

# *SAFEGUARDING AND CHILD PROTECTION POLICY*

2018



This policy was reviewed and adopted in September 2018

It is due for review in twelve months in September 2019

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## 1. Aims

At West Acton we recognise the fundamental importance of safeguarding and its centrality to all our work. We believe that all children have the right to attend school and learn in a safe environment.

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

*(Keeping children Safe in Education 2018)*

To do this, staff must know how to work to keep children safe, identify risks, signs of harm or potential harm and know how to seek advice from the school’s designated safeguarding leader.

The school aims to ensure that:

Appropriate action is taken in a timely manner to safeguard and promote children’s welfare

All staff are aware of their statutory responsibilities with respect to safeguarding

Staff are properly trained in recognising and reporting safeguarding issues

Staff and Governors at West Acton are aware that many children are the victims of different kinds of abuse and that they can be subjected to social factors that have an adverse impact upon their lives – including domestic violence, substance misuse, bullying, mental health and radicalisation. We also acknowledge that safeguarding incidents could happen anywhere and staff should maintain an attitude of ‘it could happen here’ where safeguarding is concerned. When concerned about the welfare of a child, staff members should always act in the interests of the child.

Safeguarding Team

<b>Designated Safeguarding Lead</b>	<b>Carole Ives</b>	<b>Deputy Head Teacher</b>
<b>Designated Safeguarding Lead (Secondary)</b>	<b>Karen Kondo</b>	<b>Head Teacher</b>
<b>Designated Safeguarding Lead (Secondary)</b>	<b>Ruth Cullinan</b>	<b>Pupil and Family Worker</b>
<b>Safeguarding Governor</b>	<b>Terry Barker</b>	<b>Governor</b>
<b>Local Authority Designated Officer (LADO)</b>	<b>Kogie Perumall</b>	<b>0208 8825 8930 aap@ealing.gov.uk</b>

## 2. Legislation and statutory guidance

This policy is based on the Department for Education's statutory guidance, [Keeping Children Safe in Education](#) (2018), [Working Together to Safeguard Children](#), and the [Governance Handbook](#). We comply with this guidance and the procedures set out by our local safeguarding children board.

This policy is also based on the following legislation:

:

Section 175 of the [Education Act 2002](#), which places a duty on schools and local authorities to safeguard and promote the welfare of pupils

[The School Staffing \(England\) Regulations 2009](#), which set out what must be recorded on the single central record and the requirement for at least one person on a school interview/appointment panel to be trained in safer recruitment techniques

[The Children Act 1989](#) (and [2004 amendment](#)), which provides a framework for the care and protection of children

Section 5B(11) of the Female Genital Mutilation Act 2003, as inserted by section 74 of the [Serious Crime Act 2015](#), which places a statutory duty on teachers to report to the police where they discover that female genital mutilation (FGM) appears to have been carried out on a girl under 18

[Statutory guidance on FGM](#), which sets out responsibilities with regards to safeguarding and supporting girls affected by FGM

[The Rehabilitation of Offenders Act 1974](#), which outlines when people with criminal convictions can work with children

Schedule 4 of the [Safeguarding Vulnerable Groups Act 2006](#), which defines what 'regulated activity' is in relation to children

Statutory [guidance on the Prevent duty](#), which explains schools' duties under the Counter-Terrorism and Security Act 2015 with respect to protecting people from the risk of radicalisation and extremism

The [Childcare \(Disqualification\) Regulations 2009](#) (and 2018 amendment), and [Childcare Act 2006](#), which set out who is disqualified from working with children

This policy also meets requirements relating to safeguarding and welfare in the [statutory framework for the Early Years Foundation Stage](#).

## 3. Definitions

**Safeguarding and promoting the welfare of children** means:

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

**Child protection** is part of this definition and refers to activities undertaken to prevent children suffering, or being likely to suffer, significant harm.

**Abuse** is a form of maltreatment of a child, and may involve inflicting harm or failing to act to prevent harm. Appendix 1 explains the different types of abuse.

**Neglect** is a form of abuse and is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Appendix 1 defines neglect in more detail.

**Children** includes everyone under the age of 18.

**Safeguarding** relates to a wide range of aspects of school life which are interconnected including:

- health and safety including pupils' health and safety

- pupils' attendance and wellbeing
- meeting the needs of pupils with medical conditions
- educational visits
- intimate care
- supervision including changing for P.E. or swimming
- e-safety
- acceptable use of technology
- safe use of images
- physical intervention or approach (the use of reasonable force or restraint)
- working alone with others
- visitors, parents, volunteers, contractors on site
- safer recruitment and DBS checks
- allegations against staff
- whistle blowing
- first aid
- school security and visitor management
- equality and diversity

#### 4. Equality statement

Some children have an increased risk of abuse, and additional barriers can exist for some children with respect to recognising or disclosing it. We are committed to anti-discriminatory practice and recognise children's diverse circumstances. We ensure that all children have the same protection, regardless of any barriers they may face.

We give special consideration to children who:

Have special educational needs or disabilities

Are young carers

Looked after children

May experience discrimination due to their race, ethnicity, religion, gender identification or sexuality

Have English as an additional language

Are known to be living in difficult situations – for example, temporary accommodation or where there are issues such as substance abuse or domestic violence

Are at risk of FGM, sexual exploitation, forced marriage, or radicalisation

Are asylum seekers

#### 5. Roles and responsibilities

Safeguarding and child protection is **everyone's** responsibility. This policy applies to all staff, volunteers and governors in the school and is consistent with the procedures of Ealing safeguarding children's board. Our policy and procedures also apply to extended school and off-site activities.

##### 5.1 All staff

All staff will read and understand part 1 of the Department for Education's statutory safeguarding guidance, [Keeping Children Safe in Education](#) (2018), and review this guidance at least annually.

All staff will be aware of:

- Our systems which support safeguarding, including the Staff Code of Conduct, behaviour policy, the role of the designated safeguarding lead (DSL) and the safeguarding response to children who go missing from education

- The early help process (sometimes known as the common assessment framework) and their role in it, including identifying emerging problems, liaising with the DSL, and sharing information with other professionals to support early identification and assessment
- The process for making referrals to local authority children's social care and for statutory assessments that may follow a referral, including the role they might be expected to play
- What to do if they identify a safeguarding issue or a child tells them they are being abused or neglected, including specific issues such as FGM, and how to maintain an appropriate level of confidentiality while liaising with relevant professionals
- The signs of different types of abuse and neglect, as well as specific safeguarding issues, such as child sexual exploitation (CSE), FGM and radicalisation

Section 7 and appendix 2 of this policy outline in more detail how staff are supported to do this.

Any child may benefit from early help, but staff should be particularly alert to the potential need for early help for a child who:

- Is disabled and has specific additional needs
- Has special educational needs
- Is a young carer
- Is a looked after child
- Is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups
- Is frequently missing/goes missing from care or from home
- Is misusing drugs or alcohol themselves
- Is at risk of modern slavery, trafficking or exploitation
- Is in family circumstances presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse
- Has returned home to their family from care
- Is showing early signs of abuse and/or neglect
- Is at risk of being radicalised or exploited
- Is a privately fostered child

## **5.2 The Designated Safeguarding Lead (DSL)**

Our DSL is Mrs Carole Ives (Deputy Head Teacher). The DSL takes lead responsibility for child protection and wider safeguarding. We have a safeguarding team of three DSL's which also includes Ms Karen Kondo, Head Teacher (Secondary DSL) and Ms Ruth Cullinan, Pupil and Family Worker (Secondary DSL). Ms Cullinan is available to support children and families with safeguarding issues.

During term time, the DSL will be available during school hours for staff to discuss any safeguarding concerns. Out of school hours the DSL's can be contacted by email or phone in an emergency.

If the DSL and two other team members are not available, the Assistant Head teachers will act as cover.

The DSL will be given the time, funding, training, resources and support to:

Provide advice and support to other staff on child welfare and child protection matters

Take part in strategy discussions and inter-agency meetings and/or support other staff to do so

Contribute to the assessment of children

Refer suspected cases, as appropriate, to the relevant body (local authority children's social care, Channel programme, Disclosure and Barring Service, and/or police), and support staff who make such referrals directly

The DSL will also keep the headteacher informed of any issues, and liaise with local authority case managers and designated officers for child protection concerns as appropriate.

The full responsibilities of the DSL are set out in their job description.

### 5.3 The Governing Body

The Governing Body will approve this policy at each review, and hold the headteacher to account for its implementation.

The Governing Body will appoint a link governor to monitor the effectiveness of this policy in conjunction with the full governing board. This is always a different person from the DSL. Our current link governor is Mr Terry Barker.

The Chair of Governors will act as the 'case manager' in the event that an allegation of abuse is made against the headteacher, where appropriate (see appendix 3).

### 5.4 The Head teacher

The head teacher is responsible for the implementation of this policy, including:

- Ensuring that staff (including temporary staff) and volunteers are informed of this policy as part of their induction
- Communicating this policy to parents when their child joins the school and via the school website
- Ensuring that the DSL has appropriate time, funding, training and resources, and that there is always adequate cover if the DSL is absent
- Ensuring that all staff undertake appropriate safeguarding and child protection training and update this regularly
- Acting as the 'case manager' in the event of an allegation of abuse made against another member of staff or volunteer, where appropriate (see appendix 3)
- Ensuring the relevant staffing ratios are met, where applicable

## 6. Confidentiality

Timely information sharing is essential to effective safeguarding. Information must be shared on a 'need-to-know' basis, but you do not need consent to share information if a child is suffering, or at risk of, serious harm

Staff should never promise a child that they will not tell anyone about an allegation, as this may not be in the child's best interests

## 7. Recognising abuse and taking action

Safeguarding concerns, identification and specific safeguarding issues

The following is a brief overview of the signs of abuse and neglect. It should be noted that ***abuse, neglect and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases multiple issues will overlap with one another.***

### 7.1 Abuse:

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

### 7.2 Physical abuse:

A form of abuse which may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

**Signs of physical abuse** (some examples below and not an exhaustive list)

- Children with frequent injuries;

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

### **7.3 Emotional abuse:**

The persistent emotional maltreatment of a child such as to cause severe and adverse effects on the child's emotional development. It may involve conveying to a child that they are worthless or unloved, inadequate, or valued only insofar as they meet the needs of another person. It may include not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate. It may feature age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability as well as overprotection and limitation of exploration and learning, or preventing the child from participating in normal social interaction. It may involve seeing or hearing the ill-treatment of another. It may involve serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children. Some level of emotional abuse is involved in all types of maltreatment of a child, although it may occur alone.

#### **Signs of emotional abuse** (some examples below and not an exhaustive list)

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

### **7.4 Sexual abuse:**

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

#### **Signs of sexual abuse** (some examples below and not an exhaustive list)

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

### **7.5 Neglect:**

The persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy, for example, as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to: provide adequate food, clothing and shelter (including exclusion from home or abandonment); protect a child from physical and emotional harm or danger; ensure adequate supervision (including the use of inadequate care-givers); or ensure access to appropriate medical care or treatment. It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

## **Signs of neglect** (some examples below and not an exhaustive list)

- Children who are living in a home that is indisputably dirty or unsafe;
- Children who are left hungry or dirty;
- Children who are left without adequate clothing, e.g. not having a winter coat;
- Children who are living in dangerous conditions, i.e. around drugs, alcohol or violence;
- Children who are often angry, aggressive or self-harm;
- Children who fail to receive basic health care;
- Parents who fail to seek medical treatment when their children are ill or are injured; and
- Abuse and neglect are forms of maltreatment – a person may abuse or neglect a child by inflicting harm, or by failing to act to prevent harm.

It is important to maintain an attitude of *'it could happen here'* where safeguarding is concerned. Knowing what to look for is vital to the early identification of abuse and neglect. However, if you are unsure you should always speak to the Designated Safeguarding Lead.

## **7.6 Peer on Peer Abuse**

Staff should be aware that children can abuse children. This is called peer on peer abuse. This is most likely to include, but may not be limited to:

- Bullying (including cyberbullying)
- Physical abuse such as hitting, kicking, shaking, biting, hair pulling or otherwise causing physical harm
- Sexual violence and sexual harassment
- Sexting (also known as youth produced sexual imagery)
- Initiation/hazing type violence and rituals

Please refer to Page 16 and Appendix 3 and Appendix 4

## **7.7 Specific safeguarding issues**

**Safeguarding** can involve a range of specific issues:

- bullying including cyberbullying
- children missing in education (CME)
- child missing from home or care
- child sexual exploitation (CSE)
- children in the court system
- children with family members in prison
- domestic abuse
- drug and substance misuse
- fabricated or induced illness
- faith abuse
- female genital mutilation
- forced marriage
- 'honour based violence'
- hate
- gangs and youth violence
- homelessness
- mental health
- peer on peer abuse (bullying, physical abuse, sexual violence, sexual harassment, sexting, initiation/hazing type violence and rituals)
- racist incidents

- radicalisation
- relationship abuse
- self-harm
- sexual violence and sexual harassment
- sexting
- trafficking
- Violence against women and girls (VAWG)

For further information on these specific issues and on identifying abuse and neglect and for links to further advice and support, refer to:

- [Annex A of Keeping Children Safe in Education 2018](#)
- The [NSPCC website](#)  
[MindEd](#)
- The Department for Education’s advice [What to do if you are worried a child is being abused- Advice for practitioners](#)
- Ealing Safeguarding Board’s [What to look out for](#)

Please refer to Appendix 2 – Possible Indicators Child Sexual Exploitation for further advice on signs which may be indicators of CSE

## 8. Procedures

**8.1** It is important to maintain an attitude of ‘it could happen here’ where safeguarding is concerned. Knowing what to look for is vital to the early identification of abuse and neglect. However, if you are unsure you should always speak to the Designated Safeguarding Lead.

Staff, volunteers and governors must follow the procedures set out below in the event of a safeguarding issue.

MyConcern is the school’s electronic safeguarding reporting and recording system.

When staff report a concern on MyConcern, options will then include:

1. Managing any support for the child internally
2. An early help assessment
3. A referral to statutory services

Where there are concerns, or a child has been allocated to a Child Protection Plan or Child in Need Plan by social services, staff will be informed and updated on a need to know basis as and when required.

**An appropriate level of confidentiality should always be maintained.**

### 8.2 If a child is in immediate danger

Make a referral to children’s social care and/or the police **immediately** if a child is in immediate danger or at risk of harm. **Anyone can make a referral.**

Tell the DSL (see section 5.2) as soon as possible if you make a referral directly.

If you have a concern about the safety or welfare of a child or young person you should contact Ealing Children’s Integrated Response Service (ECIRS) on **020 8825 8000** – the team is available weekdays 9am – 5pm and 24 hours a day for more serious cases.

A member of the ECIRS team will listen to you and make a decision about the urgency of the case and the best way forward. In the case of a safeguarding issue the caller has the opportunity to speak to social workers who will note the concerns and advise appropriate next steps.

Contact ECIRS if:

- You are concerned that a child may be at risk of harm
- You are concerned that a child may be experiencing verbal or physical abuse
- You are concerned about a child's behaviour, at school or at home
- You are facing difficult parenting issues such as drug and alcohol use

If you believe a child may be **immediately at risk please call 999**.

The Ealing children Safeguarding Board webpage provides general information about safeguarding and also about how to make a referral.

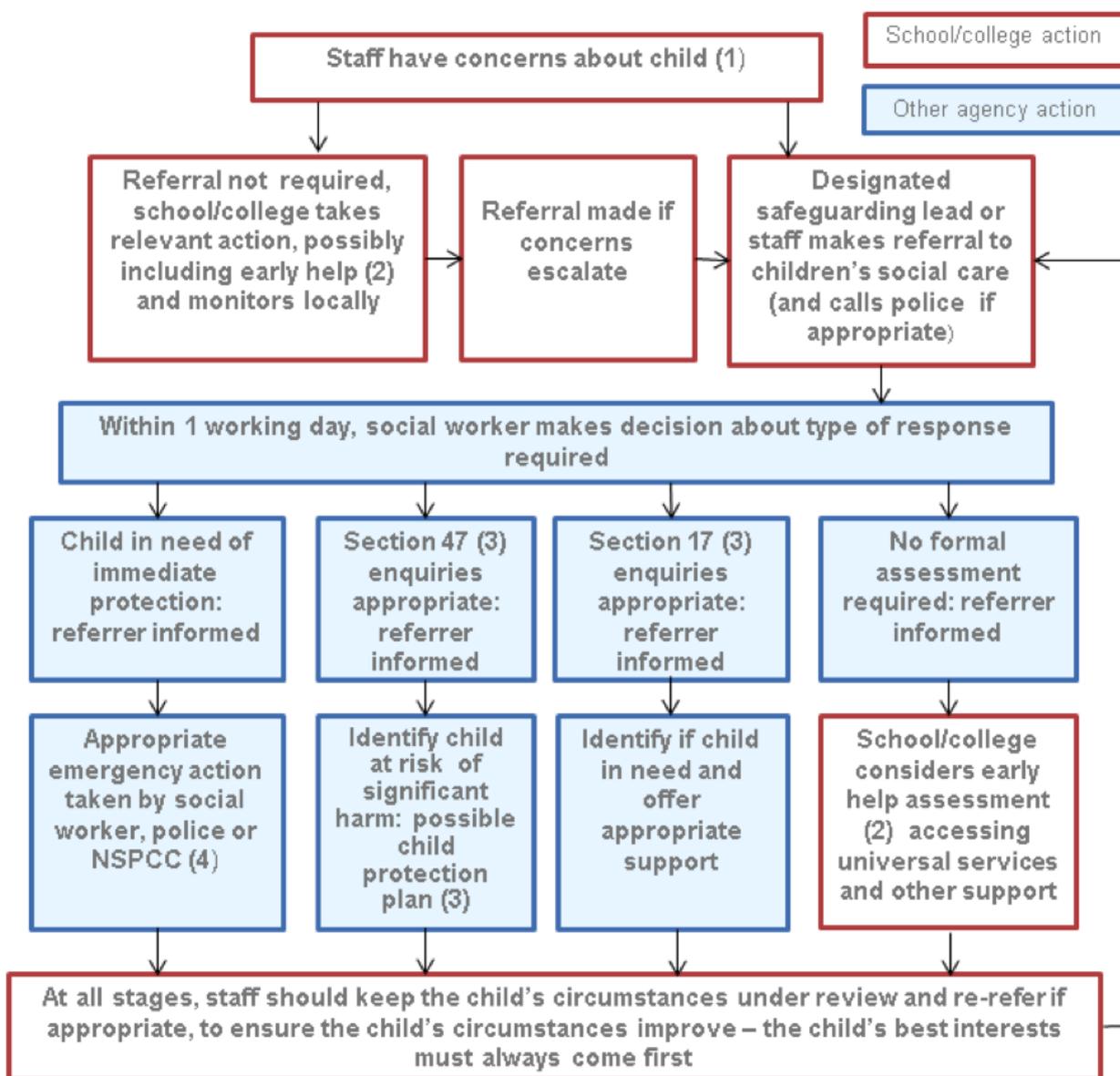
<https://www.ealingfamiliesdirectory.org.uk/kb5/ealing/directory/escb.page?escbchannel=0>

The link below to the GOV.UK webpage provided details of how to refer if a child is not an Ealing child.

<https://www.gov.uk/report-child-abuse-to-local-council>

Figure 1.

## Actions where there are concerns about a child



Notes on the flow chart:

1. In cases that also involve an allegation of abuse against a staff member, see the school Policy 'Procedure for schools responding to allegations of abuse by teachers and other school staff.'
2. See *9. The Early Help process* section for further guidance.
3. Under the Children Act 1989, local authorities are required to provide services for children in need for the purposes of safeguarding and promoting their welfare. This can include Section 17 assessments of children in need and Section 47 assessments of children at risk of significant harm.
4. This could include applying for an Emergency Protection Order (EPO).

If after a referral the child's situation does not appear to be improving, the DSL (or the person who made the referral) should press for re-consideration to ensure their concerns have been addressed and, most importantly, that the child's situation improves.

### 8.3 If you have concerns about a child (as opposed to a child being in immediate danger)

Figure 1 illustrates the procedure to follow if you have concerns about a child's welfare and the child is not in immediate danger.

Where possible, speak to the DSL first to agree a course of action. Alternatively, make a referral to local authority children's social care directly (see 'Referral' below).

You can also contact the charity NSPCC on 0808 800 5000 if you need advice on the appropriate action.

If it is appropriate to refer the case to local authority children's social care or the police, the DSL will make the referral or support you to do so.

If you make a referral directly (see section 7.1), you must tell the DSL as soon as possible.

The local authority will make a decision within 1 working day of a referral about what course of action to take and will let the person who made the referral know the outcome. The DSL or person who made the referral must follow up with the local authority if this information is not made available, and ensure outcomes are properly recorded.

If the child's situation does not seem to be improving after the referral, the DSL or person who made the referral must contact the local authority and make sure the case is reconsidered to ensure the concerns have been addressed and the child's situation improves.

### 8.4 If a child makes a disclosure to you

If a child discloses a safeguarding issue to you, you should:

- Listen to and believe them. Allow them time to talk freely and do not ask leading questions
- Stay calm and do not show that you are shocked or upset
- Tell the child they have done the right thing in telling you. Do not tell them they should have told you sooner
- Explain what will happen next and that you will have to pass this information on. Do not promise to keep it a secret
- Add details of the conversation to MyConcern as soon as possible in the child's own words. Stick to the facts, and do not put your own judgement on it. The details will automatically be emailed to the DSL's as soon as you have saved the referral.
- Always speak to the DSL if the case is urgent. Alternatively, if appropriate, make a referral to children's social care and/or the police directly (see 7.1), and tell the DSL as soon as possible that you have done so

Make sure that you allow individual children to express their feelings and wishes concerning what actions to take and what services to involve.

After a decision has been made by the DSL regarding the next steps, there may be a need to make a referral to children's social care or other agencies as a consequence. Parents will always be informed unless there is a risk to the child.

### 8.5 How to respond to parents

It is necessary to strike a balance between respecting the parents and ensuring children are protected. Childcare legislation stresses that the **child's welfare is paramount** so parents may have to be placed second in order to protect children who may be abused.

Staff need to be aware that it is important:

- Not to make assumptions or express opinions to parents
- Not to assume that parents are 'not the sort of person' who would abuse
- To gather all related information

- To keep in mind that the investigation is not a criminal enquiry but an attempt to find out what has happened
- That the school is not required to disclose any child protection information to parents
- in cases of physical or sexual abuse to contact children's social care before parents are told of the concern
- To tell parents that Government guidelines direct schools to refer concerns to children's social care and that the school has no discretion in the matter

## 8.6 Recording and Monitoring Concerns on MyConcern

All safeguarding concerns, discussions, decisions made and the reasons for those decisions, must be recorded. Accurate records can be the basis of valuable contributions to child protection conferences and court cases, helping to ensure that sound decisions are made.

The school uses 'My Concern'. This is a safe and secure software for recording and managing all safeguarding concerns. The system enables all staff to record any safeguarding concern, safe in the knowledge that a proper record has been made and that their safeguarding lead has been automatically notified. It also equips the designated safeguarding lead to assess each concern and manage any ongoing action that needs to be taken.

All staff will be responsible for recording concerns from their own observations or from information given to them by other school staff, professionals or parents.

When reporting a concern in MyConcern, the following must be recorded:

- All concerns, discussions and decisions made and the reasons for those decisions
- Any marks on the pupil's body, using the body map on MyConcern
- Any inappropriate behaviour from the pupil
- Any poor attendance as reported by the attendance officer
- Details of conversations with parents/carers and pupils about the concern (including direct quotes to ensure that information is factual)
- Each contact with or referral to another agency

All confidential information regarding the pupil is kept securely.

My Concern is monitored by the Designated Leads with emails sent to them whenever information is added to the system.

Safeguarding records relating to individual children will be retained for a reasonable period of time after they have left the school taking into account GDPR procedures.

The school shares information with other agencies when appropriate following GDPR procedures.

Where a child leaves the school, the DSL should ensure their child protection file is transferred to the new school. In addition, the DSL should also consider if it would be appropriate to share any information with the new school in advance of a child leaving. For example, information that would allow the new school to continue supporting the child successfully and to have support in place for when the child arrives.

## 8.7 Female Genital Mutilation (FGM) and Mandatory Reporting for Teachers

If an adult discovers that an act of Female Genital Mutilation appears to have been carried out on a girl under the age of 18, it **must** be reported to the police. It is illegal not to do so.

There is a specific legal duty for a teacher with regard to concerns about FGM: a teacher must make a report to the police personally. They must also report it to the school's DSL and record it on MyConcern. All other school staff should report concerns about FGM directly to the DSL and on MyConcern. The DSL will then make a report to the police.

If any member of staff is concerned that an act of FGM may happen in the future, it must be reported to the DSL for further investigation.

See Appendix 2 – Female Genital Mutilation (FGM) for further information on the risk factors and signs of FGM.

The *Department for Education's Keeping Children Safe in Education* explains that FGM comprises “all procedures involving partial or total removal of the external female genitalia, or other injury to the female genital organs”.

FGM is illegal in the UK and a form of child abuse with long-lasting, harmful consequences. It is also known as ‘female genital cutting’, ‘circumcision’ or ‘initiation’.

Further advice about FGM can be obtained from the NSPCC’s dedicated FGM helpline on 0800 028 3500.

Ealing’s African Well Woman Clinic can also help support girls affected by FGM – call 0208 383 8761 for more information.

### **8.8 If you have concerns about extremism**

If a child is not at immediate risk of harm, where possible, speak to the DSL first to agree a course of action. Alternatively, make a referral to local authority children’s social care directly if appropriate (see ‘Referral’ above).

Where there is a concern, the DSL will consider the level of risk and decide which agency to make a referral to. This could include [Channel](#), the government’s programme for identifying and supporting individuals at risk of being drawn into terrorism, or the local authority children’s social care team.

The Department for Education also has a dedicated telephone helpline, 020 7340 7264, which school staff and governors can call to raise concerns about extremism with respect to a pupil. You can also email [counter.extremism@education.gov.uk](mailto:counter.extremism@education.gov.uk). Note that this is not for use in emergency situations.

In an emergency, call 999 or the confidential anti-terrorist hotline on 0800 789 321 if you:

Think someone is in immediate danger

Think someone may be planning to travel to join an extremist group

See or hear something that may be terrorist-related

### **8.9 Procedures related to Peer on Peer Abuse**

We recognise that children are capable of abusing their peers. Abuse will never be tolerated or passed off as “banter”, ‘just having a laugh’ or “part of growing up”.

There is a recognition that it is more likely that girls will be the victims of peer on peer abuse and boys will be perpetrators. However, **all peer on peer abuse is unacceptable and will be taken seriously.**

Appendix 4 – How to respond to peer on peer abuse and sexual violence/harassment outlines in detail how the school’s Safeguarding Team will:

- minimise the risk of peer on peer abuse
- record, investigate and deal with allegations of peer on peer abuse
- support victims, perpetrators and any other child affected by peer on peer abuse

If a member of staff identifies or suspects a case of peer on peer abuse, they should:

- deal with a situation of peer abuse immediately and sensitively
- gather the facts by speaking to all children involved separately
- report the concern via MyConcern as you would for any other safeguarding concern.

The DSL will then decide on the appropriate course of action.

If a pupil makes an allegation of abuse against another pupil:

The initial response to a report from a child is important. It is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

If staff have a concern about a child or a child makes a report to them, they should follow the guidance in Appendix 3 'How to Respond to Peer on Peer abuse' and Appendix 10 'Responding to a referral of sexual violence or harassment'. As is always the case, if staff are in any doubt as to what to do they should speak to the designated safeguarding lead (or a deputy).

Safeguarding children in School 2018 (Part 5: p62) gives further details of managing reports on child sexual violence and sexual harassment

We will minimise the risk of peer-on-peer abuse by:

- Challenging any form of derogatory or sexualised language or behaviour
- Being vigilant to issues that particularly affect different genders – for example, sexualised or aggressive touching or grabbing towards female pupils, and initiation or hazing type violence with respect to boys
- Ensuring our curriculum helps to educate pupils about appropriate behaviour and consent
- Ensuring pupils know they can talk to staff confidentially by making staff available such as the pupil and family worker and counsellor and by posters around the school reminding children who they can speak to.
- Ensuring staff are trained to understand that a pupil harming a peer could be a sign that the child is being abused themselves, and that this would fall under the scope of this policy
- 

Advice and support is available in the [Sexual violence and sexual harassment between children in schools and colleges \(2018\)](#) document which provides information and links to resources.

### **8.10 Concerns about a staff member or volunteer**

The Ealing Safeguarding Children's Board sets out clear guidelines for the behaviour of all adults who work with children. The below is a summary of the main points:

- **Sexual Activity:** Under section 16 of the Sexual Offences Act 2003 where a person aged 18 or over (e.g. a teacher) is in a specified position of trust with a child under the age of 18, it is illegal for that person to engage in sexual activity with or in the presence of that child or incite that child to engage in or watch sexual activity
- **Communication between school staff and children,** by whatever means, should take place within clear professional boundaries, both within and outside of school. This includes the use technology including mobile phones, text messaging, of e-mails and social media. Staff should not share personal information with a child nor should they request or respond to any personal information from the child. All West Acton staff should read and sign the Staff Acceptable Use Agreement which outlines their responsibilities when using any form of ICT within their professional role.
- **Physical Contact:** There are occasions when it is entirely appropriate for school staff to have some physical contact with a child. However, it is crucial that, in all circumstances, adults should only touch children in ways which are appropriate to their profession or agreed role and responsibilities. Please refer to the schools Behaviour Management Policy which includes advice on the use of reasonable force and the Staff Code of conduct Policy for more information on physical contact.

If you have concerns about a member of staff or volunteer, speak to the headteacher. If you have concerns about the headteacher, speak to the chair of governors. You can also discuss any concerns about any staff member or volunteer with the DSL.

The headteacher/chair of governors/DSL will then follow the procedures set out in the school policy, 'Procedure for schools responding to allegations of abuse by teachers and other school staff', if appropriate.

## 9. The Early Help process

**9.1 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.

Effective early help relies upon local agencies, including schools, working together to:

- identify children and families who would benefit from early help
- undertake an assessment of the need for early help
- 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

Professionals, including school staff should, in particular, be alert to the potential need for early help for a child who:

- is disabled and has specific additional needs
- has special educational needs
- is a young carer
- is showing signs of engaging in anti-social or criminal behaviour, including gang involvement and association with organised crime groups
- frequently missing/goes missing from care or home
- is in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems and domestic violence
- is misusing drugs or alcohol themselves
- has returned home to their family from care
- is at risk of modern slavery, trafficking or exploitation
- is a privately fostered child
- is at risk of being radicalised or exploited
- is showing early signs of abuse and/or neglect
- has perpetrated peer on peer abuse
- has experienced trauma or bereavement
- is a looked after child(or previously looked after child) or child in care.

If a staff member has identified an emerging need they should first liaise with the DSL. The DSL will lead on liaising with other agencies and setting up inter-agency assessment if appropriate. If early help and/or other support is appropriate, the case should be kept under constant review and consideration given to a referral to children's social care if the child's situation does not appear to be improving.

For further information, please refer to [Chapter 1 of Working Together to Safeguard Children](#) which contains a detailed guide to identifying need and providing help.

## 9.2 Looked after children (LAC)

The most common reason for children to become a looked after child is abuse and/or neglect.

The Designated Safeguarding Lead will ensure that the safeguarding team:

- promote the educational achievement of LAC children;
- ensure staff have the skills and knowledge to keep LAC children safe;
- ensure relevant staff know: the exact legal status of each LAC child in school; the contact arrangements with birth parents or those with parental responsibility; the child's care arrangements and levels of authority delegated to the carer by the authority looking after her/him;
- document the contact details for the child's allocated support worker and the name of the Virtual School Head<sup>1</sup> in the local authority that looks after the child;
- attend and prepare for PEP (Personal Education Plan) meetings and reviews, as organised by the child's allocated support worker;
- work with the Virtual School Head to discuss how funding can be best used to support the progress of LAC in the school and meet the needs of individual PEPs; and
- prepare an annual report to the governing body on LAC children.
- understand that previously LAC remain vulnerable and will continue to ensure that these children are safe.

## 9.3 Children with special educational needs (SEND)

Children with special educational needs and disabilities (SEND) can face additional safeguarding challenges as they can be often vulnerable due to their physical, mental or learning needs. This can include:

- assumptions that indicators of possible abuse such as behaviour, mood and injury relate to the child's disability without further exploration;
- children with SEND can be disproportionately impacted by things like bullying- without outwardly showing any signs; and
- communication barriers and difficulties in overcoming these barriers.

West Acton has several mechanisms in place to support and encourage SEND as well as other vulnerable pupils, including:

- 'The Space' which is run by our Counsellor and Pupil and Family Worker. Pupils can post a note in one of the three postboxes around the school and request to speak to Lia (Counsellor) or Miss Ruth (Pupil and Family worker). Pupils have had guidance on using the Space and know it is a confidential area which is open to all children so they can express their worries or concerns in a more sensitive one-to-one context;
- Access to our Pupil and Family worker for 1:1 mentoring and group work. Access to Miss Niland (HLTA Inclusion) for Drawing therapy, 1:1 support and group work.
- The Breakfast Club, which offers a nurturing environment to vulnerable children, including those with SEND or additional needs, who may benefit from the opportunity to socialise with their peers before the start of the school day; and
- Individual risk assessments which are created collaboratively with parents to ensure safety measures are in place for a child who could be vulnerable due to their SEND or additional needs.

Weekly safeguarding meetings allow opportunities to follow up actions for SEND pupils for whom safeguarding concerns have been raised

If a staff member has identified an emerging need they should first liaise with the Designated Safeguarding Lead. The DSL will then advise and support the staff member in liaising and sharing information with other agencies. In some cases the staff member may be required to act as the lead professional in undertaking an interagency early help assessment. The DSL will continue to support the staff member throughout this process.

If early help and/or other support is appropriate, the case should be kept under constant review and consideration given to a referral to children's social care if the child's situation doesn't appear to be improving.

***For further information, please refer to [Chapter 1 of Working Together to Safeguard Children](#), which contains a detailed guide to identifying need and providing help.***

## **10. Mobile phones and cameras**

Staff are allowed to bring their personal phones to school for their own use, but will limit such use to non-contact time when pupils are not present. Staff members' personal phones will remain in their bags or cupboards during contact time with pupils.

Staff will not take pictures or recordings of pupils on their personal phones or cameras.

We will follow the General Data Protection Regulation 2018 when taking and storing photos and recordings for use in the school.

### **Procedures related to the use of mobile technology, including specific guidance for safeguarding in EYFS**

In both the Early Years Foundation Stage (EYFS) setting, and across the school, the use of personal mobile phones, cameras and/or other smart devices by staff to take photos of children both in and out of school is not permitted. See the school's guidelines on the Use of Mobile Phones and Smart Devices in school for more information.

- Parents and carers are asked to switch off mobile phones if they are coming into the early years setting and leave the setting if they need to use their mobile;
- Parents are prohibited from taking any photographs of children in the early years setting. Exceptions would be in the event of a class assembly, Christmas concert or sports day;
- At all school events, including those within the EYFS setting, parents will be asked (by a member of the Senior Leadership Team) to not post any pictures taken anywhere within the school, or at a school related event, on social media of any kind;
- Staff seek parental permission to publish photographs of the children, which must be linked to teaching the curriculum, and staff use school equipment only for this purpose;
- Staff must use mobile phones during breaks in the staff room and not whilst children are present unless in an emergency;
- Only school cameras/devices should be used for all recording/photographing purposes both in and out of school. These images should only be printed out at school and staff should not under any circumstances take home photos or images of children.

In all other areas, EYFS will follow the school's safeguarding and child protection procedures.

## 11. Concerns about the School's Management of Safeguarding

Staff are encouraged to be vigilant and to raise any concerns about poor or unsafe practice and potential failures in the school's safeguarding regime secure in the knowledge that such concerns will be taken seriously by the senior leadership team.

The school has a Whistleblowing Policy which details how to deal with concerns about the school's management of safeguarding.

All staff and volunteers should feel able to raise concerns about poor or unsafe practice and potential failures in the school's safeguarding regime. Staff concerns will be taken seriously.

If a staff member feels unable to raise an issue with the DSL or feels that their genuine concerns are not being addressed, the following alternative whistleblowing channels may be open to them:

General guidance can be found at the gov.uk [Whistleblowing for Employee's](#) webpages

The NSPCC whistleblowing helpline is also available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 or Email [help@nspcc.org.uk](mailto:help@nspcc.org.uk)

## 12. Training

### 12.1 All staff

During the mandatory induction, all regular school staff, will be made aware of the systems West Acton has in place to support safeguarding. They will be provided with access to:

- This Safeguarding and Child Protection Policy
- Part 1 of Keeping Children Safe in Education (2018)
- Behaviour Management Policy
- The Staff Code of Conduct
- School's response to Children missing education

In addition to this, the following will be highlighted:

- The role of the DSL
- The signs of abuse and neglect
- How to keep children safe online
- The Early Help Process
- The referral process MyConcern
- The response process if a child makes a disclosure
- The Prevent duty
- Whistleblowing

This training will be regularly updated and will be in line with advice from our local safeguarding children board.

All staff will have training on the government's anti-radicalisation strategy, Prevent, to enable them to identify children at risk of being drawn into terrorism and to challenge extremist ideas.

Staff will also receive regular safeguarding and child protection updates (for example, through emails, e-bulletins and staff meetings) as required, but at least annually.

Volunteers will receive appropriate training, if applicable.

**Supply Teachers** will receive a safeguarding pack in line with statutory requirements.

**Other visitors**, including volunteers and contractors will be asked to read a safeguarding notice before signing in to the school so that they are aware of how to report a concern and to who.

## **12.2 The DSL and DSL Team**

The DSL and DSL Team will undertake child protection and safeguarding training at least every 2 years.

In addition, they will update their knowledge and skills at regular intervals and at least annually (for example, through e-bulletins, meeting other DSLs, or taking time to read and digest safeguarding developments).

They will also undertake Prevent awareness training.

## **12.3 Governors**

All governors receive training about safeguarding, to make sure they have the knowledge and information needed to perform their functions and understand their responsibilities.

## **12.4 Recruitment – interview/appointment panels**

The school 'Recruitment and Selection Policy' has been produced in line with the Department for Children, Schools and Families' (DCSF) guidance 'Safeguarding Children and Safer Recruitment' and the Children's Workforce Development Council (CWDC) guidance on 'Recruiting Heads and Senior Leaders'. Safeguarding and promoting the welfare of children and young people is an integral factor in recruitment and selection and is an essential part of creating safe environments for children and young people. At least one person on any interview/appointment panel for a post at the school will have undertaken safer recruitment training. This will cover, as a minimum, the contents of the Department for Education's statutory guidance, Keeping Children Safe in Education, and be in line with local safeguarding procedures.

## **12.5 Support for Staff**

The abuse of children can create strong emotions in professionals, especially if they know the child well. Such feelings are natural and can affect staff personally. Staff may also have the burden of continuing daily contact with the child, and in some cases the parents. Support in the form of opportunity for staff to discuss their feelings and the effect of this work on their personal life can come from:

- Colleagues, the DSL, Headteacher, the school counsellor
- The Workplace Options Employee Assistance Program confidential telephone counselling service is available to school staff 24 hours a day, 7 days a week. A flyer with their up to date contact number is on the notice board in the staff room
- The Local Authority's Designated Officer is available for discussion or organisation of appropriate support
- All staff who have contact with children and families will have supervisions which will provide them with support, coaching and training, promote the interests of children and allow for confidential discussions of sensitive issues.

## **13. Monitoring arrangements**

This policy will be reviewed **annually** by Mrs Carole Ives/Deputy Head Teacher. At every review, the policy will be approved by the full governing board.

## **14. Links with other policies**

This policy links to the following policies and procedures:

Behaviour

Staff code of Conduct

Parent and Visitor Code of Conduct

Complaints

Health and safety

Records Management  
Staff Acceptable Use of Digital Technology  
Attendance  
Online safety  
Recruitment and Selection Policy  
Procedure for school responding to allegations of abuse by teachers and other school staff  
Sex and relationship education(SRE)  
First aid  
Curriculum  
Whistleblowing

**These appendices are based on the Department for Education's statutory guidance, Keeping Children Safe in Education 2018.**

### **Appendix 1: types of abuse**

Abuse, including neglect, and safeguarding issues are rarely standalone events that can be covered by one definition or label. In most cases, multiple issues will overlap.

**Physical abuse** may involve hitting, shaking, throwing, poisoning, burning or scalding, drowning, suffocating or otherwise causing physical harm to a child. Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child.

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

Emotional abuse may involve:

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

Not giving the child opportunities to express their views, deliberately silencing them or 'making fun' of what they say or how they communicate

Age or developmentally inappropriate expectations being imposed on children. These may include interactions that are beyond a child's developmental capability, as well as overprotection and limitation of exploration and learning, or preventing the child participating in normal social interaction

Seeing or hearing the ill-treatment of another

Serious bullying (including cyberbullying), causing children frequently to feel frightened or in danger, or the exploitation or corruption of children

**Sexual abuse** involves forcing or enticing a child or young person to take part in sexual activities, not necessarily involving a high level of violence, whether or not the child is aware of what is happening. The activities may involve:

Physical contact, including assault by penetration (for example rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside of clothing

Non-contact activities, such as involving children in looking at, or in the production of, sexual images, watching sexual activities, encouraging children to behave in sexually inappropriate ways, or grooming a child in preparation for abuse (including via the internet)

Sexual abuse is not solely perpetrated by adult males. Women can also commit acts of sexual abuse, as can other children.

**Neglect** is the persistent failure to meet a child's basic physical and/or psychological needs, likely to result in the serious impairment of the child's health or development. Neglect may occur during pregnancy as a result of maternal substance abuse.

Once a child is born, neglect may involve a parent or carer failing to:

Provide adequate food, clothing and shelter (including exclusion from home or abandonment)

Protect a child from physical and emotional harm or danger

Ensure adequate supervision (including the use of inadequate care-givers)

Ensure access to appropriate medical care or treatment

It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

## **Appendix 2: specific safeguarding issues**

### **Children missing from education**

A child going missing from education is a potential indicator of abuse or neglect, and such children are at risk of being victims of harm, exploitation or radicalisation.

There are many circumstances where a child may become missing from education, but some children are particularly at risk. These include children who:

- Are at risk of harm or neglect
- Come from Gypsy, Roma, or Traveller families
- Come from the families of service personnel
- Go missing or run away from home or care
- Are supervised by the youth justice system
- Cease to attend a school
- Come from new migrant families

We will follow our procedures for unauthorised absence and for dealing with children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual exploitation, and to help prevent the risks of going missing in future. This includes informing the local authority if a child leaves the school without a new school being named, and adhering to requirements with respect to sharing information with the local authority, when applicable, when removing a child's name from the admission register at non-standard transition points.

Staff will be trained in signs to look out for and the individual triggers to be aware of when considering the risks of potential safeguarding concerns which may be related to being missing, such as travelling to conflict zones, FGM and forced marriage.

If a staff member suspects that a child is suffering from harm or neglect, we will follow local child protection procedures, including with respect to making reasonable enquiries. We will make an immediate referral to the local authority children's social care team, and the police, if the child is in immediate danger or at risk of harm.

Where reasonably possible, we will hold more than one emergency contact number for each pupil. This is good practice as it gives the school options to make contact with a responsible adult when a child missing from education is also identified as a welfare and/or safeguarding concern.

### **Child sexual exploitation**

Child sexual exploitation (CSE) is a form of sexual abuse where children are sexually exploited for money, power or status.

This can involve violent, humiliating and degrading sexual assaults, but does not always involve physical contact and can happen online. For example, young people may be persuaded or forced to share sexually explicit images of themselves, have sexual conversations by text, or take part in sexual activities using a webcam.

Children or young people who are being sexually exploited may not understand that they are being abused. They often trust their abuser and may be tricked into believing they are in a loving, consensual relationship.

If a member of staff suspects CSE, they will discuss this with the DSL. The DSL will trigger the local safeguarding procedures, including a referral to the local authority's children's social care team and the police, if appropriate.

Indicators of sexual exploitation can include a child:

- Appearing with unexplained gifts or new possessions
- Associating with other young people involved in exploitation
- Having older boyfriends or girlfriends
- Suffering from sexually transmitted infections or becoming pregnant

- Displaying inappropriate sexualised behaviour
- Suffering from changes in emotional wellbeing
- Misusing drugs and/or alcohol
- Going missing for periods of time, or regularly coming home late
- Regularly missing school or education, or not taking part in education

## **FGM**

The DSL will make sure that staff have access to appropriate training to equip them to be alert to children affected by FGM or at risk of FGM.

Section 8.7 of this policy sets out the procedures to be followed if a staff member discovers that an act of FGM appears to have been carried out or suspects that a pupil is at risk of FGM.

Indicators that FGM has already occurred include:

- A pupil confiding in a professional that FGM has taken place
- A mother/family member disclosing that FGM has been carried out
- A family/pupil already being known to social services in relation to other safeguarding issues
- A girl:
  - Having difficulty walking, sitting or standing, or looking uncomfortable
  - Finding it hard to sit still for long periods of time (where this was not a problem previously)
  - Spending longer than normal in the bathroom or toilet due to difficulties urinating
  - Having frequent urinary, menstrual or stomach problems
  - Avoiding physical exercise or missing PE
  - Being repeatedly absent from school, or absent for a prolonged period
  - Demonstrating increased emotional and psychological needs – for example, withdrawal or depression, or significant change in behaviour
  - Being reluctant to undergo any medical examinations
  - Asking for help, but not being explicit about the problem
  - Talking about pain or discomfort between her legs

Potential signs that a pupil may be at risk of FGM include:

- The girl's family having a history of practising FGM (this is the biggest risk factor to consider)
- FGM being known to be practised in the girl's community or country of origin
- A parent or family member expressing concern that FGM may be carried out
- A family not engaging with professionals (health, education or other) or already being known to social care in relation to other safeguarding issues
- A girl:
  - Having a mother, older sibling or cousin who has undergone FGM
  - Having limited level of integration within UK society
  - Confiding to a professional that she is to have a "special procedure" or to attend a special occasion to "become a woman"
  - Talking about a long holiday to her country of origin or another country where the practice is prevalent, or parents stating that they or a relative will take the girl out of the country for a prolonged period
  - Requesting help from a teacher or another adult because she is aware or suspects that she is at immediate risk of FGM
  - Talking about FGM in conversation – for example, a girl may tell other children about it (although it is important to take into account the context of the discussion)
  - Being unexpectedly absent from school
  - Having sections missing from her 'red book' (child health record) and/or attending a travel clinic or equivalent for vaccinations/anti-malarial medication

The above indicators and risk factors are not intended to be exhaustive.

## Forced marriage

Forcing a person into marriage is a crime. A forced marriage is one entered into without the full and free consent of one or both parties and where violence, threats, or any other form of coercion is used to cause a person to enter into a marriage. Threats can be physical or emotional and psychological.

Staff will receive training around forced marriage and the presenting symptoms. We are aware of the 'one chance' rule, i.e. we may only have one chance to speak to the potential victim and only one chance to save them.

If a member of staff suspects that a pupil is being forced into marriage, they will speak to the pupil about their concerns in a secure and private place. They will then report this to the DSL.

The DSL will:

Speak to the pupil about the concerns in a secure and private place

Activate the local safeguarding procedures and refer the case to the local authority's designated officer

Seek advice from the Forced Marriage Unit on 020 7008 0151 or [fmf@fco.gov.uk](mailto:fmf@fco.gov.uk)

Refer the pupil to an education welfare officer, pastoral tutor, learning mentor, or school counsellor, as appropriate

## Preventing radicalisation

Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism. Extremism is vocal or active opposition to fundamental British values, such as democracy, the rule of law, individual liberty, and mutual respect and tolerance of different faiths and beliefs.

Schools have a duty to prevent children from being drawn into terrorism. The DSL will undertake Prevent awareness training and make sure that staff have access to appropriate training to equip them to identify children at risk.

We will assess the risk of children in our school being drawn into terrorism. This assessment will be based on an understanding of the potential risk in our local area, in collaboration with our local safeguarding children board and local police force.

We will ensure that suitable internet filtering is in place, and equip our pupils to stay safe online at school and at home.

There is no single way of identifying an individual who is likely to be susceptible to an extremist ideology. Radicalisation can occur quickly or over a long period.

Staff will be alert to changes in pupils' behaviour.

The government website [Educate Against Hate](#) and charity [NSPCC](#) say that signs that a pupil is being radicalised can include:

- Refusal to engage with, or becoming abusive to, peers who are different from themselves
- Becoming susceptible to conspiracy theories and feelings of persecution
- Changes in friendship groups and appearance
- Rejecting activities they used to enjoy
- Converting to a new religion
- Isolating themselves from family and friends
- Talking as if from a scripted speech
- An unwillingness or inability to discuss their views
- A sudden disrespectful attitude towards others
- Increased levels of anger
- Increased secretiveness, especially around internet use
- Expressions of sympathy for extremist ideologies and groups, or justification of their actions
- Accessing extremist material online, including on Facebook or Twitter
- Possessing extremist literature
- Being in contact with extremist recruiters and joining, or seeking to join, extremist organisations

Children who are at risk of radicalisation may have low self-esteem, or be victims of bullying or discrimination. It is important to note that these signs can also be part of normal teenage behaviour – staff should have confidence in their instincts and seek advice if something feels wrong.

If staff are concerned about a pupil, they will follow our procedures set out in section 7.5 of this policy, including discussing their concerns with the DSL.

Staff should **always** take action if they are worried.

### **Checking the identity and suitability of visitors**

All visitors will be required to verify their identity to the satisfaction of staff and to leave their belongings, including their mobile phone(s), in a safe place during their visit.

If the visitor is unknown to the setting, we will check their credentials and reason for visiting before allowing them to enter the setting. Visitors should be ready to produce identification.

Visitors are expected to sign the visitors' book and wear a visitor's badge.

All visitors to our setting, including visiting speakers, will be accompanied by a member of staff at all times. We will not invite into the school any speaker who is known to disseminate extremist views, and will carry out appropriate checks to ensure that any individual or organisation using school facilities is not seeking to disseminate extremist views or radicalise pupils or staff.

### **Non-collection of children**

The school follows these steps when students are not collected from school on time:

1. After normal end of school day collection, non-collected students are sent to the Office area to wait with a member of staff.
2. An Administrative Officer phones the student's parent/carer to ask the reason for lateness and arrival time.
3. Children are kept in the Office until a parent/carer can be contacted and arrives for collection.
4. After 5pm, if a parent/carer or emergency contact cannot be contacted, the Ealing social care team will be contacted to collect the student.

The school will contact parents/carers who persistently collect their children late and advise them to collect their children on time.

Where there are on-going concerns with persistent non-collection, school will organise a meeting with parents to identify the issue and discuss strategies/external support. When strategies have not been followed or external support has not been sought and the persistent non-collection occurs, this will be identified as a safeguarding concern.

### **Missing pupils**

Our procedures are designed to ensure that a missing child is found and returned to effective supervision as soon as possible. If a child goes missing, the senior leadership are informed immediately and procedures followed in order to locate the child, inform parents and where necessary contact the local police.

## Appendix 3

### How to respond to peer on peer abuse

**Expected action to be taken by all staff** Although the type of abuse may have a varying effect on the victim and initiator of the harm, these steps can help clarify the situation and establish the facts before deciding the consequences for those involved in perpetrating harm.

It is important to deal with a situation of peer abuse immediately and sensitively. It is necessary to gather the information as soon as possible to get the true facts around what has occurred as soon after the child(ren) may have forgotten. It is equally important to deal with it sensitively and think about the language used and the impact of that language on both the children and the parents when they become involved. For example; do not use the word perpetrator, this can quickly create a 'blame' culture and leave a child labelled.

#### **Gather the Facts**

Speak to all the children involved separately, gain a statement of facts from them and use consistent language and open questions for each account. The easiest way to do this is not to have a line of questioning but to ask the children to tell you what happened. Only interrupt the child from this to gain clarity with open questions, 'where, when, why, who'. (What happened? Who observed the incident? What was seen? What was heard? Did anyone intervene?)

**Consider the Intent** (begin to Risk Assess) Has this been a deliberate or contrived situation for a child to be able to harm another?

#### **Decide on your next course of action**

If from the information that you gather you believe any child to be at risk of harm the (where a crime has been committed the police should be involved also) you would complete a MyConcern referral to the Safeguarding team. The DSL will then decide on the appropriate course of action, using this policy as a set of guidelines.

#### **Informing parents**

The DSL or a member of the safeguarding team will usually contact the parents of both the victim and perpetrator, unless they deem the child to be at risk.

The best way to inform parents is face to face. Although this may be time consuming, the nature of the incident and the type of harm/abuse a child may be suffering can cause fear and anxiety to parents whether their child is the child who was harmed or who harmed another.

#### **Points to consider:**

##### **What is the age of the children involved?**

How old are the children involved in the incident and is there any age difference between those involved? (In relation to sexual exploration, children under the age of 5, in particular 1-4 year olds who are learning toileting skills may show a particular interest in exploration at around this stage. This, however should not be overlooked if other issues arise (see following)

**Where did the incident or incidents take place?** Was the incident in an open, visible place to others? If so was it observed?

**What was the explanation by all children involved of what occurred?**

Can each of the children give the same explanation of the incident and also what is the effect on the children involved? Is the incident seen to be bullying for example, in which case regular and repetitive? Is the version of one child different from another and why?

### **What is each of the children's own understanding of what occurred?**

Do the children know/understand what they are doing? E.g. do they have knowledge of body parts, of privacy and that it is inappropriate to touch? Is the child's explanation in relation to something they may have heard or been learning about that has prompted the behaviour? Is the behaviour deliberate and contrived? Does the child have understanding of the impact of their behaviour on the other person? In dealing with an incident of this nature the answers are not always clear cut.

### **Repetition**

Has the behaviour been repeated to an individual on more than one occasion? In the same way it must be considered: has the behaviour persisted to an individual after the issue has already been discussed or dealt with and appropriately resolved?

### **Next Steps**

Once the outcome of the incident(s) has been established it is necessary to ensure future incidents of abuse do not occur again and consider the support and intervention required for those involved.

### **For the child who has been harmed**

What support they require depends on the individual child. It may be that they wish to seek counselling or one to one support. It may also be that they feel able to deal with the incident(s) on their own or with support of family and friends. In which case it is necessary that this child continues to be monitored and offered support should they require it in the future. If the incidents are of a bullying nature, the child may need support in improving peer groups/relationships with other children or some restorative justice work with all those involved may be required. Other interventions that could be considered may target a whole class or year group for example a speaker on cyber bullying, relationship abuse etc. It may be that through the continued curriculum of PHSE and SMSC that certain issues can be discussed and debated more frequently. If the child feels particularly vulnerable it may be that a risk assessment can be put in place for them whilst in school so that they have someone named that they can talk to, support strategies for managing future issues and identified services to offer additional support.

### **For the child who has displayed harmful behaviour**

In this circumstance it is important to find out why the child has behaved in such a way. It may be that the child is experiencing their own difficulties and may even have been harmed themselves in a similar way. In such cases support such as one to one mentoring or counselling may also be necessary. Particular support from identified services may be necessary through a TAF /early help referral and the child may require additional support from family members. Once the support required to meet the individual needs of the child has been met, it is important that child receives a consequence for their behaviour. This may be in the form of restorative justice e.g. making amends with the child they have targeted if this has been some form of bullying. If there is any form of criminal investigation ongoing it may be that this child cannot be educated on site until the investigation has concluded. In which case, the child will need to be provided with appropriate support and education whilst off site.

Even following the conclusion of any investigation the behaviour that the child has displayed may continue to pose a risk to others in which case an individual risk assessment may be required. This should be completed via a multi-agency response to ensure that the needs of the child and the risks towards others are measured by all of those agencies involved including the child and their parents. This may mean additional supervision of the child or protective strategies if the child feels at risk of engaging in further inappropriate or harmful behaviour.

The school may also choose a punishment as a consequence such as exclusion or internal exclusion/inclusion/seclusion for a period of time to allow the child to reflect on their behaviour.

### **After care**

It is important that following the incident the children involved continue to feel supported and receive help even if they have stated that they are managing the incident. Sometimes the feelings of remorse, regret or unhappiness may occur at a much later stage than the incident. It is important to ensure that the children do not engage in any further harmful behaviour either towards someone else or to themselves as a way of coping (e.g. self-harm). In which case, regular reviews with the children following the incident(s) are imperative.

## **Appendix 4**

### **Responding to a referral of sexual violence or harassment**

#### **The immediate response to a report - responding to the report**

The initial response to a report from a child is important. It is essential that all victims are reassured that they are being taken seriously and that they will be supported and kept safe. A victim should never be given the impression that they are creating a problem by reporting sexual violence or sexual harassment. Nor should a victim ever be made to feel ashamed for making a report.

#### **Risk Assessment**

When there has been a report of sexual violence, the DSL should make an immediate risk and needs assessment. Where there has been a report of sexual harassment, the need for a risk assessment should be considered on a case-by-case basis. The risk and needs assessment should consider:

- the victim, especially their protection and support;
- the alleged perpetrator; and
- all the other children (and, if appropriate, adult students and staff) at the school, especially any actions that are appropriate to protect them;

Risk assessments should be recorded and should be kept under review. The DSL will ensure they engage with children's social care and specialist services as required. Where there has been a report of sexual violence, it is likely that professional risk assessments by social workers and or sexual violence specialists will be required.

#### **Action following a report of sexual violence and/or sexual harassment**

##### **What to consider**

We will carefully consider any report of sexual violence and/or sexual harassment. The DSL is likely to have a complete safeguarding picture and be the most appropriate person to advise on the initial response. Important considerations will include:

- the wishes of the victim in terms of how they want to proceed. This is especially important in the context of sexual violence and sexual harassment. Victims should be given as much control as is reasonably possible over decisions regarding how any investigation will be progressed and any support that they will be offered;
- the nature of the alleged incident(s), including: whether a crime may have been committed and consideration of harmful sexual behaviour;
- the ages of the children involved;
- the developmental stages of the children involved;
- any power imbalance between the children. For example, is the alleged perpetrator significantly older, more mature or more confident? Does the victim have a disability or learning difficulty?;
- if the alleged incident is a one-off or a sustained pattern of abuse;
- are there ongoing risks to the victim, other children or school staff; and
- other related issues and wider context.

As always when concerned about the welfare of a child, all staff should act in the best interests of the child. In all cases, we will follow general safeguarding principles as set out throughout this policy. Immediate consideration should be given as to how best to support and protect the victim and the alleged perpetrator (and any other children involved/impacted).

The starting point regarding any report should always be that sexual violence and sexual harassment is not acceptable and will not be tolerated. Especially important is not to pass off any sexual violence or sexual harassment as 'banter', 'part of growing up' or 'having a laugh'.

## **Children sharing a classroom: Initial considerations when the report is made**

Any report of sexual violence is likely to be traumatic for the victim.

However, reports of rape and assault by penetration are likely to be especially difficult with regard to the victim and close proximity with the alleged perpetrator is likely to be especially distressing. Whilst we establish the facts of the case and start the process of liaising with children's social care and the police, the alleged perpetrator should be removed from any classes they share with the victim. We will consider how best to keep the victim and alleged perpetrator a reasonable distance apart on school premises.

These actions are in the best interests of both children and should not be perceived to be a judgment on the guilt of the alleged perpetrator.

For other reports of sexual violence and sexual harassment, the proximity of the victim and alleged perpetrator and considerations regarding shared classes will be considered immediately.

## ***Options to manage the report***

We consider every report on a case-by-case basis. When to inform the alleged perpetrator will be a decision that will be carefully considered. Where a report is going to be made to children's social care and/or the police, then, as a general rule, we will speak to the relevant agency and discuss next steps and how the alleged perpetrator will be informed of the allegations. However, as per general safeguarding principles, this does not stop us taking immediate action to safeguard the children, where required. There are four likely scenarios to consider when managing any reports of sexual violence and/or sexual harassment.

### **1. Manage internally**

In some cases of sexual harassment, for example, one-off incidents, we may take the view that the children concerned are not in need of early help or statutory intervention and that it would be appropriate to handle the incident internally, perhaps through utilising the behaviour policy and by providing pastoral support.

All concerns, discussions, decisions and reasons for decisions will be recorded on MyConcern

### **2. Early help**

We may decide that the children involved do not require statutory interventions, but may benefit from early help. Early help can be particularly useful to address non-violent harmful sexual behaviour and may prevent escalation of sexual violence.

### **3. Referrals to children's social care**

- Where a child has been harmed, is at risk of harm, or is in immediate danger, we will make a referral to local children's social care.
- At the referral to children's social care stage, we will generally inform parents or carers, unless there are compelling reasons not to (if informing a parent or carer is going to put the child at additional risk). Any such decision should be made with the support of children's social care.
- If a referral is made, children's social care will then make enquiries to determine whether any of the children involved are in need of protection or other services.
- We will not wait for the outcome (or even the start) of a children's social care investigation before protecting the victim and other children in the school we will work closely with children's social care (and other agencies as required) to ensure any actions we take do not jeopardise a statutory

investigation. The risk assessment will help inform any decision. Consideration of safeguarding the victim, alleged perpetrator, any other children directly involved in the safeguarding report and all children at the school or college should be **immediate**.

- In some cases, children's social care will review the evidence and decide a statutory intervention is not appropriate. We will be prepared to refer again if we believe the child remains in immediate danger or at risk of harm. If a statutory assessment is not appropriate, the DSL should consider other support mechanisms such as early help, specialist support and pastoral support.

#### **4. Reporting to the Police**

- Any report to the police will generally be in parallel with a referral to children's social care (as above).

- Where a report of rape, assault by penetration or sexual assault is made, the starting point is this should be passed on to the police. Whilst the age of criminal responsibility is ten, if the alleged perpetrator is under ten, the starting principle of reporting to the police remains. • At this stage, we will generally inform parents or carers unless there are compelling reasons not to, for example, if informing a parent or carer is likely to put a child at additional risk.

- Where a report has been made to the police, we will consult with the police and agree what information can be disclosed to staff and others, in particular, the alleged perpetrator and their parents or carers. They should also discuss the best way to protect the victim and their anonymity.

In some cases, it may become clear very quickly, that the police (for whatever reason) will not take further action. In such circumstances, we will continue to engage with specialist support for the victim as required.

#### **Managing any delays in the criminal process**

- There may be delays in any case that is being progressed through the criminal justice system. We will not wait for the outcome (or even the start) of a police investigation before protecting the victim, alleged perpetrator and other children in the school or college.

Whilst protecting children and/or taking any disciplinary measures against the alleged perpetrator, we will work closely with the police (and other agencies as required), to ensure any actions we take do not jeopardise the police investigation.

#### **The end of the criminal process**

- If a child is convicted or receives a caution for a sexual offence, we will update the risk assessment, ensure relevant protections are in place for all the children and we will consider any suitable action in light of the behaviour policy.

- Any conviction (even with legal anonymity reporting restrictions) is potentially going to generate interest among other pupils or students in the school. We will ensure both the victim and alleged perpetrator remain protected, especially from any bullying or harassment (including online).

- Where cases are classified as "no further action" (NFA'd) by the police or Crown Prosecution Service, or where there is a not guilty verdict, we will continue to offer support to the victim and the alleged perpetrator for as long as is necessary. A not guilty verdict or a decision not to progress with their case will likely be traumatic for the victim. The fact that an allegation cannot be substantiated does not necessarily mean that it was unfounded. We will discuss any decisions with the victim in this light and continue to offer support. The alleged perpetrator is also likely to require ongoing support for what will have likely been a difficult experience.

#### **Ongoing response**

Safeguarding and supporting the victim

The following principles are based on effective safeguarding practice and should help shape any decisions regarding safeguarding and supporting the victim.

- Consider the age and the developmental stage of the victim, the nature of the allegations and the

potential risk of further abuse.

- The needs and wishes of the victim should be paramount (along with protecting the child) in any response. It is important they feel in as much control of the process as is reasonably possible. Wherever possible, the victim, if they wish, should be able to continue in their normal routine. Overall, the priority should be to make the victim's daily experience as normal as possible, so that the school is a safe space for them.
- The victim should never be made to feel they are the problem for making a report or made to feel ashamed for making a report.
- Consider the proportionality of the response. Support should be tailored on a case-by-case basis. The support required regarding a one-off incident of sexualised name-calling is likely to be vastly different from that for a report of rape. Support can include:
  - Children and Young People's Independent Sexual Violence Advisors (ChISVAs) provide emotional and practical support for victims of sexual violence. They are based within the specialist sexual violence sector and will help the victim understand what their options are and how the criminal justice process works if they have reported or are considering reporting to the police. ChISVAs will work in partnership with schools and colleges to ensure the best possible outcomes for the victim.
  - Police and social care agencies can signpost to ChISVA services (where available) or referrals can be made directly to the ChISVA service by the young person or school or college. Contact details for ChISVAs can be found at Rape Crisis and The Survivors Trust.
  - Child and adolescent mental health services (CAMHS)
  - Rape Crisis Centre's can provide therapeutic support for children who have experienced sexual violence.
  - Internet Watch Foundation (to potentially remove illegal images)

Victims may not disclose the whole picture immediately. They may be more comfortable providing information on a piecemeal basis. It is essential that dialogue is kept open and encouraged. When it is clear that ongoing support will be required, we will ask the victim if they would find it helpful to have a designated trusted adult (for example, their class teacher or DSL) to talk to about their needs. The choice of any such adult should be the victim's.

A victim of sexual violence is likely to be traumatised and, in some cases, may struggle in a normal classroom environment. While we will avoid any action that would have the effect of isolating the victim, in particular from supportive peer groups, there may be times when the victim finds it difficult to maintain a full-time timetable and may express a wish to withdraw from lessons and activities. If required, we will provide a physical space for victims to withdraw.

Whilst we will give all the necessary support to remain in school, if the trauma results in the victim being unable to do this, alternative provision or a move to another school or college should be considered to enable them to continue to receive suitable education. This should only be at the request of the victim (and following discussion with their parents or carers).

If the victim does move to another educational institution (for any reason), we will inform the new educational institution of any ongoing support needs. The DSL will take responsibility to ensure this happens (and should discuss with the victim and, where appropriate their parents or carers as to the most suitable way of doing this) as well as transferring the child protection file.

### **Safeguarding and supporting the alleged perpetrator**

The following principles are based on effective safeguarding practice and should help shape any decisions regarding safeguarding and supporting the alleged perpetrator, we will:

- Consider the age and the developmental stage of the alleged perpetrator and nature of the allegations. Any child will likely experience stress as a result of being the subject of allegations

and/or negative reactions by their peers to the allegations against them.

- Consider the proportionality of the response. Support (and sanctions) will be considered on a case-by-case basis. An alleged perpetrator may potentially have unmet needs (in some cases these may be considerable) as well as potentially posing a risk of harm to other children. Harmful sexual behaviours in young children may be (and often are) a symptom of either their own abuse or exposure to abusive practices and or materials.
- It is important that if the alleged perpetrator does move to another educational institution (for any reason), that the new educational institution is made aware of any ongoing support needs and where appropriate, potential risks to other children and staff. The DSL will take responsibility to ensure this happens as well as transferring the child protection file.