



*A world of opportunities*

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## **SAFEGUARDING POLICY, PROCEDURE AND GUIDANCE**

Signed	<i>V. Garrett</i>
Role	Chair, Full Governing Body
Date	27 September 2018

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## Contents

Policy Statement	4
Aims	4
Principles and Values	4
AREAS OF SAFEGUARDING	6
Definitions	6
Key Personnel	6
PART 1 – HIGH RISK AND EMERGING SAFEGUARDING ISSUES	7
Contextual Safeguarding	7
Preventing Radicalisation and Extremism	7
Gender Based Violence, Violence Against Women and Girls	8
Female Genital Mutilation (FGM)	8
Forced Marriage	9
Honour Based Violence	10
Sexual Violence and Sexual Harassment Between Children	10
The Trigger Trio	11
Domestic abuse	11
Parental Mental Health	12
Parental Substance Misuse	13
Missing, Exploited and Trafficked Children (MET)	14
Children Missing from Home or Care	15
Child Sexual Exploitation (CSE)	16
Child Criminal Exploitation (including county lines)	17
Trafficked Children	18
Technologies	19
Online Safety/Social Media	19
Cyberbullying	20
Sexting	20
Gaming	21
Online Reputation	21
Grooming	21
PART 2 – SAFEGUARDING ISSUES RELATING TO INDIVIDUAL PUPIL NEEDS	23
Homelessness	23
Children and the Court System	23
Children with family members in prison	23
Children with medical conditions (in school)	24
Children with medical conditions (out of school)	24
Special education needs and disability	24
Intimate and personal care	25
Fabricated or induced illness	27
Mental health	28
PART 3 – OTHER SAFEGUARDING ISSUES IMPACTING ON CHILDREN	29
Bullying	29
Prejudiced based abuse	29
Faith Abuse	30
Private fostering	30

Parenting	30
Gangs and youth violence	31
PART 4 – SAFEGUARDING PROCESSES	32
Safer Recruitment	32
Staff induction	32
Health and Safety	32
Site security	32
Taking and the use and storage of images	32
Disqualification under the Childcare Act	33

# Northwood Primary School Safeguarding Policy

*This policy should be read in conjunction with the school's Child Protection Policy and Safer Worker Agreement.*

## Policy Statement

Safeguarding determines the actions that we take to keep children safe and protect them from harm in all aspects of their school life. As a school, we are committed to safeguarding and promoting the welfare of all our pupils.

The actions that we take to prevent harm; to promote wellbeing; to create safe environments; to educate on rights, respect and responsibilities; to respond to specific issues and vulnerabilities all form part of the safeguarding responsibilities of the school. As such, this overarching policy will link to other policies which will provide more information and greater detail.

## Aims

- To provide Staff with the framework to promote and safeguard the wellbeing of children and in doing so ensure they meet their statutory responsibilities.
- To ensure consistent good practice across the school.
- To demonstrate our commitment to protecting children.

## Principles and Values

Safeguarding is everyone's responsibility. As such it does not rest with the Designated Safeguarding Lead (DSL) or Deputy to take the lead responsibility in all the areas covered within this policy.

Some areas, such as Health and Safety are a specialist area of safeguarding and a separate lead for this area is in place in the school.

Safeguarding process are intended to put in place measures that minimise harm to children. There will be situations where gaps or deficiencies in the policies and processes we have in place will be highlighted. In these situations, a review will be carried out to identify learning and inform the policy, practice and culture of the school.

All pupils in our school can talk to any member of staff to share concerns or talk about situations which are giving them worries. The staff will listen to the pupil, take their worries seriously and share the information with the Designated or Deputy Safeguarding Lead.

In addition, we provide pupils with information of who they can talk to outside of school both within the community and with local or national organisations who can provide support or help.

As a school, we review this policy at least annually in line with Department for Education (DfE), Local Safeguarding Childrens Board (LSCB), Isle of Wight Council through its strategic link with Hampshire County Council and any other relevant guidance.

**Date of Approval by Governing Body: 27 September 2018**

## Areas of Safeguarding

Within Keeping Children Safe in Education (2018) and the Ofsted inspection guidance (2016), there are several safeguarding areas directly highlighted or implied with the text.

These areas of safeguarding have been separated into issues emerging or high risk (part 1); those related to the pupils as an individual (part 2); other safeguarding issues affecting pupils (part 3); and those related to the running of the school (part 4).

### **Definitions**

**Safeguarding** is defined in the Children Act 2004 as protecting from maltreatment; preventing impairment of health and development; ensuring that children grow up with the provision of safe and effective care; and work in a way that gives the best life chances and transition of adult hood. Our safeguarding practice applies to every child.

The term **Staff** applies to all those working for or on behalf of the school, full-time or part-time, in either a paid or voluntary capacity. This also includes parents, carers and governors.

**Child** refers to all young people who have not yet reached their 18<sup>th</sup> birthday. overall, this will apply to pupils of our school; however, the policy will extend to visiting children and students from other establishments.

**Parent** refers to birth parents and other adults in a parenting capacity for example adoptive parents, guardians, step-parents and foster carers.

### **Key personnel**

The DSL for the school is Sarah Hussey, the Deputy DSL is Sian Mumford.

## **Part 1 – High Risk and Emerging Safeguarding Issues**

### **Contextual Safeguarding**

In KCSiE 2018 the DfE refer to contextual safeguarding as a specific term that has come out of the research from the University of Bedfordshire. The definition of Contextual Safeguarding is *“an approach to understanding, and responding to, young people’s experiences of significant harm beyond their families. It recognises that the different relationships that young people form in their neighbourhoods, schools and online can feature violence and abuse. Parents and carers have little influence over these contexts, and young people’s experiences of extra-familial abuse can undermine parent-child relationships. Therefore, children’s social care practitioners need to engage with individuals and sectors who do have influence over/within extra-familial contexts, and recognise that assessment of, and intervention with, these spaces are a critical part of safeguarding practices. Contextual Safeguarding, therefore expands the objectives of child protection systems in recognition that young people are vulnerable to abuse in a range of social contexts”*

For us as a school, we will consider the various factors that have an interplay with the life of any pupil about whom we have concerns within the school and the level of influence that these factors have on their ability to be protected and remain free from harm particularly when it comes to child exploitation or criminal activity.

While this term applies to this specific definition, the notion of considering a child within a specific context is also important. What life is like for a child outside the school gates, within the home, within the family and within the community are key considerations when the DSL is looking at concerns.

### **Preventing Radicalisation and Extremism**

The Prevent Duty, requires that all staff are aware of the signs that a child may be vulnerable to radicalisation. The risks will need to be considered for political; environmental; animal rights; or faith based extremism that may lead to a child becoming radicalised. All staff have received prevent Workshop to Raise Awareness of Prevent (WRAP) training/undertaken e-learning/received awareness training in order that they can identify the signs of children being radicalised.

As part of the preventative process resilience to radicalisation will be built through the promotion of fundamental British values through the curriculum.

Any child who is considered vulnerable to radicalisation will be referred by the DSL (or Deputy) to Social Care through the Multi-Agency Safeguarding Hub (MASH). If the police prevent officer considers the information to be indicating a level of risk a 'channel panel' will be convened and the school will attend and support this process.

[Prevent – Government](#)

[Prevent – Isle of Wight LSCB](#)

[Prevent - Police](#)

## **Gender Based Violence, Violence Against Women and Girls**

The Government have a [strategy](#) looking at specific issues that women and girls face. Within the context of this safeguarding policy the following sections are how we respond to violence against girls. Female Genital Mutilation, forced marriage, honour based violence and teenage relationship abuse all fall under this strategy.

### **Female Genital Mutilation (FGM)**

FGM comprises all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. It has no health benefits and harms girls and women in many ways. It involves removing and damaging healthy and normal female genital tissue, and hence interferes with the natural function of girls' and women's bodies.

The age at which girls undergo FGM varies enormously per the community. The procedure may be carried out when the girl is new born, during childhood or adolescence, just before marriage or during the first pregnancy. However, most cases of FGM are thought to take place between the ages of 5 and 8 and therefore girls within that age bracket are at higher risk.

**FGM is illegal in the United Kingdom (UK).** On 31 October 2015, it became mandatory for teachers to report known cases of FGM to the police. 'Known' cases are those where either a girl informs the person that an act FGM – however described – has been carried out on her, or where the person observes physical signs on a girl appearing to show that an act of FGM has been carried out and the person has no reason to believe that the act was, or was part of, a surgical operation within section 1(2)(a) or (b) of the FGM Act. In these situations, the DSL (or Deputy) will be informed and the member of teaching staff has called the police to report suspicion that FGM has happened.

**At no time, will staff examine pupils to confirm.**

For cases where it is believed that a girl may be vulnerable to FGM or there is a concern that she may be about to be genitally mutilated the staff will inform the DSL who will report this as with any other child protection concern.

While FGM has a specific definition, there are other abusive cultural practices which can be considered harmful to women and girls. Breast ironing is one of five UN defined 'forgotten



crimes against women'. It is a practice whereby the breasts of girls typically aged 8-16 are pounded using tools such as spatulas, grinding stones, hot stones and hammers to delay the appearance of puberty. This practice is abusive and should be referred to Children's social care.

## **Forced Marriage**

In the case of children: *'a forced marriage is a marriage in which one or both spouses cannot consent to the marriage and duress is involved. Duress can include physical, psychological, financial, sexual and emotional pressure.'* In developing countries 11% of girls are married before the age 15. One in 3 victims of forced marriage in the UK are under 18. It is important that all members of staff recognise the presenting symptoms, how to respond if there are concerns and where to turn for advice.

Advice and help can be obtained nationally through the Forced Marriage Unit and locally through the local safeguarding team or children's social care. Policies and practices in this school reflect the fact that while all members of staff, including teachers, have important responsibilities about pupils who may be at risk of forced marriage, teachers and school leaders should not undertake roles in this regard that are most appropriately discharged by other children's service professionals such as police officers or social workers.

### **Characteristics that may indicate forced marriage**

While individual cases of forced marriage, and attempted forced marriage, are often very particular, they are likely to share many of common and important characteristics, including:

- An extended absence from school, including truancy;
- A drop-in performance or sudden signs of low motivation;
- Excessive parental restriction and control of movements;
- A history of siblings leaving education to marry early;
- Poor performance, parental control of income and students being only allowed limited career choices;
- Evidence of self-harm, treatment for depression, attempted suicide, social isolation eating disorders or substance abuse; and/or
- Evidence of family disputes/conflict, domestic violence/abuse or running away from home.

On their own, these characteristics may not indicate forced marriage. However, it is important to be satisfied that where these behaviours occur, they are not linked to forced marriage. It is also important to avoid making assumptions about individual pupil's circumstances or act on the basis of stereotyping. For example, an extended holiday may be taken for entirely legitimate reasons and may not necessarily represent a pretext for forced marriage.

## **Honour Based Violence**

Honour Based Violence (HBV) is a violent crime or incident which may have been committed to protect or defend the honour of the family or community.

It is often linked to family or community members who believe someone has brought shame to their family or community by doing something that is not in keeping with their unwritten rule of conduct. For example, HBV might be committed against people who:

- Become involved with a boyfriend or girlfriend from a different culture or religion
- Want to get out of an arranged marriage
- Want to get out of a forced marriage
- Wear clothes or take part in activities that might not be considered traditional within a culture
- Convert to a different faith from the family.

Women and girls are the most common victims of HBV however it can also effect men and boys. Crimes of 'honour' do not always include violence. Crimes committed in the name of 'honour' might include:

- Domestic abuse
- Threats of violence
- Sexual or psychological abuse
- Forced marriage
- Being held against your will or taken somewhere you don't want to go
- Assault

If staff believe that a pupil is at risk from HBV then the DSL will follow the usual safeguarding referral process, however, if a crime has been committed or the pupil is at immediate risk the police will be contacted in the first place. It is important that if HBV is known or suspected that communities and family members are NOT spoken to prior to referral to the police or social care as this could increase the risk to the child.

## **Sexual Violence and Sexual Harassment Between Children**

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

Within our school all staff are made aware of what sexual violence and sexual harassment might look like and what to do if they have a concern or receive a report. Whilst any report of sexual violence or sexual harassment should be taken seriously, staff are aware it is more likely that girls will be the victims of sexual violence and sexual harassment and more likely it will be perpetrated by boys.

As a school we are clear that sexual violence and sexual harassment is not acceptable, will never be tolerated and is not an inevitable part of growing up. It cannot be described as 'banter', 'having a laugh' or 'boys being boys'.

We will also take seriously any sharing of sexual images (photos, pictures or drawings) and videos; sexual jokes, comments or taunting either in person or on social media; or on-line sexual harassment.

Within the child protection policy, there is a clear procedure for how we deal with situations where sexual assaults or behaviour considered criminal between children has taken place.

As a school we will follow the “Sexual violence and sexual harassment between children in schools and colleges” advice provided by the DfE

We will challenge all contact behaviours that have a sexual nature to them such as pushing or rubbing against, grabbing bottoms, breasts or genitals, pinching or flicking bras, lifting skirts or pulling down trousers and impose appropriate levels of disciplinary action, to be clear that these behaviours are not tolerated or acceptable.

### **The Trigger Trio**

The term ‘Trigger Trio’ has been replaced the previous phrase ‘Toxic Trio’ which was used to describe the issues of domestic violence, mental health and substance use which have been identified as common features of families where harm to women and children has occurred. They are viewed as indicators of increased risk of harm to children and young people. In a review of Serious Case Reviews (SCR) undertaken by Ofsted in 2011, they found that in nearly 75% of these cases two or more of the issues were present.

### **Domestic Abuse**

Domestic abuse is any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse between those aged 16 or over who are or have been intimate partners or family members regardless of gender or sexuality. This can encompass, but is not limited to, the following types of abuse:

- Psychological
- Physical
- Sexual
- Financial
- Emotional

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependant by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that used to harm, punish, or frighten their victim.

Research indicates that living within a home where domestic abuse takes place is harmful to children and can have serious impact on their behaviour, wellbeing and understanding of what a normal relationship.

Children witnessing domestic abuse is recognised as 'significant harm' on law. These children may become aggressive; display anti-social behaviours; suffer from depression or anxiety; or fail to reach their educational potential.

Indicators that child is living with domestic abuse include:

- Withdrawn
- Suddenly behaves differently
- Anxious
- Clingy
- Depressed
- Aggressive
- Problems sleeping
- Eating disorders
- Wets the bed
- Soils clothes
- Takes risks
- Misses school
- Changes in eating habits
- Obsessive behaviour
- Nightmares
- Drugs
- Alcohol
- Self-harm
- Thoughts about suicide

These behaviours themselves do not indicate that a child is living with domestic abuse, but should be considered as indicators that this may be the case

If staff believe that a child is living with domestic abuse, this will be reported to the DSL (or Deputy) for referral to be considered to children's social care.

## **Parental Mental Health**

The term 'mental health' is used to cover a wider range of conditions, from eating disorders, mild depression and anxiety to psychotic illnesses such as schizophrenia or bipolar. Parental mental health does not necessarily have an adverse impact on a child's developmental needs, but it is essential to always assess its implications for each child in the family. It is essential that the diagnosis of a parent/carers mental health is not seen as defining the level of risk. Similarly, the absence of a diagnosis does not equate to there being little or no risk

For children, the impact of parental mental health can include:

- The parent/carers need or illnesses taking precedence over the child's needs
- Child's physical and emotional needs neglected.
- A child acting as a young carer for a parent or a sibling
- Child having restricted social and recreational activities
- Child finds it difficult to concentrate, impacting on educational achievement
- A child missing school regularly as they are being kept at home as a companion for a parent/carer
- Adopt a paranoid or suspicious behaviour as they believe their parents delusions
- Witnessing self-harming behaviour and suicide attempts (including attempts that involve the child)
- Obsessional compulsive behaviours involving the child.

If staff become aware of any of the above indicators, or others that suggest a child is suffering due to parental mental health, the information will be shared with the DSL (or Deputy) to consider a referral to children's social care.

### **Parental Substance Misuse**

Substance misuse applies to the misuse of alcohol as well as 'problem drug use', defined by the Advisory Council on the Misuse of Drugs as 'serious negative consequences of a physical, psychological, social and interpersonal, financial or legal for nature of uses and those around them'

Parental substance misuse of drugs or alcohol becomes relevant to child protection when substance misuse and personal circumstances indicate that their parenting capacity is likely to be seriously impaired or that undue caring responsibilities are likely to be falling on a child in the family.

For children, the impact of parental substance misuse can include:

- Inadequate food, heat and clothing for children (family finances used to fund adult's dependency).
- Lack of engagement or interest from parents in their development, education or wellbeing.
- Behavioural difficulties – inappropriate display of sexual and/or aggressive behaviour
- Bullying
- Isolation
- Tiredness or lack of concentration
- Child talking of or bring into school drugs or related paraphernalia
- Injuries or accidents
- Taking on a caring role
- Continued poor academic performance including difficulties completing home work.
- Poor attendance or late arrival.

These behaviours themselves do not indicate that a child's parent is misusing substances, but should be considered as indicators that this may be the case.

If staff believe that a child is living with parental substance misuse, this will be reported to the DSL (or Deputy) for a referral to be considered for children's social care.

### **Missing, Exploited and Trafficked Children (MET)**

The acronym MET is used to identify all children who are missing; believed to be at risk of or being sexually exploited; or who are at risk of or are being trafficked. Given the close links between these issues, there has been a considered response to join all three issues so that cross over of risk is not missed.

#### **Children Missing from Education**

Patterns of children missing education can be an indicator of either abuse or safeguarding risks. A relatively short length of time a child is missing does not reduce risk of harm to that child, and all absence or non-attendance should be considered with other known factors or concerns.

DSLs should consider:

Missing Lessons: Are the patterns in the lessons that are being missed? Is this more than avoidance of a subject or a teacher? Does the child remain on the school site or are they absent from site?

- Is the child being sexually exploited during this time?
- Are they late because of a caring responsibility?
- Have they been directly or indirectly affected by substance misuse
- Are other pupils routinely missing the same lessons, and does this raise other risks or concerns.
- Is the lesson being missed once that would cause bruising or injuries to become visible

Single missing days: Is there a pattern in the day missed? Is it before or after the weekend suggesting the child is away from the area? Are they specific lessons or members of staff on these days? Is the parent informing the school of the absence on the day? Are missing days reported back to parents to confirm their awareness?

- Is the child being sexually exploited during this day
- Do the parents appear to be aware
- Are the pupil's peers making comments or suggestions as to where the pupil is at?

Continuous missing days: Has the school been contacted the parent? Is medical evidence being provided? Are siblings attending school (either our local schools)?

- Did we have any concerns about radicalisation, FGM, forced marriage, HBV or sexual exploitation.
- Have we had any concerns about physical or sexual abuse?

The school will view absence both a safeguarding issue and an educational outcomes issue. The school may take steps that could both result in legal action for attendance, or a referral to children's social care or both.

## **Children Missing from Home or Care**

Children who run away from home or care, provide clear behavioural indication that they are either unhappy or do not feel safe in the place that they are living. Research shows that children run away from conflict or problems at home or school, neglect or abuse, or because children are being groomed by predatory individuals who seek to exploit them. Many run away on numerous occasions.

The association of chief police officers has provided the following definitions and guidance: *'missing person is: anyone whose whereabouts cannot be established and where the circumstances are out of character or the context suggests the person may be the subject of crime or at risk of harm to themselves or another'*

An absent person is: *'a person not at a place where they are expected or required to be.'*

All cases classified as 'missing' by police will receive an active police response – such as deployment of police officers to locate a child. Cases where the child was classified as 'absent' will be recorded by the police and risk assessed regularly but no active response will be deployed. The absent case will be resolved when a young person returns or new information comes to light suggesting that he/she is at risk. In the latter instance, the case is upgraded to 'missing'

Within any case of children who are missing both push and pull factors will need to be considered.

Push factors include:

- Conflict with parents/carers
- Feeling powerless
- Being bullied/abused
- Being unhappy/not being listened to
- The Toxic Trio

Pull factors include:

- Wanting to be with family/friends
- Drugs, money and any exchangeable item
- Peer pressure
- For those who have been trafficked into the United Kingdom as unaccompanied asylum seeking children there will be pressure to contact their trafficker.

As a school, we will inform all parents of children who are absent (unless the parent has informed us)

If the parent is also unaware of their child, and the definition of missing is met, we will either support the parent to/directly contact the police to inform them.

## **Child Sexual Exploitation (CSE)**

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology (Definition and a guide for practitioners, local leaders and decision makers working to protect children from child sexual exploitation, February 2017).

- Exploitation can be isolated (one-on-one) or organised group/criminal activity
- There can be a big age gap between victim and perpetrator, but it can also be peer-on peer
- Boys can be targeted just as easily as girls – this is not gender specific
- Perpetrators can be women and not just men
- Exploitation can be between males and females or between the same genders
- Children with learning difficulties can be particularly vulnerable to exploitation as can children from particular groups, e.g. looked after children, young carers, children who have a history of physical, sexual emotional abuse or neglect or mental health problems; children who use drugs or alcohol, children who go missing from home or school, children involved in crime, children with parents/carers who have mental health problems, learning difficulties/other issues, children who associate with other children involved in exploitation. However, it is important to recognise that any child can be targeted

Indicators a child may be at risk of CSE include:

- Going missing for periods of time or regularly coming home late;
- Regularly missing school or education or not taking part in education
- Appearing with unexplained gifts or new possessions;
- Associating with other young people involved in exploitation;
- Having older boyfriends or girlfriends;
- Suffering from sexually transmitted infections;
- Mood swings or changes in emotional wellbeing;
- Drug and alcohol misuse; and
- Displaying inappropriate sexualised behaviour.

CSE can happen to a child of any age, gender, ability or social status. Often the victim of CSE is not aware that they are being exploited and do not see themselves as a victim.



As a school, we educate all staff in the signs and indicators of sexual exploitation. We use the Sexual Exploitation Risk Assessment Form ([SERAF](#)) and associated guidance to identify pupils who are at risk and the DSL will share this information as appropriate with children's social care.

### **Child Criminal Exploitation (including county lines)**

Child Criminal Exploitation is defined as:- 'where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child or young person under the age of 18 into any criminal activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial or other advantage of the perpetrator or facilitator and/or (c) through violence or threat of violence. The victim may have been criminally exploited even if the activity appears consensual. Child Criminal Exploitation does not always involve physical contact, it can occur through the use of technology'

The exploitation of children and young people for crime is not a new phenomenon as evidenced by Fagan's gang in Charles Dickens book, Oliver Twist. Children under the age of criminal responsibility, or young people who have increased vulnerability due to push: pull factors who are manipulated, coerced or forced into criminal activity provide opportunity for criminals to distance themselves from crime.

A current trend in criminal exploitation of children and young people are 'county lines' which refer to a 'phone line through which drug deals can be made. An order is placed on the number and typically a young person will deliver the drugs to the specified address and collect the money for the deal. These lines are owned and managed by organised crime gangs, often from larger cities, who are expanding their markets into rural areas.

Indicators that a child may be criminally exploited include:

- Increase in Missing episodes – particular key as children can be missing for days and drug run in other Counties
- Having unexplained amounts of money, new high cost items and multiple mobile phones ☑ Increased social media and phone/text use, almost always secretly
- Older males in particular seen to be hanging around and driving
- Having injuries that are unexplained and unwilling to be looked at
- Increase in aggression, violence and fighting
- Carrying weapons – knives, baseball bats, hammers, acid
- Travel receipts that are unexplained
- Significant missing from education and disengaging from previous positive peer groups
- Parent concerns and significant changes in behaviour that affect emotional wellbeing

We will treat any child who may be criminally exploited as a victim in the first instance and refer to children's social care in the first instance. If a referral to the police is also required as crimes have been committed on the school premises, these will also be made.

## Trafficked Children

Human trafficking is defined by the UNHCR in respect of children as a process that is a combination of:

- Movement (including within the UK)
- For the purpose of exploitation.

Any child transported for exploitative reasons is a trafficked victim. There is significant evidence that children are being trafficked internally within the UK and this is regarded as a more common form of trafficking in the UK.

There are several indicators which suggest that a child may have been trafficked into the UK, and may still be controlled by the traffickers or receiving adults. These are as follows:

- Shows signs of physical or sexual abuse, and/or has contracted a sexually transmitted infection or has an unwanted pregnancy
- Has a history with missing links and unexplained money every day
- Works in various locations
- Has limited freedom of movement
- Appears to be missing for periods
- Is known to beg for money
- Is being cared for by adults who are not their parents and the quality of the relationship between the child and their adult carer is not good
- Is one among several unrelated children found at one address
- Has not been registered with or attended a GP practice
- Is excessively afraid of being deported

For those children who are internally trafficked within the UK indicators include:

- Physical symptoms (bruising indicating either physical or sexual assault)
- Prevalence of a sexually transmitted infection or unwanted pregnancy
- Reports from reliable sources suggesting the likelihood of involvement in sexual exploitation or the child has been seen in places associated with sexually exploitations.
- Evidence of drug, alcohol or substance use
- Being in the community in clothing unusual for a child i.e. inappropriate for age, or borrowing clothing from older people
- Relationship with a significantly older partner
- Accounts of social activities, expensive clothes, mobile phones or other possessions with no plausible explanation of the source of the necessary funding
- Persistently missing, staying out overnight or returning late with no plausible explanation
- Returning after having been missing, looking well cared for despite having not been at home
- Having keys to premises other than those known about

- Low self-image, low self-esteem, self-harming behaviour including cutting, overdosing, eating disorder, promiscuity.
- Truancy and/or disengagement with education
- Entering or leaving vehicles driven by unknown adults
- Going missing and being found in areas where the child or young person has no known links
- Possible inappropriate use of the internet and forming on-line relationships, particularly with adults.

These behaviours themselves do not indicate that a child is being trafficked but should be considered as indicators that this may be the case.

Young people being forced to work in restaurants, nail bars, car washes and harvesting fruit, vegetables or other foods have all been slaves 'hiding in plain sight' within the U.K and rescued from slavery. Other forms of slavery such as sex slaves or household slaves are more hidden but have also been rescued within the UK.

If staff believe that a child is being trafficked, this will be reported to the DSL for referral to be considered to children's social care.

## **Technologies**

Technological hardware and software is developing continuously with an increase in functionality of devices that people use. The majority of children use online tools to communicate with others locally, nationally and internationally. Access to the internet and other tools and technology provides an invaluable way of finding, sharing and communicating information. While technology itself is not harmful, it can be used by others to make children vulnerable and to abuse them.

## **Online Safety/Social Media**

With the current speed of on-line change, some parents and carers have only a limited understanding of online risks and issues. Parents may underestimate how often their children come across potentially harmful and inappropriate material on the internet and may be unsure about how to respond. Some of the risks could be:

- Unwanted contact
- Grooming
- Online bullying including sexting
- Digital footprint

The school will therefore seek to provide information and awareness to both pupils and their parents through:

- Acceptable use agreements for children, teachers, parents/carers and governors
- Curriculum activities involving raising awareness around staying safe online
- Information included in letters, newsletters, website
- Parents evenings/sessions

- High profile events/campaigns
- Building awareness around information that is held on relevant websites and or publications.

## **Cyberbullying**

Central to the schools anti-bullying policy should be the principle that *'bullying is always unacceptable'* and that *'all pupils have a right not to be bullied'*.

The school should also recognise that it must take note of bullying perpetrated outside of school which spills over into the school when they are away from site.

Cyberbullying is defined as *'an aggressive, intentional act carried out by a group or individual using electronic forms of contact repeatedly over time against a victim who cannot easily defend themselves.'*

By cyberbullying, we mean bullying by electronic media:

- Bullying by texts or messages or calls on mobile phones
- The use of mobile phone cameras to cause distress, fear or humiliation
- Posting threatening, abusive, defamatory or humiliating material on websites, to include blogs, personal websites and social networking sites
- Using email to message others
- Hijacking/cloning email accounts
- Making threatening, abusive, defamatory or humiliating remarks in online forums.

Cyberbullying may be at a level where it is criminal in character.

It is unlawful to disseminate defamatory information in any media including internet sites. Section 127 of the Communications Act 2003 makes it an offence to send, by public means of a public electronic communications network, a message or other matter that is grossly offensive or one of an indecent, obscene or menacing character.

The Protection from Harassment Act 1997 makes it an offence to knowingly pursue any course of conduct amounting to harassment.

If you become aware of any incidents of cyberbullying, we will need to consider each case individually as to any criminal act that may have been committed. The school will then pass on information to the police if it feels that is appropriate or are required to do so.

## **Sexting**

'Sexting' often refers to the sharing of naked or nude pictures or video through mobile phones and the internet. It also includes underwear shots, sexual poses and explicit text messaging.

While sexting often takes place in consensual relationship between two young people, the use of Sexted images in revenge following a relationship breakdown is becoming more

commonplace. Sexting can also be used as a form of sexual exploitation and take place between strangers.

As the average age of first smartphone or camera enabled tablet is 6 years old. Sexting is an issue that requires awareness raising across all ages.

The school will use age appropriate educational material to raise awareness, to promote safety and deal with pressure. Parents should be aware that they can come to school for advice.

## **Gaming**

Online gaming is an activity that most children and many adults get involved in.

The school will raise awareness:

- By talking to parents and carers about the games their children play and help them identify whether they are appropriate.
- By supporting parents in identifying the most effective way of safeguarding their children by using parental controls and child safety mode.
- By talking to parents about setting boundaries and time limits when games are played.
- By highlighting relevant resources.

## **Online Reputation**

Online reputation is the opinion others get of a person when they encounter them online. It is formed by posts, photos that have been uploaded and comments made by others on people's profiles. It is important that children and staff are aware that anything that is posted could influence their future professional reputation. Many organisations and work establishments now check digital footprint before considering applications for positions or places on courses.

## **Grooming**

Online grooming is the process by which one person with an inappropriate sexual interest in children will approach a child online, with the intention of developing a relationship with that child, to be able to meet them in person and intentionally cause harm.

The school will build awareness amongst children and parents about ensuring that the child:

- Only has friends online that they know in real life
- Is aware that if they communicate with somebody that they have met online, that relationship should stay online.

The parents should:

- Recognise the signs of grooming
- Have regular conversations with their children about online activity and how to stay safe online.

The school will raise awareness by:

- Running sessions for parents
- Include awareness around grooming as part of their curriculum
- Identify with both parents and children how they can be safeguarding against grooming.

## **Part 2 – Safeguarding issues relating to individual pupil needs**

### **Homelessness**

As a school we recognise that being homeless or being at risk of becoming homeless presents a real risk to a child's welfare. The impact of losing a place of safety and security can affect a child's behaviour and attachments.

In line with the Homelessness Reduction Act 2017 this school will promote links into the Local Housing Authority for the parent or care giver in order to raise/progress concerns at the earliest opportunity.

We recognise that whilst referrals and/or discussion with the Local Housing Authority should be progressed as appropriate, this does not, and should not, replace a referral into children's social care where a child has been harmed or is at risk of harm.

### **Children & the Court System**

As a school we recognise that children are sometimes required to give evidence in criminal courts, either for crimes committed against them or for crimes they have witnessed. We know that this can be a stressful experience and therefore the school will aim to support children through this process.

Along with pastoral support, the school will use age-appropriate materials published by HM Courts and Tribunals Services (2017) that explain to children what it means to be a witness, how to give evidence and the help they can access.

We recognise that making child arrangements via the family courts following separation can be stressful and entrench conflict in families. This can be stressful for children. This school will support children going through this process.

Alongside pastoral support this school will use online materials published by The Ministry of Justice (2018) which offers children information & advice on the dispute resolution service.

These materials will also be offered to parents and carers if appropriate.

### **Children with family members in prison**

Children who have a family member in prison are at greater risk of poor outcomes including poverty, stigma, isolation and poor mental health.

This school aims to: - -

- Understand and Respect the Child's Wishes

We will respect the child's wishes about sharing information. If other children become aware the school will be vigilante to potential bullying or harassment

- Keep as Much Contact as Possible with the Parent and Care giver

We will maintain good links with the remaining caregiver in order to foresee and manage any developing problems. Following discussions, we will develop appropriate systems for keeping the imprisoned caregiver updates about their child's education.

- Be Sensitive in Lessons

This school will consider the needs of any child with an imprisoned parent during lesson planning.

- Provide Extra Support

We recognise that having a parent in prison can attach a real stigma to a child, particularly if the crime is known and particularly serious. We will provide support and mentoring to help a child work through their feelings on the issue.

Alongside pastoral care the school will use the resources provided by the National Information Centre on Children of Offender in order to support and mentor children in these circumstances.

### **Pupils with medical conditions (in school)**

There is a separate policy outlining the school's position on this.

As a school we will make sure that sufficient staff are trained to support any pupil with a medical condition. All relevant staff will be made aware of the condition to support the child and be aware of medical needs and risks to the child. An individual healthcare plan may be put in place to support the child and their medical needs.

### **Pupils with medical conditions (out of school)**

There will be occasions when children are temporarily unable to attend our school on a full-time basis because of their medical needs. These children and young people are likely to be:

- children and young people suffering from long-term illnesses
- children and young people with long-term post-operative or post-injury recovery periods
- children and young people with long-term mental health problems (emotionally vulnerable).

Where an absence will be for more than 15 continuous school days the Education and Inclusion branch of Children Services will be contacted to support with the pupil's education.

### **Special educational needs and disabilities**

Children who have special educational needs and/or disabilities can have additional vulnerabilities when recognising abuse and neglect. These can include:

- Assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration



- The potential for children with SEN and disabilities being disproportionately impacted by behaviours such as bullying, without outwardly showing any signs
- Communication barriers and difficulties in overcoming these barriers
- Have fewer outside contacts than other children
- Receive intimate care from a considerable number of carers, which may increase the risk of exposure to abusive behaviour and make it more difficult to set and maintain physical boundaries
- Have an impaired capacity to resist or avoid abuse
- Have communication difficulties that may make it difficult to tell others what is happening
- Be inhibited about complaining for fear of losing services
- Be especially vulnerable to bullying and intimidation
- Be more vulnerable than other children to abuse by their peers.

As a school we will respond to this by:

- Making it common practice to enable disabled children to make their wishes and feelings known in respect of their care and
- Ensuring that disabled children receive appropriate personal, health and social education (including sex education)
- Making sure that all disabled children know how to raise concerns and give them access to a range of adults with whom they can communicate. This could mean using interpreters and facilitators who are skilled in using the child's preferred method of communication
- Recognising and utilising key sources of support including staff in schools, friends and family members where appropriate
- Developing the safe support services that families want, and a culture of openness and joint working with parents and carers on the part of services
- Ensuring that guidance on good practice is in place and being followed in relation to: intimate care; working with children of the opposite sex; managing behaviour that challenges families and services; issues around consent to treatment; anti-bullying and inclusion strategies; sexuality and safe sexual behaviour among young people; monitoring and challenging placement arrangements for young people living away from home.

### **Intimate and personal care**

'Intimate Care' can be defined as care tasks of an intimate nature, associated with bodily functions, bodily products and personal hygiene, which demand direct or indirect contact with, or exposure of, the sexual parts of the body. The Intimate Care tasks specifically identified as relevant include:

- Dressing and undressing (underwear)
- Helping someone use the toilet
- Changing continence pads (faeces/urine)

- Bathing / showering
- Washing intimate parts of the body
- Changing sanitary wear
- Inserting suppositories
- Giving enemas
- Inserting and monitoring pessaries.

‘Personal Care’ involves touching another person, although the nature of this touching is more socially acceptable. These tasks do not invade conventional personal, private or social space to the same extent as Intimate Care. Those Personal Care tasks specifically identified as relevant here include:

- Skin care/applying external medication
- Feeding
- Administering oral medication
- Hair care
- Dressing and undressing (clothing)
- Washing non-intimate body parts
- Prompting to go to the toilet.

Personal Care encompasses those areas of physical and medical care that most people carry out for themselves but which some are unable to do because of disability or medical need. Children and young people may require help with eating, drinking, washing, dressing and toileting.

Where Intimate Care is required we will follow the following principles:

### **1. Involve the child in the intimate care**

Try to encourage a child's independence as far as possible in his or her intimate care. Where a situation renders a child fully dependent, talk about what is going to be done and give choices where possible. Check your practice by asking the child or parent about any preferences while carrying out the intimate care.

### **2. Treat every child with dignity and respect and ensure privacy appropriate to the child's age and situation.**

Staff can administer intimate care alone however we will be aware of the potential ensure adequate supervision primarily to safeguard the child but also to protect the staff member from potential risk.

### **3. Be aware of your own limitations**

Only carry out activities you understand and with which you feel competent. If in doubt, ASK. Some procedures must only be carried out by members of staff who have been formally trained and assessed.

### **4. Promote positive self-esteem and body image**

Confident, self-assured children who feel their body belongs to them are less vulnerable to sexual abuse. The approach you take to intimate care can convey lots of messages to a child about their body worth. Your attitude to a child's intimate care is important. Keeping in mind the child's age, routine care can be both efficient and relaxed.

#### **5. If you have any concerns you must report them.**

If you observe any unusual markings, discolouration or swelling, report it immediately to the designated practitioner for child protection.

If a child is accidentally hurt during the intimate care or misunderstands or misinterprets something, reassure the child, ensure their safety and report the incident immediately to the DSL. Report and record any unusual emotional or behavioural response by the child. A written record of concerns must be made available to parents and kept in the child's child protection record.

#### **6. Helping through communication**

There is careful communication with each child who needs help with intimate care in line with their preferred means of communication (verbal, symbolic, etc.) to discuss the child's needs and preferences. The child is aware of each procedure that is carried out and the reasons for it.

#### **7. Support to achieve the highest level of autonomy**

As a basic principle child will be supported to achieve the highest level of autonomy that is possible given their age and abilities. Staff will encourage each child to do as much for themselves as they can. This may mean, for example, giving the child responsibility for washing themselves. Individual intimate care plans will be drawn up for particular children as appropriate to suit the circumstances of the child. These plans include a full risk assessment to address issues such as moving and handling, personal safety of the child and the carer and health.

### **Fabricated or induced illness**

There are three main ways that a carer could fabricate or induce illness in a child. These are not mutually exclusive and include:

- fabrication of signs and symptoms. This may include fabrication of past medical history
- fabrication of signs and symptoms and falsification of hospital charts and records, and specimens of bodily fluids. This may also include falsification of letters and documents
- induction of illness by a variety of means.

If we are concerned that a child may be suffering from fabricated or induced illness we will inform children's social care.

## **Mental Health**

Form tutors and class teachers see their pupil's day in, day out. They know them well and are well placed to spot changes in behaviour that might indicate an emerging problem with the mental health and emotional wellbeing of pupils. The balance between the risk and protective factors are most likely to be disrupted when difficult events happen in pupils' lives. These include:

- **loss or separation** – resulting from death, parental separation, divorce, hospitalisation, loss of friendships (especially in adolescence), family conflict or breakdown that results in the child having to live elsewhere, being taken into care or adopted
- **life changes** – such as the birth of a sibling, moving house or changing schools or during transition from primary to secondary school, or secondary school to sixth form
- **traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

When concerns are identified, school staff will provide opportunities for the child to talk or receive support within the school environment. Parents will be informed of the concerns and a shared way to support the child will be discussed. Where the needs require additional professional support referrals will be made to the appropriate team or service with the parent's agreement or child's if they are considered to be competent.

## **Part 3 – Other safeguarding issues impacting on children**

### **Bullying**

The school works a separate bullying policy that can be found on the school website.

### **Prejudice based abuse**

Prejudice based abuse or hate crime is any criminal offence which is perceived by the victim or any other person to be motivated by a hostility or prejudice based on a person's real or perceived:

- Disability
- Race
- Religion
- Gender identity
- Sexual orientation

Although this sort of crime is collectively known as 'Hate Crime' the offender doesn't have to go as far as being motivated by 'hate', they only have to exhibit 'hostility'.

This can be evidenced by:

- Threatened or actual physical assaults
- Derogatory name calling, insults, for example racist jokes or homophobic language
- Hate graffiti
- Provocative behaviour e.g. wearing of badges or symbols belonging to known extremist organisations
- Distributing literature that may be offensive in relation to a protected characteristic
- Verbal abuse
- Inciting hatred or bullying against pupils who share a protected characteristic
- Prejudice or hostile comments during discussions within lessons
- Teasing in relation to any protected characteristic
- Refusal to co-operate with others because of their protected characteristic whether real or perceived
- Expressions of prejudice calculated to offend or influence the behaviour of others
- Attempts to recruit other pupils to organisations and groups that sanction violence. Terrorism or hatred.

As a school, we will respond by:

- Clearly identifying prejudice based incidents and hate crimes and monitor the frequency and nature of them within the school
- Taking preventative action to reduce the likelihood of such incidents occurring.
- Recognising the wider implications of such incidents for the school and local community.
- Providing regular reports of these incidents to the Governing Body

- Ensuring that staff are familiar with formal procedures for recording and dealing with prejudice based incidents and hate crimes
- Dealing with perpetrators of prejudice based abuse effectively
- Supporting victims of prejudice based incidents and hate crimes

## **Faith Abuse**

The number of known cases of child abuse linked accusations of 'possession' or 'witchcraft' is small, but children involved can suffer damage to their physical and mental health, their capacity to learn, their ability to form relationships and to their self-esteem.

Such abuse generally occurs when a carer views a child as being 'different', attributes this difference to the child being 'possessed' or involved in 'witchcraft' and attempts to exorcise him or her.

A child could be viewed as 'different' for a variety of reasons such as, disobedience, independence, bed wetting, nightmares, illness or disability. There is often a weak bond of attachment between the carer and the child.

There are various social reasons that make a child more vulnerable to an accusation of 'possession' or 'witchcraft'. These include family stress and/or a change in the family structure.

The attempt to exorcise may involve severe beating, burning, starvation, cutting or stabbing and isolation, and usually occurs in the household where the child lives.

If the school become aware of a child who is being abused on this context, the DSL will follow the normal referral route to children's social care.

## **Private Fostering**

Private fostering is an arrangement by a child's parents for their child (under 16 or 18 of disabled) to be cared for by another adult who is not closely related and is not a legal guardian with parental responsibility for 28 days or more.

It is not private fostering if the carer is a close relative to the child such as grandparent, brother, sister, uncle or aunt.

The Law requires that the carers and parents must notify the children's service department of any private fostering arrangement.

If the school becomes aware that a pupil is being privately fostered, we will inform the children's services department and inform the parents and carers that we have done so.

## **Parenting**

All parents will struggle with the behaviour of their child(ren) at some point. This does not make them poor parents or generate safeguarding concerns. Rather it makes them human and provides them with opportunities to learn and develop new skills and approaches to deal with their child(ren)

Some children have their medical conditions and/or needs e.g. Tourette's, some autistic linked conditions such as ADHD, that have a direct impact on behaviour and can cause challenges for parents in dealing with behaviours. This does not highlight poor parenting either.

Parenting becomes a safeguarding concern when the repeated lack of supervision, boundaries, basic care or medical treatment places the child(ren) in situations of risk or harm.

In situations of poor parenting where parents struggle with tasks such as setting boundaries and providing appropriate supervision, timely interventions can make drastic changes to the wellbeing and life experiences of the child(ren) without the requirement for a social work assessment or plan being in place.

As a school, we will support parents in understanding the parenting role and provide them with strategies to make a difference by:

- Providing details of community based parenting courses
- Discussing the issue with the parent and supporting them in making their own plans
- Considering appropriate Early Help Services.

### **Gangs and Youth Violence**

The vast majority of young people will not be affected by serious violence or gangs. However, where these problems do occur, even at low levels there will almost certainly be a significant impact. As a school we have a duty and a responsibility to protect our pupils. It is also well established that success in learning is one of the most powerful indicators in the prevention of youth crime. Dealing with violence also helps attainment. While pupils generally see educational establishments as safe places, even low levels of youth violence can have a disproportionate impact on any education Primary schools are also increasingly recognised as places where early warning signs that younger children may be at risk of getting involved in gangs can be spotted. Crucial preventive work can be done within school to prevent negative behaviour from escalating and becoming entrenched.

As a school we will:

- develop skills and knowledge to resolve conflict as part of the curriculum
- challenge aggressive behaviour in ways that prevent the recurrence of such behaviour
- understand risks for specific groups, including those that are gender-based, and target interventions
- safeguard, and specifically organise child protection, when needed
- make referrals to appropriate external agencies
- carefully manage individual transitions between educational establishments especially into Pupil Referral Units (PRUs) or alternative provision
- work with local partners to prevent anti-social behaviour or crime

## **Part 4 – Safeguarding Processes**

### **Safer Recruitment**

The school operates a separate safer recruitment process as part of the school's Recruitment Policy. On all recruitment panel, there is at least one member who has undertaken safer recruitment training.

The process checks the identity, criminal record (enhanced DBS), mental and physical capacity, right to work in the UK, professional qualification of the applicants experience and history through references.

### **Staff Induction**

The DSL or Deputy will provide all new staff with training to enable them to both fulfil their role and to understand the Child Protection Policy, Safeguarding Policy, Safer Worker Agreement and part one of Keeping Children Safe in Education.

This induction may be covered within the annual training if this falls at the same time, otherwise it will be carried out separately during the initial starting period.

### **Health and Safety**

The site, the equipment and the activities carried out as part of the curriculum are all required to comply with the Health and Safety at Work Act 1974 and regulations made under the act.

All risks are required to be assessed and recorded plans of how to manage the risk are in place. The plans should always take a common sense and proportionate approach to allow activities to be safe rather than preventing them from taking place. The school has a Health and Safety Policy which details the actions that we take in more detail.

### **Site Security**

We aim to provide a secure site, but recognise that the site is only as secure as the people that use it. Therefore, all people on the site must adhere to the rules which govern it. These are:

- Doors are kept closed to prevent intrusion
- Visitors and volunteers are identified by ID badges issued on sign-in to the school building
- Children are only allowed home during the school day with adults/carers with parental responsibility or permission being given.
- All children leaving or returning during the school day must sign out and in.

### **Taking and the use and storage of images**

As a school, we will seek consent from their parent of a pupil and from teachers and other adults before taking and publishing photographs or videos that contain images that are



sufficiently detailed to identify the individual in school publications, printed media or an electronic publication.

We will not seek consent for photos where you would not be able to identify the individual.

We will seek consent for the period of the pupil remains registered with us and, unless we have specific written permissions we will remove photographs after a child (or teacher) appearing in them leaves the school or if consent is withdrawn.

Photographs will only be taken on school owned equipment and stored on the school network. No images of pupils will be taken or stored on privately owned equipment by staff members.

## **Disqualification under the Childcare Act**

The Childcare Act 2006 was put in place to prevent adults who have been cautioned or convicted of several specific offences from working within childcare.

Staff (meaning individuals employed by the school or local authority, those undertaking training in schools, casual workers and volunteers) are covered by this legislation in the following circumstances:

- They are employed and/or provide early years' childcare (*this covers the age range from birth until the 1 September following a child's fifth birthday*). This includes education in nursery and reception classes (*e.g. teachers and support staff in a reception class*) and/or any supervised activity (*such as breakfast clubs, lunchtime supervision and after school care provided by the school*) both during and outside of school hours for children in the early year's age range; and
- They work in the childcare provided by the school outside of school hours for children who are above reception age but who have not attained the age of 8. This includes before school settings, such as breakfast clubs, after school provision and holiday clubs. It does NOT include education or supervised activity for children above reception age during school hours including extended school hours for co-curricular learning activities, such as the school's choir or sports teams.

The legislation also applies to any staff directly concerned in the line management of such early or later years' provision.

In 2009 additional regulations were made to include those living in the same household as another person who is (or would be) disqualified under the Act.

As a school, we require all staff who may be impacted by this piece of legislation to complete a self-declaration form and to inform the Headteacher immediately if they become aware of any changes to their circumstances that would require us to be aware.

If a member of staff is impacted by the disqualification by associations provisions, we will ask them to apply for a waiver from Ofsted and put in place appropriate risk management plans while the waiver is being processed.

If a waiver is not granted, we will seek advice from our HR provider and/or LADO as to how the risk is most effectively managed.