents are included in the induction for each new staff member joining the Trust at any time.
* All staff are given a copy of Part 1 and Annexe A of ‘Keeping Children Safe in Education’ and a record is kept confirming that they have read and understood these. DSL’s will review any in-year updates to statutory guidance and ensure these are communicated to staff as required.
* Understanding of safeguarding and child protection is assessed and reviewed by regular inputs into staff training and briefings, quizzes, analysis of reports and referrals, questioning, role play and support discussion or supervision where available. Additionally who is making, for what and how referrals are made are also monitored and used to inform understanding of good practice and systems in place.
* All staff, volunteers, and supply staff are given a copy of the ‘Code of Conduct’ (see separate policy) and are given training and guidance to ensure it is understood.
* Safeguarding guidance for trips, both local and residential, is shared with all staff and parent helpers accompanying school trips.

**8. Curriculum Input**

* We ensure that children are taught about safeguarding, including how to keep themselves safe online, through teaching and learning opportunities within a broad and balanced curriculum. This is differentiated according to the age and understanding of the pupil cohort, so that all pupils are enabled to access this input effectively.
* We will ensure that the curriculum includes input about safe relationships and personal resilience and is in line with Government regulations where relevant. (see guidance <https://www.gov.uk/guidance/teaching-about-relationships-sex-and-health>, appendix A )
* This may include covering relevant issues through assemblies, ICT/computing, relationships education, relationships & sex education (RSE) and Health Education, personal, social & health education (PSHE).
* The mandatory Relationships and Sex Education (RSE) and Health Education curriculum will be followed. Additional information can be seen in the separate Trust RSE Policy.
* The Trust endeavours to provide a protective curriculum covering:
* Healthy and respectful relationships
* Respectful behaviour
* Gender roles, stereotyping, equality
* LGBT inclusion
* Body confidence and self-esteem
* Prejudice
* Rights and Responsibilities
* Consent
* Online Safety
* Cultural and societal views of sexual harassment
* That sexual violence and harassment is always wrong including child on child sexual abuse.

**9. Confidentiality**

* We recognise that matters related to Child Protection are of a confidential nature.
* Staff should know how to manage the requirement to maintain an appropriate level of confidentiality. This means **only involving those who need to be involved**, such as the DSL/DMS and children’s social care.
* **Staff cannot promise a child that they will keep certain information secret**, as this may ultimately not be in the best interests of the child.
* Information about a pupil should be shared with other staff on a need to know basis only.
* All staff must be aware that discussing children and specific cases outside of specific meetings in which they are required to be, or with people who are not directly involved in the case, is inappropriate and unethical.
* The CEO will be informed of cases where necessary, and will be informed of all cases resulting in a referral to Children’s Services.
* Written records will be kept of all concerns, whether or not there is a need to refer a matter immediately, and these records must be kept securely, separate from the main pupil file, in a locked location or on an appropriate secure computerised system (e.g. CPOMS).
* In line with the General Data Protection Regulation (GDPR 2018), information will not be kept any longer than is necessary. In some rare circumstances, this may be indefinitely, but if this is the case, there should be a review process scheduled at regular intervals to ensure data is not retained where it is unnecessary to do so.
* **Data protection should not get in the way of people sharing information for safeguarding purposes.** You do not need consent to share personal information for safeguarding purposes. Wherever possible, you should however be open and honest with the individual from the outset as to why, what, how and with whom, their information will be shared. When you do need to gain consent to share information, it must be explicit and freely given. There may be some circumstances where it is not appropriate to seek consent because the individual cannot give consent, or it is not reasonable to obtain consent, or because to gain consent would put a child’s or young person’s safety at risk.

*See additional guidance in Working Together to Safeguard Children 2018 on information sharing, and the Q1E Data Protection policy.*

**10. Specific safeguarding issues**

There are a number of specific safeguarding issues that may impact children in our schools. These include but are not limited to:

* Domestic abuse
* Child Criminal Exploitation (CCE) (including grooming & trafficking)
* Child Sexual Exploitation (CSE), Sextortion and Child Sexual Abuse (CSA)
* Children who harm other children (Peer on peer abuse) including involvement in criminal activities and serious youth violence, including knife crime.
* Online Safety
* Sexual violence and sexual harassment (including child on child)including upskirting
* Youth produced sexual imagery and the non-consensual sharing of nude and semi-nude images and/or videos
* HBA (Honour Based Abuse)
* Forced Marriage
* Breast Ironing
* Female genital mutilation (FGM)
* Preventing radicalisation, extremism and terrorism
* Fabricated and induced illness
* Children missing from home or care
* Children with unexplainable and/or persistent absences from education
* Children and the court system
* Children with family members in prison
* Homelessness
* Serious Violence, including that linked to county lines
* Impact of substance misuse
* Cultural/faith practices that may cause risk/harm (e.g. witchcraft)
* Young Carers
* Children in Care and Private Fostering
* Child Abduction and Community Safety Incidents
* Mental Health
* Positive Handling

There are definitions and details on all of the above issues in Keeping Children Safe in Education. Staff should also refer to the Q1E guidance documents listed in the introduction to this policy.

We recognise that children with special educational needs and disabilities (SEND) can face additional safeguarding challenges. Mental health conditions may also be barriers for reporting concerns. Please see the Q1E Supporting Children with Special Educational Needs and Disabilities Policy, and the Q1E Supporting Mental Health Needs guidance, for more information.

**11. Contextual Safeguarding**

Contextual safeguarding recognises, assesses and seeks to respond wider environmental factors and influences that are present in a child’s life, outside the home and family, which are a threat or pose a risk to their safety or welfare. All staff, but especially the DSL (and DMSs) should consider whether children are at risk of harm outside of their families, and should understand these extra familial issues.

Extra-familial threats and harms might arise at school, from within peer groups, or more widely from within the wider community and/or online. They can take a variety of different forms, and children can be vulnerable to multiple harms including (but not limited to) sexual exploitation, criminal exploitation, radicalisation or serious youth violence. Harms may arise face to face and/or online. They can involve gangs, organised crime groups (including county lines) or extremist groups.

The school will contribute to assessments and mapping processes, taking those extra familial risks into account and sharing relevant information with social workers and other professionals in order to enable all such factors to be taken into account when risk to children is being assessed. This will allow any assessment to consider all the available evidence and the full context of any abuse.

Children who may be alleged perpetrators should also be assessed to understand the impact of contextual issues on their safety and welfare.

Interventions should focus on addressing these wider environmental factors, which are likely to be a threat to the safety and welfare of a number of different children who may or may not be known to local authority children’s social care. Assessments of children in such cases should consider the individual needs and vulnerabilities of each child. They should look at the parental capacity to support the child, including helping the parents and carers to understand any risks and support them to keep children safe and assess potential risk to child. Children’s social care assessments should consider where children are being harmed in contexts outside the home so it is important that schools provide as much information as possible as part of the referral process. This will allow any assessment to consider all the available evidence and enable a contextual approach to address such harm.

*Specific school contextual risks are documented in the individual school’s Contextual Safeguarding addendum.*

**12. Trustee responsibilities**

It is important to remember that **safeguarding is the responsibility of all trustees.** The lead trustee must not be the only person among the trustees who understands safeguarding.

Q1E trustees will:

* Appoint a safeguarding lead trustee.
* Ensure Q1E has up to date, compliant, effective policies in place, reviewed annually, for:
	+ Child protection and safeguarding
	+ Online safety
	+ Managing allegations against staff, supply teachers, volunteers and other adults.
* Remedy any deficiencies or weaknesses in regard to child protection arrangements that are brought to their attention without delay.
* Ensure there is a named lead member of staff for safeguarding at trust level.

In addition to their wider responsibilities as a trustee, **the safeguarding lead trustee** will:

* Champion safeguarding throughout the trust.
* Ensure the board is kept up to date on changes to statutory guidance.
* Make sure there are regular reviews of safeguarding policies and procedures.
* Inform the board whether it needs to make any changes (e.g. in light of new regulations).
* Ensure there is regular space on the board agenda to discuss/review safeguarding.
* Support trustees to understand and challenge trust-level safeguarding policies or reports.
* Consider the trust’s strategic plans and make sure they reflect safeguarding legislation.
* Review whether the things the trust has put in place are creating a safer culture and keeping children safe.
* Check the trust’s risk register properly reflects safeguarding risks and measures.
* Oversee any safeguarding allegations against the CEO, together with the Chair of the Trust Board and the safeguarding lead for the trust.
* Ensure that all trustees and local governors receive appropriate and regularly updated safeguarding and child protection training. This training should equip them with the knowledge to provide strategic challenge to test and assure themselves that the safeguarding policies and procedures in place are effective and support the delivery of a robust whole-school approach to safeguarding.

In addition to their wider responsibilities as a trustee, **the chair of the trust board will:**

* Oversee any safeguarding allegations against the CEO, together with the safeguarding lead trustee and the safeguarding lead for the trust.

**13. Local Governing Body (LGB) responsibilities**

Responsibilities of all local governors:

* Appoint a named safeguarding link local governor.
* Ensure the relevant sections of KCSiE are read annually, understood and followed by all staff and local governors.
* **En**sure safeguarding training is attended by all school staff and local governors.
* Ensure that the Q1E Child Protection and Safeguarding Policy is made available to and read by all school staff and local governors.
* Be aware of their school’s local multi-agency safeguarding arrangements.
* Ensure the school has appointed a Designated Safeguarding Lead (DSL) and that named individuals are fulfilling all the other roles listed in the table on the front page of this policy.
* Ensure theDSL is given “the time, funding, training, resources and support” to carry out their role in accordance with Annexe B of Keeping Children Safe in Education.
* Ensure staff and other adults receive regular supervision and support if they are working directly and regularly with children and learners whose safety and welfare are at risk.
* Ensure the school curriculum covers safeguarding, including online safety.
* Ensure the school records attendance, follows up absence and responds effectively to children who go missing from education.
* Ensure the school site is a safe place, including managing the perimeter and access to buildings, and ensuring visitors can be readily identified.
* **Ensure safe recruitment procedures are followed, with effective checking and vetting.**
* Ensure a single central record (SCR) is kept of checks carried out on staff and volunteers.
* **Ensure a referral is made to the DBS** if someone has harmed, or poses a risk of harm to a child and who has been removed from working (paid or unpaid) in regulated activity, or would have been removed had they not left.
* Ensure the school has an effective online monitoring system and online filters in place.
* Ensure that any deficiencies or weaknesses in regard to Child Protection arrangements that are brought to their attention are referred to the trust board’s attention without delay.

In addition to the LGB responsibilities, **the safeguarding link local governor(s)** should:

* **Regularly attend safeguarding training** to stay up to date with latest statutory guidance.
* Review safeguarding reports written by the headteacher or DSL.
* Make sure there is space on the LGB agenda to discuss safeguarding reports.
* Meet the DSL regularly to discuss the DSL role, their capacity and the support they receive.
* Carry out regular safeguarding monitoring visits and update the LGB on these.
* Make sure that checks for the single central record are happening.
* Ensure the LGB is kept updated on anything issued locally by school safeguarding partners.
* Be made aware of safeguarding incidents by senior leaders (without details – see below).

**14. Designated Safeguarding Lead (DSL) responsibilities**

Local Governing Bodies should ensure that the school designates an appropriate senior member of staff to take lead responsibility for safeguarding and child protection, including online safety.

The DSL role is detailed in Keeping Children Safe in Education Annex C.

**Remember that safeguarding is everyone’s responsibility, not solely that of the DSL or DMS.**

**The broad areas of responsibility for the Designated Safeguarding Lead are:**

* Managing referrals;
* Referring all cases of suspected abuse to the Local Authority children’s social care
* Referring all cases which concern a staff member to the Local Authority Designated Officer (LADO) and the Disclosure and Barring Service (where the person has been dismissed or left due to risk/harm to a child or police where a crime has been committed);
* Liaise with the headteacher to inform him/her of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
* Committing resources and, where appropriate, supporting and directing other staff;
* Act as a source of support, advice and expertise to staff on matters of safeguarding and safety when deciding whether to make a referral by liaising with relevant agencies;
* Take lead responsibility for promoting educational outcomes by knowing the welfare, safeguarding and child protection issues that children in need are experiencing, or have experienced, and identifying the impact that these issues might be having on children’s attendance, engagement and achievement at school;
* Have a working knowledge of the assessment process for providing Early Help and how local authorities conduct a child protection case conference and review and be able to attend and contribute to these effectively when required to do so;
* Ensure each member of staff (including new and part time staff) has access to and understands the trust’s child protection policy and procedures;
* Be alert to the specific needs of children in need, those with SEND and young carers;
* Help promote educational outcomes by sharing information with teachers and school leadership staff about the welfare, safeguarding and child protection issues that children, including children with a social worker, are experiencing or have experienced;
* Be able to keep detailed, accurate, secure written records of concerns, discussions and decisions made including the rationale for those decisions. This should include instances where referrals were or were not made to another agency such as LA children’s social care or the Prevent programme etc.
* Obtain access to resources and attend any relevant or refresher training courses;
* Encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school may put in place to protect them;
* Raise awareness of the trust’s policy and safeguarding risks;
* Liaise with the senior mental health lead and, where available, the Mental Health Support Team, where safeguarding concerns are linked to mental health;
* Ensure the safeguarding policy is reviewed annually and school procedures are updated and reviewed regularly;
* Ensure the policy is available publically and parents are aware that referrals about suspected abuse or neglect may be made and the role of the school in this;
* Link with the Local Authority Safeguarding Partnership to make sure staff are aware of training opportunities and the latest policies on safeguarding;
* Where children leave school, ensure their child protection file is copied for any new school as soon as possible but transferred separately from the main pupil file.
* Have ‘lead responsibility’ on ‘Filtering and Monitoring’ for digital devices and accessibility.
* Be available (or a deputy) during school hours for staff to discuss any safeguarding concerns. Whilst generally speaking this would be expected to be in person, it is a matter for individual schools, working with the DSL, to define what “available” means and whetehr in exceptional circumstances availability via phone and/or Skype or other such media is acceptable. It is a matter for individual schools and the DSL to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

**Designated Members of Staff (DMS):** Those in the DMS role will support the DSL in his/her role, and cover the above responsibilities when required to deputise.

### Appendix A: Useful documents, contacts and links

### Keeping Children Safe in Education (KCSIE): Statutory Guidance for schools and colleges (DFE)

[www.gov.uk/government/publications/keeping-children-safe-in-education--2](https://www.gov.uk/government/publications/keeping-children-safe-in-education--2)

**Working Together to Safeguard Children: a guide to multi-agency working to help, protect and promote the welfare of children** [www.gov.uk/government/publications/working-together-to-safeguard-children--2](https://www.gov.uk/government/publications/working-together-to-safeguard-children--2)

**Local safeguarding children partnership contacts:** <https://www.londonscb.gov.uk/london-scb-contacts/>

**Data Protection Toolkit:** [www.gov.uk/government/publications/data-protection-toolkit-for-schools](http://www.gov.uk/government/publications/data-protection-toolkit-for-schools)

### When to Call The Police: Guidance for schools and colleges [www.npcc.police.uk/documents/Children%20and%20Young%20people/When%20to%20call%20the%20police%20guidance%20for%20schools%20and%20colleges.pdf](https://www.npcc.police.uk/documents/Children%20and%20Young%20people/When%20to%20call%20the%20police%20guidance%20for%20schools%20and%20colleges.pdf)

### London Child Protection Procedures (7th edition): <https://www.londoncp.co.uk/>

**Childline:** [www.childline.org.uk](http://www.childline.org.uk) 08001111(contact number for under 19s)

**NSPCC whistleblowing helpline:** 0808 8005000 (for adults worried about a child)

**NSPCC** **Report Abuse in Education:** 0800 136 663(dedicated helpline providing appropriate support and advice for children and adults who are potential victims of sexual abuse in schools)

**NSPCC Safeguarding Children guidance and resources**

<https://learning.nspcc.org.uk/safeguarding-child-protection>

Searching, screening and confiscation (DfE guidance)

<https://www.gov.uk/government/publications/searching-screening-and-confiscation>

**Education and Training (Welfare of Children) Act 2021** <https://www.legislation.gov.uk/ukpga/2021/16>

**Standards for 'Filtering and Monitoring' (DfE)** [www.gov.uk/guidance/meeting-digital-and-technology-standards-in-schools-and-colleges/filtering-and-monitoring-standards-for-schools-and-colleges](https://www.gov.uk/guidance/meeting-digital-and-technology-standards-in-schools-and-colleges/filtering-and-monitoring-standards-for-schools-and-colleges)

**Appendix B - Flow chart for raising safeguarding concerns about a child**

Concern is written on a safeguarding concern form and handed personally to Designated Safeguarding Lead (DSL) or Designated Member of Staff (DMS)

**Discuss**

Decision made to discuss the concern informally with the parents/ carers

**Refer**

DSL/DMS discusses concern with headteacher or another senior leader before referring to children’s social care (and police if appropriate).

Inform parents of decision to refer unless this would increase the risk to the child.

In exceptional circumstances, concerns may be referred directly to children’s social care by any member of staff.

**Record**

DSL/DMS keeps concern form and other relevant notes in secure, confidential safeguarding file

**Monitor**

Decision made to monitor the concern.

Class teacher asked to monitor child and feedback to the DSL/DSM within an agreed timescale

DSL/DMS reviews concern again

At all stages, staff should keep the child’s circumstances under review and re-refer if appropriate, to ensure the child’s circumstances improve – the child’s best interests must always come first.

**EHA**

DSL/DMS considers whether an Early Help Assessment (EHA) is needed

DSL or DMS reviews concern and makes a decision about next steps

*This flowchart explains the process within school only.*

*For more details of* ***other agencies’*** *processes for dealing with referrals (i.e. after the school has made a referral), please see the flowchart within Keeping Children Safe in Education.*

*For Wandsworth MASH see the flowchart below*

Within one day, children’s social care makes decision about the type of response required.



**Appendix C - Guidance regarding potential signs of abuse**

***Drawn from the London Safeguarding Children Board (SCB) child protection procedures & KCSIE***

#

# **Recognising Physical Abuse**

The following are often regarded as indicators of concern:

* An explanation which is inconsistent with an injury
* Several different explanations provided for an injury
* Unexplained delay in seeking treatment
* The parents / carers are uninterested or undisturbed by an accident or an injury
* Parents are absent without good reason when their child is presented for treatment
* Repeated presentation of minor injuries (which may represent a ‘cry for help’ and if ignored could lead to a more serious injury.
* Family use of different doctors and A&E departments
* Reluctance to give information or mention previous injuries

## Bruising

Children can have accidental bruising, but the following must be considered as non- accidental unless there is evidence or an adequate explanation provided:

* Any bruising to a pre-crawling or pre-walking baby
* Bruising in or around the mouth, particularly in small babies which may indicate force feeding
* Two simultaneous bruised eyes, without bruising to the forehead (rarely accidental, though a single bruised eye can be accidental or abusive)
* Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
* Variation in colour possibly indicating injuries caused at different times
* The outline of an object used e.g. belt marks, hand prints or a hair brush
* Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
* Bruising around the face
* Grasp marks on small children
* Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

## Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shape. Those over 3 cm in diameter are more likely to have been caused by an adult or an older child.

A medical opinion should be sought where there is any doubt over the origin of the bite.

## Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious for example:

* Circular burns from cigarettes
* Linear burns from hot metal rods or electrical fire elements
* Burns of uniform depth over a large area
* Scalds that have a line indicating immersion or poured liquid (a child getting into hot water of its own accord will struggle to get out and cause splash marks)
* Old scars indicating previous burns / scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

## Fractures

Fractures may cause pain, swelling and discoloration over a bone or a joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

* The history provided is vague, non-existent or inconsistent with the fracture type
* There are associated old fractures
* Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
* There is an unexplained fracture in the first year of life

## Scars

A large number of scars or scars of different sizes or ages, or on different parts of body, may suggest abuse

## Behavioural Indications

Some children may behave in ways that alert you to the possibility of physical injury, for example

* Withdrawal from physical contact
* Fear of returning home
* Self-destructive tendencies
* Aggression towards others

## Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse. The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

* Developmental delay
* Abnormal attachment between a child and parent / carer e.g. anxious, indiscriminate or no attachment
* Aggressive behaviour towards others
* Scape-goated within the family
* Frozen watchfulness, particularly in pre-school children
* Low self-esteem and lack of confidence
* Withdrawn or seen as a ‘loner’ – difficulty relating to others
* Over-reaction to mistakes
* Fear of new situations
* Inappropriate responses to painful situations
* Neurotic behaviours
* Self-harming
* Running away
* Witnessing ill treatment of others, including where they see, hear or experience the effects of domestic abuse.

### Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting. Indicators include:

* Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
* A child seen to be listless, apathetic and unresponsive with no apparent medical cause
* Failure of child to grow within normal expected pattern, with accompanying weight loss
* Child thrives away from home environment
* Child frequently absent from or late for school
* Child left with adults who are intoxicated or violent
* Child abandoned or left alone for excessive periods
* Compulsive stealing or scavenging

**Recognising Sexual Abuse**

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and / or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child / family. Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional / behavioural.

Some behavioural indicators associated with this form of abuse are:

* Inappropriate sexualised conduct
* Sexually explicit behaviour, play or conversation, inappropriate for the child’s age
* Continual and inappropriate or excessive masturbation
* Self-harm (including eating disorder, self-mutilation and suicide attempts)
* Involvement in prostitution or indiscriminate choice of sexual partners
* An anxious unwillingness to remove clothes for e.g. sports events (but this may be related to cultural norms or physical difficulties)
* Concerning changes in behaviour or general presentation
* Regressive behaviour
* Distrust of a particular adult
* Unexplained gifts of money
* Sleep disturbances or nightmares
* Phobias or panic attacks

Some physical indicators associated with this form of abuse are:

* Pain or itching of genital area
* Blood on underclothes
* Pregnancy in a younger girl
* Physical symptoms such as injuries to the genital or anal areas, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen in vagina, anus, external genitalia or clothing
* Wetting or soiling

Please also refer to the Brook Traffic Light Tool listed in Appendix A for advice in what behaviours are a concern versus age appropriate exploration for support guidelines.

**Child Sexual Exploitation**

Some of the following signs may be indicators of sexual exploitation:

* Children who appear with unexplained gifts or new possessions;
* Children who associate with other young people involved in exploitation;
* Children who have older boyfriends or girlfriends;
* Children who suffer from sexually transmitted infections or become pregnant;
* Children who suffer from changes in emotional well-being;
* Children who misuse drugs or alcohol;
* Children who go missing for periods of time or regularly come home late and
* Children who regularly miss school or education or who do not take part in education.

**Appendix D: Example of concern or disclosure form**

|  |
| --- |
| **Safeguarding Concern Form**  |
| Child’s Full Name: |  | Class: |  | Date of Birth: |  |
| Date: |  | Day: |  | Time: |  |
| Name of staff member noting concern: |  | Role: |  |
| Concern: (please describe as fully as possible) |
|  |
| Signature: |  | Date: |  |
| **Now hand this to a Designated Member Staff (DMS) as soon as possible.****Sections below to be completed by DMS only.** |
| Name of DMS: |  | Date and time received: |  | Signature of DMS: |  |
| Action(s) Taken by DMS | Date | Time | Reason for action/ decision | Signature |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Appendix E – School report to Child Protection Conference (Primary)**

|  |  |
| --- | --- |
| **School:** |  |
| **Name of child:** |  | **Date of birth:** |  |
| **Year group:** |  | **Name of class teacher:** |  |
| **Attendance and punctuality** |  |
| **Who brings and collects the child?**Include after school arrangements |  |
| **Is the child prepared for school?**e.g.PE kit; book folder, homework |  |
| **General appearance / presentation**e.g. appropriate clothing, clean & tidy  |  |
| **Emotional presentation**e.g. happy, sad, anxious, preoccupied, withdrawn |  |
| **Academic progress/ attainment/areas requiring improvement**Please note strengths & concerns |  |
| **Social development** |  |
| **Relationships with adults** |  |
| **Relationships with other children** |  |
| **Home / school contact**Are parent(s) easily contactable / supportive of school / attend parent’s evenings / use PACT folders or diaries etc |  |
| **Any other areas of concern**Please note any issues or specific incidents which have concerned you |  |
| **Name of person completing form:** |  | **Signature:** |  | **Date:** |  |

**Appendix F - Mobile Pupil Confidential Report**

|  |  |  |  |
| --- | --- | --- | --- |
| School pupil is moving from: |  | School pupil is moving to: |  |
| Name of child: |  | Date of birth: |  |
| Does child have an EHA/SOWB/eCAF?  | **Yes/No** |
| **Safeguarding/child protection**  |
| Are there any safeguarding/child protection concerns? | **Yes/No**If yes:Have these been communicated to the school?  **Yes/No**Have any relevant documents been forwarded to the school: **Yes/No** |
| Any other comments: |  |
| **Special Educational Needs**  |
| Does the child have any Special Educational Needs concerns:  | **Yes/No**If yes:Have these been communicated to the school?  **Yes/No**Have any relevant documents been forwarded to the school: **Yes/No** |
| Any other comments: |  |
| **Please comment on any of the following areas which you feel we should be aware of:** |
| The child’s character (e.g. social interaction, personal organization) |  |
| The child’s general behaviour |  |
| The child’s interests outside school and any wider achievements |  |
| Any standardised scores e.g. reading age, NC Levels, NFER or academic concerns |  |
| Family circumstances |  |
| Attendance Record |  |
| Any further comments  |  |
| Completed by |  | Position in School |  | Date |  |

*Please return to Designated Safeguarding Lead at the school address*

**Appendix G - Risk Assessment Template for Volunteers working in Schools who are NOT in Regulated Activity (Print Version) To go with DBS policy**

*This risk assessment template may be used by schools when deciding whether to obtain an enhanced DBS certificate for regular volunteers who are NOT engaged in regulated activity, in line with Keeping Children Safe in Education. This would NOT be appropriate for volunteers who simply assist with day-time school trips.*

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Volunteer |  | Start Date |  |
| Person conducting the risk assessment  |  |

Is the Volunteer going to be working in Regulated Activity[[1]](#footnote-1)? [tick one box]

**A** Yes **□** (*If “Yes” you* ***must*** *obtain an Enhanced DBS certificate with Barred List check and you do* ***not*** *need to fill out this risk assessment further)*

**B** No **□** *(If “No” you may choose to obtain an Enhanced DBS certificate* ***without*** *a Barred List check, based on this risk assessment and your professional judgement)*

|  |  |  |  |
| --- | --- | --- | --- |
| Factors to Consider | Description | Guide to Risk Score1=Low risk2=Moderate Risk3=High risk | Risk score |
| Will they have direct contact with children? |  | 1=No Contact2=Some Contact3=Regular Contact |  |
| Frequency of working directly with children? |  | 1=Never/rarely2=Occasionally3=Frequently |  |
| Age range of the children? |  | n/a |  |
| Any contact with children particularly vulnerable? |  | 1=No Contact2=Some Contact3=Regular Contact |  |
| Assisting with any personal care? | *(If “yes” the Volunteer is Regulated Activity, tick box A above)*  | 1=No Personal Care2=Some Personal Care=Regulated Activity |  |
| What tasks will they be doing? |  | 1=low risk/simple tasks2=moderate risk/more complex tasks3=high risk/complex tasks |  |
| Frequency of working in the school? |  | 1= Occasionally2=2-3 times a term3=weekly+ |  |
| Will they be working with children outside of school hours? when? | *(Work between 2am and 6am is Regulated Activity, tick box A above)* | 1=None2=Occasionally3=Frequently2-6am=Regulated Activity |  |
| Will they be working with children off school premises? Where? When?  |  | 1=Never/rarely2=Occasionally3=Frequently |  |
| Is the school a residential setting? |  | 1=No3= Yes |  |
| What is the association of the Volunteer with the school? |  | 1=strong links eg ex staff2=some eg parent/ex pupil3=none or weak link |  |
| How well does the school know the history of the Volunteer? |  | 1=Well Known2=Some knowledge3=Little or none |  |
| What do you believe is their reason for volunteering? |  | 1=positive/sound reasons2=acceptable /neither good nor bad3=not known/personal gratification |  |
| Can the volunteer provide a relevant reference from someone they have worked or volunteered for? |  | 1=Yes3= No |  |
| Can the volunteer provide a reference from someone who knows their work with children? |  | 1=Yes3= No |  |
| Does the volunteer have a history of paid or voluntary work with children? |  | 1=Currently working2=Worked within 5 years3=Over 5 years ago4=Never worked with chilren |  |
| Does the Volunteer have a recent DBS certificate from another role? |  | 1=Yes within 12 months2=Yes over 12 months3=No |  |
| Is the Volunteer currently signed up to the DBS update service? |  | 1=Yes for a similar role2=Yes for different role3=No |  |
| Are there any known or suspected concerns around working children? |  | 1=No concerns2=Don’t Know3=Some concerns |  |
| Any other factors to be taken into account. |  |  |  |

|  |  |
| --- | --- |
| Total Risk Rating [total up the risk scores for each factor] |  |
| Overall Risk level [tick one box – refer to guide below] |  High □ | Medium □ | Low □ |

**Guide to assessing risk level**

(remember this is only a rough guide and individual schools should determine their own risk levels)

**Low Risk.** A score of less than 30 points suggests the volunteer is well known to the school, has probably got some experience of previous work with children and can provide a reference and is generally working on school premises and within normal school hours with children who are not deemed particularly vulnerable. They may be a previous employee, governor or volunteer and/or well known to staff or colleagues. They may hold a recent DBS certificate which has been seen or a portable DBS

**<30**

*Action: there is no legal requirement to carry out a further DBS check but if the person doesn’t hold a portable DBS they may wish to consider carrying out an enhanced DBS check with NO Barred List check*

**Moderate Risk**. A score between 30-40 points suggests the volunteer has some connection with the school, perhaps as a parent and may have done some similar voluntary work in the past. No particular issues have come to light and there are no concerns over their suitability. The person has provided suitable references. They may work regularly with children where occasionally some of these children are deemed vulnerable. They do not have recent or portable DBS check.

**30-40**

*Action: there is no legal requirement to carry out a further DBS check however the school may wish to consider carrying out an enhanced DBS check with NO Barred List check*

**High Risk**. A score of above 40 points suggests that the volunteer has no previous connection with the school and is not known to staff at the school and cannot provide relevant references as to their suitability to work with children. They do not hold a current DBS or portable DBS check or they may be expected to work directly with children who may be particularly vulnerable or off school premises and out of hours.

**41+**

*Action: there is no legal requirement to carry out an enhanced DBS check, however it is recommended that the school consider carrying out an enhanced DBS check with NO Barred List check.*

**Agreed Action:** [tick box]

Enhanced DBS Check **NOT** required? **□** Enhanced DBS Check **IS** needed? **□**

Comment on reason:

**Signed Off:**

Name of person Signing off risk assessment: ……………………………………………

Role: ………………………………………………………………………………………….

Signature: …………………………………………………………………………………...

Date: …………………………………………………………………………………………

**Appendix H – Relevant Parts of KCSIE to read**

[Keeping children safe in education - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/keeping-children-safe-in-education--2)

|  |  |
| --- | --- |
| **All staff with direct contact with children** | **Should read Part 1 and Annex B** |

|  |
| --- |
| **In addition:**  |
| Headteachers and DSLs | Should read the whole policy (DSLs should ensure Annex B is included in their job description) |
| Headteachers, senior leaders, behaviour leads and designated members of staff for safeguarding | Should read part 5 |
| Local governors and trustees  | Should read at least parts 2, 3, 4 and 5 |
| Designated local governors and trustees for safeguarding  | Should read the whole policy |
| Anyone involved in recruitment and/or SCR (including recruiters/ managers of volunteers) | Should read part 3 paragraphs 191-194 and annex E |
| HR staff | Should read the whole policy but concentrate on parts 3 and 4 and annexe F and G |
| Anyone in classroom-based roles, ICT or network roles  | Should read Annex C  |
| Anyone involved in allegations and concerns against staff, including Heads, DSLs, SLT, HR, Local governors and Trustees | Should read part 4 |
| Governors and proprietors can identify staff who Do Not have direct contact with children, who may only need to read the condenced Part 1 in Annex A.  |

1. Refer to Annex F in Keeping Children Safe in Education for the Statutory Definition of Regulated Activity [↑](#footnote-ref-1)