



**IMMANUEL COLLEGE**  
**Safeguarding Policy**

<b>Document Control Table</b>			
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<b>Document History</b>			
Version	Date	Author	Note of Revisions
v2	3/9/18	SH	<p>Section 1 – updates/changes to safeguarding team.</p> <p>Section 2 – update legislation/guidance</p> <p>Section 4b – training regime updated</p> <p>Section 4e – updated agencies</p> <p>Section 4b – addition of para 22 from Disqualification from Childcare</p> <p>Section 4c - addition of mobile phone policy</p> <p>Section 5a – update to Safeguarding Definition</p> <p>Section 5c – Definitions of abuse updated</p> <p>Section 6a – updated SEND barriers</p> <p>Section 6c – KCSIE 2018 quotes &amp; update to Early Help information &amp; DSL action (with regards to BDAT) + GDPR info from KCSIE 2018 re sharing information with practitioners.</p> <p>Section 6d – quote from WT 2018 added</p> <p>Section 6e – removal of time limit on files</p> <p>Section 7 – all hyperlinks checked/corrected</p> <p>Section 7a – addition of ‘county lines’</p> <p>Section 7b – update of additional safeguarding risks as well as addition of Contextual Safeguarding, Peer on Peer abuse and updating of Sexting advice</p> <p>Section 7d – updated referral forms</p> <p>Notes Section – link to Govt PI advice</p>
v3	23/8/19	SH	<p>Section 1 - newly trained staff added to Safeguarding Team list</p> <p>Section 1 – directions if LADO is not available</p> <p>Section 4b – addition of reference in main body of policy to Ofsted’s ‘Positive</p>

		<p>environments where children can flourish' (March 2018) and updating staff's need to discuss potential unsafe relationships/associations in the light of GSWP 2019</p> <p>Section 4b – add 'or mental health' to incidents to which staff must call a First Aider.</p> <p>Section 4b.i – Addition of Section 128 checks for Governors</p> <p>Section 4b.ii – Removal of DBS 5 year renewal. Addition of report that the need of staff to discuss unsafe associations/relationships with SLT added to Annual Self Declaration Form in light of GSWP 2019</p> <p>Section 4b.iv - update re documentation given to new staff at their induction.</p> <p>Section 4b.iv - add 'Upskirting' to examples of Peer on Peer abuse (as per KCSIE 2019) as well as reference to Annex A of KCSIE 2019 and hyperlink to 'Sexual violence and sexual harassment between children in schools and colleges'</p> <p>Section 4b.iv – add 'Named Safeguarding Governor' to support</p> <p>Section 4c – Childline number added &amp; statement about role of PHSE in Immanuel strengthened to reflect KCSIE 2019 para 88</p> <p>Section 4f – add new 'Smoothwall' online monitoring to ICT Acceptable Use Policy and agreement</p> <p>Section 4g – add 'Mental Health Policy' to list of related College policies</p> <p>Section 5 – Serious Violence, CCE and Upskirting added to list of potential abuse (as per KCSIE 2019). Final quote from KCSIE 2019 added re reporting to CSC/Police</p> <p>Section 5a – add 'physical and mental health' to the work of First Aid</p> <p>Section 5a – Honour Based Violence clarified to show that FGM and Forced Marriage are examples of HBV (as per Annex A KCSIE 2019)</p> <p>Section 5a – hyperlink added to 'Guidance for safer working practice for those working with children and young people in education settings' May 2019</p>
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		<p>Section 5c – hyperlink added to ‘Sexual violence and sexual harassment between children in schools and colleges’</p> <p>Section 6 – introduction updated with quotation from KCSIE 2019</p> <p>Section 6a, 6b, 6e, 7a – addition of restriction on staff taking images/recordings of children’s injuries or disclosures (as per Guidance for safer working practice for those working with children and young people in education settings’ May 2019)</p> <p>Section 6c – updated action to take if DSL not available to reflect KCSIE 2019</p> <p>Section 6d - updated Education Safeguarding numbers</p> <p>Section 6g – new link to LADO referral form and directions as to where to send it</p> <p>Section 6g – add more NSPCC contact info</p> <p>Section 7a – Serious Violence added to list of signs of abuse (as per KCSIE 2019)</p> <p>Section 7a – hyperlink added to CCE information</p> <p>Section 7b – add ‘Upskirting’ to examples of Peer on Peer Abuse (as per KCSIE 2019)</p> <p>Section 7b – CME local officer’s (Education Safeguarding Team) phone number added</p> <p>Section 7b – local Prevent Education officer number added</p> <p>Section 7b – hyperlink added to government publication: ‘Sexual violence and sexual harassment between children in schools and colleges’</p> <p>Section 7b – updated and expanded section on Child on Child Sexual Violence and Harassment using information from Annex A of KCSIE 2019.</p>
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## **1. DESIGNATED SAFEGUARDING LEADS**

Designated Safeguarding Lead: Stuart Hacking (01274 425900)

Deputy Designated Safeguarding Lead/LAC: Emma Sey (01274 425900)

Trained Safeguarding Team: Steven Shearn (SLO Manager); Andrea Whittle (SENCO); Cate Blake (Post 16 Pastoral Support); Samra Majid (PSHE/Prevent); Emily Trotter (Youth Worker); Donna Stockdill (SLO); Vicky Jamieson (Mental Health Champion/First Aider); Amanda Smith (Learning Development Centre manager); Lesley Riley (Welfare & Attendance officer).

Named Governor for Safeguarding: Mr John Watts (01274 425900)

Local Authority Designated Officer (LADO): Dawn Holt (01274 434339) or contact 01274 435600 and ask to be put through to the Duty LADO or the Safeguarding Duty Co-ordinator.

## **2. INTRODUCTION**

This policy is in response to Sections 157 and 175 of the Education Act 2002, implemented June 2004 and 'Keeping Children Safe in Education' issued by the DfE in 2016 and updated in 2018 and 2019 and 'Working Together to Safeguard Children' (DFE 2018).

It is in line with the Bradford Safeguarding Children Board's Procedures and DfE guidance.

This policy applies to all adults, including volunteers, working in or on behalf of Immanuel College.

Immanuel, as a C of E College, fully recognises its responsibilities to provide a safe environment for children and young people; to identify children and young people who are suffering or are likely to suffer significant harm and to take appropriate action to ensure they are kept safe at home and at the college / college approved activities.

Our policy applies to all staff, governors and volunteers who are either visiting or working in the college.

## **3. THE CHRISTIAN ETHOS OF IMMANUEL COLLEGE**

At Immanuel we believe that we are 'All God's Children'. This belief means that we recognise the unique status of children and our responsibility to safeguard them. The Lord Jesus valued children and reserved some of his most forthright words for those who led children astray. In the light of this we endeavour to foster relationships of the highest integrity with our students in order to safeguard and promote their welfare. Each student's welfare is of paramount importance.

We recognise that some children may be especially vulnerable to abuse e.g. those with Special Educational Needs, those living in adverse circumstances. We recognise that children who are abused or neglected may find it difficult to develop a sense of self-worth and to view the world in a positive way. We will always take a considered and sensitive approach in order that we can support all our students. Safeguarding and promoting the welfare of children is everyone's responsibility. Everyone who comes into contact with children and their families and carers has a role to play in safeguarding children. 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.

## **4. PROVIDING A SAFE AND SUPPORTIVE ENVIRONMENT**

### **4a Safer Recruitment and Selection**

- The College operates a strict recruitment procedure following the principles of Safer Recruitment Training. This includes: Clear and easily understood advertisements; Detailed personnel specifications for each post; Job descriptions for each post; Any further particulars of the post as described in an additional information document

- Applications are assessed against the personnel specification and other application information to create a short list of candidates. Safer recruitment checks undertaken on applications include qualifications, gaps in employment, 2 referees including most recent employer.
- Interviews are conducted fairly and consistently on a structured basis
- All interviewees provide evidence of qualifications (if applicable) and identification
- All Interview Panels include a member of staff who is 'Safer Recruitment' trained, a Governor when appropriate and a member of the Senior Leadership Team.
- References are always taken for new employees and details are checked against other records for consistency.
- The advice provided in the DFE publication 'Keeping Children Safe in Education' 2019, is followed.
- Eligibility to work in the UK will be checked and recorded in line with guidelines current at the time of recruitment.

## **4b Safe Practice**

Safe working practice ensures that students are safe and that all staff:

- Are responsible for their own action and behaviours and know how to avoid any conduct which could lead any reasonable person to question their motivation or intentions;
- Are to discuss with school any relationship or association (in the real world or online) they have which may affect their suitability to work with children ie where their relationships and associations both within and outside of the workplace (including online) may have implications on the school's ability to safeguard children in school. (Disqualification under the Childcare Act 2006 para 22 Regulations 2018)
- Work in an open and transparent way;
- Discuss and/or take advice from Immanuel's Senior Leadership Team over any incident which may give rise to concern;
- Record any incidents or decisions made in relation to a child or young person;
- Apply the same professional standards regardless of ethnicity, faith, gender or sexuality;
- Are aware that breaches of the law and other professional guidelines could result in criminal or disciplinary action being taken against them.
- Who are specifically involved in Behaviour Management (ie the Student Liaison Officers) are trained in 'Team Teach'<sup>1</sup>. On very rare occasions the SLO may need to prevent a disruptive or upset child from hurting themselves or another student or member of staff. This will be in line with the latest Government/Ofsted advice in 'Positive environments where children can flourish' (March 2018) where it states that 'restraint is permissible. There will be times when staff feel that they need to intervene physically to keep children safe (or to keep staff safe). ...We expect adults to be skilled and confident in finding the best ways to keep children safe; ways that promote their rights, respect their dignity and help equip them for the future.' Any such physical intervention will be recorded on a PI form (see appendix 7d and notes section)
- Will allow a trained school First Aider to attend any medical or mental health incident. The First Aider will contact the DSL and/or Head or Deputy Headteachers to advise further action if needed;
- Will respond immediately to any direction given by the Headteacher/Deputy Headteachers or DSL regarding an incident which is deemed 'critical' as outlined in the 'Managing Critical Incidents Procedure';
- Will make themselves aware of the Fire Evacuation Policy/Procedure which are relevant to the space in which they teaching and will follow them.

### **4b.i DBS Checks and Access to the College**

- Single Central Record (SCR)

The details of all members of staff who work in the College are entered on the Single Central record. We also include on this record details of supply staff, volunteers, regular visitors and Governors. Individuals entered onto the SCR will complete an Immanuel College 'Self Declaration Form' that confirms they have no convictions since the date of their DBS annually.

- Those people not included on the SCR but who could be found in the College include Occasional Visitors and Building or Maintenance Contractors and these circumstances are described below.
- Employees: All appointments are made subject to satisfactory references and Enhanced DBS checks carried out by Immanuel College.
- DBS Checks Returned with a Disclosure: Immanuel College recognises that in some cases DBS checks will include disclosures of past criminal activity. This is not in itself a bar to inclusion on the Single Central Record. In all such cases, the Headteacher will assess the risk, taking advice as necessary, and decide if the individual is considered appropriate to include on the SCR. It is the College's understanding that other Authorised Bodies that are recognised by the College, will complete similar risk assessments in the event of a DBS Check disclosure.
- Starting Employment without an Immanuel College DBS Check: In exceptional cases, a member of staff is authorised by the Headteacher to start work before the return of their Immanuel College DBS check, only if they sign a personal declaration stating that they have no criminal convictions, bind-over orders, cautions, reprimands or warnings recorded against them. Exceptional circumstances arise where a key role in College is vacant and the time taken to process a DBS check is extensive. In such cases a risk assessment is undertaken and members of staff are only allowed to work alongside other members of staff and never alone. An ISA Barred List Check is always completed.
- Accepting DBSs Completed by Other Organisations: Immanuel College complete new DBS checks for all new employees on appointment. For those peripatetic teachers/coaches or volunteers working for shorter or infrequent times, the College recognises DBS checks completed by other organisations in the following circumstances: An employee of the Trust; Other Schools, Academies or Local Authorities; Recognised Supply Agencies; the Safer Schools Police (SSP) Officer employed in college as part of the Bradford SSP initiative; other Professionals working with children.  
In these cases the College will accept a letter of confirmation, from the employer, stating that they have a DBS policy/procedure in force and that all appropriate checks have been carried out for the named individual. This letter should be renewed annually. Any professionals who are self-employed will be required to produce a DBS update service reference number. If this is not available (ie they do not have a portable DBS) then a full enhanced DBS check must be undertaken by the College and the cost charged to the self-employed professional
- Occasional Building or Maintenance Contractors: If the Contractor can provide a portable DBS this will be entered in the regular visitor's section of the SCR. If a DBS number is not available the contractor will be accompanied by a member of staff at all times. Contractors without a DBS number will not be left to work alone in areas of the site to which students have access. In any event where possible and in the majority of cases, maintenance is carried out outside the normal college day.
- Regular, Voluntary Helpers: When determining whether to apply for a DBS check or check the update service for a volunteer, a decision must be made as to whether the individual will regularly be undertaking regulated activity on an unsupervised basis: 'Supervision' must be regular i.e. on-going and day-to-day; and be reasonable in all circumstances for the purpose of protecting the children concerned; and carried out by an individual who is engaging in regulated activity relating to children and has a DBS

disclosure with barred list check. The definition of 'regulated activity' is "teach, train, instruct, care for or supervise children, or provide advice/guidance on well-being, or drive a vehicle only for children". The definition of 'regular' activity is where a regulated activity is undertaken by the same individual either once a week or more; on four or more days in a 30 day period; at least once, overnight and with the opportunity for face-to-face contact with children.

- Governors: All governors require an enhanced DBS check. Governors are also subject to a Section 128 check.
- Occasional Visitors: Occasional visitors do not need a DBS check when visiting, provided they are permanently in the presence of a member of the College's staff.
- Interview Candidates: Candidates on interview will not have verified DBS Checks but may be shown around the college by students and at least one adult. No candidate is ever left on his or her own with one student.

#### **4b.ii Updating DBS Checks**

- Every year each member of existing staff is required to sign an Annual Self Declaration form stating that they have nothing to declare since their latest DBS check. This form also reminds staff that it is expected that any member of staff who has a relationship or association (online or in the real world; in school or out of school) that might impact on the College's ability to safeguard the students should discuss this with a member of the SLT.
- Breaks in Service – Exam Invigilators: Exam invigilators should be asked to complete a declaration once each year at the training session run by the Examinations Office irrespective of how frequently they visit college. This will ensure we have an annual declaration in addition to the normal cycle of DBS renewal.

#### **4b.iii Visitor/Reception Practice**

- Definition of a Visitor is anyone not in possession of an Immanuel College Staff identity card.
- Regular Visitors (once a week or more, or 4 or more days in a 30 day period) or peripatetic teachers must not work in the college without being included on the SCR. Until they are included on the SCR they may only work when accompanied.
- Visitor Access Arrangements: All Visitors must 'sign-in' on the Inventory system at Reception. They will be given a Visitor Pass and instructed that it must be worn at all times. Unknown visitors will be required to show photographic ID. A check will be made by reception staff as to whether the visitor is included in the SCR. Visitors listed on the SCR can then move around the college and carry out their business without being accompanied. Visitors not listed on the SCR must all be announced to the member of staff that is responsible for the work they have come to complete. This member of staff must ensure that the visitor is accompanied at all times and signs out at reception on leaving the building.

#### **4b.iv Staff Training**

- Immanuel has undertaken Child Safeguarding training for all staff and updates this training annually to ensure that staff are safe and aware of behaviours which should be avoided. In addition Immanuel's Staff Code of Conduct outlines acceptable and unacceptable behaviour towards children and young people.
- Immanuel's Designated Safeguarding Lead and Deputy Safeguarding Leads with Responsibility for Child Protection undertake child protection and safeguarding training annually or at least on a 2 yearly basis. All other staff undertake appropriate

induction training to equip them to carry out their responsibilities for child protection effectively, which is updated annually.

- All staff (including temporary staff and volunteers) are provided with 'Keeping Children Safe in Education Part 1 and Annex A' (2019) as well as this Safeguarding Policy and a short flow-chart on how to identify and report concerns. For staff arriving after the beginning of term, this will be given to them during their induction.
- Immanuel aims to provide training on specific and relevant Child Safeguarding issues as they arise.
- All staff will be made aware that safeguarding issues can manifest themselves via peer on peer abuse. This is most likely to include, but not limited to: bullying (including cyber bullying), gender based violence/sexual assaults and sexting. This also now includes 'upskirting' which typically involves taking a picture under a person's clothing without them knowing (see section 7b). For more information see Annex A of KCSIE 2019 and [Sexual violence and sexual harassment between children in schools and colleges](#).
- Staff will be supported by the Designated Safeguarding Lead and Deputy Designated Safeguarding Leads with Responsibility for Child Protection, who will provide guidance and training where appropriate. They will be supported by the Headteacher, Chair of Governors, Named Safeguarding Governor and the CEO at the Bradford Diocesan Academy Trust. Advice and support is also always available from BSCB and further advice is available from the Police.

#### **4c Sharing Safeguarding Information with Students**

Immanuel is committed to ensuring that students are aware of behaviour towards them that is not acceptable and how they can keep themselves safe. All students know that we have two senior members of staff with responsibility for child protection and safeguarding and know who they are. The wider Safeguarding Team at Immanuel is publicised to the children via posters at key areas throughout the school. We also inform students via assemblies and form groups of whom they might talk to in Immanuel; their right to be listened to and heard and what steps can be taken to protect them from harm. PSHE through lessons, Form Tutor time, assemblies and drop-down days/activities as well as Collective Worship are used to teach students about Safeguarding including online safety. Immanuel believes it is important to give students a broad and balanced curriculum to help them recognise when they are at risk and how to get help when they need it. Information is made available to students through poster throughout the school, in particular NSPCC/Childline posters that show the Childline number of 0800 1111 and the web address of [childline.org.uk](http://childline.org.uk)

#### **4d Partnership with Parents**

- Immanuel shares a purpose with parents/carers to keep children safe from harm and to have their welfare promoted. All parents/carers and visitors are provided with the following statement on the Reception Desk by the signing in screen: "We at Immanuel College believe that our students and staff are 'All God's Children'. We believe that safeguarding all of the Immanuel family is our highest priority. If you have any concerns about the safety of any student please ask for one of our Safeguarding Officers."
- We are committed to working positively, open and honestly with parents/carers. We ensure that all parents/carers are treated with respect, dignity and courtesy. We respect parents/carers' rights to privacy and confidentiality and will not share sensitive information unless we have permission or it is necessary to do so to protect a child. Immanuel will share with parents/carers any concerns we may have about their child unless to do so may place the child at risk of harm.
- Immanuel College will follow the Bradford Safeguarding Children Board's procedures when dealing with any matters of a child protection nature. Immanuel will endeavour to discuss all concerns with parents/carers about their child/ren. However, there may be exceptional

circumstances when Immanuel will discuss concerns with Children's Social Care and/or the Police without parental knowledge (in accordance with BSCB Child Protection Procedures). Immanuel will, of course, always aim to maintain a positive relationship with all parents/carers. Immanuel's Child Safeguarding Policy is available to all parents/carers upon request and on the College's website.

#### **4e Partnerships with Others**

- 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. Inter-agency working and information sharing are vital in identifying and tackling all forms of abuse.
- Immanuel recognises that it is essential to establish positive and effective working relationships with other agencies. These include the Local Authority, Children's Social Care, Early Help, Police, CAMHS, School Nursing service, and many external and internal support and counselling services dependent on the need of the child. External agencies use consulting rooms which are connected to the Learning Mentors' room.
- Fears about sharing information cannot be allowed to stand in the way of the need to promote the welfare and protect the safety of children.

#### **4f. Online Safety**

- It is essential that children are safeguarded from potentially harmful and inappropriate online material. The College has website filtering and monitoring software on all computers via Smoothwall. As part of a broad and balanced curriculum, the College offers a curriculum which covers the need for safeguarding, including online. This is covered through PSHE and the assembly programme. Immanuel also works alongside the Cyber PCSOs who offer advice and come to the College to speak to students and parents/carers.
- The College has a zero tolerance policy towards mobile phones being used in school. Any phones being used in school are confiscated and only returned to the student at the end of school if they have willingly given up their phone to the member of staff.
- See e-safety policy and Information and Communications Technology Acceptable Use Policy and the Acceptable Use Agreement which all members of staff must sign.

#### **4g. Related College Policies**

- Safeguarding covers more than the contribution made to child protection in relation to individual children. It also encompasses issues such as student health and safety and bullying and a range of other issues, for example, arrangements for meeting the medical needs of children, providing first aid, school security, drugs and substance misuse etc. There may also be other safeguarding issues that are specific to the local area of population.
- Other related Policies and Protocols that should be referred to include: Mental Health Policy; Health and Safety Policy; Anti-Bullying Policy; Acceptable use of ICT Policy; Social Media Policy (BDAT); Recruitment Policy; Staff Code of Conduct; Whistleblowing Policy; Dealing with Drug Incidents Policy & Procedure ; Educational Visits Procedure ; Equal Opportunities Policy ; Medical Conditions Policy (BDAT); Fire Evacuation Procedures; Critical Incidents Policy and BDAT's Safeguarding and Child Protection Policy.

#### **4h. Student Information**

In order to keep children safe and provide appropriate care for them each Immanuel requires accurate and up to date information regarding:

- Names (including any previous names), address and date of birth of child;

- Names and contact details of persons with whom the child normally lives;
- Names and contact details of all persons with parental responsibility (if different from above);
- Whether the child is Looked After;
- Emergency contact details;
- Details of any persons authorised/not authorised contact with the child;
- Any relevant court orders in place including those which affect any person's access to the child (e.g. Residence Order, Contact Order, Interim or Full Care Order, Injunctions etc);
- If the child is or has a Child Protection Plan;
- Name and contact details of any key persons from other agencies, including GP;
- Any other factors which may impact on the safety and welfare of the child.

#### **4i. Roles and Responsibilities**

##### **4i.i. The Governors will ensure that:**

- The College has a Child Safeguarding policy and procedures in place that are in accordance with Bradford Safeguarding Children Board guidance and locally agreed interagency procedures, and the policy is available to parents/carers upon request;
- The College operates safe recruitment procedures and makes sure that all appropriate checks are carried out on staff and volunteers who work with children;
- The College has procedures for dealing with allegations of abuse against staff and volunteers that comply with guidance from the Local Authority and locally agreed inter-agency procedures;
- A senior member of the College's Leadership Team is designated and trained to take lead responsibility for Child Protection (and a deputy);
- Staff undertake appropriate child protection training, including at three yearly training;
- They remedy, without delay, any deficiencies or weaknesses regarding child protection arrangements;
- Where services or activities are provided on Immanuel's premises by another body, the body concerned has appropriate policies and procedures in place in regard to safeguarding children and child protection and liaises with the College on these matters where appropriate;
- The Child Safeguarding Policy is updated and reviewed annually;
- They review their policies and procedures annually and provide information to the Academy Trust about them and about how the above duties have been discharged;
- Appropriate online filtering and monitoring is in place and is kept up to date, whilst not preventing access to online learning opportunities;

##### **4i.ii The Headteacher and Senior Leadership Team will ensure that:**

- The policies and procedures are fully implemented, and followed by all staff;
- Sufficient resources and time are allocated to enable the designated person and other staff to discharge their responsibilities; and
- All staff and volunteers feel able to raise concerns about poor or unsafe practice in regarding to children, and such concerns are addressed sensitively and effectively in a timely manner in accordance with the agreed Whistleblowing Policy.

##### **4i.iii The Designated Safeguarding Leads with Responsibility for Child Protection will:**

- Refer cases of suspected or alleged abuse to the relevant investigating agencies;
- Act as a source of support, advice and expertise within the educational establishment;

- Liaise with the Headteacher to inform them of any issues and ongoing investigations and ensure there is always cover for this role.
- Train staff to recognise how to identify signs of abuse and when it is appropriate to make a referral;
- Have a working knowledge of how the child protection cases operate, the conduct of a child protection case conference and be able to attend and contribute to these;
- Ensure that all staff have access to and understand the College's Child Safeguarding Policy;
- Ensure that all staff have induction training;
- Circulate relevant information and guidance to staff on a regular basis;
- Keep detailed and accurate secure written records and/or concerns;
- Obtain access to resources and attend any relevant or refresher training courses at least every two years.
- Ensure parents/carers are made aware of the Child Safeguarding Policy which alerts them to the fact that referrals may be made and the role of the Academy in this to avoid conflict later;
- Ensure that appropriate staff have the information they need in relation to a child's looked after legal status (whether they are looked after under voluntary arrangements with consent of parents or on an interim or full care order) and contact arrangements with birth parents or those with parental responsibility. They will also have information about the child's care arrangements and the levels of authority delegated to the carer by the authority looking after him/her. The designated LAC safeguarding lead will have details of the child's social worker and the name of the virtual school head in the authority that looks after the child.
- Where a child leaves Immanuel, ensure the Child Safeguarding file is copied for the new establishment and is transferred to the new school separately from the main student file. If a child goes missing or leaves to be educated at home, then the child protection file should be copied and the copy forwarded to the Principal Education Welfare Officer at the Local Authority.

**4i.iv All staff and volunteers will:**

- Fully comply with the College's policies and procedures;
- Attend appropriate training;
- Inform the Designated Safeguarding Lead of any concerns;
- Record any potential safeguarding incidents appropriately on CPOMS<sup>2</sup>.

## **5. IDENTIFYING CHILDREN AND YOUNG PEOPLE WHO MAY BE SUFFERING SIGNIFICANT HARM**

Teachers and other adults in Immanuel are well placed to observe any physical, emotional or behavioural signs which indicate that a child may be suffering significant harm. As in the Children's Acts 1989 and 2004, a child is defined as anyone who has not yet reached his/her 18th birthday. KCSIE 2019 says: 'Children includes everyone under the age of 18'.

### **5a.The Definition of Safeguarding:**

Safeguarding and promoting the welfare of children is defined as:

- Protecting children from maltreatment.
- Preventing impairment of children's health or development.
- Ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- Taking action to enable all children to have the best outcomes .

Safeguarding is not just about protecting children from deliberate harm. It also relates to aspects of school life including:

- Pupils' health and safety.
- The use of reasonable force.
- Meeting the needs of children with medical conditions.
- Providing first aid for physical and mental health.
- Educational visits
- Intimate care.
- Internet or e-safety. Appropriate arrangements to ensure school security, taking into account the local context.

Safeguarding can involve a range of potential issues such as: (see appendix for more information)

- Bullying, including cyber bullying (by text message, on social networking sites, etc) and prejudice based bullying.
- Racist homophobic or transphobic abuse.
- Extremist behaviour i.e. radicalisation.
- Child sexual exploitation.
- Sexting .
- Substance misuse.
- Issues which may be specific to a local area or population, for example gang activity and youth violence.
- Particular issues affecting children including domestic violence and honour based violence such as forced marriage or female genital mutilations (FGM).
- Peer on Peer abuse
- Contextual Safeguarding: All staff, but especially the designated safeguarding lead (or deputy) should be considering the context within which such incidents and/or behaviours occur. This is known as *contextual safeguarding*, which simply means assessments of children should consider whether wider environmental factors are present in a child's life that are a threat to their safety and/or welfare (KCSIE 2019)

## **5b. Definition of Harm**

Harm means ill treatment or impairment of health and development, including, for example, impairment suffered from seeing or hearing the ill-treatment of another; development means physical, intellectual, emotional, social or behavioural development; health includes physical and mental health; ill-treatment includes sexual abuse and other forms of ill-treatment which are not physical.

## **5c. Definition of Abuse**

Abuse: a form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm or by failing to act to prevent harm. Children may be abused in a family or in an institutional or community setting by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. They may be abused by an adult or adults or by another child or children. (Working Together to Safeguard Children 2018)

There are four types of child abuse as defined in 'Keeping Children Safe in Education' (2019) and the signs to detect such abuse are found in the Appendix

### **5c.i. Physical abuse:**

- 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

**5c.ii Emotional abuse:**

- is the persistent emotional maltreatment of a child such as to cause severe and persistent adverse effects on the child's emotional development. It may involve conveying to children 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 the child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child in participating in normal social interaction. It may also involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyber bullying), 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 though it may occur alone.

**5c. iii Sexual abuse:**

- involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing. They may also include non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse. Sexual abuse can take place online, and technology can be used to facilitate offline abuse. Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

**5c. iv Neglect:**

- is 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 as a result maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:
  - provide adequate food, clothing and shelter (including exclusion from home or abandonment);
  - protect a child from physical and emotional harm or danger;
  - ensure adequate supervision (including the use of inadequate care-givers)
  - ensure access to appropriate medical care or treatment
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

Whilst the above are the legal definitions, staff must also be aware of other forms of harm including Child on Child Sexual Violence and Harassment [see: [Sexual violence and sexual harassment between children in schools and colleges](#)]; Contextual Safeguarding; Child Sexual Exploitation, Child Criminal

Exploitation, Serious Violence, Honour Based Violence (which includes forced marriage and Female Genital Mutilation), Upskirting and Radicalisation,. See Appendices at end of policy for more information.

***'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.'***

(KCSIE 2019 paragraph 42)

## **6. TAKING ACTION TO ENSURE THAT CHILDREN ARE SAFE AT SCHOOL AND AT HOME**

It is not the responsibility of Immanuel staff to investigate welfare concerns or determine the truth of any disclosure or allegation. All staff, however, have a duty to recognise concerns and maintain an open mind. Accordingly all concerns regarding the welfare of students will be recorded and discussed with the Designated Safeguarding Lead or deputies with responsibility for child protection prior to any discussion with parents/carers.

*'Staff working with children are advised to maintain an attitude of "it could happen here." When concerned about the welfare of a child, staff should always act in the best interests of the child....If staff have concerns about the welfare of a child, they should act on them immediately...Staff should not assume a colleague or another professional will take action and share information that might be critical in keeping children safe....Fears about sharing information **must not** be allowed to stand in the way of the need to promote the welfare, and protect the safety of children.'* (KCSIE 2019)

### **6a. Reporting**

Staff will Immediately Report via CPOMS<sup>2</sup>

- Any suspicion that a child is injured, marked or bruised in a way which is not readily attributable to the normal knocks or scrapes received in play.
- Any explanation given which appears inconsistent or suspicious.
- Any behaviours which give rise to suspicions that a child may have suffered harm (e.g. worrying drawings, writing or acts).
- Any concerns that a child may be suffering from inadequate care, ill treatment or emotional maltreatment.
- Any concerns that a child is presenting signs or symptoms of abuse or neglect.
- Any significant changes in a child's presentation, including non-attendance.
- Any hint or disclosure of abuse from any person.
- Any concerns regarding person(s) who may pose a risk to children (e.g. living in a household with children present).
- Any children who they believe may benefit from early help - this includes identifying emerging problems, leading to sharing information with other professionals to support early identification and assessment

**STAFF MUST NOT:** take images of a child's injury, bruising or similar (e.g. following a disclosure of abuse) even if requested by children's social care OR make audio recordings of a child's disclosure. ('Guidance for safer working practice for those working with children and young people in education settings' May 2019)

Staff should be aware that children with **SEND** may face additional safeguarding challenges and should ensure that any potential barriers to them reporting concerns are removed. Additional barriers can exist when recognising abuse and neglect in this group of children.

These can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- being more prone to peer group isolation than other children;
- the potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs;
- and communication barriers and difficulties in overcoming these barriers.

If a teacher, in the course of their work in the profession, discovers that an act of Female Genital Mutilation appears to have been carried out on a girl under the age of 18 the teacher must report this to the designated safeguarding lead, who will inform the Police.

## **6b Responding to Disclosure**

Disclosures or information may be received from students, parents/carers or other members of the public. Immanuel recognises that those who disclose such information may do so with difficulty, having chosen carefully to whom they will speak. Accordingly staff will handle disclosures with sensitivity. **Such information cannot remain confidential** and staff will immediately communicate what they have been told to the Designated Safeguarding Lead or deputies using CPOMS<sup>2</sup> after making a contemporaneous written record that will need to be kept securely and scanned into CPOMS<sup>2</sup> document vault later.

Staff will not investigate but will, wherever possible, elicit enough information to pass on to the designated person in order that s/he can make an informed decision of what to do next. Staff will:

- Listen to and take seriously any disclosure or information that a child may be at risk of harm.
- Try to keep questions to a minimum and of an 'open' nature e.g. 'can you tell me what happened?' rather than 'did X hit you?'
- Try not to show signs of shock, horror or surprise.
- Not express feelings or judgements regarding any person alleged to have harmed the child.
- Explain sensitively to the child that they have a responsibility to refer the information to the senior designated person.
- Reassure and support the child as far as possible.
- Explain that only those who 'need to know' will be told whilst not promising blanket confidentiality.
- Explain what will happen next and that the child will be involved as appropriate.
- **STAFF MUST NOT:** take images of a child's injury, bruising or similar (e.g. following a disclosure of abuse) even if requested by children's social care OR make audio recordings of a child's disclosure. ('Guidance for safer working practice for those working with children and young people in education settings' May 2019)

## **6c. Action by the Designated Safeguarding Lead (or deputy)**

The DSL will consider the following options:

- **managing any support for the child internally** via the school or college's own pastoral support processes; or

- **an early help assessment** (The Early Help referral form is in the Referral Forms appendix at the end of this policy – the Early Help Gateway is 01274 432121); Early Help provides a coordinated offer of early help when additional needs of children are identified. Any child may benefit from early help, but all school and college staff should be particularly alert to the potential need for early help for a child who
  - is disabled and has specific additional needs;
  - has special educational needs (whether or not they have a statutory education, health and care plan);
  - is a young carer;
  - is frequently missing/goes missing from care or CME;
  - is misusing drugs or alcohol;
  - is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse; and/or
  - has returned home to their family from care.”
- **a referral for statutory services**, for example as the child is in need or suffering or likely to suffer harm.”

Keeping Children Safe in Education (2019), paragraph 78:  
 ‘The Data Protection Act 2018 and GDPR do not prevent, or limit, the sharing of information for the purposes of keeping children safe.’  
 Paragraph 80: ‘This includes allowing practitioners to share information without consent.’

[For more information/guidance on when and how to share information see: <https://www.gov.uk/government/publications/safeguarding-practitioners-information-sharing-advice>]

**NB:** In the case of serious concern, the Chief Executive Officer (CEO) of the Academy Trust (BDAT) ‘is to be informed of all issues/ concerns/ incidents. Where there is doubt about what constitutes a ‘serious concern’ the Trust should be informed.’ (BDAT Safeguarding and Child Protection Policy)

When considering, the DSL must take into account:

- Any urgent medical need of the child.
- Making an enquiry to the Children’s Social Services Initial Contact Point (01274 437500 in office hours or 01274 431010 outside of office hours – Emergency Duty Team). The DSL may contact the Early Help Gateway for advice. (01274 432121)
- Discussing the matter with other agencies involved with the family.
- Consulting with appropriate persons e.g. Police.
- The child’s wishes.
- Any suspicion of female genital mutilation of a girl under 18 years of age must be reported to the Police and Children’s Social Care.

*KCSIE 2019 says that ‘Fears about sharing information **cannot** be allowed to stand in the way of the need to promote the welfare and protect the safety of children’*

- Wherever possible, the DSL will talk to parents/carers, unless to do so may place a child at risk of significant harm, impede any Police investigation and/or place the member of staff or others at risk.

The case must be then kept under constant review and consideration given to a referral to children’s social care if the child’s situation doesn’t appear to be improving.

- Referrals should ideally be made by a Designated Safeguarding Lead, however in their absence, there is the Safeguarding Team. KCSIE 2019 says that, 'if in exceptional circumstances, the DSL (or deputy) is not available, this should not delay action being taken. Staff should consider speaking to a member of the senior leadership team and/or take advice from local children's social care. In these circumstances, any action taken should be shared with the DSL (or deputy) as soon as is practically possible.'
- All information and actions taken, including the reasons for any decisions made, will be fully documented on CPOMS<sup>2</sup>. All referrals to Children's Social Care will be documented on CPOMS<sup>2</sup>

### **6d. Action following a Child Protection referral**

The Designated Safeguarding Lead or other appropriate member of staff will:

- Make regular contact with Children's Social Care.
- Contribute to the Strategy Discussion and Initial Assessment
- Provide a report for, attend and contribute to any subsequent Child Protection Conference
- If the child or children have a Child Protection Plan, contribute to the Child Protection Plan and attend Core Group Meetings and Child Protection Conference Reviews.
- Where in disagreement with a decision made e.g. not to apply Child Protection Procedures or not to convene a child Protection Conference, discuss this with the Education Safeguarding Officers via Lead Officer on 01274 437155; the office on 01274 437043 or specifically Maryam Shaheen on 01274 435674. Working Together 2018: "If local authority children's social care decides not to proceed with a child protection conference then other practitioners involved with the child and family have the right to request that local authority children's social care convene a conference if they have serious concerns that a child's welfare may not be adequately safeguarded" (p45 2nd paragraph)
- Where a child is having a Child Protection Plan moves from Immanuel or goes missing, immediately inform the key worker in Children's Social Care.

### **6e. Recording and Monitoring**

Immanuel will record on CPOMS<sup>2</sup>:

- Information about the child: name, address, D.O.B, those with parental responsibility, primary carers, emergency contacts, names of persons authorised/not authorised to have access to the child whilst at the College, any court orders, if a child has been subject to a Child Protection Plan
- Key contacts in other agencies including GP details
- Any disclosures/accounts from child or others, including parents/carers (and keep original notes which will be scanned into CPOMS<sup>2</sup>)
- All concerns, discussions, decisions, actions taken (recorded on CPOMS<sup>2</sup>) and arrangements for monitoring/reviewing

All records should be objective and include:

- Statements, facts and observable things (what was seen/heard)
- Diagram indicating position, size, colour of any injuries (using Body Map on CPOMS<sup>2</sup>)
- Words child uses (**not translated into 'proper' words**)
- Non-verbal behaviours
- **STAFF MUST NOT:** take images of a child's injury, bruising or similar (e.g. following a disclosure of abuse) even if requested by children's social care OR make audio recordings of a child's disclosure. ('Guidance for safer working practice for those working with children and young people in education settings' May 2019)

All child protection documents will be retained in the child's CPOMS<sup>2</sup> file, separate from the child's main file. Any paper copies will be locked away and only accessible to the Headteacher and Designated Safeguarding Leads and other Pastoral staff as and when only necessary.

- These records will be transferred electronically via CPOMS<sup>2</sup> to any school to which a child transfers (if the school is on CPOMS<sup>2</sup>) or via secure post if the school is not on CPOMS<sup>2</sup>, clearly marked 'Child Protection, Confidential, for the attention of the Designated Safeguarding Lead with Responsibility for Child Protection'.
- If the child goes missing from education or is removed from roll to be educated at home then any Child Protection file should be copied and the copy sent to the Local Authority Inclusion Officer.

Immanuel staff will monitor:

- Injuries/marks
- Attendance
- Changes e.g. mood/academic functioning
- Relationships
- Language
- Behaviour
- Demeanour and appearance
- Statements and comments
- Medicals
- Stories, 'news', drawings
- Response to PE/sport
- Family circumstances
- Parental behaviours/care of child

## **6f. Supporting the Child and Partnership with Parents/Carers**

Immanuel recognises that the child's welfare is paramount, however, good child protection practice and outcomes rely on a positive, open and honest working partnership with parents/carers.

- Whilst we may, on occasion, need to make referrals without consultation with parents/carers, we will make every effort to maintain a positive working relationship with them whilst fulfilling our duties to protect any child.
- We will provide secure, caring, supportive and protective relationships for the child
- Children will be given a proper explanation (appropriate to age and understanding) of what action is being taken on their behalf and why.
- We will endeavour always to preserve the privacy, dignity and right to confidentiality of the child and parents/carers. The Designated Safeguarding Lead will determine which members of staff 'need to know' personal information and what they 'need to know' for the purpose of supporting and protecting the child.

## **6g. Allegations regarding Person(s) working in or on behalf of Immanuel(including volunteers)**

Where an allegation is made against any person working in or on behalf of the College that he or she has:

- Behaved in a way that has harmed a child or may have harmed a child;
- Possibly committed a criminal offence against or related to a child; or
- Has behaved towards a child or children in a way that indicated s/he is unsuitable to work with children

Immanuel will contact the LADO for advice and follow the Local Safeguarding Children's Board Procedure for Dealing with Allegations against a Person who works with Children. Detailed records will be made to include decisions, action taken and the reasons for these. All records will be retained securely as mentioned above. Whilst we acknowledge that such allegations (as all others) may be false, malicious or misplaced, we also acknowledge that they may be founded. It is, therefore, essential that all allegations are investigated properly and in line with agreed procedures.

### Initial Action

- The person who has received the allegation or witnesses an event will immediately inform the Headteacher (or Chair of Governors if the allegation is against the Headteacher) and make a record
- The Headteacher will take steps, where necessary, to secure the immediate safety of children and any urgent medical needs
- The member of staff will not be approached at this stage unless it is necessary to address the immediate safety of children
- The Headteacher may need to clarify any information regarding the allegation, however, no person will be interviewed at this stage
- The Headteacher will consult with the Local Authority Designated Officer (LADO) in order to determine if it is appropriate for the allegation to be dealt with by the College or if there needs to be a referral to Children's Social Care and/or Police for investigation. The LADO referral form can be found on the Bradford Safeguarding Children Board website or on T drive under Safeguarding \\10.14.106.44\teacher\Safeguarding\LADO-REFERRAL-FORM-new-Jan-2019.doc. Completed **LADO** referral forms should be attached as a word document and sent by email secured via Galaxkey to [CPUDuty@bradford.gov.uk](mailto:CPUDuty@bradford.gov.uk)
- Consideration will be given throughout to the support and information needs of students, parents and staff
- The Headteacher will inform the Chair of Governors and Academy Trust CEO of any allegation.

Where a staff member feels unable to raise an issue with the Headteacher, designated safeguarding lead or other senior colleague, or feels that their genuine concerns are not being addressed, they should refer to the College's Whistleblowing Policy. Also the NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call 0800 028 0285 (Whistleblowing Advice Line) 8:00 AM to 8:00 PM Monday to Friday or 0808 800 5000 if you are worried about a child – line is available from 8:00 AM to 10:00 PM midweek and 9:00 AM to 6:00 PM weekends. Email: [help@nspcc.org.uk](mailto:help@nspcc.org.uk) or register a concern online: <https://www.nspcc.org.uk/what-you-can-do/report-abuse/dedicated-helplines/>

## **7.APPENDICES**

### **7a Signs of Abuse**

Some of the following signs might be indicators of abuse or neglect:

- Children whose behaviour changes – they may become aggressive, challenging, disruptive, withdrawn or clingy, or they might have difficulty sleeping or start wetting the bed;
- Children with clothes which are ill-fitting and/or dirty;
- Children with consistently poor hygiene;
- Children who make strong efforts to avoid specific family members or friends, without an obvious reason;
- Children who don't want to change clothes in front of others or participate in physical activities;
- Children who are having problems at school, for example, a sudden lack of concentration and learning or they appear to be tired and hungry;
- Children who talk about being left home alone, with inappropriate carers or with strangers;
- Children who reach developmental milestones, such as learning to speak or walk, late, with no medical reason;
- Children who are regularly missing from school or education;
- Children who are reluctant to go home after school;

- Children with poor school attendance and punctuality, or who are consistently late being picked up;
- Parents who are dismissive and non-responsive to practitioners' concerns;
- Parents who collect their children from school when drunk, or under the influence of drugs;
- Children who drink alcohol regularly from an early age;
- Children who are concerned for younger siblings without explaining why;
- Children who talk about running away; and
- Children who shy away from being touched or flinch at sudden movements

For more information:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419604/What\\_to\\_do\\_if\\_you\\_re\\_worried\\_a\\_child\\_is\\_being\\_abused.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf) (March 2015)

### **Physical Abuse**

Most children will collect cuts and bruises and injuries, and these should always be interpreted in the context of the child's medical / social history, developmental stage and the explanation given. Most accidental bruises are seen over bony parts of the body, e.g. elbows, knees, shins, and are often on the front of the body. Some children, however, will have bruising that is more than likely inflicted rather than accidental.

Important indicators of physical abuse are bruises or injuries that are either unexplained or inconsistent with the explanation given; these can often be visible on the 'soft' parts of the body where accidental injuries are unlikely, e.g. cheeks, abdomen, back and buttocks. A delay in seeking medical treatment when it is obviously necessary is also a cause for concern.

The physical signs of abuse may include:

- Unexplained bruising, marks or injuries on any part of the body.
- Multiple bruises- in clusters, often on the upper arm, outside of the thigh.
- Cigarette burns.
- Human bite marks.
- Broken bones.
- Scalds, with upward splash marks.
- Multiple burns with a clearly demarcated edge.

**STAFF MUST NOT:** take images of a child's injury, bruising or similar (e.g. following a disclosure of abuse) even if requested by children's social care OR make audio recordings of a child's disclosure. ('Guidance for safer working practice for those working with children and young people in education settings' May 2019)

Changes in behaviour that can also indicate physical abuse:

- Fear of parents being approached for an explanation.
- Aggressive behaviour or severe temper outbursts.
- Flinching when approached or touched.
- Reluctance to get changed, for example in hot weather.
- Depression.
- Withdrawn behaviour.
- Running away from home.

Physical abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens. Babies and disabled children also have a higher risk of suffering physical abuse.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Physical abuse can also occur outside of the family environment.

Some of the following signs may be indicators of physical abuse:

- Children with frequent injuries;
- Children with unexplained or unusual fractures or broken bones; and
- Children with unexplained bruises or cuts; burns or scalds; or bite marks

### **Emotional Abuse**

Emotional abuse can be difficult to identify as there are often no outward physical signs. Indications may be a developmental delay due to a failure to thrive and grow, however, children who appear well-cared for may nevertheless be emotionally abused by being taunted, put down or belittled. They may receive little or no love, affection or attention from their parents or carers. Emotional abuse can also take the form of children not being allowed to mix or play with other children.

Changes in behaviour which can indicate emotional abuse include:

- Neurotic behaviour e.g. sulking, hair twisting, rocking.
- Being unable to play.
- Fear of making mistakes.
- Sudden speech disorders.
- Self-harm.
- Fear of parent being approached regarding their behaviour.
- Developmental delay in terms of emotional progress.

Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it, for example, in the way that a parent interacts with their child.

Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.

Emotional abuse may involve serious bullying – including online bullying through social networks, online games or mobile phones – by a child's peers.

Some of the following signs may be indicators of emotional abuse:

- Children who are excessively withdrawn, fearful, or anxious about doing something wrong;
- Parents or carers who withdraw their attention from their child, giving the child the 'cold shoulder';
- Parents or carers blaming their problems on their child; and
- Parents or carers who humiliate their child, for example, by name-calling or making negative comparisons

### **Sexual Abuse**

All Staff and Volunteers should be aware that adults, who may be men, women or other children, who use children to meet their own sexual needs abuse both girls and boys of all ages. Indications of sexual abuse may be physical or from the child's behaviour. In all cases, children who tell about sexual abuse do so because they want it to stop. It is important, therefore, that they are listened to and taken seriously.

The physical signs of sexual abuse may include:

- Pain or itching in the genital area.
- Bruising or bleeding near genital area.
- Sexually transmitted disease.
- Vaginal discharge or infection.
- Stomach pains.

- Discomfort when walking or sitting down.
- Pregnancy.

Changes in behaviour which can also indicate sexual abuse include:

- Sudden or unexplained changes in behaviour e.g. becoming aggressive or withdrawn.
- Fear of being left with a specific person or group of people.
- Having nightmares.
- Running away from home.
- Sexual knowledge which is beyond their age, or developmental level.
- Sexual drawings or language.
- Bedwetting.
- Eating problems such as overeating or anorexia.
- Self-harm or mutilation, sometimes leading to suicide attempts.
- Saying they have secrets they cannot tell anyone about.
- Substance or drug abuse.
- Suddenly having unexplained sources of money.
- Not allowed to have friends (particularly in adolescence).
- Acting in a sexually explicit way towards adults.

Sexual abuse is any sexual activity with a child. You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health.

Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

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

- Children who display knowledge or interest in sexual acts inappropriate to their age;
- Children who use sexual language or have sexual knowledge that you wouldn't expect them to have;
- Children who ask others to behave sexually or play sexual games; and
- Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

**Child sexual exploitation (CSE)** is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation doesn't always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

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 and alcohol;
- Children who go missing for periods of time or regularly come home late; and
- Children who regularly miss school or education or don't take part in education

See also <https://www.gov.uk/government/publications/what-to-do-if-you-suspect-a-child-is-being-sexually-exploited>

Children who are deemed in danger of CSE can be referred to the CSE Hub using the CSE risk assessment and reporting form (see Referral Forms appendix)

### **Child criminal exploitation (CCE)**

Children also may be criminally exploited (**'county lines'**). Gangs can deliberately target vulnerable children – those who are homeless, living in care homes or trapped in poverty. These children are unsafe, unloved, or unable to cope, and the gangs can take advantage of this. These gangs groom, threaten or trick children into trafficking their drugs for them.

See also: <https://www.gov.uk/government/publications/criminal-exploitation-of-children-and-vulnerable-adults-county-lines>

### **Serious Violence**

All staff should be aware of indicators, which may signal that children are at risk from, or are involved with serious violent crime. These may include:

- increased absence from school,
- a change in friendships or relationships with older individuals or groups,
- a significant decline in performance,
- signs of self-harm or a significant change in wellbeing, or
- signs of assault or unexplained injuries.
- unexplained gifts or new possessions that might indicate that children have been approached by, or are involved with, individuals associated with criminal networks or gangs.

All staff should be aware of the associated risks and understand the measures in place to manage these. The Serious Violence Strategy, which was introduced by the government in 2018, identifies offences such as homicides and knife and gun crime as resulting from this risk

See also <https://www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence>

### **Neglect**

It can be difficult to recognise neglect, however its effects can be long term and damaging for children.

The physical signs of neglect may include:

- Being constantly dirty or 'smelly'.
- Constant hunger, sometimes stealing food from other children.
- Losing weight, or being constantly underweight.
- Inappropriate or dirty clothing.

Neglect may be indicated by changes in behaviour which may include:

- Mentioning being left alone or unsupervised.
- Not having many friends.
- Complaining of being tired all the time.
- Not requesting medical assistance and/or failing to attend appointments.

Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify.

Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Some of the following signs may be indicators of neglect:

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care<sup>4</sup>; and
- Parents who fail to seek medical treatment when their children are ill or are injured

## **7b Extra Specific safeguarding issues**

All staff should have an awareness of safeguarding issues, some of which are listed below.

Staff should be aware that:

- Substance and alcohol misuse,
- domestic violence,
- children missing from education (CME) regularly or 10 consecutive days or more without permission (see CME statutory guidance 2016 section 17 at appendix 7c). CME referrals' local help: contact Education Safeguarding Team on 01274 439651. The referral forms should be sent to [cme@bradford.gov.uk](mailto:cme@bradford.gov.uk)
- homelessness;
- parent/carers in prison;
- SEND,
- truanting

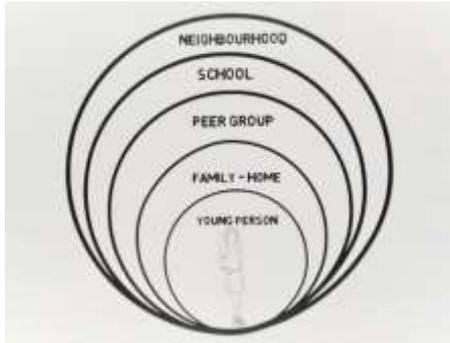
can put children in increased danger and **should be reported**.

## **Contextual Safeguarding**

Working together to safeguard children' 2018 introduces a new concept of contextual safeguarding to describe the risks that children and young people face from their peers or in the wider community including:

- Online safety
- Sexual exploitation
- Criminal exploitation
- Radicalisation
- Trafficking

Contextual Safeguarding is an approach to understanding, and responding to, young people's



experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people's experiences of extra-familial abuse can undermine parent-child relationships.

Children's social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding, therefore, expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts.

All staff concerned about a child experiencing harm beyond their families must report it in the usual way to the DSL via CPOMS

For more information: <https://contextualsafeguarding.org.uk/about/what-is-contextual-safeguarding>

### **Peer on Peer abuse**

All staff should recognise that children are capable of abusing their peers. This can take the form of sexual violence and sexual harassment. The different forms of peer on peer abuse can be:

- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- sexting (also known as youth produced sexual imagery)
- inappropriate sexual play
- grooming
- gender based bullying eg boys experiencing initiation/hazing type violence and rituals and sexual violence against girls.
- Upskirting ie taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. The Voyeurism Act outlaws 'upskirting' where the purpose is to obtain sexual gratification, or to cause humiliation, distress or alarm. This includes instances where culprits say images were just taken 'for a laugh' or when paparazzi are caught taking intrusive images. It creates 2 new offences under the Sexual Offences Act 2003.

Abuse is abuse and should never be tolerated or passed off as 'banter' or 'just a laugh' or part of growing up.

All staff must use the reporting procedure as laid out in this policy above so that risk of peer on peer abuse can be minimised.

### **Child on Child Sexual Violence and Sexual Harassment**

**Context:** Sexual violence and sexual harassment can occur between two children of **any age and sex**. It can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children.

Children who are victims of sexual violence and sexual harassment will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment. The initial response to a report from a child is important. All victims must be reassured that they are being taken seriously and that they will be supported and kept safe. All concerns must be taken to the DSL or Deputy DSL in the first instance.

Sexual violence and sexual harassment exist on a continuum and may overlap, they can occur online and offline (both physically and verbally) and are never acceptable. It is important that **all** victims are taken seriously and offered appropriate support. Staff should be aware that some groups are potentially more at risk. Evidence shows girls, children with SEND and LGBT children are at greater risk

Schools and colleges should be aware of the importance of:

- making clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up;
- not tolerating or dismissing sexual violence or sexual harassment as “banter”, “part of growing up”, “just having a laugh” or “boys being boys”;
- challenging behaviour (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia and flicking bras and lifting up skirts. Dismissing or tolerating such behaviours risks normalising them; and understanding that all of the above can be driven by wider societal factors beyond the school and college, such as everyday sexist stereotypes and everyday sexist language. This is why a whole school/college approach (especially preventative education) is important.

This education should include:

- Healthy & respectful relationships
- Respectful behaviour
- Gender roles, stereotyping, equality
- 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

**What is sexual violence and sexual harassment?** It is important that school and college staff are aware of sexual violence and the fact children can, and sometimes do, abuse their peers in this way. When referring to sexual violence, we are referring to sexual violence offences under the Sexual Offences Act 2003 as described below:

**Rape:** A person (A) commits an offence of rape if: he intentionally penetrates the vagina, anus or mouth of another person (B) with his penis, B does not consent to the penetration and A does not reasonably believe that B consents.

**Assault by Penetration:** A person (A) commits an offence if: s/he intentionally penetrates the vagina or anus of another person (B) with a part of his/her body or anything else, the penetration is sexual, B does not consent to the penetration and A does not reasonably believe that B consents.

**Sexual Assault:** A person (A) commits an offence of sexual assault if: s/he intentionally touches another person (B), the touching is sexual, B does not consent to the touching and A does not reasonably believe that B consents.

**What is consent?** Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, eg to vaginal but not anal sex or penetration with conditions such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consent to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and the capacity to make that choice.

**Sexual Harassment** is 'unwanted conduct of a sexual nature' and can occur online and offline. In the context of child on child sexual harassment it may take the form of sexual comments; sexual 'jokes' or taunting; physical behaviour such as deliberately brushing against someone/ interfering with clothes/displaying pictures, photos or drawings of a sexual nature; online sexual harassment ie non-consensual sharing of sexual images/videos/comments/messages on social media. This would include 'Upskirting' (see separate section above).

For more information please read the government publication: [Sexual violence and sexual harassment between children in schools and colleges](#)

### **Forced marriage**

Forcing a person into a marriage is a crime in England and Wales. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological. A lack of full and free consent can be where a person does not consent or where they cannot consent (if they have learning disabilities, for example). Nevertheless, some communities use religion and culture as a way to coerce a person into marriage. Schools and colleges can play an important role in safeguarding children from forced marriage. In particular suspicious absences whether planned or not planned should be investigated.

See <https://www.gov.uk/guidance/forced-marriage> . School and college staff can contact the Forced Marriage Unit if they need advice or information: Contact: 020 7008 0151 or email [fm@fco.gov.uk](mailto:fm@fco.gov.uk).

### **Preventing Radicalisation.**

#### **Background**

Section 26 of the Counter Terrorism and Security Act 2015, places a statutory Prevent duty on specified authorities in the exercise of their functions, to have 'due regards to the need to prevent individuals from being drawn into terrorism'. This includes referring vulnerable individuals to Channel.

More information on the Prevent duty for specific bodies can be found at:

<https://www.gov.uk/government/publications/prevent-duty-guidance>

Prevent in Bradford identifies and tackles all forms of extremism. The Prevent Education Officer can be accessed on 01274 437770.

#### **Vulnerability and risk indicators**

The Bradford Prevent Team work in partnership to address radicalisation concerns by identifying risk at the earliest possible opportunity, prior to safeguarding individuals through the Bradford Channel process. Channel is a Multi-Agency process, established in every local authority in England and Wales, and works to support vulnerable people from being drawn into terrorism, and provides a range of support including mentoring, counselling, theological support, and assistance with a range of other issues. Channel focuses on early intervention to try and protect vulnerable people from being drawn into Terrorism, and addresses all types of extremism.

If an individual is discussed at Channel and deemed vulnerable, they will be offered support. Participation is voluntary and it is up to the person, or their parents (for children aged 17 and under), to decide whether to take up the support the panel offers. Channel does not lead to a criminal record.

The Bradford Channel Panel recognises that the radicalisation process can be extremely complex, and that there is no single factor or indicator to identify an individual at risk of radicalisation. There are no academically proven checklists that exist which will accurately identify a person who is at risk of radicalisation, and who may, at a later date, progress to committing acts of terrorism.

A single comment or one off statement does not necessarily mean that an individual is at risk of radicalisation, and those involved in extremism can come from a range of backgrounds and experience. All referrals should be based on sound reasoning and professional judgement with accurate recording at every stage.

The Channel process in Bradford District ensures that referrals made to Bradford Prevent are appropriate before they are discussed at the Channel Panel meeting and it is hoped that the information contained within this document will provide referrers with more support around the suitability of their Prevent related concern.

Additional information about the Channel process, including a description of the Vulnerability Assessment Framework (VAF) used by the Channel Panel to guide decisions about whether an individual needs support to address their vulnerability to radicalisation can be found on Page 28 of the Government's Channel Duty Guidance.

<https://www.gov.uk/government/publications/channel-guidance>.

### **Terminology**

Understanding the terminology associated with Prevent will assist you in your decision making process. The following definitions are commonly used within Prevent and Channel:

Radicalisation: "the process by which a person comes to support terrorism and extremist ideologies associated with terrorist groups."

Extremism: "the vocal or active opposition to fundamental values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces."

Terrorism: The use or threat of action designed to influence the government or an international governmental organisation or to intimidate the public, or a section of the public; made for the purposes of advancing a political, religious, racial or ideological cause; and it involves or causes: Serious violence against a person; Serious damage to property; A threat to a person's life; A serious risk to the health and safety of the public; or serious interference with or disruption to an electronic system."

As with other safeguarding risks, staff should be alert to changes in children's behaviour which could indicate that they may be in need of help or protection. Staff should use their judgement in identifying children who might be at risk of radicalisation and act proportionately, which may include making a referral to the Channel programme

### **Making a Referral**

Referrals made to Prevent should contain concerns based on a person's vulnerability to radicalisation and should not be because of the person's faith or ethnic origin.

Ideally, the person considering making the referral will be the designated Safeguarding Lead within their organisation and have a good understanding of Safeguarding and Prevent. They should have

attended the Home Office approved Workshop to Raise Awareness of Prevent (WRAP) and completed the Channel e-learning training course.

If the organisation's designated Safeguarding Lead is not available the referral should still be forwarded by the reporting person to the Police, so that a timely assessment can be made.

If the referring person or organisation has not completed the above referral then it is highly recommended that they speak with a member of the Bradford Prevent Team in the first instance, to discuss any concerns before making any referral.

#### **Where to send referrals**

Completed referral forms (See Referral Forms Appendix) should be sent, as soon as possible to the Police at the below email address:

[ctuleeds.intel@westyorkshire.pnn.police.uk](mailto:ctuleeds.intel@westyorkshire.pnn.police.uk)

If you need to speak to someone about your referral please contact 01274 376215.

#### **What happens next?**

Following a referral, the information received will be assessed by the Police. Following this assessment a decision will be made regarding the suitability of the case for discussion at the Bradford Channel Panel. If the case is not suitable for Channel the Police will notify the referrer regarding the outcome of the assessment and if necessary make a referral to other agencies for support. Following assessment, if the case is deemed suitable for Channel support then the referrer may be invited to the next Bradford Channel Panel meeting.

The referrer should continue to monitor the case and keep Prevent updated with any additional information which could lead to an increase in vulnerabilities to radicalisation.

For further training;

<https://www.elearning.prevent.homeoffice.gov.uk/>

### **Further information on so-called 'honour based' violence**

So-called 'honour-based' violence (HBV) encompasses crimes which have been committed to protect or defend the honour of the family and/or the community, including Female Genital Mutilation (FGM), forced marriage, and practices such as breast ironing. All forms of so called HBV are abuse (regardless of the motivation) and should be handled and escalated as such. If in any doubt, staff should speak to the designated safeguarding lead. Professionals in all agencies, and individuals and groups in relevant communities, need to be alert to the possibility of a child being at risk of HBV, or already having suffered HBV.

#### **Indicators**

There are a range of potential indicators that a child may be at risk of HBV. Guidance on the warning signs that FGM or forced marriage may be about to take place, or may have already taken place, can be found in the Multi agency statutory guidance on FGM

<https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation>

#### **Actions**

If staff have a concern regarding a child that might be at risk of HBV, they should activate local safeguarding procedures, using existing national and local protocols for multi-agency liaison with police and children's social care. Where FGM has taken place, since 1 October 2015 there has been a mandatory reporting duty placed on teachers<sup>80</sup> that requires a different approach (see following section).

### **FGM mandatory reporting duty**

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. (more info: <https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation> )

Section 5B of the Female Genital Mutilation Act 2003 (as inserted by section 74 of the Serious Crime Act 2015) places a statutory duty upon teachers along with regulated health and social care professionals in England and Wales, to report to the police where they discover (either through disclosure by the victim or visual evidence) that FGM appears to have been carried out on a girl under 18. Those failing to report such cases will face disciplinary sanctions. It will be rare for teachers to see visual evidence, and they should not be examining pupils, but the same definition of what is meant by “to discover that an act of FGM appears to have been carried out” is used for all professionals to whom this mandatory reporting duty applies. Information on when and how to make a report can be found at <https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-procedural-information>

Teachers must personally report to the police cases where they discover that an act of FGM appears to have been carried out.<sup>81</sup> Unless the teacher has a good reason not to, they should also still consider and discuss any such case with the school or college’s designated safeguarding lead and involve children’s social care as appropriate. The duty does not apply in relation to at risk or suspected cases (i.e. where the teacher does not discover that an act of FGM appears to have been carried out, either through disclosure by the victim or visual evidence) or in cases where the woman is 18 or over. In these cases, teachers should follow local safeguarding procedures.

## **Sexting**

In the latest advice for schools and colleges (UKCCIS, 2016), sexting is defined as **the production and/or sharing of sexual photos and videos of and by young people who are under the age of 18**. It includes nude or nearly nude images and/or sexual acts. It is also referred to as ‘youth produced sexual imagery’.

‘Sexting’ does not include the sharing of sexual photos and videos of under-18 year olds with or by adults. This is a form of child sexual abuse and must be referred to the police.

### **What to do if an incident involving ‘sexting’ comes to your attention**

**Report it to your Designated Safeguarding Lead (DSL) immediately.**

- **Never** view, download or share the imagery yourself, or ask a child to share or download – **this is illegal.**
- If you have already viewed the imagery by accident (e.g. if a young person has showed it to you before you could ask them not to), report this to the DSL.
- **Do not** delete the imagery or ask the young person to delete it.
- **Do not** ask the young person(s) who are involved in the incident to disclose information regarding the imagery. This is the responsibility of the DSL.
- **Do not** share information about the incident to other members of staff, the young person(s) it involves or their, or other, parents and/or carers.
- **Do not** say or do anything to blame or shame any young people involved.
- **Do** explain to them that you need to report it and reassure them that they will receive support and help from the DSL.

### **Advice for DSL**

The DSL should hold an initial review meeting with appropriate school staff. The initial review meeting should consider the initial evidence and aim to establish:

- Whether there is an immediate risk to a young person or young people if a referral should be made to the police and/or children’s social care

- If it is necessary to view the imagery in order to safeguard the young person – in most cases, imagery should not be viewed
- What further information is required to decide on the best response
- Whether the imagery has been shared widely and via what services and/or platforms. This may be unknown.
- Whether immediate action should be taken to delete or remove images from devices or online services
- Any relevant facts about the young people involved which would influence risk assessment
- If there is a need to contact another school, college, setting or individual
- Whether to contact parents or carers of the pupils involved - in most cases parents should be involved

**An immediate referral to police and/or children’s social care should be made if at this initial stage:**

1. The incident involves an adult
2. There is reason to believe that a young person has been coerced, blackmailed or groomed, or if there are concerns about their capacity to consent (for example owing to special educational needs)
3. What you know about the imagery suggests the content depicts sexual acts which are unusual for the young person’s developmental stage, or are violent
4. The imagery involves sexual acts and any pupil in the imagery is under 13
5. You have reason to believe a pupil or pupil is at immediate risk of harm owing to the sharing of the imagery, for example, the young person is presenting as suicidal or self-harming

If none of the above apply then a school may decide to respond to the incident without involving the police or children’s social care (a school can choose to escalate the incident at any time if further information/concerns come to light).

- The decision to respond to the incident without involving the police or children’s social care would be made in cases when the DSL is confident that they have enough information to assess the risks to pupils involved and the risks can be managed within the school’s pastoral support and disciplinary framework and if appropriate local network of support. The decision should be made by the DSL with input from the Headteacher and input from other members of staff if appropriate. The decision should be recorded in line with school policy. The decision should be in line with the school’s child protection procedures and should be based on consideration of the best interests of the young people involved. This should take into account proportionality as well as the welfare and protection of the young people. The decision should be reviewed throughout the process of responding to the incident.

*If a young person has shared imagery consensually, such as when in a romantic relationship, or as a joke, and there is no intended malice, it is usually appropriate for the school to manage the incident directly. In contrast any incidents with aggravating factors, for example, a young person sharing someone else’s imagery without consent and with malicious intent, should generally be referred to police and/or children’s social care. If you have any doubts about whether to involve other agencies, you should make a referral to the police.*

**Assessing the risks**

There should be subsequent interviews with the young people involved (if appropriate)

The circumstances of incidents can vary widely. **If at the initial review stage a decision has been made not to refer to police and/or children’s social care, the DSL should conduct a further review** (including an interview with the young people involved) to establish the facts and assess the risks.

When assessing the risks the following should be considered:

- Why was the imagery shared? Was the young person coerced or put under pressure to produce the imagery?
- Who has shared the imagery? Where has the imagery been shared? Was it shared and received with the knowledge of the pupil in the imagery? Are there any adults involved in the sharing of imagery?
- What is the impact on the pupils involved? Do the pupils involved have additional vulnerabilities? Does the young person understand consent? Has the young person taken part in this kind of activity before?

DSLs should always use their professional judgement in conjunction with their colleagues to assess incidents.

Parents should be informed at an early stage and involved in the process unless there is good reason to believe that involving parents would put the young person at risk of harm

At any point in the process if there is a concern a young person has been harmed or is at risk of harm a referral should be made to children's social care and/or the police immediately.

### **For further information**

Download the full guidance Sexting in Schools and Colleges: Responding to Incidents and Safeguarding Young People (UKCCIS, 2016) at [www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis](http://www.gov.uk/government/groups/uk-council-for-child-internet-safety-ukccis)

### **Private Fostering**

When a member of staff or volunteer at a school or college becomes aware that a pupil may be in a private fostering arrangement, where a child under the age of 16 (or 18 if with a disability) goes to live with someone **for 28 days or more** by private arrangement (without the involvement of a local authority), they should raise this in the first instance with the designated senior person for child protection. The school or college should notify the local authority of the circumstances, and the local authority will check that the arrangement is suitable and safe for the child.

A person who is barred from regulated activity will themselves be committing an offence under the Children Act 1989 and under the Safeguarding Vulnerable Groups Act 2006 if they privately foster a child. If the school or college has any reason to believe that the third party is failing to undertake a statutory duty they should notify the police.

Schools and colleges arranging for their children to stay with families overseas should be aware that the DBS cannot access criminal records held overseas. Host families in other countries, therefore, cannot be checked in the same way by local authorities as schools and colleges in this country when children stay abroad. Schools and colleges should work with partner schools abroad to ensure that similar assurances are undertaken prior to a visit. If they wish, local authorities and schools can contact the relevant foreign embassy or High Commission of the country in question and find out if similar checks can be done in that country.

## **Appendix 7c Background information for other Specific**

### **Safeguarding Issues**

- bullying including cyberbullying

See <https://www.gov.uk/government/publications/preventing-and-tackling-bullying>

- children missing education (CME)– and Annex A

See <https://www.gov.uk/government/publications/children-missing-education>

- child missing from home or care

See <https://www.gov.uk/government/publications/children-who-run-away-or-go-missing-from-home-or-care>

- domestic violence

See <https://www.gov.uk/guidance/domestic-violence-and-abuse>

- drugs

See <https://www.gov.uk/government/publications/drugs-advice-for-schools>

- fabricated or induced illness

See <https://www.gov.uk/government/publications/safeguarding-children-in-whom-illness-is-fabricated-or-induced>

- faith abuse

See <https://www.gov.uk/government/publications/national-action-plan-to-tackle-child-abuse-linked-to-faith-or-belief>

- gangs and youth violence

See <https://www.gov.uk/government/publications/advice-to-schools-and-colleges-on-gangs-and-youth-violence>

- gender-based violence/violence against women and girls (VAWG)

See <https://www.gov.uk/government/policies/violence-against-women-and-girls>

- hate

See <http://educateagainsthate.com/>

- mental health

See: <https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2>

- missing children and adults

See: <https://www.gov.uk/government/publications/missing-children-and-adults-strategy>

- relationship abuse

See: <https://www.disrespectnobody.co.uk/relationship-abuse/what-is-relationship-abuse/>

- Sexual violence and sexual harassment

See: <https://www.gov.uk/government/publications/sexual-violence-and-sexual-harassment-between-children-in-schools-and-colleges>

- trafficking

See: <https://www.gov.uk/government/publications/safeguarding-children-who-may-have-been-trafficked-practice-guidance>

## **Appendix 7d Forms**

All below can be found in

[T:\Safeguarding](#)

[CSC Common Referral Form – also for Early Help referral & CSE Hub](#)

[Signs of Safety report template for CP review meetings](#)

[Guidance for writing SOS report](#)

[NHS School Nurse Referral Form](#)

[Young Peoples Drug & Alcohol Service Referral Form](#)

[Prevent Referral Form](#)

[Safer Schools Police Referral Form](#) (to be handed to Steve Shearn)

[The Team Teach Physical Intervention Recording Form](#)

## **Notes**

**1. Team Teach:** Team Teach is the holistic approach we use to support people who may exhibit more challenging behaviours. The approach is based on a risk reduction approach involving de-escalation strategies, diversion and a last resort physical intervention. Government/Ofsted advice on PI - <https://www.gov.uk/government/publications/positive-environments-where-children-can-flourish>

**2. CPOMS:** A simple security overview can be found here: <T:\Safeguarding\System Security Overview.pdf>. CPOMS' completed DfE Cloud Services Checklist can be found at [www.cpoms.co.uk/cloudservices](http://www.cpoms.co.uk/cloudservices). Also: Meritec holds ISO27001 Accreditation; is Cyber Essentials Accredited; is held in escrow with the National Computer Centre (NCC) and each school has its own database - it is not a shared database with other schools; all of the information within the system is encrypted and needs a school's keys to decrypt it.