



<b>Policy Title:</b>	<b>Schools Child Protection Policy and Procedures</b>	
<b>Policy Code:</b>	OPSP09	
<b>Applies to:</b>	All Staff	
<b>Date Reviewed:</b>	August 2024	
<b>Next Update Due:</b>	September 2025	
<b>Policy Lead:</b>	Mary Aurens – Head of Safeguarding	
<b>Policy Sponsor:</b>	Richard Wilkins – Chief Operating Officer	
<b>Cross Reference:</b>	OPSP03	Allegations against staff policy
	OPSP04	Anti-Bullying policy
	OPSP06	Attendance policy
	OPSP07	Behaviour policy
	OPP04	Code of Conduct
	DPP05	Data Protection and BYOD Policy
	SGP03	Low Level Concerns policy
	ITP03	Online Safety
	HRP18	Recruitment and Selection Policy
	OPSG04	School Policy on the Education of Looked After Children
<b>Outcome:</b>	<p>This policy:</p> <ul style="list-style-type: none"> <li>• To ensure that all staff are aware of the school’s child protection procedures</li> <li>• To ensure that all children are safeguarded and protected from harm</li> <li>• To ensure that all referrals where there are concerns about the safety and wellbeing of children are made in a timely and robust manner</li> <li>• To ensure that concerns about children are identified at the earliest opportunity and are acted upon</li> </ul>	
<b>EQUALITY AND DIVERSITY STATEMENT</b>		
Witherslack Group is committed to the fair treatment of all in line with the Equality Act 2010. An equality impact assessment has been completed on this policy to ensure that it can be implemented consistently regardless of any protected characteristics and all will be treated with dignity and respect.		
<b>ENVIRONMENT, SOCIAL, GOVERNANCE (ESG) STATEMENT</b>		
Witherslack Group is committed to responsible business practices in the areas of: Environmental Stewardship, Social Responsibility, Governance, Ethics & Compliance. An ESG impact assessment has been completed on this policy to ensure it can be implemented successfully without adverse implications on our Group goals.		
To ensure that this policy is relevant and up to date, comments and suggestions for additions or amendments are sought from users of this document. To contribute towards the process of review, please email the named policy lead.		

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## 1. PART ONE: POLICY STATEMENT AND PRINCIPLES

### 1.1 Introduction:

Witherslack Group is committed to the safety and protection of all children and young people living in or attending our establishments. We strive to ensure the provision of a safe and caring environment in which children and young people can develop educationally, socially and emotionally, safe from fear and free from harm.

This policy is one of a series in Witherslack Group’s integrated safeguarding portfolio. This includes policies for child protection, staff code of conduct, recruitment and selection, managing allegations against staff, low level concerns, complaints and representations, positive behaviour support, data protection and online safety.

Every member of staff within Witherslack Group has a shared responsibility for safeguarding however; there are specific roles in relation to safeguarding that all staff should be aware of. A member of Witherslack Group Senior Leadership Team has specific responsibility for safeguarding across Witherslack Group. The Director and Safeguarding Lead with this responsibility is Richard Wilkins and Head of Safeguarding, Mary Aurens, supports this role. Together they have responsibility for ensuring that Child Protection and Safeguarding policies and procedures across the group are robust and consistently applied.

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## Safeguarding Structure



At our school, safeguarding permeates *all* aspects of the school life and is everyone's responsibility; the school forms part of a wider safeguarding system. In order to fulfil our responsibilities we adopt a child-centred approach. This means that:

- Safeguarding systems and procedures are oriented around the wishes, feelings and best interests of children;
- We seek to give children a 'voice', listen to what they say, take them seriously and work collaboratively in order to meet their needs.

Our school aims to provide a positive, stimulating, caring and safe environment, which promotes the social, physical, emotional and moral development of each child. We work hard to maintain a safeguarding ethos and culture whereby children feel safe and are safe whilst at the school, and on their way to and from the school.

This policy applies to everyone in our school and it should be read and understood alongside the following School/Witherslack Group policies:

- Managing Allegations against staff
- Low Level Concerns policy
- Anti-Bullying policy
- School Policy on the Education of Looked After Children
- Online Safety
- Staff Recruitment and Selection
- Behaviour policy
- Positive Behaviour Support
- Whistle-blowing
- Code of Conduct
- SMSC and British Values

### 1.2 Definitions:

Child(ren) means everyone under the age of 18. Statutory guidance 'Working Together to Safeguard Children' (2023) defines **safeguarding and promoting welfare** as:

- providing help and support to meet the needs of children as soon as problems emerge.

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- protecting children from maltreatment, whether that is within or outside the home, including online.
- preventing impairment of children's mental and physical health or development Staff teams
- ensuring that children grow up in circumstances consistent with the provision of safe and effective care.
- promoting the upbringing of children with their birth parents, or otherwise their family network through a kinship care arrangement, whenever possible and where this is in the best interests of the children.
- taking action to enable all children to have the best outcomes in line with the outcomes set out in the Children's Social Care National Framework.

Therefore, 'safeguarding' includes but is about much more than 'child protection'. However, all staff are aware of the school's collective responsibility to act in order to **protect** children from various potential sources and types of harm:

- Physical, sexual, emotional abuse and neglect;
- Bullying, including online bullying and prejudice-based bullying;
- Racist, disability and homophobic or transphobic abuse;
- Gender-based violence/violence against women and girls;
- Sexual violence and sexual harassment;
- Radicalisation and/or extremist behaviour;
- Child sexual exploitation;
- Criminal exploitation;
- Modern Slavery/Human Trafficking;
- Gang involvement and youth violence;
- The impact of new technologies on sexual behaviour, for example sharing nudes and semi-nudes;
- Substance misuse;
- Domestic abuse;
- So-called 'honour-based' abuse including female genital mutilation, forced marriage, breast ironing / flattening;
- Perplexing Presentations (PP)/Fabricated or Induced Illness (FII)
- Poor parenting, particularly in relation to babies and young children.

### 1.3 Named staff with specific responsibility for Child Protection:

Academic Year	Designated Safeguarding Lead	Deputy Designated Safeguarding Lead (s)
2024-2025	Hannah Rowe	Ben Blyth
		Liam Tovey

**Training for Designated Staff in the school** (DSL's should refresh their training every 2 years (KCSiE 2024))

Name of Staff Member	Date when last attended DSL Training	Provided by Whom
Hannah Rowe	08.02.2024	May Aurens
Ben Blyth	20.06.2024	Mary Aurens
Liam Tovey	20.06.2024	Mary Aurens

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## 1.4 Framework Underpinning this Policy:

This policy and procedures have been written and will be implemented in-line with the safeguarding and child protection procedures established by Kent Safeguarding Children Multi-agency Partnership: [Home - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](http://kscmp.org.uk)

It is also written in accordance with legislation established by the Children Acts 1989 and 2004, the Education Act 2002, Safeguarding Vulnerable Groups Act 2006, The Education (Independent Schools Standards) (England) Regulations 2003, and other core legislation and guidance [See References]

## 1.5 Safeguarding Roles and Responsibilities:

school staff have no investigative role where child protection is concerned; this is a matter for children's social care and the police. However, school's do have a responsibility to provide a safe environment in which children can learn and all staff, including volunteers, have a responsibility to act to safeguard and promote children's welfare.

Some people have specific and / or additional safeguarding responsibilities:

### a) The Proprietary Board

The Proprietors and Board of Directors take seriously their responsibility under section 11 of the Children Act 2004 and section 157 of the Education Act 2002. The proprietors monitor compliance with statutory requirements and identifies areas for improvement. At least annually, the Designated Safeguarding Lead will prepare a safeguarding report to be tabled at a full school board meeting. Discussions will be recorded, and any agreed and/or remedial action(s) documented and followed-through, formally and immediately.

### The Chair of the school board is:

Robert James

### The Nominated / Link Safeguarding school board member is:

Michael Webster

### b) The Head

- The Head will ensure that the policies and procedures adopted by the Proprietors and Board of Directors, particularly concerning referrals of cases of suspected abuse and neglect, are fully implemented and followed by all staff;
- Act as a strategic conduit between the DSLs, the Proprietors and Board of Directors and Witherslack Group on safeguarding matters;
- Be the case manager and liaise with the LA designated officer (LADO) in the event of allegations of abuse being made against a member of staff or volunteer;
- Where a member of staff conduct or behaviour does not meet threshold of an allegation or is not in accordance with the Guidance for Safer Working Practice or Staff Code of Conduct, to manage the process in line with the Low Level Concern policy
- Ensure that a senior member of staff from the leadership team is appointed as the DSL in the school and that there is always cover for this role;
- Ensure that the DSL's access appropriate training which is regularly updated in-line with statutory and the Local Safeguarding Partnership guidance;
- Ensure that sufficient resources and time are allocated to enable staff to discharge their responsibilities;
- Refer cases to the DBS where an allegation is substantiated, and the person is dismissed or resigns or the employer ceases to use their person's services - this is a legal requirement;
- Lead in such a way as to create an environment and culture that is open, honest and transparent, where all staff and volunteers feel empowered to raise concerns about poor or unsafe practice and will address any concerns sensitively, effectively and in a timely manner.

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### c) Designated Safeguarding Lead (DSL) and Deputy DSL(s)

The DSL and Deputy DSL(s) undertake training and refresher training in-line with statutory requirements in order to ensure that they have the knowledge and skills required to carry out the role. This will include a refresher every 2 years and additional training, reading or attendance at DSL forums on an annual basis.

The Designated Senior Lead's role is described in Keeping Children Safe in Education 2024, Part Two and Annex C.

#### Briefly, our DSLs will:

- Refer cases of suspected abuse to children’s social care as required;
- Support staff who make referrals to children’s social care;
- Refer cases to the Channel programme where there is a radicalisation concern and / or support staff who make referrals to the Channel programme;
- Refer cases where a crime may have been committed to the Police, as required;
- Liaise with the Head Teacher to inform him or her of safeguarding and child protection issues, especially ongoing enquiries under section 47 of the Children Act 1989 and any police investigations. This will include being aware of requirement for children to have an Appropriate Adult. Further information can be found in the statutory guidance [PACE Code C 2019](#)
- Liaise with staff (especially teachers, pastoral support staff, school nurses, IT technicians and SENCOs) on matters of safety and safeguarding and welfare (including online and digital safety) , when deciding whether to make a referral by liaising with relevant agencies so that children’s needs can be considered holistically;
- Liaise with the Witherslack group clinical services team member/s allocated to the school and where appropriate the external senior mental health lead and where available the mental health support team, where safeguarding concerns are linked to mental health;
- Act as a source of advice, support and expertise for all staff;
- As required, liaise with the “case manager” - as per Part four of KCSiE 2024 and the designated officer(s) at the local authority (LADO) for child protection concerns in cases which concern a staff member;
- Promote supportive engagement with parents and/or carers in safeguarding and promoting the welfare of children, including where families may be facing challenging circumstances;
- work with the headteacher and relevant strategic leads, taking lead responsibility for promoting educational outcomes by knowing the welfare, safeguarding and child protection issues that children in need are experiencing, or have experienced, and identifying the impact that these issues might be having on children’s attendance, engagement and achievement at the school. This includes:
  - ❖ ensure that the school knows who its cohort of children who have or have had a social worker are, understanding their academic progress and attainment, and maintaining a culture of high aspirations for this cohort; and,
  - ❖ support teaching staff to provide additional academic support or reasonable adjustments to help children who have or have had a social worker reach their potential, recognising that even when statutory social care intervention has ended, there is still a lasting impact on children’s educational outcomes;
- Ensure appropriate representation at and contributions to multi-agency safeguarding meetings by our school, including the provision of written reports in line with the Local Safeguarding Partnership guidance/templates;
- Ensure compliance with best practice and statutory guidance in respect of safeguarding record keeping per se and, in particular, the seeking and passing on of relevant information when children join and leave our school (this includes written acknowledgement of receipt from receiving schools/professionals).
- Consider and where appropriate, share information with the receiving school or college in advance to the child attending to enable support to be in place when the child arrives at the new setting.

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- Ensure that they understand the unique risks associated with online safety and have the relevant knowledge and up to date capability required to keep children safe whilst they are online at the school. They also recognise the additional risks that children with SEN and disabilities (SEND) face online;
- Encourage a culture of listening to children and taking account of their wishes and feelings, among all staff
- Act as a point of contact with the Safeguarding Partnership

### Meetings the DSL would attend

Our DSL will attend and contribute to all multi-agency meetings convened by statutory organisations, whether this is Children’s Social Care, the police, health or YOT. They will ensure where required under the Safeguarding Partnership procedures that they compile and produce a written report that is in accordance with the Safeguarding Partnership procedures. Examples of such meetings would be [*this list is not exhaustive*].

- Initial Child Protection Conference (ICPC)
- Review Child Protection Conference (RCPC)
- Core Group
- Strategy meetings
- Planning Meetings
- Care Planning Meeting
- Child in Need
- Complex Abuse Meetings

**Any meetings attended will be recorded as a meeting via the add event tab on safeguarding database within TWO working days of the meeting occurring. Meetings notes will be taken using the WG notes of a meeting pro forma and be uploaded as an attached document**

### 1.6 Sources of Support:

Name	Designation	Contact Details
Robert James	Operations Director	015395660281
Michael Webster	Regional Director (Education)	01539566081
Safeguarding Team		01539566718

### 1.7 DSL availability:

During term time, during school hours, the DSL or deputy DSL will be available in person, for staff to discuss any safeguarding concerns. Where exceptional circumstances means that this is not possible, they will be available via phone and TEAMS. For any out of hours or out of term time activities, the DSL will ensure that there is adequate and appropriate cover arrangements in place.

### 1.8 Transferring of Child Protection Files:

Where a child leaves our school, the DSL will transfer the child protection file to the DSL at the next school, college or education setting as soon as possible, and within 5 working days for an in-year transfer or within the first 5 working days of the start of a new term. Prior to the Child Protection file being transferred, the DSL will check that the child is on roll of the school that the information is intended to be transferred to.

The file transfer summary will be completed, the file will be sent separately from the main pupil file and a receipt obtained. The file, if not being hand delivered, will be placed in a double envelope and marked clearly ‘strictly confidential’ and have as the addressee, the name of the Designated Safeguarding Lead.

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In addition to transferring the file, the DSL will consider whether it is appropriate to share any information with the DSL at the new school in advance of the child leaving in order to help them put in place the right support to safeguarding this child and to help the child thrive in a the new school or college. For example, information that would allow the new school or college to continue supporting children who have had a social worker and have been the victims of abuse and have that support in place for when the child arrives.

### 1.9 Children Potentially at Greater Risk of Harm:

In our school we recognise that whilst **all** children should be protected, some groups of children are potentially at greater risk of harm. At our school, we recognise that all pupils on roll are at greater risk of harm due to their additional needs.

Children may need a social worker due to safeguarding or welfare needs (Child Protection Plans and Child in Need) and may need this help due to abuse, neglect or complex family circumstances. We recognise that children’s experiences of adversity and trauma can leave them vulnerable to further harm, as well as educational disadvantaged in facing barriers to attendance, learning, behaviour and mental health.

It is expected that Children’s Social Care (CSC) will make the DSL aware that a child has a social worker. When a child comes onto the roll of our school, the DSL will ring CSC in the child’s home area and make enquires as to whether the child is currently open to CSC. The DSL will also make contact with the DSL at the previous school, to ascertain whether the child has a CP file (if it has not already been sent). Where there is, the DSL will request that is sent in line with the transfer timescales specified within KCSiE 20234and will also make enquires of that DSL as to whether there is any information that the DSL needs to know in order to either participate in multi-agency meetings, to keep the child safe or in order to support the child in school.

Where safeguarding/child protection concerns are such that a referral is required to be made, the DSL or Deputy DSL will follow the procedures laid out in this policy.

Where there are children who need a social worker, this will inform any decisions we as a school made in relation to safeguarding concerns (for example, considering the provision of pastoral and/or academic support, alongside action by statutory services).

Alongside any intervention by statutory services, our school will robustly follow up on any unauthorised absence of missing from education and continue to support the child both academically and pastorally and will liaise with the clinical services team within the school.

## 2.0 PART TWO: WHAT TO DO IF YOU’RE WORRIED ABOUT A CHILD

**2.1** No single professional can have a full picture of a child’s needs and circumstances. If children and families are to receive the right help at the right time, everyone who comes into contact with them had a role to play in identifying concerns, sharing information and taking prompt action. In order to fulfil this responsibility effectively, all staff will ensure that their approach is child centred. This means that they will consider at all times, what is in the best interests of the child.

Everyone will adhere to the Kent Safeguarding Children Multi-agency Partnership Procedures

[Home - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.kscmp.org.uk)

At our school, staff recognise that children may not feel ready or know how to tell someone that they are being abused, exploited, or neglected, and/or they may not recognise their experiences as harmful. For example, children may feel embarrassed, humiliated, or being threatened. This could be due to their vulnerability, disability and/or sexual orientation or language barriers. This should not prevent staff from having a professional curiosity and speaking to the DSL if they have concerns about a child. All staff will determine how best to build trusted relationships with children and young people which facilitate communication.

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## 2.2 School Child Protection Procedures:

The Designated Safeguarding Lead will ensure that the school Child Protection policy is made publicly available and that parents are aware of the fact that all cases of suspected abuse or neglect will be referred to Children's Social Care and the school's role within this. That staff know the policy and use it appropriately; it is reviewed and updated regularly along with the school board.

## 2.3 What Should Staff/Volunteers Do If They Have Concerns About A Child or Young Person in the school:

Staff who have any concern about a child, should **immediately** discuss this with the Designated Safeguarding Lead or the Deputy Designated Safeguarding Lead. Witherslack Group staff will record this on the Witherslack Group Safeguarding database as a C/YP concern, ensuring a clear and comprehensive summary of the concern. Supply staff will record concerns on the reporting concerns to the DSL pro forma (*form1*). **Staff (both Witherslack Group and Supply Staff) records relating to a concern, must be completed before the end of their working day.**

The Designated Safeguarding Lead is Hannah Rowe

The Deputy Designated Safeguarding Leads are Ben Blyth and Liam Tovey

It is these senior colleagues who are responsible for taking action where the welfare or safety of children or young people is concerned. If staff are uncertain about whether their concerns are indeed 'child protection' then a discussion with their DSL or deputy DSL will assist in determining the most appropriate next course of action:

### Staff should never:

- Do nothing/assume that another agency or professional will act or is acting.
- Attempt to resolve the matter themselves.

### What should staff do?

The process in our school is that all concerns are verbally reported **immediately** to the DSL/deputy DSL and then Witherslack Group staff will document the concern on the C/YP concern section of the Witherslack Group Safeguarding database. Supply staff will document concerns on the yellow 'internal notification to the DSL' form (*Appendix 1*). Where supply staff have observed injuries they will complete a body map (*form 2*.) Where there are physical injuries evident, the 'injuries' section on the C/YP concern will be used to record those injuries. *SEE SECTION 2.14 FOR GUIDANCE.*

## 2.4 What should the DSL consider right at the out

- Am I dealing with 'risk' or 'need'? (By definition, a child at risk is also a child in need. However, what is the *priority / level and immediacy* of risk / need?)
- Can the level of need identified be met:
  - Managing any support for the child internally via the school's own pastoral processes
  - An early help assessment
  - Sharing information with/making a referral to statutory services as either a child in need or as suffering or likely to suffer significant harm.
  - A referral to clinical services or CAMHS

## 2.5 Further DSL considerations:

- What resources are available to me / the school and what are their limitations?
- The context in which the concern and/or behaviour occurred
- What information is available to me: Child, Parents, Family & Environment?
- What information is inaccessible and, potentially, how significant might this be?
- Thresholds guidance indicates that the level and/or likelihood of risk such that a child protection referral needs to be made (i.e. a child is suffering or is likely to suffer significant

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harm?

- Who do I/don't I need to speak to now and what do they need to know?
- Where can I access appropriate advice and/or support?
- If I am not going to refer, then what action am I going to take? (E.g. time-limited monitoring plan, discussion with parents/carers or other professionals, recording etc.)

See *Appendix 1*

## 2.6 Feedback to Staff who report concerns to the Designated Safeguarding Lead:

Rules of confidentiality dictate that it may not always be possible or appropriate for the Designated Safeguarding Lead to feedback to staff who report concerns to them. Such information will be shared on a 'need to know' basis only and the Designated Safeguarding Lead will decide which information needs to be shared, when and with whom. The primary purpose of confidentiality in this context is to safeguard and promote the child's welfare.

## 2.7 Consent and Information Sharing:

At our school, we manage sensitive information appropriately and ensure that our practice complies with the requirements and principles of the Data Protection Act 2018, local protocols and national guidance.

We recognise that children are best protected when professionals work effectively together. Fears about sharing information cannot be allowed to stand in the way of the need to safeguard and promote the welfare of children who are at risk of abuse or neglect. At our school, all staff will pass on information they hold and will not make assumptions that someone else will act on their concerns and pass on information.

At our school, we will work openly and honestly with Parents and Carers and seek consent wherever possible where this is in the best interests of the child/ren. The best interests of the child/ren will always be our paramount consideration.

Relevant information to safeguard children may be shared with others outside of our school in order to keep them safe. We will always aim to discuss concerns with parents or carers before we share information, but this may not always be possible. If this is the case, the law allows us to share this information without consent.

The Data Protection Act 2018 includes 'safeguarding children and individuals at risk' is a processing condition that allows practitioners to share special category personal data. This includes allowing practitioners to share Information without consent, if a practitioner is unable to, cannot be reasonably expected to gain consent from the individual, where there is a good reason to do so, and that the sharing of that information will enhance the safeguarding of a child in a timely manner but

- It is not possible to gain consent
- It cannot reasonably be expected that a practitioner gains consent
- to gain consent would place the child at risk

Relevant personal information can be shared lawfully if it is to keep a child or individual at risk, safe from neglect of physical, emotional or mental harm, or if it is protecting their physical, mental or emotional wellbeing.

As a school, we will not provide a pupils personal data where the serious harm test under legislation is met<sup>1</sup>. E.g. in a situation where a child is in a refuge or another form of emergency accommodation, and the serious harm test is met.

Further information is available via [Data Protection: tool kit for schools](#)

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<sup>1</sup> The harm test is explained on the Disclosure and Barring service website on [GOV.UK](#). Section 31(9) of the Children Act 1989 as amended by the Adoption and Children Act 2002, available at [legislation.gov.uk](#)

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## 2.8 Calling the Police:

There may be times when the police need to be called in relation to a matter that relates to safeguarding or the welfare of a pupil. This could be due to a child suffering significant harm or due to a crime being committed, e.g. an assault, a pupil carrying a weapon or drugs.

Where the school are considering calling the police, they must follow the Witherslack Group internal advice protocol prior to any call. They will also use the guidance document [When to call the Police](#) as a reference tool and make decisions in line with this guidance and the advice given as per the internal advice protocol.

Following calling the police, when the police arrive in school, the DSL or other senior staff, must be clear with the police what they are asking them to do, they will seek information from the police on how they intend to deal with the matter and what action they will take and will ensure that where any pupil is spoken to or is to be searched in the context of being a suspect, there will be an Appropriate Adult present who will ensure that procedures are followed and will speak up for the child's rights where required. Where possible, in the first instance, the parent will be asked to act as the Appropriate Adult. Where this is not possible, in our school, anyone from SLT can be an Appropriate Adult with the exception of the Head Teacher (unless waiting would cause unreasonable delay and the offence is not against that establishment)

For further information go to; [About appropriate adults](#)

## 2.9 Discussing concerns or the intention to refer with parents

Wherever possible, the DSL in school will share concerns and discuss the intention to make a referral with parents. Referrals for Early Help and Child in Need (section 17) will always be discussed with parents in accordance with Local Safeguarding Procedures before information is shared.

Kent Safeguarding Children Multiagency Partnership dictates that when sharing information about a child or family with Children's Social Care or early Help and Preventative Services, practitioners must be transparent about their concerns and seek to work cooperatively with parents or carers. Practitioners should therefore usually inform parents or carers (and the child depending on their age and level of understanding) that they are going to make a referral.

Child Protection referrals (section 47) where possible will be openly and honestly discussed with parents before doing so. However, there are some circumstances under which a decision can and will be taken to share information prior to / without a discussion with parents:

- it would cause further significant harm to the child
- it would cause undue delay
- it would impede an investigation

Examples of concerns where you would not discuss with parents prior to referral [this list is not exhaustive]

- Fabricated or Induced Illness;
- Forced Marriage/ so-called Honour Based Abuse
- Intra-familial sexual abuse
- Abusive images of children

Where it is decided not to discuss the concern/s with parents before making a referral to Children's social care, the decision must be recorded in the child's file with reasons, dated, signed and confirmed in the referral to Children's Social Care.

**The Welfare of the child is the paramount consideration at all times**

## 2.10 Consideration for Referrals to CSC and Thresholds Guidance:

The DSL will consider any information received against the thresholds guidance. Where a referral to Children's Social Care is made, this will clearly outline the concern and link this to the thresholds guidance, the thresholds guidance is available via [Kent support level guidance - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)

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Kent Safeguarding Children multi-agency partnership		Kent County Council		KENT SUPPORT LEVELS GUIDANCE SHEET PROFESSIONALS (UPDATED JUNE 2023)		1
<p>This form is designed as a quick reference guide and should be used in conjunction with the online Kent Support Level Guidance <a href="http://www.kscmp.org.uk">www.kscmp.org.uk</a></p> <p>The following examples and key indicators are for professional guidance only, these should always be considered in respect of the impact they have on the child or young person</p>						
UNIVERSAL SUPPORT LEVEL 1	ADDITIONAL SUPPORT LEVEL 2	INTENSIVE SUPPORT LEVEL 3	SPECIALIST SUPPORT LEVEL 4			
<p><b>Child or Young Person Indicators</b></p> <ul style="list-style-type: none"> <li>My attendance at school/college/training is good</li> <li>There are no concerns about my life at home, in school or in my neighbourhood</li> <li>There are no barriers to my learning and no concerns about my learning and development</li> <li>I am a disabled child and need information on local support in my community</li> <li>There are no concerns about my behaviour</li> <li>I understand the difference between 'safe' and 'unsafe'</li> <li>I am able to understand right from wrong and I can act appropriately</li> <li>I have a positive sense of self, with no concerns about my forming relationships</li> <li>I have stable and affectionate relationships with my parents/carers</li> <li>I am physically healthy and my development checks are up to date</li> <li>I have an adequate and nutritious diet, regular dental and optical checks</li> <li>There are no concerns about my mental health</li> <li>There are no concerns about my attitude to drugs or alcohol</li> <li>There are no concerns about my use of technology</li> <li>I am safe at home, online and outside in my community</li> <li>I live in adequate housing and in a safe and secure environment</li> <li>I have a positive sense of my abilities</li> <li>I have positive relationships with my peers</li> <li>I have good care relationships with my siblings</li> </ul> <p><b>Mother / Father / Carers Indicators</b></p> <ul style="list-style-type: none"> <li>My parents/carers can meet my needs, including taking me to school and all my health appointments</li> <li>My parents/carers provide me with secure and caring parenting</li> <li>My parents/carers are able to manage my behaviours</li> </ul> <p><b>Risks to me outside my home/family</b></p> <ul style="list-style-type: none"> <li>I am safe at home and outside in my community</li> </ul>	<p><b>Child or Young Person Indicators</b></p> <ul style="list-style-type: none"> <li>My attendance at school is becoming a concern</li> <li>I have been repeatedly suspended from school</li> <li>I have started to go missing from school and/or from home</li> <li>I am not meeting my educational milestones</li> <li>I am home educated with concerns about my welfare</li> <li>I am an unwell infant/child at home, despite professionals repeat attempts to see me/visit</li> <li>I find it difficult to develop positive or close relationships with friends or with my parents/carers or family members</li> <li>I am a young carer with some responsibilities at home</li> <li>I am a language parent and I require some low level support</li> <li>I have language/communication difficulties</li> <li>I need some low level support due to a diagnosed disability or sensory impairment</li> <li>I am a disabled child and I need information/advice/support from local and national organisations</li> <li>I am showing early signs of associating with peers who are involved in crime and/or anti-social behaviour</li> <li>I am showing early signs of instigating or experiencing problematic sexual behaviour and/or language</li> <li>I have emerging mental health / emotional / self harm issues</li> <li>I am saying I want to 'run away'</li> <li>I am displaying disruptive and/or challenging behaviours</li> <li>I am at risk due to low level emerging neglect issues</li> <li>I am negatively affected by parental conflict/difficult family relationships</li> </ul> <p><b>Mother / Father / Carers Indicators</b></p> <ul style="list-style-type: none"> <li>My parents/carers require support to understand my disability or sensory impairment, and lack strategies to manage</li> <li>My family is impacted by poverty affecting their access to services, this negatively affects my development</li> <li>My family home is in a poor state of repair, impacting on my health/development. Or there is serious overcrowding</li> <li>My family are facing eviction/statutory homelessness</li> <li>My parents/carers struggle to meet my needs, or they place their own needs above mine</li> <li>My parents/carers struggle to provide me with good supervision or behaviour management</li> <li>My parents/carers often do not take me to my appointments which impacts negatively on my health and/or development</li> <li>My parents/carers health and emotional wellbeing including physical/mental/learning difficulty or substance misuse is becoming a cause for concern</li> <li>My parents/carers are at risk of entering the Criminal Justice System due to low level offending / anti-social behaviours</li> <li>My parents/carers used to be a Child in Care</li> </ul> <p><b>Risks to me outside my home/family</b></p> <ul style="list-style-type: none"> <li>I am at risk of being encouraged to use substances</li> <li>I am at risk of being encouraged to miss school / be late home</li> <li>I am at risk of being encouraged to commit low level crimes and/or become involved in anti-social behaviour</li> <li>I may be at risk due to unsafe and/or harmful content, conduct, commerce or contact risks online</li> </ul>	<p><b>Child or Young Person Indicators</b></p> <ul style="list-style-type: none"> <li>I am persistently absent (20% or more) and complex needs, or I am NEET</li> <li>I am not on any school roll / I am a Child Missing from Education (CME)</li> <li>I am at risk of /or I have been permanently excluded from school</li> <li>I am home educated/unseen child with significant concerns for my welfare</li> <li>I am a child under an Education Supervision Order/Section 36 Children Act</li> <li>There is serious delay in me achieving my developmental milestones creating significant concerns</li> <li>I regularly go missing from home or school with no explanation</li> <li>I am at risk of suicide and my family need help to support me</li> <li>I am at risk of committing crimes and need preventative support</li> <li>I am a pregnant teenager / vulnerable adult and there are serious concerns about me and/or my unborn baby</li> <li>I am vulnerable to being sexually abused or exploited</li> <li>I am vulnerable to, or exhibiting, intimate partner domestic abuse/violence</li> <li>I am displaying violent/abusive behaviours towards some family members</li> <li>I am vulnerable due to my drugs and/or alcohol use</li> <li>I have significant disabilities and require some professional support</li> <li>I am a homeless child in need, including 16-17 years old</li> <li>I am a young carer whose caring duties are affecting my outcomes</li> <li>I have significant dental decay that has not been treated</li> <li>I am a child subject of a Court Ordered Report under s7 or s37 being completed by children's social care</li> <li>I am at risk due to the ongoing DA/intense parental conflict in my home</li> <li>I am unborn, the level of concern requires a pre-birth risk assessment</li> </ul> <p><b>Mother / Father / Carers Indicators</b></p> <ul style="list-style-type: none"> <li>My family needs support to meet my disability needs</li> <li>My family are being evicted despite professional / agency support</li> <li>Relationships in my family are breaking down and there is serious risk I may become homeless and have to be looked after outside my family</li> <li>I am being severely neglected. Food, warmth and other basics are often not available due to illness/diabetes. I live in very poor home conditions</li> <li>I am at risk due to my parents/carers inability to parent consistently, and this is impacting negatively on my development</li> <li>I am at risk due to inappropriate/unsafe child care arrangements</li> <li>I am at risk due to my parents/carers health or learning difficulties or substance misuse/offending behaviours having a direct negative impact on me</li> <li>I am at risk due to my parents/carers own emotional or mental health difficulties, impacting negatively on my health and/or development</li> <li>I am Privately Fostered</li> </ul> <p><b>Risks to me outside my home/family</b></p> <ul style="list-style-type: none"> <li>My parents have been trafficked and struggle to gain independence</li> <li>I am being encouraged to become involved in a gang</li> <li>I am being encouraged to carry drugs and/or weapons</li> <li>I am at risk due to having contact with people who pose a risk of physical or sexual harm to children</li> <li>I am in a peer group that regularly goes missing</li> <li>I am at risk due to unsafe and/or harmful content, conduct, commerce, or contact risk online</li> <li>I am vulnerable to criminal / sexual exploitation or radicalisation</li> </ul>	<p><b>Child or Young Person Indicators</b></p> <ul style="list-style-type: none"> <li>I am severely absent from school (50% more) and safeguarding concerns</li> <li>I am a home educated or unseen child, there are serious concerns for my safety</li> <li>I am not growing or developing properly with no medical reasons for this</li> <li>I am at high risk due to repeated concerns about safer sleeping/environment</li> <li>I am a non-mobile baby or non-mobile child with a bruise or an injury</li> <li>I am a mobile child with an unexplained bruise or injury</li> <li>I am under 13 yrs of age and sexually active / I have an STI / I am pregnant</li> <li>I have repeatedly committed crimes / I am known to the Police</li> <li>I am assessed as a possible risk of harm to the community</li> <li>I have been physically/sexually abused, including child sexual assault</li> <li>I have been kicked out of home / I have left home / I don't feel safe at home</li> <li>I have retreated socially / I struggle with my emotional and/or mental health and this is having a significant detrimental impact on me</li> <li>I have plans to take my own life</li> <li>I have been abandoned or chronically neglected by my parent/carer</li> <li>I am being significantly emotionally abused by my parent/carer or my partner</li> <li>Others have significant concerns about my reliance on drugs or alcohol</li> <li>I am being forced to marry someone I don't want to</li> <li>I am at risk due to my family being trafficked / subject to modern day slavery</li> </ul> <p><b>Mother / Father / Carers Indicators</b></p> <ul style="list-style-type: none"> <li>My parents/carers require support to meet my needs as a severely disabled child/this has a significant impact on my family/parents/carers</li> <li>I am at significant risk because my carer cannot parent me properly</li> <li>I am at significant risk because my parents/carers are not supporting my medical or development needs</li> <li>I am at significant risk because my parents/carers are not able to protect me from known abusers in, or coming into, our family/home</li> <li>I am at high risk due to being left home alone with no supervision or support</li> <li>I am at high risk due to my parents/carers mental health and or substance misuse, including cannabis use</li> <li>I am at high risk due to the level of domestic abuse in my family home</li> <li>I am an unborn at risk due to the pregnancy being concealed</li> <li>I am at risk because my parent/carer has abused/neglected another child</li> <li>A previous child has been removed from my parents/carers care</li> <li>I am at risk, my parent/carer is exaggerating or causing symptoms/illness in me</li> <li>I am at high risk due to my parents/carers learning or physical difficulties</li> <li>I am at high risk due to my parents/carers cultural customs regarding Female Genital Mutilation (FGM)</li> <li>I am at high risk due to my family's honour/cultural customs</li> <li>My parents may be benefitting from the risks to me outside my home</li> </ul> <p><b>Risks to me outside my home/family</b></p> <ul style="list-style-type: none"> <li>I am being trafficked</li> <li>I am experiencing child on child abuse which may involve the use of/or being forced to carry weapons in a group setting, i.e. gangs/country lines</li> <li>I am at high risk due to illegal, unsafe or harmful content, conduct, commerce or contact risks online</li> <li>I am high risk of harm of being radicalised, abused or exploited through technology or inappropriate relationships, in person, or online</li> <li>I am being criminally/sexually exploited in a group setting, i.e. Gangs</li> <li>I am instigating or experiencing significant intimate partner abuse or violence</li> <li>I am at high risk of significant harm when I go missing from home</li> <li>Others encourage or force me, to be frequently missing from home/school</li> </ul>			

## 2.11 Referrals to Children's Social Care:

Anyone can make a referral to CSC and usually this will be the Designated Safeguarding Lead or any deputy who will make judgements around 'significant harm' and levels of 'need' and when to refer in line with Kent Safeguarding Children Multiagency Partnership procedures and thresholds guidance [Kent support level guidance / Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](http://www.kscmp.org.uk)

Where a Designated Safeguarding Lead (DSL) or Deputy DSL considers in line with thresholds that a referral to Children's Social Care (CSC) is required, there are two thresholds for (and their criteria) that need to be carefully considered:

## 2.12 Child in Need/Referrals under section 17 (s17)

### ❖ Is this a Child In Need?

Under section 17 (s.17 (10)) of the Children Act 1989, a child is in need if:

- He is unlikely to achieve or maintain, or to have the opportunity to achieve or maintain, a reasonable standard of health or development, without the provision of services by a local authority;
- His health or development is likely to be impaired, or further impaired, without the provision of such services;
- He is disabled.

Local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. Children in need may be assessed under section 17.

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Where a s17 referral is made, the written referral to CSC will be sent securely on the agreed Local Safeguarding Partnership pro forma: [Request for Support - Professionals \(kent.gov.uk\)](https://www.kent.gov.uk) as soon as possible.

### 2.13 Referrals under section 47 (s47):

#### ❖ Is this a Child Protection Matter?

Under section 47(1) of the Children Act 1989, a local authority has a duty to make enquiries where they are informed that a child who lives or is found in their area:

- (a) is the subject of an Emergency Protection Order;
- (b) is in Police Protection; or where they have;
- (c) **reasonable cause to suspect that a child is suffering or is likely to suffer significant harm.**

Therefore, the 'significant harm threshold' justifies statutory intervention into family life. A professional making a child protection referral under section 47 must therefore provide information which clearly outlines that a child is suffering or is likely to suffer significant harm.

Referrals under section 47 do not require consent, however best practice is that concerns are discussed openly and honestly with parents/carers, and they are informed of a referral unless

- it would cause further significant harm to the child
- would cause undue delay
- would impede an investigation

Where a child is at immediate risk or has suffered significant harm then a referral CSC and/or police [as appropriate] will be required immediately.

Number to ring for advice: 0300041 11 11

To make a referral to CSC: [Request for Support - Professionals \(kent.gov.uk\)](https://www.kent.gov.uk)

Number to ring for Emergency Duty Team (EDT) – for out of hours referrals: 0300 41 91 91

In line with Kent Safeguarding Children Multiagency Partnership Procedures written referrals will be completed on the required pro forma accessible at: [Request for Support - Professionals \(kent.gov.uk\)](https://www.kent.gov.uk) and as soon as possible.

### 2.14 Early Help

Providing Early Help is more effective in promoting the welfare of children than reacting later. Early Help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years. Early Help can also prevent further problems arising.

Effective Early Help relies upon local agencies working together to:

- identify children and families who would benefit from early help;
- undertake an assessment of the need for Early Help; and
- provide targeted Early Help services to address the assessed needs of a child and their family which focuses on activity to significantly improve the outcomes for the child.

Schools are in a position to identify concerns early, provide help for children, and prevent concerns from escalating. Our pastoral system enables us to identify children who may benefit from Early Help - this means providing support as soon as a problem emerges.

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If Early Help is appropriate, the Designated Safeguarding Lead (or deputy) will lead on liaising with other agencies in setting up an inter-agency assessment as appropriate. As appropriate, the DSL will delegate to any staff the requirement to support other agencies and professionals in an Early Help assessment; this may result in staff acting as the Lead Professional. In our school, the DSL will keep such cases under constant review and consideration given to a referral to children’s social care for assessment for statutory services, if the child’s situation does not appear to be improving or is getting worse.

We will do this in partnership with parents and children and, where necessary, other agencies, in-line with locally agreed procedures and protocols.

In this context, Keeping Children Safe in Education 2024 makes it clear that **any** child may benefit from Early Help, but all school staff should be particularly alert to the potential need for Early Help for a child who:

- Is disabled or has certain health conditions and has specific additional needs
- has special educational needs (whether or not they have a statutory Education, Health and Care Plan)
- is a young carer
- is showing signs of engaging in anti-social or criminal behaviour, including gang involvement and association with organised crime groups or county lines
- is frequently missing/going missing from care of from education, home or care
- has experienced multiple suspensions, is at risk of being permanently excluded from education
- is at risk of modern slavery, trafficking or criminal exploitation
- is at risk of being radicalised or exploited
- has a parent or carer in custody, or is affected by parental offending
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing drugs or alcohol themselves
- has returned home to their family from care
- is at risk of ‘so called honour’ based abuse such as Female Genital Mutilation or Forced Marriage
- is a privately fostered child
- 

We recognise that those who are new to school or are present on a temporary basis, can sometimes pick-up on things and therefore the DSL will ensure that they are aware of reporting systems and have undergone the safeguarding briefing in school on day one as appropriate. Everyone has a responsibility to report concerns, and everyone will be listened to and heard if they do so, whatever their role and however trivial or insignificant the concern might seem at face value.

Staff may be required to support other agencies and professionals in an Early Help assessment and anyone who has a niggles or concern about the need for early help for a child / family should liaise with the DSL.

To refer a child into the Early Help and Preventative Services for Kent, the Request for Support form can be accessed through the KELSIE children’s portal: [Childrens Portal \(kent.gov.uk\)](https://www.kent.gov.uk/childrens-portal)

The Early Help and Preventative Service contact details for West Kent are:

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Service Manager	<b>Tim O'Brien</b> <a href="mailto:Tim.O'Brien@kent.gov.uk">Tim.O'Brien@kent.gov.uk</a> 03000 41 30 99
Children's Centre Delivery Manager	<b>Bethany Hodges</b> <a href="mailto:Bethany.Hodges@kent.gov.uk">Bethany.Hodges@kent.gov.uk</a> 03000 41 52 15
Youth Hub Delivery Manager	<b>Ellen Shaw</b> <a href="mailto:Ellen.Shaw@kent.gov.uk">Ellen.Shaw@kent.gov.uk</a> 03000 41 95 07
Youth Justice Unit Lead	<b>Paul Walker</b> <a href="mailto:Paul.Walker2@kent.gov.uk">Paul.Walker2@kent.gov.uk</a> 03000 41 17 68
Area Inclusion and Attendance Lead	<b>Cathy Edwards</b> <a href="mailto:Catherine.Edwards@kent.gov.uk">Catherine.Edwards@kent.gov.uk</a> 03000 41 19 58

## 2.15 Recording Decision Making Rationales and contacts with parents/carers/professionals:

The DSL or deputy DSL will

- make a clear record of how the concern was followed up and resolved,
- a note of any action taken, decisions reached and an outcome
- record a clear decision-making rationale for all concerns and referrals

Decision making rationales will clearly state why action has or has not been taken and will be linked to the relevant points and level within the threshold guidance. The DSL/DDSL will also upload all information, and any documentation associated with the referral to the Witherslack Group Safeguarding database.

All discussions with parents or professionals in relation to a safeguarding or welfare concern will be recorded in the internal/external communication section on the Witherslack Group Safeguarding Database. As per the 7 Golden Rules of Information sharing, information sharing rationales will be recorded in the relevant section. Records will clearly demonstrate, what has been shared, with whom (including full name, designation and agency), when and why.

***All discussions with parents or professionals must be recorded within TWO working days***

## 2.16 CSC Responses to Referrals and Timescales:

In response to a referral, Children's Social Care should make a decision, within **ONE** working day of the referral being made, about the course of action it is taking and should let the referrer know. They should provide advice to the referrer and/or child/family;

- Refer on to another agency who can provide services;
- Convene a Strategy Meeting (within 24 hours but on the same day if concerns are regarding the immediate safety of a child)
- Provide support services under Section 17;
- Undertake a Child and Family Assessment
- Undertake a s47 enquiry
- Convene an Initial Child Protection Conference (within 15 working days of a Strategy Meeting/discussion)
- Accommodate the child under Section 20 (with parental consent);
- Make an application to court for an Order;
- Take no further action.
- Step down to Early Help

### Feedback from Children's Social Care:

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Upon receiving a referral, Children's Social Care should acknowledge receipt of a written referral within **ONE** working day. If the referrer has not received an acknowledgement within 3 working days, Children's Social Care should be contacted again via the Integrated Front Door Service [Front Door - KELSI](#) or by contacting the

Where the DSL or person making the referral does not agree with the outcome of a referral or with the actions of Children's Social Care that person will follow the Local Safeguarding Partnership Professional Resolution/Disagreement Procedures. Where the case is already open and there are disagreements regarding how the case is being managed or decisions made, then the DSL or deputy DSL will follow the Local Safeguarding Partnership Professional Resolution/Disagreement Procedures [kent-escalation-and-professional-challenge-policy-april-2023-final.pdf \(trixonline.co.uk\)](#)

### 2.17 Recording and Reporting Concerns in the school:

All staff who have a concern about a child will speak to the DSL **immediately**.

We recognise that accurate and up-to-date record keeping is essential for a number of reasons:

- It helps the school identify causes for concern at an early stage. Often it is only when a number of seemingly minor issues are taken as a whole that a safeguarding or child protection concern becomes clear.
- It helps the school to monitor and manage its safeguarding practices.
- It helps to evidence robust and effective safeguarding practice in inspections and audits.
- Accurate and specific records are important where there are child protection and safeguarding concerns e.g. a chronology of information gathered, and action taken.

***It is important that concerns are fully completed in a timely way and any concern MUST be recorded before the end of the working day.*** The details are important. To help the Designated Safeguarding Lead respond appropriately, please follow the guidance below.

#### Witherslack Group Staff

- Record concerns on the C/YP concern section of the WG safeguarding database
- The database pre-populates the basic information once the child's name is entered
- Ensure that all boxes are completed
- Make sure the concern is given in detail, preferably in the child's own words
- To help describe injuries on the body, use the injuries section which will generate a body map. In the right hand column, describe the size and shape of any marks. Do not try to explain what you think caused the marks. Each injury has a number, link that number to the number relating to the explanation for the injury in the nature of the concern section. **Do not take any photographs.**
- Don't report what other people have told you - they must record their own concern
- **Do not record on behalf of someone else – all accounts must be first-hand accounts**
- Remember that concern records are used in court cases and inquests as primary documents, so they must be complete and accurate.
- If you jotted your notes down on a piece of paper whilst talking to the child or immediately afterwards, record the child's name and DoB, the date and time, sign, print and write your designation – give it to the DSL who will upload it to the system.
- **Do not email concerns to the DSL. Emails can get missed or go to the wrong person**

#### Supply Staff and Volunteers

- Use the yellow internal notification to the DSL pro forma (*form 1*).
- Enter all the admin details, including date of birth (we are asked for this when we report a concern to Children's Services or the police).
- Include your full name (not initials).
- Make sure the concern is given in detail, preferably in the child's own words.
- To help describe injuries on the body, use a body map (*form 2*). Number each injury you have noticed on the body chart at its location and list them on the concern form. Describe the size and shape of

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any marks. Do not try to explain what you think caused the marks. Do not take any photographs. Give the body map to the DSL who will upload it to the system.

- Don't report what other people have told you - they must record their own concern.
- Only document about one child on each concern form/database entry.
- Remember that concern records are used in court cases and inquests as primary documents, so they must be complete and accurate.
- Do not use other any other form or piece of paper. Writing on the back of other forms can cause confusion and error.
- If you jotted your notes down on a piece of paper whilst talking to the child or immediately afterwards, attach that to the completed concern form.
- Do not use email to send your concern, complete a hard copy concern form instead. Emails get missed, go to the wrong person and cannot be signed.
- Completed concern forms must be given to either the DSL or Deputy DSL. If the DSL or Deputy DSL is not available, give it to the next most senior member of staff.
- Please sign, date and time the concern form.

Where staff have any concerns about a child's welfare, they will act on them immediately, in the first instance, this means going and discussing the concerns with the DSL or deputy. It is always safer to discuss the matter with the DSL in order to ensure that a child is safe, or to stop a problem from escalating, than it is to assume and/or hope that everything will be ok. You are not bothering anyone, wasting their time or being a nuisance, you are safeguarding children.

**Any and all of the following concerns MUST ALWAYS be reported to the DSL without delay:** (this list is not exhaustive)

- Any child that is injured, marked, or bruised;
- Where the child is able to articulate but the explanation is inconsistent or changes;
- Any behaviours which give rise to suspicions that a child may have suffered harm (e.g. significant changes in behaviour, demeanour, worrying drawings or play);
- Any concerns that a child returning from home may have been receiving inadequate care, suffering or likely to suffer any form of abuse or neglect;
- Any significant changes in a child's presentation;
- Any hint or disclosure of abuse or neglect by a child or from any other person - including disclosures of abuse or neglect perpetrated by adults outside of the family or by other children or young people;
- Excessive one-to-one attention beyond the requirements of a staff member's usual role and responsibilities;
- Inappropriate behaviour online Inc. the sharing of images/sharing of nudes or semi nudes

## 2.18 Listening to Children and Managing 'Disclosures':

The table below offers staff guidance on how to respond and listen to a child who is worried or who has something difficult to say. Children must be **listened to, taken seriously and heard**, there are no exceptions to this.

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**Children need to know that their worries and concerns will be treated seriously and that they can express their views and give feedback.** All adults in the school should be clear about how to respond appropriately to someone who needs to talk:

Listening	Recording
<ol style="list-style-type: none"> <li>1. <b>Do not make [false] promises</b> to the child about confidentiality or keeping ‘secrets’</li> <li>2. You have <b>no investigative role</b>. Do not engage in ‘interviewing’ children or ‘investigating’ possible or suspected abuse.</li> <li>3. <b>Listen!</b> Keep calm and <b>don't interrupt</b>. Remember to leave at least five seconds / space for children to think and respond</li> <li>4. If you <i>have</i> to <i>clarify</i> information, then <b>ask only open questions</b> wherever possible. This should be using the TED (Tell me, Explain, Describe)</li> <li>5. Focus on, pick-out and record the <b>facts</b> i.e. who, what, when, where? Don't get embroiled in ‘how’ or ‘why’?</li> <li>6. <b>Don't judge or react! Avoid displays of shock and keep opinions to yourself as these things</b> may act as barriers to a child who has something sensitive to tell you.</li> <li>7. <b>‘When was the last time this happened’</b> is an important thing to ascertain.</li> <li>8. <b>Reassure</b> the child and make clear to them what you need to do now.</li> <li>9. <b>Reflect back</b> – key points to enable the child to put right any misunderstandings</li> <li>10. <b>Ascertain</b> the wishes and feelings of the child in any action to be taken</li> <li>11. <b>Name</b> – the DSL/DDSL that you are going to report it to, it's important that the child knows who it is that you are passing the information on to</li> </ol>	<ol style="list-style-type: none"> <li>1. It is not advisable to try and complete a full record of the dialogue whilst trying to listen actively and attentively. However, it is a good idea to <b>jot down any key phrases, dates, times</b> etc. as soon as possible</li> <li>2. <b>Records</b> that are handwritten should be succinct, legible, accurate, timed, signed and dated</li> <li>3. Records should <b>differentiate clearly between fact, opinion, interpretation</b> etc. Ideally, stick to the facts as you understand them and leave it to the investigative agencies to test the hypotheses</li> <li>4. If children or adults are being quoted, then they must be <b>quoted verbatim</b>. In particular, avoid using other words or adult ‘equivalents’ for words that children use</li> <li>5. It is important to <b>record any questions or prompts asked</b> i.e. to show that these were not ‘leading’</li> <li>6. The <b>emotional context</b> of the dialogue is important i.e. did the child become distressed at any point or, alternatively, did they speak matter-of-factly about quite distressing things</li> <li>7. Any <b>repetition</b> is important to note i.e. things that the child repeats – these may be particularly significant. Similarly, <b>gestures</b> are important to describe accurately e.g. which hand / which cheek, open /closed</li> </ol>

Following a disclosure or conversation, staff must report it verbally to the DSL ***immediately***; they will then need to make a record of it. (Document your conversation as soon as possible and before the end of the working day, using the child's actual words. Keep your remarks factual and do not write down what you think the child means.

See *Appendix 2 for further information*

### 3.0 PART THREE: CHILD ABUSE AND NEGLECT

#### 3.1 Definitions and Indicators:

Working Together to Safeguard Children 2023, defines abuse and neglect as:

A form of maltreatment of a child. Somebody may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm. Harm can include ill treatment that is not physical as well as the impact of witnessing ill treatment of others. This can be particularly relevant, for example, in relation to the impact on children of all forms of domestic abuse, including where they see, hear, or experience its effects.

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Children may be abused in a family or in an institutional or extra-familial contexts by those known to them or, more rarely, by others. Abuse can take place wholly online, or technology may be used to facilitate offline abuse. Children may be abused by an adult or adults, or another child or children.

In our school, we recognise that abuse, neglect and safeguarding issues are rarely stand-alone events that can be covered by one definition or label and in most cases, multiple issues will overlap with one another.

In our school, all staff are aware that safeguarding incidents and/or behaviours can be associated with factors outside the school and/or can occur between children outside of the school environment. All staff, but especially our DSL and any deputies will consider whether children are at risk of abuse and exploitation situations outside of their families. Extra-familial abuse takes a variety of different forms.

All staff are aware that technology is a significant component in many safeguarding and wellbeing issues. Children are at risk of abuse online as well as in day-to-day life. In many cases, abuse will place concurrently via online channels and in daily life.

Staff in schools are well placed to identify concerns. Not all concerns are immediately obvious and staff may identify indicators such as changes in emotional presentation, physical presentation, attendance issues and behavioural issues that might indicate that the child is suffering significant harm. Any changes in the baseline behaviour of a child will be discussed with the DSL immediately.

Staff also need to be mindful of what serious case reviews have termed the toxic trio, which looks at the correlation between

- ❖ parental substance misuse Inc. alcohol use
- ❖ parental mental ill health
- ❖ domestic abuse

All of these issues either collectively or individually will impact on parenting capacity or will need support at any level of the continuum of need or equivalent. As a school, we will closely monitor any child where the toxic trio is a factor.

Further useful information can be found at:

[www.nspcc.org.uk/core-info](http://www.nspcc.org.uk/core-info)

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

Indicators of Abuse and Neglect – see *Appendix 4*

Definitions of abuse and neglect: - see *Appendix 5*

### 3.2 Extra- Familial Harm:

At our school we recognise that safeguarding incidents and/or behaviours can be associated with factors outside of the school and/or can occur between children outside the school. All staff, but especially the designated safeguarding lead (or deputy) will consider whether children are at risk of abuse or exploitation in situations outside their families.

Extra-familial harms take a variety of different forms and children can be vulnerable to multiple harms including (but not limited to) sexual abuse (including harassment and exploitation), domestic abuse in their own intimate relationships (teenage relationship abuse), criminal exploitation, serious youth violence, county lines, and radicalisation

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Environments outside the family home in which harm can occur includes peer groups, school and community/public places, including known places in the community where there are concerns about risks to children, for example; parks, housing estates, shopping centres, takeaway restaurants or transport hubs, as well as online, including social media and gaming platforms

#### 4.0 PART FOUR: CHILDREN IN SPECIFIC CIRCUMSTANCES

Keeping children Safe in Education 2024, Part 1 and Appendix B, outline range of safeguarding issues. Among those are what the Local Safeguarding Partnership procedures refer to as Children in Specific Circumstances.

##### 4.1 So called 'Honour-based' Abuse:

The terms 'honour crime' or 'honour-based abuse' or 'izzat' embrace a variety of crimes of violence (mainly but not exclusively against women), including assault, imprisonment and murder where the person is being punished by their family or their community. They are being punished for actually, or allegedly, undermining what the family or community believes to be the correct code of behaviour. In transgressing this correct code of behaviour, the person shows that they have not been properly controlled to conform by their family and this is to the "shame" or "dishonour" of the family. It can be distinguished from other forms of abuse, as it is often committed with some degree of approval and/or collusion from family and/ community members. Victims will have multiple perpetrators not only in the UK; HBA can be a trigger for a forced marriage.



Boys as well as girls can suffer Honour Based abuse, where there are concerns about actual or risk of honour based violence, we will follow the **One Chance Rule: you may only have one chance to speak to a potential victim of honour based violence and, therefore, only one chance to save a life.**

Where we have concerns relating to Honour Based Abuse, we will follow the Local Safeguarding Partnership procedures [So-Called 'Honour' Based Abuse \(trixonline.co.uk\)](https://trixonline.co.uk) [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://kscmp.org.uk)

##### 4.2 Forced marriage:

A forced marriage is a marriage in which one or both spouses do not consent to the marriage but are coerced into it. Duress can include physical, psychological, financial, sexual and emotional pressure. In the cases of some vulnerable adults who lack the capacity to consent, coercion is not required for a marriage to be forced.

**Emotional control.** Removing from school or education, controlling freedom of movement up to and including house arrest, preventing the victim from learning English, preventing professionals from having any individual contact with the victim, in the case of incoming spouses, threatening to have incoming spouses deported to the country of origin , often these threats will include removal of the victim's children, control

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over the victim's visa status, use of black magic by way of amulets, potions or spells to exert control over the victim.

**Physical abuse.** This can involve parents and siblings, husbands and in-laws in terms of an extended family and /or community. This includes the spectrum of physical abuse from threats of physical violence, up to and including acid attacks and murder.

**Financial abuse.** Controlling the income of the victim, many victims will be refused access to any money, even in some cases their own earnings, in order to maintain control and dependency.

**Sexual abuse.** Where there has been Forced Marriage there is often criminal behaviour such as kidnap and abduction, false imprisonment, administering noxious substances (to ensure compliance) and rape. There have been cases of victims having been drugged as part of an abduction both within the UK and to remove victims from the UK for the purposes of marriage.

**Emotional abuse** to the victim and to a third party, threats of harm to the victim can include by family members, both here and in the countries of origin, criticism and humiliation of the victim, enforced servitude by way of unpaid work either in family businesses or within the home, sometimes referred to as a form of domestic slavery. This abuse can involve the victim's children being removed from her care to be cared for by another member of the extended family. Emotional abuse can include threats by the perpetrator to harm themselves (i.e. I will kill myself if you do not marry him or her). They can include shaming in front of the entire community. Lastly, community collusion. A distinct difference between domestic violence and Honour Based Violence is that there is the element of collusion between perpetrators, be they members of the victim's family or in-laws or extended family and the wider community.

**Confidentiality and disclosure** Risk can escalate very suddenly. The same level of confidentiality will be applied as to any other safeguarding matter. It should always be remembered that in the case of HBA and FM, perpetrators may go to enormous lengths to obtain information about the whereabouts of a victim in hiding, up to and including hacking into information held in computer databases. In some cases, existing family or professional networks have been used, e.g. Taxi Drivers. MPs and GPs have been asked to divulge information. Special care should be given when considering the use of interpreters and advice should be taken if you are unsure as to who is safe.

Where we have concerns relating to Forced Marriage, we will follow the Local Safeguarding Partnership procedures [Forced Marriage \(trixonline.co.uk\) Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.trixonline.co.uk)

Further information is available from the Forced Marriage Unit 020 7008 015 email [fm@fcdo.gov.uk](mailto:fm@fcdo.gov.uk) and [Multi-agency statutory guidance for dealing with forced marriage and Multi-agency practice guidelines: Handling cases of forced marriage \(accessible version\) - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/multi-agency-statutory-guidance-for-dealing-with-forced-marriage-and-multi-agency-practice-guidelines-handling-cases-of-forced-marriage-accessible-version)

### 4.3 Female Genital Mutilation (FGM):

Female Genital Mutilation comprises all procedures involving partial or total removal or alteration of the external female genitalia for non-medical reasons. It is illegal in the UK and a form of child abuse with long-lasting harmful consequences. (FGM can come to be seen as a natural and beneficial practice carried out by a loving family, which places barriers in the way of [potential] victims coming forward to raise concerns or talk openly. Equally, staff should note that girls at risk of FGM may not yet be aware of the practice or that it may be conducted on them). UNICEF indicates that 200 million women and girls in 30 countries in Africa and the Middle East have experienced FGM or Cutting. The map below gives an indication as to incidence and prevalence.

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FGM has also been documented in Iraq, Israel, Oman, UAE, Occupied Palestinian Territories, India, Indonesia, Malaysia, and Pakistan. It can also happen anywhere in the UK. The age range for FGM is infancy to 15 years of age and occasionally adult women. Predominantly FGM takes places between the ages of 3 and 12 years.

Indicators include:

- Family origins are from a country where it is practiced;
- mother or a sister who has undergone FGM;
- mention of a 'party', 'celebration', 'becoming a woman';
- visiting older relatives visiting from the country of origin;
- being taken on an extended holiday to the country of origin – particularly in the 3 weeks leading up to the school summer holidays.
- talk about a 'special' procedure to become a woman

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Further information can be found in the [Multi-agency statutory guidance on female genital mutilation](#), the [FGM resource pack](#) particularly section 13 and [Female Genital Mutilation: Guidance for schools](#)

Where we have concerns relating to Female Genital Mutilation, we will follow the Local Safeguarding Partnership procedures [CSE and FGM - KELSI Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)

As of 31<sup>st</sup> October 2015, all teachers who discover (either by disclosure by the victim or visual evidence) that FGM appears to have been carried out on a child under the age of 18 will immediately report this themselves to the police. They will consider discussing this with the DSL (unless there is a specific reason not to do so) and involve CSC as appropriate. (Serious Crime Act 2015, statutory duty to report from section 5B of the FGM Act 2003 (s74 as inserted))

#### 4.4 Religious Beliefs and Linked Abuse:

Research indicates that the belief in ‘spirit possession’ or ‘witchcraft’ is widespread across the world. It is not confined to particular countries, cultures or religions, nor is it confined to new immigrant communities in this country. These beliefs occupy a broad spectrum, and the effects range from harmless to harmful. Belief in spirit possession and witchcraft is not of itself evidence of maltreatment.

Although the number of known child abuse cases linked to accusations of ‘spirit possession’ or ‘witchcraft’ in Britain is small, it is possible that a significant number of cases go undetected. The nature of the abuse can be particularly disturbing and the impact on the child is substantial and serious.

There are links between ‘spirit possession’ and ‘witchcraft’ and exploitation in that belief in magic or witchcraft may be used to create fear in children to make them more compliant when they are being trafficked for domestic slavery or sexual exploitation

The term ‘spirit possession’ means that a force, spirit, God or demon has entered a child and is controlling him or her resulting in a change in health or behaviour. Sometimes the term ‘witch’ or ‘witchcraft’ is used. This is the belief that a child is able to use an evil force or supernatural powers to harm others. There is a range of terminology connected to such beliefs, for example black magic, kindoki, ndoki, the evil eye, djinns, voodoo, obeah and child sorcerers.

Families, carers and the children involved can hold genuine beliefs that evil forces are at work. Families and children can be deeply worried by the evil that they believe is threatening them. There may also be an element of the adult gaining some gratification through the ritualistic abuse of the child, which may even result in the death of the child.

#### Vulnerability

In cases of ‘spirit possession’ or ‘witchcraft’ which involve children, the parent/carer views the child as ‘different’ and attributes this to the child being ‘possessed’. This can lead to attempts to exorcise the child.

The reasons for being ‘different’ can be varied, and include disobedience, independence, bedwetting, nightmares or illness. In some cases, there will be no obvious difference, and the child will have been targeted because they are perceived to be ‘spiritually’ different. The attempt to exorcise may involve beating, burning, starvation, cutting/stabbing and/or isolation within the household, all of which obviously constitute abuse.

#### Indicators

Indicators of abuse linked to belief in spirit possession, which may also be common features in other kinds of abuse, include:

- A child reporting that they are, or have been, accused of being ‘evil’, and/or that they are having the

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‘devil beaten out of them’;

- Signs of physical abuse;
- A child becoming noticeably confused, withdrawn, disorientated or isolated;
- Personal care deteriorating;
- Attendance becoming irregular or child being taken out of school altogether;
- A deterioration in a child’s performance at school;
- Lack of parental concern or attachment.

Where there are concerns that any young person is at risk or has suffered abuse linked to Religious Beliefs and Linked Abuse, we will follow the Local Safeguarding Partnership procedures [Child Abuse linked to Faith or Belief \(trixonline.co.uk\)](https://trixonline.co.uk) [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://kscmp.org.uk)

[Faith based abuse: National Action Plan](#)

#### 4.5 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.

CSE can affect any child or young person (male or female) under the age of 18 years, including 16 and 17 year olds who can legally consent to have sex. It can include both contact (penetrative and non-penetrative acts) and non-contact sexual activity and may occur without the child or young person’s immediate knowledge (e.g. through copying videos and images they have created and posted on social media).

Via the curriculum, the school staff will raise awareness around positive healthy relationships and where appropriate specifically raise awareness of CSE and the grooming process. Any concerns re CSE will be reported to the DSL who will follow the Local Safeguarding Partnership procedures as defined in [Child sexual exploitation - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://kscmp.org.uk) [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://kscmp.org.uk)

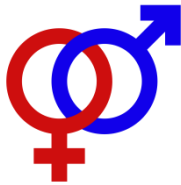
Prior to any referral being made the DSL will use the safeguarding procedures CSE screening tool, which is available via [CSE-Toolkit Kent and Medway - September 2017 - Medway Safeguarding Children Partnership \(medwayscp.org.uk\)](https://medwayscp.org.uk)

Staff recognise that any child from any walk of life is vulnerable to CSE, for many children they will not recognise that they are a victim and will often be closer to those abusing them than those trying to help them. Staff recognise that children can be abused in the real world and the virtual world. Research tells us that some children are more vulnerable to CSE; these may include children who are looked after and children with learning disabilities. It is also estimated that a third of victims are boys although research tells us that like child sexual abuse, girls are more likely to disclose than boys.

With regard to consent, some children will believe that they are in a loving relationship, no child, no matter what age can give consent to sexual abuse even where a child may believe that they are engaging voluntarily in sexual activity with the person or persons who is exploiting them. It is not only adults who groom and exploit children and that they can be groomed by peers and/or as part of gang related activity.

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## Potential Indicators of CSE



### SEXUAL HEALTH & BEHAVIOUR

Sexually transmitted infections; pregnancy, terminations; inappropriate sexualised behaviour(s)



### ABSENT FROM SCHOOL OR REPEATEDLY RUNNING AWAY

Truancy or regularly going missing / running away



### FAMILIAL ABUSE AND / OR PROBLEMS AT HOME

Familial abuse or neglect; forced marriage or 'honour-based' violence; domestic abuse; substance / alcohol misuse; parental mental ill-health; homelessness / being in temporary accommodation; privately fostered / Looked After



### EMOTIONAL AND PHYSICAL CONDITION

Suicidal ideation, self-harm; low self-esteem / confidence; confusion re sexual orientation; learning difficulties / disability; poor mental health; unexplained injuries or changes in appearance



### GANGS, OLDER AGE GROUPS, INVOLVED IN CRIMINALITY

Direct involvement with gang members; involvement in criminal activity; involvement with older individuals or lacks same-age friends, contact with victims of CSE



### USE OF TECHNOLOGY, SEXUAL BULLYING

Evidence of sharing nudes/semi-nudes', sexualised communication online; problematic use of internet / social networking; multiple phones, spending more time on phones, being secretive



### ALCOHOL OR DRUG MISUSE

Problematic substance use, slurred speech, irritable, difficulty balancing, evidence of drug or alcohol use,



### RECEIPT OF UNEXPLAINED GIFTS OR MONEY

Unexplained finances / gifts including mobile phone credit, clothes, jewellery, money



### DISTRUST OF AUTHORITY FIGURES

Resistance to communicating with parents, teachers, social workers, foster carers, health professionals, Police et al

## 4.6 Serious Violence:

At our school, all staff are aware of the indicators that may signal that children are at risk from, or are involved in serious violence. These may include:

- Increased absence from education
- A change in friendships or relationships with older individuals or groups
- A significant decline in performance

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- Signs of self-harm or a significant change in wellbeing
- Signs of assault or unexplained injuries
- Unexplained gifts or new possessions

These may indicate that children have been approached by, or involved with, individuals associated with criminal networks or gangs.

[The Police, Crime, Sentencing and Courts Act 2022](#) (“the PCSC Act”) makes clear that violence is not limited to physical violence against the person. It provides that, for the purposes of the [Serious Violence Duty \(December 2022\)](#), violence includes;

- domestic abuse,
- sexual offences,
- violence against property and
- threats of violence but does not include terrorism.

#### 4.7 Children affected by Gangs and Youth Violence:

Defining a gang is difficult. They tend to fall into three categories: peer groups, street gangs and organised crime groups. It can be common for groups of children and young people to gather in public places to socialise, and although some peer group gatherings can lead to increased antisocial behaviour and low-level youth offending, these activities should not be confused with the serious violence of a street gang.

A street gang can be described as a relatively durable, predominantly street-based group of children who see themselves (and are seen by others) as a discernible group for whom crime and violence is integral to the group's identity.

A street gang will engage in criminal activity and violence and may lay claim over territory (not necessarily geographical for example it could include an illegal economy territory). They have some form of identifying structure featuring a hierarchy usually based on age, physical strength, propensity to violence or older sibling rank. There may be certain rites involving antisocial or criminal behaviour or sex acts in order to become part of the gang. They are in conflict with other similar gangs.

There is a distinction between organised crime groups and street gangs based on the level of criminality, organisation, planning and control. However, there are significant links between different levels of gangs for example street gangs can be involved in drug dealing on behalf of organised criminal groups young men and women may be at risk of sexual exploitation in these groups.

Children may be involved in more than one 'gang', with some cross-border movement, and may not stay in a 'gang' for significant periods of time. Children rarely use the term 'gang', instead they used terms such as 'family', 'breddrin', 'crews', 'cuz' (cousins), 'my boys' or simply 'the people I grew up with'.

#### **Risks**

The risk or potential risk of harm to the child may be as a victim, a gang member or both - in relation to their peers or to a gang-involved adult in their household. Teenagers can be particularly vulnerable to recruitment into gangs and involvement in gang violence. This vulnerability may be exacerbated by risk factors in an individual's background, including violence in the family, involvement of siblings in gangs, poor educational attainment, or poverty or mental health problems.

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A child who is affected by gang activity, criminal exploitation or serious youth violence can be at risk of significant harm through physical, sexual and emotional abuse. Girls may be particularly at risk of sexual exploitation.

Violence is a way for gang members to gain recognition and respect by asserting their power and authority in the street, with a large proportion of street crime perpetrated against members of other gangs or the relatives of gang members.

The specific risks for males and females may be quite different. There is a higher risk of sexual abuse for females, and they are more likely to have been coerced into involvement with a gang through peer pressure than their male counterparts.

There is evidence of a high incidence of rape of girls who are involved with gangs. Some senior gang members pass their girlfriends around to lower ranking members and sometimes to the whole group at the same time. Very few rapes by gang members are reported.

Gang members often groom girls at school using drugs and alcohol, which act as disinhibitors, and also create dependency, and encourage / coerce them to recruit other girls through school / social networks.

### Indicators

- Child withdrawn from family;
- Sudden loss of interest in school or change in behaviour. Decline in attendance or academic achievement (although it should be noted that some gang members will maintain a good attendance record to avoid coming to notice);
- Being emotionally 'switched off', but also containing frustration / rage;
- Starting to use new or unknown slang words;
- Holding unexplained money or possessions;
- Staying out unusually late without reason, or breaking parental rules consistently;
- Sudden change in appearance – dressing in a particular style or 'uniform' similar to that of other young people they hang around with, including a particular colour;
- Dropping out of positive activities;
- New nickname;
- Unexplained physical injuries, and/or refusal to seek / receive medical treatment for injuries;
- Graffiti style 'tags' on possessions, schoolbooks, walls;
- Constantly talking about another young person who seems to have a lot of influence over them;
- Breaking off with old friends and hanging around with one group of people;
- Associating with known or suspected gang members, closeness to siblings or adults in the family who are gang members;
- Starting to adopt certain codes of group behaviour e.g. ways of talking and hand signs;
- Going missing;

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- Being found by Police in towns or cities many miles from their home;
- Expressing aggressive or intimidating views towards other groups of young people, some of whom may have been friends in the past;
- Being scared when entering certain areas; and
- Concerned by the presence of unknown youths in their neighbourhoods.

Dependant on how the young person communicates to you that they are in a gang, will influence your response. Such a statement may be their declaration of allegiance to their chosen gang or conversely, it may be a cry for help, asking for you to acknowledge their problem and for you to support them to get away from the gang

An important feature of gang involvement is that the more heavily a child is involved with a gang, the less likely they are to talk about it.

There are links between gang-involvement, criminal exploitation and young people going missing from home or care. Some of the factors that can draw gang-involved young people away from home or care into going missing are linked to their involvement in carrying out drugs along county lines. There may be gang-associated child sexual exploitation and relationships that can be strong pull factors for girls who go missing.

Where we have concerns relating to gang involvement or youth violence we will follow the Local Safeguarding Partnership procedures, [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.kscmp.org.uk)

[Gang Activity, Youth Violence and Criminal Exploitation... \(trixonline.co.uk\)](https://www.trixonline.co.uk)

Further advice is provided in the Home Office publications; [Preventing Youth Violence and gang involvement](#)

#### 4.8 Criminal Exploitation (CCE) and County Lines:

Child Criminal exploitation is defined where an individual or group takes advantage of an imbalance of power to coerce, control, manipulate or deceive a child 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 the threat of violence. The victim may have been criminally exploited even if the activity appears consensual. CCE does not always involve physical contact; it can also occur through the use of technology.

CCE can include children being forced to work in cannabis factories, being coerced into moving drugs or money across the country (county lines) forced to shoplift or pickpocket, or to threaten other young people.

Dangers associated with CCE:

- being subject to threats, blackmail and violence
- being arrested, including for crimes committed by the gang that they have not directly committed under the law of joint enterprise.
- having their safety or the safety of friends and family threatened
- risk of emotional abuse
- abusing drugs, alcohol and other substances
- being exploited and forced to commit crimes
- not being able to leave or cut off ties with the gang
- risk of physical harm, rape and sexual abuse

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- risk of severe injury or being killed
- long term impact on education and employment options

County Lines is a term used to describe gangs and organised criminal networks involved in exporting illegal drugs into one or more importing areas [within the UK], using dedicated mobile phone lines or other form of 'deal line'. They are likely to exploit children and vulnerable adults to move [and store] the drugs and money and they will often use coercion, intimidation, violence (including sexual violence) and weapons.

County lines is a major, cross-cutting issue involving drugs, violence, gangs, safeguarding, criminal and sexual exploitation, modern slavery, and missing persons

A typical county lines scenario is defined by the following components:

- A group (not necessarily affiliated as a gang) establishes a network between an urban hub and another location, into which drugs (primarily heroin and crack cocaine) are supplied.
- A branded mobile phone line is established in the market, to which orders are placed by introduced customers. The line will commonly (but not exclusively) be controlled by a third party, remote from the market.
- The group exploits young or vulnerable persons, to achieve the storage and/or supply of drugs, movement of cash proceeds and to secure the use of dwellings (commonly referred to as cuckooing).
- The group or individuals exploited by them regularly travel between the urban hub and the other location, to replenish stock and deliver cash.
- The group is inclined to use intimidation, violence and weapons, including knives, corrosives and firearms.

Some indicators of county lines involvement and child criminal exploitation are listed below, with those at the top of particular concern:

- Persistently going missing from school or home and / or being found out-of-area;
- Unexplained acquisition of money, clothes, or mobile phones;
- Excessive receipt of texts / phone calls;
- Relationships with controlling / older individuals or groups;
- Leaving home / care without explanation;
- Suspicion of physical assault / unexplained injuries;
- Parental concerns;
- Carrying weapons;
- Significant decline in school results / performance;
- Gang association or isolation from peers or social networks;
- Self-harm or significant changes in emotional well-being.

### Common terminology

- **Cuckooing** - where gangs establish a base in the market location by taking over the homes of local vulnerable adults by force or coercion in a practice referred to as 'cuckooing';

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- **Going country** - term that describes county lines activity. It can also mean the act of travelling to another city/town to deliver drugs or money;
- **Trapping** - the act of moving drugs from one town to another or the act of selling drugs in one;
- **Trap House** - A building used as a base from where drugs are sold (or sometimes manufactured). These houses usually are occupied by someone (usually adult drug users but sometimes young people are forced to stay in trap houses) location;
- **Trap Line** - when someone owns a mobile phone specifically for the purpose of running and selling of drug.

Where we have concerns regarding county lines we will follow, the Local Safeguarding Partnership procedures [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.kscmp.org.uk)

[Criminal Exploitation - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.kscmp.org.uk)

[County Lines Toolkit For Professionals](#) - The Children's Society in partnership with Victim Support and National Police Chiefs' Council

Further information is available in the Home Office publication [Criminal exploitation of children and vulnerable adults: county lines](#)

#### 4.9 Modern Slavery and Human Trafficking:

Modern slavery is a form of organised crime in which individuals including children and young people are treated as commodities and exploited for criminal gain. Children are recruited, moved or transported and then exploited, forced to work or sold. The Modern Slavery Act 2015 (applicable mostly in England and Wales) includes two substantive offences i) human trafficking, and ii) slavery, servitude and forced or compulsory labour.

Boys and girls of all ages are affected and can be trafficked into, within ('internal trafficking'), and out of the UK for many reasons and all forms of exploitation - e.g. sex trafficking - children can be groomed and sexually abused before being taken to other towns and cities where the sexual exploitation continues. Victims are forced into sexual acts for money, food or a place to stay. Other forms of slavery involve children who are forced to work, criminally exploited and forced into domestic servitude. Victims have been found in brothels or saunas, farms, in factories, nail bars, car washes, hotels and restaurants and commonly are exploited in cannabis cultivation. Debt bondage (forced to work to pay off debts that realistically they will never be able to), organ harvesting, and benefit fraud are other types of modern slavery.

Children and young people may be exploited by parents, carers or family members. Often the child or young person will not realise that family members are involved in the exploitation.

Some young people may not be victims of human trafficking but are still victims of modern slavery. Slavery, servitude and forced or compulsory labour may also be present in trafficking cases; however, not every young person who is exploited through forced labour has been trafficked.

##### Indicators:

A reluctance to seek help - victims may be wary of the authorities for many reasons such as not knowing who to trust or a fear of deportation or concern regarding their immigration status and may avoid giving details of accommodation or personal details;

- The child seeming like a willing participant in their exploitation, e.g. involvement in lucrative criminal activity - however this does not mean they have benefitted from the proceeds;

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- Discrepancies in the information victims have provided due to traffickers forcing them to provide incorrect stories;
- An unwillingness to disclose details of their experience due to being in a situation of dependency;
- Brought or moved from another country;
- An unrelated or new child discovered at an address;
- Unsatisfactory living conditions - may be living in dirty, cramped or overcrowded accommodation;
- Missing - from care, home or school - including a pattern of registration and de-registration from different schools;
- Children may be found in brothels and saunas;
- Spending a lot of time doing household chores;
- May be working in catering, nail bars, caring for children and cleaning;
- Rarely leaving their home, with no freedom of movement and no time for playing;
- Orphaned or living apart from their family, often in unregulated private foster care;
- Limited English or knowledge of their local area in which they live;
- False documentation, no passport or identification documents;
- Few or no personal effects - few personal possessions and tend to wear the same clothing;
- No evidence of parental permission for the child to travel to the UK or stay with the adult;
- Little or no evidence of any pre-existing relationship with the adult or even an absence of any knowledge of the accompanying adult;
- Significantly older partner
- Underage marriage.

**Physical Appearance** - Victims may show signs of physical or psychological abuse, look malnourished or unkempt, or appear withdrawn. Physical illnesses - including work-related injuries through poor health and safety measures, or injuries apparently as a result of assault or controlling measures. There may be physical indications of working (e.g. overly tired in school or indications of manual labour).

**Sexual health indicators** - sexually transmitted infections, or pregnancy; injuries of a sexual nature and /or gynaecological symptoms.

**Psychological indicators** - suffering from post-traumatic stress disorder which may include symptoms of hostility, aggression and difficulty with recalling episodes and concentrating. Depression/self-harm and/or suicidal feelings; an attitude of self-blame, shame and extensive loss of control; drug and or/alcohol use.

Where we have concerns relating to Modern Slavery, we will follow the Local Safeguarding Partnership procedures [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.kscmp.org.uk)

[Children from Abroad, including Victims of Modern Slavery... \(trixonline.co.uk\)](https://www.trixonline.co.uk)

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#### 4.10 Child on Child Abuse:

The term victim, it is a widely used and understood term. We recognise that not every child who has been subjected to abuse recognises themselves as a victim, in some cases we will use the term victim and alleged perpetrator or perpetrator where appropriate. We will also use the terms a child who has harmed and a child who has been harmed.

At our school, we recognise that children are capable of abusing other children. Any incidents of alleged or suspected abuse by children or young people will be taken seriously and reported to the DSL immediately. Staff must also be alert to the possibility that a child or young person who has harmed another may also be a victim and, as such, they may have significant unmet needs themselves. Child on child abuse might take various forms; for example (and the following list is not exhaustive):

- Bullying (including cyberbullying, prejudice-based and discriminatory bullying);
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling, or otherwise causing physical harm;
- Sexual violence, such as rape, assault by penetration and sexual assault;
- Sexual harassment, such as sexual comments, remarks, jokes and online sexual harassment, which may be standalone or part of a broader pattern of abuse;
- 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;
- Upskirting. Which typically involves taking a picture under a person clothing without them knowing, with the intention of viewing their genital or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm;
- consensual and non-consensual sharing of nudes and semi-nude images and/or videos;
- Initiation/hazing type violence and rituals

We recognise that addressing inappropriate behaviour (even if it appears to be relatively innocuous) can be an important intervention that helps prevent problematic, abusive and/or violent behaviour in the future.

We know that child on child abuse might manifest differently for boys and girls e.g. girls being touched inappropriately or coerced into sexual activity, boys being initiated into gangs etc. Such abuse may also be indicative of a previous or ongoing abusive experience for a perpetrator and / or victim and research indicates that children with SEN, additional or complex needs are particularly vulnerable.

Staff will be mindful of the added vulnerability of children and young people who have been the victims of violent crime, including the risk that they may respond to this by abusing younger or weaker children. The alleged perpetrator is likely to have considerable unmet needs, as well as posing a significant risk of harm to other children. Evidence suggests that such children may have suffered considerable disruption in their lives, may have witnessed or been subjected to physical or sexual abuse, may have problems in their educational development and may have committed other offences. They may, therefore, be suffering, or at risk of suffering, significant harm and be in need of protection. Consequently, any plan to reduce and / or manage risk posed by a child who is alleged to have harmed another must also address their needs and [multi-agency] responses should not be about criminalising children unnecessarily.

We recognise that is not enough 'just' to respond to incidents should they arise. Therefore, we will **minimise the possibility of child on child abuse** by:

- Creating and maintaining an environment which is safe, caring, respectful and stimulating, and which seeks to promote the social, physical and moral development of our pupils;
- Ensuring that core safeguarding and child protection policies and procedures link to, are understood and implemented in conjunction with other, related policies and procedures including PSHE, SRE,

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Online Safety, Anti-bullying, Behaviour, Positive Behaviour Support, Whistle Blowing, Staff Code of Conduct, Low Level Concerns and Allegations against Staff;

- Actively discouraging and challenging all unacceptable behaviour, including all forms of bullying and abuse. We will also challenge the attitudes and behaviours which underpin it;
- Having in place clear strategies for promoting positive behaviour, including a system of rewards and sanctions that is clear to staff, pupils and parents / carers alike;
- Maximising opportunities within the curriculum, via PSHE, assemblies and focused weeks to deliver key keeping safe and associated behavioural, spiritual, moral, social and cultural messages - including the use of external resources and expertise e.g.; the NSPCC's 'Pants / Underwear Rule' guidance and drawing upon the expertise of external speakers and groups;
- Striking appropriate balances between pupil's right to privacy and the need for proportionate supervision to keep them safe in and around school;
- Ensuring that all adults associated with our school understand their role and responsibilities as role models;
- Ensuring that staff and any volunteers are trained to look for and respond appropriately to any potential indicators of peer abuse;
- Seeking appropriate and timely advice where uncertainty exists and / or concerns arise i.e. from Children's Social Care;
- Ensuring that children, and parents, know how to raise any worries or concerns with adults / staff in school and by signposting them to appropriate sources of advice and support outside the school.

#### 4.11 Sexual Violence and Sexual Harassment between children in the school:

At our school we recognise that sexual violence and sexual harassment can occur between two children of any age and sex, from primary through to secondary stage and into colleges. That it can also occur through a group of children sexually assaulting or sexually harassing a single child or group of children. Sexual violence and sexual harassment exist on a continuum and may overlap; they can occur online and/or face to face and can occur simultaneously. It is never acceptable. The starting point regarding any report of this kind of behaviour is a zero tolerance approach, that is never acceptable and will not be tolerated. We will take each report seriously and ensure that both the victim and perpetrator are supported. Whilst **any** report of sexual violence or sexual harassment will 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. In our school, any victim will be taken seriously, will be supported and kept safe.

In our school, a victim will never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment and will not be made to feel ashamed for making a report.

It is recognised that Children who are victims of sexual violence and sexual harassment wherever it happens, will likely find the experience stressful and distressing. This will, in all likelihood, adversely affect their educational attainment and will be exacerbated if the child who has harmed or allegedly harmed attends our school also. We are aware that safeguarding incidents and/or behaviours can be associated with factors outside of our school including intimate personal relationships.

In our school:

- Maintain an attitude of **'it could happen here'**
- sexual violence and sexual harassment are not acceptable, will never be tolerated and are not an inevitable part of growing up;
- we will take concerns seriously and not dismiss sexual violence or sexual harassment as "banter", "part of growing up", "just having a laugh", "part of growing up" or "boys being boys" and recognise that this can lead to a culture of unacceptable behaviours and an unsafe environment for children;
- we will challenge behaviour (potentially criminal in nature), such as grabbing bottoms, breasts and genitalia, pulling down trousers, flicking bras and lifting up skirts and recognise that dismissing or tolerating such behaviours risks normalising them; and
- we recognise that all of the above can be driven by wider societal factors beyond the school, such as everyday sexist stereotypes and everyday sexist language.

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In line with the Sexual Offences Act 2003, **Sexual violence** is;

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

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

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

**Causing someone to engage in sexual activity without consent:** A person (A) commits an offence if: s/he intentionally causes another person (B) to engage in an activity, the activity is sexual, B does not consent to engaging in the activity, and A does not reasonably believe that B consents. (This could include forcing someone to strip, touch themselves sexually, or to engage in sexual activity with a third party.)

**What is consent?** Consent is about having the freedom and capacity to choose. Consent to sexual activity may be given to one sort of sexual activity but not another, e.g. to vaginal but not anal sex or penetration with conditions, such as wearing a condom. Consent can be withdrawn at any time during sexual activity and each time activity occurs. Someone consents to vaginal, anal or oral penetration only if s/he agrees by choice to that penetration and has the freedom and capacity to make that choice. Further information about consent can be found here: [Rape Crisis England & Wales - Sexual consent](#)

- a child under the age of 13 can never consent to any sexual activity;
- the age of consent is 16;
- sexual intercourse without consent is rape

**Sexual Harassment** is unwanted sexual conduct of a sexual nature and can occur on or offline. In the context of this policy, it is child on child sexual harassment.

Sexual harassment is likely to: violate a child's dignity, and/or make them feel intimidated, degraded or humiliated and/or create a hostile, offensive or sexualised environment. Sexual harassment can include the list in not exhaustive:

#### Offline behaviour

- sexual comments, such as: telling sexual stories, making lewd comments, making sexual remarks about clothes and appearance and calling someone sexualised names;
- sexual "jokes" or taunting;
- physical behaviour, such as: deliberately brushing against someone, interfering with someone's clothes (The DSL will consider when any of this crosses a line into sexual violence – and experience of the victim will be taken in account when considering this) and displaying pictures, photos or drawings of a sexual nature;

#### Online behaviour

This may be standalone, or part of a wider pattern of sexual harassment and/or sexual violence.

It may include:

- consensual and non-consensual sharing of sexual images and videos;
- sharing unwanted explicit content
- sexualised online bullying;
- unwanted sexual comments and messages, including, on social media;
- sexual exploitation; coercion and threats.
- Upskirting (is a criminal offence)

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## Upskirting

The Voyeurism (Offences) Act, which is commonly known as the Upskirting Act, came into force on 12 April 2019. 'Upskirting' is where someone takes a picture under a person's clothing (not necessarily a skirt) without their permission and or knowledge, with the intention of viewing their genitals or buttocks (with or without underwear) to obtain sexual gratification, or cause the victim humiliation, distress or alarm. It is a criminal offence. Anyone of any gender can be a victim.

## Harmful Sexual Behaviour

Children's sexual behaviour exists on a wide continuum, 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

When considering harmful sexual behaviour, ages and the stages of development of the children are critical factors to consider. Sexual behaviour between children can be considered harmful if one of the children is much older, particularly if there is more than two years' difference or if one of the children is pre-pubescent and the other is not. However, a younger child can abuse an older child, particularly if they have power over them, for example, if the older child is disabled or smaller in stature.

Further information is available via [Understanding Sexual Behaviour in Children | NSPCC](#)

## Responding to Allegations of Child on Child Abuse Inc. sexual violence and sexual harassment between children in the school

Our school recognises that the initial response to a report from a child is incredibly important and how we respond to a report can encourage or undermine the confidence of future victims of sexual violence and sexual harassment to report or come forward. We recognise that where school's do not recognise, acknowledge or understand the scale of harassment and abuse and/or downplaying of some behaviours can actually lead to a culture of unacceptable behaviour. We recognise that it is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe and that a victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment and nor should a victim ever be made to feel ashamed for making a report. Staff will ensure that children and young people understand that the law is in place to protect them rather than criminalise them. It is recognised that children may not find it easy to tell staff about their abuse verbally. Children can show signs or act in ways that they hope adults will notice and react to. In some cases, the victim may not make a direct report. For example, a friend may make a report, or a member of school staff may overhear a conversation that suggests a child has been harmed or a child's own behaviour might indicate that something is wrong.

All staff will follow the Listening to Children and Managing disclosures section of this policy when responding to **any** concerns raised.

All staff will immediately report the concern to the DSL and raise the concern on the safeguarding database.

Everyone in the school recognises the need for sensitivity and proportionality when dealing with these difficult issues.

The following rules of thumb will apply to their management:

- The wishes of the victim in terms of how they want to proceed;
- The DSL will seek appropriate and timely advice wherever necessary and follow the Local Safeguarding Partnership procedures. The safety and best interests of victim(s) will be the paramount consideration at all times. The DSL will also consider the possibility and take account of any wider and / or ongoing risk(s) to others;
- The needs of the victim and the needs of the alleged perpetrator will be considered separately;

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- In addition to safeguarding the identified victim, the school and other agencies should consider (i) whether the alleged perpetrator seems to pose a risk to any other children; and (ii) how best to manage that risk;
- Children and young people who abuse others are responsible for their abusive behaviour, and safeguarding action must include addressing their behaviour and its causes;
- The alleged perpetrator is likely to have considerable unmet needs as well as posing a significant risk of harm to other children;
- Where necessary, the school will participate fully in a co-ordinated approach by Children’s Social Care, youth offending, education and health agencies;
- Where the concerns are of a sexual nature, the DSL will need to consider completing a Safeguarding Sexual Behaviour Safety Plan; See *flowchart (Appendix 6)*
- Where a Safeguarding Sexual Behaviour Safety Plan is undertaken, the DSL will make a referral to the Witherslack Group Sexual Behaviour Service See *flowchart (Appendix 6)*. Documents accessed via the Shared network drive – safeguarding – schools – Sexual Behaviour Service Documents
- Where it is considered that there is a need for an in house Risk Management Meeting, and if needed to speak to the Head of Safeguarding regarding this.

**DSL considerations:**

- Take into account the wishes of the victim in terms of how they want to proceed. This recognises the that victims should be given as much control as is reasonably possible over decisions regarding how any investigation will be progressed and any support they will be offered.
- The wishes of parents where the child is not of sufficient age and understanding to make informed decisions around how they want to proceed
- The nature of the alleged incident/s, including whether a crime may have been committed and consideration of Harmful Sexual Behaviour
- The ages of children involved
- The developmental stages of the children involved
- Any power imbalance by either age (particularly if there is more than 2 years difference or 1 of the children is pre-pubescent and the other is not) or ability (a younger child can abuse an older child particularly if they have power over them, for example, if the older child is disabled or smaller in stature)
- That sexual violence and sexual harassment can take place within intimate personal relationships between children
- Intra familial harms and any necessary support for siblings following incidents
- Is the alleged incident a one off or part of a pattern of concerning behaviour
- Are there ongoing risks to the child who has been harmed, other pupils or children or members of staff
- Any other issues and the wider context

**DSL Actions:**

**Following analysing all the available information as a whole the DSL may;**

- Use [Hackett’s continuum](#) to screen where the behaviour sits and therefore enable decision making
- Refer the matter to Children’s Social Care in respect of the victim and alleged perpetrator and/or Refer the matter to the police [When to call the Police](#)
- Deal with the matter in the school including additional work within PSHE/RSE
- Enable any child involved, who needs it, to access support in the school via pastoral or clinical services
- Enable any child involved, who needs it, access/referral to external support (see other sources of support below)
- Where the threshold for Children’s Social Care is not met, discuss a referral to Early Help with the parent/carers and follow the LSCP procedures for Early Help

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- Discuss the matter with the Head of Safeguarding with a view to putting in place a Safeguarding Sexual Behaviour Safety Plan (*Appendix 6*)
- Where the alleged incident has taken place in school, discuss with the Head Teacher, sanctions in line with the school behaviour policy
- Where the matter has happened in the school, discuss with the Head Teacher, any action required to make the area safe

#### Toolkits

- [Childnet - STAR SEND Toolkit](#) equips, enables and empowers educators with the knowledge they need to support young people with special educational needs and disabilities.
- [Childnet - Just a joke?](#) provides lesson plans, activities, a quiz and teaching guide designed to explore problematic online sexual behaviour with 9-12 year olds.
- [Childnet - Step Up, Speak Up](#) a practical campaign toolkit that addresses the issue of online sexual harassment amongst young people aged 13-17 years old.
- [Preventing Harmful Sexual Behaviour toolkit](#) by the Lucy Faithfull Foundation, the toolkit contains links to useful information, resources and support, including practical tips to prevent HSB.
- [NSPCC - Harmful sexual behaviour framework](#) An evidence-informed framework for children and young people displaying HSB.
- [Contextual Safeguarding – Beyond Referrals](#) resources for addressing Harmful sexual behaviour and extra-familial harm in schools.

Further information is also available at:

[Disrespect NoBody campaign](#)

LGFL '[Undressed](#)' provided schools advice about how to teach young children about being tricked into getting undressed online in a fun way without scaring them or explaining the motives of sex offenders.

Other sources of support:

[Rape Crisis](#)

[The Survivors Trust](#)

[Victim Support](#)

[Internet Watch Foundation](#)

[Shorespace.org.uk](#)

NSPCC Report Abuse in Education Helpline: 0800 136 663 - Monday to Friday 08.00 -22.00 and 09.00-18.00 at weekends OR email [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

Where we have concerns relating to child on child abuse, we will follow the Local Safeguarding Partnership procedures [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)

[Children who are Sexually Active or Displaying Harmful... \(trixonline.co.uk\)](#)

The school will also work within Part 5 of Keeping Children Safe in Education 2024

#### 4.12 Children requiring mental health support Inc. self-harm and suicidal ideation:

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At our school, we recognise that we have an important role to play in supporting the mental health and wellbeing of our pupils. At our school we have a dedicated mental health practitioner who any child can access when required, as well as pupils being able to access scheduled therapy sessions.

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

In our school, we recognise that education settings are in a unique position, as they are able to help prevent mental health problems by promoting resilience as part of an integrated, whole school approach that is tailored to the needs of pupils.

A whole school approach is one that goes beyond the teaching in the classroom to pervade all aspects of school life, including:

- culture, ethos and environment: the health and wellbeing of pupils and staff is promoted through the 'hidden' or 'informal' curriculum, including leadership practice, the school's policies, values and attitudes, together with the social and physical environment;
- teaching: using the curriculum to develop pupils' knowledge about health and wellbeing; and
- Partnerships with families and the community: proactive engagement with families, outside agencies, and the wider community to promote consistent support for children's health and wellbeing.

More information can be found at [Mental Health and Behaviour in schools guidance](#)

Where staff have a mental health concern that is also a safeguarding concern, they must immediately report this to the DSL and follow up this conversation by recording the concern on the safeguarding database.

Where the concern they have does not relate to a safeguarding concern, they should discuss with the mental health practitioner in the school.

### **Self-Harm and Suicidal ideation**

Any concerns regarding self-harm or suicidal ideation should be considered under the Local Safeguarding Partnership procedures. Some children in 'acute need' may require Child in Need Section 17 support. This could include children who self-harm or disclose an intent to complete suicide. Broadly defined, self-harm refers to the deliberate attempt to physically injure oneself without causing death. This can include self-mutilation (e.g. cutting behaviours), self-poisoning, burning, scalding, banging, and hair pulling.

Although clearly damaging, alcohol and drugs misuse, eating disorders, unsafe sex and other excessively risky behaviour, such as dangerous driving, are not generally classified as self-harm and would be classed as risk taking behaviours.

If a child is suspected or found to be self-harming, the strategies that should be those determined by any existing plan, for example, in the child's Placement Plan. If no plan or strategy exists, all reasonable measures should be taken to reduce or prevent continuation of the behaviour. In all cases, consideration will be given to the DSL in conjunction with the clinical services team to undertake a Risk Management Plan and advice sort in relation to this. This may include providing additional supervision, minimising access to materials that may be used to self-harm or, as a last resort, use of Physical Intervention, advice to the parent /carer regarding a GP appointment with a view to a CAMHS referral or where there is an immediate threat to life, calling for assistance from the emergency services.

Where there are concerns about a child expressing intent to complete suicide, the DSL will discuss this with the clinical services team and where advised by the clinical services team, will work with them in undertaking a Suicide and Self Harm Risk Assessment (SSHIRA)

Where we have concerns relating to the suicide and self-harm we will follow the Local Safeguarding Partnership procedures [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#) [Self Harm and Suicidal Behaviour \(trixonline.co.uk\)](#) [domestic abuse](#)

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#### 4.13 Bullying including online Bullying or cyberbullying:

While bullying between children is not a separate category of abuse and neglect, it is a very serious issue that can cause anxiety and distress. All incidences of bullying, including cyber-bullying and prejudice-based bullying should be reported and will be managed through our anti-bullying policy. Cyberbullying is the use of mobile phones; instant messaging, e-mail, chat rooms or social networking sites such as Facebook and Twitter to harass threaten or intimidate someone. One of the issues with cyberbullying is the increasingly early access to these technologies.

Examples are:

- Encouraging a child to self-harm or end their own life;
- Setting up false accounts and posting within that online account;
- Trolling – the sending of messages that are upsetting or menacing via social media;
- Hacking accounts in order to embarrass the child or cause trouble for them;
- Encouraging voting in an abusive pole;
- Racism, sexism or homophobia;
- Setting up hate sites or groups in relation to a particular child;
- Sharing nudes and semi-nudes.

Where we have concerns, we will follow the Local Safeguarding Partnership procedures relating to bullying:

[Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](https://www.kscmp.org.uk) [Bullying \(trixonline.co.uk\)](https://www.trixonline.co.uk)

#### 4.14 Children who are lesbian, gay, bisexual, or gender questioning:

We recognise the fact that a child or a young person may be lesbian, gay, bisexual or gender questioning is not in itself an inherent risk factor for harm. However, these children can be targeted by other children. In some cases, a child who is perceived by other children to be lesbian, gay, bisexual or gender questioning (whether they are or not) can be just as vulnerable as children who identify as LGBT.

Where children are gender questioning, our school will consider the board range of their individual needs, working in partnership with the child's parents/carers (unless to do so would constitute a risk of significant harm) and will signpost the child and parents to relevant services including relevant clinical services as well as discussing how Witherslack Group Clinical services can support the child and/or family.

School staff are aware that risks can be compounded where children who are lesbian, gay, bisexual, or gender questioning lack a trusted adult with whom they can be open. School staff will endeavour to reduce the additional barriers faced and create a culture where children can speak out or share their concerns with members of staff.

#### 4.15 Domestic Abuse:

The Domestic Abuse Act 2021 defines Domestic Abuse as

Behaviour of a person (“A”) towards another person (“B”) is “domestic abuse” if—

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- A and B are each aged 16 or over and are personally connected to each other, and
- the behaviour is abusive.

Behaviour is “abusive” if it consists of any of the following—

- physical or sexual abuse;
- violent or threatening behaviour;
- controlling or coercive behaviour;
- economic abuse
- psychological, emotional or other abuse;

and it does not matter whether the behaviour consists of a single incident or a course of conduct.

### **Controlling behaviour**

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent 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**

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

### **Economic abuse**

Economic abuse means any behaviour that has a substantial adverse effect on B’s ability to—

- acquire, use or maintain money or other property, or
- obtain goods or services.

### **Personally Connected**

Personally connected means two people are “personally connected” to each other if any of the following applies—

- they are, or have been, married to each other;
- they are, or have been, civil Partnership of each other;
- they have agreed to marry one another (whether or not the agreement has been terminated);
- they have entered into a civil Partnership agreement (whether or not the agreement has been terminated);
- they are, or have been, in an intimate personal relationship with each other;
- they each have, or there has been a time when they each have had, a parental relationship in relation to the same child (this means the person is a parent of the child, or the person has parental responsibility for the child)
- they are relatives.

Domestic abuse can encompass a wide range of behaviours and may be a single incident or a pattern of incidents. That abuse can be, but is not limited to, psychological, physical, sexual,

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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 which can have a detrimental and long-term impact on their health, well-being, development, and ability to learn.

We recognise that all children who witness or live in a household where domestic abuse occurs, even if they don't witness it, can be adversely affected by it in the context of their home life where it occurs between family members. Exposure to domestic abuse can have a serious, long lasting emotional and psychological impact on children, In some cases, a child may blame themselves for the abuse or may have had to leave the family home as a result.

Operation Encompass provides an advice and helpline for education staff who are concerned about children who may have experienced domestic abuse 08.00 to 13.00 Monday to Friday 0204 513 9990 (charged at local rate)

Where there are concerns that any young person is a victim of, witness to domestic abuse or is a perpetrator, then we will follow the Local Safeguarding Partnership guidance [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)

[Domestic Abuse \(trixonline.co.uk\)](#)

Where a teenager is experiencing domestic abuse in

Further information is available via:

[NSPCC: UK domestic-abuse signs symptoms effects](#)

[Refuge, the largest UK domestic abuse organisation for women](#)

[Young people and domestic abuse spotlight - SafeLives](#)

[Domestic abuse: specialist sources of support - GOV.UK \(www.gov.uk\)](#) (includes information for adult victims, young people facing abuse in their own relationships and parents experiencing child to parent violence/abuse)

[Teen-Safety-Plan.docx \(live.com\)](#) Safety plan for young people in intimate partner relationships

[Safety plan booklet](#) for primary age children

[Home : Operation Encompass](#) (includes information for schools on the impact of domestic abuse on children)

#### 4.16 Radicalisation and Extremism:

The government definition of radicalisation is:

**Radicalisation** is defined as – ‘the process by which people come to support terrorism and extremist ideologies associated with terrorist groups.’

**Extremism** is defined as – ‘the promotion or advancement of an ideology based on violence, hatred or intolerance, that aims to:

1. negate or destroy the fundamental rights and freedoms of others; or
2. undermine, overturn or replace the UK's systems of liberal parliamentary democracy and democratic rights or
3. intentionally create a permissive environment for others to achieve the results in (1) or (2) \_

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**Terrorism** is defined as ‘an action that endangers or causes serious violence to a person/people; causes serious damage to property or seriously interferes with or disrupts an electronic system. The use or threat **must** be designed to influence the government or to intimidate the public and is made for the purpose of advancing a political, religious, or ideological cause’.

**Prevent** is the name given to the Government's strategy to respond to the challenge of extremism; it is part of its broader counter terrorism strategy which is known as **Contest**. We recognise that Prevent is an integral part of safeguarding in the school that it is not separate and does not stand alone. For example, we will be mindful of its potential significance in respect of:

- Recruitment and selection;
- The use of external providers and speakers;
- Online safety;
- The curriculum and our duty to promote and support children's spiritual, moral, social and cultural development

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. There is no single way of identifying whether a child is likely to be susceptible to an extremist ideology. Background factors combined with specific influences such as family and friends may contribute to a child’s vulnerability. Similarly, radicalisation can occur through many different methods (such as social media or the internet) and settings (such as within the home).

Staff will be alert to changes in children’s behaviour that could indicate that they may be in need of help or protection. School staff will use their professional judgement in identifying children who might be at risk of radicalisation and act proportionately, which may include the DSL making a Prevent Referral.

Where we have concerns we will follow them Local Safeguarding Partnership procedures [Prevent - Kent Safeguarding Children Multi-Agency Partnership](#)

This will include making referrals to the Channel programme as appropriate.

For further information see the [Prevent Duty Guidance](#); (Sections 57-76 covers schools)

Further information is available via the website [educate against hate](#)

The Counter Terrorism and Security Act 2015 places a duty on a number of organisations, including schools, to prevent all radicalisation and extremism. The purpose is to protect children from harm and to ensure that they are taught in a way that is consistent with the law and British values.

In order to comply with the Prevent Duty:

- We have assessed the risk of pupils being drawn into radicalisation and have developed a prevent action plan to reduce this risk and this has been signed-off by school board;
- We will always conduct relevant checks in order to prohibit extremist speakers and events in the school.
- We have put strategies in place to manage access to extremist material.

**Our Single point of Contact in the school (SPOC):**

Hannah Rowe

**Our Prevent Officer:**

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Jess Harman - Prevent Coordinator  
Email: [jess.harman@kent.gov.uk](mailto:jess.harman@kent.gov.uk)

Nadine Permaul- Prevent Community Engagement Officer (PCEO)  
Email: [nadine.permaul@kent.gov.uk](mailto:nadine.permaul@kent.gov.uk)

### Channel Referrals:

[Report radicalisation or extremism \(Prevent\) - Kent County Council](#)

For any queries about making a referral, contact the Kent and Medway Prevent Team by emailing [prevent@kent.gov.uk](mailto:prevent@kent.gov.uk)

#### 4.17 Sharing Nudes and Semi-nudes:

The UK Council for Child Internet Safety in their guidance: Sharing nudes and semi-nudes: advice for education settings working with children and young people use the term nudes and semi-nudes to mean sending or posting nude or semi-nude images or live streams under the age of 18 off line. This could be via social media, gaming platforms, chat apps or forums. It could also involve sharing between devices via services like Apple's AirDrop which works offline.

The term 'nudes' is used as it is most commonly recognised by young people and more appropriately covers all types of image-sharing incidents. Alternative terms used by children and young people may include 'dick pics' or 'pics.'

The motivations for taking and sharing nude and semi-nude images, videos and live streams are not always sexually or criminally motivated. Such images may be created and shared consensually by young people who are in relationships, as well as between those who are not in a relationship. It is also possible for a young person in a consensual relationship to be coerced into sharing an image with their partner. Incidents may also occur where:

- children and young people find nudes and semi-nudes online and share them claiming to be from a peer
- children and young people digitally manipulate an image of a young person into an existing nude online
- images created or shared are used to abuse peers e.g. by selling images online or obtaining images to share more widely without consent to publicly shame

Where our school has concerns about sharing of nudes or semi-nudes we will follow the UK Council for Internet Safety guidance: [Sharing nudes and semi-nudes: advice for education settings working with children and young people](#)

All concerns regarding sharing of nudes or semi-nudes must be reported to the DSL immediately who will assess the situation on a case by case basis using the guidance in sections 1.6(a), 1.6(b) and section 2 of the above guidance to make informed decisions. As per the above guidance, we recognise that in many cases, we may respond to incidents without involving the police, for example where an incident can be defined as 'experimental' (see section 1.6a) and there is no evidence abusive or aggravating elements and will follow the advice on the circumstances in which this would be appropriate (section 2). **Where there are abusive and/or aggravating factors, incidents will always be referred to the police and/or Children's Social Care**

Where there is no referral to the police/CSC, it may be necessary to assist the child/parents in reporting it and/or removing the image from a website or elsewhere.

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Help and advice is available via the Professionals Online Safety Helpline (Monday to Friday 10am to 4pm)

Email: [helpline@saferinternet.org.uk](mailto:helpline@saferinternet.org.uk)

Telephone: 0344 381 4772

Further resources/support:

Childline/IWF [Report Remove](#) is a free tool that allows children to report nude or sexual images and/or videos of themselves that they think might have been shared online. Support is also available through [Take It Down \(ncmec.org\)](#)

#### 4.18 Staff dealing with Nudes and Semi-nudes - a quick guide:

Always	Never
<b>General</b>	
Inform the DSL immediately, record the incident, and act in accordance with school online safety and child protection policies and procedures	Ask the child or young person(s) involved to disclose information regarding the imagery View, download or share the imagery yourself ( if you have seen it as the child presented it to you – inform your DSL) Inform parents/carers or another member of staff
Explain to the young person that you need to report it and reassure them that they will receive help and support from the DSL	Say or do anything to blame or shame any young people involved Delete it or ask the child to delete it Ask the child to share or download
Confiscate and secure the device(s). Turn the device off and give it to the DSL	View the image, send, share or save the image anywhere, allow pupils to do any of the above
<b>Image has been shared across a school network, a website or a social network:</b>	
Identify the network and report immediately to the DSL	Send or print the image, move the material from one place to another.

#### The DSL role in searching devices, viewing and deleting imagery

The Education Act 2011 gives schools and/or teachers the power to seize and search an electronic device if they think there is good reason to do so i.e. if there is reason to believe it contains indecent images or extreme pornography. However, staff should exercise caution and bear the following in mind before searching a device:

- The action must be in accordance with the school’s child protection policy, related policies and procedures e.g. IT / Online safety, anti-bullying, positive behaviour
- Any search should only be conducted following authorisation by the Head Teacher

#### Imagery will only be viewed by the DSL when it;

- is the only way to make a decision about whether to involve other agencies (i.e. it is not possible to establish the facts from the young people involved)

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- is necessary to report the image to a website, app or suitable reporting agency to have it taken down, or to support the young person or parent in making a report
- is unavoidable because a pupil has presented an image directly to the DSL or the imagery has been found on a school device or network

**If it is necessary to view the imagery, then the DSL will:**

- Never copy, print or share the imagery; this is illegal.
- Discuss the decision with the Head teacher.
- Ensure viewing is undertaken by the DSL or another member of the safeguarding team with delegated authority from the Head teacher.
- Ensure viewing takes place with another member of staff present in the room, ideally the Head teacher or a member of the senior leadership team. This staff member does not need to view the images.
  - Wherever possible ensure viewing takes place on school premises, ideally in the Head teacher or a member of the senior leadership team’s office.
- Ensure wherever possible that images are viewed by a staff member of the same sex as the young person in the imagery.
- Record the viewing of the imagery in the school safeguarding records including who was present, why the image was viewed and any subsequent actions.

**Deleting Imagery**

If the DSL decides that other agencies do not need to be involved, then consideration will be given to deleting the image from the device[s] to limit any further sharing of images. The DSL will record this action with a clear rationale as to why this action was taken. This will be within the concern/referral section of the Witherslack Group Safeguarding database.

**4.19 Children who are absent from Education:**

At our school, we recognise that children being absent for prolonged periods and/or on repeat occasions, can act as a vital warning sign of a range of safeguarding issues including neglect, child sexual and child criminal exploitation.

In our school, we have an emergency contact list with at least two named people on it. On an annual basis ready for the new school year, we update that contact list by sending out the data request pro forma to parents and carers.

The school will follow up any unauthorised absence. The initial enquiry will be by 10 am on the first day of non-attendance where there has been no contact from the parent or carer to explain the reason for the absence.

- Where it has not been possible to make contact, the other numbers on the contact list will be tried.
- Where no contact has been made by day 2, the school will conduct an unannounced home visit on day 2.
- Where no contact is made, the person undertaking the home visit will make enquiries of neighbours.
- Further checks including checking with any other known relatives, landlords – private or social housing providers – and other local stakeholders who are involved. This will be both via phone and via home visits.
- Where a child has been absent and no contact made by day 2, the matter will be recorded on the Witherslack Group Safeguarding database as a concern and within the chronology of contacts all contact with relatives, neighbours, landlords and other local stakeholders will be recorded in the chronology of contacts.
- If there is reason to believe a child is in immediate danger or at risk of harm, a referral will be made to children’s social care (and the police if appropriate) and be raised as a referral on the Witherslack Group safeguarding database.

Where a parent is refusing to send their child back to the children’s home and therefore will not be in school, we will undertake home visits in accordance with attendance policy and where geographical distance

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prevents this, this will be undertaken by TEAMS. This action is in response to our duty of care to any child who is on role of the school

For looked after children, where a child is known to be missing from care or has failed to return from family time, we will liaise with the children's home manager and where appropriate, will undertake visits to the home in accordance with the Attendance policy

Our school will follow the relevant Local Authority agreement for reporting for children who fail to attend without the school's permission for a period of 10 days or more or who regularly fail to attend.

#### 4.20 Further information and resources:

For links to further information and resources in relation to Children in Specific Circumstances, please go to Appendix B of K

### 5.0 PART FIVE: CHILDREN LOOKED AFTER AND THOSE WITH SEN/ADDITIONAL NEEDS

#### 5.1 Children in Care (CLA/LAC) and previously looked after:

Children who have suffered adversity via abuse and neglect can end up being looked after by the Local Authority. The school ensures that staff have the necessary skills and understanding to keep looked after and previously looked after children safe. Appropriate staff have information about a child's looked after legal status and care arrangements (including kinship care arrangements), including the level of authority delegated to the carer by the authority looking after the child.

The Designated Safeguarding Lead must be aware of the child's:

- Legal status;
- The name of virtual head;
- Contact arrangements and any restrictions around contact;
- Who is allowed to have information beyond educational achievement information;
- Manage sensitive/confidential information in line with the children's best interests, wishes and feelings;
- Where children are care leavers, the DSL will have details of the LA personal advisor and liaise with them as necessary.

The Designated Teacher is responsible for:

- Promoting education achievement of children who are looked after and previously looked after;
- Ensuring that records and plans in respect of children who are looked after are generated, maintained, updated and effective in line with national requirements and local protocols e.g. PEPs;
- Providing appropriate information to the DSL;
- Managing sensitive/confidential information in line with the children's best interests, wishes and feelings.

In our school, the Designated Teacher is **Ben Blyth**

#### 5.2 Children with Special Educational Needs and Disabilities:

Children with special education needs (SEN) and disabilities can face additional safeguarding challenges both in relation to their vulnerability to possible abuse and neglect, research tells us that they are three times as likely to be abused as a child without a disability. There is also vulnerability in terms of ability to report such incidents.

In our school we recognise that additional barriers can exist when identifying abuse and neglect for this group of children. In our school we always consider the possibility of abuse particularly relating to this group of children and do not automatically assume that behaviour, mood or injury relate to the child's disability. We recognise that children with SEN and disabilities can be disproportionately impacted by such issues as bullying without showing any outward sign and communication barriers and difficulties in managing and reporting these challenges. We also recognise that as with all children, it is not just the overt signs of abuse

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that will be looked for but we will be mindful at all times of the possibility of more subtle signs that may indicate a wider range of safeguarding issues such as emotional abuse due to ridicule, financial abuse, Perplexing Presentations (PP)/ Fabricated or Induced Illness (FI).

Our staff work hard to give all children opportunities and a voice, our pastoral team is available to support a child at any time.

Our staff will always consider:

- What do I know about this child;
- What are their developmental age and level of understanding;
- How does their additional needs impact on their development;
- How do I need to adapt my communication to meet the needs of the child;

Our DSL and SENCO will liaise on a regular basis and as soon as there are, any safeguarding issues identified. The DSL will make decisions in line with Local thresholds guidance as to what action is taken.

The SENCO is **Ben Blyth**

### 5.3 Residential Schools and Children's Home:

Research has shown that children can be particularly vulnerable in residential settings. All residential special schools comply with the National Minimum Standards for their particular setting and are appropriately inspected.

Some of our pupils live in residential children's homes and therefore all staff are alert to this and will report any concerns immediately to the DSL.

## 6.0 PART SIX: A SAFER SCHOOL

### 6.1 Safer Recruitment:

Our school complies with part three of Keeping Children Safe in Education 2024; Witherslack Group will take steps to prevent people who pose a risk of harm from working with children by adhering to statutory responsibilities to check staff who work with children, by carrying out the required checks and verifying the applicant's identity, qualifications and work history. The school will take proportionate decisions on whether to ask for any checks beyond what is required; and ensuring volunteers are appropriately supervised. The school has a written **recruitment and selection policies and procedures** in place.

The school obtains written confirmation from supply agencies or third party organisations that agency staff or other individuals who may work in the school have been appropriately checked.

The school maintains a single central record of recruitment checks undertaken.

In our school, at least one person on any appointment panel has undertaken safer recruitment training.

### 6.2 Staff Training and Induction:

It is important that all staff receive training to enable them to recognise the possible signs of abuse, neglect and exploitation and to know what to do if they have a concern.

New staff will receive the Witherslack Group safeguarding briefing delivered by the DSL or one of the deputy DSLs on day 1. This includes the school's child protection policy, staff code of conduct, the positive behaviour support policy, the behaviour policy, the safeguarding arrangements for children who go missing from education, reporting and recording arrangements, the guidance for Safer Working Practice for those who work in Education settings 2022 and identity of the DSL and any deputies.

Supply staff and volunteers will be told who the DSL and any deputies are, given a copy of the pocket guide to safeguarding and will be informed of the reporting and recording process in the school. They will be given a copy of the 'reporting concerns to the DSL' pro forma as well as the policies listed above that are given the Witherslack Group staff.

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All staff, including the Head Teacher will receive training that is regularly updated; this includes annual refresher training, safeguarding and child protection updates via email, e-bulletins and staff meetings throughout the year.

The DSL and any deputies will update their knowledge and skills on an annual basis via attending meetings with other DSL's (DSL forum), reading or undertaking additional training, this is in addition to the Witherslack Group required e-learning and their 2 year DSL refresher training.

### 6.3 Whistle blowing if you have concerns about a colleague:

Staff who are concerned about the conduct of a colleague towards a child or young person are undoubtedly placed in a very difficult situation. They may worry that they have misunderstood the situation, and they will wonder whether a report could jeopardise their colleague's career. All staff must remember that the welfare of the child or young person is paramount. Witherslack Group **whistleblowing policy** enables staff to raise concerns or allegations, initially in confidence and for a sensitive enquiry to take place.

All concerns of poor practice or possible child abuse by colleagues **should be reported to the Head Teacher immediately**. *Complaints about the Head Teacher should be reported to the Regional Director*. Staff may also report their concerns directly to Children's Social Care or the police if they believe direct reporting is necessary to secure action.

### 6.4 Concerns about the behaviour and/or conduct of adults:

Adult concerns will fall into two categories, and that will be determined by the head teacher as the case manager, those 2 categories are either an allegation or a low level concern.

In order to create a culture of open, honest and transparent practice, staff are encouraged to self-report.

All staff who have any concerns about a colleague or anyone working on behalf of Witherslack Group, have a duty to act on that concern.

Any concern that would be deemed an allegation as per the Allegations against Staff policy must be reported immediately to the head teacher, where the concern is about the head teacher, it is reported to the Regional Director.

Any concern that is a behaviour that is not consistent with the Code of Conduct or the Guidance for Safer Working Practice, comes under the Low Level Concern policy and must be reported to the head teacher **immediately**. Where the concern is about the head teacher, it is reported to the Regional Director.

**All reported concerns must be recorded as an employee concern ('other adult concern' for supply/agency staff) on the safeguarding database before the end of the member of staff's working day of the day it was reported**

### 6.5 Management of Allegations:

As per section one in part 4 of Keeping Children Safe in Education 2024 the school's Allegations against Staff policy details the full procedures in relation to the management of allegations that might indicate that a person would pose a risk of harm<sup>2</sup> if they continue to work in regular or close contact with children in their present position, or in any capacity with children in the school. These procedures will be followed where it is alleged that anyone working in the school, including supply staff and volunteers has:

- Behaved in a way that has harmed a child, or may have harmed a child;
- Possibly committed a criminal offence against or related to a child;
- Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children.

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The harm test is explained on the Disclosure and Barring service website on [GOV.UK](https://www.gov.uk).<sup>2</sup>

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- Behaved or may have behaved in a way that indicates that they may not be suitable to work with children

Any allegations against a member of staff will be reported to the head teacher immediately. Where the allegation relates to the Head Teacher, they will report it to the Regional Director immediately. Where staff have concerns about the conduct of a member of staff in the school, they will report this immediately to the Head Teacher, concerns about the conduct of the Head Teacher will be reported to the Regional Director immediately.

The person to who they have reported it, becomes the ‘case manager’

Where allegations/concerns do not meet the harm threshold, the case manager will follow the section describing the procedures for this in the schools Allegations against Staff policy

If an allegation is substantiated and:

- The member of staff is dismissed; resigns, or otherwise ceases to provide his or her services; or
- The employer ceases to use the person services

The case manager will discuss with the LADO who should make a referral to DBS. Where it is a member of teaching staff, then the case manager will consider a referral to TRA.

#### **The LADO**

**Email address:** [lesasenquireis@kent.gov.uk](mailto:lesasenquireis@kent.gov.uk)

**Urgent or Out of Hours:** 03000419191

*If you need to make a referral to the LADO regarding an allegation against a member of staff: Please complete a LADO referral via the [Kent Integrated Children's Services Portal](#)*

*If you need clarification on whether to make a LADO referral, need general education safeguarding or online safety advice, or would like to enquiry about training or other safeguarding products: [Please use the LESAS enquiry form](#)*

Parents or carers of a child or children involved should be;

- formally told about the allegation as soon as possible, and the case manager will consult with the LADO, police and Children’s social care (where police/CSC are involved) on what information can be disclosed.
- Kept informed of the progress of the case, only in relation to their child – no information can be shared regarding the member of staff; and
- Made aware of the requirements to maintain confidentiality about any allegations made against teachers in school while investigations are in progress as set out in s141F of the Education Act 2002. If parents or carers wish to apply to the court to have reporting restrictions removed, they will be advised to seek legal advice. [KCSiE 2024 Paragraph 400, p100]

The school will follow the Local Safeguarding Partnership procedures management of allegations procedures: [Managing-Allegations-Against-Staff-Practice-Guidance.pdf \(kscmp.org.uk\)](#)

See Allegations Flowchart *Appendix 7*

***Please see the Allegations against Staff policy***

## **6.6 Low Level Concerns:**

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As per section two in part 4 of Keeping Children Safe in Education 2024 , all staff in the school recognise the importance to sharing low level concerns. A low level concern is when any adult working in the school or on behalf of the school may have acted in a way that;

- Is inconsistent with the staff code of conduct, including inappropriate conduct outside of work and
- Does not meet the harm threshold or is otherwise not serious enough to consider a referral to the LADO

The purpose of our low level concern policy is to create and embedded a culture of openness, trust and transparency in which Witherslack Groups values and expected behaviour as set out in the code of conduct is lived, monitored and reinforced by all staff.

*Please see the Low Level Concerns policy*

## **6.7 Reasonable Force and Injuries Caused Whilst Using Restrictive Physical Interventions (reasonable force):**

The term ‘reasonable force’ covers the broad range of actions used by staff that involve a degree of physical contact to control or restrain children. This can range from guiding a child to safety by the arm, to more extreme circumstance such as breaking up a fight or where a young person need to be restrained to prevent violence of injury. The use of force may involve with passive physical contact, such as standing between pupils or blocking a pupil’s path, or active physical contact such as a hold.

The decision on whether or not to use reasonable force to control or restrain a child is down the professional judgement of the staff concerned and should always depend on individual circumstances and in line with the child’s PBS plan.

There are circumstances when it is appropriate for staff in schools to use reasonable force to safeguard children and young people. As a board rule of thumb, the use of reasonable force should always be:

- As last resort i.e., staff would use appropriate de-escalation strategies before resorting to it
- Any force used must be the minimum necessary
- The staff members response should be proportionate (to any risk involved)
- Any and all incidents and holds must be recorded

### **Injures as a result of reasonable force/restrictive physical intervention**

On rare occasions children and young people will be injured during the use of reasonable force/restrictive physical intervention, this can occur even when appropriate techniques are being employed

Where minor injuries such as bruising or scratches have occurred, the Head Teacher will need to use their professional judgement in determining whether the injury warrants referral to the Local Authority Designated Officer (LADO), the rule of thumb regarding this is whether someone is raising a concern or complaint regarding this. Consideration will also have to be given to a referral to Children’s Social Care. A cause for concern that will warrant a consultation with LADO would be emerging patterns e.g. the same person involved where there are complaints, similar injuries, the same child etc.

If any doubt exists regarding whether the injury has reached the threshold or criteria for referral, then the Head Teacher will use the Local Safeguarding Partnership threshold guidance and if necessary, seek advice from the Regional Director. They can also seek a consultation with the Local Authority Designated Officer.

However, the Head Teacher should always have a consultation with/make a referral to the LADO where any of the following criteria applies:

- The child or young person receives an injury that is more serious than very minor bruising or abrasions that have arisen accidentally from properly used physical restraint;
- The child or young person wishes to complain about the manner in which they have been restrained;
- The parent/carer/social worker of a child or young person makes a complaint about the use of restrictive physical intervention.

Further information: [Use of Reasonable Force](#)

## **6.8 Abuse of position of trust:**

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- All school staff are aware that inappropriate behaviour towards children and young people is unacceptable and that their conduct towards children and young people must be beyond reproach.
- In addition, staff should understand that, under the Sexual Offences Act 2003, it is an offence for a person over the age of 18 to have a sexual relationship with a person under the age of 18, where that person is in a position of trust, even if the relationship is consensual. This means that any sexual activity between a member of staff and a child or young person under 18 may be a criminal offence, even if that child or young person is over the age of consent.
- The staff **Code of Conduct** and **social media policy** makes clear our expectations of staff including where their relationships and associations both within and outside of the school (including online) may have implications for the safeguarding of children in the school.

## 6.9 Online Safety and Technology Management:

In recent years, the use of technology has grown significantly, and in our school, we recognise that this has become a component of safeguarding issues. We recognise that technology plays a key part in learning and offers many opportunities; however, we also acknowledge the potential risks areas:

- **Content:** being exposed to illegal, inappropriate or harmful content; for example, pornography, fake news, racism. Misogyny, self –harm, suicide, anti-Semitism, radicalisation or extremism;
- **Contact:** being subjected to harmful online interaction with other users; for example, peer to peer pressure, commercial advertising as well as adults posing as children or young adults with the intention to groom or exploit them for sexual, criminal, financial or other purposes;
- **Conduct:** online behaviour that increases the likelihood of, or causes harm; for example, making, sending and receiving explicit images e.g. consensual or non-consensual sharing or nudes and semi-nudes and/or pornography, sharing other explicit images and online bullying; and
- **Commerce:** risks such as online gambling, inappropriate advertising, phishing and or financial scams. Where there are any pupils or staff at risk, we will report it to the [Anti-Phishing Working Group](#)

As a school, we adopt a proportionate approach to managing online safety and:

- Have an online safety policy which is reviewed annually.
- Offer guidance and support to children and parents around new and existing technology including signposting to appropriate sources of advice and support.
- Empower children and parents to take control of the online experience.
- All users sign up to the Acceptable User Agreement on an annual basis.
- Ensure that parents and children know how to minimise online risks and know how to report worries or concerns in staff in the school.
- Have in place filtering and monitoring systems.

### Filtering and Monitoring Systems

#### Filtering Systems

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Witherslack Group use Smoothwall to filter all devices connected to the Witherslack network, this filters inappropriate websites and categories, this means that the system is able to block out age inappropriate content

Smoothwall will generate an email alert to DSL's/DDSL's and head teachers for any attempt to access a blocked site

### Monitoring Systems

Witherslack Group use Senso to monitor children's online behaviour, this works via proactively monitoring PC and laptop usage only and used detention libraries and visual threats on screen to do this

For Senso, all reports that are generated and are deemed 'urgent' or 'critical' will generate an email alert to the DSL and any DDSL's within 15 minutes but this is usually minutes.

### Assigned roles

At our school, we recognise that filtering and monitoring systems are not able to detect everything, therefore all **staff** will be vigilant when children are using any devices within the school setting and will take appropriate action if they have any concerns around observed online behaviour, this will include as appropriate, reporting it to the DSL and recording any concerns as a C/YP concern in the safeguarding database

It is the responsibility of the **DSL/DDSL** to respond to any alert generated

- The **DSL** and all **DDSL's** will receive a weekly Senso report on a Monday morning with an overview of the violation number for the previous week.
- The **DSL /DDSL** will check **Senso** on a daily basis for any violations that have been highlighted but have not generated a treat or critical email alert
- The **DSL /DDSL** will ensure that all violations they are marked with the appropriate status.

Between 08.00 and 08.30, Monday to Friday, the **on call IT technician** for Witherslack Group will conduct a test via [testfiltering.com](http://testfiltering.com) and the report generated, will be placed in the Safeguarding shared folder on the network drive. Where they on call technician identifies any issues with the test, the **on call IT technician** will generate an email to DSLs/DDSLs and the head teacher via the Digital Safeguarding TEAMS group, to alert them that an issue has been identified.

**Head Teachers** and **DSLs/DDSL's** are responsible for ensuring that where the filtering is not working, all staff are alerted immediately

The **head teacher** will ensure that filtering and monitoring is a standing item on the SLT meeting agenda

The **Regional Director** will ensure that filtering and monitoring is a standard item on the school board meeting

The **DSL/DDSL** or any member of **SLT** is also able to run a check via [testfiltering.com](http://testfiltering.com).

Where school staff run their own test, any concerns identified, that filtering is not working, should be immediately reported to IT Helpdesk

### Taking action in relation to Smoothwall/Senso alerts and violations

Where concerns are raised via Smoothwall/Senso alerts or violations, these will be raised as a C/YP concern on the safeguarding database under the category of Smoothwall/Senso alert and will be addressed with

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children in individual keyworker sessions, clinical team, pastoral team or via curriculum as appropriate to the nature of the concern and recorded as an internal communication and linked as a related record to the concern.

### Reviewing the filtering and monitoring provision

The filtering and monitoring provision will be reviewed at least annually by Witherslack Group IT in conjunction with the Head of Safeguarding

Where any member of staff has a concern about the content of a site that a child has accessed (this can happen due to sites not being categorised), then this must be immediately reported to the DSL and a C/YP concern must be raised. The DSL who will immediately raise a ticket to IT helpdesk. The email generated must contain in the subject **WEBSITE BLOCK**. The IT team at head office, will then review and block accordingly. The DSL will update the IT team with the C/YP concern reference number, and the IT team will log this in their records, against the help desk ticket.

Further information is available via:

[Meeting digital and technology standards in schools and colleges - Filtering and monitoring standards for schools and colleges - Guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/meeting-digital-and-technology-standards-in-schools-and-colleges-filtering-and-monitoring-standards-for-schools-and-colleges)

[Appropriate Filtering and Monitoring - UK Safer Internet Centre](https://www.saferinternet.org.uk/parents-and-carers/parents-and-carers-guidance/appropriate-filtering-and-monitoring)

[Safety and Security Online | SWGfL](https://www.swgfl.org.uk/safety-and-security-online)

### Mobile Phones in school

Whilst at the school, pupils are not allowed mobile phones or devices during the school day. This therefore reduces any risk of using mobile data via 3, 4 or 5g in order to bully, sexually harass, and control others via mobile or smart technology, share indecent images; consensually and no consensually (often via large chat groups), and view and share pornography and other harmful content.

Where pupils do bring their phones to school, they are handed in and kept in the Pastoral Care Managers Office until handed back to the pupil at the end of the school day.

## 6.10 Cybercrime:

Cybercrime is criminal activity committed using computers and/or the internet. It is broadly categorised as either 'cyber-enabled' (crimes that can happen off-line but are enabled at scale and at speed on-line) or 'cyber dependent' (crimes that can be committed only by using a computer). Cyber-dependent crimes include;

- unauthorised access to computers (illegal 'hacking'), for example accessing a school's computer network to look for test paper answers or change grades awarded;
- denial of Service (Dos or DDoS) attacks or 'booting'. These are attempts to make a computer, network or website unavailable by overwhelming it with internet traffic from multiple sources; and,
- making, supplying or obtaining malware (malicious software) such as viruses, spyware, ransomware, botnets and Remote Access Trojans with the intent to commit further offence, including those above.

Children with particular skill and interest in computing and technology may inadvertently or deliberately stray into cyber-dependent crime.

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Where there are concerns about a child in this area, the designated safeguarding lead (or a deputy), will consider referring into the **Cyber Choices** programme. This is a nationwide police programme supported by the Home Office and led by the National Crime Agency, working with regional and local policing. It aims to intervene where young people are at risk of committing, or being drawn into, low level cyber-dependent offences and divert them to a more positive use of their skills and interests.

The **Cyber Choices** does not currently cover ‘cyber-enabled’ crime such as fraud, purchasing of illegal drugs on-line and child sexual abuse and exploitation, nor other areas of concern such as on-line bullying or general on-line safety. Additional advice can be found at: [Cyber Choices, when-to-call-the-police--guidance-for-schools-and-colleges.pdf \(npcc.police.uk\)](#) and [National Cyber Security Centre - NCSC.GOV.UK](#)

Where we have concerns about online safety, we will follow the Local Safeguarding Partnership procedures [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)

Further support with online safety is available via:

- [Education for a Connected World](#) - UK Council for Child Internet Safety (UKCCIS)
- [Online safety - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)
- [Be Internet Legends](#) - Parent Zone and Google
- [Thinkuknow](#) - National Crime Agency/CEOPs
- [Harmful online challenges and online hoaxes](#) - this includes advice on preparing for any online challenges and hoaxes, sharing information with parents and carers and where to get help and support.

### 6.11 Education at home:

As a school, we recognise that there may be times where our pupils are asked to learn online at home. The following advice is available in relation to this; [safeguarding-and-remote-education](#)

The following provide helpful advice:

- NSPCC Learning - [Undertaking remote teaching safely](#)
- [Get help with remote education](#)

Where we have concerns about online safety we will follow the Local Safeguarding Partnership procedures [Procedures - Kent Safeguarding Children Multi-Agency Partnership \(kscmp.org.uk\)](#)

Where we are asking children to undertake work online, we will make carers aware of what their child is being asked to do online, including the sites they will be asked to access and be clear who from the school (if anyone) the child is going to be interacting with online.

Further resources to support schools with online safety are available via:

- [Teaching online safety in school](#) - DfE guidance supporting schools to teach pupils how to stay safe online when studying new and existing subjects.

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- [Education for a Connected World](#) - UK Council for Child Internet Safety (UKCCIS)
- [Guidance](#) from the PSHE Association
- [Be Internet Legends](#) - Parent Zone and Google
- [Thinkuknow](#) - National Crime Agency/CEOPs
- [UK Safer Internet Centre](#) - guidance and resources that can help with the teaching of the online safety component of the Computing Curriculum.
- [Harmful online challenges and online hoaxes](#) - this includes advice on preparing for any online challenges and hoaxes, sharing information with parents and carers and where to get help and support.

## 6.12 Helping children and young people to keep themselves safe:

Children and young people are taught to understand and manage risk via the curriculum and pastoral care. Our approach is designed to help children and young people to think about risks they may encounter and with the support of staff work out how those risks might be reduced or managed. Discussions about risk are empowering and enabling for all children and young people and promote sensible behaviour rather than fear or anxiety. Children and young people are taught how to conduct themselves and how to behave in a responsible manner; this includes being taught to keep themselves safe online. Children and young people are also reminded regularly about online safety, the risks of sharing content and images online and tackling bullying, including cyber bullying procedures. The school continually promotes an ethos of respect for children and young people, and they are continually encouraged to speak to a member of staff of their choosing about any worries they may have.

## 7.0 REFERENCES

- [Working together to safeguard children 2023: statutory guidance \(publishing.service.gov.uk\)](#)
- [Keeping children safe in education 2024 \(publishing.service.gov.uk\)](#)
- [Prevent Duty Guidance 2023](#)
- [Guidance for safer working practice](#)
- [Information sharing advice for safeguarding practitioners - GOV.UK \(www.gov.uk\)](#)
- [Child Sexual Exploitation – Definition and a Guide \(DfE 2017\)](#)
- [What to do if you're worried a child is being abused 2015 – Advice for practitioners March 2015](#)
- [Multi – Agency Practice Guidelines: Female Genital Mutilation \(2020\)](#)
- [Teacher Standards \(2012\)](#)
- [The Data Protection Act 2018](#)
- [Children Missing Education September 2016](#)

## 8.0 ASSOCIATED FORMS

- 1 Internal notification of concern to the DSL for supply staff
- 2 Body map for supply staff

## 9.0 APPENDICES

- 1 Information/concerns 'checklist'
- 2 Talking and Listening to Children
- 3 Taking action on child welfare/protection concerns
- 4 Indicators of abuse and neglect

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- 5 Possible indicators of abuse and neglect
- 6 Safeguarding Sexual Behaviour Safety Plan process flow chart
- 7 Managing concerns in relation to those who work with children flow chart

Form 1: Internal notification of concern to the DSL for supply staff

FOR SUPPLY STAFF ONLY

<b>This form is not to be used for allegations against staff.</b>		
<b>PART 1: INTERNAL NOTIFICATION of CP/WELFARE CONCERN TO THE DSL</b>		
<b>DATE and TIME of CONCERN</b>	<b>date</b>	<b>time</b>
<b>Name(s) of child/young person</b>		
<b>D.O.B.</b>		
<b>What is the nature of your concern</b>		
<p>To consider:</p> <ul style="list-style-type: none"> <li><b>What</b> is the nature of your concern</li> <li><b>How</b> did this come about</li> <li><b>Where</b> is this said to have taken place</li> <li><b>When</b> did it happen</li> <li><b>Who</b> is involved</li> </ul> <p style="color: red;">MAKE SURE THAT YOU INCLUDE THE WISHES &amp; FEELINGS OF THE CHILD IN THE RECORD i.e. how do you feel now, what do you want to happen?</p>		
<b>Details</b>		

**WG SG Reference no:**

For DSL use only

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**CONTINUATION SHEET ATTACHED Y/N**

**Note:**

- Differentiate clearly between fact, opinion, interpretation and stick to the facts as you understand them wherever possible!
- if you have used quotes please ensure that they are accurate
- make a note of any open questions asked or minimal prompts used
- Any notes made 'at the time' should be attached to this pro-forma; these may be required as evidence if the matter goes to court

*Attach a body map if relevant*

<b>Signed</b>			
<b>Name (print)</b>		<b>Job title</b>	
<b>Received by the DSL</b>			
<b>Signed</b>			
<b>Name</b>			
<b>Date</b>		<b>Time</b>	

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Form 2 : Body map for supply staff

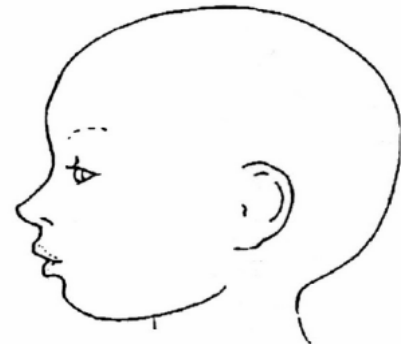
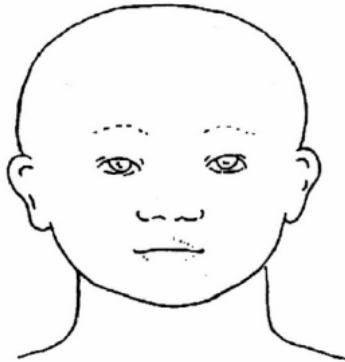
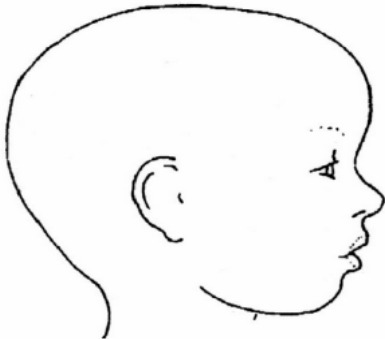
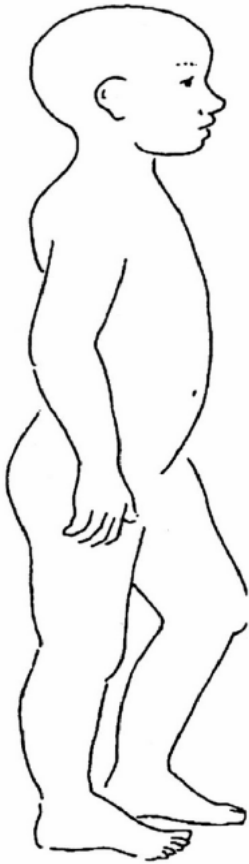
FOR SUPPLY STAFF ONLY

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# Skin maps

Name .....

d.o.b. ....



Signature ..... Name.....

Designation ..... Date .....

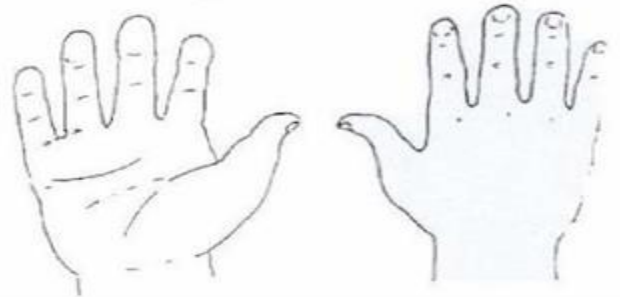
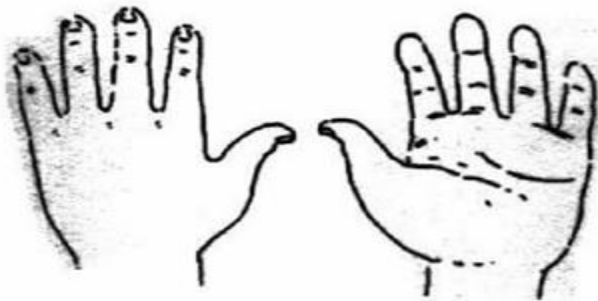
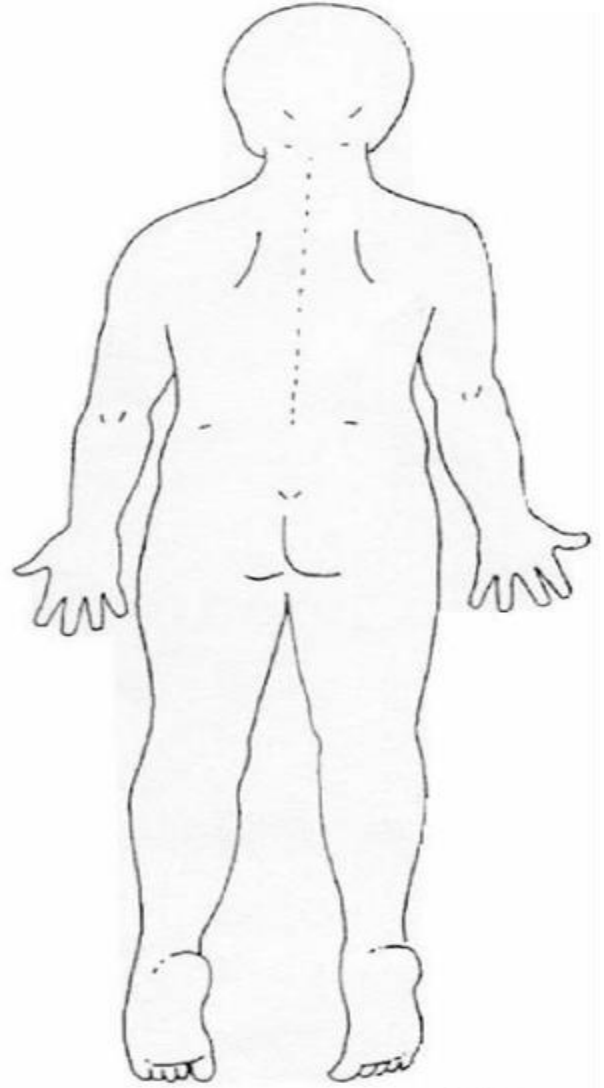
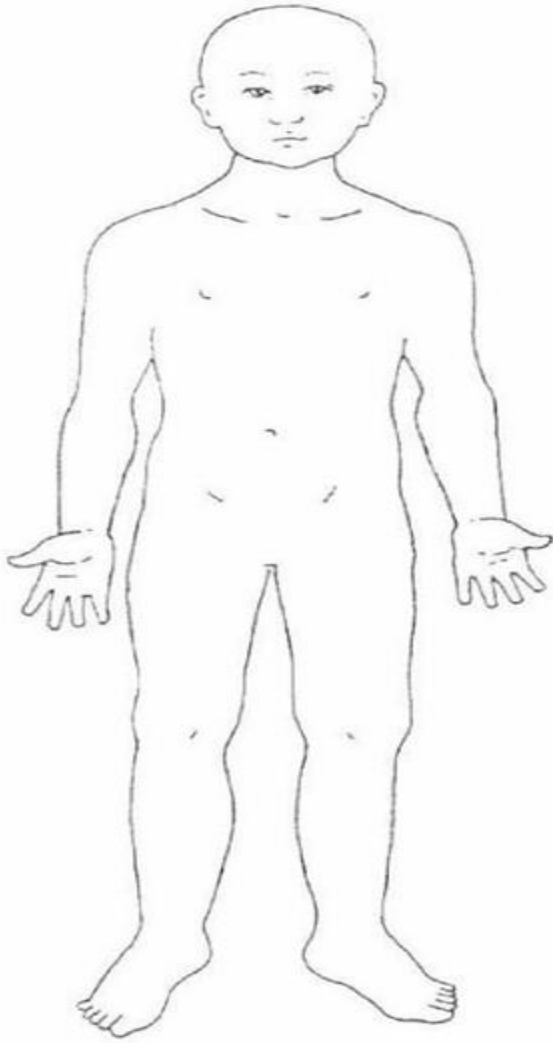
Time of ..... Time injuries

Incident: ..... Identified .....

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Name .....

d.o.b....



Signature .....Name.....

Designation .....

Date .....

Time of

Time injuries

Incident: .....

Identified .....

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- Does/could the suspected harm meet the Local Safeguarding Partnership definitions of abuse?
- Are there cultural, linguistic or disability issues?
- I am wrongly attributing something to impairment?
- Does the chronology indicate any possible patterns which could/do impact upon the level of risk?
- Are any injuries or incidents acute, cumulative, episodic?
- Did any injuries result from spontaneous action, neglect, or intent?
- Explanations consistent with injuries/behaviour?
- Severity and duration of any harm?
- Impacts on the child's health/development?
- Immediate/longer term effects?
- Likelihood of recurrence?
- Child's reaction?
- Child's perception of the harm?
- Child's needs, wishes, and feelings?
- Parent's/carer's attitudes/response to concerns?
- How willing are they to cooperate?
- What does the child mean to the family?
- What role does the child play?
- Possible effects of intervention?
- Protective factors and strengths of/for child (i.e. resilience/vulnerability)
- Familial strengths and weaknesses?
- Possibilities?
- Probabilities?
- When and how is the child at risk?
- How imminent is any likely risk?
- How grave are the possible consequences?
- How safe is this child?
- What are the risk assessment options?
- What are the risk management options?
- What is the interim plan?

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**TALKING AND LISTENING TO CHILDREN**

**If a child wants to confide in you, you *SHOULD***

- Be accessible and receptive;
- Listen carefully and uncritically, at the child’s pace;
- Take what is said seriously;
- Reassure children that they are right to tell;
- Tell the child that you must pass this information on and inform them who this will be to
- Make sure that the child is okay
- Make a careful record of what was said (see *Recording*).

**You should NEVER**

- Investigate or seek to prove or disprove possible abuse;
- Make promises about confidentiality or keeping ‘secrets’ to children;
- Assume that someone else will take the necessary action;
- Jump to conclusions, be dismissive or react with shock, anger, horror etc.;
- Speculate or accuse anybody;
- Investigate, suggest or probe for information;
- Confront another person (adult or child) allegedly involved;
- Offer opinions about what is being said or the persons allegedly involved;
- Forget to record what you have been told;
- Fail to pass this information on to the correct person (the Designated Safeguarding Lead or Deputy DSL).

**Children with communication difficulties, or who use alternative/augmentative communication systems**

- While extra care may be needed to ensure that signs of abuse and neglect are interpreted correctly, any suspicions should be reported in exactly the same manner as for other children;
- Opinion and interpretation will be crucial (be prepared to be asked about the basis for it and to possibly have its validity questioned if the matter goes to court).

**Recordings should**

- State who was present, time, date and place;
- Recorded electronically via the recognised system for recording concerns;
- Handwritten records (Agency Staff) to be passed to the DSL or Deputy immediately (certainly by the end of the working day);
- Use the child’s words wherever possible;
- Be factual/state exactly what was said;
- Differentiate clearly between fact, opinion, interpretation, observation and/or allegation.

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### What information do you need to obtain?

- Schools have **no investigative role** in child protection (Police and Children's Social Care will investigate possible abuse very thoroughly and in great detail, they will gather evidence and test hypotheses – leave this to them!);
- Never prompt or probe for information, your job is to listen, record and pass on;
- Ideally, you should be clear about what is being said in terms of **who, what, where and when**; - **Use TED (Tell me, Explain, Describe) to do this.**
- The question which you should be able to answer at the end of the listening process is 'might this be a child protection matter?'
- If the answer is yes, or if you're not sure, record and pass on immediately to the Designated Safeguarding Lead /Head Teacher or Registered Manager (head teacher/registered manager for allegations).

### If you do need to ask questions, what is and isn't OK?

- **Never** asked closed questions i.e. ones which children can answer yes or no to e.g. Did he touch you?
- **Always** use TED (Tell me, Explain, Describe)
- **Never** make suggestions about who, how or where someone is alleged to have touched, hit etc. e.g. top or bottom, front or back?
- If the information cannot be gained via TED, we must, use only '**minimal prompts**' such as 'go on ... tell me more about that ... tell me everything that you remember about that ... ... '
- Timescales are very important: '**When was the last time this happened?**' is an important question.

### What else should we think about in relation to disclosure?

- Is there a place in school which is particularly suitable for listening to children e.g. not too isolated, easily supervised, quiet etc.;
- We need to think carefully about our own body language – how we present will dictate how comfortable a child feels in telling us about something which may be extremely frightening, difficult and personal;
- Be prepared to answer the 'what happens next' question;
- We should never make face-value judgements or assumptions about individual children. For example, we 'know that [child.....] tells lies';
- Think about how you might react if a child DID approach you in school. We need to be prepared to offer a child in this position exactly what they need in terms of protection, reassurance, calmness and objectivity;
- Think about what support **you** could access if faced with this kind of situation in school.

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**Appendix 3 TAKING ACTION ON CHILD WELFARE/PROTECTION CONCERNS**

Staff member has concerns about a child’s health, development, safety or welfare  
 Speak to the Designated Safeguarding Lead (DSL) or a deputy DSL ***immediately*** and ***record on the Witherslack Group safeguarding database (yellow form for supply staff/volunteers) before the end of the working day***

Designated Safeguarding Lead considers:

- Context & history/information available/inaccessible
- Explanations & contemporaneous life events
- Evidence and nature of risk/need
- Balance of Probabilities

DSL identifies what the level of need is via thresholds guidance & contacts RD for advice

Early Help

Children’s Social Care

Discuss with parents/  
seek consent &  
complete form jointly

**S.17 Child In Need**  
CSC Referral to CSC  
– with consent & in  
line with the Local  
Safeguarding  
Partnership  
procedures

Child suffering or likely to suffer  
significant harm

Access  
Monitor

Review

CSC Assessment

Inform parents of intention to refer  
***unless this would:***

- Increase risk to child
- Impede investigation
- Cause undue delay

No Further Action from CSC/stepped down to Early Help  
Ongoing Monitoring and Support

**S.47 Child Protection Referral (SEE NOTES)**

[Request for Support - Professionals \(kent.gov.uk\)](http://kent.gov.uk)

The Integrated Front Door Service: 0300411111

**NOTES:** the concern is reported to the LA CSC where the concern has occurred, not to the LA CSC where the child has reported it (unless the same). Where a child has an allocated social worker in a different area, that social worker also needs to be informed. Where a child has an allocated social worker in the area where the concern has occurred, a new referral is not usually required via MASH etc. and the information is shared with the allocated social worker unless the Local Safeguarding Partnership procedures differ.

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Appendix 4: Indicators of Child Abuse and Neglect

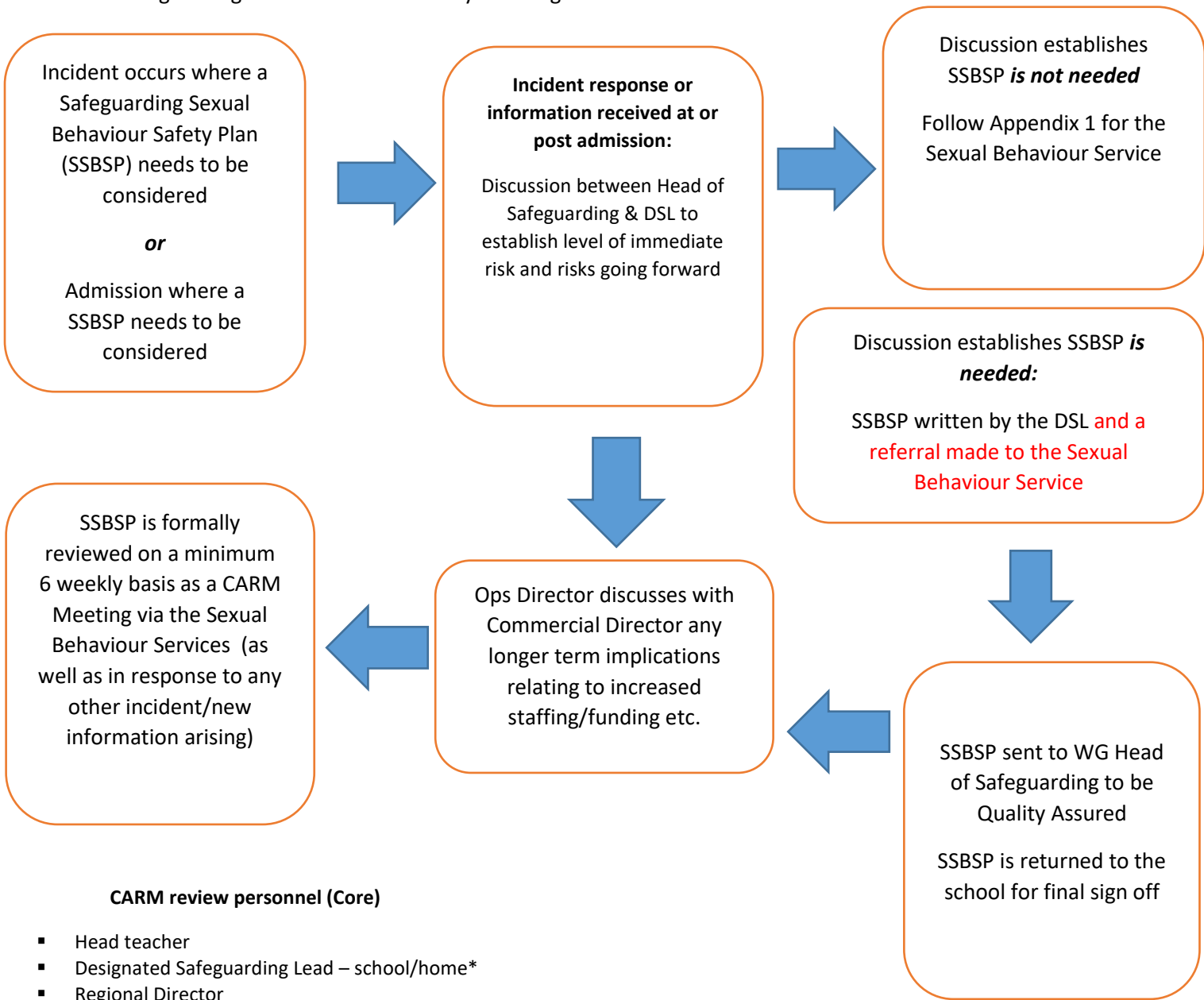
<p><b>Sexual abuse involves:</b></p> <ul style="list-style-type: none"> <li>Forcing or enticing, a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve:</li> <li>Physical contact including assault by penetration (for example, rape or oral sex);</li> <li>Non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing</li> <li>They may also include non-contact activities such as:</li> <li>Involving children in looking at, or in the production of sexual images;</li> <li>Watching sexual activities;</li> <li>Encouraging children to behave in sexually inappropriate ways;</li> <li>Grooming a child in preparation for abuse.</li> <li>Sexual abuse can take place online, and technology can be used to facilitate offline abuse.</li> <li>Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.</li> </ul>	<p><b>Emotional abuse is:</b></p> <p>The <b>persistent</b> emotional maltreatment of a child so as to cause <b>severe</b> and <b>persistent</b> adverse effects on the child's <b>emotional development</b>. May involve:</p> <ul style="list-style-type: none"> <li>conveying to a child that they are worthless or unloved, inadequate or valued only insofar as they meet the needs of another person;</li> <li>not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate;</li> <li>age or developmentally inappropriate expectations being imposed on children (These may include interactions that are beyond the child's developmental capability, as well as over-protection and limitation of exploration and learning, or preventing the child participating in normal social interaction);</li> <li>seeing or hearing the ill-treatment of another;</li> <li>serious bullying (including cyber-bullying),</li> <li>Causing children frequently to feel frightened or in danger;</li> <li>The exploitation or corruption of children.</li> <li>Some level of emotional abuse is involved in all types of maltreatment of a child, though it may occur alone.</li> </ul>
<p><b>Physical abuse</b> may involve:</p> <ul style="list-style-type: none"> <li>Hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child.</li> <li>Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.</li> </ul> <p><b>Perplexing Presentations/Fabricated Illness</b></p> <ul style="list-style-type: none"> <li>The carer does not physically harm the child but reports a clinical story, which is fabricated. This is frequently 'supported' by false specimens e.g. use of menstrual or animal blood;</li> </ul> <p><b>Induced Illness</b></p> <ul style="list-style-type: none"> <li>The carer inflicts harm on the child e.g. poisoning, suffocation, tearing etc.</li> </ul>	<p><b>Neglect is:</b></p> <p>The <b>persistent</b> failure to meet a child's basic <b>physical</b> and/or <b>psychological</b> needs <b>likely</b> to result in the <b>serious</b> impairment of the child's <b>health</b> or <b>development</b>;</p> <ul style="list-style-type: none"> <li>Neglect may occur during pregnancy as a result of maternal substance misuse;</li> <li>Once a child is born, neglect may involve a parent or carer failing to:</li> <li>Provide adequate food, clothing and shelter (including exclusion from home or abandonment);</li> <li>Protect a child from physical and emotional harm or danger;</li> <li>Ensure adequate supervision (including the use of inadequate caregivers);</li> <li>Ensure access to appropriate medical care or treatment.</li> <li>It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.</li> <li>Provide suitable education</li> </ul>

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Appendix 5 Possible Indicators of Child Abuse and Neglect

Neglect	Emotional Abuse	Physical Abuse	Sexual Abuse
Tired/listless	Failure to thrive	Unexplained injuries	Age inappropriate sexual behaviour/knowledge/promiscuity
Unkempt	Attention seeking	Injuries on certain parts of the body	
Poor hygiene	Over ready to relate to others	Injuries in various stages of healing	Wary of adults/running away from home
Untreated medical conditions	Low self esteem	Injuries that reflect an article used	Eating disorders/depression/self-harm
Medical appointments missed	Apathy	Flinching when approached	Unexplained gifts/money
Constantly hungry or stealing food	Depression/self-harm Drink/drug/solvent abuse	Reluctant to change	Stomach pains when walking or sitting
Over eats when food is available	Persistently being overprotective	Crying/ instability	Bedwetting
Poor growth	Constantly shouting at, threatening or demeaning a child	Afraid of home	Recurrent genital discharge / infections
Poor/late attendance	Withholding love and affection	Behavioural extremes	Sexually transmitted diseases
Being regularly left alone or unsupervised	Regularly humiliating a child	Apathy/depression	
Dressed inappropriately for the weather condition		Wanting arms and legs covered even in very hot weather	
Having few friends and/or being withdrawn			

Safeguarding Sexual Behaviour Safety Planning Process Chart



**CARM review personnel (Core)**

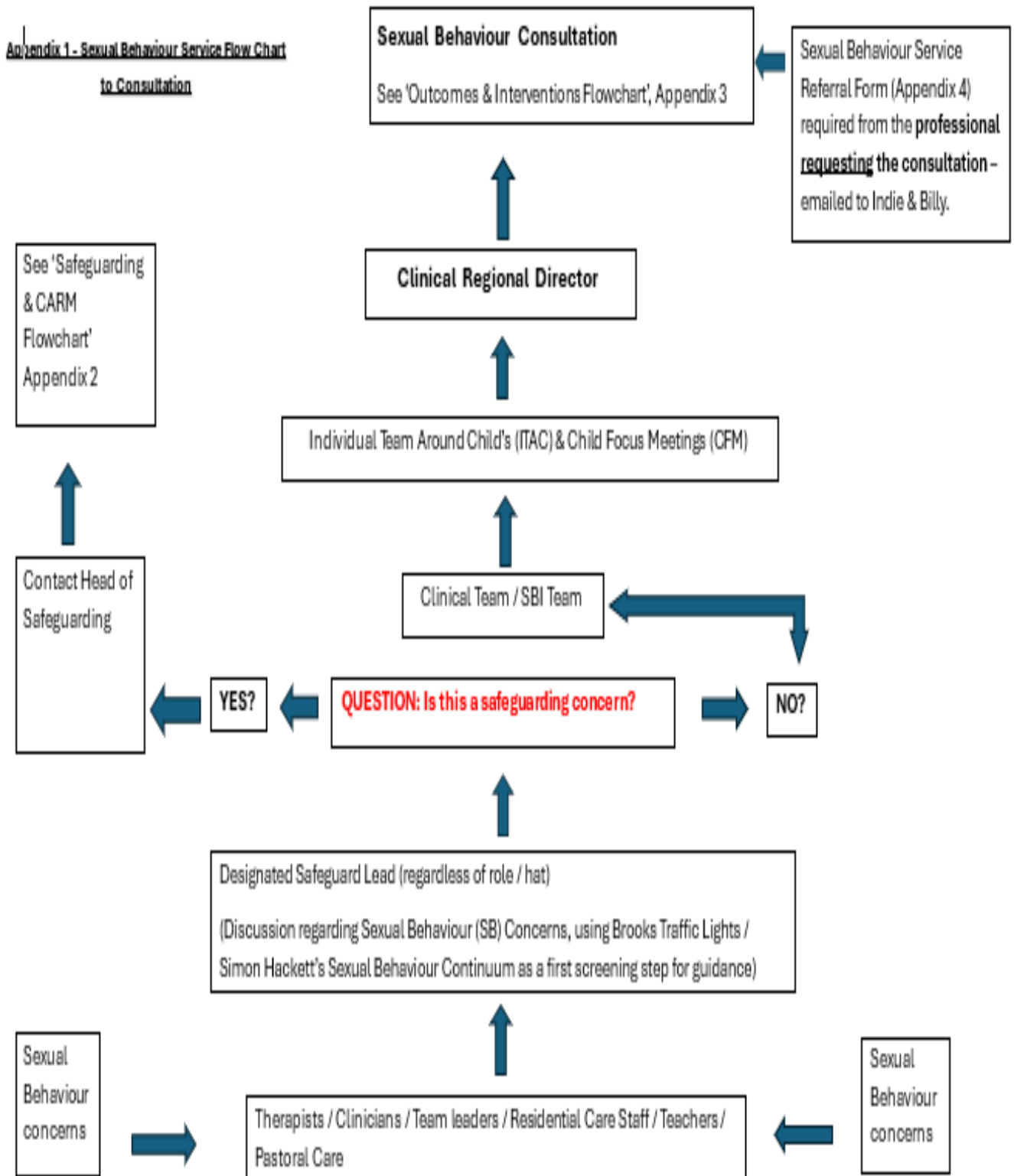
- Head teacher
  - Designated Safeguarding Lead – school/home\*
  - Regional Director
  - SBI Team member for the setting
  - Clinical Specialist Sexual Behaviour Service
  - Responsible Individual\*
- \*(if child is 52 WG 52 week)

**Note to Regional Directors**

Any updates that effect how the placement is managed should be communicated to the Operations Director without delay

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## Appendix 7 Sexual Behaviour service flow chart to consultation



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**Appendix 8: Managing concerns in relation to those who work with Children**

Member of staff reports an allegation/conduct concern to the Head Teacher (\*Case Manager) immediately.  
Member of staff to document the concerns/disclosure before the end of their working day

Head Teacher undertakes basic fact finding

Allegation criteria met/may be met?

- Behaved in a way that has harmed a child, or may have harmed a child;
- Possibly committed a criminal offence against or related to a child;
- Behaved towards a child or children in a way that indicates he or she may pose a risk of harm to children
- Behaved or may have behaved in a way that indicates that they may not be suitable to work with children

NO

Follow the low level concerns policy

If the child has suffered significant harm, case manager liaises with the DSL and follows the child protection policy and make a referral to CSC

YES

Case manager contacts the LADO

Discuss with RD, including consideration for suspension (complete consideration for suspension on the SG database)

The discussion considers, the nature, content and context of the allegation and agrees a course of action

3 possible courses of action

Further enquires, discussion with LADO to determine next steps

Internal Investigation

Allegations Management Meeting or similar held

LADO and case manager, discuss and agree an outcome  
Case Manager to complete the record within **FIVE days** of a conclusion being agreed

\*as defined in KCSIE September 2024

Where an adult makes an allegation that they were abused as a child, they will be advised to report it to the police

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