



Conway Safeguarding/Child Protection Policy

CONWAY PRIMARY SCHOOL

Date ratified by Governors:		Date policy was shared with all staff:	1 st September 2023	Date of next review of the policy:	September 2024
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1. Policy Statement

As a school, we recognise our moral and statutory responsibility to safeguard and promote the welfare of all children.

We endeavour to provide a safe and welcoming environment where children and adults feel respected and valued.

We maintain an attitude of '**it could happen here**' where safeguarding is concerned, and promote a culture of openness where children have a voice and are listened to.

This policy provides staff, volunteers and governors with the framework required in order to keep children safe and secure in our school. Its purpose is also to inform parents and carers of how we will safeguard their children whilst they are in our care.

The procedures contained in this policy apply to all staff, volunteers and governors and are consistent with those of the Greenwich Safeguarding Children's Partnership (GSCP) and locally agreed procedures.

This policy takes account of the "Keeping Children Safe In Education"¹ September 2023' statutory guidance and makes frequent references to it. [KCSIE 2023](#)

This policy provides information regarding different types of abuse, and encompasses other statutory and non-statutory documentation and legislation (shown in Appendix 2 of this policy).

The policy outlines the procedures that the school has in place to ensure all children in our care receive effective support, protection and justice. Preventative education is effective within our whole school approach and prepares children for life in modern Britain with a zero tolerance for sexism, misogyny/misandry, homophobia, biphobic and sexual violence/harassment.

The policy is hyperlinked to relevant statutory documentation and guidance to provide easy access for additional information/clarification.

2. Definition of Safeguarding

As defined in statutory guidance

- protecting children from maltreatment
- preventing the impairment of children's mental and physical health or development
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care
- taking action to enable all children to have the best outcomes.

3. Aims and Values

3.1 Aims

- To ensure all staff are aware of their statutory duty to safeguard the children in their care.
- To ensure staff are trained to recognise and report safeguarding concerns, ensuring appropriate action is taken in a timely manner to safeguarding and promote children's welfare
- To support the development and understanding of children in how to protect themselves from potential abuse and equip them with the skills needed to support their mental-wellbeing.

3.2 Values

- To uphold children's rights to feel safe and protected from harm
- To work effectively in partnership with other agencies for the benefit of children
- To ensure the interest of the child is paramount in all safeguarding decisions made and actions taken².

¹ 'Keeping Children Safe in Education'¹ September 2023 statutory guidance [KCSIE 2023](#)

² The school will work openly with parents/carers as far as possible, but it reserves the right to contact Children's Social Care or the police, without notifying parents if this is believed to be in the child's best interests.

4. Roles and Responsibilities

4.1 The Governing Body's Roles & Responsibilities³

(KCSIE Part 2 and 3)

4.1.1 Governors promote a child-centred whole school approach to safeguarding which underpins all relevant aspects of process and policy development, and promote a culture of respect, where staff and children are listened to and all concerns raised are followed up.

4.1.2 The Governing body has nominated a governor who will be responsible for Safeguarding and Child Protection, and has ensured that all governors (including those new to the role) have a clear understanding of their statutory responsibility to safeguarding those who use the school.

4.1.3 The Governing Body will ensure that:

- An annual review of the school's safeguarding policy procedures adheres to the Royal Borough of Greenwich guidance and locally agreed interagency procedures
- The policy is made available publicly, on the school website or on request;
- The safer recruitment procedures as outlined in [KCSIE 2023](#) part 3 are robustly implemented and all appropriate checks are carried out on staff and volunteers who work with children;
- A senior member of the school's leadership team is designated to take lead responsibility for dealing with safeguarding and child protection (including online safety). To provide advice and support to other staff, liaising with the local authority, and working with other agencies. The Designated Safeguarding Leader (DSL) will receive appropriate training, funding and time to carry out the role effectively as outlined in his/her job description.
- Annual staff training is prioritised to ensure all staff are equipped to carry out their responsibilities for child protection effectively. Also, that all temporary staff and volunteers who work with children are made aware of the school's arrangements for child protection and their responsibilities;
- The school has clear systems and processes in place for identifying possible mental health concerns, including routes to escalate response and clear accountability systems⁴
- There are robust systems in place for the induction of new staff on the school's safeguarding procedures and relevant policies (CP policy, behaviour policy, staff code of conduct, procedures regarding children who are absent from education and the role of the DSL)
- An appropriate whistleblowing policy/procedure is in place to encourage any staff member or volunteer to report concerns regarding safeguarding practice in school
- The school has clear procedures for dealing with allegations of abuse made against members of staff and volunteers that comply with guidance from the local authority and locally agreed interagency procedures;
- Procedures are in place for regular evaluation of the effectiveness of safeguarding systems, including adherence to safer recruitment procedures and checks on the effectiveness of online safety (including the filtering strategies⁵), as outlined in [KCSIE2023](#)(para 141).
- With staff welfare in mind, the Governing Body will consider the necessity and

³ Governing bodies and proprietors have a strategic leadership responsibility for their school's or college's safeguarding arrangements and must ensure that they comply with their duties under legislation. They must have regard to guidance, e [KCSIE2023](#)nsuring policies, procedures and training in their schools or colleges are effective and comply with the law at all times.

⁴ Further information can be found in the [mental health and behaviour in schools' guidance](#)

⁵ [Online filtering and monitoring](#)

appropriateness of arranging for 'Safeguarding Supervision' for the DSL and Deputy DSLs within the school.

4.2 **Head Teacher's Role and Responsibilities**

In line with the statutory guidance ([KCSIE 2023](#)), the Head Teacher will ensure that systems and procedures are in place to support all staff to understand their individual and collective roles in safeguarding and promoting the welfare of children.

The Head Teacher will ensure:

- The policies and procedures adopted by the governing body or proprietor are fully implemented, and followed by all staff.
- The DSL has a clear and concise job description, explicitly referring to the role of taking **lead responsibility** for safeguarding and child protection (including online safety)
- Sufficient resources and time are allocated to enable the DSL and other staff to discharge their responsibilities, including taking part in strategy discussions and other inter-agency meetings, and contributing to the assessment of children.
- All staff and volunteers feel able to raise concerns about poor or unsafe practice with regard to children, and such concerns are addressed sensitively and effectively in a timely manner in accordance with agreed whistleblowing policies, where appropriate.
- There are arrangements in place for DSL availability to cover any out of hours or out of term time activities taking place.
- Induction procedures are robust and meet the requirements outlined in [KCSIE 2023](#) (para 560)
- A barred list check is completed and a risk assessment is in place, to ensure any individual who starts before a DBS certificate is received is appropriately supervised.
- Procedures are in place to refer to DBS any person dismissed or removed due to safeguarding concerns.
- The school will take the lead role in the investigation of any allegation concerning a supply teacher in post and will keep the supply agency informed throughout.
- The school is satisfied that any alternative providers used by the school or visitors attending in a professional capacity have appropriate safeguarding procedures in place.
- The school curriculum provides regular opportunities for children to learn about personal safety and how to protect themselves from harm in an age appropriate way.

4.3 **The Designated Safeguarding Lead's Role and Responsibilities**

The DSL will act to meet the requirements of the role, as outlined in [KCSIE 2023](#) (Annex C), which includes (but is not limited to):

- Referring cases of suspected abuse, neglect, radicalisation or allegations to the relevant statutory agencies (children's social care, the police or the Channel programme)
- Act as a source of support, advice and expertise to staff within the school
- Liaise as appropriate with staff, including IT technician, the SENCo, the designated teacher for LAC, the virtual headteacher and the named person with oversight for mental health.
- Promote positive engagement with parents and/or carers to safeguard children and support families facing challenging circumstances
- Champion educational outcomes for vulnerable children and those who have or have had a social worker
- Have procedures in place to re-assess concerns when a child's situation fails to improve

- Ensure procedures and guidance are in place to ensure all searches of pupils are witnessed (including the appointment of an appropriate adult for strip searches ^{6 7}) and all searches for prohibited items are logged on the school safeguarding reporting system. See also guidance in appendix 6

4.3.3 Record keeping

- Maintain clear, concise and confidential records of the concern, action taken and outcome
- Ensuring safe and secure transfer of records when a child leaves the school.

4.3.4 Promoting a culture safeguarding and training

- Maintain his/her own secure and up-to-date knowledge of safeguarding developments and share as appropriate with staff in line with advice from the Greenwich Safeguarding Children's Partnership (GSCP)
- Understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes, such as the Royal Greenwich Early Help Guidance
- Have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so
- Ensure each member of staff has access to and understands the school's safeguarding/child protection policy and procedures, especially new or part-time staff.
- Ensure all staff have robust induction training, covering safeguarding/child protection, and are confident to recognise and report any concerns about children's safety and welfare immediately as they arise
- Promote a culture of listening to children and building trusting relationships to support those children who find difficulty in approaching staff with a concern.
- Ensure all staff are aware of the additional risks that children with Special educational needs and disabilities face online
- Ensure all staff are aware of the guidance [What to do if you are worried a child is being abused](#)
- Ensure staff are aware of contextual safeguarding and extra-familial harm from the influence of factors outside of school or in the child's own family, including vulnerability to possible abuse, exploitation and youth violence.
- Provide feedback and reassurance to staff who have raised a child protection concern

4.4 The Role & Responsibilities of Staff and Volunteers

- 4.4.1 At the start of the academic year, (or commencement of employment if starting at the school during the academic year), all staff will sign a declaration to indicate that they have read and understood 'Keeping Children Safe in Education' part 1 and the school's Safeguarding/child protection policy. (Those working directly with children will read 'Keeping Children Safe In Education' Annex B.) In signing this, staff are indicating that they understand their statutory duty to safeguard children and to report any concerns.
- 4.4.2 All staff will familiarise themselves with the signs of abuse and neglect (Appendix 1, attached) so that they are able to identify children who may be in need of help or protection.
- 4.4.3 All staff will ensure they understand and can follow the school's procedures for reporting

⁶ [PACE Code C 2019](#)

⁷ [searching screening and confiscation July 2022](#)

concerns

4.4.4 Staff members will maintain an attitude of **'it could happen here'** where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.

4.4.5 All staff will:

- Be aware that mental health problems can be an indicator that a child has suffered abuse, neglect or exploitation
- Recognise that a disclosure may come directly from the child, or from a third party, e.g., friend, neighbour, other family member. Alternatively, it may be through the suspicion of staff based on a variety of signs, symptoms and knowledge of possible indicators of abuse
- Recognise that child-on child abuse (all forms, including physical and sexual violence and harassment, sexting, 'up skirting'⁸, bullying and initiation/hazing) must not be downplayed and must be taken seriously and appropriately reported
- Be aware of indicators which may signal involvement with violent crime (absences from school, changes in friendship groups or relationships with older individuals/groups, decline in performance or unexplained injuries). Also, the increased likelihood of involvement of being male or permanently excluded from school.

4.4.6 Staff will take seriously any disclosures made to them and provide reassurance to the discloser through their responses and behaviour (*without promising they will not tell anyone*). Ensuring the victim or person disclosing is not given the impression they are causing a problem by reporting a concern or abuse.

4.4.7 Staff will read carefully any documentation provided by the DSL to update their safeguarding training.

4.4.8 All staff and volunteers have a duty to raise concerns about poor or unsafe practice and potential failures in the school's safeguarding regime. Where a staff member feels unable to raise an issue or feels that their genuine concerns are not being addressed, other whistleblowing channels are open to them

- *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 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: help@nspcc.org.uk.*

5. Strategies and Procedures to Support Safeguarding

5.1 Promoting Equality

5.1.1 Some children have an increased risk/vulnerability to abuse. They can face additional barriers with respect to recognising or disclosing concerns. The school is committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of additional barriers they may face.

Children who may be more vulnerable include:

- Children who are young carers
- Children who may experience discrimination due to their race, ethnicity, religion, gender identification or sexuality

⁸ Changes to the Voyeurism (Offences) Act 2019 criminalises the act of 'up skirting'. The [Criminal Prosecution Service \(CPS\)](#) defines 'up skirting' as a colloquial term referring to the action of placing equipment such as a camera or mobile phone beneath a person's clothing to take a voyeuristic photograph without their permission.

- Those who have English as an additional language
- Children known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence
- Children at risk of FGM, sexual exploitation, forced marriage, or radicalisation
- Children who are asylum seekers
- Those at risk due to either their own or a family member's mental health needs
- Children looked after or previously looked after
- Children missing from education
- A child whose parent/carer has expressed an intention to remove them from school to be home educated

5.1.2 The school recognises that children with special educational needs or disabilities (SEND) or those with certain health conditions can face additional safeguarding challenges. Staff recognise the need to

- Explore the reasons for changes in behaviour, mood and injury rather than assume it is related to the child's disability
- Recognise these children as being more prone to peer group isolation or bullying (including prejudice-based bullying) than other children
- Understand that children with SEN and disabilities can be disproportionately impacted by things like bullying without outwardly showing any signs
- Overcome the barriers and difficulties in communication with these children.

5.2 Trained Workforce

- 5.2.1 All staff members will receive appropriate safeguarding and child protection training which is regularly updated. In addition, all staff members will receive safeguarding and child protection updates (for example, via email, e-bulletins and staff meetings), as required, to provide them with relevant skills and knowledge to safeguard children effectively.
- 5.2.2 The designated safeguarding lead (and any deputies) will undergo training to provide them with the knowledge and skills required to carry out the role. This training will be updated at least every two years. The designated safeguarding lead will undertake Prevent awareness training and disseminate information to staff.
- 5.2.3 Any newly appointed DSL will attend the DSL one-day training, provided by the Royal Borough of Greenwich Direct Services to Schools, or another accredited training provider, followed by the GSCP Working Together course, before taking lead responsibility for safeguarding. The deputy DSL will take a leading role on safeguarding for the short time that the DSL is waiting to receive training.
- 5.2.4 All governors will receive annual safeguarding training to support them in understanding their statutory duties. All new governors will have safeguarding training as part of their induction. The designated Governor for Safeguarding and Child Protection will undertake governor safeguarding training annually.
- 5.2.5 The DSL will retain a training record indicating the attendance at safeguarding training so that absent staff can receive an update on their return. Additionally, the DSL will retain a record showing staff have read 'Keeping Children Safe in Education' (Part 1 and Annex B)
- 5.2.6 All new members of staff will receive safeguarding training as part of their induction programme.
- 5.2.7 At least one member of every appointment panel will have gained accreditation through

Safer Recruitment training (statutory requirement).

5.3 Safer Recruitment

The statutory guidance will be followed (see KCSIE Part 3)

- Outlining the school's commitment to safeguarding and promoting the welfare of children in all advertising.
- At least one safer recruitment trained adult will undertake the shortlisting and be present on any interview panel.
- Providing a copy or link to the school's CP/ safeguarding policy to applicants.
- Requesting a self-declaration at interview so any relevant information can be discussed.
- Seeking references prior to interview and checking employment history
- Carrying out pre-employment checks (including the applicant's online presence) and recording required information on the school's Single Central Record.

5.4 Embedding High Standards of Behaviour

The school's behaviour policy promotes positive and respectful behaviour of staff and pupils.

5.4.1 All school staff have been trained to challenge any child-on-child abuse in all its forms. (see Appendix 1 in this policy)

- Staff will challenge derogatory or sexualised language and inappropriate behaviours including that carried out online.
- Deliver a curriculum to educate children about appropriate behaviour and developing positive relationships
- Staff will tackle prejudice and promote empathy through awareness and acceptance of differences. A whole school approach will be adopted to tackling sexism and challenging homophobic language, banter and racist language.
- Staff will be vigilant concerning all forms of bullying physical, emotional and verbal.

5.5 Referral to Early Help

Royal Greenwich Early Help Guidance supports children and families with emerging needs and promotes a shared responsibility to facilitate significant and sustained change in children's lives, building resilience, preventing and protecting children from harm. Early help is focused on developing and breaking intergenerational cycles of poverty through working with children's parents/carers and families.

Staff are alert to the potential need for early help for a child who:

- is disabled and has specific additional needs, including certain medical needs
- has special educational needs
- is a young carer
- is showing signs of engaging in anti-social or criminal behaviour
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health, domestic violence
- is showing early signs of abuse and/or neglect.

Further information can be found from:

www.greenwichsafeguardingchildren.org.uk

Early Help consultation line 0208 921 4590 1- 4pm

Early-help-refer@royalgreenwich.gov.uk

Early Help preventions directory available on the GSCP website

5.6 Recognising Abuse and Taking Action

5.6.1 All staff and volunteers must be aware that the main categories of abuse are:

- Neglect
- Physical abuse
- Sexual abuse
- Emotional abuse

5.6.2 All staff and volunteers must act in accordance with this policy if a child presents with indicators of abuse⁹

5.6.3 Staff will follow the guidance in this policy for dealing with a disclosure or reporting concerns (see Appendix 3)

5.6.4 If any member of staff has a concern about a particular child in their care, they must immediately report their concerns to, and seek advice from the Designated Safeguarding Lead, or in their absence, the Deputy Designated Safeguarding Lead. Staff must provide the DSL with a signed and dated written orange of their concerns.

5.6.5 All staff should be aware of the process for making referrals to children's social care and for statutory assessments under the Children's Act 1989, especially section 17 (children in need) and section 47 (a child suffering, or likely to suffer, significant harm) that may follow referral, along with the role they might be expected to play in such assessment.

5.6.6 Staff will follow the guidance in Appendix 3 if a child discloses that he/she has been abused in some way.

5.6.7 Staff must be aware that an incident may eventually end up as a court case and children's evidence can all too easily be compromised by leading questions or personal expressions/comments when recording the disclosure.

5.6.8 The DSL (or in his/her absence, the Deputy DSL) will make the decision whether or not to refer the concern to Social Care. The Multi Agency Safeguarding Hub (MASH) will be consulted when there is uncertainty about whether to refer.

MASH Consultation Line Tel- 0208 921 2267 or contact

RBG LADO/RBG Schools' Safeguarding Officer on 0208 921 3930.

5.6.9 Referrals will be made as soon as possible by telephone **and the appropriate forms completed and sent at the same time.** Referrals to Children's Social Care must be made to the Multi Agency Safeguarding Hub (**MASH**) Tel 0208 921 3172

**Multi Agency Safeguarding Hub
Children's Services'
Safeguarding and Social Care, 1st Floor
The Woolwich Centre,
Wellington Street,
Woolwich, London
SE18 6HQ**

5.6.10 If the DSL has raised a safeguarding concern but does not feel that appropriate action has been taken by Royal Borough of Greenwich Children's Services, he/she should use the RBG Safeguarding Children's Partnership escalation policy to take this further. (This is available on the GSCP website, click on the professional's tab)

5.7 Reporting Concerns and Record Keeping (see also Appendix 3)

5.7.1 The school uses an electronic system CURA and a paper-based system – Orange forms for recording concerns. If an electronic system is used in the school any paper notes

⁹ (See Appendix 1 in this policy for brief details of types of abuse and [KCSIE 2023](#) (part 1 and Annex B for greater detail)

etc must be scanned and held electronically. These documents provide an accurate factual account of the concern and action taken by the school.

- 5.7.2 The completed forms/records will be kept for the duration of the child's school career and where a child changes school the forms/records will be forwarded securely to the new setting.
- 5.7.3 Records will include
- Clear and comprehensive summary of concern
 - Details of how concern was followed up
 - Note of any action taken, decision reached and outcome
- 5.7.4 The information contained will be regarded as confidential. Any request for access to the information by non-Greenwich Safeguarding Children Partnership Agencies (e.g., Solicitor, investigating agent) will be referred to the Head Teacher/DSL, who is advised to seek legal advice before acting.
- 5.7.5 All records of concern and multi-agency involvement should be kept separate from the child's academic records. They must be kept securely, with access only for the DSL, Deputy DSL's and Head Teacher.

6. Dealing with Concerns/Allegations Made Against School Staff, Supply Staff, Volunteers and Contractors¹⁰.

- 6.1 There are two levels of concern/allegation
- Allegations that may meet the harm threshold
 - Allegations/concerns that do not meet the harm threshold ('low level concern')
- 6.2 An allegation that meets the 'harm threshold' is any information which indicates that a member of staff (including supply staff), volunteer or contractor may have:
- behaved in a way that has, or may have harmed a child
 - possibly committed a criminal offence against or in relation to a child
 - behaved towards a child or children in a way which indicates s/he would pose a risk of harm to children
 - behaved or may have behaved in a way that indicates they may not be suitable to work with children¹¹
 - behaved in a way contrary to the Staff Code of Conduct
- 6.3 Any concern or allegation should be reported immediately to the DSL or Head Teacher. The Head Teacher will follow the guidance in [KCSIE 2023](#) part 4 and outlined in Appendix 4 in this policy
- 6.4 The Head Teacher will assess whether it is necessary to refer to the Local Authority Designated Officer (LADO) to determine the next step.
- 6.5 If the concern or allegation meets any of the five criteria set out in section 6.2 (i.e., may meet the harm threshold) then the Head Teacher shall contact the RBG LADO without delay, and provide the LADO with written confirmation of the allegation.
- 6.6 The Head Teacher shall, as soon as possible, following briefing from the LADO, inform the subject of the concern or allegation. (If the concern or allegation involves a supply teacher/staff or contractor, the agency will be informed and invited to share any information relating to previous concerns or allegations)

¹⁰ [KCSIE 2022](#) Part 4 also see Appendix 3 attached to this policy

¹¹ This applies to behaviours outside the school environment, in the adult's personal, professional or community life.

- 6.7. If there is an allegation or concern raised against the Head Teacher, then the Chair of Governors should be contacted. He/she will inform the LADO and follow guidance in [KCSIE 2023](#) (Part 4) and Appendix 4 in this policy
- 6.8. Following outcome of any investigation, there is a legal requirement for employers to make a referral to the DBS, where they consider whether the individual has engaged in conduct that harmed or is likely to harm a child, or if they pose as risk of harm to a child. Consideration must also be made, if it is appropriate, to refer to the Teacher Regulation Agency (TRA) for them to determine if the individual should be banned from teaching.

7 Dealing with Concerns/Allegations Against Other Children – Child on Child Abuse

- 7.1 This policy recognises that children are capable of abusing their peers. Any allegations will be investigated appropriately by reporting concerns to the DSL. Any form of inappropriate touching, physical abuse such as hitting, kicking, shaking, biting and hair pulling, or evidence of 'initiation procedures', sexting, up-skirting (or other inappropriate use of new technology) will be robustly followed up.
- 7.2 All staff should understand, that even if there are no reports of it in their school, it does not mean it is not happening, it may be the case that it is just not being reported.
- 7.3 All staff understand the importance of challenging inappropriate behaviours between peers. **There will be a zero-tolerance approach to sexual violence and sexual harassment.** Staff will **not** downplay certain behaviours, for example dismissing sexual harassment as "just banter", "just having a laugh", "part of growing up" or "boys being boys," as this can lead to a culture of unacceptable behaviours, an unsafe environment for children and, in worst case scenarios, a culture that normalises abuse, leading to children accepting it as normal and not coming forward to report it.
- 7.4 Victims (and alleged perpetrators) of child-on-child abuse or bullying will be supported as for any other form of abuse and in their best interests.
- 7.5 Child-on-child abuse can manifest itself in many ways. The curriculum, and in particular the RSE/RSHE curriculum, provides regular opportunities for the school to help children safeguard themselves from new technology and through learning about personal safety.
- 7.6 The school provides regular online safety information for children and they are given key information from CEOP and other online safety sites.

8 Confidentiality

- 8.1 Safeguarding in schools raises issues of confidentiality that must be clearly understood by all staff / volunteers in school. All staff/volunteers in school have responsibility to share relevant information about the protection of children with other professionals. This sharing of information is outlined in the DfE guidance (July 2018)¹². It identifies seven golden rules for sharing information. It reminds practitioners that the General Data Protection Regulation (GDPR), Data Protection Act 2018 (and 2020 update) and human rights law are not barriers to justified information sharing, but provide a framework to ensure that personal information about living individuals is shared appropriately.
- 8.2 If a child discloses to a member of staff/volunteer and asks that the information is kept secret, it is important that the member of staff / volunteer tells the child in a manner appropriate to the child's age / stage of development that they cannot promise complete confidentiality – instead he/she must explain that he/she may need to pass information to other professionals to help keep the child or other children safe.
- 8.3 Staff / volunteers who receive information about children and their families in the course

¹² [Information sharing advice for practitioners providing safeguarding services to children, young people, parents and carers](#)

of their work shall share that information only within appropriate contexts.

9 Communication with Parents

- 9.1 Parents and carers will be made aware of the school safeguarding/child protection policy through published information and in initial meetings with the school. Parents and carers will be informed that in certain circumstances there may be a need to contact other agencies without first notifying them. This decision will be made in partnership between Education Services and Social Care. It will be made clear that this is a legal obligation and not a personal decision.
- 9.2 The Governing Body makes this Safeguarding/CP policy available to parents, carers and children through the school website. A hard copy is also available on request.

10 Monitoring and Evaluation

- The responsibility for ensuring that the Safeguarding/Child Protection Policy and procedures are in place, available to parents and reviewed annually lies with the Governing Body. This policy will be reviewed in line with the timescale and details set out on the front cover.
- Governors and school leaders will implement a strategy to evaluate the effectiveness of safeguarding procedures including ensuring safer recruitment procedures are robustly implemented and online protection is regularly assessed.

11 Linked Policies/Procedures

Behaviour

Anti-bullying policy
Children Missing Education
Medical Needs
E-safety policy
ICT policy
Acceptable use agreements
Equalities policy
Whistleblowing
Safer Recruitment in schools
Induction policy
Drugs in school
Health and Safety
Curriculum policy

Staff Code of Conduct (staff behaviour policy)
CSE/CCE
Photography policy
Female Genital Mutilation (FGM)
Forced Marriage
Intimate care policy
Positive handling/ Physical restraint
Relationships and Health Education (RHE)
Relationships and Sex Education (RSHE)
Health Education
Attendance

Appendix 1: Types and Indicators of Abuse

(to be read in conjunction with 'Keeping Children Safe In Education' [KCSIE 2023](#) Part 1 and Annex B)

NB. This abbreviated guidance provides a useful reminder of the types and indicators of abuse but **MUST be considered within the context of a comprehensive training programme and reference to relevant sections in [KCSIE 2023](#) (Part 1 and Annex B). This guidance is not a substitute for more in-depth consideration of harm.**

There are four categories of abuse, which may result in a child being placed on the Child Protection Register. They are:

- Physical Abuse
- Emotional Abuse
- Sexual Abuse
- Neglect

Definitions of child abuse

'Child Abuse and neglect' is a generic term encompassing all ill treatment of children, including serious physical and sexual assault as well as cases where the standard of care does not adequately support the child's health (physical or mental) or development needs. The impact of witnessing the ill treatment of others may also cause harm to the child. Children may be abused or neglected through the infliction of harm or through the failure to act to prevent harm.

Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Abuse can occur in families, institutions or community settings. The alleged perpetrator may be known or not known to the child. There are 4 broad categories of abuse which are used for the purposes of registration. These categories overlap and an abused child may suffer more than one type of abuse.

1. Physical Abuse

Physical abuse may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning or suffocating or any other act of 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.

Possible indicators of Physical Abuse - Some of these indicators would clearly suggest child abuse, whilst others, when combined, may suggest that a child is being abused:

- Unexplained injuries, including burns, particularly if they are recurrent
- Improbable excuses given to explain injuries
- Refusal to discuss injuries
- Untreated injuries
- Admission of punishment which seems excessive
- Bald patches
- Withdrawal from physical contact
- Arms and legs covered, even in hot weather
- Fear of returning home
- Fear of medical help
- Self-destructive tendencies
- Aggression towards others
- Running away

2. Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child, such as to cause severe and adverse effects on the child's emotional development. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone. It may involve

- conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person.

- not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate.
- feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction.
- seeing or hearing the ill-treatment of another (including witnessing domestic violence)
- serious bullying (including cyber bullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children.

Possible indicators of Emotional Abuse - Some of these indicators would clearly suggest child abuse, whilst others, when combined, may suggest that a child is being abused:

- Physical/ mental and/or emotional developmental lags
- Admission of punishment that appears excessive
- Over-reaction to mistakes
- Continual self-deprecation
- Sudden speech disorders
- Fear of new situations
- Inappropriate emotional responses to painful situations
- Neurotic behaviour e.g. thumb sucking, hair twisting, rocking
- Self-mutilation
- Fear of parents being contacted
- Extremes of passivity or aggression
- Drug/solvent abuse
- Running away
- Compulsive stealing or scavenging

3. Sexual Abuse

Sexual abuse involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving 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. The sexual abuse of children by other children is known (in education) as peer-on-peer abuse.

Possible indicators of Sexual Abuse - Some of these indicators would clearly suggest child abuse, whilst others, when combined, may suggest that a child is being abused:

- Sudden changes in behaviour or in school performance
- Displays of affection in a sexual way, inappropriate to age
- Tendency to cling or need reassurance
- Regression to younger behaviour e.g. thumb sucking, acting like a baby, playing with discarded toys
- Complaints of genital itching or pain, or anal pain
- Distrust of a familiar adult, or anxiety about being left with a relative, babysitter or lodger
- Unexplained gifts or money
- Depression and withdrawal
- Apparent secrecy
- Bedwetting, daytime wetting and/or soiling
- Sleep disturbances, nightmares
- Chronic illness, e.g. throat infection, venereal disease or other STD *
- Anorexia, bulimia
- Unexplained pregnancy
- Fear of undressing, e.g. for sport
- Phobias or panic attacks

4. Neglect

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

Possible indicators of Neglect - Some of these indicators would clearly suggest child abuse, whilst others, when combined, may suggest that a child is being abused.

- Constant hunger
- Poor personal hygiene
- Constant tiredness
- Poor state of clothing
- Emaciation
- Frequent lateness or non-attendance at school
- Untreated medical problems
- Destructive tendencies
- Low self esteem
- Neurotic behaviour
- No social relationships
- Running away
- Compulsive stealing or scavenging

Additional safeguarding issues¹³

Mental Health

Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Education staff, however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. Schools and colleges can access a range of advice to help them identify children in need of extra mental health support, this includes working with external agencies.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following their child protection policy, and speaking to the designated safeguarding lead or a deputy.

Honour Based Abuse

So-called 'honour-based' abuse (HBA) 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. Abuse committed in the context of preserving honour, often involves a wider network or family or community pressure and can include multiple perpetrators.

- **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.

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

¹³ Further detail to be found in [KCSIE 2023](#) Annex B

health and social care professionals in England and Wales, to report to the police where they discover that 'FGM appears to have been carried out on a girl under 18'¹⁴.

- **Possible indicators of Female genital mutilation (FGM)**
 - Holiday requests made to school for significant lengths of time (Pre warning)
 - Long periods of time away from the classroom during the day with bladder or menstrual problems
 - Avoidance of P.E.
 - Difficulty walking, sitting or standing
 - Prolonged absences from school
 - Noticeable behaviour changes
 - Withdrawal
 - Depression
 - Recurrent Urinary Tract Infections (UTI) or complaints of abdominal pain

- **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.

The Forced Marriage Unit has published Multi-agency guidelines, with pages 75-80 focusing on the role of schools and colleges. School and college staff can contact the Forced Marriage Unit if they need advice or information. Contact: 020 7008 0151 or email: fmfu@fco.gov.uk. See also Royal Borough of Greenwich Safeguarding Children Partnership website:

www.greenwichsafeguardingchildren.org.uk

Domestic Abuse

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. The abuse can be, but is not limited to, psychological, physical, sexual, financial or emotional. Children can be victims of domestic abuse. They may see, hear, or experience the effects of abuse at home and/or suffer domestic abuse in their own intimate relationships (teenage relationship abuse). All of these can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

Operation Encompass – helps police and schools to work together to provide emotional and practical help when children have experienced a domestic incident. The DSL will be notified of a domestic incident before the child arrives at school the following day and can therefore arrange appropriate support.

Children missing from Education¹⁵

All children, regardless of their circumstances, are entitled to a full-time education which is suitable to their age, ability, aptitude and any special educational needs they may have. A child going missing from education is a potential indicator of abuse or neglect, which may include sexual abuse or exploitation and child criminal exploitation, including involvement in county lines. It may indicate mental health problems, risk of substance abuse, risk of travelling to conflict zones, risk of female genital mutilation, honour based abuse or risk of forced marriage. Staff should be aware of their school's unauthorised absence and children missing from education procedures.

The school must inform the local authority of any pupil who fails to attend school regularly, or has been absent without the school's permission for a continuous period of 10 school days or more, at such intervals as are agreed between the school and the local authority (or in default of such agreement, at intervals determined by the Secretary of State).

¹⁴ [Statutory duty to report FGM](#)

¹⁵ [CME statutory guidance](#)

Private fostering

Private fostering is when a child under the age of 16 (under 18 for children with a disability) is provided with care and accommodation by a person who is not their parent, a person with parental responsibility for them or a relative in their own home

If a member of school staff suspects a child may be being privately fostered without formal arrangement it is important to notify Multi Agency Safeguarding Hub (**MASH**) Tel 0208 921 3172

Preventing Radicalisation

Extremist ideology, radicalisation and terrorism

Children and young people can suffer harm when exposed to extremist ideology which may be social, political or religious in presentation. This harm can range from a child adopting or complying with extreme views which limits their social interaction and full engagement with their education, to children being groomed for involvement in violent actions.

Extremism: the vocal or active opposition to our fundamental British values. This also includes calling for the death of members of the armed forces.

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

Terrorism: an 'action that endangers or causes serious violence to a person; causes serious damage to property or seriously interferes or disrupts an electronic system'. The use or threat must be designed to influence government or intimidate the public to advance a political, religious or ideological cause.

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. It can happen in many different ways and settings. Background factors combined with specific influences such as family and friends may contribute to a child's vulnerability for which an extremist or terrorist group may appear to provide an answer. Similarly, radicalisation can occur through different methods, such as social media or the internet. Staff should use their own judgement in identifying children at risk of radicalisation and report to the DSL, who may decide to make a Prevent referral.

PREVENT DUTY - Section 26 of the Counter-Terrorism and Security Act 2015 ("the CTSA 2015"), places a duty on schools to have due regard to the need to prevent people from being drawn into terrorism". This duty is known as the Prevent duty. Paragraphs 57-76 of the Revised Prevent duty guidance: for England and Wales¹⁶ is specifically concerned with schools (but also covers childcare). It places the requirements on schools in four general themes: Risk assessment, working in partnership, staff training and IT policies

- Schools are expected to assess the risk of children being drawn into terrorism, including support for extremist ideas that are part of terrorist ideology. Staff should be able to demonstrate both a general understanding of the risks affecting children and young people in the area and an understanding of how to identify individual children who may be at risk of radicalisation and what to do to support them. Schools should have clear procedures in place for protecting children at risk of radicalisation.
- The Prevent duty builds on existing local partnership arrangements and take into account the policies and procedures of the Local Safeguarding Children Partnership. Effective engagement with parents/the family should also be considered as they are in a key position to spot signs of radicalisation. It is important to assist and advise families who raise concerns and be able to point them to the right support mechanisms. Schools should also discuss any concerns in relation to possible radicalisation with a child's parents in line with the individual school's safeguarding policies and procedures, unless they have specific reason to believe that to do so would put the child at risk.
- Schools need to equip staff to identify children at risk of being drawn into terrorism and to challenge extremist ideas. Individual schools are best placed to assess the training needs of staff in light of their assessment of the risk to pupils at the school of being drawn into

¹⁶ [Revised Prevent Duty guidance for England and Wales 2019](#)

terrorism. As a minimum, schools should ensure that the DSL lead undertakes Prevent awareness training and is able to provide advice and support to staff on protecting children from the risk of radicalisation.

- Schools must ensure that children are safe from terrorist and extremist material when accessing the internet in schools.
- If a Prevent referral is passed to a multi-agency Channel Panel, then a member of school staff will attend (if asked) to help with any assessment of vulnerability.

Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE) ¹⁷.

Both are forms of abuse that occur where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child into taking part in sexual or criminal activity, in exchange for something the victim needs or wants, or through violence/the threat of violence. Whilst the age of the child may be a contributing factor for an imbalance of power, there are a range of other factors that could make a child more vulnerable to exploitation, including sexual identity, cognitive ability, learning difficulties, communication ability, etc. Children can be exploited by adult males, females, individuals or groups or by other children (who themselves may be experiencing exploitation).

CSE is a form of child sexual abuse. Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or nonpenetrative 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. CSE can be a one-off occurrence and may happen without the child's knowledge, e.g. by sharing videos or images on social media.

Any child who has been coerced into engaging in sexual activities is being abused or exploited. This includes 16 and 17 year olds who can legally **consent** to have sex. Some children may not realise they are being exploited, for example if they believe they are in a genuine, romantic relationship.

CCE is when children are forced or manipulated into participating in criminal activity. This can range from the transportation of drugs, weapons or money through county lines (see below) or being forced to work in the manufacture of drugs, forced to shoplift, committing vehicle crime or threatening/committing serious violence to others. Children can become trapped in a cycle of criminal activity, as perpetrators can threaten their families with violence or entrap and coerce the child into debt. The experiences of boy victims may be very different to those of girl victims.

Possible indicators of CSE and CCE

- Having unaffordable/unexplained gifts or new possessions
- Going missing from home or care or coming home late
- Associating with other young people involved in exploitation
- Truancy, exclusion, disengagement with school, opting out of education altogether
- Changes in emotional well-being
- Drug or alcohol misuse
- Unexplained injuries

Further indicators of CSE include

- Having older boyfriends or girlfriends
- Suffering from sexually transmitted infections, inappropriate sexual or sexualised behaviour or pregnancy

County lines is where gangs and organised criminal networks transport illegal drugs, both locally and across the UK. Children and vulnerable adults are exploited to move, store and sell drugs and transport money, sometimes from urban areas to suburban and rural areas, market/seaside towns. Offenders will often use coercion, intimidation and serious violence (including sexual

¹⁷ See Annex B [KCSIE 2023](#) for further information

violence and weapons) to ensure compliance of victims. There may also be a threat of violence to the victim and their families can be used to trap the victim in continued criminality.

Possible indicators of County line involvement (in addition to some of the indicator mentioned for CSE and CCE) include¹⁸:

- Victim is missing from home and subsequently found in area away from home or in accommodation to which they have no connection
- As a victim or perpetrator of serious violence (e.g. knife crime)
- In possession of more than one phone and receiving multiple calls requesting movement of drugs or money

Child-on-child/ child on child abuse¹⁹

Children can abuse other children. This is generally referred to as child-on-child abuse, can take many forms and can happen both inside and outside of school and online. Downplaying certain behaviours, for example dismissing sexual harassment as “just banter”, “just having a laugh”, “part of growing up” or “boys being boys” can lead to a culture of unacceptable behaviours, an unsafe environment for children and, in worst case scenarios, a culture that normalises abuse leading to children accepting it as normal and not coming forward to report it.

Child on Child abuse is most likely to include, but may not be limited to:

- bullying (including cyberbullying, prejudice-based and discriminatory bullying)
- abuse in intimate personal relationships between peers
- physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm (this may include an online element which facilitates, threatens and/or encourages physical abuse)
- initiation/hazing type violence and rituals (this could include activities involving harassment, abuse or humiliation used as a way of initiating a person into a group and may also include an online element).
- **sexual violence** such as rape, assault by penetration; sexual assault (this may include an online element which facilitates, threatens and/or encourages sexual violence); causing someone to engage in sexual activity without consent, such as forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party
- **sexual harassment** such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse. Sexual harassment is likely to violate a child’s dignity, make them feel intimidated, degraded or humiliated.
 - deliberately brushing against or interfering with someone’s clothes (this may cross into sexual violence)
 - displaying pictures, photos or drawings of a sexual nature
 - consensual and non-consensual sharing of nudes and semi-nude images and/or videos (also known as sexting or youth produced sexual imagery)
 - **upskirting**, which typically involves taking a picture under a person’s clothing without their permission, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm

Information regarding the definitions and signs of further safeguarding issues, including homelessness, modern slavery, cybercrime, children with family members in prison and children and the court system, etc. can be found in [KCSIE 2023](#) Annex B

¹⁸ Other indicators found in [KCSIE 2023](#) Annex B

¹⁹ Further information in [KCSIE 2023](#) Part 5

Note: Children’s sexual behaviour exists on a wide continuum, ranging from normal and developmentally expected to inappropriate, problematic, abusive and violent. Problematic, abusive and violent sexual behaviour is developmentally inappropriate and may cause developmental damage. This is referred to as “harmful sexual behaviour” (HSB) and can occur online and/or face-to-face and can also occur simultaneously

Appendix 2 Statutory Guidance, Legislation and Advice:

Statutory Guidance, legislation and advice includes:

- [The Children Act 1989 and 2004 amendment](#)
- [The Education Act 2002 \(section 175\)](#)
- [The Education \(Pupil Information\) \(England\) Regulations 2005](#)
- [Keeping Children Safe in Education 2023](#)
- [Dealing with Allegations of Abuse Against Teachers and Other Staff](#)
- [Working Together to Safeguard Children \(2018\)](#)
- [Sexual violence and sexual harassment between children in schools and colleges 2021](#)
- [Searching, screening and confiscation \(July 2022\)](#)
- [What to do if you're worried a child is being abused \(March 2015\)](#)
- [Information sharing advice for practitioners providing safeguarding services to children, young people, parents and carers \(July 2018\)](#)
- [Domestic Abuse Act 2021](#) updated July 22
- [Designated teacher for looked-after and previously looked-after children \(February 2018\)](#)
- [UKCCIS Guidance: Sexting in schools and colleges, responding to incidents, and safeguarding young people \(2017\)](#)
- [Greenwich Safeguarding Children Partnership.](#)
- [Children Missing Education, September 2016](#)
- [Relationships Education, Relationships and Sex Education \(RSE\) and Health Education, April 2019](#)
- [NSPCC](#)
- [The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children
- [Childcare \(Disqualification\) and Childcare \(Early Years Provision Free of Charge\) \(Extended Entitlement\) \(Amendment\) Regulations 2018](#)
- [The Equality Act 2010](#)
- [The Public Sector Equality Duty \(PSED\)](#)
- [Statutory guidance on the Prevent duty](#)

Other useful documents include:

[Inspecting Safeguarding in Early years Education and Skills](#)

[RBG Interagency referral form](#)

Appendix 3: Records and Referral

A. Record Keeping and Referral Guidance - The School must:

- Keep clear records based on observation and evidence, which separate fact, allegation, hearsay, opinion or unsubstantiated evidence and which clearly indicate decisions and actions taken
- Keep Child Protection information in separate files (these may be electronic) by the designated teacher and will only be discussed with staff on a need-to-know basis. Staff need to know when a child is at risk and what plan has been decided by case conference, but may not need to know all the confidential details.
- Ensure all records, notes and observations made by class staff as part of ongoing monitoring of children on the child protection register or causing concern, are kept securely/scanned and uploaded to electronic system by the DSL. All documents must be dated and the person completing the form named.
- Ensure all child protection conference minutes are stored in the confidential files kept by the Designated Safeguarding Lead.

B. Recording Concerns - Initial concerns, incidents or disclosure by a child must be reported to the DSL. Staff understand that some children may not feel confident in reporting concerns or may not have the language in which to do so. Staff need to create a safe space for the child to speak (this especially true for LGBT, EAL and SEND children who wish to share concerns)

A copy of a body map in Appendix 5 should be used to record injuries/marks/bruises.

The following information must be recorded:

- time, date, place and people who were present
- exact details of what was said the by the child and/or others (no interpretation or opinion)
- the child's emotional or physical condition
- details of the behaviour(s) causing concern and the context in which it occurred

Details of injuries, marks or bruises - provide detail including number, length of marks, description of marks, colour of marks/bruises etc. Staff to record other relevant details - including information about previous incidents which may not have been reported but now seem relevant.

The DSL or staff as directed should continue to monitor for concerns and maintain a chronology of concern.

C. Recording a disclosure – the adult should:

- Find time and, if necessary, a suitable place to listen to the child, when information about possible abuse comes to light
- Listen to what is being said without displaying shock or disbelief
- Do not make false promises which may not be able to be fulfilled and do not promise confidentiality
- Allow the child to talk freely. Do not cross examine, interview, probe or ask to see any injury that is not visible. Listen, only asking questions when necessary to clarify. Ask open questions such as "Tell me," and "How did that happen?"
- Do not ask leading questions but, if necessary, the member of staff **can** ask the question: 'have you been harmed' and 'how'?
- Not criticise the alleged perpetrator
- Reassure the child that what has happened is not his or her fault
- Stress that it was the right thing to tell
- Explain what has to be done next and who has to be told
- Find out just enough to be sure of the need to refer

- Make records that are factual, accurate and relevant and avoid subjective judgements. It is not the school's responsibility to 'check out' what any child tells, nor should any abuser be questioned.
- Sign and date the record of disclosure
- Speak with the Designated Safeguarding Lead for Child Protection, and provide him/her with the signed, dated written record, using the agreed school procedures, without delay.

D. Referrals (see also flow chart)

The DSL must keep detailed, contemporaneous notes of:

- discussions with staff
- discussions with the child
- discussion with parents
- information provided to social services
- decisions taken (with times, dates and signed)

The designated teacher will confirm verbal and telephone referrals to social services in writing within 48 hours of the referral.

Reports for Child Protection Conferences/Core Group Meetings

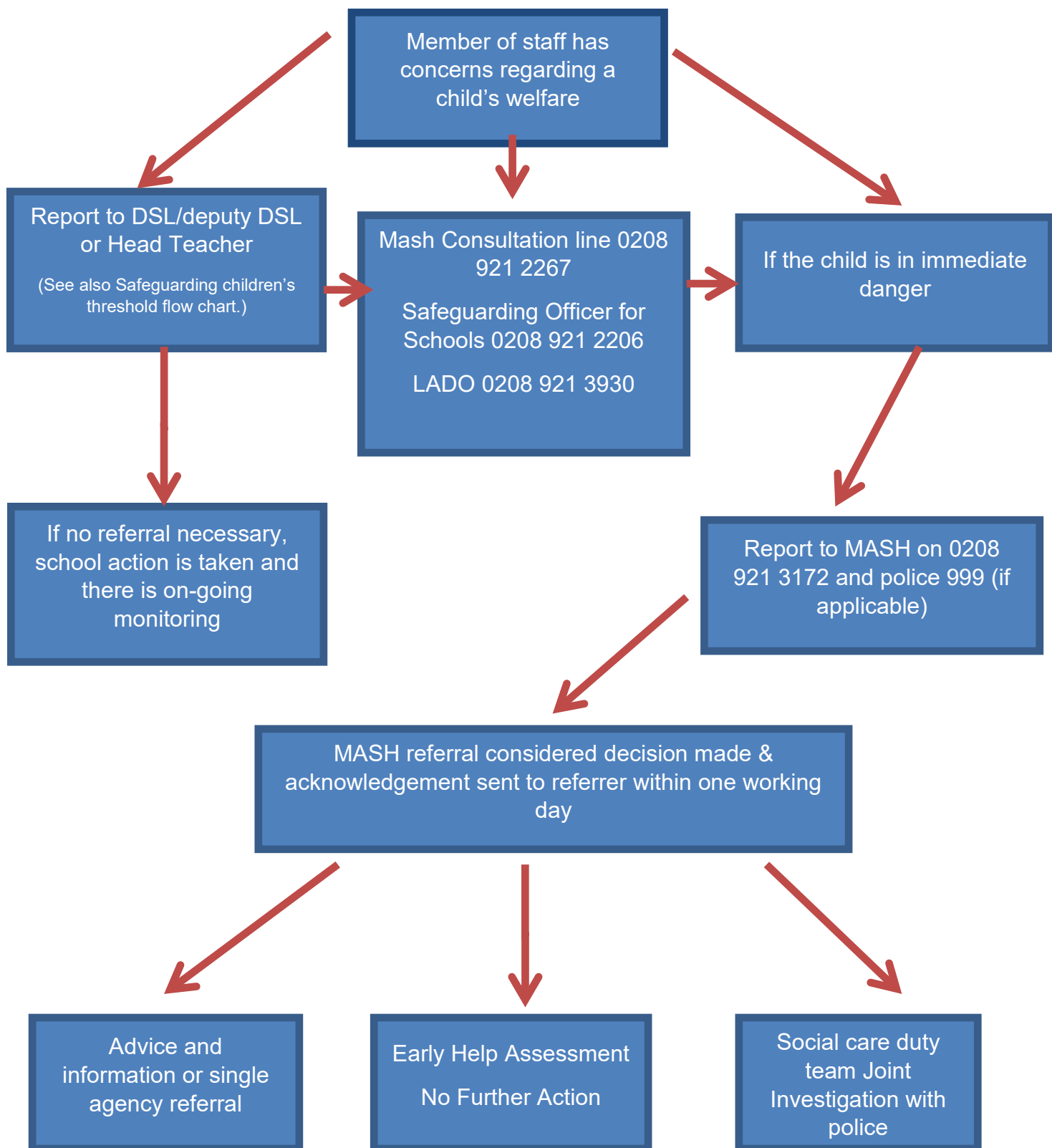
Reports for child protection conferences must be written on the agreed pro-forma. They should focus on the child's educational progress and achievements, attendance, behaviour, participation, relationships with other children and staff and, where appropriate, their appearance and concerns.

They should provide clear factual information. Staff should be aware that these reports will be made available to parents at the child protection conference.

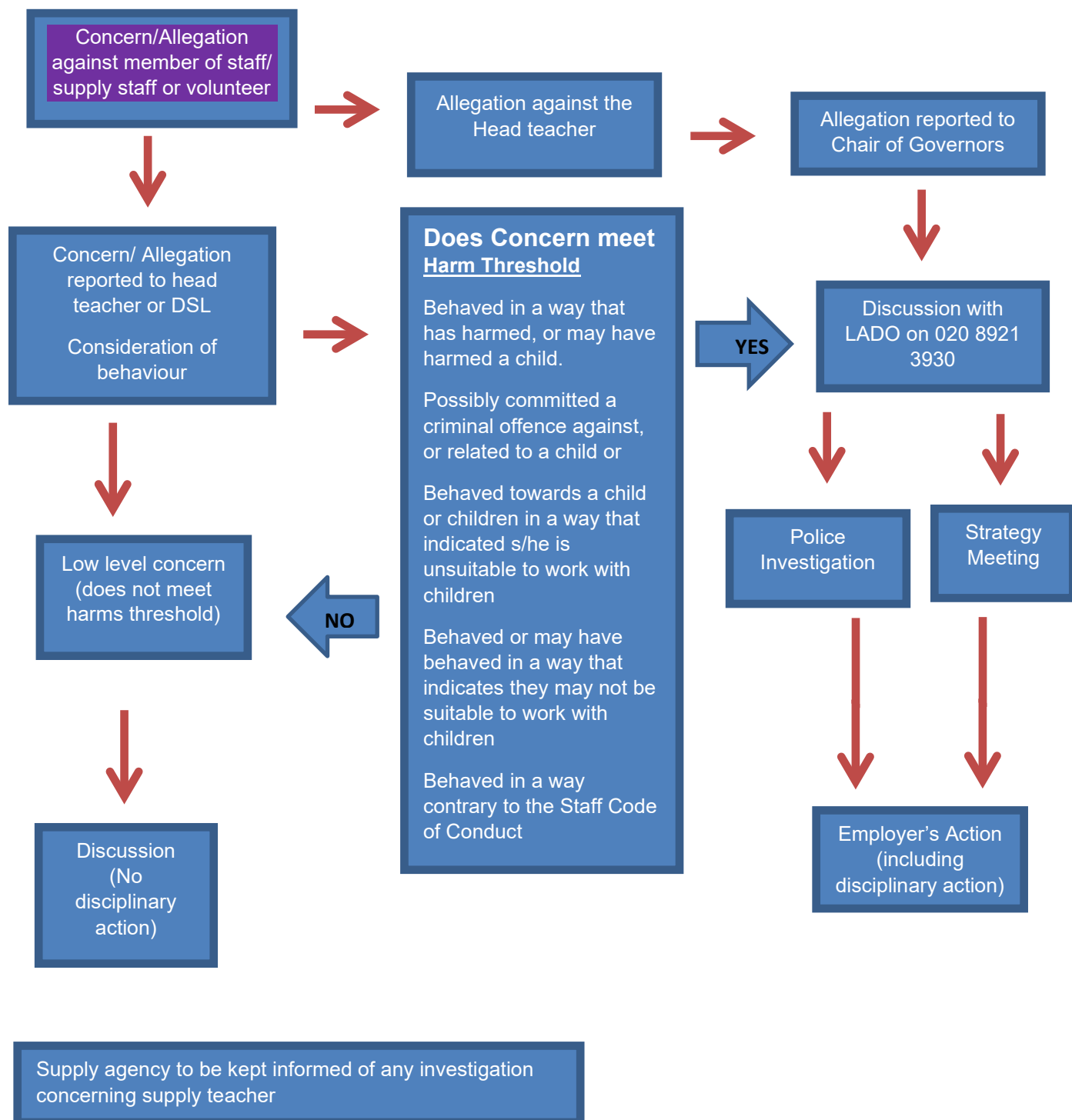
If appropriate, the DSL should consider discussing the content of the report with the parent/carer in advance of any CP conference to help maintain a trusting and effective partnership.

Appendix 3 continued: Reporting concerns about a child

Flow Chart for Reporting Concerns



Appendix 4: Managing and Reporting Concerns or Allegations Against School Staff, Supply Staff, Volunteers and Contractors



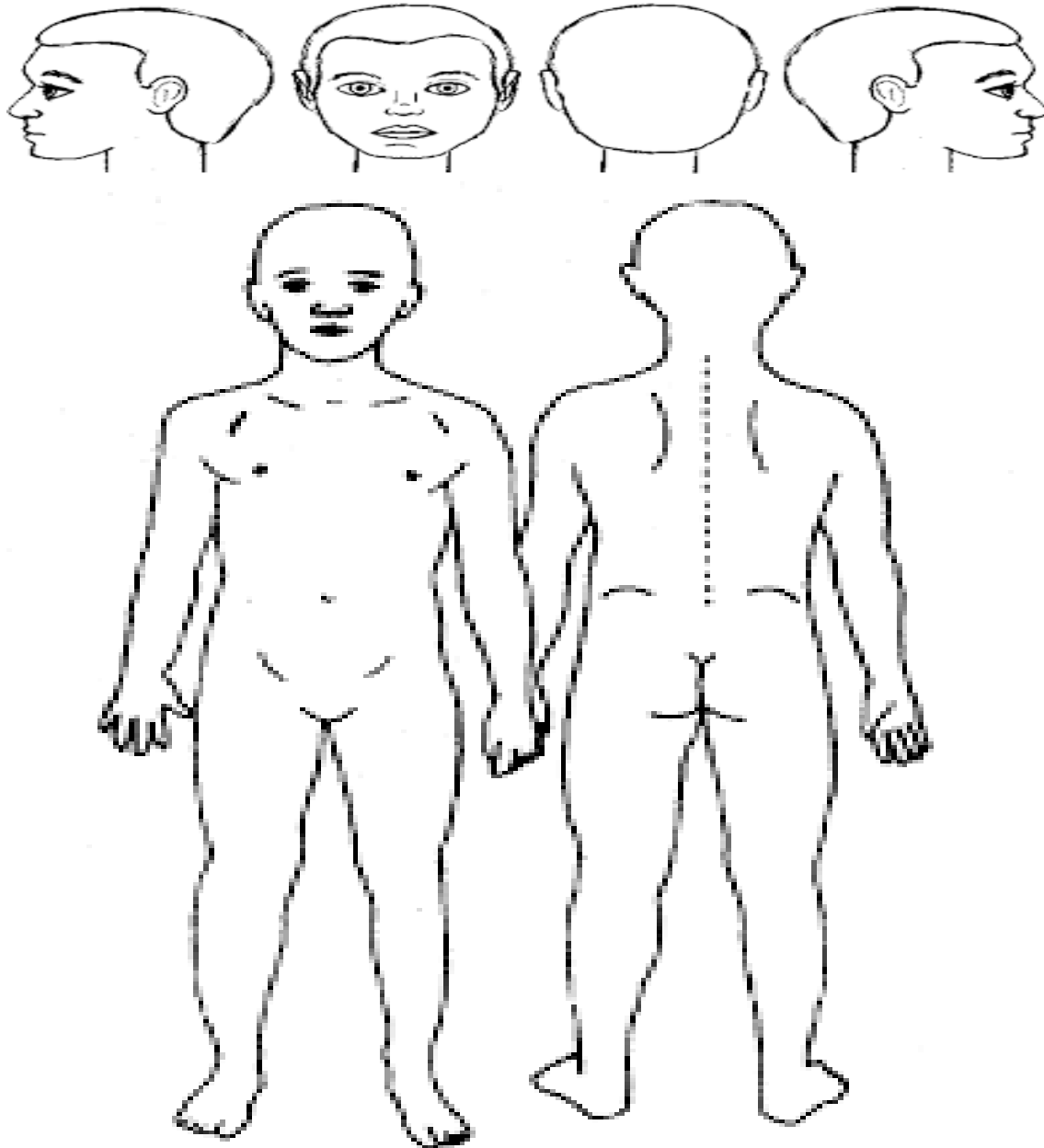
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Body Chart

Once completed attach this body chart to the Concern Form

This chart must be used together with the Concern Form Show clearly the location of your concern and label with a number and a brief description, e.g. '1. Burn about 4cm.' On the Concern Form refer to the injury using the same number and description.

Child's Name -----



Observations made by----- Signed-----Date

HEALTH	
Level 3	Level 4
There is no evidence that the child has accessed health and health advice services and suffers chronic and recurrent health problems as a result. Diagnosed with a life-limiting illness.	The child has complex health problems which are attributable to the lack of access to health services. Carer denying professional staff access to the child.
With additional support, parent not meeting needs of child's health. Carer displays high levels of anxiety regarding child's health.	Carers' level of anxiety regarding their child's health is significantly harming the child's development. Strong suspicions / evidence of fabricating or inducing illness in their child.

Needs of the carer / other family members significantly affect the care of child.	
The carer is not accessing ante- natal and/ or post-natal care, significant concern about prospective parenting ability, resulting in the need for a pre- birth assessment.	The carer neglects to access ante-natal care and there are accumulative risk indicators.
The parent is suffering from post-natal depression. Infant / child appears to have poor growth - Growth falling 2 centile ranges or more, without an apparent health problem. Newborn affected by maternal substance misuse.	The carer is suffering from severe post-natal depression which is causing serious risk to themselves and their child/ children.
LAC or Care Leaver or vulnerable young person who is pregnant.	Pregnancy in a child under 13 or parent with significant learning needs. Young inexperienced parents with additional concerns that could place the unborn child at risk of significant harm.

MENTAL/EMOTIONAL HEALTH	
Level 3	Level 4
Carers inability to engage emotionally with child leads to developmental milestones not met. Family environment is volatile and unstable resulting in a negative impact on the child, leading to possible vulnerabilities and exploitative relationships, parent/ carer unable to judge dangerous situations / set appropriate boundaries. Allegations parents making verbal threats to children. Child rarely comforted when distressed / under significant pressure to achieve / aspire.	Relationships between the child and carer have broken down to the extent that the child is at risk of significant harm / frequently exposed to dangerous situations and development significantly impaired. Child has suffered long term neglect due to lack of emotional support from parents.
The child has a mental health condition which significantly affects their everyday functioning and requires specialist intervention in the community. Parent is not presenting child for treatment increasing risk of mental health deterioration problems as a result No evidence child has accessed mental health advice services and suffers recurrent mental health problems as a result. Child is known to be accessing harmful social media sites to facilitate self-harming. Child self- harms causing minor injury and parent responds appropriately. Child has expressed suicidal ideation with no known plan of intent. Child is under the care of hospital engaging with mental health services.	Child expressed suicidal ideation with intent or psychotic episode or other significant mental health symptoms. Refuses medical care or is in hospital following episode of self-harm or suicide attempt or significant mental health issues. Carer unable to manage child's behaviours related to their mental health increasing the risk of the child suffering significant harm. Child or young person has ongoing suicidal ideation following attempt or is in hospital following episode of self-harm or suicide attempt.
Child has a negative sense of self and abilities, suffering with low self-esteem and confidence which results in child becoming involved in negative behaviour / activities by those exploiting / grooming them.	Evidence of exploitation linked to child's vulnerability. Child frequently exhibits negative behaviour / activities that place self or others at imminent risk.
Mental health needs of the carer (subject to a section under MHA) is impacting on the care of their child and there are no supportive networks and extended family to prevent harm. Carer has expressed suicidal ideation with no known plan of intent.	Mental health needs of the carer significantly impacting the care of their child placing them at risk of significant harm. Carer has ongoing suicidal ideation following attempt or is in hospital following episode of self-harm or suicide attempt.
Child has suffered bereavement recently or in the past and recent there has been a deterioration in their behaviour. Low level support has not assisted, long term intervention required.	Child has suffered bereavement and is missing, self-harming, disclosing suicidal thoughts, risk of exploitation, involvement in gang/criminal activity.
Some concern about the private fostering arrangements in place for the child, there may be issues around the carers' treatment of the child. The local authority hasn't been notified of the private fostering arrangement.	There is concern that the child is a victim of exploitation, domestic slavery, or being physically abused in their private foster placement

EDUCATION	
Level 3	Level 4
Child's attendance is varied with missing absences and exclusions. Recurring issues raised about child's home education. Inappropriate behaviour from carer/school has not been managed.	Child's achievement is seriously impacted by lack of education. Regular breakdown of school placements. Lack of trust in education system (young person or parents/carers). Repeated concerns about school's management of behaviour
Some developmental milestones are not being met which will require support of targeted/specialist services	Developmental milestones are significantly delayed or impaired causing concerns regarding ongoing neglect. (not in the case of those with a disability)
The child's ability to understand and organise information and solve problems is very significantly impaired and the child is seriously under-achieving or is making no academic progress despite learning support strategies over a period of time.	The child's inability to understand and organise information and solve problems is adversely impacting on all areas of his/her development creating risk of significant harm, concerns of carer neglect.

The carer does not engage with the school and actively resists suggestions of supportive interventions.	The carer actively discourages or prevents the child from learning or engaging with the school
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ABUSE AND NEGLECT	
Level 3	Level 4
Carer frequently neglects/is unable to protect their family from danger/significant harm. Parents or carers persistently avoid contact / do not engage with childcare professionals.	Carer is unable to protect their child from harm, placing their child at significant risk. Allegations of harm by a person in a position of trust.
Child consistently shows physical symptoms which clearly indicate neglect.	Child shows physical signs of neglect which are attributable to the care provided by their carers.
Child has injuries which are accounted for but are more frequent than would be expected for a child of a similar age/needs. Carer does not know how injuries occurred or explanation unclear.	Any allegations of abuse or neglect or any injury suspected to be non-accidental injury to a child. Repeated allegations or reasonable suspicion of non-accidental injury. Any allegation of abuse/suspicious injury in a pre-mobile or non-mobile child. Child has injuries more frequently which are not accounted and the child makes disclosure and implicates parents or older family members.
Carer uses physical assault (injuries) as discipline but is willing to access professional support to help them manage the child's behaviour.	Carer uses an implement causing significant physical harm to a child
Family is experiencing a crisis likely to result in the breakdown of care arrangements - no longer want to care for child	Family have rejected / abandoned / evicted child. Child has no available parent and the child is vulnerable to significant harm. Child not living with a family member
High level of self-sufficiency is observed in a child/young person that is not proportionate to a child/young person's age and stage of development.	Inappropriate, high level of self-sufficiency for child/young person's age and stage of development resulting in neglect.
Suspicion child has suffered or is at risk of fabricated or induced illness.	Medical confirmation that a child has suffered significant harm due to fabricated or induced illness.
SEXUAL ABUSE / ACTIVITY	
Level 3	Level 4
Allegation of non-recent sexual abuse but no longer in contact with perpetrator.	Concerns re possible inappropriate sexual behaviour from carer / carer sexually abuses their child. Offender who has risk to children status is in contact with Family. Child who lives in a household into which a registered sex offender or convicted violent offender subject to MAPPA moves.
Suspicion of peer on peer sexual activity in a child over 13 years old. Child under 16 is accessing sexual health and contraceptive services.	Suspicion of sexual abuse / sexually activity of a child. Direct allegation of sexual abuse/assault by child and belief that child is in imminent danger and in need of immediate protection.
Send/receive inappropriate sexual material produced by themselves or other young people via digital or social media, considered as peer-on-peer abuse. Evidence of concerning sexual behaviour – accessing violent / exploitative pornography.	Child is exhibiting harmful, sexual behaviour. Early teen pregnancy. Risk taking sexual activity.
Sexually transmitted infections (STI's). Consent issues may be unclear. Verbal or non-contact sexualised behaviour. Historic referrals in regard concerning sexual behaviour.	Multiple / untreated sexually transmitted infections (STI's). Concerning sexual activity (behaviour that is upsetting to others). Allegations of non-penetrative abuse. Harmful sexual behaviour. Child exploited to recruit others into sexual activity. Repeated pregnancy, miscarriages and/or terminations. Increase in severity of concerning sexual behaviour.
POLICE ATTENTION	
Level 3	Level 4
Family member has a criminal record relating to serious or violent crime, known gang involvement, child is involved in anti-social behaviour and may be at risk of gang involvement, early support not having the desired impact. Starting to commit offences/re-offend or be a victim of crime.	Re-occurring / frequent attendances by the police to the family home. Family member within household's criminal activity significantly impacting on the child, child is currently involved in persistent or serious criminal activity and /or is known to be engaging in gang activities leading to injury caused by a weapon.
Child appears to be actively targeted/coerced with the intention of exploiting the child for criminal gain.	Child habitually entrenched / actively criminally exploited. There is a risk of imminent significant harm to the child as a result of their criminal associations and activities. They may not recognise they are being exploited and/or are in denial about the nature of their abuse.
Arrested for possession of offensive weapon, drugs, multiple thefts / going equipped / motoring offences. Non-compliance of conditions.	Charged or convicted of Aggravated Robbery/Use of offensive weapon/ possession of large quantities of Class A drugs. Intentional harm of others / animals.
Young person regularly stopped and searched indicating vulnerability, exploitation or criminality. Young person arrested as a result of a stop and search.	Young person consistently stopped and searched with risk factors suggested they are being exploited.

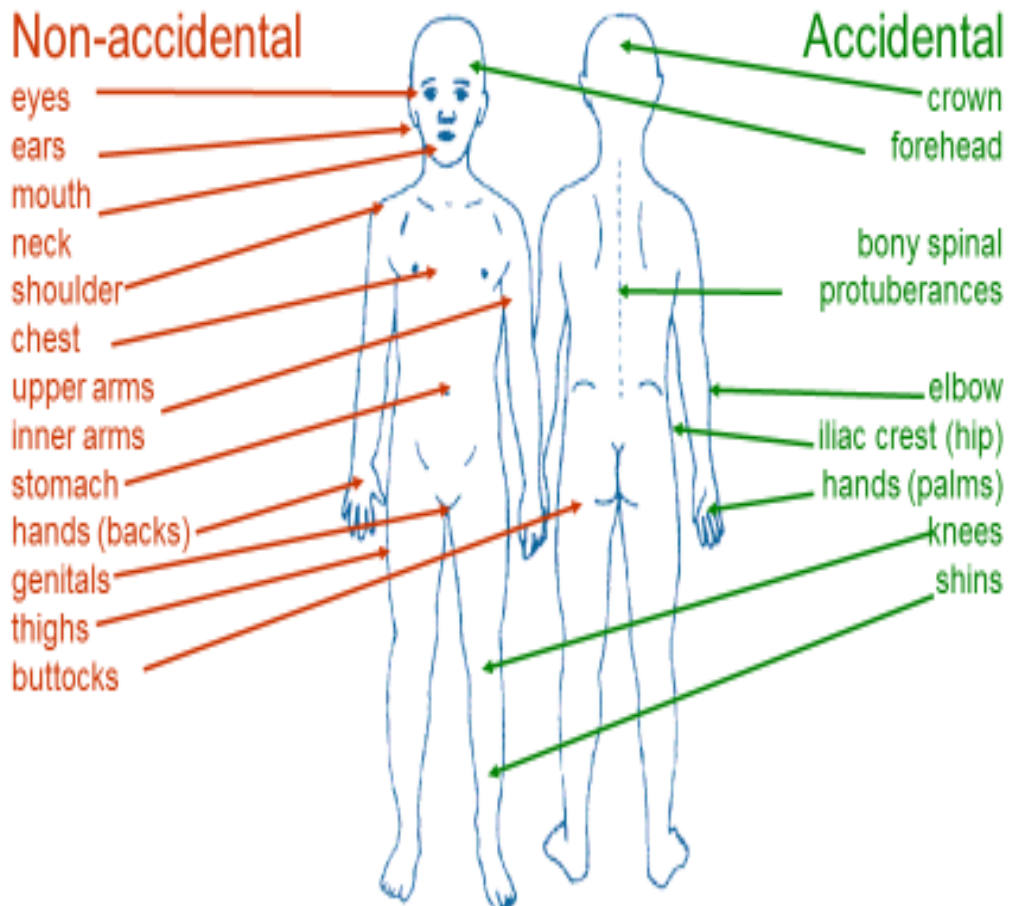
HARMFUL PRACTICES	
Level 3	Level 4
Concern the child may be subject to harmful traditional practices.	Evidence the child may be subject to harmful traditional practices.
There is evidence to indicate the child is at risk of Honour Based Violence.	There is specific evidence to indicate a child has been subjected to Honour Based Violence or the child has reported they have been subjected to Honour Based Violence.
Any female child born/unborn to a mother who has had Female Genital Mutilation and is from a prevalent country, family believe Female Genital Mutilation is integral to cultural or religious identity. Female child talks about a long holiday / confirmed travel to her country of origin or another country where the practice is prevalent. Female child or parent from household where Female Genital Mutilation is known or suspected to have previously been a factor state that they or a relative will go out of the country for a prolonged period with female child.	Reports that female child has had Female Genital Mutilation/ child requests help as suspects she is at risk of Female Genital Mutilation. Upon return from country where practice is prevalent, noticeable changes in child – dress code, excusing from PE, discomfort in walking, frequenting toilet facilities.
There are concerns that a child may be subjected to Forced Marriage.	Evidence child may be subject to forced marriage or has been subjected to Forced Marriage.
Evidence child is exposed to issues of spirit possession or witchcraft.	Disclosure from child about spirit possession or witchcraft, parental view that child is believed to be possessed.
DISABILITY	
Level 3	Level 4
Carers / other family members have disabilities which are affecting the care of the child.	Carers / other family members have disabilities which are severely affecting the care of the child and placing them at risk of significant harm
Parents unable to fully meet the child's needs due disability needs, requiring significant support under CIN Plan.	Carers Child's disability needs not being met - neglectful
EXTREMISM AND RADICALISATION	
Level 3	Level 4
The child expresses sympathy for ideologies closely linked to violent extremism but is open to other views or loses interest quickly. Child and family have indirect links to proscribed organisations.	The child expresses beliefs that extreme violence should be used against people who disrespect their beliefs and values. The child supports people travelling to conflict zones for extremist/ violent purposes or with intent to join terrorist groups The child expresses a generalised non- specific intent to go themselves. Child, family and friends have strong links / are members of proscribed organisations.
A child is known to live with an adult or older child who has extreme views. Child may inadvertently view extremist imagery.	A child is sent extreme imagery / taken to demonstrations or marches where violent, extremist and/or age inappropriate imagery or language is used. The child/carers/ close family members / friends are members of proscribed organisations, promoting the actions of violent extremists and/or saying that they will carry out violence in support of extremist views including child circulating violent extremist images.
Child is known to have viewed extremist websites and has said s/he shares some of those views but is open about this and can discuss the pros and cons or different viewpoints.	Child is known to have viewed extremist websites and is actively concealing internet and social media activities. They either refuse to discuss their views or make clear their support for extremist views. Significant concerns that the child is being groomed for involvement in extremist activities.
Child is refusing to co-operate with activities at school that challenge their religious or political views, they are aggressive and intimidating to others who do not share their religious or political views.	Child expresses strongly held beliefs that people should be killed because they have a different view. Child is initiating verbal and sometimes physical conflict with people who do not share their religious or political views.
Concerns child has connections to individuals or groups known to have extreme views and they are being educated to hold intolerant, extremist views	Child has strong links and involved in activities and being educated by those with individuals or groups who are known to have extreme views / links to violent extremism.
YOUNG CARER	
Level 3	Level 4
Child is regularly caring for another family member resulting in their development and opportunities being adversely impacted by their caring responsibilities.	Child's outcomes are being adversely impacted by their unsupported caring responsibilities.

DRUG / SUBSTANCE MISUSE	
Level 3	Level 4
The child's substance misuse dependency is affecting their mental and physical health and social wellbeing - Child presents at hospital due to substance / alcohol misuse. Carer indifferent to underage smoking / alcohol / drugs etc	The child's substance misuse dependency is putting the child at such risk that intensive specialist resources are required
Drug/alcohol use has escalated to the point where the child is worrying about their carer/family member.	Carer/other family members drug and/or alcohol use is at a problematic level and are unable to provide care to child.
Previous concerns of drug involvement / drug supply and child or household member found in possession of Class A or Class B drugs / drug paraphernalia found in home.	Family home is used for drug taking / dealing / illegal activities.
Evidence of substance/drug misuse during pregnancy – pre 21 weeks gestation.	Evidence of substance/drug misuse during pregnancy – post 21 weeks gestation.
DOMESTIC ABUSE	
Level 3	Level 4
Expectant mother or parent has previously been a victim of domestic abuse and is a victim of occasional or low-level non- physical abuse	Expectant mother or parent is a victim of domestic abuse which has taken place on a number of occasions
Children suffering emotional harm when witnessing physical / emotional abuse / economic control / coercive and controlling behaviour within the family. Perpetrator/s show limited or no commitment to changing their behaviour and little or no understanding of the impact their behaviour has on the child.	Evidence suggesting child is directly subjected to verbal abuse, derogatory titles, threatening and/or coercive adult behaviours. Child suffering emotional harm and possibly physical harm when witnessing / involved with physical / emotional abuse / economic control / coercive and controlling behaviour within the family especially if they are trying to protect the adult victim. Frequency of incidents increasing in severity / duration
Confirmation previous domestic abuse perpetrator residing at property. Carer minimises presence of domestic abuse in the household contrary to evidence of its existence.	Serious threat to parent's life or to child by violent partner. Child injured in domestic violence incident. Child traumatised or neglected due to a serious incident of DV or child is unborn.
DOMESTIC ABUSE	
Level 3	Level 4
Expectant mother or parent has previously been a victim of domestic abuse and is a victim of occasional or low-level non- physical abuse	Expectant mother or parent is a victim of domestic abuse which has taken place on a number of occasions
Children suffering emotional harm when witnessing physical / emotional abuse / economic control / coercive and controlling behaviour within the family. Perpetrator/s show limited or no commitment to changing their behaviour and little or no understanding of the impact their behaviour has on the child.	Evidence suggesting child is directly subjected to verbal abuse, derogatory titles, threatening and/or coercive adult behaviours. Child suffering emotional harm and possibly physical harm when witnessing / involved with physical / emotional abuse / economic control / coercive and controlling behaviour within the family especially if they are trying to protect the adult victim. Frequency of incidents increasing in severity / duration
Confirmation previous domestic abuse perpetrator residing at property. Carer minimises presence of domestic abuse in the household contrary to evidence of its existence.	Serious threat to parent's life or to child by violent partner. Child injured in domestic violence incident. Child traumatised or neglected due to a serious incident of DV or child is unborn.
SOCIAL DEVELOPMENT	
Level 3	Level 4
Child is isolated and refuses to participate in social activities, interacting negatively with others including aggressive, bullying or destructive behaviours, early support has been refused, or been inadequate to manage this behaviour. Child has experienced persistent or severe bullying which has impacted on his/her daily outcomes. Child has significant communication difficulties.	Child is completely isolated, refusing to participate in any activities, positive interaction with others is severely limited due to displays of aggressive, bullying or destructive behaviours impacting on their wellbeing or safety. Child has experienced such persistent or severe bullying that his/her wellbeing is at risk. Child has little or no communication skills
There is a weak or negative family network. There is destructive or unhelpful involvement from the extended family. Child has multiple carers; may have no significant or positive relationship with any of them/child has no other positive relationships.	The family network has broken down or is highly volatile and is causing serious adverse impact to the child

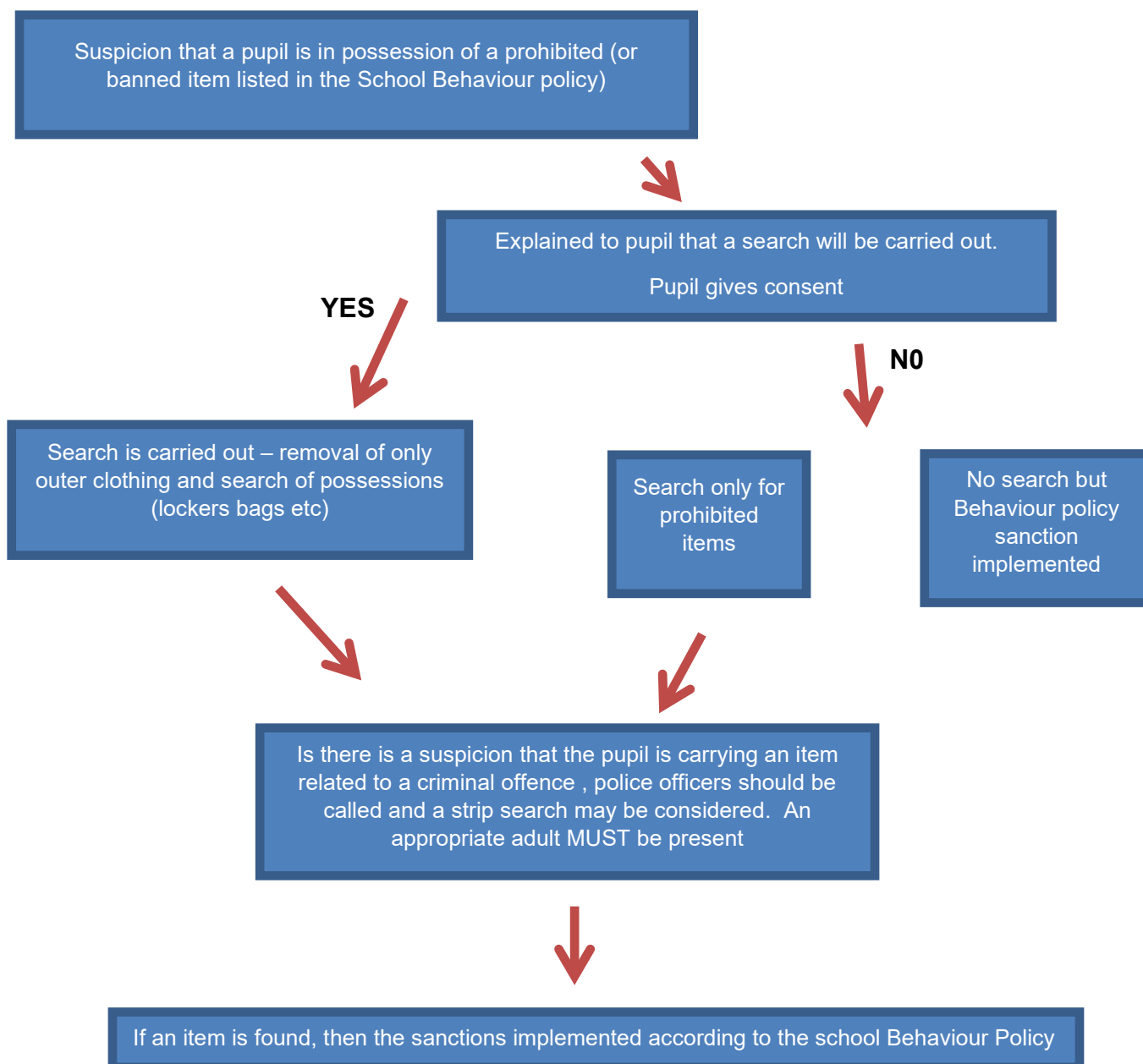
Child is engaged in or victim of negative and harmful behaviours associated with internet and social media use or is obsessively involved in gaming which interferes with social functioning. Evidence of sexual material being shared without consent. Multiple SIMs or phones.	Child is showing signs of being secretive, deceptive and is actively concealing internet and social media activities. Regularly coerced to send / receive indecent images. Coerced to meet in person for sexual activity. Devices need to be removed and access restricted at all times
The family is socially excluded and isolated to the extent that it has an adverse impact on the child	The family is excluded and the child is seriously affected but the family actively resists all attempts to achieve inclusion and isolates the child from sources of support.
The neighbourhood or locality is having a negative impact on the child resulting in the child coming to notice of the police on a regular basis both as a suspect and a victim, concerns by others re exploitation.	The neighbourhood or locality is having a profoundly negative impact on the child resulting in the child coming to notice of the police on a regular basis both as a suspect and a victim, concerns by others re high risk of exploitation, being groomed and any other criminal activity.
Child and family's legal status puts them at risk of involuntary removal from the country / having limited financial resources/no recourse to public funds increases the vulnerability of the children to criminal activity.	Evidence a child has been exposed or involved in criminal activity to generate income for the family / family members are being detained and at risk of deportation or the child is an unaccompanied asylum-seeker.
Isolated and refuses to participate in activities. Experiencing bullying or social isolation that may be exacerbated by personal, cultural, sexual identity or education needs. Targeted by groups or individuals due to their vulnerability or perceived reputation.	Negative sense of self and abilities that risk of causing harm. Completely isolated, refusing activities. High levels of social isolation that may be exacerbated by personal, cultural, sexual identity or education needs.
EXTRA FAMILIAL HARM	
Level 3	Level 4
Places / Spaces	
The neighbourhood or locality is having a negative impact on the child. Frequently spending time in locations, including online, where they can be anonymous or at risk of experience harm / violence / exploitation.	Found in areas/properties known for exploitation / violence. Taken to hotel / B&B / property with intention of being harmed or harming others. Area having profoundly negative effect on the child.
Peer Group / External Relationships	
Unknown adults and/or other exploited children/young people associating with the child/young person. Escalation in behaviour of peer group. Accompanied by an adult who is not a legal guardian. Arrested with individuals who at risk of exploitation / violence.	Staying with someone believed to be exploiting them. Person with significant relationship is coercing child / young person to meet and child is sexually or physically abused. Found with adults / high risk individuals out of borough. Is being exploited to 'recruit' others.
Professional Engagement	
Services previously involved and closed; new referral received for similar concerns. Despite attempts, professionals have been unable to engage the young person to date. Several services involved but little change.	History of multiple services / referrals with little change or escalation in risk. Services report unable to keep child / young person safe.
Missing	
Child persistently runs away and/or goes missing, serious concerns about their activity whilst away. Parent does not report them missing. Unable to give explanations for whereabouts.	Child persistently runs away and/or goes missing and does not recognise that he/she is putting him/herself at risk of exploitation, criminal behaviour etc. Pattern of sofa surfing, whereabouts unknown.

Signs and symptoms of physical injury can be indicators of abuse, however there may be other reasons they are not fail safe mechanisms. Red indicates a possible non-accidental injury. Green is the more usual sites for accidental injuries.

Common Sites



Appendix 6 Searching pupils for prohibited and banned items



Note:

- All searches should be carried out with pupil's permission if possible and should be undertaken by a member of staff who has been authorised to do so by the headteacher.
- The person carrying out the search should be the same sex as the pupil and searches should be witnessed by a second adult member of staff.
- Searches will only require pupils to remove outer clothing (i.e., not worn wholly next to the skin or immediately over underwear).
- Strip searches can only be carried out by police officers. School staff should retain a duty of care/well-being for the pupil involved at all times.
- An appropriate adult must be present e.g., the parent/carer or a staff member (the school should facilitate the parent/carer as an appropriate adult if possible).
- Unless requested otherwise by the pupil, the appropriate adult should be the same sex as the pupil being searched.
- A record of all searches for prohibited items must be made by the DSL and the parents informed.

Guidance:

If there is a suspicion that the pupil is carrying an item related to a criminal offence, call the police. Do not investigate further. Police Officers attending may consider a more thorough search using their powers under the Police and Criminal Evidence Act (PACE). In these circumstances an Appropriate Adult MUST be made available for the pupil and must be present during this procedure.

An Appropriate Adult would not be required if the police are attending the school to support a child (pupil) who has reported a crime or is the victim of a crime. For example, police officers from the Child Abuse Investigation Team (CAIT), or the reporting of a street robbery where the pupil has been the victim of this act.

See the KCSE 22 link [When to call the police. Guidance for Schools and Colleges.](#)

What is the aim of an appropriate adult?

The role of the appropriate adult is to safeguard the interests, rights, entitlements and welfare of children and vulnerable people who are suspected of a criminal offence, by ensuring that they are treated in a fair and just manner and are able to participate effectively.

Here is how the law describes the role:

- "To safeguard the rights, entitlements and welfare of juveniles and vulnerable persons to whom the provisions of this and any other Code of Practice apply". *Police and Criminal Evidence Act 1984 Code C 1.7A*
- "To act as appropriate adults to safeguard the interests of children and young persons detained or questioned by police officers". *Crime and Disorder Act 1998 s.38(4)*

<https://www.appropriateadult.org.uk>

Signature:**Email:**