



AVANTI SCHOOLS TRUST

Child Protection and Safeguarding Policy

June 2020

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AVANTI PARK SCHOOL

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Safeguarding Statement:

Avanti Schools Trust (SW Hub) recognise our moral and statutory responsibility to safeguard and promote the welfare of all pupils. We endeavour to provide a safe and welcoming environment where children and young people are respected and valued. We are alert to the signs of abuse and neglect and follow our procedures to ensure that children receive effective support, protection and justice. Child protection forms part of the school's safeguarding responsibilities and is taken very seriously.

Key Personnel:

The Designated Safeguarding Lead (DSL) is: Abby Atkins
Abigail.Atkins@avanti.org.uk

The deputy DSL(s) is: Sarah-Jo Robinson
Contact details: email: sarahjo.robinson@avanti.org.uk

The nominated child protection SW Hub member is: Suzanne Flack
Contact details: email: suzanne.flack@avanti.org.uk

The Principal is: Abigail Atkins
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The Chair of the SW Hub Governance Board is: Molly Warrington
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Terminology

Safeguarding and promoting the welfare of children is defined as:

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

Child Protection is a part of safeguarding and promoting welfare. It refers to the activity that is undertaken to protect specific children who are suffering, or are likely to suffer, significant harm.

Staff refers to all those working for or on behalf of the school, full or part time, temporary or permanent, in either a paid or voluntary capacity.

Child includes everyone under the age of 18.

Parents refers to birth parents and other adults who are in a parenting role, for example step-parents, foster carers and adoptive parents.

1. Introduction

Safeguarding legislation and guidance

The following safeguarding legislation and other guidance has been considered when drafting this policy:

- The Children Act 1989
- Section 175 of the Education Act 2002 (maintained schools only)
- Section 157 of the Education Act 2002 (Independent schools only, including academies and CTCs)
- The Education (Independent Schools Standards) (England) Regulations 2003 (Independent schools only, including academies and CTCs)
- The Safeguarding Vulnerable Groups Act 2006
- The Teacher Standards 2012
- Working Together to Safeguard Children July 2018
- Keeping Children Safe in Education Sept 2020
- HM Gov Information Sharing 2015
- What to do if you're worried a child is being abused 2015
- Use of Reasonable Force: Advice for Principals, staff and governing bodies, July 2013
- SEND Code of Practice (2015)
- Equality Act (2010)

2. Policy Principles

- i. The welfare of the child is paramount
- ii. All children regardless of age, gender, culture, language, race, ability, sexual identity or religion have equal rights to protection, safeguarding and opportunities.
- iii. We recognise that all adults, including temporary staff¹, volunteers and Hub Board members, have a full and active part to play in protecting our pupils from harm and have an equal responsibility to act on any suspicion or disclosure that may suggest a child is at risk of harm;
- iv. All staff believe that our school should provide a caring, positive, safe and stimulating environment that promotes the social, physical and moral development of the individual child.
- v. Pupil and staff involved in child protection issues will receive appropriate support and supervision.

3. Policy Aims

Contextual Safeguarding:

Safeguarding incidents and/or behaviours can be associated with factors outside the school and can occur between children outside the school. All staff, but especially the designated safeguarding lead (or deputy) should consider the context within which such incidents and/or behaviours occur.

¹ Wherever the word "staff" is used, it covers ALL staff on site, including ancillary supply and self-employed staff, contractors, volunteers working with children etc, and Hub Board members

Contextual safeguarding is the assessment of safeguarding concerns to consider whether wider environmental factors are present in the child's life that are a threat to their safety and/or welfare.

This policy aims:

- i. To demonstrate the school's commitment with regard to safeguarding and child protection to pupil, parents and other partners.
- ii. To support the child's development in ways that will foster security, confidence and independence.
- iii. To provide an environment in which children and young people feel safe, secure, valued and respected, and feel confident to, and know how to approach adults if they are in difficulties, believing they will be effectively listened to.
- iv. To raise the awareness of all teaching and non-teaching staff of the need to safeguard children and of their responsibilities in identifying and reporting possible cases of abuse.
- v. To provide a systematic means of monitoring children known or thought to be at risk of harm, and ensure we, the school, contribute to assessments of need and support packages for those children.
- vi. To emphasise the need for good levels of communication between all members of staff.
- vii. To develop a structured procedure within the school which will be followed by all members of the school community in cases of suspected abuse.
- viii. To develop and promote effective working relationships with other agencies, especially the Police and SOMERSET DIRECT.
- ix. To ensure that all staff working within our school who have substantial access to children have been checked as to their suitability, including verification of their identity, qualifications, and a satisfactory DBS check (according to guidance)², and a single central record is kept for audit.

4. Values

A. Supporting Children

- i. We recognise that a child who is abused or witnesses violence may feel helpless and humiliated, may blame themselves, and find it difficult to develop and maintain a sense of self-worth.
- ii. We recognise that the school may provide the only stability in the lives of children who have been abused or who are at risk of harm.
- iii. We accept that research shows that the behaviour of a child in these circumstances may range from that which is perceived to be normal to aggressive or withdrawn.
- iv. Our school will support all children by:
 - a. Encouraging self-esteem and self-assertiveness, through the curriculum as well as our relationships, whilst not condoning aggression or bullying.
 - b. Promoting a caring, safe and positive environment within the school.
 - c. Responding sympathetically to any requests for time out to deal with distress and anxiety.
 - d. Offering details of helplines, counselling or other avenues of external support.
 - e. Liaising and working together with all other support services and those agencies involved in the safeguarding of children.

² Guidance regarding DBS checks recently updated by the Protection of Freedoms Act 2012

- f. Notifying SOMERSET DIRECT as soon as there is a significant concern.
- g. Providing continuing support to a child about whom there have been concerns who leaves the school by ensuring that appropriate information is copied under confidential cover to the child's new setting and ensuring the school medical records are forwarded as a matter of priority.
- v. Children are taught to understand and manage risk through our personal, social, health and economic (PHSE) education and Relationship and Sex Education and through all aspects of school life. This includes online safety.

B. Prevention / Protection

- i. We recognise that the school plays a significant part in the prevention of harm to our children by providing children with good lines of communication with trusted adults, supportive friends and an ethos of protection.
- ii. The school community will therefore:
 - a. Work to establish and maintain an ethos where children feel secure, are encouraged to talk and are always listened to.
 - b. Include regular consultation with children e.g. through safety questionnaires, participation in anti-bullying week, asking children to report whether they have had happy/sad lunchtimes/playtimes
 - c. Ensure that all children know there is an adult in the school whom they can approach if they are worried or in difficulty.
 - d. Include safeguarding across the curriculum, including PSHE, opportunities which equip children with the skills they need to stay safe from harm and to know to whom they should turn for help. In particular this will include anti-bullying work, online-safety, road safety, pedestrian and cycle training. Also focussed work in Year 8 to prepare for transition to high school and more personal safety.
 - e. Ensure all staff are aware of school guidance for their use of mobile technology and have discussed safeguarding issues around the use of mobile technologies and their associated risks. [NB schools to check with SCC e-safety guidance Appendix 11 to 'cherry pick' statements relevant to their setting.]

5. Safe School, Safe Staff

A. We will ensure that;

- i. All staff and volunteers read KCSiE Part 1 annually and sign to say they read and understood it.
- ii. All staff receive information about the school's safeguarding arrangements, the school's safeguarding statement, staff behaviour policy (code of conduct)³, child protection policy, behaviour policy, the safeguarding response to children who go missing from education, the role and names of the Designated Safeguarding Lead and their deputy(ies), and sign to say they have read and will abide by it.
- iii. All staff receive safeguarding and child protection training, including online safety, at induction in line with advice from Somerset Safeguarding Children's Board which is regularly updated (for example, via email, e-bulletins and staff meetings), as required, but at least annually;

³ The code of conduct should include acceptable use of technology, staff & pupil relationship boundaries and communications, including the use of social media.

- iv. All members of staff are trained in and receive regular updates in online safety and reporting concerns;
- v. All staff have regular Level 2 child protection awareness training, updated by the DSL as appropriate, to maintain their understanding of the signs and indicators of abuse;
- vi. The child protection policy is made available via the school website or other means and that parents/carers are made aware of this policy and their entitlement to have a copy via the school handbook/newsletter/website. All parents/carers are made aware of the responsibilities of staff members with regard to child protection procedures through the publication of the Child Protection Policy and reference to it in the school's handbook.
- vi. The school provides a coordinated offer of Early Help when additional needs of children are identified and contributes to early help arrangements and multi-agency working and plans;
- vii. Our lettings policy will seek to ensure the suitability of adults working with children on school sites at any time, for example, by having evidence of DBS checks having been undertaken;
- viii. Community users organising activities for children are aware of the school's Child Protection Policy, guidelines and procedures;
- ix. The name of the designated members of staff for child protection, the Designated Safeguarding Lead and deputy(ies), are clearly advertised around the school with a statement explaining the school's role in referring and monitoring cases of suspected abuse;
- xi All Hub Board members will be given a copy of Part 2 and Annex A of Keeping Children Safe in Education 2019.

B. The School grounds:

- i. There are currently some areas of the school's grounds which may pose a risk to health and safety as they currently stand, for instance the:
 - Pond and associated fencing;
 - Outdoor classroom;
 - Balconies on the first floors of classroom buildings;
 - Area with access to flat roof to the left of Chantry House;
 - Lack of gateways to prevent pupil access to the side and rear of Chantry House
- ii. All areas which are identified across the school site that might pose a risk to the health and safety of children and/or staff will be risk-assessed and measures will be implemented to minimise risk to children and staff where at all possible;
- iii. Some children with special educational needs and/or disabilities may need to be risk-assessed on school entry to ensure any areas which might impose a risk to health and/or safety are mitigated as far as practicable; these would include children with:
 - a medical needs
 - b physical disabilities
 - c sensory impairment
 - d social, emotional and mental health needs
 - e autism spectrum conditions
 - f other conditions associated with regulating behaviour, such as ADHD

iv. However, given the current nature of the school grounds, following risk assessment, it may be deemed too unsafe for specific children to be admitted to the school at this current time. The safety and wellbeing of children must come first and where there is sufficient evidence that the admission of a pupil would pose a significant risk to the safety and wellbeing of a pupil, the school may deem it unsafe to admit the pupil. The Equality Act (2010) specifies that the school is responsible for making reasonable adjustments, but recognises that there are situations where it is unreasonable to be able to make an adjustment where there are significant barriers in place (e.g. where it is impractical, such as extensive re-building work). In which case, the responsibility is upon the School to develop a three-year Accessibility Plan.

v. Where this is the case, the school will work closely with the parents of the child and the LA to find a more suitable setting

vi. It is recognised that in order to make the school grounds safe, there may need to be major works carried out, which will take time. Where specific risks across the school grounds have been identified, they will form the basis of improvement to access in the school's three-year Accessibility Plan.

vii. For the avoidance of doubt, the following rules are paramount to the safety of children across the school:

- no child will be left unaccompanied or out of sight of a member of staff at any time throughout the school day
- no child will be allowed to climb trees
- no child will be allowed on any climbing frame equipment without supervision
- children who are digging in the dirt/mud must ensure they wash their hands thoroughly with antibacterial soap as soon as possible
- no ropes will be accessible on the school grounds
- where trip hazards are noticeable, they will be cordoned off.

6. Roles and Responsibilities

A. The SW Hub Governance Board will:

i. understand and fulfil their responsibilities, namely to ensure that there is a Child Protection and Safeguarding policy together with a staff behaviour policy (code of conduct);

ii. ensure child protection, safeguarding, recruitment and managing allegations policies and procedures, including the staff behaviour policy (code of conduct), are consistent with Somerset Safeguarding Children's Board and statutory requirements, are reviewed annually and that the Child Protection policy is publically available on the school website or by other means;

iii. the school operates a safer recruitment procedure that includes statutory checks on staff suitability to work with children and disqualification by association regulations and by ensuring that there is at least one person on every recruitment panel who has completed safer recruitment training;

- iv. the school has procedures for dealing with allegations of abuse against staff (including the Principal), volunteers and against other children and that a referral is made to the DBS if a person in regulated activity has been dismissed or removed due to safeguarding concerns, or would have had they not resigned.
- v. Ensure a member of the SW Hub Governance Board, usually the Chair, is nominated to liaise with the LA on Child Protection issues and in the event of an allegation of abuse made against the Principal
- vi. Ensure that a member of the senior leadership team has been appointed as the Designated Safeguarding Lead (DSL) by the SW Hub Board who will take lead responsibility for safeguarding and child protection and that the role is explicit in the role holder's job description;
- vii. Ensure that on appointment, the DSL and deputy(ies) undertake interagency training (DSCB Modules 1&2) and also undertake DSL 'Working Together' and 'Update' training every two years;
- viii. Ensure that each individual school's DSL is appointed by the SW Hub Board. A change of DSL, when appointed, should also be agreed by the SW Hub Board, who will satisfy themselves that they have been appropriately trained and that their job descriptions make explicit reference to this role.
- ix. Ensure that all other staff have safeguarding training updated as appropriate;
- x. Ensure that at least one member of the SW Hub Board has completed safer recruitment training to be repeated every five years.
- xi. Ensure that children are taught about safeguarding (including online safety) as part of a broad and balanced curriculum covering relevant issues through personal social health and economic education (PSHE) and/or for maintained schools through relationship and sex education (RSE);
- xii. Ensure that appropriate safeguarding responses are in place for children who go missing from education, particularly on repeat occasions, to help identify the risk of abuse and neglect, including sexual abuse or exploitation and to help prevent the risks of their going missing in future;
- xiii. Ensure that appropriate online filtering and monitoring systems are in place;
- xiv. Ensure that enhanced DBS checks (without barred list checks, unless the Hub Board member is also a volunteer at the school) are in place for all Hub Board members;
- xv. Ensure that any weaknesses in Child Protection are remedied immediately;

B. The Principal will ensure that:

- i. ensure that all staff including temporary staff and volunteers are provided with the school's child protection policy and staff behaviour policy;
 - ii. the Child Protection and Safeguarding Policy and procedures are implemented and followed by all staff;
 - iii. ensure all staff have read Keeping Children Safe in Education (2020) part 1 and Annex A and that mechanisms are in place to assist staff in understanding and discharging their roles and responsibilities as set out in the guidance.
 - iv. sufficient time, training, support, resources, including cover arrangements where necessary, are allocated to the DSL and deputy(ies) DSL(s) to carry out their roles effectively, including the assessment of pupils and attendance at strategy discussions and other necessary meetings;
 - v. where there is a safeguarding concern that the child's wishes and feelings are taken into account when determining what action to take and what services to provide;
 - vi. systems are in place for children to express their views and give feedback which operate with the best interest of the child at heart;

- vii. all staff feel able to raise concerns about poor or unsafe practice and that such concerns are handled sensitively and in accordance with the whistle-blowing procedures;
- viii. that pupils are provided with opportunities throughout the curriculum to learn about safeguarding, including keeping themselves safe online;
- ix. they liaise with the Local Authority Designated Officer (LADO), before taking any action and on an ongoing basis, where an allegation is made against a member of staff or volunteer;
- x. anyone who has harmed or may pose a risk to a child is referred to the Disclosure and Barring Service;
- xi. All risk assessments are fit for purpose and are implemented effectively by signing them off.

C The Designated Safeguarding Lead:

- i. holds ultimate responsibility for safeguarding and child protection in the school;
- ii. acts as a source of support and expertise in carrying out safeguarding duties for the whole school community;
- iii. Encourages a culture of listening to children and taking account of their wishes and feelings;
- iv. is appropriately trained with updates every two years and will refresh their knowledge and skills at regular intervals but at least annually;
- v. Will refer a child if there are concerns about possible abuse, to the SOMERSET DIRECT, and act as a focal point for staff to discuss concerns. Referrals should be made in writing, following a telephone call using the EHA form at Level 4 (does not require consent);
- vi. Will keep detailed, accurate records, either written or using appropriate online software, of all concerns about a child even if there is no need to make an immediate referral;
- vii. Will ensure that all such records are kept confidential, stored securely and are separate from pupil records, until the child's 25th birthday;
- viii. Will ensure that an indication of the existence of the additional file in 6.3.7 above is marked on the pupil records;
- ix. Will ensure that, when a pupil leaves the school, their child protection file is passed to the new school (separately from the main pupil and ensuring secure transit) and that confirmation of receipt is obtained;
- x. in addition to the child protection file, the designated safeguarding lead should also consider if it would be appropriate to share any information with the DSL of the new school in advance of a child leaving. For example, information that would allow the new school or college to continue supporting victims of abuse and have that support in place for when the child arrives. All transfers should be made securely.
- xi. Will ensure that a copy of the CP file is retained until such a time that the new school acknowledges receipt of the original file. The copy should then be shredded;
- xii. will liaise with the Local Authority and work with other agencies and professionals in line with Working Together to Safeguard Children;
- xiii. Has a working knowledge of SSCB procedures;
- xiv. Will ensure that either they, or another staff member, attend case conferences, core groups, or other multi-agency planning meetings, contribute to assessments, and provide a report where required which has been shared with the parents;

- xv. Will ensure that any pupil currently with a child protection plan who is absent in the educational setting without explanation for two days is referred to their key worker's SOMERSET DIRECT Team;
- xvi. Will ensure that all staff sign to say they have read, understood and agree to work within the School's child protection policy, staff behaviour policy (code of conduct) and Keeping Children Safe in Education Part 1 and annex A and ensure that the policies are used appropriately;
- xvii. Will organise child protection and safeguarding induction, regularly updated training and a minimum of annual updates (including online safety) for all school staff, keep a record of attendance and address any absences;
- xviii. Will contribute to and provide, with the Principal and Chair of SW Hub Board the "Annual Governors Safeguarding Audit" to be submitted annually to the Education Safeguarding Team at Somerset County Council;
- xix. Has an understanding of locally agreed processes for providing early help and intervention and will support members of staff where Early Help is appropriate;
- xx. Will ensure that the name of the designated members of staff for Child Protection, the Designated Safeguarding Lead and deputies, are clearly advertised in the school, with a statement explaining the school's role in referring and monitoring cases of suspected abuse.
- xxi. Have oversight of any Safeguarding Audit and resultant Action Plan
- xxii. Will ensure that risk assessments, in collaboration with the SENDCO, are implemented for children with special educational needs and/or disabilities.

D. The Deputy Designated Safeguarding Lead(s)

- i. Is/are trained to the same standard as the Designated Safeguarding Lead and, in the absence of the DSL, carries out those functions necessary to ensure the ongoing safety and protection of pupils. In the event of the long-term absence of the DSL, the deputy will assume all of the functions above.

E. The SENDCO

The SENDCO will be responsible for coordinating the risk assessments for children with certain special educational needs which may need special attention, including children with:

- a. medical needs
- b. physical disabilities
- c. sensory impairment
- d. social, emotional and mental health needs
- e. autism spectrum conditions
- f. other conditions associated with regulating behaviour, such as ADHD

F. Health and Safety Representative

- i. Will assess the safety of the school grounds on a daily basis
- ii. Ensure that paths, driveways and roads are gritted in icy conditions
- iii. Complete risk assessments for areas of the school grounds which are identified as posing a risk (e.g. climbing frame)
- iv. Ensure fire extinguishing equipment is tested in line with statutory regulations
- v. Ensure all electrical items are regularly PAT tested
- vi. Carry out regular fire-alarms testing

- vii. Carry out lockdown procedures regularly
- viii. Ensure there are enough Fire Safety Officers for each area of the school
- ix. Keep records up-to-date of all testing

G. All School Staff

- i. Understand that it is everyone's responsibility to safeguard and promote the welfare of children and that they have a role to play in identifying concerns, sharing information and taking prompt action;
- ii. Consider, at all times, what is in the best interests of the child;
- iii. know how to respond to a pupil who discloses abuse through delivery of 'Working together to Safeguard Children', and 'What to do if you suspect a Child is being Abused' (2015);
- iv. Will refer any safeguarding or child protection concerns to the DSL or if necessary where the child is at immediate risk to the police or SOMERSET DIRECT;
- v. Are aware of the Early Help⁴ process and understand their role within it including identifying emerging problems for children who may benefit from an offer of Early Help, liaising with the DSL in the first instance and supporting other agencies and professionals in an early help assessment through information sharing. In some cases staff may act as the Lead Professional in Early Help Cases.
- vi. Will provide a safe environment in which children can learn or alert the DSL where a concern is identified relating to safety

7. Confidentiality

- i. Avanti Schools Trust (SW Region) recognises that in order to effectively meet a child's needs, safeguard their welfare and protect them from harm the school must contribute to inter-agency working in line with Working Together to Safeguard Children (2015) and share information between professionals and agencies where there are concerns.
- ii. All staff must be aware that they have a professional responsibility to share information with other agencies in order to safeguard children and that the Data Protection Act 1998 is not a barrier to sharing information where the failure to do so would place a child at risk of harm.
- iii. All staff must be aware that they cannot promise a child to keep secrets which might compromise the child's safety or wellbeing.
- iv. However, we also recognise that all matters relating to child protection are personal to children and families. Therefore, in this respect they are confidential and the
- v. Principal or DSLs will only disclose information about a child to other members of staff on a need to know basis.
- vi. We will always undertake to share our intention to refer a child to SOMERSET DIRECT with their parents /carers unless to do so could put the child at greater risk of harm, or impede a criminal investigation. If in doubt, we will consult with an Assistant Team Manager at the Children's Services Area Team on this point.

8. Child Protection Procedures

- i. Abuse and neglect are forms 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 the family or in an institutional or community setting by those known to them or,

⁴ Detailed information on early help can be found in Chapter 1 of [Working together to safeguard children](#)

more rarely, by others (e.g. via the internet). They may be abused by an adult or adults or by another child or children.

ii. Further information about the four categories of abuse; physical, emotional, sexual and neglect, and indicators that a child may be being abused can be found in appendices 1 and 2.

iii. Any child in any family in any school could become a victim of abuse. Staff should always maintain an attitude of “It could happen here”.

iv. There are also a number of specific safeguarding concerns that we recognise our pupils may experience:

- a. child missing from education (see para 21)
- b. child missing from home or care
- c. child sexual exploitation (CSE) (see para 14 and Appendix 3)
- d. bullying including cyberbullying (see para 10)
- e. domestic abuse (see para 13 and Appendix 5)
- f. drugs
- g. fabricated or induced illness
- h. faith abuse
- i. female genital mutilation (FGM) (see para 15 and Appendix 4)
- j. forced marriage (see para 16)
- k. gangs and youth violence
- l. gender-based violence/violence against women and girls (VAWG)
- m. mental health
- n. private fostering
- o. radicalisation (see para 12 and Appendix 6)
- p. youth produced sexual imagery (sexting) (see para 24)
- q. teenage relationship abuse (see para 24)
- xviii. trafficking
- r. peer on peer abuse (see para 24)
- s. upskirting
- t. serious violence

v. Staff are aware that behaviours linked to drug taking, alcohol abuse, truanting and sexting put children in danger and that safeguarding issues can manifest themselves via peer-on-peer abuse.

vi. We also recognise that abuse, neglect and safeguarding issues are complex and are rarely standalone events that can be covered by one definition or label. Staff are aware that in most cases multiple issues will overlap one another.

A. If staff are concerned about a child's welfare

i. If staff notice any indicators of abuse/neglect or signs that a child may be experiencing a safeguarding issue they must record these concerns on MYCONCERN/CPOMS and pass it to the DSL. They may also discuss their concerns in person with the DSL but the details of the concern must be recorded in MyConcern/CPOMS on the same day.

ii. There will be occasions when staff may suspect that a pupil may be at risk, but have no ‘real’ evidence. The pupil’s behaviour may have changed, their artwork could be bizarre, they may write stories or poetry that reveal confusion or distress, or physical or inconclusive signs may have been noticed.

- iii. AST (SW Region) recognise that the signs may be due to a variety of factors, for example, a parent has moved out, a pet has died, a grandparent is very ill or an accident has occurred. However, they may also indicate a child is being abused or is in need of safeguarding.
- iv. In these circumstances staff will try to give the child the opportunity to talk. It is fine for staff to ask the pupil if they are OK or if they can help in any way.
- v. Staff must use MYCONCERN/CPOMS to record these early concerns and send the completed form to the DSL. Staff are expected to discuss any MYCONCERN/CPOMS with the DSL. Circles of Confidence are also used with staff, where appropriate to share relevant information.
- vi. Following an initial conversation with the pupil, if the member of staff remains concerned, they must discuss their concerns with the DSL and put them on MYCONCERN/CPOMS.
- vii. When reporting concerns, staff must make clear whether the report is a fact, hearsay, or opinion.
- viii. If the pupil does begin to reveal that they are being harmed, staff must follow the advice below regarding a pupil making a disclosure.

B. If a pupil discloses to a member of staff

- i. We recognise that it takes a lot of courage for a child to disclose they are being abused. They may feel ashamed, guilty or scared, their abuser may have threatened that something will happen if they tell, they may have lost all trust in adults or believe that what has happened is their fault. Sometimes they may not be aware that what is happening is abuse.
- ii. A child who makes a disclosure may have to tell their story on a number of subsequent occasions to the police and/or social workers. Therefore, it is vital that their first experience of talking to a trusted adult is a positive one.
- iii. During their conversation with the pupil staff will;
- iv. Listen to what the child has to say and allow them to speak freely
- v. Remain calm and not overact or act shocked or disgusted – the pupil may stop talking if they feel they are upsetting the listener
- vi. Reassure the child that it is not their fault and that they have done the right thing in telling someone
- vii. Not be afraid of silences – staff must remember how difficult it is for the pupil and allow them time to talk
- viii. Take what the child is disclosing seriously
- ix. Ask open questions and avoid asking leading questions
- x. Avoid jumping to conclusions, speculation or make accusations
- xi. Not automatically offer any physical touch as comfort. It may be anything but comforting to a child who is being abused.
- xii. Avoid admonishing the child for not disclosing sooner. Saying things such as ‘I do wish you had told me about it when it started’ may be the staff member’s way of being supportive but may be interpreted by the child to mean they have done something wrong.
- xiii. Tell the child what will happen next.
- xiv. If a pupil talks to any member of staff about any risks to their safety or wellbeing the staff member will let the child know that they will have to pass the information on – staff are not allowed to keep secrets.
- xv. The member of staff must write up their conversation as soon as possible on MYCONCERN/CPOMS in the child’s own words. Staff must make this a matter of priority. The record must be signed and dated, the member of staff’s name must be printed and it must also detail where the disclosure was made and who else was present. The record must be sent to the DSL. And the member of staff should inform the DSL that they have sent it.

C. Notifying Parents

- i. The School will normally seek to discuss any concerns about a pupil with their parents. [This must be handled sensitively and the DSL will make contact with the parent in the event of a concern, suspicion or disclosure.](#)
- ii. However, if the school believes that notifying parents could increase the risk to the child or exacerbate the problem, advice will first be sought from children's SOMERSET DIRECT.
- iii. Where there are concerns about forced marriage or honour-based violence parents should not be informed a referral is being made as to do so may place the child at a significantly increased risk.

D. Making a referral

- i. Concerns about a child or a disclosure should be logged on MYCONCERN/CPOMS and discussed with the DSL who will help decide whether a referral to children's SOMERSET DIRECT, early help or other support is appropriate in accordance with Somerset Safeguarding Children's Board Effective Support for Children and Families, V4, October 2019
- ii. If a referral is needed then the DSL should make it. However, anyone can make a referral and if for any reason a staff member thinks a referral is appropriate and one hasn't been made, they can and should consider making a referral themselves.
- iii. Information sharing decisions are the responsibility of the DSL (or DSL team). Decisions to share information must be made with the DSL, Senior Leadership, and in accordance with GDPR responsibilities. Consent must be obtained before information is shared (unless it would be harmful – see below). Information sharing and confidentiality is covered in Section 7 of this document.
- iv. The child (subject to their age and understanding) and the parents will be told that a referral is being made, and their consent must be sought for a referral, unless to do so would increase the risk to the child.
- v. If a staff member is unsure as to whether to refer to Children's Social Services, they should consider contacting Somerset Direct to seek guidance. They should also consider contacting the NSPCC helpline.
- vi. If after a referral the child's situation does not appear to be improving, the designated safeguarding lead (or the person that made the referral) should press for re-consideration to ensure their concerns have been addressed, and most importantly the child's situation improves.
- vii. If it is considered that the response from Police/CSC has been unsatisfactory, staff making the referral (if not DSL team) should discuss with DSL and the procedures in Resolving Professional Differences should be followed:
https://www.proceduresonline.com/swcpp/somerset/p_escalation.html
- viii. If a child is in immediate danger or is at risk of harm a referral should be made to children's SOMERSET DIRECT and/or the police immediately. Anybody can make a referral.
- ix. Where referrals are not made by the DSL, the DSL should be informed as soon as possible.
- x. Staff must be aware of the potential outcomes of a referral to Children's Social Services. Within one working day of the referral, a social worker will determine the type of response required. This could be: emergency action by CSC, Police or NSPCC; a Section 47 enquiry that may lead to a Child Protection Plan; a Section 17 enquiry that could result in identification of a Child In Need; or a decision that formal assessment is not needed, in which case the school will consider Early Help Assessment and/or pastoral support.

E. Supporting Staff

- i. We recognise that staff working in the school who have become involved with a child who has suffered harm, or appears to be likely to suffer harm, may find the situation stressful and upsetting.
- ii. We will support such staff by providing an opportunity to talk through their anxieties with the DSLs and to seek further support as appropriate.

9. Children who are particularly vulnerable

- a. AST (SW Hub) recognises that some children are more vulnerable to abuse and neglect and that additional barriers exist when recognising abuse for some children.
- b. We understand that this increase in risk is due more to societal attitudes and assumptions or child protection procedures which fail to acknowledge children's diverse circumstances, rather than the individual child's personality, impairment or circumstances.
- c. In some cases possible indicators of abuse such as a child's mood, behaviour or injury might be assumed to relate to the child's impairment or disability rather than giving a cause for concern. Or a focus may be on the child's disability, special educational needs or situation without consideration of the full picture. In other cases, such as bullying, the child may be disproportionately impacted by the behaviour without outwardly showing any signs that they are experiencing it.
- d. Some children may also find it harder to disclose abuse due to communication barriers, lack of access to a trusted adult or not being aware that what they are experiencing is abuse.
- e. Any child may benefit from early help, but all school staff should be particularly alert to the potential need for early help for children who are:
 - i. Disabled or have special educational needs (whether or not that have a statutory education, health and care plan)
 - ii. Young carers
 - iii. Affected by parental substance misuse, domestic abuse or parental mental health needs
 - iv. Asylum seekers
 - v. showing signs of being drawn in to anti-social or criminal behaviour, including gang involvement and association with organised crime groups;
 - vi. frequently missing/goes missing from care or from home;
 - vii. misusing drugs or alcohol themselves;
 - viii. at risk of modern slavery, trafficking or sexual exploitation;
 - ix. in a family circumstance presenting challenges for the child, such as substance abuse, adult mental health problems or domestic abuse;
 - x. has returned home to their family from care;
 - xi. is showing early signs of abuse and/or neglect;
 - xii. at risk of being radicalised, exploited or drawn into extremism
 - xiii. is a privately fostered child;
 - xiv. has an imprisoned parent
 - xv. living away from home
 - xvi. Vulnerable to being bullied or engaged in bullying
 - xvii. Living in temporary accommodation
 - xviii. Live transient lifestyles

- xix. Living in chaotic and unsupportive home situations
- xx. Vulnerable to discrimination on the grounds of race, ethnicity, religion, disability or sexuality
- xxi. Do not have English as a first language
- xxii. At risk of female genital mutilation
- xxiii. At risk of forced marriage

10. Anti-Bullying/Cyberbullying

Our school policy on anti-bullying is set out in a separate document and acknowledges that to allow or condone bullying may lead to consideration under child protection procedures. This includes all forms e.g. cyber, racist, homophobic and gender related bullying. We keep a record of known bullying incidents which is shared with and analysed by the AST (SW Hub) Governance Board. All staff are aware that children with SEND and / or differences/perceived differences are more susceptible to being bullied / victims of child abuse.

1. If the bullying is particularly serious, or the anti-bullying procedures are seen to be ineffective, the Principal and the DSL will consider implementing child protection procedures.
2. The subject of bullying is addressed at regular intervals in PHSE education.

11. Racist Incidents

- a. Our policy on racist incidents is set out separately, and acknowledges that repeated racist incidents or a single serious incident may lead to consideration under child protection procedures. We keep a record of racist incidents and report them to the Local Authority.

12. Radicalisation and Extremism

- a. The Prevent Duty for England and Wales (2015) under section 26 of the Counter-Terrorism and Security Act 2015 places a duty on education and other children's services to have due regard to the need to prevent people from being drawn into terrorism.
- b. Extremism is defined as 'as 'vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs'. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
- c. Some children are at risk of being radicalised; adopting beliefs and engaging in activities which are harmful, criminal or dangerous.
- d. AST (SW Hub) is clear that exploitation of vulnerable children and radicalisation should be viewed as a safeguarding concern and follows the Department for Education guidance for schools and childcare providers on preventing children and young people from being drawn into terrorism⁵.
- e. AST (SW HUB) seeks to protect children and young people against the messages of all violent extremism including, but not restricted to, those linked to Islamist ideology, or to Far Right / Neo Nazi / White Supremacist ideology, Irish Nationalist and Loyalist paramilitary groups, and extremist Animal Rights movements.
- f. School staff receive training to help identify early signs of radicalisation and extremism. Indicators of vulnerability to radicalisation are in detailed in Appendix 6.

⁵ <https://www.gov.uk/government/publications/protecting-children-from-radicalisation-the-prevent-duty>

- g. Opportunities are provided in the curriculum to enable pupil to discuss issues of religion, ethnicity and culture and the school follows the DfE advice Promoting Fundamental British Values as part of SMSC (spiritual, moral, social and cultural education) in Schools (2014)⁶.
- h. The SW Hub Governance Board the Principal and the Designated Safeguarding Lead (DSL) will assess the level of risk within the school and put actions in place to reduce that risk. Risk assessment may include, the use of school premises by external agencies, anti-bullying policy and other issues specific to the school's profile, community and philosophy.
- i. When any member of staff has concerns that a pupil may be at risk of radicalisation or involvement in terrorism, they should speak with the DSL. They should then follow normal safeguarding procedures. If the matter is urgent then Somerset Police must be contacted by dialling 999. In non-urgent cases where police advice is sought then dial 101. The Department of Education has also set up a dedicated telephone helpline for staff and governors to raise concerns around Prevent (020 7340 7264).

13. Domestic Abuse

- a. Domestic abuse represents one quarter of all violent crime. It is actual or threatened physical, emotional, psychological or sexual abuse. It involves the use of power and control by one person over another. It occurs regardless of race, ethnicity, gender, class, sexuality, age, religion, mental or physical ability. Domestic abuse can also involve other types of abuse.
- b. We use the term domestic abuse to reflect that a number of abusive and controlling behaviours are involved beyond violence.
- c. Slapping, punching, kicking, bruising, rape, ridicule, constant criticism, threats, manipulation, sleep deprivation, social isolation, and other controlling behaviours all count as abuse.
- d. Living in a home where domestic abuse takes place is harmful to children and can have a serious impact on their behaviour, wellbeing and understanding of healthy, positive relationships. Children who witness domestic abuse are at risk of significant harm and staff are alert to the signs and symptoms of a child suffering or witnessing domestic abuse (See Appendix 5).

14. Child Sexual Exploitation (CSE)

- a. Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact, it can also occur through the use of technology. More information and the indicators of CSE is set out in appendix 3. CSE can happen online and offline and all staff should be aware of the link between online safety and vulnerability to CSE.

⁶

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/380595/SMSC_Guidance_Maintained_Schools.pdf

- b. Any concerns that a child is being or is at risk of being sexually exploited should be passed without delay to the DSL. AST (SW Hub) is aware there is a clear link between regular school absence/truancy and CSE. Staff should consider a child to be at potential CSE risk in the case of regular school absence/truancy and make reasonable enquiries with the child and parents to assess this risk.
- c. The DSL will use the Somerset Safeguarding Children's Board CSE Tools⁷ on all occasions when there is a concern that a child is being or is at risk of being sexually exploited or where indicators have been observed that are consistent with a child who is being or who is at risk of being sexually exploited.
- d. In all cases if the tool identified any level of concern the DSL should contact their local MACSE and email the completed CSE Screening Tool along with a SOMERSET DIRECT enquiry form. If a child is in immediate danger the police should be called on 999.
- e. AST (SW Hub) is aware that a child often is not able to recognise the coercive nature of the abuse and does not see themselves as a victim. As a consequence the child may resent what they perceive as interference by staff. However, staff must act on their concerns as they would for any other type of abuse.
- f. AST (SW Hub) includes the risks of sexual exploitation in the PHSE and SRE curriculum as well as through tutor time activities and assemblies. Pupil will be informed of the grooming process and how to protect themselves from people who may potentially be intent on causing harm. They will be supported in terms of recognising and assessing risk in relation to CSE, including online, and knowing how and where to get help.

15. Female Genital Mutilation (FGM)

- a. Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act (2003). It is a form of child abuse and violence against women. A mandatory reporting duty requires teachers to report 'known' cases of FGM in under 18s, which are identified in the course of their professional work, to the police⁸.
- b. The duty applies to all persons in AST (SW Hub) who are employed or engaged to carry out 'teaching work' in the school, whether or not they have qualified teacher status. The duty applies to the individual who becomes aware of the case to make a report. It should not be transferred to the Designated Safeguarding Lead, however, the DSL should be informed.
- c. Staff should be aware that failure to report such cases will result in disciplinary sanctions.
- d. If a teacher is informed by a girl under 18 that an act of FGM has been carried out on her or a teacher observes physical signs which appear to show that an act of FGM has been carried out on a girl under 18 and they have no reason to believe the act was necessary for the girl's physical or mental health or for purposes connected with labour or birth, the teacher should personally make a report to the police force in which the girl resides by calling 101. The report should be made by the close of the next working day.
- e. School staff are trained to be aware of risk indicators of FGM which are set out in Appendix 4.

⁷<https://sscb.safeguardingsomerset.org.uk/working-with-children/cse-protocols/>

⁸<https://www.gov.uk/government/publications/mandatory-reporting-of-female-genital-mutilation-proceduralinformation>

Concerns about FGM outside of the mandatory reporting duty should be reported as per AST (SW HUB)'s child protection procedures. Staff should be particularly alert to suspicions or concerns expressed by female pupil about going on a long holiday during the summer vacation period. There should also be consideration of potential risk to other girls in the family and practicing community.

- f. Where there is a risk to life or likelihood of serious immediate harm the teacher should report the case immediately to the police, including dialling 999 if appropriate.
- g. There are no circumstances in which a teacher or other member of staff should examine a girl.

16. Forced Marriage

- a. A forced marriage is a marriage in which one or both people do not (or in cases of people with learning disabilities cannot) consent to the marriage but are coerced into it. Coercion may include physical, psychological, financial, sexual and emotional pressure. It may also involve physical or sexual violence and abuse.
- b. Forced marriage is an appalling and indefensible practice and is recognised in the UK as a form of violence against women and men, domestic/child abuse and a serious abuse of human rights. Since June 2014 forcing someone to marry has become a criminal offence in England and Wales under the Anti-Social Behaviour, Crime and Policing Act 2014.
- c. A forced marriage is not the same as an arranged marriage which is common in several cultures. The families of both spouses take a leading role in arranging the marriage but the choice of whether or not to accept the arrangement remains with the prospective spouses.
- d. School staff should never attempt to intervene directly as a school or through a third party. Contact should be made with SOMERSET DIRECT.

17. Honour-based Violence

- a. Honour based violence (HBV) can be described as a collection of practices, which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.
- b. Honour based violence might be committed against people who:
 - i. become involved with a boyfriend or girlfriend from a different culture or religion;
 - ii. want to get out of an arranged marriage;
 - iii. want to get out of a forced marriage;
 - iv. wear clothes or take part in activities that might not be considered traditional within a particular culture.
- c. It is a violation of human rights and may be a form of domestic and/or sexual abuse. There is no, and cannot be, honour or justification for abusing the human rights of others.

18. One Chance Rule

- a. All staff are aware of the 'One Chance' Rule' in relation to forced marriage, FGM and HBV. Staff recognise they may only have one chance' to speak to a pupil who is a potential victim and have just one chance to save a life.
- b. AST (SW Hub) are aware that if the victim is not offered support following disclosure that the 'One Chance' opportunity may be lost. Therefore, all staff are aware of their responsibilities and obligations when they become aware of potential forced marriage, FGM and HBV cases.

19. Private Fostering Arrangements

- a. A private fostering arrangement occurs when someone other than a parent or close relative cares for a child for a period of 28 days or more, with the agreement of the child's parents. It applies to children under the age of 16 or 18 if the child is disabled. Children looked after by the local authority or who are placed in residential schools, children's homes or hospitals are not considered to be privately fostered.
- b. Private fostering occurs in all cultures, including British culture and children may be privately fostered at any age.
- c. AST (SW Hub) recognise that most privately fostered children remain safe and well but are aware that safeguarding concerns have been raised in some cases. Therefore, all staff are alert to possible safeguarding issues, including the possibility that the child has been trafficked into the country.
- d. By law, a parent, private foster carer or other persons involved in making a private fostering arrangement must notify children's services as soon as possible. However, where a member of staff becomes aware that a pupil may be in a private fostering arrangement they will raise this with the DSL and the DSL will notify SOMERSET DIRECT of the circumstances.

20. Looked After Children and previously looked after children (See also our policy for the education of LAC)

- a. The most common reason for children becoming looked after is as a result of abuse and neglect. AST (SW Hub) ensures that staff have the necessary skills and understanding to keep looked after children safe. Appropriate staff have information about a child's looked after legal status and care arrangements, including the level of authority delegated to the carer by the authority looking after the child and contact arrangements with birth parents or those with parental responsibility.
- b. The designated teacher for looked after children and the DSL have details of the child's social worker and the name and contact details of the Somerset County Council's virtual school head for children in care.
- c. The designated teacher for looked after children works with the virtual school head to discuss how Pupil Premium Plus funding can be best used to support the progress of looked after children in the school and meet the needs in the child's personal education plan. The designated teacher will follow the statutory guidance 'Promoting the education of Looked After Children'.

21. Children Missing Education

- a. Attendance, absence and exclusions are closely monitored. A child going missing from education is a potential indicator of abuse and neglect, including sexual abuse and sexual exploitation.
- b. The DSL will monitor unauthorised absences and take appropriate action including notifying the local authority particularly where children go missing on repeat occasions and/or are missing for periods during the school day in conjunction with 'Children Missing Education: Statutory Guidance for Local Authorities'⁹. Welfare checks will be carried out by the school if a child has not been attending school for a period of time, with unauthorised absence. Parents will be notified of these checks and the EWO will be involved, where appropriate.
- c. Staff must be alert to signs of children at risk of travelling to conflict zones, female genital mutilation and forced marriage.

22. Online Safety

- a. Our pupils increasingly use electronic equipment on a daily basis to access the internet and share content and images via social media sites such as Facebook, Twitter, Instagram, Snapchat and Oovoo.
- b. Unfortunately, some adults and other children use these technologies to harm children. The harm might range from sending hurtful or abusive texts or emails, to grooming and enticing children to engage in sexual behaviour such as webcam photography or face-to-face meetings. Pupils may also be distressed or harmed by accessing inappropriate material such as pornographic websites or those which promote extremist behaviour, criminal activity, suicide or eating disorders
- c. AST (SW Hub) has an online safety policy which explains how we try to keep pupil safe in school and how we respond to online safety incidents (See flowchart, Appendix 7).
- d. Pupils are taught about online safety throughout the curriculum and all staff receive online safety training which is regularly updated. The school online safety co-ordinator is Luke McKinley

23. Peer on Peer Sexual Violence and Sexual Harassment:

- a. In most instances, the conduct of pupil towards each other will be covered by our behaviour policy. However, some allegations may be of such a serious nature that they may raise safeguarding concerns. AST (SW HUB) recognise that children are capable of abusing their peers. It will not be passed off as 'banter' or 'part of growing up'. The forms of peer on peer abuse are outlined below.
 - i. Domestic abuse – an incident or pattern of actual or threatened acts of physical, sexual, financial and/or emotional abuse, perpetrated by an adolescent against a current or former dating partner regardless of gender or sexuality.
 - ii. Child Sexual Exploitation – children under the age of 18 may be sexually abused in the context of exploitative relationships, contexts and situations by peers who are also under 18.

⁹ <https://www.gov.uk/government/publications/children-missing-education>

- iii. Harmful Sexual Behaviour – Children and young people presenting with sexual behaviours that are outside of developmentally ‘normative’ parameters and harmful to themselves and others (For more information, please see Appendix 2).
- iv. Upskirting – which typically involves taking a picture under a person’s clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm – now a criminal offence.
- v. Serious Youth Violence – Any offence of most serious violence or weapon enabled crime, where the victim is aged 1-19’ i.e. murder, manslaughter, rape, wounding with intent and causing grievous bodily harm. ‘Youth violence’ is defined in the same way, but also includes assault with injury offences.

- b. The term peer-on-peer abuse can refer to all of these definitions and a child may experience one or multiple facets of abuse at any one time. Therefore, our response will cut across these definitions and capture the complex web of their experiences.
- c. There are also different gender issues that can be prevalent when dealing with peer on peer abuse (i.e. girls being sexually touched/assaulted or boys being subjected to initiation/hazing type violence).
- d. AST (SW Hub) aims to reduce the likelihood of peer on peer abuse through;
 - i. the established ethos of respect, friendship, courtesy and kindness;
 - ii. high expectations of behaviour;
 - iii. clear consequences for unacceptable behaviour;
 - iv. providing a developmentally appropriate PSHE curriculum which develops pupil’ understanding of healthy relationships, acceptable behaviour, consent and keeping themselves safe;
 - v. systems for any pupil to raise concerns with staff, knowing that they will be listened to, valued and believed;
 - vi. robust risk assessments and providing targeted work for pupils identified as being a potential risk to other pupils and those identified as being at risk.
- e. Research indicates that young people rarely disclose peer on peer abuse and that if they do, it is likely to be to their friends. Therefore, AST (SW Hub) will also educate pupils in how to support their friends if they are concerned about them, that they should talk to a trusted adult in the school and what services they can contact for further advice.
- f. Any concerns, disclosures or allegations of peer on peer abuse in any form should be referred to the DSL using AST’s child protection procedures as set out in this policy. Where a concern regarding peer on peer abuse has been disclosed to the DSL(s), advice and guidance will be sought from SOMERSET DIRECT and where it is clear a crime has been committed or there is a risk of crime being committed the Police will be contacted.
- g. Working with external agencies the school will respond to the unacceptable behaviour. If a pupil’s behaviour negatively impacts on the safety and welfare of other pupil then safeguards will be put in place to promote the well-being of the pupil affected and the victim and perpetrator will be provided with support.

24. Youth produced sexual imagery (sexting) ¹⁰

- a. The practice of children sharing images and videos via text message, email, social media or mobile messaging apps has become commonplace. However, this online technology has

¹⁰ Youth refers to anyone under the age of 18.

also given children the opportunity to produce and distribute sexual imagery in the form of photos and videos. Such imagery involving anyone under the age of 18 is illegal.

b. Youth produced sexual imagery refers to both images and videos where:

i. A person under the age of 18 creates and shares sexual imagery of themselves with a peer under the age of 18.

ii. A person under the age of 18 shares sexual imagery created by another person under the age of 18 with a peer under the age of 18 or an adult.

iii. A person under the age of 18 is in possession of sexual imagery created by another person under the age of 18.

b. All incidents of this nature should be treated as a safeguarding concern and in line with the UKCCIS guidance 'Sexting in schools: responding to incidents and safeguarding young people'¹¹.

c. Cases where sexual imagery of people under 18 has been shared by adults and where sexual imagery of a person of any age has been shared by an adult to a child is child sexual abuse and should be responded to accordingly.

d. If a member of staff becomes aware of an incident involving youth produced sexual imagery they should follow the child protection procedures and refer to the DSL as soon as possible. The member of staff should confiscate the device involved and set it to flight mode or, if this is not possible, turn it off. Staff should not view, copy or print the youth produced sexual imagery.

e. The DSL should hold an initial review meeting with appropriate school staff and subsequent interviews with the children involved (if appropriate). Parents should be informed at an early stage and involved in the process unless there is reason to believe that involving parents would put the child at risk of harm. At any point in the process if there is concern a young person has been harmed or is at risk of harm a referral should be made to SOMERSET DIRECT or the Police as appropriate.

f. Immediate referral at the initial review stage should be made to SOMERSET DIRECT/Police if:

i. The incident involves an adult;

ii. There is good reason to believe that a young person has been coerced, blackmailed or groomed or if there are concerns about their capacity to consent (for example, owing to special education needs);

iii. What you know about the imagery suggests the content depicts sexual acts which are unusual for the child's development stage or are violent; iv. The imagery involves sexual acts;

v. The imagery involves anyone aged 12 or under;

vi. There is reason to believe a child is at immediate risk of harm owing to the sharing of the imagery, for example the child is presenting as suicidal or self-harming.

g. If none of the above apply then the DSL will use their professional judgement to assess the risk to pupil involved and may decide, with input from the Principal, to respond to the incident without escalation to SOMERSET DIRECT or the police.

In applying judgement the DSL will consider if;

i. there is a significant age difference between the sender/receiver;

¹¹

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/545997/Sexting_in_schools_and_colleges_UKCCIS__4_.pdf

- ii. there is any coercion or encouragement beyond the sender/receiver;
 - iii. the imagery was shared and received with the knowledge of the child in the imagery;
 - iv. the child is more vulnerable than usual i.e. at risk;
 - v. there is a significant impact on the children involved;
 - vi. the image is of a severe or extreme nature;
 - vii. the child involved understands consent;
 - viii. the situation is isolated or if the image been more widely distributed;
 - ix. there other circumstances relating to either the sender or recipient that may add cause for concern i.e. difficult home circumstances;
 - x. the children have been involved in incidents relating to youth produced imagery before.
- h. If any of these circumstances are present the situation will be escalated according to our child protection procedures, including reporting to the police or SOMERSET DIRECT. Otherwise, the situation will be managed within the school.
- i. The DSL will record all incidents of youth produced sexual imagery, including both the actions taken, actions not taken, reasons for doing so and the resolution in line with safeguarding recording procedures.

25. Upskirting

An act that typically involves taking a picture under a person's clothing without them knowing, with the intention of viewing their genitals or buttocks to obtain sexual gratification, or cause the victim humiliation, distress or alarm. The Voyeurism (Offences) Act 2019 came into force on April 2019 and is a criminal offense, punishable by up to two years in prison.

- a. any disclosure or evidence suggesting an upskirting offense at AST (SW HUB) must be reported to the DSL and referred to SOMERSET DIRECT/police.

26. Allegations against staff

- a. All school staff should take care not to place themselves in a vulnerable position with a child. It is always advisable for interviews or work with individual children or parents to be conducted in view of other adults.
- b. Guidance about conduct and safe practice, including safe use of mobile phones by staff and volunteers will be given at in our annual training to staff and at initial induction¹²
- c. We understand that a pupil may make an allegation against a member of staff or staff may have concerns about another staff member.
- d. If such an allegation is made, or information is received which suggests that a person may be unsuitable to work with children, the member of staff receiving the allegation or aware of the information, will immediately inform the Principal¹³.

¹² Refer to "Guidance for Safe Working Practice for the Protection of Children and Staff in Education Settings" available on the DfE website.

¹³ or Chair of the SW Hub Board in the event of an allegation against the Headteacher

- e. The Principal on all such occasions will discuss the content of the allegation with the Local Authority Designated Officer (LADO)¹⁴ at the earliest opportunity and before taking any further action.
- f. If the allegation made to a member of staff concerns the Principal, the person receiving the allegation will immediately inform the SW Hub Director, who will consult the LADO as in 23.6 above, without notifying the Principal first.
- g. The school will follow the Somerset procedures for managing allegations against staff, procedures set out in Keeping Children Safe in Education and the school's Managing Allegations policy and procedures.
- h. Suspension of the member of staff, excluding the Principal, against whom an allegation has been made, needs careful consideration, and the Principal will seek the advice of the LADO and an HR Consultant in making this decision.
- i. In particular, if the member of staff concerned is with a young person in need of immediate medical attention or protection, a response will be put in place that is young-person centred, sensitive and workable.
- j. In the event of an allegation against the Principal, the decision to suspend will be made by the Chair of the SW Hub Governance Board with advice as in 23.9 above.
- k. We have a procedure for managing the suspension of a contract for a community user in the event of an allegation arising in that context.
- l. Staff, parents and Hub Board members are reminded that publication of material that may lead to the identification of a teacher who is the subject of an allegation is prohibited by law. Publication includes verbal conversations or writing including content placed on social media sites.

27. Whistle-blowing

- a. We recognise that children cannot be expected to raise concerns in an environment where staff fail to do so.
- b. All staff should be aware of their duty to raise concerns, where they exist, about the management of child protection, which may include the attitude or actions of colleagues, poor or unsafe practice and potential failures in the school's safeguarding arrangements. If it becomes necessary to consult outside the school, they should speak in the first instance, to the Area Education Officer/LADO following the Whistleblowing Policy.
- c. The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call: 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and Email: help@nspcc.org.uk.
- d. Whistle-blowing re the Principal should be made to the Chair of the SW Hub Governance Board whose contact details are readily available to staff (as pertinent to setting).

28. Physical Intervention, moving and handling and intimate care

¹⁴ <https://sscb.safeguardingsomerset.org.uk/working-with-children/allegations-management/>

- a. We acknowledge that staff must only ever use physical intervention as a last resort, when a child is endangering him/herself or others, and that at all times it must be the minimal force necessary to prevent injury to another person.
- b. Such events should be recorded and signed by the staff member and any witnesses on MyConcern/CPOMS
- c. Parents will always be informed where a physical intervention has taken place
- d. Staff who are likely to need to use physical intervention will be appropriately PIPS trained.
- e. We understand that physical intervention of a nature which causes injury or distress to a child may be considered under child protection or disciplinary procedures.
- f. We recognise that touch is appropriate in the context of working with children, and all staff have been given 'Safe Practice' guidance to ensure they are clear about their professional boundary.¹⁵
- g. We follow the guidance from the DfE: Use of Reasonable Force, Advice for Principals, staff and governing bodies (July 2013)
- h. All staff working with children who require intimate care will follow strict statutory guidance, including 2 trained adults being present for all times when intimate care is carried out
- i. Where children require moving and handling 2 trained adults will be present and the use of hoisting equipment will be used throughout
- j. All lifting of children by staff will be in accordance with statutory guidance and will follow the child's individual care plan
- k. Where children require the administration of medicines, two adults will be present for the administration of medication and will sign to say that the correct dosage has been delivered
- l. Where children require other medical interventions, such as feeding through a peg, two trained members of staff will be available
- m. In rare circumstances children might need individual feeding, two trained members of staff will be available during feeding times, in line with the child's care plan

29. Confidentiality and sharing information

- a. All staff will understand that child protection issues warrant a high level of confidentiality, not only out of respect for the pupil and staff involved but also to ensure that information being released into the public domain does not compromise evidence.
- b. Staff should be proactive in sharing as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to local authority children's social care
- c. Staff should only discuss concerns with the DSL, Principal/principal or chair of governors (depending on who is the subject of the concern). That person will then decide who else needs to have the information and they will disseminate it on a 'need-to-know' basis, and the decision/rationale will be recorded on MyConcern/CPOMS.
- d. This aspect of confidentiality does not affect the need to seek consent from parents/carers for referrals, with the exception of those cases where discussion would be harmful to the child or there is an immediate need to refer at Level 4.

¹⁵ 'Guidance on Safer Working Practices is available on the DfE website

d. However, following a number of cases where senior leaders in school had failed to act upon concerns raised by staff, Keeping Children Safe in Education (2016) emphasises that any member of staff can contact children's social care if they are concerned about a child.

e. Child protection information will be stored and handled in line with the Data Protection Act 1998 and HM Gov. Information sharing and Advice for practitioners providing safeguarding services to children, young people, parents and carers, March 2016

f. Information sharing is guided by the following principles. The information is:

- necessary and proportionate
- relevant
- adequate
- accurate
- timely
- secure

30. Keeping Children Safe on Educational Visits and taking children off-site

- a. All staff have a responsibility to keep children safe when taking children off the school site
- b. Any off-site visit will be risk assessed and measures put in place to mitigate potential risk, completing the generic off-site risk assessment will be the responsibility of the teacher carrying out the educational visit and will be authorised by the Educational Visits Coordinator (EVC)
- c. Any children with special educational needs and/or disabilities will also be risk assessed for the educational visit and measures put in place to mitigate the risk
- d. The SENDCo, in partnership with the EVC and teacher carrying out the visit will draw up the personalise risk assessment for individual children who might need the additional protection of additional support during the educational visit
- e. See the Educational Visits policy for further details

31. This policy also links to our policies & procedures on:

Accessibility Plan
Administration of medicines
Allegations against staff,
Anti-bullying,
Attendance
Behaviour Policy
Child Sexual Exploitation
Curriculum
Data Protection/GDPR Guidance
Drug Education
Education of Looked After Children
Educational and Off-site visits
E-Safety, including staff use of mobile phones
Health & Safety

Intimate Care
Parental concerns,
Physical intervention
PSHE
Radicalisation and Extremism
Recruitment and Selection
Risk Assessment
Sex and Relationships Education
Staff Code of Conduct
Teaching and Learning
Whistleblowing,

Appendix 1

Recognising signs of child abuse

Categories of Abuse:

- Physical Abuse
- Emotional Abuse (including Domestic Abuse)
- Sexual Abuse (including child sexual exploitation)
- Neglect

Signs of Abuse in Children:

The following non-specific signs may indicate something is wrong:

- Significant change in behaviour
- Extreme anger or sadness
- Aggressive and attention-seeking behaviour
- Suspicious bruises with unsatisfactory explanations
- Lack of self-esteem
- Self-injury
- Depression
- Age inappropriate sexual behaviour
- Child Sexual Exploitation.

Risk Indicators

The factors described in this section are frequently found in cases of child abuse. Their presence is not proof that abuse has occurred, but:

- Must be regarded as indicators of the possibility of significant harm
- Justifies the need for careful assessment and discussion with designated / named / lead person, manager, (or in the absence of all those individuals, an experienced colleague)
- May require consultation with and / or referral to Children's Services

The absence of such indicators does not mean that abuse or neglect has not occurred.

In an abusive relationship the child may:

- Appear frightened of the parent/s
- Act in a way that is inappropriate to her/his age and development (though full account needs to be taken of different patterns of development and different ethnic groups)

The parent or carer may:

illnesses

- Persistently avoid child health promotion services and treatment of the child's episodic illnesses
- Have unrealistic expectations of the child
- Frequently complain about/to the child and may fail to provide attention or praise (high criticism/low warmth environment)
- Be absent or misusing substances
- Persistently refuse to allow access on home visits

- Be involved in domestic abuse

Staff should be aware of the potential risk to children when individuals, previously known or suspected to have abused children, move into the household.

Recognising Physical Abuse

The following are often regarded as indicators of concern:

- An explanation which is inconsistent with an injury
- Several different explanations provided for an injury
- Unexplained delay in seeking treatment
- The parents/carers are uninterested or undisturbed by an accident or injury
- Parents are absent without good reason when their child is presented for treatment
- Repeated presentation of minor injuries (which may represent a “cry for help” and if ignored could lead to a more serious injury)
- Family use of different doctors and A&E departments
- Reluctance to give information or mention previous injuries

Bruising

Children can have accidental bruising, but the following must be considered as non accidental unless there is evidence or an adequate explanation provided:

- Any bruising to a pre-crawling or pre-walking baby
- Bruising in or around the mouth, particularly in small babies which may indicate force feeding
- Two simultaneous bruised eyes, without bruising to the forehead, (rarely accidental, though a single bruised eye can be accidental or abusive)
- Repeated or multiple bruising on the head or on sites unlikely to be injured accidentally
- Variation in colour possibly indicating injuries caused at different times
- The outline of an object used e.g. belt marks, hand prints or a hair brush
- Bruising or tears around, or behind, the earlobe/s indicating injury by pulling or twisting
- Bruising around the face
- Grasp marks on small children
- Bruising on the arms, buttocks and thighs may be an indicator of sexual abuse

Bite Marks

Bite marks can leave clear impressions of the teeth. Human bite marks are oval or crescent shaped. Those over 3 cm in diameter are more likely to have been caused by an adult or older child. A medical opinion should be sought where there is any doubt over the origin of the bite.

Burns and Scalds

It can be difficult to distinguish between accidental and non-accidental burns and scalds, and will always require experienced medical opinion. Any burn with a clear outline may be suspicious e.g.:

- Circular burns from cigarettes (but may be friction burns if along the bony protuberance of the spine)
- Linear burns from hot metal rods or electrical fire elements
- Burns of uniform depth over a large area

- Scalds that have a line indicating immersion or poured liquid (a child getting into hot water is his/her own accord will struggle to get out and cause splash marks)
- Old scars indicating previous burns/scalds which did not have appropriate treatment or adequate explanation

Scalds to the buttocks of a small child, particularly in the absence of burns to the feet, are indicative of dipping into a hot liquid or bath.

Fractures

Fractures may cause pain, swelling and discolouration over a bone or joint.

Non-mobile children rarely sustain fractures.

There are grounds for concern if:

- The history provided is vague, non-existent or inconsistent with the fracture type
- There are associated old fractures
- Medical attention is sought after a period of delay when the fracture has caused symptoms such as swelling, pain or loss of movement
- There is an unexplained fracture in the first year of life

Scars

A large number of scars or scars of different sizes or ages, or on different parts of the body, may suggest abuse.

Recognising Emotional Abuse

Emotional abuse may be difficult to recognise, as the signs are usually behavioural rather than physical. The manifestations of emotional abuse might also indicate the presence of other kinds of abuse.

The indicators of emotional abuse are often also associated with other forms of abuse.

The following may be indicators of emotional abuse:

- Developmental delay
- Abnormal attachment between a child and parent/carer e.g. anxious, indiscriminate or not attachment
- Indiscriminate attachment or failure to attach
- Aggressive behaviour towards others
- Scape-goated within the family
- Frozen watchfulness, particularly in pre-school children
- Low self-esteem and lack of confidence
- Withdrawn or seen as a “loner” – difficulty relating to others

Recognising Signs of Sexual Abuse

Boys and girls of all ages may be sexually abused and are frequently scared to say anything due to guilt and/or fear. This is particularly difficult for a child to talk about and full account should be taken of the cultural sensitivities of any individual child/family.

Recognition can be difficult, unless the child discloses and is believed. There may be no physical signs and indications are likely to be emotional/behavioural.

Some behavioural indicators associated with this form of abuse are:

- Inappropriate sexualised conduct
- Sexually explicit behaviour, play or conversation, inappropriate to the child's age
- Continual and inappropriate or excessive masturbation
- Self-harm (including eating disorder), self mutilation and suicide attempts
- Involvement in prostitution or indiscriminate choice of sexual partners
- An anxious unwillingness to remove clothes e.g. for sports events (but this may be related to cultural norms or physical difficulties)

Some physical indicators associated with this form of abuse are:

- Pain or itching of genital area
- Blood on underclothes
- Pregnancy in a younger girl where the identity of the father is not disclosed
- Physical symptoms such as injuries to the genital or anal area, bruising to buttocks, abdomen and thighs, sexually transmitted disease, presence of semen on vagina, anus, external genitalia or clothing

Recognising Neglect

Evidence of neglect is built up over a period of time and can cover different aspects of parenting.

Indicators include:

- Failure by parents or carers to meet the basic essential needs e.g. adequate food, clothes, warmth, hygiene and medical care
- A child seen to be listless, apathetic and irresponsive with no apparent medical cause
- Failure of child to grow within normal expected pattern, with accompanying weight loss
- Child thrives away from home environment
- Child frequently absent from school
- Child left with adults who are intoxicated or violent
- Child abandoned or left alone for excessive periods

Appendix 2

Sexual Abuse and Sexual Harassment

The boundary between what is abusive and what is part of normal childhood or youthful experimentation can be blurred. The determination of whether behaviour is developmental, inappropriate or abusive will hinge around the related concepts of true consent, power imbalance and exploitation. This may include children and young people who exhibit a range of sexually problematic behaviour such as indecent exposure, obscene telephone calls, fetishism, bestiality and sexual abuse against adults, peers or children. Staff should be vigilant 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
- upskirting

Developmental Sexual Activity encompasses those actions that are to be expected from children and young people as they move from infancy through to an adult understanding of their physical, emotional and behavioural relationships with each other. Such sexual activity is essentially information gathering and experience testing. It is characterised by mutuality and of the seeking of consent.

Inappropriate Sexual Behaviour can be inappropriate socially, inappropriate to development, or both. In considering whether behaviour fits into this category, it is important to consider what negative effects it has on any of the parties involved and what concerns it raises about a child or young person. It should be recognised that some actions may be motivated by information seeking, but still cause significant upset, confusion, worry, physical damage, etc. It may also be that the behaviour is “acting out” which may derive from other sexual situations to which the child or young person has been exposed. If an act appears to have been inappropriate, there may still be a need for some form of behaviour management or intervention. For some children, educative inputs may be enough to address the behaviour.

Upskirting is now a criminal offense and requires police referral.

Abusive sexual activity included any behaviour involving coercion, threats, aggression together with secrecy, or where one participant relies on an unequal power base. In order to more fully determine the nature of the incident the following factors should be given consideration. The presence of exploitation in terms of:

Equality – consider differentials of physical, cognitive and emotional development, power and control and authority, passive and assertive tendencies

Consent – agreement including all the following:

- Understanding that is proposed based on age, maturity, development level, functioning and experience
- Knowledge of society’s standards for what is being proposed

- Awareness of potential consequences and alternatives
- Assumption that agreements or disagreements will be respected equally
- Voluntary decision
- Mental competence

Coercion – the young perpetrator who abuses may use techniques like bribing, manipulation and emotional threats of secondary gains and losses that is loss of love, friendship, etc. Some may use physical force, brutality or the threat of these regardless of victim resistance.

In evaluating sexual behaviour of children and young people, the above information should be used only as a guide. Further information and advice is available in the Somerset Guidance on HSB (<http://www.supportservicesforeducation.co.uk/Article/57968>)

Appendix 3

Child Sexual Exploitation

The following list of indicators is not exhaustive or definitive but it does highlight common signs which can assist professionals in identifying children or young people who may be victims of sexual exploitation.

Signs include:

- going missing from home or school
- regular school absence/truancy
- underage sexual activity
- inappropriate sexual or sexualised behaviour
- sexually risky behaviour, 'swapping' sex
- repeat sexually transmitted infections
- in girls, repeat pregnancy, abortions, miscarriage
- receiving unexplained gifts or gifts from unknown sources
- having multiple mobile phones and worrying about losing contact via mobile
- online safety concerns such as youth produced sexual imagery or being coerced into sharing explicit images.
- having unaffordable new things (clothes, mobile) or expensive habits (alcohol, drugs)
- changes in the way they dress
- going to hotels or other unusual locations to meet friends
- seen at known places of concern
- moving around the country, appearing in new towns or cities, not knowing where they are
- getting in/out of different cars driven by unknown adults
- having older boyfriends or girlfriends
- contact with known perpetrators
- involved in abusive relationships, intimidated and fearful of certain people or situations
- hanging out with groups of older people, or anti-social groups, or with other vulnerable peers
- associating with other young people involved in sexual exploitation
- recruiting other young people to exploitative situations
- truancy, exclusion, disengagement with school, opting out of education altogether
- unexplained changes in behaviour or personality (chaotic, aggressive, sexual)
- mood swings, volatile behaviour, emotional distress
- self-harming, suicidal thoughts, suicide attempts, overdosing, eating disorders
- drug or alcohol misuse
- getting involved in crime
- police involvement, police records
- involved in gangs, gang fights, gang membership
- injuries from physical assault, physical restraint, sexual assault.

Appendix 4

Female Genital Mutilation (FGM)

It is essential that staff are aware of FGM practices and the need to look for signs, symptoms and other indicators of FGM.

Female Genital Mutilation (FGM) is illegal in England and Wales under the FGM Act 2003 (“the 2003 Act”). It is a form of child abuse and violence against women. FGM comprises all procedures involving partial or total removal of the external female genitalia for non-medical reasons.

Section 5B of the 2003 Act¹ introduces a mandatory reporting duty which requires regulated health and social care professionals and teachers in England and Wales to report ‘known’ cases of FGM in under 18s which they identify in the course of their professional work to the police. The duty came into force on 31 October 2015.

What is FGM?

It involves procedures that intentionally alter/injure the female genital organs for non-medical reasons.

4 types of procedure:

Type 1 Clitoridectomy – partial/total removal of clitoris

Type 2 Excision – partial/total removal of clitoris and labia minora

Type 3 Infibulation entrance to vagina is narrowed by repositioning the inner/outer labia

Type 4 all other procedures that may include: pricking, piercing, incising, cauterising and scraping the genital area.

Why is it carried out?

Belief that:

- FGM brings status/respect to the girl – social acceptance for marriage
- Preserves a girl’s virginity
- Part of being a woman / rite of passage
- Upholds family honour
- Cleanses and purifies the girl
- Gives a sense of belonging to the community
- Fulfils a religious requirement
- Perpetuates a custom/tradition
- Helps girls be clean / hygienic
- Is cosmetically desirable
- Mistakenly believed to make childbirth easier

Is FGM legal?

FGM is internationally recognised as a violation of human rights of girls and women. It is **illegal** in most countries including the UK.

Circumstances and occurrences that may point to FGM happening are:

- Child talking about getting ready for a special ceremony
- Family taking a long trip abroad
- Child’s family being from one of the ‘at risk’ communities for FGM (Kenya, Somalia, Sudan, Sierra Leon, Egypt, Nigeria, Eritrea as well as non-African communities including Yemeni, Afghani, Kurdistan, Indonesia and Pakistan)
- Knowledge that the child’s sibling has undergone FGM

- Child talks about going abroad to be 'cut' or to prepare for marriage

Signs that may indicate a child has undergone FGM:

- Prolonged absence from school and other activities
- Behaviour change on return from a holiday abroad, such as being withdrawn and appearing subdued
- Bladder or menstrual problems
- Finding it difficult to sit still and looking uncomfortable
- Complaining about pain between the legs
- Mentioning something somebody did to them that they are not allowed to talk about
- Secretive behaviour, including isolating themselves from the group
- Reluctance to take part in physical activity
- Repeated urinal tract infection
- Disclosure

The 'One Chance' rule

As with Forced Marriage there is the 'One Chance' rule. It is essential that settings /schools/colleges take action **without delay** and make a referral to children's services.

Appendix 5

Domestic Abuse

How does it affect children?

Children can be traumatised by seeing and hearing violence and abuse. They may also be directly targeted by the abuser or take on a protective role and get caught in the middle. In the long term this can lead to mental health issues such as depression, self harm and anxiety.

What are the signs to look out for?

Children affected by domestic abuse reflect their distress in a variety of ways. They may change their usual behaviour and become withdrawn, tired, start to wet the bed and have behavioural difficulties. They may not want to leave their house or may become reluctant to return. Others will excel, using their time in your care as a way to escape from their home life. None of these signs are exclusive to domestic abuse so when you are considering changes in behaviours and concerns about a child, think about whether domestic abuse may be a factor.

What should I do if I suspect a family is affected by domestic abuse?

Contact SIDAS: <http://www.somersetsurvivors.org.uk/somerset-integrated-domestic-abuse-service/>

Appendix 6

INDICATORS OF VULNERABILITY TO RADICALISATION

1. Radicalisation refers to the process by which a person comes to support terrorism and forms of extremism leading to terrorism.
2. Extremism is defined by the Government in the Prevent Strategy as:

Vocal or active opposition to fundamental British values, including democracy, the rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs. We also include in our definition of extremism calls for the death of members of our armed forces, whether in this country or overseas.
3. Extremism is defined by the Crown Prosecution Service as:

The demonstration of unacceptable behaviour by using any means or medium to express views which:

 - Encourage, justify or glorify terrorist violence in furtherance of particular beliefs;
 - Seek to provoke others to terrorist acts;
 - Encourage other serious criminal activity or seek to provoke others to serious criminal acts;

or

 - Foster hatred which might lead to inter-community violence in the UK.
4. There is no such thing as a “typical extremist”: those who become involved in extremist actions come from a range of backgrounds and experiences, and most individuals, even those who hold radical views, do not become involved in violent extremist activity.
5. Pupils may become susceptible to radicalisation through a range of social, personal and environmental factors - it is known that violent extremists exploit vulnerabilities in individuals to drive a wedge between them and their families and communities. It is vital that school staff are able to recognise those vulnerabilities.
6. Indicators of vulnerability include:
 - Identity Crisis – the pupil / pupil is distanced from their cultural / religious heritage and experiences discomfort about their place in society;
 - Personal Crisis – the pupil / pupil may be experiencing family tensions; a sense of isolation; and low self-esteem; they may have dissociated from their existing friendship group and become involved with a new and different group of friends; they may be searching for answers to questions about identity, faith and belonging;
 - Personal Circumstances – migration; local community tensions; and events affecting the pupil / pupil’s country or region of origin may contribute to a sense of grievance that is triggered by personal experience of racism or discrimination or aspects of Government policy;
 - Unmet Aspirations – the pupil / pupil may have perceptions of injustice; a feeling of failure; rejection of civic life;

- Experiences of Criminality – which may include involvement with criminal groups, imprisonment, and poor resettlement / reintegration;
 - Special Educational Need – pupils / pupils may experience difficulties with social interaction, empathy with others, understanding the consequences of their actions and awareness of the motivations of others.
7. However, this list is not exhaustive, nor does it mean that all young people experiencing the above are at risk of radicalisation for the purposes of violent extremism.
8. More critical risk factors could include:
- Being in contact with extremist recruiters;
 - Accessing violent extremist websites, especially those with a social networking element;
 - Possessing or accessing violent extremist literature;
 - Using extremist narratives and a global ideology to explain personal disadvantage;
 - Justifying the use of violence to solve societal issues;
 - Joining or seeking to join extremist organisations; and
 - Significant changes to appearance and / or behaviour;
 - Experiencing a high level of social isolation resulting in issues of identity crisis and / or personal crisis.

[The Prevent Duty can be accessed via this link.](#)

Appendix 7

County lines is the police term for urban gangs supplying drugs to suburban areas and market and coastal towns. It involves child criminal exploitation (CCE) as gangs use children and vulnerable people to move drugs and money.

Following the publication of County Lines guidance last year, the Home Office is now working with partners to raise awareness of county lines. A range of materials have been developed to help statutory and non-statutory staff identify victims and report concerns to protect those exploited through this criminal activity.

It is known that County Lines operate within Bristol.

Like other forms of abuse and exploitation, county lines exploitation:

- can affect any child or young person (male or female) under the age of 18 years
- can affect any vulnerable adult over the age of 18 years
- can still be exploitation even if the activity appears consensual
- can involve force and/or enticement-based methods of compliance and is often accompanied by violence or threats of violence
- can be perpetrated by individuals or groups, males or females, and young people or adults
- is typified by some form of power imbalance in favour of those perpetrating the exploitation

Whilst age may be the most obvious, this power imbalance can also be due to a range of other factors including gender, cognitive ability, physical strength, status, and access to economic or other resources. One of the key factors found in most cases of county lines exploitation is the presence of some form of exchange (for example, carrying drugs in return for something).

Where it is the victim who is offered, promised or given something they need or want, the exchange can include both tangible (such as money, drugs or clothes) and intangible rewards (such as status, protection or perceived friendship or affection).

It is important to remember the unequal power dynamic within which this exchange occurs and to remember that the receipt of something by a young person or vulnerable adult does not make them any less of a victim. It is also important to note that the prevention of something negative can also fulfil the requirement for exchange, for example a young person who engages in county lines activity to stop someone carrying out a threat to harm his/her family.

The national picture on county lines continues to develop but there are recorded cases of:

- children as young as 12 years old being exploited or moved by gangs to courier drugs out of their local area; 15-16 years is the most common age range
- both males and females being exploited
- white British children being targeted because gangs perceive they are more likely to evade police detection but a person of any ethnicity or nationality may be exploited
- the use of social media to make initial contact with children and young people
- class A drug users being targeted so that gangs can takeover their homes (known as 'cuckooing')

We do know that county lines exploitation is widespread, with gangs from big cities including London, Manchester and Liverpool operating throughout England, Wales and Scotland.

Gangs are known to target vulnerable children and adults; some of the factors that heighten a person's vulnerability include:

- having prior experience of neglect, physical and/or sexual abuse
- lack of a safe/stable home environment, now or in the past (domestic violence or parental substance misuse, mental health issues or criminality, for example)
- social isolation or social difficulties
- economic vulnerability
- homelessness or insecure accommodation status
- connections with other people involved in gangs
- having a physical or learning disability
- having mental health or substance misuse issues
- being in care (particularly those in residential care and those with interrupted care histories)
- being excluded from mainstream education, in particular attending a Pupil Referral Unit

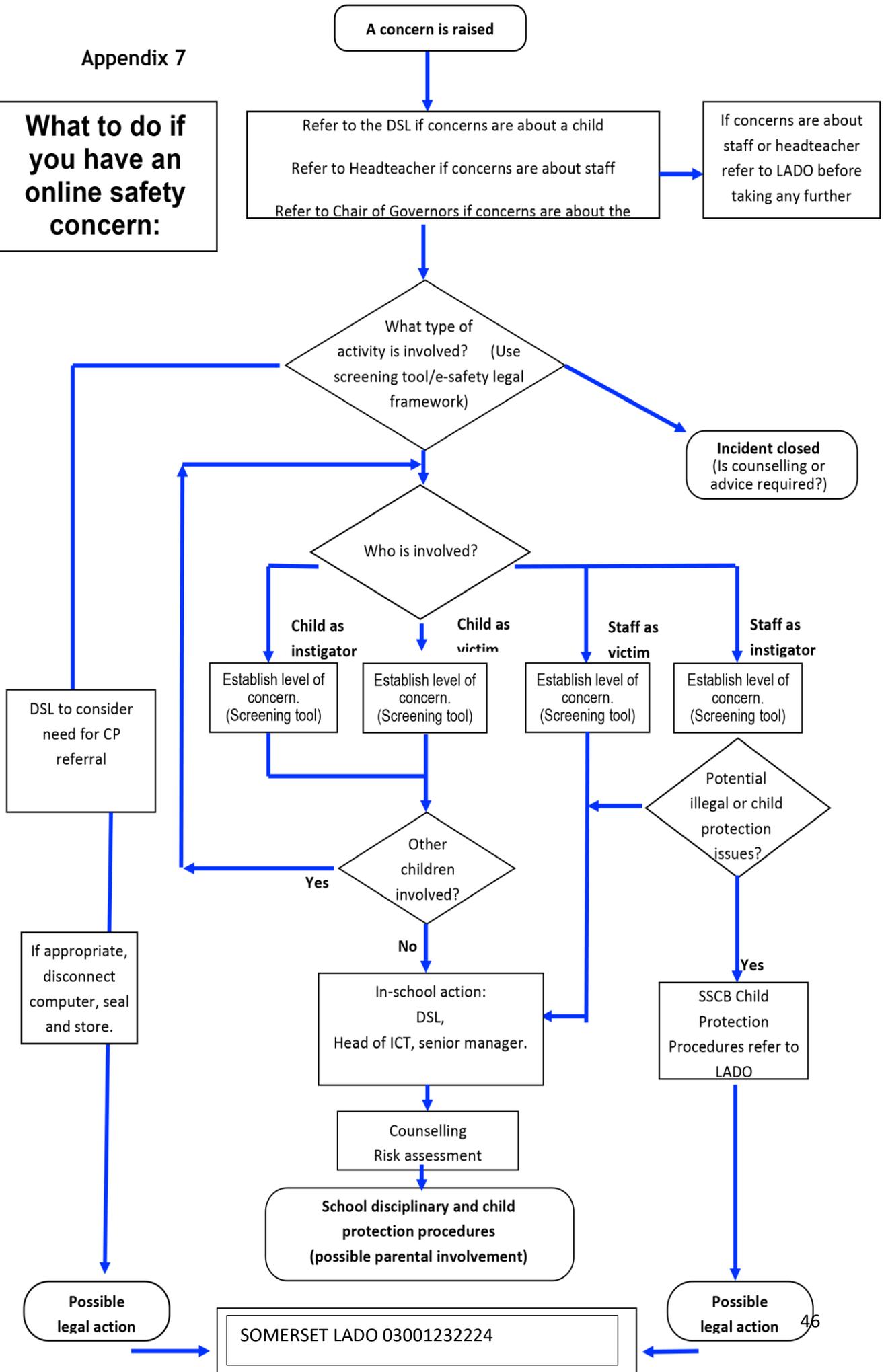
A young person who is involved in county lines activity might show some of these signs:

- persistently going missing from school or home, or being found out-of-area
- unexplained acquisition of money, clothes or mobile phones
- excessive receipt of texts or phone calls
- relationships with controlling, older individuals or gang association
- parental concerns, and leaving home or care without explanation
- suspicion of self-harm, physical assault or unexplained injuries
- significant decline in school performance and changes in emotional well-being

[Home Office County Lines Guidance](#)

Appendix 7

What to do if you have an online safety concern:



Appendix 9

Further advice on child protection is available from:

NSPCC: <http://www.nspcc.org.uk/>

Child line: <http://www.childline.org.uk/pages/home.aspx>

CEOP: <https://www.ceop.police.uk/safety-centre/>

Anti-Bullying Alliance: <http://anti-bullyingalliance.org.uk/>

Beat Bullying: <http://www.beatbullying.org/>

Child net International –making the internet a great and safe place for children. Includes resources for professionals and parents <http://www.childnet.com/>

Think u know (includes resources for professionals and parents)
<https://www.thinkuknow.co.uk/>

Safer Internet Centre <http://www.saferinternet.org.uk/>

Transgender <http://www.mermaidsuk.org.uk/>

<http://www.mermaidsuk.org.uk/assets/media/East%20Sussex%20schools%20transgender%20toolkit.pdf>

<https://uktrans.info/70---topic---overviews/328---resources---for---schools>

<https://www.intercomtrust.org.uk/item/55---schools---transgender---guidance---july---2015>

[Schools transgender toolkit](#)

[Intercom trust transgender guidance](#)

Appendix 10: Roles and Responsibilities

Role	Name	Responsibility
Principal	Abigail Atkins	Ultimately responsible for the safety and wellbeing of all pupils and staff
DSL	Abigail Atkins	Takes overall responsibility for the coordination of safeguarding across the school
Deputy DSL	Sarah-Jo Robinson	Supports the role of the DSL and stands in for the DSL when the DSL is absent
SENDCo	Lorna MacCormac	Raises concerns regarding children and young people with SEND and facilitates risk assessments for these children
Health and safety Representative	Shannon Coggins	Has general oversight of the day-to-day safety of the school grounds, including ensuring all regular maintenance checks are carried out
Educational Visits Coordinator	Shannon Coggins	Co-ordinates and has oversight all off-site visits, including risk assessments
Teachers	xx	Responsible for the day-to-day safety and wellbeing of all pupils and must raise concerns quickly and in a timely manner Must be mindful of the individual needs of children and their risk assessments
All other staff	xx	Responsible for the day-to-day safety and wellbeing of all pupils and must raise concerns quickly and in a timely manner
Parents	xx	To work in close partnership with the school to ensure safety at all times is top priority

Appendix 11: Key Somerset Contacts

For Early Help, Consultation and Enquiries please contact:

<http://professionalchoices.org.uk/eha/>

Telephone: **01803 355823**

Somerset Direct: <https://www.somerset.gov.uk/education-and-families/report-a-child-at-risk/>

Telephone: 0300 123 2224

Somerset LADO (Anthony Goble): <https://www.somerset.gov.uk/education-and-families/report-a-child-at-risk/>

Consultation line for DSLs and GPs: 0300 123 3078